



Children and Health Reform: Children Must Not Be a Casualty of Compromise

Coverage: All children must have access to quality health care.

- Quality, affordable health insurance should be a right, regardless of income, for every infant, child, adolescent and young adult.
- We are making progress even during the recession. Recent census data shows that the number of uninsured children is at its lowest level since 1987. Yet, millions of children are still uninsured, and more than half of uninsured children are eligible for Medicaid or the Children's Health Insurance Program (CHIP).
- There is bipartisan agreement that children should be a top priority in health reform. A recent poll conducted by Lake Research Partners revealed that 87 percent of those surveyed (1,000 registered voters) support ensuring that all children have health care coverage.
- **The life success of every child should be our highest national priority.**

Benefits: Children's coverage should include all essential services in a medical home.

- Children are not just little adults and must have access to appropriate benefits that meet their unique needs. The Senate Health, Education, Labor and Pensions (HELP) Committee's *Affordable Health Choices Act* includes preventive and well-child services modeled after the Health Resources and Services Administration's supported *Bright Futures* guidelines as part of the minimum benefit standard in health exchange plans.
- The final health reform legislation must include the HELP provision guaranteeing access to preventive and well-child services under all public and private plans with minimal cost-sharing.
- **Medically necessary services for children must be easy to access and affordable for families.**

Access: Pediatric access depends on payment rates and workforce support.

- Without appropriate payment, pediatricians cannot afford to treat their patients and keep their doors open. Medicaid pays pediatricians on average only 72 percent of Medicare rates. Because of this, only 53 percent of providers are willing to see new Medicaid patients.
- The House of Representatives' *Affordable Health Care for America Act* includes a provision (Section 1721) that would increase Medicaid payment rates to 100 percent of Medicare rates over three years. A Medicaid payment fix must be included in the final legislation.
- Children need to be seen by appropriate pediatric clinicians once they have coverage. Support to increase the number and location of pediatric clinicians must be part of health reform. Workforce provisions in the HELP bill would go the farthest in addressing this problem.
- **Without Medicaid payment reform and support for the pediatric workforce, Medicaid enrollees may receive a Medicaid insurance card that provides no real access to care.**