





|   | <p style="text-align: center;"><b>CHAMP Act</b><br/><b>H.R. 3162</b></p>   | <p style="text-align: center;"><b>Barton-Deal</b><br/>As offered in Committee on<br/>Energy and Commerce 7/26</p>  |
|---|---|---|
| <b>Protects Coverage for Children Under CHIP</b>  | <b>YES.</b> Protects coverage of 6 million children and <b>extends coverage to an additional 5 million uninsured children.</b>  | <b>NO.</b> Provides insufficient funds for children currently enrolled in CHIP.   |
| <b>Provides Tools and Incentives for Outreach to Enroll Eligible but Uninsured Children</b> | <b>YES.</b> Provides new “outreach bonus” to States that excel in covering eligible but uninsured children. Under CHAMP, 95% of America’s children would be insured.                                  | <b>NO.</b> Provides no new funding dedicated to outreach and enrollment. Does nothing to promote reducing the number of uninsured children.   |
| <b>Child-Centered Benefits</b>  | <b>YES.</b> Ensures children receive dental care, mental health care, federally qualified health center services, and school health center services.  | <b>NO.</b> Undermines States’ ability to provide adequate children’s coverage.  |
| <b>Quality in Pediatric Care</b>  | <b>YES.</b> Establishes new Pediatric Health Quality Measurement Program to monitor quality of care for children under CHIP and Medicaid, with a focus on access, prevention, and health disparities. | <b>NO.</b> Ignores the need to promote quality in pediatric health care.  |
| <b>Coverage for Pregnant Women</b>  | <b>YES.</b> New option for States to cover pregnant women in CHIP. Ensures automatic enrollment of newborns. Expands use of presumptive eligibility for pregnant women.                               | <b>NO.</b> Does not allow States to cover pregnant women under CHIP.  |
| <b>Coverage Flexibility for States</b>  | <b>YES.</b> Allows States to cover children in CHIP to age 21; allows States to cover legal immigrant children and pregnant women.  | <b>NO.</b>  |
| <b>Protects Seniors from Unscrupulous Insurance Plans</b>                                   | <b>YES.</b> Adds new protections against marketing abuses.  | <b>NO.</b> Protects HMOs and uses taxpayer funds for excessive profits and CEO salaries.  |

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| <b>Improves Solvency of Medicare Trust Fund</b>  | <b>YES.</b> Adds three years to the solvency of the Medicare Trust Fund.  | <b>NO.</b> Continues depleting the Medicare Trust Fund by private plans.  |
| <b>Protects Seniors' Access to Their Physicians</b>                                    | <b>YES.</b> Provides proper payments to doctors to ensure beneficiaries access to their choice of physician care.   | <b>NO.</b> Does not protect against pending physician payment cuts.   |
| <b>Preventive Benefits for Seniors</b>   | <b>YES.</b> Secretary can add preventive benefits to Medicare at no cost.   | <b>NO.</b> Does not expand preventive coverage under Medicare.  |
| <b>Protection from Out-of-Pocket Costs for Low-Income Seniors.</b>                     | <b>YES.</b> Provides assistance with Part B premium (≈\$1200/year) and Part D premiums; provides 5% cap on drug costs for lowest income beneficiaries.  | <b>NO.</b> Republican bill does not protect low-income seniors from out-of-pocket costs.  |
| <b>Protections For Low Income Seniors Enrolled in Drug Plans</b>                       | <b>YES.</b> Enrolls low-income seniors in plans that cover the drugs most commonly used by Medicare beneficiaries, and improves access to pharmacies and provides the best value for Medicare.                | <b>NO.</b> Republican bill continues current practice of enrolling Medicare beneficiaries in plans that do not cover the drugs they need.   |
| <b>Demonstration for State for Employer Coverage</b>                                   | <b>YES.</b> Establishes a demonstration for employers to buy CHIP coverage for uninsured children of workers.   | <b>NO.</b>  |
| <b>Protects Rehabilitation and School-Based Care for Individuals with Disabilities</b> | <b>YES.</b> Bans Administration from cutting access to rehabilitation services and therapy services for children with disabilities in school settings.  | <b>NO.</b>  |
| <b>Improves Access to Care for Individuals with Disabilities</b>                       | <b>YES.</b> Codifies six protected classes of Part D drugs; protects the right of individuals with disabilities to live in their community; ensures continuation of successful Adult Day healthcare programs. | <b>NO.</b>  |