

Withdrawal/Redaction Sheet

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. email	Marcia Brand to Barbara Woolley et al re: 6 Provider Groups Commit (partial) (2 pages)	02/19/1999	P6/b(6)
002. form	re: phone number (partial) (1 page)	n.d.	P6/b(6)
003. list	Contact list re: SSN and DOB (partial) (3 pages)	03/13/1998	P6/b(6)
004. fax	Donna Langill to Barbara Wooley re: phone number (partial) (1 page)	02/19/1999	P6/b(6)
005. list	Contact list re: SSN and DOB (partial) (3 pages)	03/13/1998	P6/b(6)

COLLECTION:

Clinton Presidential Records
 Domestic Policy Council
 Devorah Adler
 OA/Box Number: 20146

FOLDER TITLE:

CHIP [Children's Health Insurance Program] Outreach [Folder 8]

2012-0463-S

rc733

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
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RR. Document will be reviewed upon request.

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Insure Kids Now

1-877-KIDS-NOW

You love your children and work hard to help them grow up strong and healthy. But like many parents, you haven't been able to give them health insurance. Now you can do something about it because there's a new nationwide effort called **INSURE KIDS NOW**. Call our toll-free number. Don't let your kids go another day without health coverage.

Low-cost or free health insurance for kids is here now.

DRAFT - Sent to Peer

PRESIDENT CLINTON LAUNCHES NATIONWIDE "INSURE KIDS NOW" CAMPAIGN TO ENROLL UNINSURED CHILDREN IN HEALTH PROGRAMS

DRAFT: February 23, 1999

Today, the President and the First Lady, along with Governors Carper and Leavitt and Secretary Shalala, launched the nationwide "Insure Kids Now" campaign that aims to enroll every eligible but uninsured child in Medicaid and the new Children's Health Insurance Program (CHIP). About half of the 10 million uninsured children qualify for these programs but remain unenrolled. To ensure that families know that their children may be eligible, the President has engaged a broad-based, bipartisan, public-private coalition to use whatever means possible to educate and assist families in insuring their children. This includes launching a nationwide, toll-free number set up by the National Governors' Association in partnership with White House and Bell Atlantic, that allows families to get essential information; airing public service announcements on TV and radio; placing the toll-free number on corporate products; enlisting grass-roots organizations to get the word out; and stepping up activities by over 10 Federal agencies that interact with working families. Altogether, these actions will make a major contribution towards the President's goal of covering up to 5 million uninsured children.

INSURING OUR NATION'S CHILDREN

About half of all uninsured children are now eligible for Federal-State health insurance programs. In 1997, the State Children's Health Insurance Program (CHIP) was created. CHIP provides affordable health insurance to children in working families. Today, 47 states have already implemented CHIP plans and are beginning to enroll children. These states expect to enroll over 2.5 million children when their plans are fully implemented. In addition, states are working to help enroll the nearly 4 million uninsured children who are eligible for Medicaid

NEW, NATIONWIDE "INSURE KIDS NOW" OUTREACH CAMPAIGN

To encourage children's health insurance outreach, the President and First Lady have launched the "Insure Kids Now" public-private campaign. With the centerpiece being the new toll-free "1-877-KIDS NOW" number, this initiative includes an unprecedented national media campaign as well as new private and public actions to help enroll uninsured children in Medicaid and CHIP. It builds on efforts begun by the President last year, when he ordered 8 Federal agencies with their hundreds of programs serving low-income families to spread the word about children's insurance. Starting today, thanks to the toll-free number, this outreach campaign can be raised to a new level since media, corporations, and others can now spread the word nationwide.

Launching "1-877-KIDS NOW" Hotline: Today, Governors Carper and Leavitt unveiled 1-877 KIDS NOW, a new toll free number developed by the National Governors Association in partnership with Bell Atlantic and the Administration that provides state-specific information about Medicaid and CHIP to families in all 50 States. Families calling the line will speak with an person who can provide information about eligibility criteria, benefits, and how to apply for coverage. Beginning in October, HHS will assume responsibility for this line.

Running TV and radio ads on Insure Kids Now: One of the best ways to educate families is through public service announcements (PSAs) that a family hears on the radio during the day and sees on TV at night. To help surround families with information:

TELEVISION

- NBC has produced "The More You Know" PSAs on outreach that will begin to be aired on February 24 during prime time.
- ABC will run an Insure Kids Now PSA [getting details].
- Viacom/Paramount will run the Insure Kids Now PSA at 19 of their stations throughout the country, starting March 1st.
- National Association of Broadcasters, the trade association of all broadcast stations, will make the PSA available to all their members on February 22nd. Smaller stations in more rural areas will show the PSA on a routine basis.
- Univision will run an HHS-sponsored PSA in Spanish twice a day for the next six months.
- Black Entertainment Television will air the PSA for the next X months.

RADIO

- Paid radio nationwide: Today, the Department of Health and Human Services (HHS) will begin funding radio ads in 45 States and DC, starting with: California, Utah, Colorado, Alabama, Illinois, Ohio, Kentucky, North Carolina, New Jersey, Connecticut, and Maine.
- Radio Disney/ABC radio will run ads specialized for children in their 25 markets.
- Bonneville will run public service announcements from by General Powell and America's Promise will distribute these ads nationwide.

New efforts by corporations and other organizations to educate families about outreach.

Building on a series of commitments made in 1998, many more organizations have joined the Insure Kids Now Campaign. Some examples of their commitments include:

CORPORATIONS

- K-Mart will put columns on children's health outreach in the K-Mart circular that reaches more than 70 million homes; put the Insure Kids Now number on its shopping bags, diaper boxes and pharmaceutical products; put counter displays at 1,600 K-Mart pharmacies; include daily PSAs on K-Mart instore radio network; and team up with the *Children's Defense Fund* and the *March of Dimes* to set up tables and sign up kids outside stores.
- American Medical Response will put posters and have brochures available in ambulance and school buses that transport 2,000,000 students daily in 36 states.
- General Motors will put labels with the Insure Kids Now number on child safety seats that it is donating, with NAACP and La Raza, to families in low-income communities across the country.

HEALTH CARE INDUSTRY

- Blue Cross & Blue Shield Association will produce and distribute a nationwide radio public service announcement and publish print advertisement in Reader's Digest and Time.

- **Pfizer Inc** will incorporate the 1-877 message onto their patient/parent resource publication, mailings to their pediatricians, and in their Pharmacy Assistance Program. **Wyeth Lederle Vaccines** will develop handbooks, including the Insure Kids Now number, that will be distributed to more than 1,500 local community based organizations and providers.
- **American Dental Hygienists' Association** will put the Insure Kids Now number and the tag line on toothbrushes and in its Access magazine, which reaches 80,000 dental hygienists.

GRASSROOTS, RELIGIOUS AND EDUCATION ORGANIZATIONS

- **America's Promise** will continue to work with corporate partners and communities to develop local outreach initiatives. [details needed]
- **Points of Light Foundation** will publicize the Insure Kids Now number and distribute outreach material through over 60 "Connect America" nonprofit partners reaching 20 million Americans; over 450 affiliated Volunteer Centers; over 2,000 individual and organizational members; and 200 corporate members to distribute through their networks.
- **United Way of America** has committed to enrolling 500,000 eligible children in CHIP and Medicaid. It will mobilize select local United Ways (of which there are 1,400 across the country) to partner with local organizations to coordinate training for outreach volunteers to pilot the program, then expand it to approximately 30 to 50 communities across the country.
- **HOPE for Kids** will knock on 400,000 doors in 93 cities in 38 states on April 17, 1999 to educate families about Medicaid and CHIP.
- **Numerous religious groups** will distribute the Insure Kids Now number including Catholic Charities/USA, National Council of Churches of Christ, and the Council of Jewish Federations.
- **National Educational Association** will promote the Insure Kids Now number through the presidents of 14,000 local affiliates in 53 states and its magazine that goes to 2.4 million people.

New Federal efforts to promote children's health insurance outreach. The President has both legislative and administrative proposals to help enroll children in Medicaid and CHIP, including:

- **Over \$1.2 billion in his FY 2000 budget for children's health outreach**, through proposals that will help states access additional funding for successful outreach activities.
- **New actions by the Federal Task Force on children's health outreach**, including:
 - **HHS will launch new "InsureKidsNow.Gov" website today** that provides information about state programs and the Administration's public-private outreach campaign. HHS will also distribute 145,000 posters to over 20,000 health centers, providers, and other grantees.
 - **USDA will send 92,000 employees information about outreach** on March 8 on their wage and earning statements, including the national toll-free number.
 - **Department of Justice will join the outreach effort in March** by sending a letter and posters with the Insure Kids Now number to all 170 sites in Operation Weed and Feed, a crime prevention and community revitalization initiative.

THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release

February 18, 1998

PRESIDENT CLINTON ANNOUNCES A SERIES OF NEW EFFORTS
TO ENROLL UNINSURED CHILDREN IN HEALTH INSURANCE PROGRAMS

February 18, 1998

Today at the Children's National Medical Center, the President, joined by First Lady Hillary Rodham Clinton, announced new efforts designed to enroll the millions of uninsured children who are eligible for but not currently enrolled in Medicaid and other state-based children's health program. These include: (1) the first major state expansions under the recently enacted Children's Health Insurance Program (CHIP) and released findings that indicate that many States will soon follow; (2) a Presidential Directive to Federal Agencies; (3) FY1999 budget proposals that provide funding for children's health policy outreach including Medicaid enrollment incentives to States; and (4) an unprecedented set of public/private initiatives designed in partnership with Governors, health care providers, children's health advocates, foundations, businesses and many others who are committed to providing coverage for the nation's uninsured children.

Program participants include: Edwin K. Zechman, Jr., President and CEO of Children's National Medical Center; Linda Haverson, parent whose son was recently enrolled in Medicaid because of a local outreach effort; HHS Secretary Donna Shalala; First Lady Hillary Rodham Clinton; and President Clinton.

Of the more than 10 million children in America who are uninsured, over 3 million are already eligible for Medicaid. However, many families are not aware that their children are eligible for Medicaid, and others have difficulty filling out the application. Similar problems could undermine the new Children's Health Insurance Program's goal to enroll millions of uninsured children. It is with these challenges in mind, that the President today:

ANNOUNCED THAT COLORADO AND SOUTH CAROLINA HAVE JOINED ALABAMA AS THE FIRST COVERAGE EXPANSIONS UNDER THE NEW CHIP PROGRAM. Last year's Balanced Budget Agreement included a major new program to provide health insurance to the nation's children. Today, the President announced that Colorado and South Carolina join Alabama as the first states to come into the children's health program. In late January, Alabama received approval to expand its Medicaid program to children ages 14 to 18 up to 100 percent of poverty. South Carolina will expand its Medicaid program to provide coverage to all children up to 150 percent of poverty. And, Colorado builds upon its current non-Medicaid program to cover all children up to 185 percent of poverty. The President also announced that many more States are well on their way to expanding coverage to more uninsured children. In addition to the three announced today, 14 more states have submitted plans to HHS for approval, and nearly 30 States have active working groups or task forces designing plans to address the needs of uninsured children.

ISSUED A NEW PRESIDENTIAL DIRECTIVE TO LAUNCH A GOVERNMENT-WIDE EFFORT TO ENROLL UNINSURED CHILDREN. In an executive memorandum to eight Federal agencies with jurisdiction over children's programs -- the Departments of Agriculture, Interior, Education, HHS, HUD, Labor,

and Treasury, and the Social Security Administration -- the President directed the establishment of a multi-agency effort to enroll uninsured children. These agencies run programs such as WIC, Food Stamps, Head Start, and public housing that cover many of the same children who are uninsured and eligible for Medicaid or other health insurance. The memorandum instructs these agencies: (1) to identify all their employees and grantees who might come into contact with these children and ensure that these individuals are aware of the health insurance programs available to children; (2) to develop an intensive children's outreach initiative, such as distributing information, coordinating toll-free numbers, and simplifying and coordinating application forms; and (3) to report back in 90 days on their plan to help enroll uninsured children.

HIGHLIGHTED BUDGET PROPOSALS THAT PROVIDE MEDICAID ENROLLMENT INCENTIVES TO STATES. The President's FY 1999 budget invests \$900 million over five years in children's health outreach policies, including the use of schools and child care centers to enroll children in Medicaid. The budget provides States with the option of automatically enrolling children in Medicaid even before having received all of the complicated eligibility and enrollment forms (a provision known as presumptive eligibility). It also expands the use of a Federally-financed administrative fund so that it can underwrite the costs for all uninsured children * not just the limited population allowed under current law.

ANNOUNCED A HISTORIC PRIVATE SECTOR COMMITMENT TO PROVIDE OUTREACH. To complement the public outreach effort, the President announced unprecedented new contributions from the private sector to help ensure that all children who are eligible for health insurance receive it, including:

-- A new toll-free number that directs families around the nation to their state enrollment centers. The President announced that Bell Atlantic will establish and operate a toll-free number to help states enroll uninsured children. The number, which will be put in place during the upcoming months, will be used by the nation's Governors to help millions of families around the nation by directing them automatically to their local state Medicaid enrollment agency.

-- Over \$23 million in commitments from private foundations across the country. The Robert Wood Johnson Foundation will spend \$13 million over the next three years to fund innovative state-local coalitions to design and conduct outreach initiatives, simplify enrollment processes, and coordinate existing coverage programs. The Kaiser Family Foundation will spend up to \$10 million over the next five years on studies to help understand why eligible children do not enroll in existing programs and how best to provide insurance coverage for these children. America's Promise, with support from the Robert Wood Johnson Foundation and the American Academy of Pediatrics, will mobilize corporations such as SmithKline Beecham and Schering Plough and local communities nationwide in children's health outreach efforts.

-- New initiatives from corporate and advocacy organizations to reach out to uninsured children. Pampers has volunteered to include a letter in its child birth education packages, given to 90 percent of first-time mothers, giving families information about available health insurance options. Chain drug stores across the country will provide information about the new Bell Atlantic toll-free number to their customers. The National Education Association is launching an unprecedented effort to educate teachers on how they can inform children and their families about health insurance, through national newsletters, conferences, and special training sessions. The American Hospital Association's Campaign for Coverage will increase its nationwide initiative to engage hospitals in helping uninsured Americans, including children.

ISSUED A CHALLENGE ACROSS AMERICA TO FIND NEW WAYS TO REACH OUT TO UNINSURED CHILDREN. The President challenged every physician, nurse, health care provider, business, school, parent, grandparent, and community across the nation, to find new ways to ensure that uninsured children eligible for health insurance are enrolled in Medicaid or CHIP. This national commitment should not stop until every eligible child across the country is enrolled in one of the existing health care programs.

Withdrawal/Redaction Marker

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Marcia Brand at ~OA_1
11/19/99 4:57 PM

Urgent
Barbara_D._Woolley@who.eop.gov at INTERNET
Deborah_R._Adler@opd.eop.gov at INTERNET, Scott Boulé at ~OA_2,
VICKI (DHHSSMTP.VRIVASV) RIVAS-VAZQUEZ at INTERNET,
JOYCE O (HCFASMTP.JSOMSAK) SOMSAK at INTERNET

BCC: Marcia Brand
Subject: 6 Provider Groups Commit- AMA, ANA, ADA, ACEP, ACP+

Barbara - I've been trying to spare you some calls but it seems that
AMA and ANA have called you directly.

Six large provider groups are willing to make commitments. Contact and
bullet are provided for all but ANA - I'm still waiting for their
information and expect it shortly.

1. AMA -

Will try to reach the nation's 600,000 physicians by using a
multi-focused strategy:

- . promote the number in its weekly newspaper, the American Medical News
- . post information on AMA's "award-winning" website
- . use its Networks to do broadcast emails and faxes to State and county medical societies
- . use its communications directors to send information to local and specialty societies

The ultimate goal is to get the information about "insure kids now"
out to "the Federation" of all organized medicine.

Please invite:

Sandy Sherman
Assistant Director, Federal Affairs and Outreach



[001]

2. ANA -

Margaret Vanderbilt has called Barbara Wooley directly. They are thinking
about what they would like to do. Per Jocelyn Coffey (202) 651-7083.

3. ADA -

per Dorothy J. Moss (202) 789-5160

ADA has long supported programs for oral health care for poor children.
The Association is very enthusiastic about the CHIP program, ADA member
dentists donate annually almost \$4 billion in free, and discounted dental
services to people in need.

ADA is presently working with State dental societies to develop coalitions
and outreach activities in support of the CHIP program and the provision of
of dental care to needy children. ADA will host a conference in August
which will bring together dentists, state legislators, and health officials
to work together to find solutions to increasing access to children's oral
health services.

Mr. Thomas J. Spangler
Director of Legislative and Regulatory Policy, ADA
(202) 789-5179

American College of Emergency Physicians
Contact: Mary Jane Fingland (202) 728-0610 x3008

ACEP Will send information to 20,000 members through a newsletter, including how to get posters and access outreach materials through websites.

They will put this information on their website.

ACEP will include it in publications that go out to ER residents.

Invite: Dr. Michale T. Rapp, President Elect, ACEP
Phone: 703-558-6167

P6/(b)(6)

5. American College of Physicians - American Society for Internal Medicine

Contact: Cathy Sullivan (202) 261-4500
Associate for State Health Policy

In an effort to reach its 110,000 members, ACP-ASIM

.will promote the new toll free number on its national web site
.advertise the new number in its monthly publication, the Observer and
in its bi-monthly legislative newsletter.

At the State level:

. most states are working with organizations and groups that interact with children or their parents to enhance awareness by providing brochures, pamphlets and posters. The College will urge physician members to work with these groups and display or distribute materials in office or clinics.

. ACP-ASIM is urging chapter leaders to use newsletters, websites and meeting to tell members how they can participate in outreach.

Invite: Cathy Sullivan (as above)

6. Association of State and Territorial Health Officials

Contact: Brent Ewig (202) 371-9090

ASTHO will publicize the toll free number and the website to state health departments leaders and staff in 57 states and territories by:

. its electronic Primary Care Network Newsletter, which is sent directly to each state health officer and a wide network of state health department staff and partners.

. encouraging state public health agencies to link to link their website with the insurekidsnow campaign and highlighting the 877

On behalf of the President and the First Lady, we thank you for your interest in the Children's Health Insurance Plan (CHIP) Initiative's private sector partnership program. The President and the First Lady Hillary Rodham Clinton would like to announce your commitment during a White House event to raise awareness about the CHIP program. The event is scheduled for February 23 and the time and location is to be determined.

The White House plans to incorporate a summary of your commitment in press materials. To streamline efforts, please provide the following information and fax this form to Barbara Woolley at 202-456-6218 by February 19th. Also, we can send to you our tagline and toll-free number if you are interested in using them as part of your efforts. If you have any questions or concerns, please don't hesitate to call Barbara Woolley at 456-2930. Thank you very much for your efforts to help insure children.

Name of company:

The Children's Health Fund

Summary of commitment/activity:

Integrated Child Health Network (The Children's Health Fund and Montefiore Medical Center) proposes to reach out to enroll, and provide access to comprehensive pediatric services to, up to 30,000 uninsured children in the Bronx, NY. Will also disseminate outreach/enrollment information in 13 National Children's Health Project Network sites in 8 states across the country.

Time frame during which commitment/activity will be implemented:

January, 1999 - December, 2001

Location (nationwide/regional, etc.):

New York, NY; Newark, NJ; West Virginia; Mississippi; Dallas and Austin, TX; Orlando and South Florida; Los Angeles and San Francisco, CA; Lee County, AR; and
Company representative attending White House event: Washington, DC

Name: Irwin Redlener, MD

Work address/telephone number: 317 East 64th Street
New York, NY 10021

Tel: 212-535-9707

If applicable, can you provide a visual for the event? If yes, please describe:

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The White House plans to incorporate a summary of your commitment in press materials. To streamline efforts, please provide the following information and fax this form to Barbara Woolley at 202-456-6218 by February 19th. Also, we can send to you our tagline and toll-free number if you are interested in using them as part of your efforts. If you have any questions or concerns, please don't hesitate to call Barbara Woolley at 456-2930. Thank you very much for your efforts to help insure children.

Name of company:

Neighborhood Networks initiative CHIP Outreach Collaboration

Summary of commitment/activity:

See attached.

Time frame: during which commitment/activity will be implemented:

CHIP outreach and enrollment events will begin March 6, 1999.

Location (nationwide/regional, etc.):

Nationwide

Company representative attending White House event:

Name: 1. Ms. Brenda Leath, President and CEO

Work address/telephone number: _____

National Consortium for African American Children, 3636 Alabama Ave., SE, Washington, DC 20020, 202-583-2896

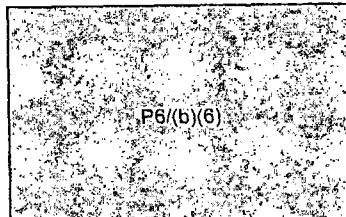
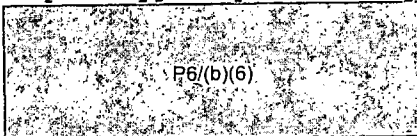
(see second name below)

If applicable, can you provide a visual for the event? If yes, please describe:

N/A

Company representative attending White House event:

2. Dr. Norma S. White
International President
Alpha Kappa Alpha Sorority, Inc.



[602]

On behalf of the President and the First Lady, we thank you for your interest in the Children's Health Insurance Plan (CHIP) Initiative's private sector partnership program. The President and the First Lady Hillary Rodham Clinton would like to announce your commitment during a White House event to raise awareness about the CHIP program. The event is scheduled for February 23 and the time and location is to be determined.

Please respond to Marcia BRAND at (301) 443-4619

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Name of company:

I'm coordinating provider groups

American Nurses Association

Summary of commitment/activity:

ANA has a long history of commitment to children's health insurance. We are happy to distribute posters and other materials to our state associations, as well as link to your new web site.

Time frame during which commitment/activity will be implemented:

as soon as is appropriate

Location (nationwide/regional, etc.):

nationwide

Company representative attending White House event:

Name: Mary Marra

Work address/telephone number:

600 Maryland Avenue, S.W.
Washington, DC
202-651-7092

If applicable, can you provide a visual for the event? If yes, please describe:



DEPARTMENT OF HEALTH AND HUMAN SERVICES

DATE: ~~2/7/99~~ 2/7/99

TO: Devora Adler
fax: 456-5557

FROM: Vicki Rivas-Vazquez
Director of Special Projects
tel: 202/690-7854, fax: 202/690-5673

TOTAL NUMBER OF PAGES SENT: 4
(including cover page)

COMMENTS:

Here are the three scripts for PSA's:
First Lady, generic PSA's produced
by HCFA.

A Slice of Life (English)

Voice Over

"We try to do the best for our kids. From before they're born...until the day they finish school. Nothing's more important than keeping them healthy."

"But finding the money for prescriptions and doctor bills isn't easy."

"Now there's new free or low cost health care for kids."

Tagline (to be inserted here)

Voice Over

"And insure your kids now. It's one of the best thing you'll ever do."

A Slice of Life (Spanish)

Voice Over

"Nosotros tratamos lo mejor para nuestros hijos. Desde antes que nacieron hasta el día que terminan el colegio. Nada es más importante que mantenerlos saludables."

"Pero encontrar dinero para las medicinas y las cuentas del doctor no es fácil."

"Ahora hay un nuevo programa de salud para niño gratis o de bajo costo."

Tagline (to be inserted here)

Voice Over

"Asegure a sus hijos ahora, es una de las mejores cosas que usted podrá hacer."

Doctor's Office (English)

Mom

"Last year, when my kids were sick I had to take them to the emergency room because they had no health insurance."

"I was really worried and we waited for hours."

"Good thing I found out about a new program that helps me pay for doctor bills and medicine. So now when one of 'em wakes up with an earache or cough, I can come here."

Nurse

"Ma'am, the doctor will see you now."

Tagline (to be inserted)

Mom

"Insure your kids now...it's one of the best things you'll ever do."

Doctor's Office (Spanish)

Madre

"El año pasado, cuando mis hijos se enfermaron, tuve que llevarlos a la sala de emergencia porque no tenían seguro de salud."

"Estaba muy preocupada y tuvimos que esperar por muchas horas."

"Qué bueno que me enteré de este nuevo programa que te ayuda a pagar las cuentas del doctor y las medicinas. Ahora, cuando ellos amanezcan con dolor de oído o toz, puedo venir aquí."

Enfermera

"Señora..."

Tagline (to be inserted)

Madre

"Asegure a sus hijos ahora...es una de las mejores cosas usted podrá hacer."

First Lady Hillary Rodham Clinton Public Service Announcement for Insure Kids Now

Voice Over (First Lady)

"As parents we work hard to give our kids the things they want, like a bicycle or a dog; but even more important is giving them something they need like, health insurance. Unfortunately, many parents think they can't afford it. But through a new initiative called INSURE KIDS NOW, your children may be eligible for low cost coverage. To sign up call toll free 877-KIDS now because every child should be covered."

WHITE HOUSE STAFFING MEMORANDUM

Date: 2/19/99 ACTION / CONCURRENCE / COMMENT DUE BY: 6:00 p.m. TODAY

Subject: RADIO ACTUALITIES (CHILDREN'S HEALTH; "READ ACROSS AMERICA")

	ACTION	FYI		ACTION	FYI
VICE PRESIDENT	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NASH	<input type="checkbox"/>	<input type="checkbox"/>
PODESTA	<input checked="" type="checkbox"/>	<input type="checkbox"/>	REED	<input checked="" type="checkbox"/>	<input type="checkbox"/>
ECHAVESTE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	RUFF	<input type="checkbox"/>	<input type="checkbox"/>
RICCHETTI	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SOSNIK	<input checked="" type="checkbox"/>	<input type="checkbox"/>
LEW	<input type="checkbox"/>	<input type="checkbox"/>	SPERLING	<input checked="" type="checkbox"/>	<input type="checkbox"/>
BEGALA	<input checked="" type="checkbox"/>	<input type="checkbox"/>	STEIN	<input type="checkbox"/>	<input type="checkbox"/>
BERGER	<input type="checkbox"/>	<input type="checkbox"/>	STERN	<input type="checkbox"/>	<input type="checkbox"/>
BLUMENTHAL	<input type="checkbox"/>	<input type="checkbox"/>	STRETT	<input type="checkbox"/>	<input type="checkbox"/>
FRAMPTON	<input type="checkbox"/>	<input type="checkbox"/>	TRAMONTANO	<input checked="" type="checkbox"/>	<input type="checkbox"/>
IBARRA	<input type="checkbox"/>	<input type="checkbox"/>	VERVEER	<input checked="" type="checkbox"/>	<input type="checkbox"/>
KLAIN	<input type="checkbox"/>	<input type="checkbox"/>	WALDMAN	<input checked="" type="checkbox"/>	<input type="checkbox"/>
LANE	<input type="checkbox"/>	<input type="checkbox"/>	YELLEN	<input type="checkbox"/>	<input type="checkbox"/>
LEWIS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>JENNINGS</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
LINDSEY	<input type="checkbox"/>	<input type="checkbox"/>	<u>BIANCHI</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
LOCKHART	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>KAGAN</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
MARSHALL	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
MOORE	<input type="checkbox"/>	<input type="checkbox"/>			

REMARKS:

Comments to Lowell Weiss

RESPONSE:

Draft 2/19/99 12:10pm

PRESIDENT WILLIAM J. CLINTON
RADIO ACTUALITY ON CHILDREN'S HEALTH
THE WHITE HOUSE
February 19, 1999

'99 FEB 19 PM 12:11

As every parent knows, nothing is more important than keeping our children healthy. So I have very good news for working parents: Even if you can't afford private health insurance, it is now possible to get help with doctor bills, medicines, and hospital care for your children. If your children are uninsured, please call 1-877-KIDS-NOW. With a little help, your children can get the care they need to grow up healthy and strong.

###

Draft 2/18/99 8pm

'99 FEB 19 PM12:12

**PRESIDENT WILLIAM J. CLINTON
RADIO ACTUALITY ON READ ACROSS AMERICA
THE WHITE HOUSE
February 19, 1999**

The best and most enjoyable way for children to open their minds is by opening books. This Tuesday, America will celebrate "Read Across America Day." More than a million people -- from baseball star Cal Ripken, Jr., to the sailors of the U.S.S. Saipan -- will share the joy of reading with children in every part of the country. I encourage all caring adults to get involved. Read to children on "Read Across America" day -- and every day. Together, we can make our children the best readers in the world.

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THE WHITE HOUSE

Office of the Press Secretary
(Nashville, Tennessee)

For Immediate Release

June 22, 1998

June 22, 1998

MEMORANDUM FOR THE SECRETARY OF THE TREASURY
THE SECRETARY OF AGRICULTURE
THE SECRETARY OF THE INTERIOR
THE SECRETARY OF LABOR
THE SECRETARY OF HEALTH AND HUMAN SERVICES
THE SECRETARY OF HOUSING AND URBAN
DEVELOPMENT
THE SECRETARY OF EDUCATION
THE COMMISSIONER OF SOCIAL SECURITY

SUBJECT: Federal Actions to Improve Children's Health
Insurance Outreach

Last year, with bipartisan support from the Congress, I was pleased to sign into law the Children's Health Insurance Program (CHIP). This new program will help millions of children of working families obtain affordable and much-needed health insurance. As of today, 20 States have had their CHIP plans approved and most States have applied for approval.

Yet, as recent studies show, rapidly implementing CHIP and ensuring that all eligible children are enrolled in this new program or Medicaid has never been more important. This month, a major report from the Institute of Medicine confirmed that children without health insurance are more likely to be sick, less likely to be immunized, and less likely to receive medical treatment for illnesses, such as recurrent ear infections and asthma. Without treatment, these diseases can have lifelong consequences. Another study by the Agency for Health Care Policy and Research concluded that there are 4.7 million uninsured children who are eligible but not enrolled in Medicaid. Several million more will become eligible for CHIP as States implement their programs.

Only an intense, sustained campaign in both the public and private sectors can address the significant challenge of uninsured children. On February 18, 1998, I requested children's health outreach proposals from eight Federal agencies on how the executive branch of the United States Government can assist in children's health insurance outreach.

In response, I received the Report to the President: The Interagency Task Force on Children's Health Insurance Outreach, which contains proposals on how to engage the executive branch in children's health outreach. I have reviewed this report and found these proposals sound, innovative, and worth undertaking.

Therefore, I hereby direct you to take the following actions to promote children's health insurance outreach, consistent with the missions of your agencies and the content and timelines of each potential initiative described in the Report.

The Secretary of Health and Human Services shall ensure that the:

Health Care Financing Administration, among other proposed actions,

creates an on-line clearing house for outreach information and facilitates relationships between State Medicaid and CHIP agencies and community-based and private organizations to identify, educate, and enroll uninsured children in State health insurance programs;

Health Resources and Services Administration, among other proposed actions, trains health care providers to help identify and enroll children in health insurance through its National Health Service Corps and Area Health Education Centers, which trains students and health providers and distributes information to families that use the community clinics that it funds;

Administration for Children and Families, among other proposed actions, distributes promotional material and applications for Medicaid and CHIP to the families they serve through Temporary Assistance to Needy Families (TANF), Head Start sites, and subsidized child care sites;

Agency for Health Care Policy and Research, among other proposed actions, supports investigator-initiated evaluations of outreach activities to better understand which outreach and enrollment strategies work best and to disseminate results to improve outreach performance;

Centers for Disease Control and Prevention, among other proposed actions, puts outreach referral information in its public health publications and pamphlets;

Indian Health Service, among other proposed actions, integrates "train the trainer" techniques to educate select community members who can then provide information on health insurance to the rest of the community;

Substance Abuse and Mental Health Services Administration, among other proposed actions, develops and implements an educational campaign for uninsured children with special needs.

The Secretary of Agriculture shall, among other proposed actions:

Educate Regional and State directors of the Women, Infants, and Children (WIC) program and other Food and Nutrition Service programs on health care programs that are available to families with uninsured children and determine what information to give to these families; how to coordinate the application process to facilitate enrollment in CHIP and Medicaid; and how families applying for school lunch programs can receive information on health insurance;

Provide information to the Cooperative State Research, Education, and Extension Service regional and State program staff and grantees and encourage dissemination of information to families regarding the CHIP and Medicaid programs.

The Secretary of Education shall, among other proposed actions:

Educate and assist families through its Partnership for Family Involvement program, which promotes family involvement in education, and includes employers, schools, education organizations, and community and religious groups.

The Secretary of Housing and Urban Development shall, among other proposed actions:

Provide information on children's health outreach to applicants for competitive grants, and ask its directors of Public Housing Authorities and Empowerment Zones/Enterprise Communities to post or

distribute this information.

The Secretary of Interior shall, among other proposed actions:

Develop and distribute culturally relevant referral information to Native American families through the Bureau of Indian Affairs, especially focusing on tribal schools, colleges, and social services agencies.

The Secretary of Labor shall, among other proposed actions:

Distribute Medicaid and CHIP outreach information through its Job Corps Centers, One-Stop Career Centers, welfare-to-work grant programs, and small businesses contacts.

The Secretary of the Treasury shall, among other proposed actions:

Post children's health outreach information for families at IRS walk-in centers and provide this information to Voluntary Income Tax Assistance sites.

The Commissioner of Social Security shall, among other proposed actions:

Distribute information and/or applications for children's health insurance in its SSA field office reception areas and provide to States names of families of children denied SSI so that States can send these families educational information and applications for children's health insurance programs.

I also direct the Secretary of Health and Human Services to continue to work with the above mentioned agencies to assist them in fulfilling these commitments, to engage new agencies and develop other commitments, and report back to me in 1 year on agency accomplishments.

WILLIAM J. CLINTON

#

John Rector wrong #.
703-683-8200
(Gov't Affairs & Gen Council)

Will let her know

Jane Andrews
(Kaiser) 296-1314

Stephen Olds ~~and~~ ^{Athen} Stephen Nelson ✓
Dan Nelson
(Am Hosp. Assoc.)
→ ~~626-2363~~ 2354

CHIP Outreach Jeanne Land left a message
Monday
10:30-11:30

456-6777
456-~~6755~~
456-6766

202-966-7300
(Am Aca. of Child & Adol
Psych)

*7109

Hilary Wilson left a message
(Am Psych Assoc.)

Barbara Woolley

682-6049

National Association of County and City Health Officials	Donna Grossman	763-5550 <i>wrong #</i>	400 41st StNW Suite 450 Washington, DC 20001
<i>DUP</i> National Association of Homes and Services for Children	Kelsi Brown	223-3447	1701 K st, NW Suite 200 Washington, DC 20006
National Association of Psychiatric Treatment Centers for Children	Joy Midman	416-1669 <i>Fax #</i>	2000 L St, NW Suite 200 Washington, DC 20036
<i>Mailbox Full</i> National Education Association	Diane Shust	822-7325	1201 16th St, NW Washington, DC 20036
National Mental Health Association	Al Guida	703-838-7509	1021 Prince St Alexandria, VA 22314
Partnership for Prevention	Kelly O'Brien	833-0009	426 C St NE Washington, DC 20002
The ARC	Kathy McGinley	785-3388	1522 K St NW Suite 516 Washington, DC 20005
<i>x</i> US Catholic Conference	Patricia King	541-3188	3211 Fourth St, NE Washington, DC 20017
Washington Business Group on Health	Kim Monk	408-9320	777 Norht Capitol NE Suite 800 Washington, DC 20002
Women's Legal Defense Fund	Joan Entmacher	986-2600 <i>986-2539</i>	1875 Connecticut Ave, NW Suite 710 Washington, DC 20009

Association of Maternal and Child Health Programs	Barbara Richards	775-0436	1220 19th St, NW Suite 801 Washington, DC 20036
Association of Maternal and Child Health Programs	Cathy Hess	775-0436	1220 19th St, NW Suite 801 Washington, DC 20036
Association of State and Territorial Health Officials	Lizbeth Stark <i>Charly Beveson</i>	371-9090	1275 K Street, NW Suite 800 Washington, DC 20005
Catholic Charities USA	Lisa Smith	703/549-1390 X 60	1731 King St Suite 200 Alexandria, VA 22314
Child Welfare League of America	Ellen Battestelli	638-2952	440 First St, NW Suite 310 Washington, DC 20001
Children's Defense Fund	Gregg Haifley	662-3541	25 E. St, NW Washington, DC 20001
Children's Defense Fund	Jim Weiff <i>Dr V.L.C.</i>	662-3541 <i>662-3550</i>	25 E. St, NW Washington, DC 20001
Children's Health Fund	Dennis Johnson	(212)535-9707 <i>212-861-0235</i>	317 E. 64th St New York, NY 10021
Families USA	Judy Waxman/ Joan Aiker	628-3030	1334 G St, NW Washington, DC 20005
Family Voices	Gayle Brown	703/503-4529 <i>busy</i>	5106 Richarson Dr Fairfax, VA 22032
Friends Committee on National Legislation	Florence Kimball	547-6000	245 2nd St, NE Washington, DC 20002
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March of Dimes	Jo Merrill	659-1800	1901 L St NW Suite 260 Washington, DC 20036
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National Association of Children's Hospitals	Ann Langley <i>Lisa Tate</i>	945-6163 <i>busy</i>	3000 K ST, NW Suite 500 Washington, DC 20007

Ann

Margaret bekas, AM A

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Tel 2

Tel 2

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M=message

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children

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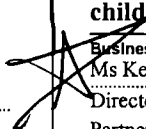
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Category children	

contact not listed here.

Need to call during business hours



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Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
003. list	Contact list re: SSN and DOB (partial) (3 pages)	03/13/1998	P6/b(6)

COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Devorah Adler
OA/Box Number: 20146

FOLDER TITLE:

CHIP [Children's Health Insurance Program] Outreach [Folder 8]

2012-0463-S

rc733

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

- b(1) National security classified information [(b)(1) of the FOIA]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
- b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
- b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
- b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

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C children

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DOB SS# P6(b)(6) [003]

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children

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Todd Askew

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P6/(b)(6)

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P6/(b)(6)

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yes

Category General, children

P6/(b)(6)

C
children

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yes

Category General, children

P6/(b)(6)

children

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		Children

Jeannett O'Conner

Category children

children

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		[Unused2]
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		Children

Pete Willis

yes

Category children, hospital

P6/(b)(6)

*1030 to 1130 66777
4566755 #7109
66766*

National Governors' Association
Center for Best Practices
444 North Capitol Street
Suite 267
Washington, D.C. 20001 - 1512



Telephone (202) 624-5300
<http://www.nga.org/Center>

Date: 2/22/99 Time: 11:53:46 AM Pages: 6

To: Devorah Adler Fax Number: 4565557

From: Joy Horner Kauffman

Subject: StateLine on Statewide Hotlines

Note: Devorah-
I will be sending the chart in just a second. I am working to get the talking points.
Do you all have talking points developed for the President and First Lady. It would
be great if you could send those over. Then we can both be making sure that it
works together nicely.

Joy

Health Policy Studies Division
Contact: Joy Horner Kauffman, 202/624-7854
February 23, 1999

States Use Innovative Children's Health Insurance Hotlines to Enroll Uninsured Children*

Summary

States are developing and implementing outreach strategies to help families enroll uninsured children in the State Children's Health Insurance Program (SCHIP) and Medicaid. Statewide hotlines that facilitate enrollment have been established or are planned in all states. State innovations are expanding the scope of hotlines so they are comprehensive service centers where potential applicants can receive assistance ranging from information to enrollment. These innovations are helping states accomplish the ultimate goal of ensuring access to health care for uninsured children.

The National Governors' Association Center for Best Practices surveyed all fifty states and the District of Columbia on key elements of their hotline and consulted with an expert in state outreach efforts. Effective hotlines are ones equipped to do the following:

- answer questions and assist callers on issues related to SCHIP and Medicaid;
- provide information in several languages;
- extend hours of operation to accommodate working parents;
- mail application forms to callers in a timely manner;
- help individual callers complete the application form;
- monitor the rate and outcome of application submissions; and
- track how callers hear about the hotline so outreach strategies can be targeted.

The National Governors' Association (NGA), together with the President, recently launched a nationwide children's health insurance hotline and campaign called Insure Kids Now to make it even easier for parents to access their state's children's health insurance programs.

Statewide Hotlines Support Outreach and Enrollment

A statewide hotline can facilitate the enrollment of eligible children in both SCHIP and Medicaid. It can serve as a one-stop-shop, providing information and applications. A single access point for multiple services is especially effective for the target population of children of low-income, working parents. These parents often cannot afford to miss work and lack transportation to visit social service offices. A statewide hotline also enables states to centralize training for hotline staff and monitor calls for quality assurance.

In addition to helping states centralize information and client services, a statewide hotline enables them to combine application, eligibility, and enrollment data systems. Consequently, clients can be told about the status and outcome of their application, reminders can be mailed to participants informing them of important dates related to their eligibility, and enrollment reports can be easily generated.

Statewide hotlines can be used in outreach initiatives and publicity efforts to establish a clear means by which potential applicants can access SCHIP and Medicaid. Some states use their hotline to refer callers to community-based organizations that can assist them in enrolling their children. Other states have developed public-private partnerships to promote enrollment, and these partnerships have been facilitated, in part, by the state's hotline. For example, Arkansas and Michigan used their hotlines in promotional material developed through public-private partnerships with Kmart, McDonald's, Meijer, and children's hospitals.

Effective Statewide Hotlines Have Certain Elements

The NGA Center for Best Practices, in consultation with Sarah Shuptrine, director of the Robert Wood Johnson Foundation's national Covering Kids initiative and president of the Southern Institute on Children and Families, identified the services that effective statewide hotlines provide. Effective hotlines can:

- answer questions and assist callers on issues related to enrolling children in SCHIP and Medicaid;
- provide information in several languages;
- extend hours of operation to weekday evenings and/or weekends to accommodate working parents;
- mail application forms to callers so they receive them within five working days;
- help individual callers complete the application form;
- monitor the rate and outcome—approved, denied, and reason for denial—of application submissions; and
- track how callers hear about the hotline so outreach strategies can be targeted.

Center staff surveyed all fifty states and the District of Columbia on these elements and the results are reported in the attached table. Several state hotlines have implemented many of these key elements, and many states are planning to expand the capacity of their children's health insurance hotlines.

Many states have introduced other innovative features to their hotlines. For example, hotline operators in Georgia, Kansas, Nebraska, New Jersey, and South Carolina can inform callers about the status of their application and, if enrollment is denied, give them the reason for the denial. Hotlines in Delaware, Iowa, and New Hampshire are unique because operators can solicit from the caller information needed to complete the application and submit the application to the appropriate enrollment agency on the client's behalf. The completed form is mailed to the client for his or her verification and signature, and the client returns the form and supporting documents.

Most states use a voice-message system to communicate with callers when hotline staff are not available. This technology enables the state to share information about the program and follow up on messages received from people calling the hotline.

Some states require a copy of a birth certificate for program enrollment. A few states have linked their data systems with the vital statistics registry, enabling hotline operators to obtain the document for callers.

State Experience with Hotlines Reveals Important Lessons

State experience in designing, implementing, and operating statewide hotlines reveals some important lessons. States identify the following hotline strategies as effective in enrolling eligible children:

- employ well-trained, multilingual staff who can answer questions about SCHIP, Medicaid, and other related programs;
- have people answer the hotline whenever possible;
- extend the hours of hotline operation to weekday nights and weekends to accommodate working parents;
- take advantage of technology, including voice message and automated and integrated information systems;
- use short, mail-in application forms with few verification requirements;
- drop the assets test for determining eligibility;
- build on services offered through existing hotlines, such as those established for Medicaid and Title V maternal and child health programs; and
- partner with local agencies and community-based organizations to manage or promote the statewide hotline.

States also find that certain types of publicity and outreach result in more calls from potentially eligible clients. Effective approaches include the following.

- **Distribute materials through public schools.** States cite this approach as the most economical means to communicate with the target population. For example, **Alabama** sent out 850,000 application packets to public schoolchildren at the start of the school year and has already enrolled more than 23,000 children.
- **Mail information directly to specific target groups.** Many states mail information directly to former Medicaid participants, the unemployed, and parents in targeted school districts. For example, **Delaware** sends information to food stamp recipients and custodial and noncustodial parents who pay child support. **New Jersey** sends a letter about its programs to the parents of newborns using data from the vital statistics registry and to all financially eligible families using data from the department of taxation. The state also includes a bilingual flier in the 300,000 registration and license renewal reminders the division of motor vehicles sends out each month.
- **Publish newspaper articles and air television and radio news stories.** Several states have found that newspaper articles and television and radio news stories result in more calls than do some paid media advertisements.
- **Purchase television, newspaper, and radio advertisements.** According to a recent study sponsored by the Robert Wood Johnson Foundation, Americans receive most of their information about children's health care from television (50 percent), newspaper (30 percent), magazines (6 percent), and radio (6 percent).** Many states have negotiated donated ads to match the value of their purchased ads.

- **Tap informal communication networks.** Family and friends form powerful, informal networks of communication. Several states have tapped those networks by encouraging applicants to spread the word about the availability of children's health insurance and the hotline. This outreach method is very economical, but it is effective only if applicants have a positive experience to share. Therefore, service quality and clients' interaction with hotline personnel are critical.

Hotline Operation Poses Challenges

The success of a children's health insurance hotline can be measured not only by how many times the phone rings, but also by how many children enroll in a program. States operating a statewide toll-free hotline identify these challenges:

- estimating and responding to the volume of calls and determining personnel needs accordingly;
- acquiring and training knowledgeable staff concerning children's health insurance resources;
- serving the needs of non-English-speaking callers;
- securing funding for marketing efforts; and
- responding to followup calls from applicants on the status of their application.

Some states have improved coordination between hotline staff and staff marketing the hotline so call volume is more predictable and hotlines can be adequately staffed during high-volume periods. To overcome the challenge of acquiring and training new staff, some states have used existing hotline staff. Other states have hired third-party administrators with staff who have experience in phone interview and assistance techniques to deal with high call volume and limited staff capacity. To serve non-English-speaking callers and callers with various ethnic backgrounds, some states have hired multilingual and multicultural staff. Several states have developed public-private partnerships to promote the availability of children's health insurance and the statewide hotline. In many cases, these partnerships also have raised funds for marketing efforts. States that have formed partnerships report it is easier to "sell" the product to a corporation if the hotline renders high-quality services. Finally, states have combined data systems so hotline operators have access to information on the status of applications and can respond to callers' inquiries.

National Hotline Will Boost State Hotlines

NGA developed the national Insure Kids Now Hotline, 1-877-KIDS-NOW, on behalf of the nation's Governors. The hotline connects callers nationwide to their statewide hotline, providing information, application forms, and referrals to parents of children eligible for SCHIP or Medicaid. Working with NGA, the Clinton administration has encouraged public-private partnerships with corporations to promote the hotline. In addition, the U.S. Department of Health and Human Services has sponsored a radio campaign. The national hotline will boost state momentum to expand uninsured children's access to health insurance—a momentum propelled by the nation's Governors.

* Funding for this *StateLine* was provided through a grant from the Maternal and Child Health Bureau, Health Resources and Services Administration, U.S. Department of Health and Human Services.

Page 5, States Use Innovative Children's Health Insurance Hotlines to Enroll Uninsured Children

**Harvard School of Public Health, University of Maryland Survey Research Center, Robert Wood Johnson Foundation, *Attitudes Toward Children's Health Care Issues Survey* (Boston, Mass.: Harvard School of Public Health, August–October 1997).

FIRST LADY HILLARY RODHAM CLINTON
CHIP EVENT
THE WHITE HOUSE
FEBRUARY 23, 1999

Good afternoon, and welcome to the White House. I'm honored to join the President and all of you as together, we take another important step forward in our efforts to make quality health care a reality for America's children. The progress we've already made would not have been possible without many of the people in this room. I want to especially thank Secretary Shalala for her tireless leadership on behalf of our nation's children; Governor Levitt and Governor Carper for making health care a bipartisan effort; and the many health care advocates and religious and community leaders who work every single day on the front lines in our communities to improve the health and well being of our young people. I'm pleased that two members of Congress who I know will be active on this issue -- Congresswoman DeGette [DEE-GET] and Rep. Eshoo [ES-SHEW] -- have joined us as well.

I doubt there's a person in this room who hasn't been concerned at one time or another about having the health coverage they need for themselves and their family. I recently heard about a family from Maryland: Mary Smith and her husband -- the proud parents of two teenage boys, Samuel and Thomas. Both Mary and her husband were working -- but their employers either didn't provide health care coverage -- or offered them private coverage they couldn't afford. So for 3 long years, their children had no health insurance. Every single day -- particularly the afternoons when she knew her sons were out playing sports -- Mary felt she was "walking on eggshells" -- hoping and praying nothing would happen to them.

Every parent can imagine how she felt. When children are sick or hurt -- the last thing their parents should have to worry about is whether they have the resources to ease their pain; heal their wounds; or lower their fevers. Yet over 11 million children in America face that prospect every day -- because they have no health insurance.

That's why in August of '97 -- thanks to many of you and with the support of a bipartisan Congress -- the President signed into law the largest expansion of health care in 30 years. That day, our nation committed \$24 billion to insure millions of uninsured children and their parents -- through a federal-state partnership. Now families like Mary's are breathing easier -- because their children are covered under the Children's Health Insurance Program.

We've come together again today because our work is far from finished. Creating CHIP was the critical first step in insuring our children receive the health care they need -- from check ups to immunizations to complicated surgery. But we recognized that fulfilling this promise would depend on the work we did after the bill was signed, and we knew it would not be easy.

At least half of all uninsured children are eligible for federal, state health insurance programs, but too often their parents either don't know about these new options, or don't think they're qualified. As successful as Medicaid has been, an estimated four million eligible children are still not enrolled. Millions of others -- like Samuel and Thomas -- have working parents who

are employed by businesses that don't provide health insurance. Still others lose their coverage when their parents lose their jobs. Long, complicated application forms -- and lack of information among eligible immigrant families -- further slow the progress we all seek.

So over the past year, we've carried on sustained outreach efforts in communities nationwide to help educate families about CHIP. Federal agencies as well as the private sector have been helping states spread the word -- by ~~working in the schools, organizing media campaigns, and~~ creating new public/private partnerships.

I'd like to describe a particularly successful program. Last November, Chicago's public schools launched an aggressive, school-based outreach campaign aimed at the estimated 170,000 students who were eligible -- but not enrolled -- in Illinois KidCare program. First, they sent out enrollment information to every family who had children in the public schools. Then, on the day that parents were required to come to school -- to pick up their child's report card -- 3,000 volunteers were on hand to help eligible parents fill out the forms and get their children enrolled.

Everyone was involved -- from social workers to counselors to volunteers from private corporations to child advocacy groups. Public service announcements and media ads promoting KidCare were translated into five different languages -- including Cantonese and Arabic -- to help spread the word among Chicago's diverse ethnic communities.

The result of this concerted campaign? About 14,000 children applied for KidCare during the November campaign. [I understand that Paul Vallas, CEO of Chicago's public schools, is here with us, and I want to congratulate him for creating such a model program.]

Programs like the one in Chicago underscore how important it is to reach out to families where they are -- particularly ~~poor~~, working families who don't believe ~~government~~ ^{these} programs can improve their lives. It's critical that religious groups and charities; day care centers and after school programs; homeless shelters and mentoring programs all be enlisted in this effort. We must send out the message: If you touch the life of a child, you have a role to play.

It's time to build on the progress being made in states around the country. It's time to make the promise we made to children and families in August of '97 a reality in every community. It's time to take the next step. So today -- the President is launching a national outreach campaign to enroll every eligible child in a health insurance plan. There is no more important mission in America.

It's now my pleasure to introduce to you someone who has not only placed the issue of children's health at the top of our nation's agenda -- but who has worked tirelessly to keep it there -- Secretary Shalala.

And understand what we can do when all these groups work together to improve

McD = No 10,000 Tray
 Mattel = Not Like Liners.
 Martha Stewart: / ~~St. Home~~
 Show.
 Gen'l Motors: on products
 Gen'l Mills: **INSURE KIDS NOW CAMPAIGN**
DRAFT: FULL LIST OF ACTIVITIES NEW CMTMS
 February 23, 1999
 Ferber:
 Nike: Jon Jene

Today, the President and the First Lady, along with Governors Carper and Leavitt and Secretary Shalala, launched the nationwide "Insure Kids Now" campaign that aims to enroll every eligible but uninsured child in Medicaid and the new Children's Health Insurance Program (CHIP). About half of the 10 million uninsured children qualify for these programs but remain unenrolled. To ensure that families know that their children may be eligible, the President has engaged a broad-based, bipartisan, public-private coalition to use whatever means possible to educate and assist families in insuring their children. This includes launching a nationwide, toll-free number set up by the National Governors' Association in partnership with White House and Bell Atlantic, that allows families to get essential information; airing public service announcements on TV and radio; placing the toll-free number on corporate products; enlisting grass-roots organizations to get the word out; and stepping up activities by over 10 Federal agencies that interact with working families. Altogether, these actions will make a major contribution towards the President's goal of covering up to 5 million uninsured children.

The campaign has three components, all designed to educate families about the free or low cost health insurance options available through Medicaid and the new State CHIP programs: a new television, radio, and print media campaign; new efforts by private corporations; and new efforts by non-profit corporations.

LAUNCHING 1-877 KIDS NOW, A NEW NATIONAL NUMBER FOR KIDS HEALTH OUTREACH. Today, the President and First Lady launched 1-877 KIDS NOW, a new toll free number developed by the National Governors Association in partnership with Bell Atlantic and the Administration that provides information on Medicaid and CHIP to families nationwide. This number will provide families in all 50 States with State specific information about Medicaid and CHIP. Families calling the line will speak with an eligibility counselor who can provide information about eligibility criteria, benefits, and how to apply for coverage. Beginning in October, HHS will assume responsibility for this line.

THE NATIONAL MEDIA MAKES AN UNPRECEDENTED COMMITMENT TO CHILDREN'S HEALTH INSURANCE OUTREACH. Today, the President unveiled new efforts by national media organizations to provide families across the country with information about the importance of health insurance and how to apply for Medicaid and CHIP, including:

TELEVISION

- ✓ NBC to air PSA on children's health insurance. Beginning on February 24, "The More You Know" will air a public service announcement to educate parents and families about free or low cost health insurance options for _____. This PSA, using NBC stars S. Epatha Merkerson and Benjamin Bratt, provides information about the importance of health insurance for children and

includes the new toll-free number for children's health insurance outreach.

- **ABC** to air a public service announcement featuring the new Insure Kids Now toll free number. Beginning on ____, ABC Television Network will air a public service announcement providing parents and families with information about the importance of health insurance and promoting the new toll-free number. This PSA will air during (prime-time?/throughout the day?) over the next (a year/three months??).
- **Viacom/Paramount** to air a public service announcement featuring the new Insure Kids Now toll free number. Beginning March 1st, Viacom/Paramount will air a public service announcement that provides parents and families with information about the importance of health insurance and promoting the new toll-free number. This PSA will air on 19 of their stations throughout the country during ____ over the next ____.
- **Black Entertainment Television** to air a public service announcement featuring the new Insure Kids Now toll free number. Beginning on ____, BET will air a public service announcement that provides parents and families with information about the importance of health insurance and promoting the new toll-free number. This PSA will air on 19 of their stations throughout the country during ____ over the next ____.
- **National Association of Broadcasters** to distribute a public service announcement featuring the new Insure Kids Now toll free number. The National Association of Broadcasters, the national trade association representing broadcast stations, will make the PSA available to all their member stations on Monday, February 22nd.
- **Univision** to air Spanish language PSA. Beginning on February 23, Univision will run a Spanish language PSA developed by the Department of Health and Human Services. The PSA will air twice a day over the next six months, once during the day and once during prime time. Univision is watched by 90 percent of Hispanic households -- over 18 million people. Over 25 percent of Hispanic children are uninsured.

RADIO

- **Airing radio ads in 45 States.** Beginning on February 23, the Department of Health and Human Services will fund radio ads to be aired in 45 States and the District of Columbia. In each State, the spots will run for 4 weeks (15 per week). The spots will run in groups of 10-11 States at a time, beginning with California, Utah, Colorado, Alabama, Illinois, Ohio, Kentucky, North Carolina, New Jersey, Connecticut, and Maine.
- **Radio Disney/ABC radio** will run ads specialized for children in their 25 markets, and will distribute the audio version of the PSA to all __ affiliate stations.

M/Videi.

BW

? when? FL and FL

- **Bonneville** will run public service announcements from by General Powell and America's Promise will distribute these ads nationwide. (CK) CHIC, LA, SLCity

PRINT MEDIA

Ad Council agreed to distribute. SF, DC

BW

- **USA Today** will run an editorial on the importance of children's health insurance. USA Today has agreed to do a editorial in their weekend edition on _____ on the importance of health insurance for children and the new options available to families through Medicaid and CHIP. The editorial will feature the new Insure Kids Now hotline number.

PRIVATE AND PUBLIC ORGANIZATIONS JOIN THE ADMINISTRATION'S NATIONAL EFFORT.

Today, the First Lady and the President lauded the efforts of private sector companies to get the word out about the new free or low cost children's health insurance options available to families across the nation. In addition, numerous groups representing health care providers, volunteers, children's advocates, educators, child care providers, and religions come in contact with low-income and working families on a regular basis and can help educate them about Medicaid and CHIP. The following is a list of the new commitments:

CORPORATIONS

- **American Medical Response** will include the Insure Kids Now number ~~beginning on _____~~ ^{this spring} on ambulances and other transport vehicles, such as school buses, which transport over 2,000,000 students daily. ~~In addition, beginning on _____, they will provide information on Medicaid and CHIP to communities in 36 States through _____.~~ (CK) 20000 employees 36 States

PSA June Sept
Counter displays
may 1800 #
sept

- **K-Mart Corporation** will dedicate two columns on children's health insurance in the K-Mart circular distributed to more than 70 million homes on _____. In addition, ~~beginning on _____~~, stores will have counter displays at 1,600 K-Mart pharmacies nationwide with brochures promoting Insure Kids Now. Beginning on _____, they will also put daily public service announcements on K-Mart in-store radio network and put the Insure Kids Now number on all K-Mart shopping bags. (Diapers and pharmaceutical bottles -- CK?)

March of Dimes CDF

bags - Sept
columns - June -> Sept

- **General Motors** will affix labels with the Insure Kids Now toll free number to _____ child safety seats being donated to families in low-income communities across the country beginning # on _____. (La Raza -- CK)

BW

- **Ralph's Grocery** will place bag stuffers in shopping bags and to air public service announcements in their in-store radio network to promote the Insure Kids Now toll free number beginning on _____.

G-Mills

- **Kids Korner Gift Shops**, owner of the 1-800-KIDS NOW and 888- KIDS NOW numbers, has already fielded over 900 phone calls on behalf of the Insure Kids Now campaign and will continue to refer callers to the 1-877 KIDS NOW number. Kids Korner Gift Shops will also

include Insure Kids Now materials in packets sent to thousands of schools nationwide beginning on _____.

- **Neil Romano~~#~~ & Associates Inc.** will work with CHIP corporate partners to produce a television PSA featuring the President, First Lady, or celebrity athlete to distribute on behalf of the campaign, to millions of people across the country.

HEALTH PROVIDERS AND PROFESSIONAL ASSOCIATIONS

- **Pfizer Inc** has agreed to incorporate the Insure Kids Now onto their patient/parent resource publication, mailings to their pediatricians, and in their Pharmacy Assistance Program beginning on _____. In addition, beginning on _____, Pfizer will distribute an outreach kit to 400 community health centers.

- **Blue Cross & Blue Shield Association** will begin to educate local physicians, hospitals and state government partners about the new health insurance options for low income children on _____ by _____. In addition, beginning on _____, Blue Cross Blue Shield's national association will produce and distribute a nationwide radio public service announcement nationwide as well as print advertorials on the Insure Kids Now campaign in Readers Digest and Time Magazine (CK).

- **Columbus Children's Hospital** [where is this] will place Medicaid/CHIP applications in the Emergency Room, the Outpatient Care Center, and community-based primary care sites along with posters in busy hospital elevators beginning on _____.

- **National Association of Chain Drug Stores (NACDS)** will include the Insure Kids Now number and include outreach campaign materials with each prescription filled. Additionally, NACDS will display outreach posters and have brochures available in 30,000 chain pharmacies visited by over 5 million people daily.

- **National Community Pharmacists Association** will distribute information on the Insure Kids Now campaign to 50,000 pharmacists through their newsletter, journal, and satellite programs beginning on _____.

- **Wyeth Lederle Vaccines** will distribute handbooks including the Insure Kids Now toll free number and information on how to educate families about health insurance options for their children to 1500 local community based organizations and providers beginning on _____.

- **American Hospital Association** will include materials on the Insure Kids Now campaign in their "Campaign for Coverage" information, will reach over 6 million uninsured people, beginning on _____.

- **American Dental Association (ADA)** has committed to host a conference in August to bring together dentists, state legislators, and health officials to work together to find solutions to increasing access to children's oral health services. [DROP]
- **American Medical Association** has agreed to promote the Insure Kids Now toll free number to the nation's 600,000 physicians in its weekly newspaper, the American Medical News, and by posting information on AMA's website. [DROPPED]
- **American Dental Hygienists' Association**, will include the Insure Kids Now toll free number on toothbrushes and on a tear out flyer in its Access magazine on _____, reaches 80,000 dental hygienists in each of the 50 states nationwide.
- **American College of Emergency Physicians** has agreed to send information to 20,000 members through their newsletter on _____, including how to download posters and access outreach materials through the internet.
- **American College of Physicians / American Society for Internal Medicine** will advertise the Insure Kids Now toll free number through its national website, in its monthly publication, the Observer, and in its bi-monthly legislative newsletter beginning on _____. These materials are distributed to 110,000 physicians.
- **American Medical Association** will promote the Insure Kids Now toll free number to the nation's 600,000 physicians in its weekly newspaper, the American Medical News, and by posting information on AMA's website.
- **American Nurses Association** has committed to distribute _____ posters and other materials to their _____ State Associations, beginning on _____. Information will also be posted on their new web site.
- **American Psychiatric Association** will develop a Medicaid/CHIP Tool Kit to educate doctors and patients about Medicaid and CHIP programs for use by its 42,000 members nationwide.

COMMUNITY-BASED, CHILDRENS, AND EDUCATION ORGANIZATIONS

- **America's Promise** has committed its support for youth development programs working with hundreds of communities to address the needs of youth. It is taking its program for kids to cities and towns throughout the nation. [WHAT IS THIS]
- **Association of State and Territorial Health Officials** will distribute outreach resource packets to publicize the Insure Kids Now toll free number to state health departments leaders and staff in 57 states and territories.

} 3
health

- **Center on Budget and Policy Priorities** will provide outreach materials as well as training and technical assistance on effective outreach strategies to insure children nationwide beginning on _____. [WHAT IS THIS]
- **Children's Health Fund** will also disseminate information on the Insure Kids Now campaign in 13 National Children's Health Project Network sites in 8 States across the country.
- **HOPE for Kids** has committed to make children's health insurance the primary focus of its national outreach event on April 17, 1999. Beginning on ____, it will also implement efforts to educate 400,000 people in 38 States about Medicaid and CHIP.
- **Veterans of Foreign Wars (VFW)** has committed to distributing information about CHIP through its network of posts, beginning on _____.
- **Volunteers of America** will make information on Medicaid and CHIP available to low-income families through the distribution of outreach material to homeless shelters, low income housing, and childcare centers beginning on _____.
- **Neighborhood Networks Initiative CHIP Outreach Collaboration** has agreed to address the need for organized CHIP benefits at its centers. It is made up of nearly 100 national and state organizations whose purpose is to eliminate health and social disparities. [??]
- **California Congress of Parents, Teachers, and Students, Inc.** has agreed to include the Insure Kids Now toll free number and campaign materials into their PTA newsletter sent to 6000 subscribers, the Convention Chronicle, which is sent to 4600 local PTA presidents, and their Convention Program Books, which are given to 5000 convention delegates in California.
- **California School Boards Association** has agreed to have information about the Insure Kids Now toll free number and the campaign in the packet of information they provide at the start of each school year to 5.7 million school children. In addition, it will promote the Insure Kids Now toll free number through statewide publications that will reach 1,000 school districts and more than 8000 individual school sites.
- **Chicago Public Schools** will provide enrollment assistance at over 600 public schools and KidCare Kits including information on children's health insurance options to 430,000 students beginning on _____.
- **National Child Care Association** has agreed to distribute advertisements and posters promoting the Insure Kids Now toll free number to 700,000 parents through the network beginning on _____.

email to victoria okay to drop?

how many

how many

- **National Educational Association** will provide information on the Insure Kids Now toll free number to the presidents of their 14,000 local affiliates beginning on _____. In addition, on ____ NEA will feature article about CHIP in the organization's magazine, distributed to 2.4 million educational employees. [OK]
- **March of Dimes** will feature children's health insurance in a direct mail newsletter sent to 800,000 individual donors on _____ and through local chapter and WalkAmerica newsletters which are sent to an additional 500,000 volunteers and 20,000 corporate supporters on _____.
- **NETWORK**, a _____, will advertise the Insure Kids Now toll free number in their magazine that reaches 10,000 people nationwide beginning on _____.
Maureen/Neera
- **United Way of America** will enroll 500,000 eligible children in CHIP and will mobilize select local United Ways (of which there are 1400 across the country) to partner with local organizations to coordinate training for outreach volunteers to pilot the program, then expanding to approximately 30-50 communities across the country. *reference in cooperation w [OK]*
- **Points of Light Foundation** will publicize the Insure Kids Now toll free number by providing _____ to over 20 million people through the "Connect America" initiative beginning on _____. Information will also be provided to 450 communities and 200 corporate members through the Volunteer Centers of the Points of Light Foundation beginning on _____. In addition, over 2000 members will receive information on the Insure Kids Now toll free number.

relig. org.

RELIGIOUS ORGANIZATIONS

- **Union of American Hebrew Congregations** will advertise CHIP and the Insure Kids Now toll free number to all 875 Reform Jewish Congregations across the nation through _____.
- **Catholic Charities/USA** will host 10 training events to help facilitate enrollment in Medicaid and other state insurance programs during 1999.
- **National Council of Churches of Christ** will distribute the Insure Kids Now toll free number to their 33 member communions representing 52 million US Christians beginning on _____.
- **International Union of Gospel Missions** will distribute the Insure Kids Now toll free number to their missions located in 260 cities where they serve over 7 million homeless and needy people beginning on _____.

*Debbie
Merrill
National
Council
Jewish
org.*

• *one bullet for others*

- **United Synagogue of Conservative Judaism** will publicize the Insure Kids Now toll free number to their over 800 congregations across the country beginning on _____.
- **National Council of Catholic Women** will distribute the Insure Kids Now toll free number in their monthly newsletter to 350 diocesan leaders and their May/June magazine to 11,000 nationwide.
- **Council of Jewish Federations** will promote the Insure Kids Now toll free number in service settings across the country beginning on _____.

NEW PRIVATE EFFORTS COMPLEMENT THE EXPANDING FEDERAL

EFFORT. Today, the President and First Lady unveiled the new steps Federal agencies are taking to identify and enroll uninsured children in free or low cost health insurance. These include:

- **HHS: Launching the "insurekidsnow.gov" website for outreach.** HHS has developed a website bringing together essential State-specific information for people who are potentially eligible to participate in the CHIP program, including contact information, benefits, and eligibility information in a user friendly format for families, educators, advocates and other non-health professionals. It will also provide information on the Administration's public-private outreach campaign, including posters, hand-outs, and descriptions of the national effort.
- **HHS: Distributing 145,000 posters advertising the toll free number to over 20,000 Federal grantees and field offices beginning March 1.** HHS developed posters advertising the toll free number to be distributed to over 20,000 Federal grantees and field offices as part of their new and ongoing efforts to educate parents, health care providers, and other Federal employees about Medicaid and CHIP.
- **HHS: Development of a kit to teach other agencies about how to explain kids' health outreach to their employees and clients.** Today, HHS will distribute an outreach training kit has been prepared for to Federal workers from all Departments who will participate in the "Insure Kids Now" campaign. The kit contains a presentation outline, posters, and materials that can be used as handouts.
- **USDA: Sending 92,000 employees information about outreach.** On March 8, over 92,000 USDA employees will receive information on CHIP with the national toll-free hotline number on their Wage and Earnings Statements.
- **USDA: Reaching uninsured children through the Women, Infant and Children (WIC) program.** During February, over 115,000 Alabama WIC participants will receive a CHIP outreach message with the AI-Kids toll-free hotline number on their WIC

food instruments. In the near future, over 90,000 Oklahoma WIC applicants and participants will receive assistance in completing CHIP applications during their WIC visit.

- **JUSTICE: Distributing information through Operation Weed and Feed.** The Department of Justice will work with Operation Weed and Feed, a crime prevention and community revitalization initiative that brings together the United States Attorney and 170 community leaders nationwide to distribute a letter with information on CHIP and Medicaid and posters advertising the new toll free number beginning in March of 1999.
- **JUSTICE: Hands on involvement in communities nationwide.** Beginning in March of 1999, the Department of Justice, together with the United Way and HOPE for Kids (a non-profit charitable organization), will hold community forums, distribute enrollment information, and provide application assistance to residents in 6 to 10 cities to identify and enroll uninsured children in Medicaid and CHIP.
- **EPA: Distributing information on Medicaid and CHIP through the Child Health Champion Campaign.** The Environmental Protection Agency will distribute information on Medicaid, CHIP, and the new toll free number for children's health insurance outreach through the new Child Health Champion Campaign, which works with 200 communities nationwide to protect children from environmental hazards by providing information, technical assistance and other support. [WHEN]

press paper

Media
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- 27 corporates
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- NBC 6 names; Neera okayed to send over
- Neera waiting on BET & Turner Broadcasting
- governors are being invited alone;
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Stage

2 screens
FLOTUS PSA
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FLOTUS

Lea Shalala

Casper Hearst

Casper

FLOTUS - show PSA

Brad or Phil to talk about Hearst &
Casper to his w/ his remarks

Kids stage left in seats.

Press

2 or 3 corporate folks in state or regional press too.

✓ # tape now in length where they loop
Lana Schwartz

12 noon tomorrow

li

February 23, 1999

Contact: HCFA Press Office
(202) 690-6145

THE CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP)

Overview: *Proposed by President Clinton and passed as part of the historic, bipartisan Balanced Budget Act of 1997, the Children's Health Insurance Program (CHIP). CHIP is the largest single expansion of health insurance coverage for children in more than 30 years. Today, nearly 11 million American children -- one in seven -- are uninsured. To reach these children, many of whom come from working families with incomes too high to qualify for Medicaid but too low to afford private health insurance, this new initiative set aside \$24 billion over five years for states to provide new health coverage for millions of children -- the largest children's health care investment since the creation of Medicaid in 1965. States will be able to use part of their federal funds to expand outreach and ensure that all children eligible for Medicaid and the new CHIP program are enrolled. More than 4 million uninsured children are eligible but not signed up for Medicaid. To improve the health of our nation's children, the President has challenged the public and private sectors to work together to educate families and help them enroll their children in Medicaid or CHIP.*

The initiative is a partnership between the federal and state governments that will help provide children with the health coverage they need to grow up healthy and strong. At President Clinton's insistence, the CHIP program requires that states use this new money to cover uninsured children -- and not replace existing health coverage. The program also includes important cost-sharing protections so that families will not be burdened with heavy out-of-pocket expenses.

Funds for the program became available to the states on October 1, 1997, and HHS is working closely with states to approve plans in accordance with the new law. States can receive federal matching funds only for actual expenditures to insure children.

Most state CHIP plans have been approved. *Since the program was created on October 1, 1997, 53 states and territories have submitted CHIP plans for approval by the Department of Health and Human Services. CHIP plans have been approved for 50 states and territories: Alabama, Colorado, South Carolina, Florida, Ohio, California, New York, Illinois, Michigan, Connecticut, New Jersey, Missouri, Rhode Island, Oklahoma, Massachusetts, Pennsylvania, Wisconsin, Oregon, Texas, Idaho, Puerto Rico, Indiana, Utah, North Carolina, Minnesota, Maryland, Arkansas, Nebraska, Maine, Nevada, South Dakota, Iowa, Kansas, Delaware, Georgia, Montana, New Hampshire, West Virginia, the Virgin Islands, the District of Columbia, Arizona, North Dakota, Louisiana, Virginia, Mississippi, Kentucky, Alaska, Vermont, New Mexico, and Hawaii. In addition, 11 states have submitted and had amendments approved to expand their CHIP plans. The following state plans have been submitted: Tennessee, Guam, and American Samoa. According to states' estimates, more than 2.5 million children will be covered when these CHIP plans are fully implemented.*

EXPANDING CHILDREN'S ACCESS TO HEALTH COVERAGE

The federal-state Children's Health Insurance Program (CHIP), created under the new Title XXI of the Social Security Act, will expand health coverage to uninsured children whose families earn too much for Medicaid but too little to afford private coverage. It builds on Medicaid, the federal-state health insurance program that covers approximately 36 million low-income individuals, including 18 million children. Because Medicaid allows states flexibility in determining eligibility, states currently cover children whose family incomes range generally from below the federal poverty level to as high as 300 percent of poverty. (Note: One State, Tennessee, has no upper income cap.) The majority of states cover children in families between 100 and 150 percent of the federal poverty level (FPL). In the new CHIP program, states may either cover children in families whose incomes are above the Medicaid eligibility threshold but less than 200 percent of poverty, or within 50 percentage points over the state's current Medicaid income limit for children. ✓

Ensuring Meaningful Health Benefits. Under the new program, states have flexibility in targeting eligible uninsured children. States may choose to expand their Medicaid programs, design new child health insurance programs, or create a combination of both. States choosing a new children's health insurance program may offer one of the following benchmark plans: the standard Blue Cross/Blue Shield Preferred Provider Option offered by the Federal Employees Health Benefit Program; a health benefit plan offered by the state to its employees; or the HMO benefit plan with the largest commercial enrollment in the state. A state may also choose to offer the "equivalent" of one of the benchmark plans. If a state chooses this option, its plan's value must be at least equal to the benchmark plan's and it must include: inpatient and outpatient hospital services; physicians' surgical and medical services; laboratory and X-ray services; and, well baby/child care services, including immunizations. In addition, if the plan a state chooses as its benchmark includes coverage for prescription drugs, mental health services, vision care, and hearing-related expenses, the state's "equivalent" plan must include similar benefits. Under the law, New York, Pennsylvania and Florida can continue to offer their current benefit arrangements (with some modifications to comply with the law's cost-sharing protections). States choosing the Medicaid option will offer Medicaid benefits for children.

Limiting Patient Costs. Patient out-of-pocket costs for this program are allowed but are limited. If a state expands its Medicaid program, then existing Medicaid limits apply to the newly enrolled children. If a ^{separate state} new health plan is developed, premiums for families whose income is under 150 percent of the poverty level cannot exceed \$19 per family per month and copayments must be nominal. Cost sharing is not permitted for well-child, well-baby visits. For families with incomes above 150 percent of poverty, cost-sharing must be based on an income-related sliding scale with an annual total for all children not to exceed five percent of the family's income. X

Preventing Cost Shifting. To prevent states from shifting children from the traditional Medicaid program to this new program, states must not tighten the Medicaid eligibility standards for children that were in place on March 31, 1997. In addition, states must enroll all children who meet Medicaid eligibility rules in the Medicaid program not in the new CHIP plan. All states must design their programs to prevent private cost shifting as well. In their child health plans, states will describe methods they will use to prevent "crowd out" or the shifting of children from private insurance to CHIP. ✓

- 3 -

ACCESSING FEDERAL FUNDING

Under the new law, states are eligible to receive an enhanced federal matching rate drawn from an "allotment" for state programs approved by the Secretary of Health and Human Services that expand access to targeted, low-income children under the new CHIP program. Funds will be allocated to each participating state according to their number of uninsured low-income children, accounting for regional cost differences. Available state allocations for FY 1998, which were published in the *Federal Register* in September 1997, ranged from \$3.5 million for Vermont's relatively small population to a high of \$855 million for California. States may use up to 10 percent of the CHIP benefit expenditures for outreach, services other than the standard benefit package for eligible children, and administrative costs. To access the FY 1998 allocation, states must have their CHIP plans approved by the Secretary of Health and Human Services by Sept. 30, 1999. The FY 1999 budget includes \$4.275 billion for FY 1999 state allotments. Allocations for FY 1999 funds were announced in February 1999 and are similar to the amounts for FY 1998. ✓

The Department of Health and Human Services (HHS) is working closely with states to design CHIP plans that meet the requirements of the new law. HHS has written to each state outlining the new program, and has published a list of the state allotments; a preliminary check-list of information states must submit to HHS when applying for their allotments; and answers to the most commonly asked questions from states about how to develop their children's health insurance programs. The department works with states to expedite the development and implementation of state CHIP plans. X

ensure that
states

EXPANDING OUTREACH

The Clinton Administration has made significant efforts to reach out to families whose children qualify for CHIP. These efforts include:

The Announcement of an Historic Private Sector Commitment to Provide Outreach. On February 23, 1999, the President announced unprecedented new contributions from the private sector to help ensure that all children who are eligible for health insurance receive it, including:

- ◆ **A new toll-free number, 877-KIDS-NOW, that directs families around the nation to their state enrollment centers.** The President announced that the National Governors' Association with a grant from Bell Atlantic has established a national toll-free number to help states reach uninsured children. The number, 877-KIDS-NOW will automatically direct callers to their state's enrollment agency.

A national radio advertising campaign to promote the *Insure Kids Now* Campaign. HHS is sponsoring a national radio advertising campaign to promote the 877-KIDS-NOW toll-free number and to complement states' outreach efforts. ~~The campaign~~ The HHS radio campaign includes a four-week paid radio campaign and public service announcements to be distributed throughout each state. X

The first phase of the radio advertising campaign included eight states and began on November 9, 1998. The second phase began February 23, 1999 and will run through March 19 in 11 states. Subsequent phases will continue through May, eventually reaching 44 states.

- ◆ **\$45 million in commitments from private foundations across the country.** The Robert Wood Johnson Foundation will spend \$45 million over the next 3 years, to fund innovative state-local coalitions to design and conduct outreach initiatives, simplify enrollment processes, and coordinate existing coverage programs. The Kaiser Family Foundation will spend up to \$10 million over the next 5 years on studies to help understand why eligible children do not enroll in existing programs and how best to provide insurance coverage for these children. America's Promise, with support from the Robert Wood Johnson Foundation and in collaboration with the American Academy of Pediatrics, will mobilize corporations such as SmithKline Beecham and Schering Plough and local communities nationwide in children's health outreach efforts.
- ◆ **New initiatives from corporate and advocacy organizations to reach out to uninsured children.** Procter and Gamble, the manufacturer of Pampers diapers, has volunteered to include a letter in its child birth education packages, given to 90 percent of first-time mothers, providing families information about available health insurance options. Grocery stores and chain drug stores across the country will provide information about the new toll-free number to their customers. The National Education Association will launch an unprecedented effort to educate teachers on how they can inform children and their families about health insurance, through national newsletters, conferences, and special training sessions. The American Hospital Association's Campaign for Coverage will increase its nationwide initiative to engage hospitals in helping uninsured Americans, including children.

New Presidential Directive to Launch a Government-Wide Effort to Enroll Uninsured Children. As the first step in his public-private children's health outreach campaign, the President directed executive departments to commit to enrolling uninsured children in State health insurance programs. In response, eight Federal agencies developed plans in three areas: how to educate their workforce; how this workforce can help educate families about State health insurance programs; and how to coordinate cross-agency and public-private efforts to identify and enroll children in these programs. In June of 1998, this Federal Interagency Task Force on Children's Health Insurance Outreach prepared a report to the President, outlining activities that Federal agencies would undertake to identify and help to enroll in children in Medicaid or other health insurance programs prior to June, 1999. The President charged the Secretary of the Department of Health and Human Services with oversight of the implementation of this outreach initiative.

Since then, each of the eight departments has been actively engaged in the outreach activities they identified in this report. For example, the Department of Agriculture has widely distributed CHIP information to WIC programs in states. In Virginia, the WIC Program has distributed 100,000 CHIP brochures and applications to WIC participants during clinic visits. HUD-sponsored Neighborhood Networks centers, which provide computer training at no cost to residents of more than 400 HUD-assisted multifamily housing developments, have started serving as an access point to download Federal and State information about Medicaid and CHIP.

- ◆ **Supporting the *Insure Kids Now* Campaign.** The committee prepared an outreach training kit for use by workers from all federal departments that will participate in *Insure Kids Now* campaign, in concert with the national toll-free number for children's health insurance outreach. The kit contains a presentation outline, posters, and materials that can be used as handouts. In addition, federal departments have promised to distribute more than 140,000 outreach posters to their grantees, field offices, and human services agencies.

BUILDING ON PREVIOUS CLINTON ADMINISTRATION ACTIONS

Since 1993, HHS has approved Medicaid waivers for 18 states for comprehensive health care reform projects that have allowed states to control costs and expand coverage. In addition, HHS has approved requests from 19 states for Medicaid waivers as part of larger welfare reform projects, as well as 25 local Medicaid demonstration projects. *When fully implemented, these demonstration projects will extend health coverage to 2.2 million parents and children who otherwise would be uninsured.*

President Clinton also signed into law the Health Insurance Portability and Accountability Act of 1996, creating important new protections for an estimated 25 million Americans (approximately 1 in 10) who move from one job to another, who are self-employed, or who have pre-existing medical conditions.

CHIP also builds on the Clinton Administration's long standing commitment to improving health care for children. The President has issued guidelines to eliminate easy access to tobacco products and to prohibit companies from advertising tobacco to kids. He also recently announced that in 1996, over 90 percent of America's toddlers received the most critical doses of each of the routinely recommended vaccines -- surpassing the goal he set in 1993. And, the FDA recently released a rule that requires manufacturers to do studies on pediatric populations for new prescription drugs as well as those currently on the market.

Combined, this administration's efforts will help assure that children get the healthy start they need to live long and productive lives.

STATE CHIP PROGRAMS

Descriptions of approved state CHIP programs follow:

Alabama

Alabama could receive as much as \$85 million for both FY 1998 and FY 1999 for its CHIP plan. The state is implementing its CHIP plan in two phases. The first phase expanded Medicaid eligibility to uninsured children under 19 years of age whose family incomes do not exceed 100 percent of the federal poverty level (FPL). The AL-Kids program, the second phase, is a separate state children's health insurance program that will expand coverage to children up to age 19 whose family income is between 100 and 200 percent of the FPL. AL-KIDS offers coverage comparable to the HMO with the largest insured commercial, non-Medicaid enrollment in the state. With both phases, Alabama expects to insure 36,000 children by September 1999. Alabama will hire extra outreach workers to increase the number of children located and enrolled in Medicaid. Information on the new program will be advertised through newspapers, public service announcements and through the school system. Alabama was the first state approved on January 30, 1998 and its amendment was approved August 18, 1998.

Alaska

Alaska could receive as much as \$6.8 million for both FY 1998 and FY 1999 for its CHIP plan. Alaska will use its CHIP allocation to expand its Medicaid program. Currently, the state covers children to age

1 in families with incomes up to 185 percent of the FPL, children 1-6 in families with incomes up to 133 percent of poverty, and children ages 6-19 in families with incomes up to 100 percent of poverty. The state will use its Title XXI funds to expand Medicaid coverage to children in families with incomes up to 200 percent of the FPL. Eligible children will receive the full Medicaid benefit package and there are no cost sharing requirements. To reach eligible children, the state will work with local governments, schools, health care providers, tribal entities, and non-profit corporations serving children. The state plans to implement expanded eligibility on March 1, 1999 and it expects to enroll 4,900 children by October 2000. Alaska's plan was approved December 11, 1998.

Arizona

Arizona could receive as much as \$116 million for both FY 1998 and FY 1999 for its CHIP plan. Arizona will use its CHIP allocation to create, KidsCare, a new health insurance program which will cover children from birth through age 15. Income eligibility will increase over time, beginning at 150 percent of the FPL and rising to 175 percent on July 1, 1999, then to 200 percent from 2000 through 2007. The state expects to insure nearly 50,000 children by September 2000. Enrollees will receive coverage through established Arizona Health Care Cost Containment System plans and state employee health maintenance organizations that elect to participate in the program. American Indians may choose to receive services through the Indian Health Service as well. Participants will pay a \$5 copayment for non-emergency use of the emergency room. To assist with outreach, the state has created an Outreach Coordinator position and has sent applications to organizations that serve low-income children. Arizona was approved on September 18, 1998.

Arkansas

Arkansas could receive as much as \$47 million for both FY 1998 and FY 1999 for its CHIP plan. The state will use its CHIP allocation to expand Medicaid coverage to nearly 3,600 children who would otherwise not have health insurance. It will cover children born after September 30, 1982 and prior to October 1, 1983 whose family income is at or below 100 percent of the FPL. Arkansas is currently considering how to structure the second phase of its Title XXI program to cover even more children. The state currently has a Medicaid section 1115 waiver, ARKids First, that serves children through age 18 with family incomes up to 200 percent of poverty. Outreach activities will include radio and TV ads, a direct mail campaign, a toll-free number, and print advertising. Arkansas was approved on August 6, 1998.

California

California could receive as much as \$855 million for both FY 1998 and FY 1999 for its CHIP plan. The state will expand its Medicaid program, known as Medi-Cal, by implementing an income disregard and by making children under age 19 eligible if they have family incomes at or below 100 percent of the federal poverty level. The state will also expand its current state program, known as Access for Infants and Mothers (AIM), which will cover infants up to age 1 from 200 percent to 250 percent of poverty. Through CHIP, California will also expand its Healthy Families program, which will provide coverage for children age 1-19 with family incomes from 100 percent to 200 percent of the federal poverty level. California insuring 500,000 children by the end of FY 1998. As part of its outreach efforts, California will subcontract for a media campaign with private and community based organizations, health brokers and insurance agents to directly identify and assist potential enrollees in filling out the joint application

form for the Medi-Cal and Healthy Families program. In addition, California will conduct a provider education campaign to support its outreach effort. California was approved on March 24, 1998.

Colorado

Colorado could receive up to \$42 million for both FY 1998 and FY 1999 for its CHIP plan. The state will expand children's access to health coverage by building on its own Colorado Child Health Plan. The state expects to cover a total of 23,000 children under this non-Medicaid managed care plan by the third year. The benefit package will include services such as hospital and emergency room transport, inpatient services, medical office visits, and prescription drugs. Coverage will be provided to children from birth through age 17 for families whose income is at or below 185 percent of the federal poverty level. The state will publicize the program through press releases, public service announcements, schools, employers, county agencies and regional and social agencies. Colorado was approved on February 18, 1998.

Connecticut

Connecticut could receive approximately \$35 million for both FY 1998 and FY 1999 for its CHIP plan, which state officials will use to insure as many as 15,000 new children by June of 2000. The state will use its new allocation to both expand its Medicaid population and create a new program based on the state employee's health plan. Under the state's HUSKY program, Medicaid eligibility will be expanded to include children ages 14 through 18 with household incomes of up to 185 percent of the federal poverty level. Previously, the Medicaid program only covered children up to age 13 in families with incomes up to 185 percent of poverty. The state estimates that an additional 14,400 children will be added to the Medicaid program. The new health insurance program, Part B of HUSKY, will be targeted toward children up to age 18 in families with incomes up to 235 percent of poverty. The state will apply an income disregard - setting aside certain types of income the family may have - effectively bringing coverage to 300 percent of poverty. Before income disregards are applied, HUSKY Part B will charge families with incomes above 235 percent of poverty premiums of \$30 per child, with an upper limit of \$50 per family. Children with special physical and behavioral health needs will receive those services under a special third part of the program, HUSKY Plus. Outreach for the state will include radio and TV ads, a direct mail campaign, brochures/flyers, video, a toll-free number, web sites and state presentations and mail-in applications. Connecticut was approved on April 27, 1998.

Delaware

Delaware could receive as much as \$8 million for both FY 1998 and FY 1999 for its CHIP plan. Delaware will use its CHIP allotment to create a separate state children's health insurance plan which targets children under age 19 whose family incomes are less than 200 percent of the FPL. Coverage will be provided through the state employee health plan and will include pharmacy services, mental health and substance abuse care. Monthly premiums will be charged on a sliding scale based on income. Delaware officials estimate they will insure about 10,500 children by October 1999. Delaware's plan was approved on September 1, 1998.

District of Columbia

The District of Columbia could receive as much as \$12 million for both FY 1998 and FY 1999 for its CHIP plan. The District plans to expand its Medicaid program to children from birth to age 19 whose

family income is less than 200 percent of the FPL. Enrollees will receive the regular Medicaid benefits package and there will be no cost sharing for families. The District anticipates enrolling nearly 8,400 children in its program, which will be called Healthy DC Kids. As part of its outreach efforts, the District will set up a telephone hotline to handle inquiries and has created a single, two-page, mail-in application for both Medicaid and CHIP. The District of Columbia's CHIP plan was approved September 17, 1998.

Florida

Florida could receive as much as \$270 million for both FY 1998 and FY 1999 for its CHIP plan. Phase One of Florida's new CHIP plan expanded Medicaid eligibility to children in families earning up to 100 percent of the FPL and expanded Florida's Healthy Kids program, a comprehensive program that was piloted in 20 counties, to additional counties. Phase Two will create the Florida KidCare Program which consists of: expanding the Healthy Kids program on a state-wide basis and expanding eligibility for the program to children through age 18 in families with incomes up to 200 percent of FPL; creating the MediKids program to provide coverage for children up to age 5; creating the Children's Medical Services Network for children up to 18 with special needs; and expanding Medicaid to cover children ages 15 - 19 to 100 percent of FPL. The state plans to simplify its enrollment form and enrollment process and is developing an outreach strategy. State officials hope to enroll 175,000 children in the combined Florida Kidcare program by July 1, 1999. Florida received its plan approval on March 5, 1998, and its amendment approval on September 8, 1998.

Georgia

Georgia could receive as much as \$125 million for both FY 1998 and FY 1999 for its CHIP plan. Georgia will create a separate insurance program for children from age 0-18 whose families have incomes of less than 200 percent of poverty and who are not eligible for Medicaid. Enrollees will receive benefits comparable to the current Medicaid package. There is no cost sharing for children under age 6; for children over age 6 there is a monthly premium of \$7.50 for one child and \$15 for two or more children. The state expects to insure 58,000 children by FY 2000. Georgia's plan was approved September 3, 1998.

Hawaii

Hawaii could receive as much as \$9 million for both FY 1998 and FY 1999 for its CHIP plan. The state will use its CHIP allotment to expand Medicaid to cover children between ages 1 and 6 with incomes up to 185 percent of the FPL. Enrollees will receive the state's Medicaid benefit package and there will be no out-of-pocket costs to families participating in the program. Hawaii's CHIP plan builds on its Medicaid demonstration program -- QUEST -- which is attempting to provide universal coverage for residents who are not covered under the state's mandatory employer-sponsored insurance program. Hawaii will launch its CHIP plan in January 2000 and it plans to submit amendments to expand the program to more children. For outreach activities, the state will collaborate with schools to provide Medicaid and CHIP information. Hawaii will also distribute Medicaid and CHIP information through health care providers, the unemployment office, the Office of Youth Services, places of worship, and activity-based organizations such as sports, scouts, and schools of Hula. In addition, the State will establish a toll-free information line, a web site, and a media campaign on the Medicaid/CHIP program. Hawaii expects to insure nearly 500 children by September 30, 2000. Its plan was approved January 19, 1999.

Idaho

Idaho could receive as much as \$15.8 million for both FY 1998 and FY 1999 for its CHIP plan, which state officials will use to insure nearly 5,000 children. Idaho will use its new CHIP allocation to expand Medicaid eligibility to children up to age 19 in families with incomes up to 160 percent of the federal poverty level. Due to state legislation, the income threshold will be 150 percent of the federal poverty level effective, July 1, 1998. The state has formed a task force to study ways of further expanding Idaho's CHIP program. Children in the Medicaid expansion will receive the state's standard Medicaid benefit package, which includes inpatient and outpatient hospital services, inpatient psychiatric care, physician services, dental services, home health services, lab services, and prescription drugs. Outreach activities include mailing postcards to potential enrollees describing Title XXI. The mailing list is comprised of families who have lost cash assistance between April and December 1997. Idaho was approved on June 15, 1998.

Illinois

Illinois could receive as much as \$123 million for both FY 1998 and FY 1999 for its CHIP plan, which state officials will use to insure 40,000 additional children within the next three years. With its new CHIP allotment, Illinois will expand Medicaid eligibility for children up to age 19 whose families have incomes at or below 133 percent of the federal poverty level. Prior to the CHIP expansion, the income level for Medicaid eligibility varied based on the age of the child. Under the new program, income thresholds have been equalized. State outreach efforts will include reviewing automated records to identify eligible participants followed by the notification of those individuals. In addition, the Illinois Department of Public Aid will send a notice to all non-assistance Child Support families informing them of the program and of locations where families can go to enroll their children. Illinois was approved on April 1, 1998.

Indiana

Under the CHIP program, Indiana could receive as much as \$70.5 million for both FY 1998 and FY 1999 for its CHIP plan. Indiana will use its new allocation to expand its Medicaid program and estimate that they will insure as many as 58,000 more children by the year 2000. The program will expand eligibility to children up to age 19 in families with incomes up to 150 percent of the federal poverty level, and the state has formed a task force to study ways to further expand its CHIP program. Children in the Medicaid expansion population will receive the state's standard Medicaid benefit package, which includes inpatient and outpatient hospital services, inpatient psychiatric care, physician services, dental services, home health care, lab services and prescription drugs. To raise awareness about the program, the state will launch a media campaign and conduct outreach through state and local government agencies and community organizations. Indiana's CHIP plan was approved on June 26, 1998.

Iowa

Iowa could receive as much as \$32 million for both FY 1998 and FY 1999 for its CHIP plan. Iowa will use its new CHIP allocation to expand Medicaid by raising income eligibility in several different age categories. The Medicaid expansion will allow children from age 6 - 18 in families whose incomes are up to 133 percent of FPL to enroll. The state's current Medicaid program covers infants up to one year of age whose families have incomes of up to 185 percent of FPL. The benefit package for CHIP will be

the same as the current Medicaid package and the state will contract an organization to run an outreach program. This outreach program will work with community and statewide organizations including provider associations, advocacy groups, Native American Tribal Councils, and refugee resettlement programs. Officials expect to insure 16,000 children by June 30, 1999. Iowa's plan was approved September 1, 1998.

Kansas

Kansas could receive as much as \$30 million for both FY 1998 and FY 1999 for its CHIP plan. With its new CHIP allotment, Kansas will create a separate insurance program called HealthWave for children through age 18 whose families have incomes of less than 200 percent of the FPL. The benefit package for children enrolled in CHIP will be the same as offered to state employees. Families with incomes above 150 percent of FPL must pay a monthly premium. Families with income between 151 and 175 percent of poverty will pay \$10 per month per family, and families between 176 and 200 percent of poverty will pay \$15 per month per family. The state will target low-income children for outreach through the public schools and will offer a toll free number to access enrollment information. Kansas hopes to enroll 30,000 children by December 31, 1999. Kansas' plan was approved on September 1, 1998.

Kentucky

Kentucky could receive as much as \$49.9 million for both FY 1998 and FY 1999 for its CHIP plan. Kentucky will use its allotment to both expand its Medicaid program and launch a separate insurance program called K-CHIP. Children ages 14-18 who are in families with incomes up to 100 percent of the FPL will be enrolled in CHIP as a Medicaid expansion. Children through age-18 in families with incomes up to 200 percent of the FPL, and who are not eligible for Medicaid, will be enrolled in K-CHIP. The K-CHIP benefit plan will be a benchmark equivalent to the Standard High Option HMO plan for state employees. Benefits will also include all basic services such as inpatient and outpatient hospital services, physicians' surgical and medical services; laboratory and x-ray services, and well-baby and well-child care. There is some cost sharing, but costs will not exceed 5 percent of family income. Families with incomes between 100 and 133 percent of the FPL will pay a \$10 premium for a six-month period. Families with incomes between 134 and 149 percent of the FPL will pay a maximum premium of \$20 for a six-month period. Families with incomes between 150 and 200 percent of the FPL will pay a maximum of \$120 for a six-month period, and payments can be made at \$20 each month or \$60 per quarter. To reach eligible children, the state will conduct a media campaign and outreach activities at schools, clinics, community centers, health fairs, health departments, and housing projects. Kentucky expects to enroll nearly 50,000 children by June 2000. Kentucky's plan was approved November 25, 1998.

Louisiana

Louisiana could receive as much as \$102 million for both FY 1998 and FY 1999 for its CHIP plan. The state will use its allotment to expand Medicaid to children ages 6 through 18 whose family income is at or below 100 percent of the Federal poverty level. The benefit package will be the regular state Medicaid program and there will be no cost sharing for families. The state plans to launch a large outreach campaign to educate potential CHIP enrollees. The campaign will include media advertising and mailing to specific target audience groups, including low income working parents, current and former recipients of Families Independence-Temporary Assistance Program, children with special needs, Native

Americans, and migrant children. Louisiana estimates it will enroll more than 28,000 children by the end of September 2000. Louisiana's plan was approved October 20, 1998.

Maine

Maine could receive as much as \$12 million in federal funds for both FY 1998 and FY 1999 for its CHIP plan. The state will use its new funds to expand coverage to 10,400 children by July 2000 by combining both a Medicaid expansion and a statewide children's health insurance program, Cub Care. Through CHIP, Maine will expand coverage to children through age 18 with family incomes up to 185 percent of the federal poverty level. The Medicaid expansion will cover children aged one through 18 in families with incomes up to 150 percent of poverty. The Cub Care program will cover children in families with incomes from 151-185 percent of poverty. State outreach efforts will include a targeted media and direct mail campaign. Maine was approved on August 7, 1998.

Maryland

Maryland could receive as much as \$62 million in federal CHIP funds for both FY 1998 and FY 1999 for its CHIP plan. Maryland will expand its Medicaid program with its new CHIP allotment to an estimated 15,500 uninsured children. Under the CHIP plan, children between birth and age 19 whose family incomes are below 200 percent of poverty will receive coverage. Children covered by CHIP will receive the Medicaid benefits package. To reach families who might be eligible for CHIP, the state will launch a grassroots information dissemination campaign involving state agencies, advocacy and community groups and provider organizations. In addition, the state will launch a public media and advertising campaign to include television, radio, mass transit, and newspaper advertising. Maryland was approved July 31, 1998.

Massachusetts

Massachusetts could receive as much as \$43 million for both FY 1998 and FY 1999 for its CHIP plan, which state officials will use to expand the state Medicaid program and create a separate Family Assistance Plan. With its federal allotment, the state hopes to bring annual enrollment in the program to 37,000 children. Massachusetts will provide the state's regular Medicaid benefit package to newly-enrolled children. The eligibility level for Medicaid will be increased from the current 133 percent of FPL to children in families with incomes of up to 150 percent of poverty. The state will also use its CHIP funds to create the Family Assistance Plan for children with family incomes between 150 and 200 percent of poverty. Uninsured children with family incomes over 150 percent of poverty will be eligible for either a "direct coverage option" or for financial assistance for families to purchase dependent coverage through their employers, the so-called "premium assistance option." The Family Assistance Program will provide coverage equivalent to the insurance plan offered to federal employees in the state. These families will pay a monthly premium of \$10 per child with a family maximum of \$30 per month. Proposed outreach includes school-based campaigns, distribution of promotional materials, and giving mini-grants to community organizations to help locate hard-to-find potentially eligible children. Massachusetts was approved on May 29, 1998.

Michigan

Michigan could receive as much as \$92 million in federal funds for both FY 1998 and FY 1999 for its CHIP plan, which state officials will use to insure as many as 133,000 new children by September 2000.

The state will use its new allocation to implement MICHild. The program will provide comprehensive health care coverage to all children under age 19 whose families have incomes at or below 200 percent of the federal poverty level. The benefit package will mirror the state employees' plan and will be administered by multiple managed care providers. MICHild will not impose co-payments on families with incomes at or below 150 percent of poverty. Some co-payments will apply for families between 151-200 percent of poverty. The state's outreach efforts will include demographically-targeted media campaigns and coordination with relevant community programs and agencies. Michigan's plan was approved on April 7, 1998.

Minnesota

Minnesota has been among the most progressive states in the nation in providing health insurance coverage for children and families. The approval of Minnesota's plan enables the state to lay the groundwork for its CHIP program and to secure its CHIP allotment, which could be as much as \$28 million for both FY 1998 and FY 1999. Minnesota currently covers approximately 50,000 children who would otherwise be uninsured. The state has accomplished this through a Section 1115 Medicaid waiver amendment, granted in 1995. The MinnesotaCare program provides health coverage to pregnant women and children with family incomes up to 275 percent of the federal poverty level. Minnesota's plan was approved July 17, 1998.

Mississippi

Mississippi could receive as much as \$56 million for both FY 1998 and FY 1999 for its CHIP plan. Mississippi will expand Medicaid to cover children ages 15 through 18 in families with incomes up to 100 percent of the federal poverty level. The state estimates it will enroll 7,500 children by the end of FY 1999 and 12,000 children by the end of FY 2000. Recipients will receive the regular Medicaid benefit package and there are no cost sharing requirements. Mississippi also expanded its CHIP plan with an amendment that will create a new state health insurance program to cover children up to age 19 in families with incomes between 100 and 133 percent of the federal poverty level. The benefit package for the new separate program will be equivalent to that offered to state employees, with the addition of vision, hearing and dental services. There will be no family cost-sharing requirement. As part of an outreach plan, Mississippi will develop a broad based media campaign that will include television, radio and print advertisements. In addition, it will provide information to community health care providers, hospitals, health clinics, Indian reservations and schools. Mississippi's plan was approved October 26, 1998 and its amendment was approved February 10, 1998.

Missouri

Missouri could receive as much as \$52 million for both FY 1998 and FY 1999 for its CHIP plan, which state officials will use to insure as many as 90,000 new children by June 30, 1999. Missouri will use its new allocation to expand insurance coverage to children within the state's existing Medicaid managed care program, known as MC+. The program will expand eligibility to children in families with incomes up to 300 percent of the federal poverty level. Missouri's statewide health care reform demonstration plan was approved through a Section 1115 Medicaid waiver. It will allow the state to slightly alter the Medicaid benefit package and also enroll the CHIP children in Medicaid after the state's CHIP funds are exhausted. This Medicaid waiver will also provide coverage for certain adults, including working parents leaving welfare and mothers who otherwise would have lost their Medicaid following childbirth. Outreach efforts will be coordinated at state offices in every county. Free materials will also be

available and distributed to other entities such as social welfare organizations, schools and health care providers. Missouri's plan was approved on April 28, 1998.

Montana

Montana could receive as much as \$9 million for both FY 1998 and FY 1999 for its CHIP plan. Montana expects to insure 9,000 children by June 2000 by creating a statewide children's health insurance program. Children under age 19 whose families have incomes of less than 150 percent of poverty will qualify for the Montana CHIP plan. The benefits package will mirror the state employee health plan, including prescription drugs, emergency room services, and mental health and substance abuse treatment services. For families with incomes at or above 100 percent of poverty, the state will charge an annual enrollment fee of \$12 for one child and \$15 for families with two or more children enrolled. Copayments for some services will be charged for families whose income is above 100 percent of FPL. Copayments will be capped at \$200 per family per year. Montana's plan was approved September 11, 1998.

Nebraska

Nebraska could receive approximately \$15 million for both FY 1998 and FY 1999 for its CHIP plan. The first phase, Kids Connection Phase I, expanded Medicaid coverage to children age 15 through 18 whose family income is at or below 100 percent of the federal poverty level. Enrollees in Phase I received the state's regular Medicaid benefit package. Kids Connection Phase I was expected to enroll about 1,000 children. The amendment, Kids Connection Phase II, expanded Medicaid eligibility to children under age 19 whose family incomes are up to 185 percent of the Federal poverty level. Kids Connection II is expected to reach 16,000 children by October 2000. To encourage enrollment, the state will work with advocacy agencies in disseminating information as well as distribute pamphlets and brochures. Neither phase has cost-sharing for enrollees. The state's original plan was approved August 7, 1998, and an amendment was approved October 13, 1998.

Nevada

Nevada could receive as much as \$30 million for both FY 1998 and FY 1999 for its CHIP plan. With its new CHIP allotment, the state will create, Nevada Check Up, a statewide health insurance program which will provide coverage to children up to age 18 in families with incomes at or below 200 percent of poverty. The Nevada Check Up program is estimated to cover 43,500 children in its first year. To encourage enrollment, the state has simplified the CHIP eligibility application, which will be available statewide through schools, child care facilities, family resource centers, social service agencies, and other locations where eligible children and/or their parents frequent. The state has also established a toll-free information number, which is listed on posters, marketing brochures, and the application form. Public service announcements are also planned. Nevada's plan was approved on August 13, 1998.

New Hampshire

New Hampshire could receive as much as \$11 million for both FY 1998 and FY 1999 for its CHIP plan. The state will use its CHIP allocation to expand its Medicaid program and create a separate statewide children's health insurance program. Healthy Kids-Gold, or Phase I, will expand Medicaid eligibility for newborns and infants up to age one in families with incomes up to 300 percent of the FPL. Healthy Kids-Silver, or Phase II, will be a separate statewide health insurance plan that will mirror the benefit

package offered to federal employees in the state. Healthy Kids-Silver is aimed at children ages 1 to 19 in families with incomes up to 300 percent of poverty. In order to expand its coverage to this level of family income, the state will apply an income disregard—setting aside certain types of income the family may have. The state expects to insure 4,000 children by September 2000. New Hampshire's plan was approved September 16, 1998.

New Jersey

New Jersey could receive approximately \$89 million for both FY 1998 and FY 1999 for its CHIP plan, which state officials will use to insure as many as 102,000 new children by the end of the program's first year. The state will use its new allocation to create NJKidCare which will include a Medicaid expansion and a new state CHIP plan. The Medicaid expansion will provide comprehensive health care coverage to all children under age 19 whose families have incomes at or below 133 percent of the federal poverty level. The new CHIP insurance program will be targeted to children in families with incomes above 133 percent to 200 percent of poverty. The new program will charge families a \$15 per month premium. The state will have a fourfold outreach effort which will include: public awareness, targeted outreach, community education, and consumer education. The state is also committed to targeting outreach to special populations such as HIV and homeless populations. New Jersey's plan was approved on April 27, 1998.

New Mexico

New Mexico could receive as much as \$57 million for both FY 1998 and FY 1999 for its CHIP plan. The state will use its allotment to expand its Medicaid program for children from birth to age 18 in families with incomes up to 235 percent of the FPL. Enrollees will receive the state's Medicaid benefit package. Families with incomes between 186 and 235 percent of the FPL will pay copayments of \$5 for most services, but cost sharing cannot exceed five percent of a family's income. In accordance with the CHIP law, preventive services and prenatal care are exempt from cost sharing. Working with a private contractor, the state will conduct a public awareness campaign to inform potential enrollees. In addition, New Mexico will work with the Indian Health Service to assure CHIP access to American Indians. New Mexico expects to insure 5,000 children by September 30, 2000. Its CHIP plan was approved January 11, 1999.

New York

New York was one of three states for which existing children's health coverage benefit packages were "grandfathered" into the CHIP legislation. The state could receive as much as \$256 million in new funds for both FY 1998 and FY 1999 for its CHIP plan, which state officials will use to insure as many as 360,000 additional children within the next three years. New York will use its new allocation to expand its existing CHPlus program, which currently provides insurance to children up to age 19 whose families have incomes at or below 185 percent of the federal poverty level. CHPlus is a partnership between the state and private insurers with the state subsidizing private coverage for enrollees. The benefit package includes a full range of inpatient and outpatient services. The state's outreach activities will include a statewide media campaign that will be conducted by the New York State Department of Health. New York's plan was approved on April 1, 1998.

North Carolina

North Carolina could receive as much as \$79 million in new funds for both FY 1998 and FY 1999 for its CHIP plan. North Carolina will use its CHIP allocation to create a separate state health insurance program to provide coverage to uninsured children whose family income does not exceed 200 percent of the federal poverty level. The state expects to insure 35,000 children. Families whose incomes rise above 200 percent of poverty up to a maximum of 225 percent will be able to buy into the program for one year. The benefit package is equivalent to that offered to state employees, plus Medicaid-equivalent benefits for children with special health care needs. North Carolina plans to improve outreach efforts by simplifying the application forms for both Medicaid and CHIP and by using existing public/private partnerships between local departments of health and social services. North Carolina's plan was approved on July 14, 1998.

North Dakota

North Dakota could receive as much as \$5 million in new CHIP funds for both FY 1998 and FY 1999. The approval of North Dakota's plan enables the state to lay the groundwork for its CHIP program and to secure its FY 1998 CHIP allotment. The first phase of the state's program will enroll 500 children by Oct. 1999 by expanding its Medicaid program to include 18 year old children whose family income is at or below 100 percent of the federal poverty level. Currently, North Dakota's Medicaid program covers children age seven through 17 whose families have incomes of 100 percent of poverty or less. Children up to age 6 are eligible if their families have incomes at or below 133 percent of poverty. The benefit package is the same as the Medicaid program in the state. North Dakota's plan was approved October 8, 1998.

Ohio

Ohio could receive as much as \$115 million in federal funds for both FY 1998 and FY 1999 for its CHIP plan. With its CHIP allotment, Ohio will expand eligibility within its existing Medicaid program. The state will expand Medicaid eligibility to cover children up to age 19 whose families have incomes at or below 150 percent of the federal poverty level and will expand coverage to as many as 133,000 uninsured children by 1999. To encourage enrollment, the state will survey community agencies on how they conduct Medicaid eligibility outreach, and develop media strategies for statewide education provided to Medicaid consumers and providers. Ohio's plan received approval on March 23, 1998.

Oklahoma

Oklahoma could receive as much as \$85 million in new funds for both FY 1998 and FY 1999, which state officials will use to expand its Medicaid program. With its federal allotment, the state hopes to expand coverage to 71,000 children by the end of the program's first year. Oklahoma will provide the state's regular Medicaid benefit package to the newly-enrolled children. Oklahoma plans to use its CHIP allotment to provide Medicaid coverage to children born on or after October 1, 1983, with family incomes up to 185 percent of the federal poverty level. The Oklahoma Health Care Authority is collaborating with other interested agencies in the state to develop a marketing and outreach plan. The plan will consist of posters, public service announcements, fact sheets, press releases and outdoor advertising. Oklahoma's plan was approved on May 26, 1998.

Oregon

Oregon could receive as much as \$39 million in new funds for both FY 1998 and FY 1999, which state officials estimate they will use to enroll approximately 17,000 children in their CHIP program by July 1, 1999. Oregon will use its new allocation to expand coverage to children from birth to age 6 with incomes between 133 percent and 170 percent of the federal poverty level. Coverage will also be extended to children from age 6 to age 19 with family incomes between 100-170 percent of poverty. Children in the new CHIP program will receive the same benefit package as children currently enrolled in the state's Medicaid section 1115 waiver demonstration. The benefit package includes inpatient and outpatient hospital services, inpatient psychiatric services, physician services, dental services, home health services, lab services, prescription drugs and other medically necessary services. Oregon will convene a task force of public and private partners to develop a consolidated Medicaid and CHIP outreach plan. Oregon's plan was approved on June 12, 1998.

Pennsylvania

Pennsylvania could receive as much as \$117 million in new funds for both FY 1998 and FY 1999, which state officials will use to fund its existing Pennsylvania CHIP program. Pennsylvania is one of three states that had the benefit package of their existing state children's health program grand-fathered under CHIP. State officials estimate that with the state's initial plan -- approved May 28 -- and amendment approved October 28, Pennsylvania will be able to insure 80-100,000 children by September 1999. The first phase provided coverage to children age one through 16 with family incomes at or below 185 percent of poverty. The amendment to Pennsylvania's CHIP plan expands eligibility for children from birth to age 18 in families with incomes up to 200 percent of the federal poverty level. The benefit package includes a full range of inpatient services. Outreach activities in the state include canvassing local businesses, day care centers, school districts, hospitals, religious organizations, social service agencies and civic groups.

Puerto Rico

Puerto Rico could receive as much as \$9.8 million in new funds for FY 1998 and \$39 million for FY 1999 under the CHIP program. Puerto Rico will use its allotment to expand Medicaid eligibility. Medicaid coverage will be expanded to cover children through age 18 in families with incomes below 200 percent of the commonwealth poverty level (\$8,220 for a family of four). Federal CHIP funding will allow Puerto Rico to cover approximately 20,000 children. Puerto Rico's program will also include children currently under its public health system, which receives no federal funding. Puerto Rico is also unique in that it has elected to contribute more money than the standard federal-state matching funds. Officials in Puerto Rico estimate that there will be 165,000 children in their CHIP plan by the end of FY 1998. Puerto Rico will develop a number of outreach efforts, including disseminating brochures, leaflets, and posters with information on the CHIP program; launching a broad-based media campaign; and appealing directly to eligible children and families. Puerto Rico's plan was approved June 26, 1998.

Rhode Island

Rhode Island could receive as much as \$10.6 million for both FY 1998 and FY 1999, which state officials will use to insure as many as 3,400 children by the end of FY 2000. Rhode Island has already had its initial plan and an amendment approved. Under the initial plan, the state is using its allocation to expand its Medicaid program to provide comprehensive health care coverage to children between the

ages of 8 and 15 whose family income is between 100 and 250 percent of the federal poverty level. The program will also cover children 15 to 18 whose families have incomes up to 250 percent of poverty. Under the amendment, Rhode Island will expand benefits for uninsured children up to age 19 to 300 percent of the federal poverty level. Beginning at 185 percent of the federal poverty level, or about \$30,432 for a family of four, families will begin paying modest premiums or co-payments. In order to effectively reach the target population, various outreach methods will take place. The first phase of Rhode Island's outreach efforts, a public information campaign, will last four months. The second phase of outreach will include follow-up and evaluation activities which will last approximately six months. Rhode Island's plan was approved on May 8, 1998 and its amendment was approved February 4, 1999.

South Carolina

South Carolina had already begun to expand its Medicaid program when the new CHIP law was enacted, and could receive over \$63 million in new funds for both FY 1998 and FY 1999. The state will use its share of CHIP funds to expand its Medicaid program, and hopes to enroll an additional estimated 75,000 children. Regular cost-sharing rules apply and eligibility will be extended to children under age 19 whose family incomes are at or under 150 percent of the federal poverty level. The state has placed eligibility workers in public schools, hospitals, clinics, pharmacies and other places frequented by families with potentially eligible children. South Carolina's plan was approved on February 18, 1998.

South Dakota

South Dakota could receive as much as \$8.5 million for both FY 1998 and FY 1999. The state will use its CHIP allocation to expand its Medicaid program to insure 7,400 children in its first year. The state will increase eligibility limits for children ages 6 to 18 from the current limit of 100 percent of FPL to 133 percent of FPL. The benefit package for children enrolled in CHIP will be the same as that offered to other children in the state's Medicaid program. Families will not be charged for medical care under this CHIP program. The state will identify eligible children and mail their families applications. South Dakota's plan was approved on August 25, 1998.

Texas

Texas could receive as much as \$561 million in new funds for both FY 1998 and FY 1999, which state officials estimate that they will use to enroll nearly 58,000 children in their CHIP program by October 1, 1999. Texas will use its allotment to expand Medicaid eligibility to children up to age 19 in families with incomes below 100 percent of the federal poverty level. Texas currently covers children from birth to one in families with incomes up to 185 percent of poverty, ages 1-5 up to 133 percent of poverty, ages 6-14 up to 100 percent of poverty, and ages 15-19 up to 47 percent of poverty. The state also plans to expand coverage to additional low-income children and families by submitting an amendment to their CHIP program in 1999. Outreach activities will include working the entire network of public health providers to disseminate outreach materials to providers so that they may supply information to families with potentially eligible children. Texas' plan was approved on June 15, 1998.

Utah

Utah could receive as much as \$24 million in new funds for both FY 1998 and FY 1999, which state officials estimate will insure 21,000 children in their CHIP program by 2000. Utah will use its CHIP allocation to create a separate state health insurance program to provide coverage to uninsured children

up to age 19 whose family incomes do not exceed 200 percent of the federal poverty level. The plan does have some cost sharing for services, but no premiums or enrollment fees will be charged. Copayments and out-of-pocket maximums will be determined by income level. The state will use Medicaid eligibility workers already placed in 98 hospitals, community health centers, local health departments, and other allied agencies to determine CHIP eligibility. The state will also do outreach through community presentations, toll-free telephone lines, brochures, flyers and postcards. Utah's plan was approved July 10, 1998.

Vermont

Vermont could receive as much as \$3.5 million in funds for both FY 1998 and FY 1999 for its CHIP plan. The state will use its allotment to create a separate health insurance program to cover children up to age 18 in families with incomes between 225 and 300 percent of the FPL. Health services to children will be delivered by the managed care organizations that currently provide services under the Vermont Health Access Plan, a Medicaid section 1115 waiver. An amendment to the Medicaid waiver was approved November 6, 1998, allowing the state to expand coverage to underinsured children up to 300 percent of the FPL. The benefits package for the Vermont CHIP program is the same as provided through the state's Medicaid program. The state will charge beneficiaries a premium of \$10 per month per household. Beginning July 1, 1999, providers will be allowed to charge a \$10 copayment for office visits. No copayments will be charged for well-baby and well-child visits. Maximum cost sharing will not be allowed to exceed 5 percent of a family's income. The state will integrate its outreach activities with the current outreach campaign for Medicaid, which includes advertising, brochures, flyers, and outreach through community health and social service providers. Vermont also offers a toll-free telephone line with information on Medicaid and CHIP. Vermont expects to insure 1,088 children by October 2000. Its CHIP plan was approved December 15, 1998.

Virginia

Virginia could receive as much as \$68 million in funds for both FY 1998 and FY 1999 to create a separate children's health insurance plan, the Virginia Children's Medical Security Insurance Plan. The plan has two components, the first of which provides coverage for children under age 19 in families with incomes up to 150 percent of the FPL. The second phase, which will begin at a later date, will cover children under age 19 in families with incomes up to 185 percent of the FPL. The difference between the two components is that families with incomes between 150 and 185 percent of the FPL will have out-of-pocket costs imposed through an amendment to this plan. The benefit package will be comprehensive and includes inpatient and outpatient care, laboratory services, and substance abuse treatment. To reach eligible children, the state will create a single mail-in application for both programs. The state will also place eligibility workers in different locations throughout the state, offer a toll-free hotline number, and will coordinate with school districts and local agencies to distribute applications. Virginia's plan was approved October 22, 1998.

Virgin Islands

The Virgin Islands could receive nearly \$280,000 in new funds for FY 1998 and about \$1.1 million in FY 1999. The territory will use its CHIP allocation to expand its Medicaid program to children receiving services through a territory-funded program. CHIP funds will help strengthen federal support for children's health in the Virgin Islands. The local government will not expand eligibility, but the current

income level for a family of four is \$8,500 -- or about half the level of states. The Virgin Islands' plan was approved September 17, 1998.

West Virginia

West Virginia could receive as much as \$23 million in new funds for both FY 1998 and FY 1999. The state will use its CHIP allotment to expand Medicaid eligibility to children between the ages of one and five in families with incomes up to 150 percent of FPL. The state currently has an income cutoff for that group of 133 percent of FPL. The newly covered children will receive the regular Medicaid benefit package at no cost to their families. As part of their outreach efforts, the state will include Medicaid information in all free or reduced lunch and textbook applications and the state's toll-free 24 hour hotline will include information on the CHIP program. The state is currently planning a second expansion stage. West Virginia's plan was approved on September 15, 1998.

Wisconsin

Wisconsin could receive as much as \$40 million in new funds for both FY 1998 and FY 1999, which state officials will use to expand its Medicaid program. Phase One of the state's BadgerCare plan was estimated to cover an additional 2,000 children with expanded Medicaid eligibility to children ages 15-18 in families with incomes below 100 percent of the federal poverty level. Wisconsin also had a CHIP amendment and a Medicaid waiver approved as well. While the CHIP expansion will provide health coverage to children, the waiver for the state's Medicaid program will allow Wisconsin to enroll the parents of CHIP-eligible children in that program. State officials expect the second phase of the CHIP program to enroll an estimated 23,000 children by October 2000 and the Medicaid waiver to enroll 27,000 adults in BadgerCare. All eligible children will receive the full Medicaid benefit package with no out-of-pocket costs for families. Wisconsin's outreach efforts will include: public health agencies coordinated efforts with schools; the expansion of school-based clinics in 12 Milwaukee public schools; and inclusion of schools as potential outstation sites for Medicaid eligibility workers. Wisconsin's plan was approved May 29, 1998 and the amendment was approved January 22, 1999.

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**Questions and Answers: *Insure Kids Now* National Kickoff /
CHIP Outreach Efforts
February 19, 1999
(For Internal Use Only)**

Q.1. What are you announcing today?

We are here today -- federal and state government officials, corporate and media representatives and community members -- to announce the *Insure Kids Now* initiative to help families get health insurance for their children. The campaign has several parts, but two parts are most exciting:

- A national toll free number 877-KIDS-NOW that will connect any caller to his or her state's information number for eligibility information;
- A HHS-sponsored national radio campaign to complement state and local outreach efforts;
- The new *Insure Kids Now* web site, www.insurekids.gov, with information on the eligibility requirements for each state's CHIP plans;
- And a wealth of public-private partnerships that will complement states' outreach and help millions of children get health insurance coverage.

Q.2. How many children do you expect to enroll through your *Insure Kids Now* outreach efforts?

As President Clinton has stated before, we hope to enroll as much as five million children. States' initial estimates are that they will cover over 2.5 million through CHIP and Medicaid by September 2000. It's also extremely encouraging that states are now beginning to amend their plans and expand their expected enrollment numbers.

We also expect that the CHIP program will continue to increase funding for states to do outreach, find and enroll children eligible for CHIP as well as Medicaid. We are confident that national commitments like the ones announced today will complement on-going state and local efforts and we will reach millions of children through a combination of CHIP and Medicaid outreach.

Expanding health insurance coverage to children is one of the Administration's priorities. Far too many children—as many as 11 million ages 0 to 18—are currently living without health insurance. At least 4 million of those kids are eligible for Medicaid yet not enrolled and another 3 million are eligible for CHIP. The **single biggest step** toward enrolling these kids is the passage of the Children's Health Insurance Program.

Q.3. Do all states have CHIP plans? Which states do not have approved plans and why not?

- A. Since the Childrens Health Insurance Program was signed into law in October 1997, fifty states and U.S. territories' plans have been approved by the Department of Health and Human Services. They estimate they will cover over 2.5 million children by September 2000.

There are three states -- Tennessee, Washington, and Wyoming -- which do not have CHIP plans yet. These states have done a lot for children. Both Tennessee and Washington had done an exceptional job in covering children with preexisting state programs. We continue to work with the states and hope that each state will take advantage of the CHIP.

[Note: Tennessee has submitted its plan to HHS for review. Washington and Wyoming have not submitted plans.]

Q.4. Many states have multi-million dollar allotments, but are only insuring a few thousand children. Why are we giving so much money to insure so few kids?

- A. Expanding health insurance coverage to children is one of the Administration's top priorities and actually of everyone at the event today -- public and private sector, national and local. Far too many children—as many as 11 million ages 0 to 18--are currently living without health insurance. At least 4 million of those kids are eligible for Medicaid yet not enrolled and another 3 million are eligible for CHIP. The **single biggest step** toward enrolling these kids is the passage of the Children's Health Insurance Program.

CHIP allotments are based on an estimated number of uninsured children in each state that are below 200 percent of poverty. States can receive *up to* their allotment, but are only reimbursed if they spend money on insuring children.

Q. 5. Many states have not drawn much on their 1998 allotments. Are you worried this means that CHIP isn't working?

- A. We're not worried at all. CHIP is a new program. It's going to take time for it to be fully implemented. Most states focused in the first year on designing their plans and getting approval from their state legislatures and from HHS. We expect that now that 50 state and territorial plans, as well as 11 amendments, are in place that the draw on allotments will increase significantly.

Commitments and public-partnerships like the ones announced today will help states informing working parents that free or lost health insurance is available.

Q.6. You've announced the First lady's public service announcement today. Does this have anything to do with promoting the First Lady and her possible run for a U.S. Senate seat in New York in 2000?

Not at all. Interestingly, we've found that Americans want to hear the First Lady talk about health coverage for children. To help us figure out the best way to get the message out about children's health insurance, last year several public relations firms focus-tested various messages about health care and preferences for spokesperson among working parents last year. Among the group of working parents who are the major focus of this outreach campaign, Mrs. Clinton was one of top preferences for spokesperson of the *Insure Kids Now* initiative. Her PSA was prepared last year as well – well before media speculation about her possible interest in a Senate seat.

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**FEBRUARY 23, 1999 EVENT LAUNCHING
CHILDREN'S HEALTH INSURANCE MEDIA CAMPAIGN AND TOLL-FREE LINE**

**Proposed Language on the
Role of America's Promise and America's Promise Commitment Makers
In Promoting Children's Health Insurance Outreach and Enrollment**

The federal government and states have committed billions of dollars to expand health insurance coverage for children. But simply making the funding available will not insure a single child unless the parents of eligible children know that affordable health insurance is available and that their children qualify for it. Government needs help to reach these parents.

One organization that is helping the government create public-private partnerships to spread the word is America's Promise, a national crusade for youth chaired by General Colin Powell. One of the goals of America's Promise is to give every one of our children a healthy start in life. To assist the federal government and states in their efforts to provide coverage to uninsured children, America's Promise is securing commitments from leading corporations to help inform the parents of eligible children through public service announcements and other means. Among the commitments secured by America's Promise so far is one from Bonneville International Corporation, which owns radio stations in five cities: Chicago, Los Angeles, Salt Lake City, San Francisco, and Washington, DC. Bonneville has produced six radio public service announcements, narrated by General Powell, and is donating free air time to run them on its stations. The Ad Council has agreed to expand on Bonneville's reach by distributing the PSAs nationwide.

Other America's Promise corporate and non-profit partners have also made commitments that will help connect eligible children to the free or low-cost health insurance now available to them. These corporate and non-profit partners include:

General Motors – General Motors will distribute information about the national children's health insurance toll-free line by affixing labels advertising the number to child safety seats that the company is donating to families in low-income communities across the country. General Motors will be working with the NAACP and the National Council of La Raza on this effort.

NO Glaxo Wellcome – Glaxo Wellcome has expanded its commitment to America's Promise by promoting the CHIP program in the state of North Carolina. The company has committed to supporting North Carolina Health Choices for Children by creating awareness through multiple channels, resources, and outlets across the state.

Veterans of Foreign Wars (VFW) – VFW has committed to distributing information about children's health insurance programs through its network of posts.

AMERICA'S PROMISE 003

American Hospital Association – As a commitment to America's Promise, the American Hospital Association promised to reduce the number of Americans, especially children, without health coverage by four million by establishing the "Campaign for Coverage." As of February 1999, coverage was extended to nearly 2.5 million uninsured people. This number includes extending coverage to children through CHIP and to other Americans through a variety of means.

NO
Schering-Plough Corporation – Schering-Plough has provided generous support to America's Promise to help ensure that children have access to the health care they need to grow up healthy and strong.

General Mills, Inc. – General Mills is helping to ensure that children have a healthy start in life by underwriting the work of America's Promise on the State Children's Health Insurance Program.

SmithKline Beecham – SmithKline Beecham has provided funding to America's Promise to support its work to promote a healthy start for all children.

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RESTRICTION CODES

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- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

- b(1) National security classified information [(b)(1) of the FOIA]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
- b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
- b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
- b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

AMERICA'S PROMISE
THE ALLIANCE FOR YOUTH

909 North Washington Street
Suite 400
Alexandria, VA 22314-1556
Tel. 703.684.4500
Fax 703.684.7328
www.americaspromise.org

FAX TRANSMITTAL

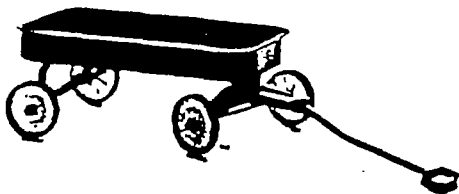
DATE: 2/19/99
TO: Barbara Woolley
COMPANY: _____
FAX NO: 202/456-6218
FROM: Donna Langill
NUMBER OF PAGES: _____ (INCLUDING COVER)

MESSAGE:

Hi, Barbara - Here is the proposed language on the role of America's Promise for the event next Tuesday. We are still working on the list of attendees, but I will send that to you by COB today. Pls. call me if you have any questions; I can be reached at _____ today. - Donna L.



[004]



SCHERING-PLOUGH CORPORATION

COMMITMENT TO AMERICA'S CHILDREN

I. WEB SITE FOR INFORMATION ON ASTHMA & HEALTH ISSUES

Schering-Plough Corporation in partnership with the National Association of School Nurses, the American Lung Association, the Asthma & Allergy Foundation of America and the American College of Asthma, Allergy and Immunology will develop a health Web site to communicate information on asthma and other health issues, including health insurance for children, to school nurses throughout the country.

The Web site will facilitate the availability of information on asthma and health issues. It will allow nurses to access current information on the effective treatment of pediatric asthma in the school setting.

The premise of this initiative is that a partnership between the private sector, school nurses and other members of the health care community will help address the needs of chronically ill children and, in so doing, help their ability to learn.

The program will be available for use by the end of the second quarter of 1999. It will be a nationwide effort. The goal is to reach as many of this country's 33,000 school nurses as possible through a state-by-state roll-out.

II. KidCare - New Jersey Component of the Federal CHIP Program

Schering-Plough Corporation will initiate a private-public collaborative effort with the Health Department in the City of Elizabeth (population: approximately 110,000) to enroll as many as 2,000 uninsured children during 1999 in the New Jersey KidCare program.

The thrust of this initiative is to increase awareness of KidCare, provide information and assistance with the enrollment process and to provide ongoing advice and information to parents with eligible children. This effort will include a citywide health fair, ongoing print and media publicity in several languages, staff and outreach workers to assist in the interpretation of eligibility guidelines and completion of the applications necessary to enroll these uninsured children.

The partners in this program are the Department of Health in Elizabeth, Elizabeth General Hospital, St. Elizabeth Hospital, Headstart representatives, PTA and school organizations, outreach workers, health care professionals and community leaders. Schering-Plough will be the corporate sponsor.

Schering-Plough Corporation is a research-based pharmaceutical company engaged in the discovery, development, manufacturing and marketing of pharmaceutical and health care products worldwide.

Contact Person: Ms. Nina Wells - Director of Public Affairs
Schering-Plough Corporation

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
005. list	Contact list re: SSN and DOB (partial) (3 pages)	03/13/1998	P6/b(6)

COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Devorah Adler
OA/Box Number: 20146

FOLDER TITLE:

CHIP [Children's Health Insurance Program] Outreach [Folder 8]

2012-0463-S

rc733

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

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- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

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C

children

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P6/(b)(6)

children

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P6/(b)(6)

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children

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P6/(b)(6)

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children

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children

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children

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children

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P6/(b)(6)

children

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children

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children

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children

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children

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children

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		Children	
Category children			



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American Academy of Pediatrics	Jackie Noyes	347-8600	601 13th St NW # 400 N Washington, DC 20005
American Academy of Pediatrics	Todd Askew	347-8600	601 13th St NW # 400 N Washington, DC 20005
American Academy of Pediatrics	Graham Newson	347-8600	601 13th St NW # 400 N Washington, DC 20005
American Academy of Pediatrics	Jennifer Stevens	347-8600	601 13th St NW # 400 N Washington, DC 20005
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American College of Preventive Medicine	Suzy Leous	466-2044	1660 L St, NW Suite 206 Washington, DC 20036
American Dental Association	Mike Graham	898-2400	1111 14th St, NW Suite 1100 Washington, DC 20005
American Hospital Association	Carla Luggiero Ann		325 Seventh St, NW Washington, DC 20004
American Psychiatric Association	Julie Shroyer Healy Wilson	682-6049	1400 K St, NW Washington, DC 20005
American Psychological Association	Jerry Steffl	336-5884	750 First St, NE Washington, DC 20002
American Public Health Association	Jeff Jacobs Jennifer Woykewill	778-9564 5600 784-5627 9564	1015 15th St, NW Suite 200 Washington, DC 20005
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Association of Maternal and Child Health Programs	Cathy Hess	775-0436	1220 19th St, NW Suite 801 Washington, DC 20036
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Child Welfare League of America	Ellen Battestelli	638-2952	440 First St, NW Suite 310 Washington, DC 20001
Children's Defense Fund	Gregg Hatfield	662-3541	25 E. St, NW Washington, DC 20001
Children's Defense Fund	Jim Weiff <i>Dr. L.C.</i>	662-3541 <i>662-3550</i>	25 E. St, NW Washington, DC 20001
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Family Voices	Gayle Brown	703/503-4529	5106 Richarson Dr Fairfax, VA 22032
Friends Committee on National Legislation	Florence Kimball	547-6000	245 2nd St, NE Washington, DC 20002
Kaiser Permanente	Jane Andrews	296-1314	1700 K ST NW Suite 601 Washington, DC 20006
March of Dimes	Marina Weiss	659-1800	1901 L St NW Suite 260 Washington, DC 20036
March of Dimes	Jo Merrill	659-1800	1901 L St NW Suite 260 Washington, DC 20036
McDermott, Will & Emery	Karen Sealander	778-8024	1850 K ST, NW Suite 500 Washington, DC 20006
National Association of Children's Hospitals	Peters Willson	703/684-1355	401 Wythe St Alexandria, VA 22314
National Association of Children's Hospitals	Ann Langley <i>Lisa Tate</i>	945-6163	3000 K ST, NW Suite 500 Washington, DC 20007

Ann

Margaret Bekas, AMHA

National Association of County and City Health Officials	Donna Grossman	763-5550	400 41st St NW Suite 450 Washington, DC 20001
National Association of Homes and Services for Children	Kelsi Brown	223-3447	1701 K st, NW Suite 200 Washington, DC 20006
National Association of Psychiatric Treatment Centers for Children	Joy Midman	416-1669	2000 L St, NW Suite 200 Washington, DC 20036
National Education Association	Diane Shust	822-7325	1201 16th St, NW Washington, DC 20036
National Mental Health Association	Al Guida	703-838-7509	1021 Prince St Alexandria, VA 22314
Partnership for Prevention	Kelly O'Brien	833-0009	426 C St NE Washington, DC 20002
The ARC	Kathy McGinley	785-3388	1522 K St NW Suite 516 Washington, DC 20005
US Catholic Conference	Patricia King	541-3188	3211 Fourth St, NE Washington, DC 20017
Washington Business Group on Health	Kim Monk	408-9320	777 North Capitol NE Suite 800 Washington, DC 20002
Women's Legal Defense Fund	Joan Entmacher	986-2600 986-2539	1875 Connecticut Ave, NW Suite 710 Washington, DC 20009

To: Devnah
From: Neera
let's talk

**PRESIDENT CLINTON AND FIRST LADY HILLARY ROHDAM CLINTON
JOIN WITH THE NATION'S GOVERNORS AND PRIVATE SECTOR PARTNERS
TO PROMOTE CHILDREN'S HEALTH INSURANCE OUTREACH
February 23, 1999**

Today, President Clinton and First Lady Hillary Rohdam Clinton, together with Governors and private sector partners from across the country, launched the "Insure Kids Now" campaign, a new national campaign designed to identify and enroll eligible children in Medicaid and the new Children's Health Insurance Program (CHIP). Currently, there are over 5 million children who are eligible for but unenrolled in free or low cost health insurance. Although they have access to these critical programs, these children remain unenrolled -- because their families don't know about the options, cannot easily get information, or struggle with the application process. The Insure Kids Now campaign partners the Federal government, the States, and the private sector in an unprecedented effort to ensure that all children who are eligible for health insurance receive it. *The campaign has 3 major ~~parts~~ components:*

LAUNCHING 1-877 KIDS NOW, A NEW NATIONAL NUMBER FOR KIDS HEALTH OUTREACH. Today, the President and First Lady launched 1-877 KIDS NOW, a new toll free number developed by the National Governors Association and Bell Atlantic that provides information on Medicaid and CHIP to families nationwide. This number will provide families in all 50 States with State specific information about Medicaid and CHIP. Families calling the line will speak with an eligibility counselor who can provide information about eligibility criteria, benefits, and how to apply for coverage. *example, person calling fr. CA will get info about CA's program*

THE NATIONAL MEDIA MAKES AN UNPRECEDEDNTED COMMITMENT TO CHILDREN'S HEALTH INSURANCE OUTREACH. Today, the President and the First Lady unveiled new efforts by national media organizations to provide families across the country with information about the importance of health insurance and how to apply for Medicaid and CHIP, including:

- **NBC ~~to air PSA on children's health insurance.~~** Beginning on February 24, "The More You Know" will air a public service announcement to educate parents and families about free or low cost health insurance options. *This PSA, produced with the stars of "Law and Order", S. Epatha Merkerson and Benjamin Bratt, provides information about the importance of health insurance for children and includes the new toll-free number for childrens health insurance outreach.*
- **ABC ~~(to air PSA featuring the First Lady.)~~** Beginning on ____, ABC Television Network will air a public service announcement featuring the First Lady that provides parents and families with information about the importance of health insurance and promoting the new toll-free number. This PSA will air during (prime-time?/throughout the day?) over the next (a year/three months??).
- **Viacom/Paramount to air PSA featuring the First Lady.** Beginning March 1st, Viacom/Paramount will air a public service announcement featuring the First Lady that

*the all focused on (getting) the numbers out
families
about families health insurance options + the toll free #.
Media coverage efforts
comparable
efforts
and grass-roots organizing*

take out?

take out?

summary NBC TV starts

provides parents and families with information about the importance of health insurance and promoting the new toll-free number. This PSA will air on 19 of their stations throughout the country during _____ over the next _____.

- **Black Entertainment Television to air PSA featuring the First Lady.** Beginning on _____, BET will air a public service announcement featuring the First Lady that provides parents and families with information about the importance of health insurance and promoting the new toll-free number. This PSA will air ~~on 19 of their stations throughout~~ ^{throughout} the country during _____ over the next _____.

- **National Association of Broadcasters to distribute the First Lady's PSA.** The National Association of Broadcasters, the national trade association representing broadcast stations, will make the First Lady's PSA available to all their member stations on Monday, February 22nd. ~~Smaller stations in more rural areas will show the PSA on a more routine basis.~~ ^{[what does this mean?] → This mechanism is usually a very successful way to reach people in more rural areas}

- **Univision to air Spanish language PSA.** Beginning on February 23, Univision will run a Spanish language PSA developed by the Department of Health and Human Services ^{once} a day for the next ^{year}. The PSA will air twice a day over the next six months, once during the day and once during prime time. Univision is watched by 18 million people and over 90 percent of Hispanic households. Over 25 percent of Hispanic children are uninsured. ^{through their states}

Radio

- **Airing radio ads in 45 States.** Beginning on February ____, the Department of Health and Human Services will fund radio ads to be aired in 45 States and the District of Columbia. In each State, the spots will run for 4 weeks (15 per week). The spots will run in groups of 10-11 States at a time, beginning with California, Utah, Colorado, Alabama, Illinois, Ohio, Kentucky, North Carolina, New Jersey, Connecticut, and Maine. ^{reaches over 90% of Hispanic households}

roughly 18 million people

Print
Announcements?

- **USA Today will run an editorial on the importance of children's health insurance.** USA Today has agreed to do a editorial in their weekend edition on the importance of health insurance for children and the new options available to families through Medicaid and CHIP. The editorial will feature the new Insure Kids Now hotline number.

PRIVATE CORPORATIONS JOIN THE ADMINISTRATION'S NATIONAL EFFORT.

Today, the First Lady and the President lauded the efforts of private corporations to get the word out about the new free or low cost children's health insurance options available to families across the nation. Participating corporations include:

- **American Medical Response**, which will include the Insure Kids Now toll free number beginning on _____ on ambulances and other transport vehicles, such as school buses, which transport over 2,000,000 students daily. In addition, beginning on _____, they will provide information on Medicaid and CHIP to communities in 36 States through _____.

- **Kmart Corporation**, which will dedicate two columns on children's health insurance in the Kmart circular distributed to more than 70 million homes on _____. In addition, beginning on ____, stores will have counter displays at 1,600 Kmart pharmacies nationwide with brochures promoting Insure Kids Now. Beginning on _____, they will also put daily public service announcements on Kmart in-store radio network and put the Insure Kids Now number on all Kmart shopping bags.
- **General Motors**, which will affix labels with the Insure Kids Now toll free number to _____ child safety seats being donated to families in low-income communities across the country beginning on _____.
- **Ralphs Grocery**, which has agreed to place bag stuffers in shopping bags and to air public service announcements in their in-store radio network to promote the Insure Kids Now toll free number beginning on _____.
- **Pfizer Inc**, which has agreed to incorporate the Insure Kids Now onto their patient/parent resource publication, mailings to their pediatricians, and in their Pharmacy Assistance Program beginning on _____. In addition, beginning on _____, Pfizer will distribute an outreach kit to 400 community health centers.
- **Blue Cross & Blue Shield Association**, which will begin to educate local physicians, hospitals and state government partners about the new health insurance options for low income children on _____ by _____. In addition, beginning on _____, Blue Cross Blue Sheild's national association will produce and distribute a nationwide radio public service announcement nationwide as well as print advertorials on the Insure Kids Now campaign in Readers Digest and Time Magazine (CK).
- **Columbus Children's Hospital**, which [is this one hopsital?? Yes.] will place Medicaid/CHIP applications in the Emergency Room, the Outpatient Care Center, and community-based primary care sites along with colorful, framed posters in busy hosiptial elevators beginning on _____.
- **General Mills, Inc.**, which will help to ensure that children have a healthy start in life by underwriting the work of America's Promise on the State Children's Health Insurance Program. [need specifics -- what is new]
- **Kids Korner Gift Shops**, which will include Insure Kids Now materials in packets sent to thousands of schools nationwide beginning on _____.
- **National Association of Chain Drug Stores (NACDS)**, which will include the Insure Kids Now number and include outreach campaign materials with each prescription filled. Additionally, NACDS will display outreach posters and have brochures available in 30,000 chain pharmacies visited by over 5 million people daily. [I think we should take this out -- announced in February.]

Health Industry

Health insurance

- **National Community Pharmacists Association**, which will distribute information on the Insure Kids Now campaign to 50,000 pharmacists through their newsletter, journal, and satellite programs beginning on _____.
- **Wyeth Lederle Vaccines**, which will distribute handbooks including the Insure Kids Now toll free number and information on how to educate families about health insurance options for their children to 1500 local community based organizations and providers beginning on _____.
- **Neil Romano & Associates Inc.**, which will work with CHIP corporate partners to produce a television PSA featuring the President, First Lady, or celebrity athlete to distribute on behalf of the campaign, to millions of people across the country.[??]

Nike

Johnson & Johnson

Mattel

McDonalds

NON-PROFIT CORPORATIONS PARTNER WITH THE ADMINISTRATION TO GET THE WORD OUT ON CHILDREN'S HEALTH INSURANCE. Today, the President and First Lady also highlighted the new commitments made by provider organizations and other non-profit entities as part of the Insure Kids Now campaign. Participating organizations include:

Put all religious orgs in here

1) Religious orgs

2) Children + Educators

3) Health insurance

4) Health groups

~~Health Professionals~~

- **American Hospital Association**, which will distribute materials on the Insure Kids Now campaign into their "Campaign for Coverage" information, which will reach over 6 million uninsured people, beginning on _____.
- **American Dental Hygienists' Association**, which will include the Insure Kids Now toll free number on toothbrushes and on a tear out flyer in its Access magazine on _____, which reaches 80,000 dental hygienists in each of the 50 states nationwide.
- **American Academy of Child and Adolescent Psychiatry** provides outreach information and phone numbers regularly to millions of children and adolescent psychiatrists throughout the country. [we should take this out. This is not new.]
- **American College of Emergency Physicians** has agreed to send information to 20,000 members through their newsletter on _____, including how to download posters and access outreach materials through the internet.
- **American College of Physicians / American Society for Internal Medicine**, which will advertise the Insure Kids Now toll free number through its national website, in its monthly publication, the Observer, and in its bi-monthly legislative newsletter beginning _____.

Should be expanded with follow up

1) Religious orgs

2) Children + Educators

3) Health insurance

4) Health groups

on _____. These materials are distributed to 110,000 physicians.

- **American Dental Association (ADA)**, which has committed to host a conference in August to bring together dentists, state legislators, and health officials to work together to find solutions to increasing access to children's oral health services. [does this count?]
- **American Medical Association**, which has agreed to promote the Insure Kids Now toll free number to the nation's 600,000 physicians in its weekly newspaper, the American Medical News, and by posting information on AMA's website.
- **American Nurses Association**, which has committed to distribute _____ posters and other materials to their _____ State Associations, beginning on _____. Information will also be posted on their new web site.
- **America's Promise**, which has committed its support for youth development programs working with hundreds of communities to address the needs of youth. It is taking its program for kids to cities and towns throughout the nation. [??]
- **American Psychiatric Association**, which will develop a Medicaid/CHIP Tool Kit to educate doctors and patients about Medicaid and CHIP programs for use by its 42,000 members nationwide.
- **Association of State and Territorial Health Officials** has agreed to distribute outreach resource packets to publicize the Insure Kids Now toll free number to state health departments leaders and staff in 57 states and territories.
- **Center on Budget and Policy Priorities** will provide outreach materials as well as training and technical assistance on effective outreach strategies to insure children nationwide beginning on _____.
- **Children's Health Fund**, which has proposed to reach out to [how?] up to 30,000 uninsured children in the Bronx, NY. In addition, beginning on _____, it will also disseminate information on the Insure Kids Now campaign in 13 National Children's Health Project Network sites in 8 States across the country. How
we take
out?
- **HOPE for Kids**, which has committed to make children's health insurance the primary focus of its national outreach event on April 17, 1999. Beginning on _____, it will also implement efforts to educate 400,000 people in 38 States about Medicaid and CHIP.
- **March of Dimes**, which will feature children's health insurance in a direct mail newsletter sent to 800,000 individual donors on _____ and through local chapter and WalkAmerica newsletters which are sent to an additional 500,000 volunteers and 20,000 corporate supporters on _____.

*Community
organizing*

Community organization

Neighborhood Networks Initiative CHIP Outreach Collaboration, which has agreed to address the need for organized CHIP benefits at its centers. It is made up of nearly 100 national and state organizations whose pupose is to eliminate health and social disparities. [??]

already announced

Union of American Hebrew Congregations, which will advertise CHIP and the Insure Kids Now toll free number to all 875 Reform Jewish Congregations across the nation through _____.

*rehearsal
community organization*

United Way of America has committed to enrolling 500,000 eligible children in CHIP and will mobilize select local United Ways (of which there are 1400 across the country) to partner with local organizations to coordinate training for outreach volunteers to pilot the program, then expanding to approximately 30-50 communities across the country.

Veterans of Foreign Wars (VFW), which has committed to distributing information about CHIP through its network of posts, beginning on _____.

community organization

Volunteers of America, which will make information on Medicaid and CHIP available to low-income families through the distribution of outreach material to homeless shelters, low income housing, and childcare centers beginning on _____.

Community organization

Points of Light Foundation, which will publicize the Insure Kids Now toll free number by providing _____ to over 20 million people through the "Connect America" initiative beginning on _____. Information will also be provided to 450 communities and 200 corporate members through the Volunteer Centers of the Points of Light Foundation beginning on _____. In addition, over 2000 members will receive information on the Insure Kids Now toll free number.

Catholic Charities/USA, which will host 10 training events to help facilitate enrollment in Medicaid and other state insurance programs during 1999.

National Council of Churches of Christ, which will distribute the Insure Kids Now toll free number to their 33 member communions representing 52 million US Christians beginning on _____.

International Union of Gospel Missions, which will distribute the Insure Kids Now toll free number to their missions located in 260 cities where they serve over 7 million homeless and needy people beginning on _____.

United Synagogue of Conservative Judaism, which will publicize the Insure Kids Now toll free number to their over 800 congregations across the country beginning on _____.

National Council of Catholic Women, which will distribute the Insure Kids Now toll free number in their monthly newsletter to 350 diocesan leaders and their May/June magazine to 11,000 nationwide.

there is a lot more to send this to you

*this is kids
good one!*

*smaller group
don't need our bullet.*

- **Council of Jewish Federations**, which will promote the Insure Kids Now toll free number in service settings across the country beginning on _____.
- **NETWORK**, a _____, which will advertise the Insure Kids Now toll free number in their magazine that reaches 10,000 people nationwide beginning on _____.

small
small

Evangelical Lutheran Church in America, Church Women United, Unitarian Universalist Service Committee, United Methodist Church-General board of Church and Society, and Women's Missionary Union will distribute to their member churches the toll-free number. [??]

Bygones

- **California Congress of Parents, Teachers, and Students, Inc.**, which has agreed to include the Insure Kids Now toll free number and campaign materials into their PTA newsletter sent to 6000 subscribers, the Convention Chronicle, which is sent to 4600 local PTA presidents, and their Convention Program Books, which are given to 5000 convention delegates in California.
- **California School Boards Association**, which has agreed to have information about the Insure Kids Now toll free number and the campaign in their annual packet of information provided at the start of each school year to 5.7 million school children. In addition, it will promote through statewide publications that will reach 1,000 school districts and more than 8000 individual school sites.
- **Chicago Public Schools**, which will provide enrollment assistance at over 600 public schools and KidCare Kits including information on children's health insurance options to 430,000 students beginning on _____.

#2
#1 educational
me.

- **National Child Care Association**, which has agreed to distribute advertisements and posters promoting the Insure Kids Now toll free number to 700,000 parents through the network beginning on _____.
- **National Educational Association**, which has agreed to provide information on the Insure Kids Now toll free number to the presidents of their 14,000 local affiliates beginning on _____. In addition, on _____ NEA will feature article about CHIP in the organization's magazine, distributed to 2.4 million educational employees.

NEW PRIVATE EFFORTS COMPLEMENT THE EXPANDING FEDERAL EFFORT.

Today, the President and First Lady unveiled the new steps Federal agencies are taking to identify and enroll uninsured children in free or low cost health insurance. These include:

- **Launching the "insurekidsnow.gov" website for outreach.** HHS has developed a website bringing together essential State-specific information for people who are potentially eligible to participate in the CHIP program, including contact information, benefits, and eligibility information in a user friendly format for families, educators, advocates and other non-health professionals. It will also provide information on the

Administration's public-private outreach campaign, including posters, hand-outs, and descriptions of the national effort.

- **Distributing 145,000 posters advertising the toll free number to over 20,000 Federal grantees and field offices beginning March 1.** HHS developed posters advertising the toll free number to be distributed to over 20,000 Federal grantees and field offices as part of their new and ongoing efforts to educate parents, health care providers, and other Federal employees about Medicaid and CHIP.
- **Development of a kit to teach other agencies about how to explain kids' health outreach to their employees and clients.** Today, HHS will distribute an outreach training kit has been prepared for to Federal workers from all Departments who will participate in the "Insure Kids Now" campaign. The kit contains a presentation outline, posters, and materials that can be used as handouts.
- **Including the toll free number on information distributed to State or local health agencies.** CDC has begun to print the 1-877-KIDS NOW toll free phone number on all publications coming out of CDC, including pamphlets and other material that will be used by State or local health agencies. Over the next year, they will distribute over one million pamphlets, flyers, and brochures containing the toll free number.
- **Sending 92,000 employees information about outreach.** On March 8, over 92,000 USDA employees will receive information on CHIP with the national toll-free hotline number on their Wage and Earnings Statements.
- **Reaching uninsured children through the Women, Infant and Children (WIC) program.** During February, over 115,000 Alabama WIC participants will receive a CHIP outreach message with the Al-Kids toll-free hotline number on their WIC food instruments. In the near future, over 90,000 Oklahoma WIC applicants and participants will receive assistance in completing CHIP applications during their WIC visit.
- **Distributing information through Operation Weed and Feed.** The Department of Justice will work with Operation Weed and Feed, a crime prevention and community revitalization initiative that brings together the United States Attorney and 170 community leaders nationwide to distribute a letter with information on CHIP and Medicaid and posters advertising the new toll free number beginning in March of 1999.
- **Hands on involvement in communities nationwide.** Beginning in March of 1999, the Department of Justice, together with the United Way and HOPE for Kids (a non-profit charitable organization), will hold community forums, distribute enrollment information, and provide application assistance to residents in 6 to 10 cities to identify and enroll uninsured children in Medicaid and CHIP.

give to
HOPE for
Kids!
take it
make small
as part of
DJ

- **Including the toll free number and information on Medicaid and CHIP in publications distributed to dislocated workers.** The Department of Labor will include information on Medicaid and CHIP in publications distributed to recently dislocated workers, including Pension and Health Benefit material from the DOL's Pension and Welfare Benefits Administration and Family Medical Leave Act material beginning later this year.
- **Distributing information on Medicaid and CHIP through the Child Health Champion Campaign.** The Environmental Protection Agency will distribute information on Medicaid, CHIP, and the new toll free number for children's health insurance outreach through the new Child Health Champion Campaign, which works with 200 communities nationwide to protect children from environmental hazards by providing information, technical assistance and other support.
- **Including information on Medicaid and CHIP in Teachers Kits.** The Social Security Administration plans to include information on Medicaid and CHIP in 20,000 Teachers Kits to be distributed later this year, which provide information on Social Security programs to high school teachers. These Teachers Kits have the potential to reach at least 450,000 children over the next school year.