

109TH CONGRESS  
1ST SESSION

# H. R. 3050

To amend title XXI of the Social Security Act to provide grants to promote innovative outreach and enrollment under the Medicaid and State children's health insurance programs, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

JUNE 23, 2005

Mrs. JOHNSON of Connecticut (for herself, Mr. TOWNS, Mrs. BONO, Mr. KOLBE, Mr. SIMMONS, and Mr. SHAYS) introduced the following bill; which was referred to the Committee on Energy and Commerce

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## A BILL

To amend title XXI of the Social Security Act to provide grants to promote innovative outreach and enrollment under the Medicaid and State children's health insurance programs, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the "Covering Kids Act of  
5 2005".

1 **SEC. 2. GRANTS TO PROMOTE INNOVATIVE OUTREACH AND**  
2 **ENROLLMENT UNDER MEDICAID AND SCHIP.**

3 (a) GRANTS FOR EXPANDED OUTREACH ACTIVI-  
4 TIES.—Title XXI of the Social Security Act (42 U.S.C.  
5 1397aa et seq.) is amended by adding at the end the fol-  
6 lowing:

7 **“SEC. 2111. EXPANDED OUTREACH ACTIVITIES.**

8 “(a) GRANTS TO CONDUCT INNOVATIVE OUTREACH  
9 AND ENROLLMENT EFFORTS.—

10 “(1) IN GENERAL.—The Secretary shall award  
11 grants to eligible entities to—

12 “(A) conduct innovative outreach and en-  
13 rollment efforts that are designed to increase  
14 the enrollment and participation of eligible chil-  
15 dren under this title and title XIX; and

16 “(B) promote understanding of the impor-  
17 tance of health insurance coverage for prenatal  
18 care and children.

19 “(2) PERFORMANCE BONUSES.—The Secretary  
20 may reserve a portion of the funds appropriated  
21 under subsection (g) for a fiscal year for the purpose  
22 of awarding performance bonuses during the suc-  
23 ceeding fiscal year to eligible entities that meet en-  
24 rollment goals or other criteria established by the  
25 Secretary.

26 “(b) PRIORITY FOR AWARD OF GRANTS.—

1           “(1) IN GENERAL.—In making grants under  
2 subsection (a)(1), the Secretary shall give priority  
3 to—

4                   “(A) eligible entities that propose to target  
5 geographic areas with high rates of—

6                           “(i) eligible but unenrolled children,  
7 including such children who reside in rural  
8 areas; or

9                           “(ii) racial and ethnic minorities and  
10 health disparity populations, including  
11 those proposals that address cultural and  
12 linguistic barriers to enrollment; and

13                   “(B) eligible entities that plan to engage in  
14 outreach efforts with respect to individuals de-  
15 scribed in subparagraph (A) and that are—

16                           “(i) Federal health safety net organi-  
17 zations; or

18                           “(ii) faith-based organizations or con-  
19 sortia.

20           “(2) 10 PERCENT SET ASIDE FOR OUTREACH  
21 TO INDIAN CHILDREN.—An amount equal to 10 per-  
22 cent of the funds appropriated under subsection (g)  
23 for a fiscal year shall be used by the Secretary to  
24 award grants to Indian Health Service providers and  
25 urban Indian organizations receiving funds under

1 title V of the Indian Health Care Improvement Act  
2 (25 U.S.C. 1651 et seq.) for outreach to, and enroll-  
3 ment of, children who are Indians.

4 “(c) APPLICATION.—An eligible entity that desires to  
5 receive a grant under subsection (a)(1) shall submit an  
6 application to the Secretary in such form and manner, and  
7 containing such information, as the Secretary may decide.  
8 Such application shall include—

9 “(1) quality and outcomes performance meas-  
10 ures to evaluate the effectiveness of activities funded  
11 by a grant awarded under this section to ensure that  
12 the activities are meeting their goals; and

13 “(2) an assurance that the entity shall—

14 “(A) conduct an assessment of the effec-  
15 tiveness of such activities against such perform-  
16 ance measures; and

17 “(B) cooperate with the collection and re-  
18 porting of enrollment data and other informa-  
19 tion determined as a result of conducting such  
20 assessments to the Secretary, in such form and  
21 manner as the Secretary shall require.

22 “(d) DISSEMINATION OF ENROLLMENT DATA AND  
23 INFORMATION DETERMINED FROM EFFECTIVENESS AS-  
24 SESSMENTS; ANNUAL REPORT.—The Secretary shall—

1           “(1) disseminate to eligible entities and make  
2 publicly available the enrollment data and informa-  
3 tion collected and reported in accordance with sub-  
4 section (c)(2)(B); and

5           “(2) submit an annual report to Congress on  
6 the outreach activities funded by grants awarded  
7 under this section.

8           “(e) SUPPLEMENT, NOT SUPPLANT.—Federal funds  
9 awarded under this section shall be used to supplement,  
10 not supplant, non-Federal funds that are otherwise avail-  
11 able for activities funded under this section.

12          “(f) DEFINITIONS.—In this section:

13           “(1) ELIGIBLE ENTITY.—The term ‘eligible en-  
14 tity’ means any of the following:

15           “(A) A State or local government.

16           “(B) A Federal health safety net organiza-  
17 tion.

18           “(C) A national, local, or community-based  
19 public or nonprofit private organization.

20           “(D) A faith-based organization or con-  
21 sortia, to the extent that a grant awarded to  
22 such an entity is consistent with the require-  
23 ments of section 1955 of the Public Health  
24 Service Act (42 U.S.C. 300x–65) relating to a  
25 grant award to non-governmental entities.

1           “(E) An elementary or secondary school.

2           “(2) FEDERAL HEALTH SAFETY NET ORGANI-  
3           ZATION.—The term ‘Federal health safety net orga-  
4           nization’ means—

5           “(A) an Indian tribe, tribal organization,  
6           or an urban Indian organization receiving funds  
7           under title V of the Indian Health Care Im-  
8           provement Act (25 U.S.C. 1651 et seq.), or an  
9           Indian Health Service provider;

10          “(B) a federally-qualified health center (as  
11          defined in section 1905(l)(2)(B));

12          “(C) a hospital defined as a dispropor-  
13          tionate share hospital for purposes of section  
14          1923;

15          “(D) a covered entity described in section  
16          340B(a)(4) of the Public Health Service Act  
17          (42 U.S.C. 256b(a)(4)); and

18          “(E) any other entity or a consortium that  
19          serves children under a federally-funded pro-  
20          gram, including the special supplemental nutri-  
21          tion program for women, infants, and children  
22          (WIC) established under section 17 of the Child  
23          Nutrition Act of 1966 (42 U.S.C. 1786), the  
24          head start and early head start programs under  
25          the Head Start Act (42 U.S.C. 9801 et seq.),

1 the school lunch program established under the  
2 Richard B. Russell National School Lunch Act,  
3 and an elementary or secondary school.

4 “(3) INDIANS; INDIAN TRIBE; TRIBAL ORGANI-  
5 ZATION; URBAN INDIAN ORGANIZATION.—The terms  
6 ‘Indian’, ‘Indian tribe’, ‘tribal organization’, and  
7 ‘urban Indian organization’ have the meanings given  
8 such terms in section 4 of the Indian Health Care  
9 Improvement Act (25 U.S.C. 1603).

10 “(g) APPROPRIATION.—There is appropriated, out of  
11 any money in the Treasury not otherwise appropriated,  
12 \$50,000,000 for each of fiscal years 2006 and 2007 for  
13 the purpose of awarding grants under this section.  
14 Amounts appropriated and paid under the authority of  
15 this section shall be in addition to amounts appropriated  
16 under section 2104 and paid to States in accordance with  
17 section 2105, including with respect to expenditures for  
18 outreach activities in accordance with subsection  
19 (a)(1)(D)(iii) of that section.”.

20 (b) EXTENDING USE OF OUTSTATIONED WORKERS  
21 TO ACCEPT TITLE XXI APPLICATIONS.—Section  
22 1902(a)(55) of the Social Security Act (42 U.S.C.  
23 1396a(a)(55)) is amended by striking “or  
24 (a)(10)(A)(ii)(IX)” and inserting “(a)(10)(A)(ii)(IX), or

1 (a)(10)(A)(ii)(XIV), and applications for child health as-  
2 sistance under title XXI”.

3 **SEC. 3. STATE OPTION TO PROVIDE FOR SIMPLIFIED DE-**  
4 **TERMINATIONS OF A CHILD’S FINANCIAL ELI-**  
5 **GIBILITY FOR MEDICAL ASSISTANCE UNDER**  
6 **MEDICAID OR CHILD HEALTH ASSISTANCE**  
7 **UNDER SCHIP.**

8 (a) MEDICAID.—Section 1902(e) of the Social Secu-  
9 rity Act (42 U.S.C. 1396a(e)) is amended by adding at  
10 the end the following:

11 “(13)(A) At the option of the State, the plan may  
12 provide that financial eligibility requirements for medical  
13 assistance are met for a child who is under an age speci-  
14 fied by the State (not to exceed 21 years of age) by using  
15 a determination made within a reasonable period (as de-  
16 termined by the State) before its use for this purpose, of  
17 the child’s family or household income, or if applicable for  
18 purposes of determining eligibility under this title or title  
19 XXI, assets or resources, by a Federal or State agency,  
20 or a public or private entity making such determination  
21 on behalf of such agency, specified by the plan, including  
22 (but not limited to) an agency administering the State  
23 program funded under part A of title IV, the Food Stamp  
24 Act of 1977, the Richard B. Russell National School  
25 Lunch Act, or the Child Nutrition Act of 1966, notwith-



1 standing any differences in budget unit, disregard, deem-  
2 ing, or other methodology, but only if—

3 “(i) the agency has fiscal liabilities or respon-  
4 sibilities affected or potentially affected by such de-  
5 termination; and

6 “(ii) any information furnished by the agency  
7 pursuant to this subparagraph is used solely for pur-  
8 poses of determining financial eligibility for medical  
9 assistance under this title or for child health assist-  
10 ance under title XXI.

11 “(B) Nothing in subparagraph (A) shall be con-  
12 strued—

13 “(i) to authorize the denial of medical assist-  
14 ance under this title or of child health assistance  
15 under title XXI to a child who, without the applica-  
16 tion of this paragraph, would qualify for such assist-  
17 ance;

18 “(ii) to relieve a State of the obligation under  
19 subsection (a)(8) to furnish medical assistance with  
20 reasonable promptness after the submission of an  
21 initial application that is evaluated or for which eval-  
22 uation is requested pursuant to this paragraph;

23 “(iii) to relieve a State of the obligation to de-  
24 termine eligibility for medical assistance under this  
25 title or for child health assistance under title XXI on

1 a basis other than family or household income (or,  
2 if applicable, assets or resources) if a child is deter-  
3 mined ineligible for such assistance on the basis of  
4 information furnished pursuant to this paragraph; or

5 “(iv) as affecting the applicability of any non-  
6 financial requirements for eligibility for medical as-  
7 sistance under this title or child health assistance  
8 under title XXI.”.

9 (b) SCHIP.—Section 2107(e)(1) of the Social Secu-  
10 rity Act (42 U.S.C. 1397gg(e)(1)) is amended by adding  
11 at the end the following:

12 “(E) Section 1902(e)(13) (relating to the  
13 State option to base a determination of child’s  
14 financial eligibility for assistance on financial  
15 determinations made by a program providing  
16 nutrition or other public assistance).”.

17 (c) EFFECTIVE DATE.—The amendments made by  
18 this section take effect on October 1, 2005.

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