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3 Title: Permanent Federal Funding for the Children's Health Insurance Program
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5 Introduced by: Sam Schuiteman for the Medical Student Section and Joseph Nnodim, MD, for
6 the Washtenaw County Delegation
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10 Referred to: Reference Committee B
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12 House Action: **APPROVED**
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14
15 Whereas, the American Medical Association (AMA) supports health insurance coverage for all
16 children as a national priority^{1,2}, and
17

18 Whereas, enacted in 1998, the Children's Health Insurance Program (CHIP) provides
19 comprehensive health care insurance to over 8.9 million children and 360,000 pregnant women across
20 the country, including 86,000 children in Michigan³, and
21

22 Whereas, the purpose of CHIP is to provide health insurance to children from socioeconomically
23 disadvantaged backgrounds, given that qualifying children live in families that earn too much to qualify
24 for Medicaid but not enough to afford private health insurance⁴, and
25

26 Whereas, the proportion of uninsured children dropped from 15 percent to 9 percent of all
27 children since CHIP's establishment in 1997, and the percentage of uninsured low-income children fell
28 from 25 percent to 13 percent⁵, and
29

30 Whereas, children in CHIP have better access to care, fewer unmet needs, better educational
31 performance, and greater financial protection compared to when they were uninsured⁵, and
32

33 Whereas, CHIP is jointly funded by both state and federal governments, and since passage of the
34 Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) at least 88 percent of the cost in each
35 state has been covered by the federal government^{6,7}, and
36

37 Whereas, federal funding for CHIP expired on September 30, 2017, and stable funding was not
38 restored until January 23, 2018⁸, and
39

40 Whereas, during this lapse in funding, 14 states planned on freezing, phasing out, or terminating
41 coverage for children once their funds ran out, which would have left 611,052 children without health
42 insurance on February 1, 2018⁹, and
43

44 Whereas, during previous state freezes in CHIP enrollment, affected children went almost entirely
45 without access to health care services and families faced financial hardship^{10,11}, and
46

47 Whereas, a permanent extension of CHIP would prevent these vulnerable populations from going
48 without access to health care, and
49

50 Whereas, federal funding for CHIP expired because of political arguments unrelated to health
51 care, and

52 Whereas, elected officials used the reinstatement of funding as a political bargaining chip, and a
53 permanent extension would prevent CHIP from being inappropriately used in future political
54 arguments¹², and
55

56 Whereas, long-term funding of CHIP saves money for state and federal governments, evidenced
57 by the Congressional Budget Office's official estimates stating that a five-year CHIP extension would cost
58 \$800 million but a 10-year extension would actually save \$6 billion¹³, and
59

60 Whereas, despite CHIP's current authorization lasting for 10 years, multiple United States Senators
61 have advocated for a permanent reauthorization of CHIP, which would save money for state and federal
62 governments, as well as provide certainty to those governments and the families who need it; therefore
63 be it
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65 RESOLVED: That MSMS reaffirms its support of the Children's Health Insurance Program and
66 oppose its termination in Michigan regardless of federal funding status; and be it further
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68 RESOLVED: That the Michigan Delegation to the American Medical Association (AMA) ask our
69 AMA to lobby the United States Congress for a permanent reauthorization of the Children's Health
70 Insurance Program.
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73 WAYS AND MEANS COMMITTEE FISCAL NOTE: NONE

Relevant MSMS Policy:

Denial of Medical Care to Indigents

Indigents should not be denied medical care that is available to the remainder of society. (Prior to 1990)
– Edited 1998

Government Financed Health Care

The only purpose of government medical care programs for indigent patients is the delivery of needed quality health care.

(Prior to 1990)

– Edited 1998

Relevant AMA Policy:

Medicaid Waivers and Maintenance of Effort Requirements H-290.969

Our AMA opposes any efforts to repeal the Medicaid maintenance of effort requirements in the ACA and American Recovery and Reinvestment Act (ARRA), which mandate that states maintain eligibility levels for all existing adult Medicaid beneficiaries until 2014 and for all children in Medicaid and the Children's Health Insurance Program (CHIP) until 2019.

Expanding Enrollment for the State Children's Health Insurance Program (SCHIP) H-290.971

Our AMA continues to support:

- a. health insurance coverage of all children as a strategic priority;
- b. efforts to expand coverage to uninsured children who are eligible for the State Children's Health Insurance Program (SCHIP) and Medicaid through improved and streamlined enrollment mechanisms;
- c. the reauthorization of SCHIP in 2007; and
- d. supports the use of enrollment information for participation in the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and/or the federal school lunch assistance program as documentation for SCHIP eligibility in order to allow families to avoid duplication and the cumbersome process of re-documenting income for child health coverage.

Enhanced SCHIP Enrollment, Outreach, and Reimbursement H-290.976

1. It is the policy of our AMA that prior to or concomitant with states' expansion of State Children's Health Insurance Programs to adult coverage, our American Medical Association urge all states to maximize their efforts at outreach and enrollment of SCHIP eligible children, using all available state and federal funds.
2. Our AMA affirms its commitment to advocating for reasonable SCHIP and Medicaid reimbursement for its medical providers, defined as at minimum 100% of RBRVS Medicare allowable.

State Children's Health Insurance Program Reauthorization (SCHIP) D-290.982

1. Our AMA strongly supports the State Children's Health Insurance Program reauthorization and will lobby toward this end.
2. Our AMA will lobby Congress to:
 - a. provide performance-based financial assistance for new coverage costs with expanded coverage of uninsured children through SCHIP through an enhanced federal match;
 - b. allow states to use SCHIP funds to augment employer-based coverage;
 - c. allow states to explicitly use SCHIP funding to cover eligible pregnant women;
 - d. allow states the flexibility to cover all eligible children residing in the United States and pregnant women through the SCHIP program without a mandatory waiting period;
 - e. provide \$60 billion in additional funding for SCHIP to ensure adequate funding of the SCHIP program and incentivize states to expand coverage to qualified children, and support incentives for physicians to participate; and
 - f. ensure predictable funding of SCHIP in the future.
3. Our AMA will urge Congress to provide targeted funding for SCHIP enrollment outreach.

Protecting Children, Adolescents and Young Adults in Medicaid and the State Children's Health Insurance (SCHIP) Program D-290.985

Our AMA will actively: (1) encourage state and county medical societies to advocate for initiatives to ensure that all eligible children, adolescents, and young adults are enrolled in Medicaid and SCHIP; (2) advocate for federal and state funding for Medicaid and SCHIP so that funding is sufficient to support enrollment of and provision of necessary services to all eligible children, adolescents, and young adults; and (3) encourage state and county medical societies to work to ensure that services to children, adolescents, and young adults meet Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Standards.

¹ American Medical Association. (2014) "Expanding Health Enrollment for the State Children's Health Insurance Program." Available at <https://policysearch.ama-assn.org/policyfinder/detail/children's%20health%20insurance%20program?uri=%2FAMADoc%2FHOD.xml-0-2129.xml>.)

² American Medical Association. (2014) "State Children's Health Insurance Program Reauthorization." Available at <https://policysearch.ama-assn.org/policyfinder/detail/children's%20health%20insurance%20program?uri=%2FAMADoc%2Fdirectives.xml-0-785.xml>.

³ Kaiser Family Foundation. (2018) "Number of Children Ever Enrolled in CHIP Annually." Available at <https://www.kff.org/other/state-indicator/annual-chip-enrollment/?currentTimeframe=0&sortModel=%7B%22colld%22:%22Location%22,%22sort%22:%22asc%22%7D>.

⁴ Healthcare.gov. (2018) "Children's Health Insurance Program." Available at <https://www.healthcare.gov/glossary/childrens-health-insurance-program-chip/>.

⁵ Mathematica Policy Research Urban Institute. (2014) "CHIPRA Mandated Evaluation of the Children's Health Insurance Program: Final Findings." Available at <https://www.medicare.gov/chip/downloads/chip-report-congress-2014.pdf>

⁶ Kaiser Family Foundation. (2017) "Extending Federal Funding for CHIP: What is at Stake?" Available at <https://www.kff.org/medicaid/fact-sheet/extending-federal-funding-for-chip-what-is-at-stake/>.)

⁷ Congress.gov. (2018) "Medicare Access and CHIP Reauthorization Act of 2015." Available at <https://www.congress.gov/bill/114th-congress/house-bill/2>.)

⁸ Kaiser Family Foundation. (2018) "Summary of the 2018 CHIP Funding Extension." Available at <https://www.kff.org/medicaid/fact-sheet/summary-of-the-2018-chip-funding-extension/>.

⁹ Kaiser Family Foundation. (2017) "State Plans for CHIP as Federal CHIP Funds Run Out." Available at <https://www.kff.org/medicaid/fact-sheet/state-plans-for-chip-as-federal-chip-funds-run-out/>.)

¹⁰ Kaiser Commission on Medicaid and the Uninsured. (2017) "The North Carolina Health Choice Enrollment Freeze of 2001." Available at <https://kaiserfamilyfoundation.files.wordpress.com/2002/12/4081-north-carolina-health-choice.pdf>.

¹¹ Kaiser Family Foundation. (2011) "The Arizona KidsCare CHIP Enrollment Freeze: How Has it Impacted Enrollment and Families?" Available at <https://www.kff.org/medicaid/issue-brief/the-arizona-kidscare-chip-enrollment-freeze-how/>.

¹² POLITICO. (2017) "Children's Health Funding Hangs in the Balance as Congress Leaves Town." Available at <https://www.politico.com/story/2017/12/21/chip-childrens-health-insurance-program-fate-253869>.

¹³ Congressional Budget Office. "Cost Estimate of Extending the Children's Health Insurance Program for 10 Years." Available at <https://www.cbo.gov/publication/53459>.