## AMENDMENT IN THE NATURE OF A SUBSTITUTE TO H.R. 2347

## OFFERED BY MS. SCHRIER OF WASHINGTON

Strike all after the enacting clause and insert the following:

## 1 SECTION 1. SHORT TITLE.

2 This Act may be cited as the "Strengthening the Vac-3 cines for Children Program Act of 2021".

4 SEC. 2. ENSURING ADEQUATE ACCESS TO VACCINES
5 UNDER THE MEDICAID PROGRAM AND THE
6 VACCINES FOR CHILDREN PROGRAM.

7 (a) EXPANSION OF DEFINITION OF FEDERALLY VAC8 CINE-ELIGIBLE CHILD.—Paragraph (2) of section
9 1928(b) of the Social Security Act (42 U.S.C. 1396s(b))
10 is amended—

11 (1) in subparagraph (A)—

(A) in clause (iii), by striking "A child
who" and all that follows through the period at
the end and inserting "A child who is administered a qualified pediatric vaccine and is not insured with respect to such vaccine."; and

17 (B) by adding at the end the following new18 clause:

1	"(v) A child who is enrolled for child
2	health assistance under a State child
3	health plan approved under title XXI.";
4	and
5	(2) in subparagraph (B)(ii)(II), by striking "for
6	purposes of subparagraph (A)(iii)(II)" and inserting
7	"for purposes of subparagraph (A)(iii)".
8	(b) Coverage of Vaccine Counseling and Edu-
9	CATIONAL SERVICES UNDER MEDICAID.—
10	(1) IN GENERAL.—Section 1905(a) of the So-
11	cial Security Act (42 U.S.C. 1396d) is amended—
12	(A) in paragraph (30), by striking "and"
13	at the end;
14	(B) by redesignating paragraph $(31)$ as
15	paragraph (32); and
16	(C) by inserting after paragraph $(30)$ the
17	following new paragraph:
18	"(31) vaccine counseling and educational serv-
19	ices furnished to children under the age of 19 on or
20	after the date of the enactment of this paragraph,
21	including any such services furnished as part of a
22	multiple component vaccine (identified as of October
23	1, 2020, by CPT code 90461) and including any
24	such services furnished under the program estab-
25	lished by the State pursuant to section 1928 to a

medicaid-eligible child (as defined in subsection (b)
 of such section),".

3 (2) MANDATORY BENEFIT.—Section
4 1902(a)(10)(A) of the Social Security Act (42)
5 U.S.C. 1396a(a)(10)(A)) is amended by striking
6 "and (30)" and inserting "(30), and (31)".

7 (c) CLARIFICATION OF COVERAGE OF PEDIATRIC
8 VACCINES AND VACCINE COUNSELING AND EDUCATIONAL
9 SERVICES UNDER THE VACCINES FOR CHILDREN PRO10 GRAM.—Section 1928(c)(2)(C)(ii) of the Social Security
11 Act (42 U.S.C. 1396s(c)(2)(C)(ii)) is amended to read as
12 follows:

13 "(ii) The provider may impose— 14 "(I) in the case of a qualified pedi-15 atric vaccine not described in subclause (II), a fee for the administration of and 16 17 counseling for such vaccine so long as the 18 fee in the case of a federally vaccine-eligi-19 ble child does not exceed the costs of such 20 administration and counseling (as deter-21 mined by the Secretary based on actual re-22 gional costs for such administration and 23 counseling); and

24 "(II) in the case of a qualified pedi-25 atric vaccine that is a multiple component

1 vaccine, a separate charge for the adminis-2 tration of and counseling for each component of such vaccine so long as the charge 3 4 in the case of a federally vaccine-eligible child does not exceed— 5 "(aa) with respect to the first 6 7 component of such vaccine, the costs 8 of such administration and counseling 9 for such component (as determined by 10 the Secretary based on actual regional 11 costs for such administration and 12 counseling for such first component); 13 and 14 "(bb) with respect to a subse-15 quent component of such vaccine, the 16 payment rate that applies to such ad-17 ministration and counseling for such 18 component and provider under part B 19 of title XVIII.".

20 (d) INCREASE IN FEDERAL MEDICAL ASSISTANCE21 PERCENTAGE.—

22 (1) IN GENERAL.—Section 1905 of the Social
23 Security Act (42 U.S.C. 1396d) is amended—

24 (A) in subsection (b), by striking "and
25 (ii)" and inserting "(ii), and (jj)"; and

(B) by adding at the end the following new
 subsection:

3 "(jj) TEMPORARY INCREASE IN FMAP FOR VAC-4 CINATIONS FURNISHED TO CHILDREN.—

5 "(1) IN GENERAL.—Subject to paragraph (2), 6 notwithstanding any other provision of this title, the 7 Federal medical assistance percentage otherwise ap-8 plicable for a State with respect to amounts ex-9 pended by a State for medical assistance for a vac-10 cine furnished to an individual under the age of 19 11 during the 8 calendar quarter period beginning with 12 the first calendar quarter beginning after the date of 13 the enactment of this subsection shall be increased 14 by 1 percentage point.

15 "(2) REQUIREMENTS.—A State may not receive 16 the increase described in paragraph (1) in the Fed-17 eral medical assistance percentage for such State, 18 with respect to a quarter, if such State does not en-19 sure culturally competent and effective messages for 20 vaccination outreach to child populations, which may 21 include the dissemination of information high-22 lighting-

23 "(A) advancements in research and vaccine24 development that have saved millions of individ-

1	uals from death and disability from now-pre-
2	ventable diseases;
3	"(B) information on how individuals across
4	the lifespan benefit from immunizations, includ-
5	ing those who cannot be vaccinated and rely on
6	community immunity;
7	"(C) information on the dangers of not
8	being vaccinated, including the potential for in-
9	fectious disease outbreaks within communities;
10	and
11	"(D) information on vaccine safety and the
12	systems in place to monitor vaccine safety.".
13	(2) Requirement for certain states.—Sec-
14	tion 1905(cc) of the Social Security Act (42 U.S.C.
15	1396d(cc)) is amended—
16	(A) by inserting "and section 2(e) of the
17	Strengthening the Vaccines for Children Pro-
18	gram Act of 2021" before ", except that in ap-
19	plying"; and
20	(B) by inserting ", and in applying such
21	treatments to the increases in the Federal med-
22	ical assistance percentage under subsection (jj),
23	the reference to 'December 31, 2009' shall be
24	deemed to be a reference to 'December 31,
25	2020'" before the period at the end.

1 TRIBAL EPIDEMIOLOGY CENTER DATA AC-(e) 2 CESS.—With respect to data access for tribal epidemiology centers established under section 214 of the Indian Health 3 4 Care Improvement Act (25 U.S.C. 1621m), the Director 5 of the Centers for Disease control and Prevention may create a data sharing strategy that ensures such centers have 6 7 access to data, data sets, monitoring systems, delivery sys-8 tems, and other protected health information with respect 9 to health care and public health surveillance systems of 10 child and adolescent health necessary to accomplish such 11 centers' public health authority responsibilities described 12 in such section or section 164.501 of title 45, Code of Fed-13 eral Regulations.

14 (f) REPORTS.—

15 (1) IN GENERAL.—For each of fiscal years 16 2021 and 2022, the Director of the Centers for Dis-17 ease Control and Prevention, in coordination with 18 each State that has established a pediatric vaccine 19 distribution program under section 1928 of the So-20 cial Security Act (42 U.S.C. 1396s), shall publish on 21 the public internet website of the Centers for Dis-22 ease Control and Prevention, in such manner as de-23 termined appropriate by the Director, information 24 on vaccination rates under each such program dur-25 ing such year, including such rates disaggregated by

region, age, sex, race, ethnicity, and other demo graphic factors determined appropriate by the Direc tor.

4 (2) EFFECTS ON VACCINATION RATES AND PRO-5 GRAM PARTICIPATION.—Not later than 2 years after 6 the date of the enactment of this Act, the Comp-7 troller General of the United States shall submit to 8 Congress a report containing an analysis of the ef-9 fects of the provisions of, and the amendments made 10 by, this Act on—

(A) vaccination rates under the pediatric
 vaccine distribution program under section
 1928 of the Social Security Act (42 U.S.C.
 1396s); and

15 (B) provider participation in such pro-16 gram.

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