

By: Representatives Holland,
Morris, Pierce, Fredericks,
Broomfield, Peranich, Flaggs,
Montgomery, Franks, Parker,
Hudson, Warren, Whittington,
Evans, Brown, Reynolds, Ellis

To: Public Health and Human
Services

HOUSE BILL NO. 11

1 AN ACT TO AMEND SECTIONS 43-1-1, 43-1-2, 43-1-3, 43-1-5 AND
2 43-1-6, MISSISSIPPI CODE OF 1972, WHICH CREATE THE DEPARTMENT OF
3 HUMAN SERVICES, PRESCRIBE ITS DUTIES AND RESPONSIBILITIES, PROVIDE
4 FOR THE APPOINTMENT OF AN EXECUTIVE DIRECTOR OF HUMAN SERVICES,
5 PROVIDE FOR THE AUTHORITY AND RESPONSIBILITIES OF THE EXECUTIVE
6 DIRECTOR, PROVIDE FOR A JOINT OVERSIGHT COMMITTEE OF THE
7 DEPARTMENT, PROVIDE THE STRUCTURE OF THE DEPARTMENT AND TRANSFER
8 THE PROGRAMS WITHIN THE DIVISION OF FEDERAL-STATE PROGRAMS TO THE
9 DEPARTMENT, TO EXTEND THE DATE OF THE REPEALERS ON THOSE SECTIONS;
10 TO REINSTATE MEDICAID ELIGIBILITY FOR THE POVERTY LEVEL AGED OR
11 DISABLED GROUP, AND PROVIDE THAT ELIGIBILITY FOR THAT GROUP SHALL
12 BE DETERMINED BY THE DEPARTMENT OF HUMAN SERVICES; AND FOR RELATED
13 PURPOSES.

14 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

15 **SECTION 1.** Section 43-1-1, Mississippi Code of 1972, is
16 amended as follows:

17 43-1-1. (1) The Department of Human Services shall be the
18 State Department of Public Welfare and shall retain all powers and
19 duties as granted to the State Department of Public Welfare.
20 Wherever the term "State Department of Public Welfare" or "State
21 Board of Public Welfare" appears in any law, the same shall mean
22 the Department of Human Services. The Executive Director of the
23 Department of Human Services may assign to the appropriate offices
24 such powers and duties deemed appropriate to carry out the lawful
25 functions of the department.

26 (2) This section shall stand repealed on July 1, 2005.

27 **SECTION 2.** Section 43-1-2, Mississippi Code of 1972, is
28 amended as follows:

29 43-1-2. (1) There is created the Mississippi Department of
30 Human Services, whose offices shall be located in Jackson,
31 Mississippi, and which shall be under the policy direction of the
32 Governor.

33 (2) The chief administrative officer of the department shall
34 be the Executive Director of Human Services. The Governor shall
35 appoint the Executive Director of Human Services with the advice
36 and consent of the Senate, and he or she shall serve at the will
37 and pleasure of the Governor, and until his or her successor is
38 appointed and qualified. The Executive Director of Human Services
39 shall possess the following qualifications:

40 (a) A bachelor's degree from an accredited institution
41 of higher learning and ten (10) years' experience in management,
42 public administration, finance or accounting; or

43 (b) A master's or doctoral degree from an accredited
44 institution of higher learning and five (5) years' experience in
45 management, public administration, finance or accounting.

46 Those qualifications shall be certified by the State
47 Personnel Board.

48 (3) There shall be a Joint Oversight Committee of the
49 Department of Human Services composed of the respective chairmen
50 of the Senate Public Health and Welfare Committee, the Senate
51 Appropriations Committee, the House Public Health and Human
52 Services Committee and the House Appropriations Committee, two (2)
53 members of the Senate appointed by the Lieutenant Governor to
54 serve at the will and pleasure of the Lieutenant Governor, and two
55 (2) members of the House of Representatives appointed by the
56 Speaker of the House to serve at the will and pleasure of the
57 Speaker. The chairmanship of the committee shall alternate for
58 twelve-month periods between the Senate members and the House
59 members, with the Chairman of the Senate Public Health and Welfare
60 Committee serving as the first chairman. The committee shall meet
61 once each month, or upon the call of the chairman at such times as
62 he or she deems necessary or advisable, and may make
63 recommendations to the Legislature pertaining to any matter within
64 the jurisdiction of the Mississippi Department of Human Services.
65 The appointing authorities may designate an alternate member from

66 their respective houses to serve when the regular designee is
67 unable to attend the meetings of the oversight committee. For
68 attending meetings of the oversight committee, the legislators
69 shall receive per diem and expenses, which shall be paid from the
70 contingent expense funds of their respective houses in the same
71 amounts as provided for committee meetings when the Legislature is
72 not in session; however, no per diem and expenses for attending
73 meetings of the committee will be paid while the Legislature is in
74 session. No per diem and expenses will be paid except for
75 attending meetings of the oversight committee without prior
76 approval of the proper committee in their respective houses.

77 (4) The * * * Department of Human Services shall provide the
78 services authorized by law to every individual determined to be
79 eligible therefor, and in carrying out the purposes of the
80 department, the executive director is authorized:

81 (a) To formulate the policy of the department regarding
82 human services within the jurisdiction of the department;

83 (b) To adopt, modify, repeal and promulgate, after due
84 notice and hearing, and where not otherwise prohibited by federal
85 or state law, to make exceptions to and grant exemptions and
86 variances from, and to enforce rules and regulations implementing
87 or effectuating the powers and duties of the department under any
88 and all statutes within the department's jurisdiction, all of
89 which shall be binding upon the county departments of human
90 services;

91 (c) To apply for, receive and expend any federal or
92 state funds or contributions, gifts, devises, bequests or funds
93 from any other source;

94 (d) Except as limited by Section 43-1-3, to enter into
95 and execute contracts, grants and cooperative agreements with any
96 federal or state agency or subdivision thereof, or any public or
97 private institution located inside or outside the State of

98 Mississippi, or any person, corporation or association in
99 connection with carrying out the programs of the department; and
100 (e) To discharge such other duties, responsibilities
101 and powers as are necessary to implement the programs of the
102 department.

103 (5) The executive director shall establish the
104 organizational structure of the Mississippi Department of Human
105 Services which shall include the creation of any units necessary
106 to implement the duties assigned to the department and consistent
107 with specific requirements of law, including, but not limited to:

108 (a) Office of Family and Children's Services;

109 (b) Office of Youth Services;

110 (c) Office of Economic Assistance;

111 (d) Office of Child Support Enforcement.

112 (6) The Executive Director of Human Services shall appoint
113 heads of offices, bureaus and divisions, as defined in Section
114 7-17-11, who shall serve at the pleasure of the executive
115 director. The salary and compensation of the office, bureau and
116 division heads shall be subject to the rules and regulations
117 adopted and promulgated by the State Personnel Board as created
118 under Section 25-9-101 et seq. The executive director shall have
119 the authority to organize offices as deemed appropriate to carry
120 out the responsibilities of the department. The organization
121 charts of the department shall be presented annually with the
122 budget request of the Governor for review by the Legislature.

123 (7) This section shall stand repealed on July 1, 2005.

124 **SECTION 3.** Section 43-1-3, Mississippi Code of 1972, is
125 amended as follows:

126 43-1-3. Notwithstanding the authority granted under
127 subsection (4)(d) of Section 43-1-2, the Department of Human
128 Services or the Executive Director of Human Services shall not be
129 authorized to delegate, privatize or otherwise enter into a
130 contract with a private entity for the operation of any office,

131 bureau or division of the department, as defined in Section
132 7-17-11, without specific authority to do so by general act of the
133 Legislature. However, nothing in this section shall be construed
134 to invalidate (i) any contract of the department that is in place
135 and operational before January 1, 1994; or (ii) the continued
136 renewal of any such contract with the same entity upon the
137 expiration of the contract; or (iii) the execution of a contract
138 with another legal entity as a replacement of any such contract
139 that is expiring, provided that the replacement contract is
140 substantially the same as the expiring contract. Notwithstanding
141 any other provision of this section, the department shall be
142 authorized to continue the operation of its child support
143 collection program with a private entity on a pilot program basis
144 in Hinds and Warren Counties in Mississippi, and the department
145 and the private entity shall specifically be prohibited from
146 expanding such pilot program to any counties other than Hinds and
147 Warren Counties without specific authority to do so by amendment
148 to this section by general act of the Legislature. Before
149 December 15, 1994, the department shall provide a detailed report
150 to the Joint Oversight Committee established by Section 43-1-2 and
151 to the Legislature that describes the results of the pilot program
152 for the privatization of the department's child support collection
153 program as of December 1, 1994, including an evaluation of whether
154 there has been substantial compliance with the performance
155 standards specified in the contract for the private entity in
156 conducting the pilot program.

157 This section shall stand repealed on July 1, 2005.

158 **SECTION 4.** Section 43-1-5, Mississippi Code of 1972, is
159 amended as follows:

160 43-1-5. It shall be the duty of the Department of Human
161 Services to:

162 (1) Establish and maintain programs not inconsistent with
163 the terms of this chapter and the rules, regulations and policies

164 of the * * * Department of Human Services, and publish the rules
165 and regulations of the department pertaining to those programs.

166 (2) Make such reports in such form and containing such
167 information as the federal government may, from time to time,
168 require, and comply with such provisions as the federal government
169 may, from time to time, find necessary to assure the correctness
170 and verification of such reports.

171 (3) Within ninety (90) days after the end of each fiscal
172 year, and at each regular session of the Legislature, make and
173 publish one (1) report to the Governor and to the Legislature,
174 showing for the period of time covered, in each county and for the
175 state as a whole:

176 (a) The total number of recipients;

177 (b) The total amount paid to them in cash;

178 (c) The maximum and the minimum amount paid to any
179 recipients in any one (1) month;

180 (d) The total number of applications;

181 (e) The number granted;

182 (f) The number denied;

183 (g) The number cancelled;

184 (h) The amount expended for administration of the
185 provisions of this chapter;

186 (i) The amount of money received from the federal
187 government, if any;

188 (j) The amount of money received from recipients of
189 assistance and from their estates and the disposition of same;

190 (k) Such other information and recommendations as the
191 Governor may require or the department * * * deems advisable;

192 (l) The number of state-owned automobiles purchased and
193 operated during the year by the department, the number purchased
194 and operated out of funds appropriated by the Legislature, the
195 number purchased and operated out of any other public funds, the
196 miles traveled per automobile, the total miles traveled, the

197 average cost per mile and depreciation estimate on each
198 automobile;

199 (m) The cost per mile and total number of miles
200 traveled by department employees in privately-owned automobiles,
201 for which reimbursement is made out of state funds;

202 (n) Each association, convention or meeting attended by
203 any department employees, the purposes thereof, the names of the
204 employees attending and the total cost to the state of the
205 convention, association or meeting;

206 (o) How the money appropriated to the institutions
207 under the jurisdiction of the department has been expended during
208 the preceding year, beginning and ending with the fiscal year of
209 each institution, exhibiting the salaries paid to officers and
210 employees of the institutions, and each and every item of receipt
211 and expenditure;

212 (p) The activities of each division within the
213 Department of Human Services and recommendations for improvement
214 of the services to be performed by each division;

215 (q) In order of authority, the twenty (20) highest paid
216 employees in the department receiving an annual salary in excess
217 of Forty Thousand Dollars (\$40,000.00), by P.I.N. number, job
218 title, job description and annual salary.

219 Each report shall be balanced and shall begin with the
220 balance at the end of the preceding fiscal year, and if any
221 property belonging to the state or the institution is used for
222 profit, the report shall show the expenses incurred in managing
223 the property and the amount received from the same. Those reports
224 shall also show a summary of the gross receipts and gross
225 disbursements for each fiscal year and shall show the money on
226 hand at the beginning of the fiscal period of each division and
227 institution of the department.

228 This section shall stand repealed on July 1, 2005.

229 **SECTION 5.** Section 43-1-6, Mississippi Code of 1972, is
230 amended as follows:

231 43-1-6. The following programs within the Division of
232 Federal-State Programs, Office of the Governor, shall be
233 transferred to the * * * Department of Human Services:

- 234 (a) Office of Energy and Community Services;
235 (b) Juvenile Justice Advisory Committee; and
236 (c) Mississippi Council on Aging.

237 All authority to implement those programs shall be vested in
238 the State Department of Human Services.

239 This section shall stand repealed on July 1, 2005.

240 **SECTION 6.** Section 43-13-115, Mississippi Code of 1972, is
241 amended as follows:

242 43-13-115. Recipients of Medicaid shall be the following
243 persons only:

- 244 (1) Those who are qualified for public assistance
245 grants under provisions of Title IV-A and E of the federal Social
246 Security Act, as amended, including those statutorily deemed to be
247 IV-A and low income families and children under Section 1931 of
248 the federal Social Security Act. For the purposes of this
249 paragraph (1) and paragraphs (8), (17) and (18) of this section,
250 any reference to Title IV-A or to Part A of Title IV of the
251 federal Social Security Act, as amended, or the state plan under
252 Title IV-A or Part A of Title IV, shall be considered as a
253 reference to Title IV-A of the federal Social Security Act, as
254 amended, and the state plan under Title IV-A, including the income
255 and resource standards and methodologies under Title IV-A and the
256 state plan, as they existed on July 16, 1996. The Department of
257 Human Services shall determine Medicaid eligibility for children
258 receiving public assistance grants under Title IV-E. The division
259 shall determine eligibility for low income families under Section
260 1931 of the federal Social Security Act and shall redetermine
261 eligibility for those continuing under Title IV-A grants.

262 (2) Those qualified for Supplemental Security Income
263 (SSI) benefits under Title XVI of the federal Social Security Act,
264 as amended, and those who are deemed SSI eligible as contained in
265 federal statute. The eligibility of individuals covered in this
266 paragraph shall be determined by the Social Security
267 Administration and certified to the Division of Medicaid.

268 (3) Qualified pregnant women who would be eligible for
269 Medicaid as a low income family member under Section 1931 of the
270 federal Social Security Act if her child were born. The
271 eligibility of the individuals covered under this paragraph shall
272 be determined by the division.

273 (4) [Deleted]

274 (5) A child born on or after October 1, 1984, to a
275 woman eligible for and receiving Medicaid under the state plan on
276 the date of the child's birth shall be deemed to have applied for
277 Medicaid and to have been found eligible for Medicaid under the
278 plan on the date of that birth, and will remain eligible for
279 Medicaid for a period of one (1) year so long as the child is a
280 member of the woman's household and the woman remains eligible for
281 Medicaid or would be eligible for Medicaid if pregnant. The
282 eligibility of individuals covered in this paragraph shall be
283 determined by the Division of Medicaid.

284 (6) Children certified by the State Department of Human
285 Services to the Division of Medicaid of whom the state and county
286 departments of human services have custody and financial
287 responsibility, and children who are in adoptions subsidized in
288 full or part by the Department of Human Services, including
289 special needs children in non-Title IV-E adoption assistance, who
290 are approvable under Title XIX of the Medicaid program. The
291 eligibility of the children covered under this paragraph shall be
292 determined by the State Department of Human Services.

293 (7) (a) Persons certified by the Division of Medicaid
294 who are patients in a medical facility (nursing home, hospital,

295 tuberculosis sanatorium or institution for treatment of mental
296 diseases), and who, except for the fact that they are patients in
297 that medical facility, would qualify for grants under Title IV,
298 Supplementary Security Income (SSI) benefits under Title XVI or
299 state supplements, and those aged, blind and disabled persons who
300 would not be eligible for Supplemental Security Income (SSI)
301 benefits under Title XVI or state supplements if they were not
302 institutionalized in a medical facility but whose income is below
303 the maximum standard set by the Division of Medicaid, which
304 standard shall not exceed that prescribed by federal regulation;

305 (b) Individuals who have elected to receive
306 hospice care benefits and who are eligible using the same criteria
307 and special income limits as those in institutions as described in
308 subparagraph (a) of this paragraph (7).

309 (8) Children under eighteen (18) years of age and
310 pregnant women (including those in intact families) who meet the
311 financial standards of the state plan approved under Title IV-A of
312 the federal Social Security Act, as amended. The eligibility of
313 children covered under this paragraph shall be determined by the
314 Division of Medicaid.

315 (9) Individuals who are:

316 (a) Children born after September 30, 1983, who
317 have not attained the age of nineteen (19), with family income
318 that does not exceed one hundred percent (100%) of the nonfarm
319 official poverty level;

320 (b) Pregnant women, infants and children who have
321 not attained the age of six (6), with family income that does not
322 exceed one hundred thirty-three percent (133%) of the federal
323 poverty level; and

324 (c) Pregnant women and infants who have not
325 attained the age of one (1), with family income that does not
326 exceed one hundred eighty-five percent (185%) of the federal
327 poverty level.

328 The eligibility of individuals covered in (a), (b) and (c) of
329 this paragraph shall be determined by the division.

330 (10) Certain disabled children age eighteen (18) or
331 under who are living at home, who would be eligible, if in a
332 medical institution, for SSI or a state supplemental payment under
333 Title XVI of the federal Social Security Act, as amended, and
334 therefore for Medicaid under the plan, and for whom the state has
335 made a determination as required under Section 1902(e)(3)(b) of
336 the federal Social Security Act, as amended. The eligibility of
337 individuals under this paragraph shall be determined by the
338 Division of Medicaid.

339 (11) Individuals who are sixty-five (65) years of age
340 or older or are disabled as determined under Section 1614(a)(3) of
341 the federal Social Security Act, as amended, and whose income does
342 not exceed one hundred thirty-five percent (135%) of the nonfarm
343 official poverty level as defined by the Office of Management and
344 Budget and revised annually, and whose resources do not exceed
345 those established by the Division of Medicaid. The eligibility of
346 individuals covered under this paragraph shall be determined by
347 the Department of Human Services with the cooperation and
348 assistance of the Division of Medicaid.

349 (12) Individuals who are qualified Medicare
350 beneficiaries (QMB) entitled to Part A Medicare as defined under
351 Section 301, Public Law 100-360, known as the Medicare
352 Catastrophic Coverage Act of 1988, and whose income does not
353 exceed one hundred percent (100%) of the nonfarm official poverty
354 level as defined by the Office of Management and Budget and
355 revised annually.

356 The eligibility of individuals covered under this paragraph
357 shall be determined by the Division of Medicaid, and those
358 individuals determined eligible shall receive Medicare
359 cost-sharing expenses only as more fully defined by the Medicare

360 Catastrophic Coverage Act of 1988 and the Balanced Budget Act of
361 1997.

362 (13) (a) Individuals who are entitled to Medicare Part
363 A as defined in Section 4501 of the Omnibus Budget Reconciliation
364 Act of 1990, and whose income does not exceed one hundred twenty
365 percent (120%) of the nonfarm official poverty level as defined by
366 the Office of Management and Budget and revised annually.
367 Eligibility for Medicaid benefits is limited to full payment of
368 Medicare Part B premiums.

369 (b) Individuals entitled to Part A of Medicare, with
370 income above one hundred twenty percent (120%), but less than one
371 hundred thirty-five percent (135%) of the federal poverty level,
372 and not otherwise eligible for Medicaid Eligibility for Medicaid
373 benefits is limited to full payment of Medicare Part B premiums.
374 The number of eligible individuals is limited by the availability
375 of the federal capped allocation at one hundred percent (100%) of
376 federal matching funds, as more fully defined in the Balanced
377 Budget Act of 1997.

378 The eligibility of individuals covered under this paragraph
379 shall be determined by the Division of Medicaid.

380 (14) [Deleted]

381 (15) Disabled workers who are eligible to enroll in
382 Part A Medicare as required by Public Law 101-239, known as the
383 Omnibus Budget Reconciliation Act of 1989, and whose income does
384 not exceed two hundred percent (200%) of the federal poverty level
385 as determined in accordance with the Supplemental Security Income
386 (SSI) program. The eligibility of individuals covered under this
387 paragraph shall be determined by the Division of Medicaid and
388 those individuals shall be entitled to buy-in coverage of Medicare
389 Part A premiums only under the provisions of this paragraph (15).

390 (16) In accordance with the terms and conditions of
391 approved Title XIX waiver from the United States Department of
392 Health and Human Services, persons provided home- and

393 community-based services who are physically disabled and certified
394 by the Division of Medicaid as eligible due to applying the income
395 and deeming requirements as if they were institutionalized.

396 (17) In accordance with the terms of the federal
397 Personal Responsibility and Work Opportunity Reconciliation Act of
398 1996 (Public Law 104-193), persons who become ineligible for
399 assistance under Title IV-A of the federal Social Security Act, as
400 amended, because of increased income from or hours of employment
401 of the caretaker relative or because of the expiration of the
402 applicable earned income disregards, who were eligible for
403 Medicaid for at least three (3) of the six (6) months preceding
404 the month in which the ineligibility begins, shall be eligible for
405 Medicaid for up to twelve (12) months. The eligibility of the
406 individuals covered under this paragraph shall be determined by
407 the division.

408 (18) Persons who become ineligible for assistance under
409 Title IV-A of the federal Social Security Act, as amended, as a
410 result, in whole or in part, of the collection or increased
411 collection of child or spousal support under Title IV-D of the
412 federal Social Security Act, as amended, who were eligible for
413 Medicaid for at least three (3) of the six (6) months immediately
414 preceding the month in which the ineligibility begins, shall be
415 eligible for Medicaid for an additional four (4) months beginning
416 with the month in which the ineligibility begins. The eligibility
417 of the individuals covered under this paragraph shall be
418 determined by the division.

419 (19) Disabled workers, whose incomes are above the
420 Medicaid eligibility limits, but below two hundred fifty percent
421 (250%) of the federal poverty level, shall be allowed to purchase
422 Medicaid coverage on a sliding fee scale developed by the Division
423 of Medicaid.

424 (20) Medicaid eligible children under age eighteen (18)
425 shall remain eligible for Medicaid benefits until the end of a

426 period of twelve (12) months following an eligibility
427 determination, or until such time that the individual exceeds age
428 eighteen (18).

429 (21) Women of childbearing age whose family income does
430 not exceed one hundred eighty-five percent (185%) of the federal
431 poverty level. The eligibility of individuals covered under this
432 paragraph (21) shall be determined by the Division of Medicaid,
433 and those individuals determined eligible shall only receive
434 family planning services covered under Section 43-13-117(13) and
435 not any other services covered under Medicaid. However, any
436 individual eligible under this paragraph (21) who is also eligible
437 under any other provision of this section shall receive the
438 benefits to which he or she is entitled under that other
439 provision, in addition to family planning services covered under
440 Section 43-13-117(13).

441 The Division of Medicaid shall apply to the United States
442 Secretary of Health and Human Services for a federal waiver of the
443 applicable provisions of Title XIX of the federal Social Security
444 Act, as amended, and any other applicable provisions of federal
445 law as necessary to allow for the implementation of this paragraph
446 (21). The provisions of this paragraph (21) shall be implemented
447 from and after the date that the Division of Medicaid receives the
448 federal waiver.

449 (22) Persons who are workers with a potentially severe
450 disability, as determined by the division, shall be allowed to
451 purchase Medicaid coverage. The term "worker with a potentially
452 severe disability" means a person who is at least sixteen (16)
453 years of age but under sixty-five (65) years of age, who has a
454 physical or mental impairment that is reasonably expected to cause
455 the person to become blind or disabled as defined under Section
456 1614(a) of the federal Social Security Act, as amended, if the
457 person does not receive items and services provided under
458 Medicaid.

459 The eligibility of persons under this paragraph (22) shall be
460 conducted as a demonstration project that is consistent with
461 Section 204 of the Ticket to Work and Work Incentives Improvement
462 Act of 1999, Public Law 106-170, for a certain number of persons
463 as specified by the division. The eligibility of individuals
464 covered under this paragraph (22) shall be determined by the
465 Division of Medicaid.

466 (23) Children certified by the Mississippi Department
467 of Human Services for whom the state and county departments of
468 human services have custody and financial responsibility who are
469 in foster care on their eighteenth birthday as reported by the
470 Mississippi Department of Human Services shall be certified
471 Medicaid eligible by the Division of Medicaid until their
472 twenty-first birthday.

473 (24) Individuals who have not attained age sixty-five
474 (65), are not otherwise covered by creditable coverage as defined
475 in the Public Health Services Act, and have been screened for
476 breast and cervical cancer under the Centers for Disease Control
477 and Prevention Breast and Cervical Cancer Early Detection Program
478 established under Title XV of the Public Health Service Act in
479 accordance with the requirements of that act and who need
480 treatment for breast or cervical cancer. Eligibility of
481 individuals under this paragraph (24) shall be determined by the
482 Division of Medicaid.

483 * * *

484 The division shall redetermine eligibility for all categories
485 of recipients described in each paragraph of this section not less
486 frequently than required by federal law.

487 **SECTION 7.** This act shall take effect and be in force from
488 and after July 1, 2004.