

**GRAHAM AMENDMENT #3 TO H.R. 4737**

**COMMITTEE ON FINANCE**

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Graham Amendment #3 to H.R. 4737

One sentence description of Amendment: This amendment would give states the flexibility to use federal Medicaid and SCHIP dollars to cover eligible legal immigrant children and pregnant women immediately.

Text of Amendment: The Graham amendment (S.582) would amend title IV (Restricting Welfare and Public Benefits for Aliens) of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (P.L. 104-193) to grant States the option of covering eligible women and child resident aliens under titles XIX (Medicaid) and XXI (Children's Health Insurance) (SCHIP) of the Social Security Act. This amendment would repeal the 5-year limitation on the eligibility of qualified aliens for federal Medicaid and SCHIP.

Offset: Senator Graham will extend Social Security Administration pre-effectuation review provisions, at a phase-in rate of 25% the first year and 50% thereafter, for such time as is necessary to offset this expenditure, but not to exceed ten years.

Contact name and phone number: Jocelyn Moore, (202) 224-1546

June 25, 2002

**Committee on Finance**

**June 26, 2002**

**Snowe Amendment #1**

(cosponsored by: Jeffords, Bingaman)

**Current Law:**

Since 1996, TANF dollars can only be spent on benefits for people who are complying with the federally mandated work requirements and who have not hit the federal benefits time limit of 60 months (5 years). Under current law, only one year of vocational education is permitted for a limited percentage of a state's welfare caseload.

**The Amendment:**

The amendment would allow those states that choose to, to count post secondary and vocational education as an "approved work activity" which then means that those people who are participating in post-secondary education would be eligible for cash assistance, child care subsidies, transportation subsidies, etc., paid for with federal TANF dollars.

This amendment would allow those who are participating in post-secondary or vocational education to count towards the state's work requirements and participation rates. Participation in these educational programs is capped at 10 percent of a state's caseload.

**The amendment expressly prohibits the use of TANF dollars to pay for tuition.**



## COMMITTEE ON FINANCE

Rockefeller Amendment # 2 to WORK Act - Social Services Block Grant Funding

Cosponsors: Breaux

### **Funding of the Social Service Block Grant (SSBG) increased by \$252 million to \$1.952 billion in FY 2005**

The Social Service Block Grant would be funded as follows:

FY2005            \$1.952 billion

States would have the ability to transfer up to 10% of their TANF funding into the Social Services Block Grant.

*Offset:* Require SSA reviews of SSI determinations for individuals who have attained the age of 18. This is Section 601 of H.R. 4737, and it saves \$252 million over 5 years. Rescind just enough of the Illegitimacy Bonus for 2002 to cover the SSBG transfer costs.

*Rationale:* The CARE Act which was adopted by the Finance Committee on June 18, 2002 includes \$1.975 billion in FY03, and \$2.8 billion in FY04. Funding in FY05 is cut to \$1.7 billion.

Funding of the SSBG program is a fundamental part of welfare reform. It was part of the tripartisan principles submitted to Chairman Baucus and Senator Grassley. The CARE Act is intended to provide funding for the 2003, and 2004, but States need a long term commitment to increase funding of the Social Services Block Grant.

The Bush Administration has proposed eliminating the Illegitimacy Bonus. The bonus would only help a few states, and the SSBG transfer would provide flexibility to every state.

## COMMITTEE ON FINANCE

### Conrad Amendment # 1 to H.R. 4737

This amendment would provide states the flexibility to exempt a certain percentage of caretakers of family members with disabilities from the TANF work requirements.

Text of Amendment: States would have the option of exempting full-time caregivers of a family member with a disability from the work requirements and removing them from the denominator in calculating work participation rates. States may exempt no more than 10 percent of their caseload. In calculating the 10 percent, States may use either the current year or prior year average caseload. A recipient is eligible for the exemption only if all of the following apply:

- (1) the recipient is the only able-bodied adult in the case;
- (2) the recipient is the primary caregiver for a child with a physical or mental disability or chronic illness, or another family member with a physical or mental disability or chronic illness;
- (3) the demands of caregiving do not allow the caregiver to obtain or retain employment of at least 30 hours per week; and
- (4) the need to provide caregiving is specified in the recipient's Individualized Responsibility Plan and reviewed on at least an annual basis.

Contact name and phone number: Neleen Eisinger, 4-7966

### **Bingaman Amendment to the WORK Act #3**

**Sponsor:** Senator Bingaman

**Purpose:** To provide flexibility to states to implement innovative welfare reform programs that best respond to the characteristics of their TANF caseloads, and labor market conditions within the state.

**Background:** Many states operating under waivers since 1996 have implemented innovative welfare reform programs that have been highly successful, and that have allowed those states to tailor their welfare reform programs to meet the needs of participants and employers. Other states should be provided with the option to seek a waiver to implement these proven strategies.

**Text of the Amendment:** Any state may submit a waiver application on terms similar or identical to states that are successfully implementing innovative programs under waivers and the Secretary shall approve the application. A waiver granted under this provision shall be in effect no longer than 4 years. At the end of the waiver period, the Secretary shall evaluate the effectiveness of the waiver and may extend the waiver if this evaluation demonstrates that the program has been effective.

**Text of the Amendment:** Any state may submit a waiver application on terms similar or identical to states that are successfully implementing innovative programs under waivers and the Secretary shall approve the application. A waiver granted under this provision shall be in effect no longer than 4 years. At the end of the waiver period, the Secretary shall review documentation of the effectiveness of the waiver provided by the state and may extend the waiver if this documentation provided adequately demonstrates that the program has been effective.

## Bingaman Amendment to WORK Act -- #8

**Sponsor:** Sen. Bingaman

**Purpose:** To clarify that state and local governments may provide health services to immigrants with their own revenue.

The amendment would strike the word “health” in Section 411 of the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA).

There would be no federal cost associated with this amendment.

**Background:** A provision in PRWORA has been read by state and local governments with varying interpretations. State and local jurisdictions across the nation have largely ignored the provision while a few, such as the University of New Mexico Hospital, have read it to require states to have to pass new legislation authorizing state and local expenditures on non-qualified immigrants for non-emergency care services.

Many constitutional scholars believe this small provision is unconstitutional and would not withstand a 10<sup>th</sup> Amendment challenge, as it interferes in state and local governments’ authority to spend their own revenues as they see fit. Can the federal government and senators from one state tell the state and local officials in another state if and how it can spend its own revenue?

It also imposes new and unnecessary legal and administrative costs on state and local governments despite the provision having no enforcement mechanism.

In addition, the current provision creates a double-standard by which none of the major federal public health programs have to screen out non-qualified immigrants, but state and local governments would have to pass affirmative laws to provide exactly the same services with their own revenue. Services provided through the National Breast and Cervical Cancer Early Detection program, for example, are exempt from screening for non-qualified immigrants, but identical services provided by state and local governments might require such a screening.

State and local governments, far more often than the federal government, establish broad population-focused, public health programs. Public health experts would prefer to be free from restrictions on their ability to provide health care to all truly needy residents, regardless of immigration status just as they currently are for all major federal public health programs. Moreover, failing to treat serious, non-emergency medical conditions like asthma and diabetes results in both a human and a fiscal toll for local governments as untreated conditions lead to emergency care and higher costs.

In the case of the University of New Mexico, the denial of non-emergency care treatment has resulted in two high-profile cases on one man dying that was seeking dialysis and another 2 year-old child that ended up with emergency surgery at another non-profit hospital in the region.

COMMITTEE ON FINANCE

AMENDMENT

Baucus Amendment #2 to Chairman's Mark for H.R. 4737:

Description of Amendment: Provides \$50 million per year for FY2003-07 for "abstinence-first" teen pregnancy prevention programs.

Text of Amendment: Amends Section 302 of the Chairman's mark to add the following:

The mark provides \$250 million within the Maternal and Child Health Block Grant (\$50 million each year for FY2003-07) for grants to states to implement proven "abstinence-first" teen pregnancy prevention strategies. "Abstinence-first" teen pregnancy prevention strategies: 1) use a message that strongly emphasizes abstinence as the only certain way to avoid pregnancy and sexually transmitted infections, while still allowing State flexibility to discuss other prevention methods; 2) replicate or substantially incorporate the elements of one or more teen pregnancy programs that have been proven (on the basis of rigorous scientific research) to delay or decrease sexual activity or reduce teen pregnancy.

Offset: Increases custom user fees by an amount necessary to cover the cost of this amendment.

Contact: Doug Steiger at 224-6699 or Alaine Perry at 224-8371