

INTRODUCTION

The studies reported in this volume are products of the Child Health Insurance Research Initiative (CHIRI), a collaboration of funders and health services researchers from across the country. This supplement to *Pediatrics* presents the first collection of studies that report on the characteristics of children newly enrolled in the State Children's Health Insurance Program (SCHIP) in multiple states.

CHIRI was launched in 1999 to take advantage of the opportunities to learn how to improve children's health services afforded by the different approaches states used in implementing SCHIP. Funded by the Agency for Healthcare Research and Quality, The David and Lucile Packard Foundation, and the Health Resources and Services Administration, CHIRI was designed to produce findings that are useful to policy-makers. CHIRI consists of 9 separate research projects that were developed and funded separately, but the authors of the articles in this supplement have worked together to integrate findings from 5 states that, considered together, have greater significance than any single state study could have.

There are 5 articles and a commentary in this supplement. The first article (Brach et al) provides an overview of CHIRI and of the other 4 articles. It presents a baseline portrait of SCHIP enrollees in 5 states and summarizes findings on the quality of care adolescents received prior to enrollment and trends over time. The second article (Szilagyi et al) uses CHIRI data from 4 states to examine children with special health care needs and compare them with children without special health care needs. The third article (Shone et al) examines racial and ethnic disparities in access to health care among new SCHIP enrollees in 4 states.

The fourth article (Shenkman et al) focuses on yet another vulnerable population—adolescents—and examines the quality of the health care they received prior to SCHIP. The final article takes advantage of the existence of a SCHIP-like program operated in New York prior to the passage of SCHIP to explore how enrollee characteristics change over time as programs evolve. The supplement concludes with a commentary (Rosenbaum and Budetti) that draws additional policy implications from the articles in the supplement.

CHIRI will continue to be a source of information about public insurance for low-income children in the coming years. As this supplement is published, CHIRI researchers are analyzing data to answer such questions as, "Which children disenroll from SCHIP, and what happens to them after they disenroll?" and "What impact does SCHIP have on vulnerable populations' access to health care?" As these results become available, they will be posted on the CHIRI web site (www.ahrq.gov/chiri). Users of CHIRI research findings are encouraged to contact chiri@ahrq.gov to describe how CHIRI findings are being used.

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