

For more information on this topic, contact Lisa Shapiro, (LisaS@firstfocus.net; 202.657.0675) or or Catherine Hodgetts, (CatherineH@firstfocus.net; 202.657.0681).

## CHILD HEALTH

## What the Passage of Health Reform Means for Children

On March 23, 2010, President Obama signed into law comprehensive health reform legislation, the Patient Protection and Affordable Care Act (Pub. L. No. 111-148). This historic measure moves America closer to universal health coverage for children. First Focus applauds the leadership of President Obama and Congress in this momentous step to protect and improve the health and well-being of America's children.

In a significant victory for children, the health reform law preserves and extends the successful Children's Health Insurance Program (CHIP) through September 30, 2019 with full funding extended through fiscal year 2015. Preserving CHIP helps to ensure that low-income children continue to receive affordable, comprehensive, high-quality health coverage.

The new law contains many other provisions that will significantly improve health care access, coverage, quality and outcomes for all children in America, including:

- No more pre-existing condition exclusions. The law ensures that, starting six months from enactment, no child can be denied health care coverage based on a pre-existing condition.
- Simplified enrollment measures. The law requires streamlined enrollment for all Americans under Medicaid, CHIP and in the "health insurance exchanges" created by the legislation.
- Extended dependent coverage. Beginning six months after enactment, the law allows dependent children to stay on their parents' health plan up to age 26.
- More affordability for low-income families in the new exchanges. Starting in 2014, the law
  provides refundable and advanceable premium credits to families with incomes between 133-400%
  of the federal poverty level to buy insurance through the exchanges.
- Elimination of lifetime limits. Effective six months from enactment, insurers may no longer place lifetime limits on the dollar value of coverage. Beginning in 2014, insurers may not impose annual limits on coverage.
- Extended Medicaid for foster youth. The law extends, in 2014, Medicaid coverage to all foster youth below the age of 25 who were formerly in foster care for a period of six months, or more.
- Expanded Medicaid eligibility. In 2014, the law expands Medicaid to all individuals under age 65 with incomes up to 133% of the federal poverty level.
- Federal fiscal support for states. The law ensures additional federal fiscal support to state Medicaid and CHIP programs, ensuring that access to coverage is improved for low-income children.
- Home visiting. The law provides funding for states to develop and implement evidence-based maternal, infant and early childhood visitation models.
- School-based health. The law creates a federal authorization program and provides \$200 million in short-term funding for school-based health centers.



- Public health. The law establishes a Prevention and Public Health Investment Fund to subsidize and sustain prevention and public health programs.
- Oral health. The law creates an oral health prevention campaign, dental carries disease
  management, school-based dental sealant programs and cooperative agreements to improve
  infrastructure and surveillance systems.
- Bright Futures. The law requires that new health plans cover, at no cost, comprehensive screenings
  and preventative care for children as defined by the "Bright Futures" standards issued by the
  American Academy of Pediatrics.
- Coverage of preventive health services. The legislation ensures coverage for obesity screening and intensive counseling by requiring insurers to cover services that have received an "A" or "B" rating from the United States Preventive Services Task Force (USPSTF), such as intensive counseling on nutrition, physical activity and behavioral interventions for obese patients.
- Childhood obesity demonstration project. Authorized by Congress in the CHIP reauthorization in 2009, the legislation appropriates \$25 million for a demonstration project to reduce childhood obesity.
- Child-only coverage option in the new exchanges. The legislation allows families to purchase child-only insurance packages in the exchanges, ensuring that children being cared for by grandparents, children with parents whose employers do not offer dependent coverage, and children in mixed immigrant-status households are able to access coverage.

