

111TH CONGRESS
1ST SESSION

H. R. 2859

To amend title XIX of the Social Security Act to provide for application of an enhanced Federal matching rate for children under the Medicaid Program if certain conditions are met.

IN THE HOUSE OF REPRESENTATIVES

JUNE 12, 2009

Ms. MATSUI 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 provide for application of an enhanced Federal matching rate for children under the Medicaid Program if certain conditions are met.

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 Med-
5 icaid for America’s Children Act of 2009”.

1 **SEC. 2. ENHANCED FMAP FOR CHILDREN UNDER MED-**
2 **ICAID.**

3 (a) IN GENERAL.—Section 1905 of the Social Secu-
4 rity Act (42 U.S.C. 1396d) is amended—

5 (1) in subsection (b), by inserting “and sub-
6 section (y)” after “section 1933(d),”; and

7 (2) by adding at the end the following new sub-
8 section:

9 “(y) **CONDITIONS-BASED ENHANCED FMAP FOR**
10 **CHILDREN.**—

11 “(1) IN GENERAL.—Subject to paragraph (4),
12 in the case of a State that meets the requirements
13 of paragraph (2) with respect to a quarter and that
14 implements at least 3 of the policies described in
15 paragraph (3)(B) for the quarter under the State
16 plan under this title, the Federal medical assistance
17 percentage applicable with respect to expenditures
18 made for medical assistance for children shall be in-
19 creased by the percentage (specified in paragraph
20 (3)(A)) of the number of percentage points by
21 which—

22 “(A) the enhanced FMAP (as defined in
23 section 2105(b)), exceeds

24 “(B) the Federal medical assistance per-
25 centage otherwise applicable.

1 “(2) MAINTENANCE-OF-EFFORT REQUIRE-
2 MENTS.—The requirements of this paragraph with
3 respect to a State for a quarter are that the State
4 must agree to the following two maintenance-of-ef-
5 fort requirements:

6 “(A) An amount equivalent to the aggre-
7 gate State general revenue funds being applied
8 as of July 1, 2008, under this title for purposes
9 of obtaining Federal financial participation
10 under this title for medical assistance furnished
11 to children must remain invested in health care
12 programs and services for children and avail-
13 able to supplement (and not supplant) program
14 funding, with priority given to increasing reim-
15 bursement rates for providers and coverage ex-
16 pansion.

17 “(B) To maintain eligibility, methods,
18 standards, procedures, and provider rates appli-
19 cable to children under this title at levels not
20 less than the levels in effect as of July 1, 2008.

21 “(3) SCALING OF INCREASE BASED ON DEGREE
22 OF IMPLEMENTATION OF POLICIES.—

23 “(A) PERCENTAGE SPECIFIED.—For pur-
24 poses of paragraph (1), in the case of a State
25 that implements—

1 “(i) at least 6 of the policies described
2 in subparagraph (B) for a calendar quar-
3 ter, the percentage under this subpara-
4 graph is 100 percent;

5 “(ii) 5 of such policies, the percentage
6 under this paragraph is 75 percent; or

7 “(iii) fewer than 4 (but no less than
8 3) of such policies, the percentage under
9 this paragraph is 50 percent.

10 “(B) POLICIES DESCRIBED.—The policies
11 described in this subparagraph are as follows
12 (as more fully specified by the Secretary):

13 “(i) The State has implemented 12-
14 month continuous coverage for children for
15 medical assistance under this title.

16 “(ii) Children leaving foster care on
17 their 18th birthday may maintain eligi-
18 bility for medical assistance under this title
19 up to the age of 23 if they are attending
20 college full- or part-time.

21 “(iii) As a condition of eligibility for
22 children under section 1902(l), the State
23 does not apply an asset test or applies a
24 simplified asset verification system.

1 “(iv) The State does not require a
2 face-to-face interview as a condition of eli-
3 gibility for children for medical assistance
4 under this title.

5 “(v) The State permits renewals of
6 eligibility for children for medical assist-
7 ance under this title to be effected admin-
8 istratively or through an ex parte process.

9 “(vi) The State permits a joint appli-
10 cation for medical assistance under this
11 title and for child health assistance under
12 title XXI with the same information
13 verification process to obtain assistance
14 under this title or title XXI.

15 “(vii) The State has implemented
16 under this title and title XXI presumptive
17 eligibility for children described in section
18 1920A.

19 “(viii) The State has implemented the
20 Express Lane eligibility option under sec-
21 tion 1902(e)(13).

22 “(ix) The State provides for coordina-
23 tion of delivery of care for children for
24 which medical assistance is available under

1 this title through a medical home or simi-
2 lar model.

3 “(4) LIMITATION.—This subsection shall not
4 apply for any calendar quarter for a State for which
5 the State may be eligible for an increase in FMAP
6 under section 5001 of division B of the American
7 Recovery and Reinvestment Act (Public Law 111–
8 5).

9 “(5) CHILDREN DEFINED.—In this subsection,
10 the term ‘children’ means an individual who is under
11 21 years of age.”.

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