



## The *All Healthy Children Act* (H.R. 1688): An Achievable, Smart and Right Goal

**WHY ACT NOW?** Medicaid and the State Children's Health Insurance Program (SCHIP) have made tremendous progress in improving children's health insurance, currently providing coverage to over 30 million children. **Yet nine million children in America, almost 90% living in working households and a majority in two-parent families, are still uninsured.** Millions more are underinsured. Chronic budget shortfalls, often confusing enrollment processes, and dramatic variation in eligibility and coverage from state to state prevent millions of currently eligible children from living healthy and realizing their full potential in school and life. As Congress prepares to consider reauthorization of SCHIP in 2007, there is a special opportunity for our nation and leaders in all parties to take the next logical, incremental, smart and achievable step to ensure health and mental health coverage for **all** children in America as a significant down payment on health coverage for all.

**WHAT WOULD THE *ALL HEALTHY CHILDREN ACT* (H.R. 1688) DO?** It would ensure comprehensive health and mental health care for all children in America. It would simplify and consolidate children's health coverage under Medicaid and SCHIP into a single program that guarantees children in all 50 states and the District of Columbia all medically necessary services. A child's chance to survive and thrive should not depend on the lottery of geography.

### WHO WOULD BE ELIGIBLE?

- All children through age 18 with family incomes at or below 300% of the federal poverty level (\$61,950 for a family of four in 2007). Children with family incomes over 300% could buy into the program.
- Pregnant women at or below 300% of the federal poverty level would be eligible for prenatal, delivery and post-partum care for at least 60 days after birth.
- Youth who have transitioned from the foster care system through age 20, and other children with special needs.

### WHAT BENEFITS WOULD BE INCLUDED?

- All children would receive comprehensive coverage for all medically necessary care equivalent to current Medicaid benefits.

### WHAT WOULD BE THE COST FOR FAMILIES?

- Children in families with incomes at or below 200% of the federal poverty level (\$41,300 for a family of four in 2007) would pay nothing for coverage or services.
- Children in families with incomes between 201% and 300% of the federal poverty level would have no premiums for coverage and would have nominal co-payments for service.
- Children in families with incomes over 300% of the federal poverty level would pay both premiums for coverage and some affordable amount for services.

### HOW WOULD THE *ALL HEALTHY CHILDREN ACT* (H.R. 1688) STREAMLINE ENROLLMENT?

- All children currently enrolled in Medicaid or SCHIP would be enrolled automatically.
- All children currently receiving services under certain federal assistance programs like school lunch and food stamps would be enrolled automatically with an opportunity for families to "opt out."
- All parents would also have the option to enroll their child at birth, school registration, or issuance of a Social Security card.
- Applications would be short and simple to complete, and obstacles to enroll and stay enrolled would be eliminated.

**WHAT WOULD BE THE COST TO STATES?** States would incur no additional cost for expanding coverage and enhancing benefits or for increased provider reimbursement rates. Those costs would be borne by the federal government.

### OTHER KEY PROVISIONS OF THE *ALL HEALTHY CHILDREN ACT* (H.R. 1688)

- All eligible children would be guaranteed coverage under this program regardless of their state of residence.
- To improve children's access to health and mental health services, payment to health care providers would be increased at least 80% of private insurance payment rates (approximately the same level as Medicare).