



THE CHILDREN'S CHAMPION

The Children's Health Insurance Program (CHIP) has still not been reauthorized, despite the September 30 deadline. There are bills in both chambers of Congress that would renew the program funding for 5 years.

The CHAMPION Act in the House would fund CHIP at the expense of the Prevention Fund, a public health program that provides funding directly to states through the CDC. **The CHAMPION Act should be up for a vote in the House later this week.**

While Tennessee is not projected to exhaust federal funds until May 2018, this estimate is not precise. Also, having peace of mind sooner rather than later is important to the many families relying on CHIP.

Please call and email your representative to tell them that the Prevention Fund is not a good offset for CHIP. We should not defund one health program to fund another. They are both vital to the health of our nation.

QUICK LINKS

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ICYMI

- **Open enrollment is Nov. 1-Dec. 15!** With a shortened enrollment period and massive cuts to outreach and enrollment assistance funding, spreading the word is even more important. Almost [16,000 children](#) in Tennessee signed up for coverage during the last open enrollment period.
- **Although the President ended CSR payments to insurers, consumers should know that CSR subsidies and premium tax credits are still available to eligible consumers.** They should call 844-644-5443 if they have any questions.

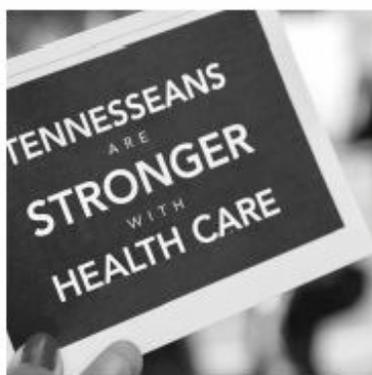


- **Our Student Ambassador Program deadline has been extended to November 30!** This program is open to students across the state. Everything will be digital except one in-person event in Nashville. Students can apply themselves or community members can nominate students. [Here is the flyer to share.](#)

TJC STUDENT AMBASSADOR PROGRAM

WE WANT YOU!

We're looking for passionate, hardworking students to help educate their peers about the importance of health care. It's an exciting opportunity to join a team and work with a local nonprofit on one of the community's most important issues!



Work with our team and help us show our neighbors how important health care is by sharing your story, using social media and teaching fellow students about the difference health insurance makes.

STUDENTS APPLY HERE.

For more info email: dcallea@tnjustice.org

COMMUNITY MEMBERS NOMINATE STUDENTS HERE.

Follow us at www.facebook.com/tnjustice

TNJUSTICE.ORG

615-255-0331

- Our Executive Director, Michele Johnson, [shares](#) her personal reason for devoting her life to fighting for children.
- [The last volume of the Children's Champion.](#)

THE MORE YOU KNOW



What are the consequences of delaying CHIP funding? Key findings from a new Georgetown CCF report:

Key Findings

- **The children most at risk of losing CHIP coverage soon are likely those who reside in states running out of funds quickly with separate CHIP programs.** At least six states—Arizona, California, the District of Columbia, Minnesota, Ohio and Oregon—are predicting they will run out of money by the end of the year or early in January. At least six other states—Colorado, Pennsylvania, Texas, Utah, Virginia, and Washington—have announced their intention to take action before the end of the year even if their funding is not running out then. While the federal government has paid out some emergency funds, the money available for redistribution won't last more than a month or two. Arizona, Colorado, Pennsylvania, Texas, and West Virginia are among states with laws that could make it hard to continue CHIP without Congressional action.
- **Predicting precisely when states will run out of money is virtually impossible. Most states operate in a capitated environment, meaning they must make per-child payments to health plans a month in advance.** This is just one of the details that complicate the assessment of when a state will run out of money. Other factors, like surges in enrollment due to a successful back-to-school outreach campaign or a hurricane, could result in a state depleting its allotment more quickly.
- **States cannot wait until they totally exhaust federal CHIP funds to take action. Program changes, including notifying families and other stakeholders, take time and money.** Colorado estimates that it will cost the state \$300,000 to turn enrollment on and off, which would further deplete remaining funds. Even states with funding lasting into early 2018—including Colorado, Texas, Virginia, Utah, and Washington—plan to send notices in November or December. Utah has already submitted a state plan amendment to close down its program to hedge against Congressional inaction. Past experience shows that even temporary enrollment freezes are likely to cause significant declines in child enrollment.
- **Delays in CHIP funding create unnecessary chaos and confusion for states and families.** Inaction by Congress costs states time and money as officials grapple with various "what if" scenarios and develop contingency plans to meet their responsibilities to notify families, managed care plans, providers, and other stakeholders of any changes to their state CHIP programs. Even if Congress eventually funds CHIP, children are likely to fall through the cracks due to the uncertainty caused by the delay in funding.

Georgetown CCF [explains](#) why projecting when states will run out

of CHIP funds is a moving target:

- How quickly states run out of their allotments depends on how quickly they incur expenditures. Events, both positive and negative, can increase enrollment, like successful back-to-school outreach campaigns or disasters like Harvey and Irma.
- States may be confused about how much money they will receive in redistribution funds and when, given that CMS has not publicly released any guidance on the redistribution.
- States may be starting to count costs they will incur preparing for the changes to CHIP eligibility, including freezing new enrollment and disenrolling children currently relying on CHIP.
- Where managed care arrangements require prepayment of capitation rates, states are factoring in the fact that they may have to back up projections a month because they will not have sufficient funding to pay health plans for the entire month in advance.

In this [KIDS COUNT policy report](#), the Annie E. Casey Foundation explores the intersection of children, opportunity, race and immigration. Some findings include:

- The median income for immigrant families with kids is 20% less than the median income for U.S.-born families.
- One in four children in immigrant families - 4.5 million kids total - lives below the federal poverty line.
- Administrative decisions threatens the status of 800,000 young people currently in the United States under the Deferred Action for Childhood Arrivals program; more than 90% of these youth are employed or enrolled in school.

LOOKING FORWARD

Federal level:

- The Alexander-Murray market stabilization efforts are still stalled, due to budget and tax legislative priorities. The Congressional Budget Office (CBO) [predicts](#) that Alexander-Murray would reduce the deficit by \$4 billion over the next 10 years.
- 18 states and DC asked the court to enter an emergency order (preliminary injunction) to continue cost-sharing reduction (CSR) payments pending a decision in the existing case about the legality of the cost-sharing reductions. [The court denied the request](#), which means that the Trump Administration can immediately stop reimbursing insurers for CSRs. Even if the court eventually rules in favor of the plaintiffs, the CSRs will have been eliminated for months. Their failure to obtain such an order means that the lawsuit's practical value is reduced, regardless of consequences of eliminating the CSRs or any action from Congress.

State level:

- We released a [policy brief](#) on the opioid epidemic in Tennessee on

10/23. On October 26, President Trump officially declared the opioid epidemic a "public health emergency", not a "national emergency" as he had earlier said he would, [which is a distinction with a difference](#).

- If you know of anyone who is currently enrolled in health insurance through Farm Bureau, please let us know by replying to this email.

JOIN US

Please take our [30-second survey](#) so that we can make sure this newsletter is providing the best information for you!

You will be entered to win a \$25 gift card to Amazon!

Upcoming projects and events:

The Department of Health Policy Presents
Research Into Policy and Practice Lecture
"Turmoil in Health Insurance Markets: What Can Be Done?"

Tuesday, November 14th, 2017
4:00-5:00 pm
Vanderbilt University School of Medicine
208 Light Hall

Featuring:
Julie Mix McPeak, JD
Commissioner, Tennessee Department of Commerce and Insurance

Reception to follow in the South Lobby for those who
RSVP to hpevents@vanderbilt.edu.
CME credit will be available.

More details can be found on our [department website](#).

Thank you to everyone who attended our Hall of Fame gala last week! We had a blast and hope you did, too!



If there is any information you would like us to share on your behalf, including events and resources, please reply to this email.

Sincerely,

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STAY CONNECTED:



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