National Children's Organizations to Congress: Do No Harm

Published: Thursday, 23 March 2017 08:35
Written by: Sara Gunderson



Dear Majority Leader McConnell, Speaker Ryan, Minority Leader Schumer, and Minority Leader Pelosi:

As organizations from every state and multiple fields dedicated to improving the well-being of children, we strongly urge you to keep the unique needs of children front and center and adopt a “do no harm” standard for children as you consider any changes to the nation’s health care system. Today, ninety-five percent of children in the United States have health coverage – an historic high – thanks in large part to the Affordable Care Act (ACA), Medicaid and the Children’s Health Insurance Program (CHIP). We must continue to move forward, not backwards for children, their parents and pregnant women. Preserving and expanding child appropriate health coverage and access to quality care for children with special needs in school or in other child-serving systems will impact children’s opportunities to succeed. Unfortunately, the American Health Care Act would move children backwards.

To meet the “do no harm standard” for children, we stand united in urging you and the full Congress to:

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- **Preserve and protect Medicaid's funding structure that guarantees poor and low-income children and children with disabilities coverage for the services and treatment they need to survive and thrive**. Reject the per capita cap proposed for Medicaid in the American Health Care Act that will over time deny children critical care and disadvantage them throughout their lives. Any change to Medicaid disproportionately affects children, who constitute nearly half of Medicaid recipients – 37 million today. Over time the cap will also harm Medicaid's comprehensive prenatal care for income eligible pregnant women in every state, including many high-risk pregnancies and coverage for nearly half of all births annually in the U.S. Medicaid also helps schools, child welfare agencies and other child serving systems get children the special help they need. All of this will be in jeopardy. Capping Medicaid spending does not create cost efficiencies; instead, it shifts costs from the federal government to states, counties, local communities, beneficiaries and providers. Such cost shifts will inevitably result in loss of or limits on health coverage for children and other vulnerable populations.
- **Protect the ACA's Medicaid expansion and continue coverage for low-income parents**. More than 11 million low income adults in 31 states and the District of Columbia are benefitting from expanded Medicaid under the ACA. Covering parents improves children's access to health insurance and health care. The Medicaid expansion has resulted in improved access to mental health and substance abuse treatment, especially critical now with the opioid crisis affecting families across the country. When parents get treatment for their own health and mental health problems, it strengthens children's developmental outcomes. The requirement for mental health and other essential health benefits for these parents will be eliminated if the American Health Care Act moves forward.

Investing in the health of children through consistent affordable health coverage yields a significant return on investment. Identifying and treating conditions early, before they become expensive long-term liabilities, is effective. Children with health coverage are more likely to attend school, graduate from high school, go to college, and become healthier adults, with higher taxable earnings than uninsured children. Ensuring children and their parents have access to the medically necessary services they need from providers trained to serve children is critical to positive outcomes. Medicaid helps child-serving systems ensure children quality health care:

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- **Early Childhood:** Quality health coverage and care are essential for healthy brain development in children's early years, the years of greatest brain development. Early childhood teachers can help children learn and develop, but need help to provide the basic early intervention services children with special needs require to thrive. The ACA and Medicaid also help child care providers and other caregivers get health coverage to keep themselves healthy and able to care for others' children.
- **Education:** Since child health impacts educational attainment, any structural changes to Medicaid or loss of ACA coverage would compromise returns on major investments in children from Early Head Start to college. Medicaid reimburses schools for services delivered to children and the specialized staff who provide them, especially for children with disabilities, and also for students who get critical health services at school, such as vision and hearing screenings.
- **Child Welfare:** Medicaid offers treatment for substance abuse and mental health disorders that can otherwise result in children entering the child protection system and keeping them there. It helps state and local agencies get treatment to children in foster family homes, children with special needs in residential treatment, children who move from foster care to guardianship, and those with special needs adopted from foster care. It also provides therapeutic case management, co-location of health experts in child welfare offices, services and treatment for children in foster care with multiple complex needs and often their parents that help shorten their stays in foster care and reunite families.
- **Juvenile Justice.** While Medicaid cannot be used to care for youth in detention, it is an essential sometimes life-saving support for some youths with significant health or mental health needs as they transition out of detention and return to their family and community. It can help strengthen communities by preventing juveniles from re-offending.

We call on you and your colleagues in Congress to protect children's health coverage as you consider the American Health Care Act and any reforms to the ACA and Medicaid. Any changes that move backwards and make children worse off by depriving them of comprehensive and affordable child-appropriate coverage will jeopardize not only their futures but the nation's future economic and national security. We urge you to commit to build on the progress made over the past five decades to expand and improve health coverage for children, and, at a minimum, to

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“do no harm.”

Sincerely, Voices for Utah Children and other National Organizations

For a complete list of signing organizations, see the printer friendly versions:

Letter to Congress



March 30, 2017 is Love UT Give UT!

It’s a day for Utahns to give to the nonprofits that make Utah special. Every donation to Voices for Utah Children through Love UT Give UT gives Voices a chance to win matching grants and prizes—and gives you a chance to win a car!

And you don't have to wait! Donate now at http://bit.ly/loveUTchildren.

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For 30 years now, Voices for Utah Children has called on our state, federal and local leaders to put children's needs first. But the work is not done. The children of 30 years ago now have children of their own. Too many of these children are growing up in poverty, without access to healthcare or quality educational opportunities.

How can you be involved?

Make a tax-deductible donation to Voices for Utah Children—or join our Network with a monthly donation of $20 or more. Network membership includes complimentary admission to Network events with food, socializing, and opportunity to meet child advocacy experts. And don't forget to join our listserv to stay informed!

We look forward to the future of Voices for Utah Children and we hope you will be a part of our next 30 years.

Special thanks to American Express for sponsoring our 30th Anniversary Year.



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