## House Republicans should override veto on SCHIP

## Scott Leckman

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On Oct. 18, the U.S. House of Representatives failed to override the president's veto of the reauthorization of the State Children's Health Insurance Program. One week later, despite making significant changes in the legislation called for by House Republicans, the House again failed to get the two-thirds needed to overcome yet another threatened veto.

Congressman Jim Matheson was Utah's only House member to vote for the legislation.

Sen. Orrin Hatch is to be commended for the reauthorization legislation in the Senate and the strong bipartisan compromise he helped craft. The objections of the president and his defenders leave me scratching my head.

While everyone seems to be in denial about the rising cost of health care, the president seems to have an ideological objection to SCHIP. He said he would veto any legislation increasing costs more than \$5 billion over five years. This would cover even fewer children than are currently enrolled in the program.

In August of this year, the Bush administration placed new limitations on the use of SCHIP funds for any but the very poorest children, arguing that offering SCHIP to more of the 9 million uninsured children would amount to "socialized medicine". This despite the fact that 70 percent of the program is actually administered through private insurance plans and currently SCHIP makes up less than 1 percent of federal health care spending.

There are objections that families will drop private insurance in order to get on this public plan. Opponents, however, don't mention that the legislation includes provisions to study and systematically prevent "crowd out."

SCHIP was created in 1997 as a bipartisan effort to provide health insurance for children living in families with income too high to qualify for Medicaid but not sufficient to afford private health insurance. An estimated 91 percent of children who are insured by SCHIP come from families that have incomes below 200 percent of the federal poverty level (\$41,300).

The program has been extremely successful. It provides health insurance to 6 million children who would otherwise not be insured. Forty-three governors have urged the president and congressional leaders to reauthorize this popular program. The need to continue and modestly expand the program as proposed is unquestionable and growing. According to the Center for Children and Families, based at Georgetown University's Health Policy Institute, 2,000 children join the ranks of the uninsured each day. In Utah, 81 percent of our uninsured children would be eligible for SCHIP or Medicaid were they to apply.

More and more businesses are finding it difficult to cope with the rising cost of health insurance. In the face of skyrocketing premiums, the first thing businesses do is drop the families of employees off health plans. Many of us make the inaccurate assumption that if one has a good income it is easy to find affordable insurance.

The purpose of insurance companies is to make money. This is done by avoiding risk. If there was money to be made without government help to cover poor or near-poor children and a growing number of middle-class children, there would be no need for SCHIP. Unfortunately, the "market" is not solving this problem.

After the House voted on Thursday, Sen. Hatch said, "I am very disappointed about the outcome of today's vote. I believe it is a lost opportunity for America's low-income, uninsured children. As one of the authors of the original program, I believe that reauthorizing SCHIP is the right thing to do, but unfortunately, SCHIP has now become the center of a political battle. As a result, low-income children will continue to be uninsured. That is a shame."

The president and House Republicans say they do not want to see American health care "socialized," Their greatest fears will be realized if they continue to resist efforts to make improvements to the status quo.

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