

Mental Health Liaison Group

April 28, 2017

Senate Majority Leader Mitch McConnell
317 Russell Senate Office Building
Washington, DC 20510

House Speaker Paul Ryan
1233 Longworth House Office Building
Washington, DC 20515

Senate Democratic Leader Charles Schumer
322 Hart Senate Office Building
Washington, DC 20510

House Democratic Leader Nancy Pelosi
233 Cannon House Office Building
Washington, DC 20515

Hon. Orrin Hatch
Chairman, Senate Finance Committee
104 Hart Senate Office Building
Washington, DC 20510

Hon. Greg Walden
Chairman, House Energy and Commerce Committee
2185 Rayburn House Office Building
Washington, DC 20515

Hon. Ron Wyden
Ranking Member, Senate Finance Committee
221 Dirksen Senate Office Building
Washington, DC 20510

Hon. Frank Pallone
Ranking Member, House Energy and Commerce
Committee
237 Cannon House Office Building
Washington, DC 20515

RE: Funding Extension for the Children's Health Insurance Program (CHIP)

Dear Majority Leader McConnell, Speaker Ryan, Democratic Leaders Schumer and Pelosi, Chairmen Hatch and Walden, and Ranking Members Wyden and Pallone:

The Mental Health Liaison Group (MHLG)—a coalition of almost 70 national organizations representing consumers, parents and family members, advocates, providers, and mental health experts dedicated to building better lives for the millions of Americans affected by mental illness—is writing to urge you to, as expeditiously as possible, to enact a long-term funding extension of the Children's Health Insurance Program (CHIP). Swift action on a CHIP funding extension bill would provide much-needed certainty to states and families and ensure that health coverage for the close to nine million children who rely on CHIP will not be disrupted, as funding for CHIP is due to expire September 30, 2017

Since its creation 20 years ago as part of the Balanced Budget Act of 1997 (BBA 97, P.L. 105-33), CHIP has been an essential source of coverage for families, ensuring access to high-quality and affordable, pediatric-appropriate health care for children in working families whose parents earn too much to qualify for Medicaid but too little to purchase affordable private health insurance. It is a model program that has played a critical role in reducing the number of uninsured children by more than 50 percent while improving health outcomes and access to care for children and pregnant women across the nation. Today, over 95 percent of children have insurance, largely thanks to the role of Medicaid and CHIP in increasing children's access.

Nearly 9 million children are enrolled in CHIP. If Congress does not pass a long-term clean extension of CHIP, millions of children may lose coverage. Although some of these children could be eligible for private coverage, their families would have to pay considerably more for it than they would under CHIP. This could create barriers to both needed coverage and access to health and developmental services, which may be unavailable or more costly through other coverage. CHIP's uncertain funding future is a

National organizations representing consumers, family members, advocates, professionals and providers
c/o Laurel Stine, J.D., American Psychological Association at lstine@apa.org
and Debbie Plotnick, MSS, MLSP, Mental Health America at dplotnick@mentalhealthamerica.net

significant problem for states as they are already developing their FY 2018 budgets and negotiating contracts with insurers and providers. Children in both Medicaid and CHIP are impacted by this uncertainty given that states may need to undertake a significant shift/reduction in state resources, particularly if the Medicaid program itself is restructured into a block grant or per capita cap program designed to reduce Federal contributions.

Since funding for CHIP was last renewed by the Medicare and CHIP Reauthorization Act of 2015 (MACRA, P.L. 114-10), MACPAC's analysis has focused on both what would happen under current law should federal CHIP funding end. Key findings from this analysis are:

- CHIP has reduced the lack of insurance among children in families with incomes below 200 percent of the federal poverty level (FPL).
- CHIP coverage is more affordable, with respect to both premiums and out-of-pocket cost sharing expenses, for families than either exchange or employer-sponsored coverage.
- Children with CHIP coverage are more likely to have a usual source of care and more likely to have had a well-child visit in the past year relative to children without insurance.

CHIP has strong bipartisan roots and was developed as a state-Federal partnership that gives governors broad flexibility to design their programs to target the needs of their child populations. The uncertain future of CHIP funding is a significant problem for states developing their FY 2018 budgets and negotiating contracts with insurers and providers for the upcoming benefit year. In order for states to continue their programs without interruption, they must know that federal support for CHIP will exist beyond FY 2017. If Federal funding is not stabilized expeditiously, states will have no choice but to begin planning for the impending funding shortfalls through severe state cuts or even program elimination. With children's coverage rates at record highs, it would be devastating if states with standalone CHIP programs were forced by lack of financing to dismantle those programs.

Action on extending CHIP funding is needed as soon as possible. We urge you to provide continued funding to secure CHIP's future, so that families and states alike can be assured their children's health, particularly their behavioral health, will be protected.

Thank you for your attention to this crucial request.

Sincerely,

American Academy of Pediatrics
American Art Therapy Association
American Association of Child and Adolescent Psychiatry
American Association on Health and Disability
American Dance Therapy Association
American Group Psychotherapy Association
American Nurses Association
American Occupational Therapy Association
American Psychiatric Association
American Psychological Association
Anxiety and Depression Association of America
Association for Ambulatory Behavioral Healthcare
Association for Behavioral Health and Wellness
Campaign for Trauma-Informed Policy and Practice

Center for Clinical Social Work/ABE/ACSWA
Children and Adults with Attention-Deficit Hyperactivity Disorder (CHADD)
Clinical Social Work Association
Clinical Social Work Guild 49
Depression and Bipolar Support Alliance
Eating Disorders Coalition
Global Alliance for Behavioral Health and Social Justice
Mental Health America
NAMI, National Alliance on Mental Illness
National Association for Children's Behavioral Health
National Association of School Psychologists
National Association of Social Workers
National Association of State Mental Health Program Directors (NASMHPD)
National Council for Behavioral Health
National Disability Rights Network
National Register of Health Service Psychologists
NHMH - No Health without Mental Health
Sandy Hook Promise
Schizophrenia and Related Disorders Alliance of America
School Social Work Association of America
Treatment Communities of America
The Trevor Project
Young Invincibles