

## HOUSE JOINT RESOLUTION NO. 183

*Requesting the Joint Commission on Health Care, with the assistance of the Secretary of Health and Human Resources and the Maternal and Child Health Council, to study the issues impacting universal access to health care for Virginia's uninsured children and the extent to which current initiatives should be expanded or revised to ensure that such access exists.*

Agreed to by the House of Delegates, February 10, 1994

Agreed to by the Senate, February 28, 1994

WHEREAS, over 200,000 children in Virginia, one out of every seven, live in families who cannot afford basic health care; and

WHEREAS, nationally, the number of children without health insurance has increased 40 percent in 14 years, and approximately 11 million children in the United States currently have no health insurance; and

WHEREAS, poor health care affects children in all Virginia communities, cities, rural areas, and affluent suburbs where over 13 percent of all children are uninsured; and

WHEREAS, the national debate on health care reform encompasses the goal of universal access to health care for all citizens, with a special emphasis on children, and proposals currently under consideration include various models for achieving this goal; and

WHEREAS, in 1990, the Governor established a Child Health Task Force to review the needs of these 200,000 uninsured children in Virginia and, based on its recommendations, the 1992 General Assembly approved expanded coverage to include an additional 30,000 children between the ages of five and eighteen with incomes of up to 100 percent of the federal poverty level under Virginia's Medicaid program; and

WHEREAS, the 1992 General Assembly also appropriated \$3.4 million effective July 1, 1993, to implement a modified insurance program for the approximately 6,000 children under one year of age in families with incomes between 133 percent and 200 percent of the federal poverty level; and

WHEREAS, the Secretary of Health and Human Resources was directed to work with the Joint Commission on Health Care to identify the appropriate service delivery model for the child health initiative; and

WHEREAS, in response to the General Assembly's mandate, the Secretary of Health and Human Resources and the Child Health Task Force recommended that the modified health insurance program include core preventive and primary care services, that the Department of Medical Assistance Services serve as the central administering agency to contract with a third party for administration and service delivery, that the administrative services be provided at no cost to the Commonwealth, and that public and private partnerships with existing providers be maximized to the extent possible; and

WHEREAS, the Department of Medical Assistance Services contracted with the Virginia Caring Program, Inc., a not-for-profit subsidiary of Blue Cross and Blue Shield of Virginia, to implement the modified insurance product for these approximately 6,000 infants of up to one year of age, and beginning in November of 1993, the program, Kids Care, began to enroll children; and

WHEREAS, the Department of Medical Assistance Services is seeking a waiver for federal matching funds from the Health Care Financing Administration in order to expand the Kids Care program to include children up to age three who are in families at 200 percent of the poverty level; and

WHEREAS, the Virginia Health Care Foundation was established to foster and encourage public and private partnerships to advance numerous local initiatives aimed at improving access to primary health care for Virginia's children; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That the Joint Commission on Health Care, in cooperation with the Secretary of Health and Human Resources, the Department of Medical Assistance Services and its contractor, the Virginia Caring Program, and with the advice of the Virginia Maternal and Child Health Council, shall evaluate (i) the impact of the expanded coverage for children under the Kids Care program; (ii) the need, if any, to modify the benefits provided under the plan; (iii) the extent to which the program should be expanded to include a larger target population and how federal funds can be maximized to support such expanded coverage; and (iv) the manner in which Virginia's expanded coverage for children can serve as a model in Virginia under any national reform calling for universal access.

The Joint Commission on Health Care shall report its findings and recommendations to the Governor and the 1995 Session of the General Assembly as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative documents.

#NS

ENROLLED

HJ183ER