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FOR IMMEDIATE RELEASE

**CHILDREN'S HOSPITALS CALL ON CONGRESSIONAL DELEGATION TO SAVE
CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP)**

Nearly half a million children in Florida are at risk of losing medical coverage if the program is not extended.

TALLAHASSEE, Fla., Jan. 28, 2015 – Children's hospitals statewide are calling on Florida's congressional delegation for help in saving a federal program that provides health insurance to millions of children nationwide, including more than 473,000 in Florida.

The Children's Health Insurance Program, or CHIP, is a bipartisan program that offers healthcare coverage to children who don't qualify for Medicaid but also don't have access to private insurance. Enacted in 1997, CHIP provides federal matching funds to states that create health plans for children from low-income families.

The program was reauthorized in 2009 and, unless lawmakers take action, funding for it will expire Sept. 30. The Florida Association of Children's Hospitals (FACH), a coalition of 15 children's hospitals providing about two-thirds of the state's inpatient hospital days for children, is urging Florida's congressional members not to let that happen.

"We are asking that Florida's congressional delegation work swiftly with members of Congress to save the Children's Health Insurance Program," said Dr. Jerry Bridgham, president of the Florida Association of Children's Hospitals. "Without it, families across the state may have no affordable way to provide basic health care for their children."

Now is the time to act. In order to receive the federal match, Florida lawmakers must appropriate state funding during the upcoming legislative session. Earlier this month, FACH submitted a letter to the state's congressional members asking them to advance legislation as soon as possible to continue this critical program.

Nationwide, 39 governors, both Democrats and Republicans, are requesting Congress provide certainty about CHIP's future by March, when many state budgets are due. If funding for CHIP is not extended, the U.S. Government Accountability Office predicts 2 million children could become uninsured. Millions more would be forced into more expensive, inadequate plans through private insurance exchanges, disproportionately impacting children with special needs.

“Keeping children healthy should be a priority for everyone,” said Michael Aubin, president of Wolfson Children’s Hospital in Jacksonville and a member of the Children’s Hospital Association Board of Trustees. “Extending the program would ensure millions of children continue to receive the medical services they need to lead healthy, productive lives.”

Last year in Florida alone, CHIP provided healthcare coverage to 473,415 children through Florida KidCare, which includes Healthy Kids and MediKids. A public/private partnership, the program covers children’s medical expenses such as doctor visits, prescriptions, dental care and mental health care.

Florida was the first state in the country to implement the CHIP legislation and is in a good position to take the lead in renewing the program, FACH officials said. Since its inception, CHIP has helped reduce the percentage of uninsured children nationwide from 25 percent in 1997 to 13 percent in 2012, even as rates for uninsured adults have increased.

CHIP has a proven track record of meeting children’s health care needs and must be strongly protected. FACH asks that Congress not delay in extending it.

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The Florida Association of Children’s Hospitals (FACH) is a coalition of 15 children’s hospitals that make up the backbone of the state’s pediatric health care system. The hospitals provide care for the sickest and most vulnerable children, research cures for diseases affecting children and train pediatricians, pediatrics specialists and pediatric nurses. Combined, they provide nearly 57 percent of all pediatric hospital beds in Florida and 65 percent of all inpatient hospital days for children ages 0-17. Member hospitals are: All Children’s Hospital in St. Petersburg, Arnold Palmer Hospital for Children and Women in Orlando, Baptist Children’s Hospital in Miami, Children’s Hospital at Sacred Heart in Pensacola, Children’s Medical Center at Tampa General Hospital, Chris Evert Children’s Hospital at Broward General Medical Center in Fort Lauderdale, Florida Hospital for Children in Orlando, Golisano Children’s Hospital of Southwest Florida in Fort Myers, Holtz Children’s Hospital at UM/Jackson Memorial Medical Center in Miami, Joe DiMaggio Children’s Hospital in Hollywood, Miami Children’s Hospital in Miami, UF Health Shands Children’s Hospital in Gainesville, Shriners Hospitals for Children in Tampa, St. Joseph’s Children’s Hospital of Tampa and Wolfson Children’s Hospital in Jacksonville.



January 12, 2015

Florida Congressional Delegation Members

RE: Save the Children's Health Insurance Program (CHIP) that Provides Almost Half-a-Million Florida Children with Health Insurance

Nearly half a million children in Florida are in jeopardy of losing health coverage that has been in place for 16 years. We implore Florida's Congressional Delegation to take the lead and renew CHIP now. Preserving long standing, bipartisan supported health care for children is not a bargaining chip or a political football. It is life and death. If CHIP is not renewed in time (it expires in less than one year), it will be devastating to children and their families. Additionally, it will increase the overall cost of government by shifting coordinated preventive care to emergency room care.

CHIP funding must be extended without delay to protect coverage for children in working families in Florida and throughout the country. The Florida Association of Children's Hospitals (FACH) urges you to advance legislation as soon as possible to extend this critical program beyond FY 2015. In Florida in FY 2013, 473,415 children were covered by KidCare, which includes the Healthy Kids and MediKids programs. The timing is crucial due to Florida's fiscal year and the upcoming legislative session in which the state matching funds for this program must be appropriated. States have substantial flexibility in designing CHIP benefits and program structure. Florida operates a combination CHIP program called Florida Kidcare. This program is a public/private partnership with coverage provided by commercial carriers and cost sharing by families. KidCare, which includes the successful HealthyKids program, is the approach Florida designed and implemented in 1998 in response to the Federal CHIP legislation. Florida was the first state program in the nation to be approved and funded under the CHIP legislation.

CHIP is a successful, bipartisan program that has a proven track record meeting the unique needs of children. It was enacted in 1997 and has contributed to the most successful rate of insured children in U.S. history – 93 percent. CHIP is designed with children's needs in mind, providing children with appropriate pediatric provider networks, a strong set of benefits that cover medically and developmentally appropriate care, and affordable cost-sharing limits. CHIP, along with Medicaid, is the foundation of America's commitment to providing coverage and access to care for children. Combined, the two programs provided coverage to more than 45 million children in FY 2013.

Florida and other states will be hurt financially if CHIP expires as the cost to states to fund this coverage would increase significantly. On a bipartisan basis, 39 state governors are asking Congress to provide certainty about CHIP's future by March, when many state budgets are due. If CHIP is not extended, states may be required to send plan cancellation notices to families soon thereafter.

Congress must not delay action to extend CHIP. If CHIP is not extended in time, coverage for hundreds of thousands of children in Florida and millions of children in the nation will be put at risk. If CHIP expires, the Government Accountability Office predicts that 2 million children could become uninsured. Millions more would be forced into coverage on the exchanges with significantly higher cost-sharing, inadequate benefits and weak provider networks – all of which would disproportionately impact children with special needs.

Sincerely,

Jerry A. Bridgham, M.D.
President