

GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2009

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SENATE DRS75069-LN-76 (2/11)

Short Title: Medicaid Waiver/HIV AIDS Patient Elig.

(Public)

Sponsors: Senator Shaw.

Referred to:

A BILL TO BE ENTITLED

AN ACT TO DIRECT THE DEPARTMENT OF HEALTH AND HUMAN SERVICES,
DIVISION OF MEDICAL ASSISTANCE, TO APPLY FOR A MEDICAID WAIVER
THAT WOULD PROVIDE MEDICAID BENEFITS TO LOW-INCOME PERSONS
WITH HIV.

Whereas, low-income individuals living with HIV are unable to afford antiretroviral
drug therapies that would keep the individual healthy longer and thus able to remain in the
workforce longer; and

Whereas, low-income individuals living with HIV whose incomes exceed 133% of
the federal poverty level are ineligible for financial assistance under the Medicaid program; and

Whereas, individuals with HIV whose income exceeds 133% of the federal poverty
level must wait until they become disabled as a result of contracting the AIDS virus to obtain
Medicaid services; and

Whereas, health care services to treat AIDS are more expensive than antiretroviral
therapy for individuals with HIV; and

Whereas, current federal treatment guidelines indicate that an individual living with
HIV should begin antiretroviral therapy before becoming disabled; and

Whereas, other states have applied for or received a Medicaid waiver to provide
Medicaid services to low-income individuals with HIV; Now, therefore,
The General Assembly of North Carolina enacts:

SECTION 1. The Department of Health and Human Services, Division of Medical
Assistance, shall apply to the Centers for Medicare and Medicaid Services (CMS) for an 1115
waiver to permit individuals who test positive for HIV and have incomes at or below two
hundred percent (200%) of the federal poverty level to access Medicaid services. If approved,
the Department shall not implement the waiver except as authorized by an act of the General
Assembly appropriating funds for this purpose. The Department shall report on the status of
the waiver to the Senate Appropriations Committee on Health and Human Services, the House
of Representatives Appropriations Subcommittee on Health and Human Services, and the
Fiscal Research Division not later than October 1, 2009.

SECTION 2. This act is effective when it becomes law.

