

# Calendar No. 412

110TH CONGRESS  
1ST SESSION

# S. 2152

To amend title XXI of the Social Security Act to reauthorize the State Children's Health Insurance Program through fiscal year 2012, and for other purposes

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## IN THE SENATE OF THE UNITED STATES

OCTOBER 4, 2007

Mr. MCCONNELL (for himself, Mr. LOTT, Mr. KYL, Mr. GREGG, Mr. ENZI, Mr. BUNNING, Mr. COBURN, Mr. ALLARD, Mr. DEMINT, Mr. CORNYN, Mr. INHOFE, Mrs. DOLE, Mr. VITTER, Mr. BURR, Mr. BENNETT, Mr. BARRASSO, Mr. ISAKSON, Mr. COCHRAN, and Mr. ENSIGN) introduced the following bill; which was read the first time

OCTOBER 5, 2007

Read the second time and ordered to be placed on the calendar

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## A BILL

To amend title XXI of the Social Security Act to reauthorize the State Children's Health Insurance Program through fiscal year 2012, 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; TABLE OF CONTENTS.**

4 (a) SHORT TITLE.—This Act may be cited as the  
5 “Kids First Act”.

★(Star Print)

1 (b) TABLE OF CONTENTS.—The table of contents for  
2 this Act is as follows:

- Sec. 1. Short title; table of contents.
- Sec. 2. 5-Year reauthorization.
- Sec. 3. Allotments for the 50 States and the District of Columbia based on expenditures and numbers of low-income children.
- Sec. 4. Limitations on matching rates for populations other than low-income children or pregnant women covered through a section 1115 waiver.
- Sec. 5. Prohibition on new section 1115 waivers for coverage of adults other than pregnant women.
- Sec. 6. Standardization of determination of family income.
- Sec. 7. Grants for outreach and enrollment.
- Sec. 8. Improved State option for offering premium assistance for coverage through private plans.
- Sec. 9. Treatment of unborn children.
- Sec. 10. 50 percent matching rate for all Medicaid administrative costs.
- Sec. 11. Reduction in payments for Medicaid administrative costs to prevent duplication of such payments under TANF.
- Sec. 12. Effective date.

3 **SEC. 2. 5-YEAR REAUTHORIZATION.**

4 (a) INCREASE IN NATIONAL ALLOTMENT.—Section  
5 2104(a) of the Social Security Act (42 U.S.C. 1397dd(a))  
6 is amended—

7 (1) in paragraph (9), by striking “and” at the  
8 end;

9 (2) in paragraph (10), by striking the period at  
10 the end and inserting a semicolon; and

11 (3) by adding at the end the following:

12 “(11) for fiscal year 2008, \$7,000,000,000;

13 “(12) for fiscal year 2009, \$7,200,000,000;

14 “(13) for fiscal year 2010, \$7,600,000,000;

15 “(14) for fiscal year 2011, \$8,300,000,000; and

16 “(15) for fiscal year 2012, \$8,800,000,000.”.

1 (b) CONTINUATION OF ADDITIONAL ALLOTMENTS TO  
2 TERRITORIES.—Section 2104(c)(4)(B) of the Social Secu-  
3 rity Act (42 U.S.C. 1397dd(c)(4)(B)) is amended—

4 (1) by striking “and” after “2006,”; and

5 (2) by inserting before the period the following:

6 “, \$56,000,000 for fiscal year 2008, \$58,000,000  
7 for fiscal year 2009, \$61,000,000 for fiscal year  
8 2010, \$66,000,000 for fiscal year 2011, and  
9 \$70,000,000 for fiscal year 2012”.

10 **SEC. 3. ALLOTMENTS FOR THE 50 STATES AND THE DIS-**  
11 **TRICT OF COLUMBIA BASED ON EXPENDI-**  
12 **TURES AND NUMBERS OF LOW-INCOME CHIL-**  
13 **DREN.**

14 (a) IN GENERAL.—Section 2104 of the Social Secu-  
15 rity Act (42 U.S.C. 1397dd) is amended by adding at the  
16 end the following new subsection:

17 “(i) DETERMINATION OF ALLOTMENTS FOR THE 50  
18 STATES AND THE DISTRICT OF COLUMBIA FOR FISCAL  
19 YEARS 2008 THROUGH 2012.—

20 “(1) IN GENERAL.—Notwithstanding the pre-  
21 ceding provisions of this subsection and subject to  
22 paragraph (3), the Secretary shall allot to each sub-  
23 section (b) State for each of fiscal years 2008  
24 through 2012, the amount determined for the fiscal  
25 year that is equal to the product of—

1           “(A) the amount available for allotment  
2 under subsection (a) for the fiscal year, reduced  
3 by the amount of allotments made under sub-  
4 section (c) (determined without regard to para-  
5 graph (4) thereof) for the fiscal year; and

6           “(B) the sum of the State allotment fac-  
7 tors determined under paragraph (2) with re-  
8 spect to the State and weighted in accordance  
9 with subparagraph (B) of that paragraph for  
10 the fiscal year.

11           “(2) STATE ALLOTMENT FACTORS.—

12           “(A) IN GENERAL.—For purposes of para-  
13 graph (1)(B), the State allotment factors are  
14 the following:

15           “(i) The ratio of the projected expend-  
16 itures for targeted low-income children  
17 under the State child health plan and preg-  
18 nant women under a waiver of such plan  
19 for the fiscal year to the sum of such pro-  
20 jected expenditures for all States for the  
21 fiscal year, multiplied by the applicable  
22 percentage weight assigned under subpara-  
23 graph (B).

24           “(ii) The ratio of the number of low-  
25 income children who have not attained age

1 19 with no health insurance coverage in  
2 the State, as determined by the Secretary  
3 on the basis of the arithmetic average of  
4 the number of such children for the 3 most  
5 recent Annual Social and Economic Sup-  
6 plements to the Current Population Survey  
7 of the Bureau of the Census available be-  
8 fore the beginning of the calendar year be-  
9 fore such fiscal year begins, to the sum of  
10 the number of such children determined  
11 for all States for such fiscal year, multi-  
12 plied by the applicable percentage weight  
13 assigned under subparagraph (B).

14 “(iii) The ratio of the projected ex-  
15 penditures for targeted low-income children  
16 under the State child health plan and preg-  
17 nant women under a waiver of such plan  
18 for the preceding fiscal year to the sum of  
19 such projected expenditures for all States  
20 for such preceding fiscal year, multiplied  
21 by the applicable percentage weight as-  
22 signed under subparagraph (B).

23 “(iv) The ratio of the actual expendi-  
24 tures for targeted low-income children  
25 under the State child health plan and preg-

1           nant women under a waiver of such plan  
2           for the second preceding fiscal year to the  
3           sum of such actual expenditures for all  
4           States for such second preceding fiscal  
5           year, multiplied by the applicable percent-  
6           age weight assigned under subparagraph  
7           (B).

8           “(B) ASSIGNMENT OF WEIGHTS.—For  
9           each of fiscal years 2008 through 2012, the fol-  
10          lowing percentage weights shall be applied to  
11          the ratios determined under subparagraph (A)  
12          for each such fiscal year:

13                 “(i) 40 percent for the ratio deter-  
14                 mined under subparagraph (A)(i).

15                 “(ii) 5 percent for the ratio deter-  
16                 mined under subparagraph (A)(ii).

17                 “(iii) 50 percent for the ratio deter-  
18                 mined under subparagraph (A)(iii).

19                 “(iv) 5 percent for the ratio deter-  
20                 mined under subparagraph (A)(iv).

21          “(C) DETERMINATION OF PROJECTED AND  
22          ACTUAL EXPENDITURES.—For purposes of sub-  
23          paragraph (A):

24                 “(i) PROJECTED EXPENDITURES.—  
25                 The projected expenditures described in

1 clauses (i) and (iii) of such subparagraph  
2 with respect to a fiscal year shall be deter-  
3 mined on the basis of amounts reported by  
4 States to the Secretary on the May 15th  
5 submission of Form CMS-37 and Form  
6 CMS-21B submitted not later than June  
7 30th of the fiscal year preceding such year.

8 “(ii) ACTUAL EXPENDITURES.—The  
9 actual expenditures described in clause (iv)  
10 of such subparagraph with respect to a  
11 second preceding fiscal year shall be deter-  
12 mined on the basis of amounts reported by  
13 States to the Secretary on Form CMS-64  
14 and Form CMS-21 submitted not later  
15 than November 30 of the preceding fiscal  
16 year.”.

17 (b) 2-YEAR AVAILABILITY OF ALLOTMENTS; EX-  
18 PENDITURES COUNTED AGAINST OLDEST ALLOT-  
19 MENTS.—Section 2104(e) of the Social Security Act (42  
20 U.S.C. 1397dd(e)) is amended to read as follows:

21 “(e) AVAILABILITY OF AMOUNTS ALLOTTED.—

22 “(1) IN GENERAL.—Except as provided in the  
23 succeeding paragraphs of this subsection, amounts  
24 allotted to a State pursuant to this section—

1           “(A) for each of fiscal years 1998 through  
2           2007, shall remain available for expenditure by  
3           the State through the end of the second suc-  
4           ceeding fiscal year; and

5           “(B) for each of fiscal years 2008 through  
6           2012, shall remain available for expenditure by  
7           the State only through the end of the suc-  
8           ceeding fiscal year for which such amounts are  
9           allotted.

10          “(2) ELIMINATION OF REDISTRIBUTION OF AL-  
11          LOTMENTS NOT EXPENDED WITHIN 3 YEARS.—Not-  
12          withstanding subsection (f), amounts allotted to a  
13          State under this section for fiscal years beginning  
14          with fiscal year 2008 that remain unexpended as of  
15          the end of the second succeeding fiscal year shall not  
16          be redistributed to other States and shall revert to  
17          the Treasury on October 1 of the third succeeding  
18          fiscal year.

19          “(3) RULE FOR COUNTING EXPENDITURES  
20          AGAINST FISCAL YEAR ALLOTMENTS.—Expenditures  
21          under the State child health plan made on or after  
22          October 1, 2007, shall be counted against allotments  
23          for the earliest fiscal year for which funds are avail-  
24          able for expenditure under this subsection.”.

25          (c) CONFORMING AMENDMENTS.—



1           (1) Section 2104(b)(1) of the Social Security  
 2           Act (42 U.S.C. 1397dd(b)(1)) is amended by strik-  
 3           ing “subsection (d)” and inserting “the succeeding  
 4           subsections of this section”.

5           (2) Section 2104(f) of such Act (42 U.S.C.  
 6           1397dd(f)) is amended by striking “The” and in-  
 7           serting “Subject to subsection (e)(2), the”.

8 **SEC. 4. LIMITATIONS ON MATCHING RATES FOR POPU-**  
 9                           **LATIONS OTHER THAN LOW-INCOME CHIL-**  
 10                           **DREN OR PREGNANT WOMEN COVERED**  
 11                           **THROUGH A SECTION 1115 WAIVER.**

12           (a) **LIMITATION ON PAYMENTS.**—Section 2105(c) of  
 13 the Social Security Act (42 U.S.C. 1397ee(c)) is amended  
 14 by adding at the end the following new paragraph:

15                   “(8) **LIMITATIONS ON MATCHING RATE FOR**  
 16                   **POPULATIONS OTHER THAN TARGETED LOW-INCOME**  
 17                   **CHILDREN OR PREGNANT WOMEN COVERED**  
 18                   **THROUGH A SECTION 1115 WAIVER.**—For child  
 19 health assistance or health benefits coverage fur-  
 20 nished in any fiscal year beginning with fiscal year  
 21 2008:

22                           “(A) **FMAP APPLIED TO PAYMENTS FOR**  
 23                           **COVERAGE OF CHILDREN OR PREGNANT WOMEN**  
 24                           **COVERED THROUGH A SECTION 1115 WAIVER**  
 25                           **ENROLLED IN THE STATE CHILD HEALTH PLAN**

1 ON THE DATE OF ENACTMENT OF THE KIDS  
2 FIRST ACT AND WHOSE GROSS FAMILY INCOME  
3 IS DETERMINED TO EXCEED THE INCOME ELI-  
4 GIBILITY LEVEL SPECIFIED FOR A TARGETED  
5 LOW-INCOME CHILD.—Notwithstanding sub-  
6 sections (b)(1)(B) and (d) of section 2110, in  
7 the case of any individual described in sub-  
8 section (c) of section 105 of the Kids First Act  
9 who the State elects to continue to provide child  
10 health assistance for under the State child  
11 health plan in accordance with the requirements  
12 of such subsection, the Federal medical assist-  
13 ance percentage (as determined under section  
14 1905(b) without regard to clause (4) of such  
15 section) shall be substituted for the enhanced  
16 FMAP under subsection (a)(1) with respect to  
17 such assistance.

18 “(B) FMAP APPLIED TO PAYMENTS ONLY  
19 FOR NONPREGNANT CHILDLESS ADULTS AND  
20 PARENTS AND CARETAKER RELATIVES EN-  
21 ROLLED UNDER A SECTION 1115 WAIVER ON  
22 THE DATE OF ENACTMENT OF THE STATE  
23 CHILDREN’S HEALTH INSURANCE PROGRAM RE-  
24 AUTHORIZATION OF 2007.—The Federal medical  
25 assistance percentage (as determined under sec-

1           tion 1905(b) without regard to clause (4) of  
2           such section) shall be substituted for the en-  
3           hanced FMAP under subsection (a)(1) with re-  
4           spect to payments for child health assistance or  
5           health benefits coverage provided under the  
6           State child health plan for any of the following:

7                   “(i) PARENTS OR CARETAKER REL-  
8                   ATIVES ENROLLED UNDER A WAIVER ON  
9                   THE DATE OF ENACTMENT OF THE STATE  
10                  CHILDREN’S HEALTH INSURANCE PRO-  
11                  GRAM REAUTHORIZATION OF 2007.—A non-  
12                  pregnant parent or a nonpregnant care-  
13                  taker relative of a targeted low-income  
14                  child who is enrolled in the State child  
15                  health plan under a waiver, experimental,  
16                  pilot, or demonstration project on the date  
17                  of enactment of the Kids First Act and  
18                  whose family income does not exceed the  
19                  income eligibility applied under such waiv-  
20                  er with respect to that population on such  
21                  date.

22                  “(ii) NONPREGNANT CHILDLESS  
23                  ADULTS ENROLLED UNDER A WAIVER ON  
24                  SUCH DATE.—A nonpregnant childless  
25                  adult enrolled in the State child health

1 plan under a waiver, experimental, pilot, or  
2 demonstration project described in section  
3 6102(c)(3) of the Deficit Reduction Act of  
4 2005 (42 U.S.C. 1397gg note) on the date  
5 of enactment of the Kids First Act and  
6 whose family income does not exceed the  
7 income eligibility applied under such waiv-  
8 er with respect to that population on such  
9 date.

10 “(iii) NO REPLACEMENT ENROLL-  
11 EES.—Nothing in clauses (i) or (ii) shall  
12 be construed as authorizing a State to pro-  
13 vide child health assistance or health bene-  
14 fits coverage under a waiver described in  
15 either such clause to a nonpregnant parent  
16 or a nonpregnant caretaker relative of a  
17 targeted low-income child, or a nonpreg-  
18 nant childless adult, who is not enrolled  
19 under the waiver on the date of enactment  
20 of the Kids First Act.

21 “(C) NO FEDERAL PAYMENT FOR ANY  
22 NEW NONPREGNANT ADULT ENROLLEES OR  
23 FOR SUCH ENROLLEES WHO NO LONGER SAT-  
24 ISFY INCOME ELIGIBILITY REQUIREMENTS.—  
25 Payment shall not be made under this section

1 for child health assistance or other health bene-  
2 fits coverage provided under the State child  
3 health plan or under a waiver under section  
4 1115 for any of the following:

5 “(i) PARENTS OR CARETAKER REL-  
6 ATIVES UNDER A SECTION 1115 WAIVER  
7 APPROVED AFTER THE DATE OF ENACT-  
8 MENT OF THE STATE CHILDREN’S HEALTH  
9 INSURANCE PROGRAM REAUTHORIZATION  
10 OF 2007.—A nonpregnant parent or a non-  
11 pregnant caretaker relative of a targeted  
12 low-income child under a waiver, experi-  
13 mental, pilot, or demonstration project  
14 that is approved on or after the date of en-  
15 actment of the Kids First Act.

16 “(ii) PARENTS, CARETAKER REL-  
17 ATIVES, AND NONPREGNANT CHILDLESS  
18 ADULTS WHOSE FAMILY INCOME EXCEEDS  
19 THE INCOME ELIGIBILITY LEVEL SPECI-  
20 FIED UNDER A SECTION 1115 WAIVER AP-  
21 PROVED PRIOR TO THE STATE CHILDREN’S  
22 HEALTH INSURANCE PROGRAM REAUTHOR-  
23 IZATION OF 2007.—Any nonpregnant par-  
24 ent or a nonpregnant caretaker relative of  
25 a targeted low-income child whose family

1 income exceeds the income eligibility level  
2 referred to in subparagraph (B)(i), and  
3 any nonpregnant childless adult whose  
4 family income exceeds the income eligibility  
5 level referred to in subparagraph (B)(ii).

6 “(iii) NONPREGNANT CHILDLESS  
7 ADULTS, PARENTS, OR CARETAKER REL-  
8 ATIVES NOT ENROLLED UNDER A SECTION  
9 1115 WAIVER ON THE DATE OF ENACT-  
10 MENT OF THE STATE CHILDREN’S HEALTH  
11 INSURANCE PROGRAM REAUTHORIZATION  
12 OF 2007.—Any nonpregnant parent or a  
13 nonpregnant caretaker relative of a tar-  
14 geted low-income child who is not enrolled  
15 in the State child health plan under a sec-  
16 tion 1115 waiver, experimental, pilot, or  
17 demonstration project referred to in sub-  
18 paragraph (B)(i) on the date of enactment  
19 of the Kids First Act, and any nonpreg-  
20 nant childless adult who is not enrolled in  
21 the State child health plan under a section  
22 1115 waiver, experimental, pilot, or dem-  
23 onstration project referred to in subpara-  
24 graph (B)(ii)(I) on such date.



1 “(1) The Secretary”; and

2 (2) by adding at the end the following new  
3 paragraphs:

4 “(2) The Secretary may not approve, extend,  
5 renew, or amend a waiver, experimental, pilot, or  
6 demonstration project with respect to a State after  
7 the date of enactment of the Kids First Act that  
8 would allow funds made available under this title to  
9 be used to provide child health assistance or other  
10 health benefits coverage for any other adult other  
11 than a pregnant woman whose family income does  
12 not exceed the income eligibility level specified for a  
13 targeted low-income child in that State under a  
14 waiver or project approved as of such date.

15 “(3) The Secretary may not approve, extend,  
16 renew, or amend a waiver, experimental, pilot, or  
17 demonstration project with respect to a State after  
18 the date of enactment of the Kids First Act that  
19 would waive or modify the requirements of section  
20 2105(e)(8).”.

21 (b) CLARIFICATION OF AUTHORITY FOR COVERAGE  
22 OF PREGNANT WOMEN.—Section 2106 of the Social Secu-  
23 rity Act (42 U.S.C. 1397ff) is amended by adding at the  
24 end the following new subsection:



1       “(f) NO AUTHORITY TO COVER PREGNANT WOMEN  
2 THROUGH STATE PLAN.—For purposes of this title, a  
3 State may provide assistance to a pregnant woman under  
4 the State child health plan only—

5               “(1) by virtue of a waiver under section 1115;  
6       or

7               “(2) through the application of sections 457.10,  
8       457.350(b)(2), 457.622(c)(5), and 457.626(a)(3) of  
9       title 42, Code of Federal Regulations (as in effect on  
10       the date of enactment of the Kids First Act).”.

11       (c) ASSURANCE OF NOTICE TO AFFECTED ENROLL-  
12 EES.—The Secretary of Health and Human Services shall  
13 establish procedures to ensure that States provide ade-  
14 quate public notice for parents, caretaker relatives, and  
15 nonpregnant childless adults whose eligibility for child  
16 health assistance or health benefits coverage under a waiv-  
17 er under section 1115 of the Social Security Act will be  
18 terminated as a result of the amendments made by sub-  
19 section (a), and that States otherwise adhere to regula-  
20 tions of the Secretary relating to procedures for termi-  
21 nating waivers under section 1115 of the Social Security  
22 Act.

23 **SEC. 6. STANDARDIZATION OF DETERMINATION OF FAMILY**  
24 **INCOME.**

25       (a) ELIGIBILITY BASED ON GROSS INCOME.—

1           (1) IN GENERAL.—Section 2110 of the Social  
2           Security Act (42 U.S.C. 1397jj) is amended by add-  
3           ing at the end the following new subsection:

4           “(d) STANDARDIZATION OF DETERMINATION OF  
5           FAMILY INCOME.—A State shall determine family income  
6           for purposes of determining income eligibility for child  
7           health assistance or other health benefits coverage under  
8           the State child health plan (or under a waiver of such plan  
9           under section 1115) solely on the basis of the gross income  
10          (as defined by the Secretary) of the family.”.

11          (2) PROHIBITION ON WAIVER OF REQUIRE-  
12          MENTS.—Section 2107(f) (42 U.S.C. 1397gg(f)), as  
13          amended by section 5(a), is amended by adding at  
14          the end the following new paragraph:

15          “(4) The Secretary may not approve a waiver,  
16          experimental, pilot, or demonstration project with re-  
17          spect to a State after the date of enactment of the  
18          Kids First Act that would waive or modify the re-  
19          quirements of section 2110(d) (relating to deter-  
20          mining income eligibility on the basis of gross in-  
21          come) and regulations promulgated to carry out  
22          such requirements.”.

23          (b) REGULATIONS.—Not later than 90 days after the  
24          date of enactment of this Act, the Secretary of Health and  
25          Human Services shall promulgate interim final regulations

1 defining gross income for purposes of section 2110(d) of  
2 the Social Security Act, as added by subsection (a).

3       (c) APPLICATION TO CURRENT ENROLLEES.—The  
4 interim final regulations promulgated under subsection (b)  
5 shall not be used to determine the income eligibility of any  
6 individual enrolled in a State child health plan under title  
7 XXI of the Social Security Act on the date of enactment  
8 of this Act before the date on which such eligibility of the  
9 individual is required to be redetermined under the plan  
10 as in effect on such date. In the case of any individual  
11 enrolled in such plan on such date who, solely as a result  
12 of the application of subsection (d) of section 2110 of the  
13 Social Security Act (as added by subsection (a)) and the  
14 regulations promulgated under subsection (b), is deter-  
15 mined to be ineligible for child health assistance under the  
16 State child health plan, a State may elect, subject to sub-  
17 stitution of the Federal medical assistance percentage for  
18 the enhanced FMAP under section 2105(c)(8)(A) of the  
19 Social Security Act (as added by section 4(a)), to continue  
20 to provide the individual with such assistance for so long  
21 as the individual otherwise would be eligible for such as-  
22 sistance and the individual's family income, if determined  
23 under the income and resource standards and methodolo-  
24 gies applicable under the State child health plan on Sep-  
25 tember 30, 2007, would not exceed the income eligibility

1 level applicable to the individual under the State child  
2 health plan.

3 **SEC. 7. GRANTS FOR OUTREACH AND ENROLLMENT.**

4 (a) GRANTS.—Title XXI of the Social Security Act  
5 (42 U.S.C. 1397aa et seq.) is amended by adding at the  
6 end the following:

7 **“SEC. 2111. GRANTS TO IMPROVE OUTREACH AND ENROLL-**  
8 **MENT.**

9 “(a) OUTREACH AND ENROLLMENT GRANTS; NA-  
10 TIONAL CAMPAIGN.—

11 “(1) IN GENERAL.—From the amounts appro-  
12 priated for a fiscal year under subsection (f), subject  
13 to paragraph (2), the Secretary shall award grants  
14 to eligible entities to conduct outreach and enroll-  
15 ment efforts that are designed to increase the enroll-  
16 ment and participation of eligible children under this  
17 title and title XIX.

18 “(2) 10 PERCENT SET ASIDE FOR NATIONAL  
19 ENROLLMENT CAMPAIGN.—An amount equal to 10  
20 percent of such amounts for the fiscal year shall be  
21 used by the Secretary for expenditures during the  
22 fiscal year to carry out a national enrollment cam-  
23 paign in accordance with subsection (g).

24 “(b) AWARD OF GRANTS.—

25 “(1) PRIORITY FOR AWARDED.—

1           “(A) IN GENERAL.—In awarding grants  
2 under subsection (a), the Secretary shall give  
3 priority to eligible entities that—

4                   “(i) propose to target geographic  
5 areas with high rates of—

6                           “(I) eligible but unenrolled chil-  
7 dren, including such children who re-  
8 side in rural areas; or

9                           “(II) racial and ethnic minorities  
10 and health disparity populations, in-  
11 cluding those proposals that address  
12 cultural and linguistic barriers to en-  
13 rollment; and

14                   “(ii) submit the most demonstrable  
15 evidence required under paragraphs (1)  
16 and (2) of subsection (c).

17           “(B) 10 PERCENT SET ASIDE FOR OUT-  
18 REACH TO INDIAN CHILDREN.—An amount  
19 equal to 10 percent of the funds appropriated  
20 under subsection (f) for a fiscal year shall be  
21 used by the Secretary to award grants to In-  
22 dian Health Service providers and urban Indian  
23 organizations receiving funds under title V of  
24 the Indian Health Care Improvement Act (25

1 U.S.C. 1651 et seq.) for outreach to, and en-  
2 rollment of, children who are Indians.

3 “(2) 2-YEAR AVAILABILITY.—A grant awarded  
4 under this section for a fiscal year shall remain  
5 available for expenditure through the end of the suc-  
6 ceeding fiscal year.

7 “(c) APPLICATION.—An eligible entity that desires to  
8 receive a grant under subsection (a) shall submit an appli-  
9 cation to the Secretary in such form and manner, and con-  
10 taining such information, as the Secretary may decide.  
11 Such application shall include—

12 “(1) evidence demonstrating that the entity in-  
13 cludes members who have access to, and credibility  
14 with, ethnic or low-income populations in the com-  
15 munities in which activities funded under the grant  
16 are to be conducted;

17 “(2) evidence demonstrating that the entity has  
18 the ability to address barriers to enrollment, such as  
19 lack of awareness of eligibility, stigma concerns and  
20 punitive fears associated with receipt of benefits,  
21 and other cultural barriers to applying for and re-  
22 ceiving child health assistance or medical assistance;

23 “(3) specific quality or outcomes performance  
24 measures to evaluate the effectiveness of activities  
25 funded by a grant awarded under this section; and

1           “(4) an assurance that the eligible entity  
2 shall—

3           “(A) conduct an assessment of the effec-  
4 tiveness of such activities against the perform-  
5 ance measures;

6           “(B) cooperate with the collection and re-  
7 porting of enrollment data and other informa-  
8 tion in order for the Secretary to conduct such  
9 assessments.

10           “(C) in the case of an eligible entity that  
11 is not the State, provide the State with enroll-  
12 ment data and other information as necessary  
13 for the State to make necessary projections of  
14 eligible children and pregnant women.

15           “(d) SUPPLEMENT, NOT SUPPLANT.—Federal funds  
16 awarded under this section shall be used to supplement,  
17 not supplant, non-Federal funds that are otherwise avail-  
18 able for activities funded under this section.

19           “(e) DEFINITIONS.—In this section:

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

22           “(A) A State with an approved child health  
23 plan under this title.

24           “(B) A local government.

1           “(C) An Indian tribe or tribal consortium,  
2           a tribal organization, an urban Indian organiza-  
3           tion receiving funds under title V of the Indian  
4           Health Care Improvement Act (25 U.S.C. 1651  
5           et seq.), or an Indian Health Service provider.

6           “(D) A Federal health safety net organiza-  
7           tion.

8           “(E) A State, national, local, or commu-  
9           nity-based public or nonprofit private organiza-  
10          tion.

11          “(F) A faith-based organization or con-  
12          sortia, to the extent that a grant awarded to  
13          such an entity is consistent with the require-  
14          ments of section 1955 of the Public Health  
15          Service Act (42 U.S.C. 300x-65) relating to a  
16          grant award to non-governmental entities.

17          “(G) An elementary or secondary school.

18          “(H) A national, local, or community-based  
19          public or nonprofit private organization, includ-  
20          ing organizations that use community health  
21          workers or community-based doula programs.

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



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

3           “(B) a hospital defined as a dispro-  
4 portionate share hospital for purposes of section  
5 1923;

6           “(C) a covered entity described in section  
7 340B(a)(4) of the Public Health Service Act  
8 (42 U.S.C. 256b(a)(4)); and

9           “(D) any other entity or consortium that  
10 serves children under a federally-funded pro-  
11 gram, including the special supplemental nutri-  
12 tion program for women, infants, and children  
13 (WIC) established under section 17 of the Child  
14 Nutrition Act of 1966 (42 U.S.C. 1786), the  
15 head start and early head start programs under  
16 the Head Start Act (42 U.S.C. 9801 et seq.),  
17 the school lunch program established under the  
18 Richard B. Russell National School Lunch Act,  
19 and an elementary or secondary school.

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

1           “(4) COMMUNITY HEALTH WORKER.—The term  
2           ‘community health worker’ means an individual who  
3           promotes health or nutrition within the community  
4           in which the individual resides—

5                   “(A) by serving as a liaison between com-  
6                   munities and health care agencies;

7                   “(B) by providing guidance and social as-  
8                   sistance to community residents;

9                   “(C) by enhancing community residents’  
10                  ability to effectively communicate with health  
11                  care providers;

12                  “(D) by providing culturally and linguis-  
13                  tically appropriate health or nutrition edu-  
14                  cation;

15                  “(E) by advocating for individual and com-  
16                  munity health or nutrition needs; and

17                  “(F) by providing referral and followup  
18                  services.

19           “(f) APPROPRIATION.—

20                  “(1) IN GENERAL.—There is appropriated, out  
21                  of any money in the Treasury not otherwise appro-  
22                  priated, for the purpose of awarding grants under  
23                  this section—

24                          “(A) \$100,000,000 for each of fiscal years  
25                          2008 and 2009;

1                   “(B) \$75,000,000 for each of fiscal years  
2                   2010 and 2011; and

3                   “(C) \$50,000,000 for fiscal year 2012.

4                   “(2) GRANTS IN ADDITION TO OTHER AMOUNTS  
5                   PAID.—Amounts appropriated and paid under the  
6                   authority of this section shall be in addition to  
7                   amounts appropriated under section 2104 and paid  
8                   to States in accordance with section 2105, including  
9                   with respect to expenditures for outreach activities  
10                  in accordance with subsections (a)(1)(D)(iii) and  
11                  (c)(2)(C) of that section.

12                  “(g) NATIONAL ENROLLMENT CAMPAIGN.—From  
13                  the amounts made available under subsection (a)(2) for  
14                  a fiscal year, the Secretary shall develop and implement  
15                  a national enrollment campaign to improve the enrollment  
16                  of underserved child populations in the programs estab-  
17                  lished under this title and title XIX. Such campaign may  
18                  include—

19                  “(1) the establishment of partnerships with the  
20                  Secretary of Education and the Secretary of Agri-  
21                  culture to develop national campaigns to link the eli-  
22                  gibility and enrollment systems for the assistance  
23                  programs each Secretary administers that often  
24                  serve the same children;

1           “(2) the integration of information about the  
2 programs established under this title and title XIX  
3 in public health awareness campaigns administered  
4 by the Secretary;

5           “(3) increased financial and technical support  
6 for enrollment hotlines maintained by the Secretary  
7 to ensure that all States participate in such hotlines;

8           “(4) the establishment of joint public awareness  
9 outreach initiatives with the Secretary of Education  
10 and the Secretary of Labor regarding the impor-  
11 tance of health insurance to building strong commu-  
12 nities and the economy;

13           “(5) the development of special outreach mate-  
14 rials for Native Americans or for individuals with  
15 limited English proficiency; and

16           “(6) such other outreach initiatives as the Sec-  
17 retary determines would increase public awareness of  
18 the programs under this title and title XIX.”.

19           (b) NONAPPLICATION OF ADMINISTRATIVE EXPENDI-  
20 TURES CAP.—Section 2105(c)(2) of the Social Security  
21 Act (42 U.S.C. 1397ee(c)(2)) is amended by adding at the  
22 end the following:

23                           “(C) NONAPPLICATION TO EXPENDITURES  
24                           FOR OUTREACH AND ENROLLMENT.—The limi-  
25                           tation under subparagraph (A) shall not apply

1 with respect to expenditures for outreach activi-  
 2 ties under section 2102(c)(1), or for enrollment  
 3 activities, for children eligible for child health  
 4 assistance under the State child health plan or  
 5 medical assistance under the State plan under  
 6 title XIX.”.

7 **SEC. 8. IMPROVED STATE OPTION FOR OFFERING PRE-**  
 8 **MIUM ASSISTANCE FOR COVERAGE**  
 9 **THROUGH PRIVATE PLANS.**

10 (a) IN GENERAL.—Section 2105(c) of the Social Se-  
 11 curity Act (42 U.S.C. 1397ee(c)), as amended by section  
 12 4(a) is amended by adding at the end the following:

13 “(9) ADDITIONAL STATE OPTION FOR OFFER-  
 14 ING PREMIUM ASSISTANCE.—

15 “(A) IN GENERAL.—Subject to the suc-  
 16 ceeding provisions of this paragraph, a State  
 17 may elect to offer a premium assistance subsidy  
 18 (as defined in subparagraph (C)) for qualified  
 19 employer sponsored coverage (as defined in sub-  
 20 paragraph (B)) to all targeted low-income chil-  
 21 dren who are eligible for child health assistance  
 22 under the plan and have access to such cov-  
 23 erage in accordance with the requirements of  
 24 this paragraph.

1                   “(B) QUALIFIED EMPLOYER SPONSORED  
2                   COVERAGE.—

3                   “(i) IN GENERAL.—In this paragraph,  
4                   the term ‘qualified employer sponsored cov-  
5                   erage’ means a group health plan or health  
6                   insurance coverage offered through an em-  
7                   ployer that is—

8                   “(I) substantially equivalent to  
9                   the benefits coverage in a benchmark  
10                  benefit package described in section  
11                  2103(b) or benchmark-equivalent cov-  
12                  erage that meets the requirements of  
13                  section 2103(a)(2);

14                  “(II) made similarly available to  
15                  all of the employer’s employees and  
16                  for which the employer makes a con-  
17                  tribution to the premium that is not  
18                  less for employees receiving a pre-  
19                  mium assistance subsidy under any  
20                  option available under the State child  
21                  health plan under this title or the  
22                  State plan under title XIX to provide  
23                  such assistance than the employer  
24                  contribution provided for all other em-  
25                  ployees; and

1                   “(III) cost-effective, as deter-  
2                   mined under clause (ii).

3                   “(ii) COST-EFFECTIVENESS.—A group  
4                   health plan or health insurance coverage  
5                   offered through an employer shall be con-  
6                   sidered to be cost-effective if—

7                   “(I) the marginal premium cost  
8                   to purchase family coverage through  
9                   the employer is less than the State  
10                  cost of providing child health assist-  
11                  ance through the State child health  
12                  plan for all the children in the family  
13                  who are targeted low-income children;  
14                  or

15                  “(II) the marginal premium cost  
16                  between individual coverage and pur-  
17                  chasing family coverage through the  
18                  employer is not greater than 175 per-  
19                  cent of the cost to the State to pro-  
20                  vide child health assistance through  
21                  the State child health plan for a tar-  
22                  geted low-income child.

23                  “(iii) HIGH DEDUCTIBLE HEALTH  
24                  PLANS INCLUDED.—The term ‘qualified  
25                  employer sponsored coverage’ includes a

1 high deductible health plan (as defined in  
2 section 223(c)(2) of the Internal Revenue  
3 Code of 1986) purchased through a health  
4 savings account (as defined under section  
5 223(d) of such Code).

6 “(C) PREMIUM ASSISTANCE SUBSIDY.—

7 “(i) IN GENERAL.—In this paragraph,  
8 the term ‘premium assistance subsidy’  
9 means, with respect to a targeted low-in-  
10 come child, the amount equal to the dif-  
11 ference between the employee contribution  
12 required for enrollment only of the em-  
13 ployee under qualified employer sponsored  
14 coverage and the employee contribution re-  
15 quired for enrollment of the employee and  
16 the child in such coverage, less any appli-  
17 cable premium cost-sharing applied under  
18 the State child health plan, subject to the  
19 annual aggregate cost-sharing limit applied  
20 under section 2103(e)(3)(B).

21 “(ii) STATE PAYMENT OPTION.—Sub-  
22 ject to clause (iii), a State may provide a  
23 premium assistance subsidy directly to an  
24 employer or as reimbursement to an em-  
25 ployee for out-of-pocket expenditures.



1           “(iii) REQUIREMENT FOR DIRECT  
2 PAYMENT TO EMPLOYEE.—A State shall  
3 not pay a premium assistance subsidy di-  
4 rectly to the employee, unless the State has  
5 established procedures to ensure that the  
6 targeted low-income child on whose behalf  
7 such payments are made are actually en-  
8 rolled in the qualified employer sponsored  
9 coverage.

10           “(iv) TREATMENT AS CHILD HEALTH  
11 ASSISTANCE.—Expenditures for the provi-  
12 sion of premium assistance subsidies shall  
13 be considered child health assistance de-  
14 scribed in paragraph (1)(C) of subsection  
15 (a) for purposes of making payments  
16 under that subsection.

17           “(v) STATE OPTION TO REQUIRE AC-  
18 CEPTANCE OF SUBSIDY.—A State may  
19 condition the provision of child health as-  
20 sistance under the State child health plan  
21 for a targeted low-income child on the re-  
22 ceipt of a premium assistance subsidy for  
23 enrollment in qualified employer sponsored  
24 coverage if the State determines the provi-  
25 sion of such a subsidy to be more cost-ef-

1           fective in accordance with subparagraph  
2           (B)(ii).

3           “(vi) NOT TREATED AS INCOME.—  
4           Notwithstanding any other provision of  
5           law, a premium assistance subsidy pro-  
6           vided in accordance with this paragraph  
7           shall not be treated as income to the child  
8           or the parent of the child for whom such  
9           subsidy is provided.

10          “(D) NO REQUIREMENT TO PROVIDE SUP-  
11          PLEMENTAL COVERAGE FOR BENEFITS AND AD-  
12          DITIONAL COST-SHARING PROTECTION PRO-  
13          VIDED UNDER THE STATE CHILD HEALTH  
14          PLAN.—

15          “(i) IN GENERAL.—A State that  
16          elects the option to provide a premium as-  
17          sistance subsidy under this paragraph shall  
18          not be required to provide a targeted low-  
19          income child enrolled in qualified employer  
20          sponsored coverage with supplemental cov-  
21          erage for items or services that are not  
22          covered, or are only partially covered,  
23          under the qualified employer sponsored  
24          coverage or cost-sharing protection other

1 than the protection required under section  
2 2103(e)(3)(B).

3 “(ii) NOTICE OF COST-SHARING RE-  
4 QUIREMENTS.—A State shall provide a tar-  
5 geted low-income child or the parent of  
6 such a child (as appropriate) who is pro-  
7 vided with a premium assistance subsidy in  
8 accordance with this paragraph with notice  
9 of the cost-sharing requirements and limi-  
10 tations imposed under the qualified em-  
11 ployer sponsored coverage in which the  
12 child is enrolled upon the enrollment of the  
13 child in such coverage and annually there-  
14 after.

15 “(iii) RECORD KEEPING REQUIRE-  
16 MENTS.—A State may require a parent of  
17 a targeted low-income child that is enrolled  
18 in qualified employer-sponsored coverage to  
19 bear the responsibility for keeping track of  
20 out-of-pocket expenditures incurred for  
21 cost-sharing imposed under such coverage  
22 and to notify the State when the limit on  
23 such expenditures imposed under section  
24 2103(e)(3)(B) has been reached for a year

1 from the effective date of enrollment for  
2 such year.

3 “(iv) STATE OPTION FOR REIMBURSE-  
4 MENT.—A State may retroactively reim-  
5 burse a parent of a targeted low-income  
6 child for out-of-pocket expenditures in-  
7 curred after reaching the 5 percent cost-  
8 sharing limitation imposed under section  
9 2103(e)(3)(B) for a year.

10 “(E) 6-MONTH WAITING PERIOD RE-  
11 QUIRED.—A State shall impose at least a 6-  
12 month waiting period from the time an indi-  
13 vidual is enrolled in private health insurance  
14 prior to the provision of a premium assistance  
15 subsidy for a targeted low-income child in ac-  
16 cordance with this paragraph.

17 “(F) NON APPLICATION OF WAITING PE-  
18 RIOD FOR ENROLLMENT IN THE STATE MED-  
19 ICAID PLAN OR THE STATE CHILD HEALTH  
20 PLAN.—A targeted low-income child provided a  
21 premium assistance subsidy in accordance with  
22 this paragraph who loses eligibility for such  
23 subsidy shall not be treated as having been en-  
24 rolled in private health insurance coverage for  
25 purposes of applying any waiting period im-

1 posed under the State child health plan or the  
2 State plan under title XIX for the enrollment of  
3 the child under such plan.

4 “(G) ASSURANCE OF SPECIAL ENROLL-  
5 MENT PERIOD UNDER GROUP HEALTH PLANS  
6 IN CASE OF ELIGIBILITY FOR PREMIUM SUB-  
7 SIDY ASSISTANCE.—No payment shall be made  
8 under subsection (a) for amounts expended for  
9 the provision of premium assistance subsidies  
10 under this paragraph unless a State provides  
11 assurances to the Secretary that the State has  
12 in effect laws requiring a group health plan, a  
13 health insurance issuer offering group health  
14 insurance coverage in connection with a group  
15 health plan, and a self-funded health plan, to  
16 permit an employee who is eligible, but not en-  
17 rolled, for coverage under the terms of the plan  
18 (or a child of such an employee if the child is  
19 eligible, but not enrolled, for coverage under  
20 such terms) to enroll for coverage under the  
21 terms of the plan if the employee’s child be-  
22 comes eligible for a premium assistance subsidy  
23 under this paragraph.

24 “(H) NO EFFECT ON PREVIOUSLY AP-  
25 PROVED PREMIUM ASSISTANCE PROGRAMS.—

1           Nothing in this paragraph shall be construed as  
2           limiting the authority of a State to offer pre-  
3           mium assistance under section 1906, a waiver  
4           described in paragraph (2)(B) or (3), a waiver  
5           approved under section 1115, or other authority  
6           in effect on June 28, 2007.

7           “(I) NOTICE OF AVAILABILITY.—A State  
8           shall—

9                   “(i) include on any application or en-  
10                   rollment form for child health assistance a  
11                   notice of the availability of premium assist-  
12                   ance subsidies for the enrollment of tar-  
13                   geted low-income children in qualified em-  
14                   ployer sponsored coverage;

15                   “(ii) provide, as part of the applica-  
16                   tion and enrollment process under the  
17                   State child health plan, information de-  
18                   scribing the availability of such subsidies  
19                   and how to elect to obtain such a subsidy;  
20                   and

21                   “(iii) establish such other procedures  
22                   as the State determines necessary to en-  
23                   sure that parents are informed of the  
24                   availability of such subsidies under the  
25                   State child health plan.”.

1 (b) APPLICATION TO MEDICAID.—Section 1906 of  
2 the Social Security Act (42 U.S.C. 1396e) is amended by  
3 inserting after subsection (c) the following:

4 “(d) The provisions of section 2105(c)(9) shall apply  
5 to a child who is eligible for medical assistance under the  
6 State plan in the same manner as such provisions apply  
7 to a targeted low-income child under a State child health  
8 plan under title XXI. Section 1902(a)(34) shall not apply  
9 to a child who is provided a premium assistance subsidy  
10 under the State plan in accordance with the preceding sen-  
11 tence.”.

12 **SEC. 9. TREATMENT OF UNBORN CHILDREN.**

13 (a) CODIFICATION OF CURRENT REGULATIONS.—  
14 Section 2110(c)(1) of the Social Security Act (42 U.S.C.  
15 1397jj(c)(1)) is amended by striking the period at the end  
16 and inserting the following: “, and includes, at the option  
17 of a State, an unborn child. For purposes of the previous  
18 sentence, the term ‘unborn child’ means a member of the  
19 species *Homo sapiens*, at any stage of development, who  
20 is carried in the womb.”.

21 (b) CLARIFICATIONS REGARDING COVERAGE OF  
22 MOTHERS.—Section 2103 (42 U.S.C. 1397cc) is amended  
23 by adding at the end the following new subsection:

24 “(g) CLARIFICATIONS REGARDING AUTHORITY TO  
25 PROVIDE POSTPARTUM SERVICES AND MATERNAL

1 HEALTH CARE.—Any State that provides child health as-  
 2 sistance to an unborn child under the option described in  
 3 section 2110(c)(1) may—

4 “(1) continue to provide such assistance to the  
 5 mother, as well as postpartum services, through the  
 6 end of the month in which the 60-day period (begin-  
 7 ning on the last day of pregnancy) ends; and

8 “(2) in the interest of the child to be born, have  
 9 flexibility in defining and providing services to ben-  
 10 efit either the mother or unborn child consistent  
 11 with the health of both.”.

12 **SEC. 10. 50 PERCENT MATCHING RATE FOR ALL MEDICAID**  
 13 **ADMINISTRATIVE COSTS.**

14 Section 1903(a) of the Social Security Act (42 U.S.C.  
 15 1396b(a)) is amended—

16 (1) by striking paragraph (2);

17 (2) by redesignating paragraph (3)(E) as para-  
 18 graph (2) and re-locating and indenting it appro-  
 19 priately;

20 (3) in paragraph (2), as so redesignated, by re-  
 21 redesignating clauses (i) and (ii) as subparagraphs (A)  
 22 and (B), and indenting them appropriately;

23 (4) by striking paragraphs (3) and (4);

24 (5) in paragraph (5), by striking “which are at-  
 25 tributable to the offering, arranging, and fur-



1 nishing” and inserting “which are for the medical  
2 assistance costs of furnishing”;

3 (6) by striking paragraph (6);

4 (7) in paragraph (7), by striking “subject to  
5 section 1919(g)(3)(B),”; and

6 (8) by redesignating paragraphs (5) and (7) as  
7 paragraphs (3) and (4), respectively.

8 **SEC. 11. REDUCTION IN PAYMENTS FOR MEDICAID ADMIN-**  
9 **ISTRATIVE COSTS TO PREVENT DUPLICATION**  
10 **OF SUCH PAYMENTS UNDER TANF.**

11 Section 1903 of the Social Security Act (42 U.S.C.  
12 1396b) is amended—

13 (1) in subsection (a)(7), by striking “section  
14 1919(g)(3)(B)” and inserting “subsection (h)”;

15 (2) in subsection (a)(2)(D) by inserting “, sub-  
16 ject to subsection (g)(3)(C) of such section” after  
17 “as are attributable to State activities under section  
18 1919(g)”;

19 (3) by adding after subsection (g) the following  
20 new subsection:

21 “(h) REDUCTION IN PAYMENTS FOR ADMINISTRA-  
22 TIVE COSTS TO PREVENT DUPLICATION OF PAYMENTS  
23 UNDER TITLE IV.—Beginning with the calendar quarter  
24 commencing October 1, 2007, the Secretary shall reduce  
25 the amount paid to each State under subsection (a)(7) for

1 each quarter by an amount equal to  $\frac{1}{4}$  of the annualized  
2 amount determined for the Medicaid program under sec-  
3 tion 16(k)(2)(B) of the Food Stamp Act of 1977 (7 U.S.C.  
4 2025(k)(2)(B)).”.

5 **SEC. 12. EFFECTIVE DATE.**

6 (a) IN GENERAL.—Subject to subsection (b), the  
7 amendments made by this Act shall take effect as if en-  
8 acted on October 1, 2007.

9 (b) DELAY IF STATE LEGISLATION REQUIRED.—In  
10 the case of a State child health plan under title XXI of  
11 the Social Security Act or a waiver of such plan under  
12 section 1115 of such Act which the Secretary of Health  
13 and Human Services determines requires State legislation  
14 (other than legislation appropriating funds) in order for  
15 the plan or waiver to meet the additional requirements im-  
16 posed by the amendments made by this Act, the State  
17 child health plan or waiver shall not be regarded as failing  
18 to comply with the requirements of such title XXI solely  
19 on the basis of its failure to meet such additional require-  
20 ments before the first day of the first calendar quarter  
21 beginning after the close of the first regular session of the  
22 State legislature that begins after the date of the enact-  
23 ment of this Act. For purposes of the previous sentence,  
24 in the case of a State that has a 2-year legislative session,

1 each year of such session shall be deemed to be a separate  
2 regular session of the State legislature.

3 (c) CONTINGENT EFFECTIVE DATE FOR SCHIP  
4 FUNDING FOR FISCAL YEAR 2008.—Notwithstanding any  
5 other provision of law, if funds are appropriated under any  
6 law (other than this Act) to provide allotments to States  
7 under title XXI of the Social Security Act for all (or any  
8 portion) of fiscal year 2008—

9 (1) any amounts that are so appropriated that  
10 are not so allotted and obligated before the date of  
11 the enactment of this Act are rescinded; and

12 (2) any amount provided for such title XXI al-  
13 lotments to a State under this Act (and the amend-  
14 ments made by this Act) for such fiscal year shall  
15 be reduced by the amount of such appropriations so  
16 allotted and obligated before such date.

**Calendar No. 412**

110<sup>TH</sup> CONGRESS  
1<sup>ST</sup> Session

**S. 2152**

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**A BILL**

To amend title XXI of the Social Security Act to reauthorize the State Children's Health Insurance Program through fiscal year 2012, and for other purposes

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OCTOBER 5, 2007

Read the second time and ordered to be placed on the calendar.