

## Castle: Bipartisan Negotiations Are the Next Step -- October 18, 2007

Washington, DC -- Delaware Congressman Mike Castle today voted to override the President's veto of the State Children's Health Insurance Program (SCHIP) Reauthorization Bill. Despite Congress's efforts, the override failed 273-156. The current federal funding for SCHIP is set to expire November 15.

"I originally voted in favor of the legislation sent to the President and support the extension and expansion of this program, which has helped millions of children over the last decade. I continued to support this bill with today's vote to override the President's veto, which unfortunately fell short. I believe that we need to take the next steps to work together to reach a compromise -- one that Congress can pass and the President will sign. SCHIP is a valuable program that we cannot give up on at this point. We need to negotiate a bipartisan compromise to ensure the success of the program and the expansion by 4 million children, bringing the total number of children in SCHIP to 10 million. I urge Congress and the President to move swiftly to resolve their difference and reauthorize this successful program; relatively minor changes would yield a broad bipartisan coalition to pass the bill," Castle said.

Rep. Castle put forth a moderate compromise proposal with Reps. Charles Dent (PA-15), Mark Kirk (IL-10), and Heather Wilson (NM-01). They presented the following letter to Speaker Pelosi in response to the vote today.

The text of the letter is below.

October 18, 2007

Dear Speaker Pelosi:

In light of today's vote, we are putting forward a moderate compromise proposal that Congress will pass and the President should sign to provide health care to lower income children. The current federal funding for this program is set to expire November 15 and we cannot jeopardize the coverage on which millions of American children depend.

We support the extension and expansion of the current federal role in providing children in need with access to essential health care coverage; we supported HR 976. We now have the opportunity to pass a bill that the President will sign into law. Republicans and Democrats alike agree on key principles - putting children first and prioritizing uninsured low-income children. Together, we can hammer out a compromise that can be signed by the

President.

We should work together to develop a reasonable solution to extend SCHIP and increase access to affordable, comprehensive health care coverage. There are several areas which we feel would receive broad Congressional support. The following points should be part of a children's health compromise:

- Adults should not take the place of children in need of health care coverage in the SCHIP program. Understanding that there are adults presently in the program, efforts should be made to swiftly transition this population out of SCHIP before 2012, if feasible.
  
- Legislation should place the highest priority, and provide incentives to states, to enroll the poorest children into SCHIP first, and it should also include a mechanism to ensure this requirement is met. Before increasing the poverty level for families whose children qualify for coverage, legislation should ensure the poorest kids are already enrolled. Capping the program at 300% of the federal poverty level, without waivers, while grandfathering in those states above this level, should be considered.
  
- Families with access to private health insurance should provide such coverage for their children and incentives should be given to ensure a shift from private insurance to public assistance is minimized.
  
- Only U.S. citizens should be eligible for SCHIP and Medicaid benefits. Reauthorization should maintain current law preventing illegal immigrants from attaining benefits.
  
- Cost and quality cannot be ignored. Any federal cost liabilities must be reviewed to ensure American tax dollars are going as far as possible. Current procedures should be in constant review so programs can be upgraded, not simply expanded, to provide quality care. CBO estimates that \$14 billion is needed to simply maintain the current enrollment in SCHIP. While we supported an increase of \$35 billion to help reach an additional 4 million kids, a phase-in approach to any program changes should be considered for any potential cost savings, assuming the goal of covering 10 million kids in SCHIP is met.
  
- Outreach for enrollment is an essential component and those efforts should be targeted to the core uninsured low-income population. Many of the uninsured kids in our country today are already eligible for SCHIP, and there are unspent funds available to serve them. We must do a better job of reaching out to families under 200% of the federal poverty level.

- SCHIP was established in a Republican Congress under a Democratic President and was supported by Republicans and Democrats. Reauthorization should include input from members of both parties under the normal legislative process to produce a strong bipartisan bill supported overwhelmingly by members of both parties.

We recommend that you consider making modifications to the SCHIP reauthorization to provide clarification and adjustment in the improvement of this program. With the November 15 deadline fast approaching, we are committed to enacting reform that helps enrolled kids and those who are eligible take part in this successful program.

Sincerely,

Michael N. Castle,  
MC  
Charles W. Dent, MC

Mark Steven Kirk,  
MC  
Heather Wilson, MC

cc:

The  
Honorable Steny Hoyer

The  
Honorable John Boehner

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