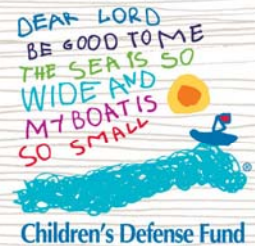


Health Care Reform for Children -- Going Beyond CHIP

March 11, 2009



The current children's health care system – Medicaid and CHIP – leaves millions of children uninsured and underinsured:

- **Lack of uniform eligibility levels leaves children subject to the lottery of geography.** All states should be required to cover children up to 300 percent of the poverty level and to allow families over that level an affordable buy-in on a sliding scale.
- **States are not required to provide children enrolled in CHIP the same level of care required by long-standing provisions of Medicaid.** States should be required to provide children with “all medically necessary services” that are crucial to every child's health and development.
- **Some states have adopted procedures that make it more difficult for families to enroll their children in CHIP.** States should be required to eliminate administrative barriers that make enrollment and retention of children in CHIP more difficult and be required to adopt procedures such as automatic enrollment that increase enrollment and retention.
- **States have limited enrollment in CHIP because of the ceiling on federal reimbursement.** Federal matching payments for all eligible children should be guaranteed without caps or waiting lists. This makes funding predictable and reliable during hard economic times like these.
- **States have limited enrollment in CHIP because of concerns about increased state matching payments with increased enrollment.** Federal matching payments should be increased as states increase their outreach and enrollment of eligible children. This goal is to get children the health care they need to survive, thrive and learn in school.
- **Families are often unable to find providers willing to provide services at CHIP/Medicaid reimbursement rates.** CHIP/Medicaid provider reimbursement rates should be increased to improve access to quality care, with corresponding increases in federal cost-sharing.
- **Many children are excluded from the CHIP program because of immigration status.** Barriers to enrollment based upon immigration status should be eliminated. While almost 90 percent of uninsured children are U.S. citizens, 10 percent are immigrant children, many of whom legally reside in the U.S. A child is a child, and public health requires all be served.
- **Many states do not provide adequate coverage for pregnant women.** States should be required to provide coverage for pregnant women up to 300 percent of poverty. The cost of hospitalization for a pre-term or low birthweight baby is 25 times the hospitalization cost of a healthy baby, and the U.S. ranks 27th among industrialized nations in low birthweight and infant mortality. A Black baby born in our nation's capital has less chance of surviving the first year of life than in over 60 other nations.

The time is now for true health care reform that ensures all children have comprehensive, affordable health coverage and gives children a level playing field.