

118TH CONGRESS  
2D SESSION

# H. R. 10096

To amend title XIX of the Social Security Act to ensure access to immunizations under the Medicaid program and the Vaccines for Children program, and for other purposes.

---

## IN THE HOUSE OF REPRESENTATIVES

NOVEMBER 1, 2024

Ms. SCHRIER (for herself and Mr. JOYCE of Pennsylvania) introduced the following bill; which was referred to the Committee on Energy and Commerce

---

## A BILL

To amend title XIX of the Social Security Act to ensure access to immunizations under the Medicaid program and the Vaccines for Children program, 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 “Strengthening the Vac-

5       cines for Children Program Act of 2024”.

1     **SEC. 2. ENSURING ACCESS TO IMMUNIZATIONS UNDER THE**  
2                 **MEDICAID PROGRAM AND THE VACCINES**  
3                 **FOR CHILDREN PROGRAM.**

4     (a) ENCOURAGING INVOLVEMENT OF PROVIDERS.—

5     Paragraph (3) of section 1928(c) of the Social Security

6     Act (42 U.S.C. 1396s(c)) is amended—

7                 (1) by redesignating subparagraphs (A) and  
8                 (B) as clauses (i) and (ii), respectively, and moving  
9                 the margins of each such clause, as so redesignated,  
10                 2 ems to the right;

11                 (2) by striking “PROVIDERS” and all that fol-  
12                 lows through “Each program” and inserting “PRO-  
13                 VIDERS.—

14                 “(A) IN GENERAL.—Each program”; and

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

16                 “(B) INCENTIVE PAYMENTS.—

17                 “(i) IN GENERAL.—

18                 “(I) PAYMENT FOR PROGRAM-  
19                 REGISTERED PROVIDERS.—The Sec-  
20                 retary shall pay to each provider that  
21                 requests payment under this subclause  
22                 and that is a program-registered pro-  
23                 vider under this section as of the date  
24                 of the enactment of this subparagraph  
25                 an amount equal to \$7,500, to be paid

1                   as soon as practicable after such date  
2                   of enactment.

3                   “(II) ADDITIONAL PAYMENT TO  
4                   INCENTIVIZE CONTINUED PARTICIPA-  
5                   TION.—The Secretary shall pay to  
6                   each provider that requests payment  
7                   under this subclause and that is a  
8                   program-registered provider under  
9                   this section for the duration of the pe-  
10                  riod beginning on the date of the en-  
11                  actment of this subparagraph and  
12                  ending on December 31, 2026, and  
13                  amount equal to \$2,500, to be paid as  
14                  soon as practicable after January 1,  
15                  2027.

16                  “(ii) USE OF FUNDS.—Payments  
17                  made under clause (i) may only be used by  
18                  a provider for purposes of carrying out the  
19                  program under this section (including any  
20                  operational expenses associated with the  
21                  furnishing of immunizations under such  
22                  program, as specified by the Secretary).

23                  “(iii) RECOUPMENT OF PAYMENTS.—  
24                  The Secretary may conduct reviews of pro-  
25                  viders receiving payments under this sub-

1           paragraph to ensure that such payments  
2           are used in accordance with clause (ii) and  
3           recoup from such providers any such pay-  
4           ments not so used in accordance with such  
5           clause.”.

6         (b) EXPANSION OF DEFINITION OF FEDERALLY VAC-  
7         CINE-ELIGIBLE CHILD.—Paragraph (2) of section  
8         1928(b) of the Social Security Act (42 U.S.C. 1396s(b))  
9         is amended—

10           (1) in subparagraph (A)—  
11              (A) in clause (iii), by striking “A child  
12              who” and all that follows through the period at  
13              the end and inserting “A child who is adminis-  
14              tered a qualified pediatric vaccine and is not in-  
15              sured with respect to such vaccine.”; and

16              (B) by adding at the end the following new  
17              clause:

18                  “(v) A child who is enrolled for child  
19                  health assistance under a State child  
20                  health plan approved under title XXI.”;  
21                  and

22              (2) in subparagraph (B)(ii)(II), by striking “for  
23              purposes of subparagraph (A)(iii)(II)” and inserting  
24              “for purposes of subparagraph (A)(iii)”.

1           (c) MINIMUM PAYMENT REQUIREMENT FOR VACCINE

2 ADMINISTRATION AND COUNSELING SERVICES.—

3           (1) IN GENERAL.—Section 1902(a)(13) of the  
4 Social Security Act (42 U.S.C. 1396a(a)(13)) is  
5 amended—

6               (A) in subparagraph (B), by striking

7               “and” at the end;

8               (B) in subparagraph (C), by striking the  
9 semicolon and inserting “; and”; and

10              (C) by adding at the end the following new  
11 subparagraph:

12               “(D) for payment for vaccine administra-  
13 tion and counseling services furnished by a pro-  
14 vider during the period beginning on the date of  
15 the enactment of this subparagraph, and ending  
16 on December 31, 2026 (including, notwithstanding  
17 subsection (c)(2)(C)(ii) of section  
18 1928, any such services furnished with respect  
19 to a vaccine furnished under the program estab-  
20 lished by the State pursuant to such section to  
21 a medicaid-eligible child (as defined in sub-  
22 section (b)(2)(B)(i) of such section)), at a rate  
23 not less than 100 percent of the payment rate  
24 that applies to such services and provider under  
25 part B of title XVIII;”.

1                             (2) MANAGED CARE PLANS.—Section 1932(f)  
2 of the Social Security Act (42 U.S.C. 1396u–2(f)) is  
3 amended—

4                             (A) in the header, by striking “PAYMENT  
5 FOR PRIMARY CARE SERVICES” and inserting  
6 “PAYMENTS”; and

7                             (B) by striking “section 1902(a)(13)(C)”  
8 and inserting “subparagraph (C) of section  
9 1902(a)(13) and vaccine administration and  
10 counseling services described in subparagraph  
11 (D) of such section”; and

12                             (C) by striking “such section” and insert-  
13 ing “such subparagraph (C) or (D), respec-  
14 tively”; and

15                             (D) by adding at the end the following new  
16 sentence: “The provisions of the preceding sen-  
17 tence shall apply to contracts entered into with,  
18 and payments made by, other specified entities  
19 (as defined in section 1903(m)(9)(D)(iii)) in the  
20 same manner as such provisions apply with re-  
21 spect to contracts entered into with, and pay-  
22 ments made by, medicaid managed care organi-  
23 zations.”.

(3) CHIP.—Section 2103(c) of the Social Security Act (42 U.S.C. 1397cc(c)) is amended by adding at the end the following new paragraph:

4                     “(11) VACCINE ADMINISTRATION SERVICES.—  
5       The child health assistance provided to a targeted  
6       low-income child shall include payment for vaccine  
7       administration and counseling services furnished by  
8       a provider during the period beginning on the date  
9       of the enactment of this paragraph, and ending on  
10      December 31, 2026 (including, notwithstanding sub-  
11      section (c)(2)(C)(ii) of section 1928, any such serv-  
12      ices furnished to such child with respect to a vaccine  
13      furnished under the program established by the  
14      State pursuant to such section), at a rate not less  
15      than 100 percent of the payment rate that applies  
16      to such services and provider under part B of title  
17      XVIII.”.

18 (d) CLARIFICATION OF COVERAGE OF PEDIATRIC  
19 VACCINE ADMINISTRATION AND VACCINE COUNSELING  
20 AND EDUCATIONAL SERVICES UNDER THE VACCINES FOR  
21 CHILDREN PROGRAM.—Section 1928(c)(2)(C)(ii) of the  
22 Social Security Act (42 U.S.C. 1396s(c)(2)(C)(ii)) is  
23 amended to read as follows:

“(ii) The provider may impose—

1                     “(I) in the case of a qualified pedi-  
2                     atric vaccine not described in subclause  
3                     (II), a fee for the administration of and  
4                     counseling for such vaccine so long as the  
5                     fee in the case of a federally vaccine-eli-  
6                     gible child does not exceed the costs of such  
7                     administration and counseling (as deter-  
8                     mined by the Secretary based on actual re-  
9                     gional costs for such administration and  
10                     counseling and updated as determined ap-  
11                     propriate by the Secretary to take into ac-  
12                     count changes in such costs, including  
13                     changes attributable to the inclusion of  
14                     new qualified pediatric vaccines in the pro-  
15                     gram established under this section); and

16                     “(II) in the case of a qualified pedi-  
17                     atric vaccine that is a multiple component  
18                     vaccine, a separate charge for the adminis-  
19                     tration of and counseling for each compo-  
20                     nent of such vaccine so long as the charge  
21                     in the case of a federally vaccine-eligible  
22                     child does not exceed—

23                     “(aa) with respect to the first  
24                     component of such vaccine, the costs  
25                     of such administration and counseling

for such component (as determined by the Secretary based on actual regional costs for such administration and counseling for such first component and updated as determined appropriate by the Secretary to take into account changes in such costs, including changes attributable to the inclusion of new qualified pediatric vaccines in the program established under this section); and

18 (e) INCREASE IN FEDERAL MEDICAL ASSISTANCE  
19 PERCENTAGE.—

(1) IN GENERAL.—Subject to paragraph (2), for each calendar quarter occurring during the period beginning on or after January 1, 2025, the Federal medical assistance percentage determined for each State, including the District of Columbia, American Samoa, Guam, the Commonwealth of the

1       Northern Mariana Islands, Puerto Rico, and the  
2       United States Virgin Islands, under section 1905(b)  
3       of the Social Security Act (42 U.S.C. 1396d(b)),  
4       after application of section 6008 of the Families  
5       First Coronavirus Response Act (Public Law 116–  
6       127) (if applicable), shall be increased by 1 percent-  
7       age point.

8                 (2) REQUIREMENTS.—

9                     (A) IN GENERAL.—A State described in  
10          paragraph (1) may not receive the increase de-  
11          scribed in such paragraph in the Federal med-  
12          ical assistance percentage for such State, with  
13          respect to a quarter, if such State does not en-  
14          sure culturally competent and effective mes-  
15          sages for vaccination outreach to child popu-  
16          lations, which may include the dissemination of  
17          information highlighting—

18                         (i) advancements in research and vac-  
19                         cine development that have saved millions  
20                         of individuals from death and disability  
21                         from now-preventable diseases;

22                         (ii) information on how individuals  
23                         across the lifespan benefit from immuniza-  
24                         tions, including those who cannot be vac-  
25                         cinated and rely on community immunity;

5 (iv) information on vaccine safety and  
6 the systems in place to monitor vaccine  
7 safety.

24 (f) TRIBAL EPIDEMIOLOGY CENTER DATA AC-  
25 CESS.—With respect to data access for tribal epidemiology

1 centers established under section 214 of the Indian Health  
2 Care Improvement Act (25 U.S.C. 1621m), the Director  
3 of the Centers for Disease control and Prevention may cre-  
4 ate a data sharing strategy that ensures such centers have  
5 access to data, data sets, monitoring systems, delivery sys-  
6 tems, and other protected health information with respect  
7 to health care and public health surveillance systems of  
8 child and adolescent health necessary to accomplish such  
9 centers' public health authority responsibilities described  
10 in such section or section 164.501 of title 45, Code of Fed-  
11 eral Regulations.

12 (g) REPORTS.—

13 (1) IN GENERAL.—For each of fiscal years  
14 2025 and 2026, the Director of the Centers for Dis-  
15 ease Control and Prevention, in coordination with  
16 each State that has established a pediatric vaccine  
17 distribution program under section 1928 of the So-  
18 cial Security Act (42 U.S.C. 1396s), shall publish on  
19 the public internet website of the Centers for Dis-  
20 ease Control and Prevention, in such manner as de-  
21 termined appropriate by the Director, information  
22 on vaccination rates under each such program dur-  
23 ing such year, including such rates disaggregated by  
24 region, age, sex, race, ethnicity, and other demo-

1       graphic factors determined appropriate by the Direc-  
2       tor.

3                     (2) EFFECTS ON VACCINATION RATES AND PRO-  
4       GRAM PARTICIPATION.—Not later than 2 years after  
5       the date of the enactment of this Act, the Comptroller  
6       General of the United States shall submit to  
7       Congress a report containing an analysis of the ef-  
8       fects of the provisions of, and the amendments made  
9       by, this Act on—

10                  (A) vaccination rates under the pediatric  
11       vaccine distribution program under section  
12       1928 of the Social Security Act (42 U.S.C.  
13       1396s); and

14                  (B) provider participation in such pro-  
15       gram.

○