

DESCRIPTION OF THE CHIPRA-MANDATED EVALUATION OF THE CHILDREN'S HEALTH INSURANCE PROGRAM

A research project of Mathematica Policy Research and the Urban Institute, under contract to the Assistant Secretary for Planning and Evaluation (ASPE), U.S. Department of Health and Human Services (HHS)

The Children's Health Insurance Program (CHIP) provides health insurance coverage for uninsured children in families whose incomes are too high to qualify for Medicaid, but too low to afford private health insurance coverage. Congress established CHIP in 1997, and it was re-authorized through the Children's Health Insurance Program Reauthorization Act (CHIPRA) of 2009. This new legislation extended the CHIP program through 2013 with approximately \$44 billion in new funding for the program (subsequent legislation, the Patient Protection and Affordable Care Act [PPACA], further extends CHIP through 2015). As of June 2009, CHIP provided health insurance coverage more than 5 million children.

The Assistant Secretary for Planning and Evaluation (ASPE) of the U.S. Department of Health and Human Services (HHS) has contracted with Mathematica Policy Research and its subcontractor the Urban Institute to conduct an independent evaluation of 10 States with approved CHIP plans, as required by the CHIPRA legislation (P.L. 111-3). This three-year evaluation will provide Congress, HHS, and the states with new and detailed insights into how the program has evolved since its early years, what impacts on children's coverage and access to care have occurred, and what new issues have arisen as a result of policy changes related to CHIPRA and PPACA.

Key questions to be addressed by this evaluation include: (1) What are the design features of state CHIP programs, how have they changed over time and how do they influence program outcomes in key areas (enrollment, retention, access, service use, and satisfaction)? (2) What are the trends in enrollment and retention, and are there barriers present that prevent low-income children from enrolling and remaining enrolled in the program? (3) What experiences do CHIP enrollees have in seeking and obtaining health care? (4) How satisfied are enrollees with CHIP and with the health care they receive? (5) What impact does CHIP have on the type of health care received, the content of care, and family well-being? (6) What are the relationships between CHIP and private coverage? (7) How has CHIP influenced uninsurance rates? (8) What role will CHIP play in health reform, now that a broader mandate for coverage will be required?

Evaluation Overview: The evaluation will focus on the experiences of 10 states that together represent a high proportion of the CHIP target population (low-income, uninsured children) and a range of program designs and geographic regions. The evaluation is using a mixture of quantitative and qualitative research methods and a variety of data sources, including primary data collection through surveys with parents of CHIP enrollees and disenrollees in 10 states and with parents of Medicaid enrollees and disenrollees in 3 of the 10 states, case studies involving site visits and focus groups in the same 10 states, and a survey of program administrators in all 50 states. Secondary data sources include state annual reports and other data submitted to CMS, data on the uninsured from the Current Population Survey (CPS), the American Community Survey (ACS) and the National Survey of Children's Health (NSCH), and data from state eligibility and enrollment systems. Findings from the evaluation will be disseminated widely. In addition to two reports to Congress, the evaluation will produce a variety of topical reports addressing the core substantive areas of focus in the evaluation.

Key Project Staff: Mary Harrington of Mathematica Policy Research is the Project Director. Other Mathematica staff include Sheila Hoag, Christopher Trenholm, Kimberly Smith, Margo Rosenbach, Julie Ingels, Eric Grau, Alisa Ainbinder, Patricia Higgins, Victoria Peebles, Vivian Byrd, Matthew Hodges and Stephen Kuncaitis. Urban Institute staff include Genevieve Kenney, Ian Hill, Timothy Waidmann, Sarah Benatar, Lisa Clemons-Cope, Jennifer Haley and Adela Luque. Wilma Robinson and Rose Chu are the Project Officers at HHS/ASPE.