

**ATTACHMENT A1**  
**CHIPRA AUTHORIZING LEGISLATION**

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**ENABLING LEGISLATION FOR SCHIP**

**Subtitle J—State Children's Health  
Insurance Program**

**CHAPTER 1—STATE CHILDREN'S HEALTH INSURANCE  
PROGRAM**

**SEC. 4901. ESTABLISHMENT OF PROGRAM.**

(a) **ESTABLISHMENT.**—The Social Security Act is amended by adding at the end the following new title:

**"TITLE XXI—STATE CHILDREN'S HEALTH INSURANCE  
PROGRAM**

42 USC 1397aa.

**"SEC. 2101. PURPOSE; STATE CHILD HEALTH PLANS.**

"(a) **PURPOSE.**—The purpose of this title is to provide funds to States to enable them to initiate and expand the provision of child health assistance to uninsured, low-income children in an effective and efficient manner that is coordinated with other sources of health benefits coverage for children. Such assistance shall be provided primarily for obtaining health benefits coverage through—

"(1) obtaining coverage that meets the requirements of section 2103, or

"(2) providing benefits under the State's medicaid plan under title XIX,  
or a combination of both.

"(b) **STATE CHILD HEALTH PLAN REQUIRED.**—A State is not eligible for payment under section 2105 unless the State has submitted to the Secretary under section 2106 a plan that—

"(1) sets forth how the State intends to use the funds provided under this title to provide child health assistance to needy children consistent with the provisions of this title, and

"(2) has been approved under section 2106.

"(c) **STATE ENTITLEMENT.**—This title constitutes budget authority in advance of appropriations Acts and represents the obligation of the Federal Government to provide for the payment to States of amounts provided under section 2104.

"(d) **EFFECTIVE DATE.**—No State is eligible for payments under section 2105 for child health assistance for coverage provided for periods beginning before October 1, 1997.

# ENABLING LEGISLATION FOR THE SCHIP EVALUATION

H.R.3426

## Medicare, Medicaid, and SCHIP Balanced Budget Refinement Act of 1999 (Introduced in the House)

### SEC. 703. IMPROVED DATA COLLECTION AND EVALUATIONS OF THE STATE CHILDREN'S HEALTH INSURANCE PROGRAM.

(b) **FEDERAL EVALUATION OF STATE CHILDREN'S HEALTH INSURANCE PROGRAMS-** Section 2108 (42 U.S.C. 1397hh) is amended by adding at the end the following:

(c) **FEDERAL EVALUATION-**

(1) **IN GENERAL-** The Secretary, directly or through contracts or interagency agreements, shall conduct an independent evaluation of 10 States with approved child health plans.

(2) **SELECTION OF STATES-** In selecting States for the evaluation conducted under this subsection, the Secretary shall choose 10 States that utilize diverse approaches to providing child health assistance, represent various geographic areas (including a mix of rural and urban areas), and contain a significant portion of uncovered children.

(3) **MATTERS INCLUDED-** In addition to the elements described in subsection (b)(1), the evaluation conducted under this subsection shall include each of the following:

(A) Surveys of the target population (enrollees, disenrollees, and individuals eligible for but not enrolled in the program under this title).

(B) Evaluation of effective and ineffective outreach and enrollment practices with respect to children (for both the program under this title and the Medicaid program under title XIX), and identification of enrollment barriers and key elements of effective outreach and enrollment practices, including practices that have successfully enrolled hard-to-reach populations such as children who are eligible for medical assistance under title XIX but have not been enrolled previously in the Medicaid program under that title.

(C) Evaluation of the extent to which State Medicaid eligibility practices and procedures under the Medicaid program under title XIX are a barrier to the

enrollment of children under that program, and the extent to which coordination (or lack of coordination) between that program and the program under this title affects the enrollment of children under both programs.

(D) An assessment of the effect of cost-sharing on utilization, enrollment, and coverage retention.

(E) Evaluation of disenrollment or other retention issues, such as switching to private coverage, failure to pay premiums, or barriers in the recertification process.

(4) **SUBMISSION TO CONGRESS-** Not later than December 31, 2001, the Secretary shall submit to Congress the results of the evaluation conducted under this subsection.

(5) **FUNDING-** Out of any money in the Treasury of the United States not otherwise appropriated, there are appropriated \$10,000,000 for fiscal year 2000 for the purpose of conducting the evaluation authorized under this subsection. Amounts appropriated under this paragraph shall remain available for expenditure through fiscal year 2002.

**ATTACHMENT A2**  
**CHIPRA AUTHORIZING LEGISLATION**

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“(F) Continue making the adjustments described in the last sentence of paragraph (1) with respect to expansion of the sample size used in State sampling units, the number of sampling units in a State, and using an appropriate verification element.

“(3) AUTHORITY FOR THE SECRETARY OF HEALTH AND HUMAN SERVICES TO TRANSITION TO THE USE OF ALL, OR SOME COMBINATION OF, ACS ESTIMATES UPON RECOMMENDATION OF THE SECRETARY OF COMMERCE.—If, on the basis of the assessment required under paragraph (2)(D), the Secretary of Commerce recommends to the Secretary of Health and Human Services that American Community Survey estimates should be used in lieu of, or in some combination with, Current Population Survey estimates for the purposes described in paragraph (2)(B), the Secretary of Health and Human Services, in consultation with the States, may provide for a period during which the Secretary may transition from carrying out such purposes through the use of Current Population Survey estimates to the use of American Community Survey estimates (in lieu of, or in combination with the Current Population Survey estimates, as recommended), provided that any such transition is implemented in a manner that is designed to avoid adverse impacts upon States with approved State child health plans under this title.”.

**SEC. 603. UPDATED FEDERAL EVALUATION OF CHIP.**

Section 2108(c) (42 U.S.C. 1397hh(c)) is amended by striking paragraph (5) and inserting the following:

“(5) SUBSEQUENT EVALUATION USING UPDATED INFORMATION.—

“(A) IN GENERAL.—The Secretary, directly or through contracts or interagency agreements, shall conduct an independent subsequent evaluation of 10 States with approved child health plans.

Contracts.

“(B) SELECTION OF STATES AND MATTERS INCLUDED.—Paragraphs (2) and (3) shall apply to such subsequent evaluation in the same manner as such provisions apply to the evaluation conducted under paragraph (1).

Applicability.

“(C) SUBMISSION TO CONGRESS.—Not later than December 31, 2011, the Secretary shall submit to Congress the results of the evaluation conducted under this paragraph.

“(D) FUNDING.—Out of any money in the Treasury of the United States not otherwise appropriated, there are appropriated \$10,000,000 for fiscal year 2010 for the purpose of conducting the evaluation authorized under this paragraph. Amounts appropriated under this subparagraph shall remain available for expenditure through fiscal year 2012.”.

**SEC. 604. ACCESS TO RECORDS FOR IG AND GAO AUDITS AND EVALUATIONS.**

Section 2108(d) (42 U.S.C. 1397hh(d)) is amended to read as follows:

“(d) ACCESS TO RECORDS FOR IG AND GAO AUDITS AND EVALUATIONS.—For the purpose of evaluating and auditing the program established under this title, or title XIX, the Secretary, the Office of Inspector General, and the Comptroller General shall have access



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