

Communicating with the Kansas Congressional Delegation about SCHIP

Attached is a sample letter you can use as a model for your communications with members of the Kansas delegation, but the impact of your letters will be greater if they reflect the interests and perspective of your organization and/or your own experience. You can use some of the following points as you write letters.

We hope that every letter includes the two important objectives we seek in SCHIP reauthorization:

- That SCHIP be reauthorized with sufficient funds to continue covering children now in the program and to cover additional eligible children who are not now enrolled. Congress needs to follow-through on its pledge of an additional \$50 billion over five years for SCHIP.
- That states have the flexibility to tailor programs to their unique needs, including covering children in families with incomes over 200 percent of the federal poverty level.

These are additional points you can make in your letters:

- SCHIP was a great bipartisan achievement and now is the time to strengthen it on a bipartisan basis with a strong reauthorization bill. A Republican Congress and Democratic President enacted the SCHIP program in 1997, and Republican and Democratic governors aggressively moved to utilize it to provide coverage for kids. Congress must build on this success to help states finish the job.
- Members of the Kansas congressional delegation can play important roles in SCHIP reauthorization. While we hope all members of the Kansas delegation lend their strong support to this issue, Senator Roberts and Representative Moore are particularly well positioned to make a difference. In letters to Sen. Roberts you can note that as a member of the Finance Committee and of its Health Subcommittee, he can help shape the SCHIP legislation in the Senate. In letters to Rep. Moore you can ask that as co-chair of the influential Blue Dog Coalition, he play a leadership role in crafting a strong SCHIP bill in the House.
- Providing health insurance to children is a cost effective strategy that benefits not only children but also the rest of us. When children are insured, every child is less likely to be exposed to communicable diseases. When children get sick less frequently because immunizations and other forms of prevention are accessible, every parent can be healthier, too, and miss less work.
- Access to comprehensive health care is fundamental to child well-being. When children do not receive preventive services their overall health suffers, as well as their ability to learn. Children who are uninsured are less likely to have a regular source of health care or a medical home. As a result they are more likely to rely on emergency rooms for healthcare, leading often to hospitalization for preventable conditions
- SCHIP funding for HealthWave provides health coverage to more than 35,000 Kansas children. Without our SCHIP funding, we would increase the number of uninsured children by 63%.
- SCHIP funding has not kept pace with increases in healthcare costs. Funding has remained essentially level for ten years, while during the same time healthcare costs have raised drastically.
- Kansas is facing a shortfall. If funding is not increased during reauthorization, Kansas is projected to face a shortfall beginning in FFY 2008 that will grow to \$31 million in FFY 2012. Such shortfalls will jeopardize health insurance for thousands of children and possibly curtail efforts to reach eligible children currently not enrolled.
- There are approximately 55,000 uninsured children in Kansas and 70 percent of them are eligible for public health insurance programs – but to cover more of those children we need to increase the level of SCHIP funding.