

COALITION ON CHILDREN'S HEALTH CARE

May 18, 2007

The Honorable Charlie Crist
Governor, State of Florida
400 South Monroe Street
Tallahassee, Florida 32399-0001

Dear Governor Crist:

On behalf of a broad range of organizations seeking much needed improvements to the KidCare Program, we thank you for your highly visible leadership and proactive stance on reforms to the program. Your personal involvement has elevated the issue and promises to produce the results so important to Florida's children who desperately need health insurance coverage.

It was disappointing that KidCare legislation did not pass during the regular session. However, there still is an opportunity to do the right thing during the Special Session. We urge you to please see that the issue is placed before the legislature next month.

Enclosed is a proposed bill (*Attachment 1*) that takes a measured approach to reform and has been endorsed by a long list of organizations (*see Attachment 2*). This bill addresses:

- **Retention of eligible children:** 8,000 children per month lose their health insurance because their family income changes and is too high for Medicaid (Title XIX). These families must then reapply for another KidCare program in order to retain health insurance. The proposed bill allows children to be transferred automatically to appropriate KidCare programs when family income changes, preventing lapses or loss of coverage.
- **Continuous eligibility:** Covered children should be eligible for a full 12 months. Ongoing eligibility should be verified electronically.
- **Electronic verification of income for eligibility:** The state should verify a family's income electronically whenever possible (like most other programs) making it easier for families to apply to KidCare. This also increases accountability and prevents fraud.
- **Barriers to coverage:** Children currently must be uninsured for six months before applying to KidCare. The program would be amended to remove the six-month waiting period.

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- **Loss of coverage:** 3,800 children per month currently lose health insurance coverage for 60 days if premium payments are late. The bill would reduce the period of time for lost coverage to 30 days.

If passed, this consensus proposal would benefit Florida's children and families, and would send a strong signal to Congress about our state's commitment to KidCare. Timing is particularly important as Congress discusses S-CHIP reauthorization, which provides the federal match for our state dollars at a ratio of 3 to 1.

Again, thank you for all you have done. The organizations committed to improving the health of our children look forward to working with you to improve this very important program.

Respectfully submitted by:

The Children's Trust	Children's Service Council-Broward Co.
Florida Children's Services Councils	Florida Legal Services
Florida Pediatric Society	NE Florida Healthy Start Coalition
The Children's Campaign	ACORN
United Way of Florida	Civic Concern
Florida March of Dimes Association	AFSCME
Florida Catholic Conference	Florida Institute for Family Involvement
Florida Catholic Health Executives Comm.	Farmworkers Self Help
Florida Healthy Start Coalitions	Human Services Coalition Miami/Dade
Florida PTA Association	Voices for Children
Florida CHAIN	North Fla. Education Development Corp.
Florida Assn. of Healthy Start Coalitions	Injury Free Coalition for Kids of Miami

SUMMARY OF STREAMLINED KIDCARE PROPOSED BILL

- The entire program shall be marketed as KidCare and KidCare Plus;
- The 60 day loss of coverage for late premium payments is reduced to 30 days;
- The 6 month wait to enroll if you have previously been insured is reduced to 30 days and there are good cause exceptions to the 30 day wait;
- Twelve month continuous eligibility applies to all program components;
- There will be seamless transition from Medicaid into a different KidCare program with 60 days before a family has to make premium payments;
- Providers will be notified at the same time that their families are notified that they are losing their KidCare coverage so that they can assist with transition;
- The ten percent cap on participation in the full pay program is removed;
- The Department of Health, in consultation with the Agency for Health Care Administration, will develop standards for the entire KidCare program;
- The Agency for Health Care Administration will establish rules for the entire KidCare program and will contract with an outside source for an evaluation of the entire KidCare program;
- The Department of Health, in consultation with the KidCare Coordinating Council, will develop rules and policies for outreach for the entire KidCare program.