

***Covering Kids* Third Annual Meeting**

Remarks by Sarah Shuptrine

Good morning. It is so good to see all of you at this Third *Covering Kids* Annual Meeting.

We are now in the final year of the *Covering Kids* initiative. It has been rewarding, exciting and challenging. Let's look at where we stand.

- By the end of this year, 21 states will have completed three years of their *Covering Kids* initiative.

- By the end of March 2002, another 9 states will complete their three years of working on the goals set out in their *Covering Kids* proposals.

- By the end of May, another 9 states will reach the three year mark.

- And by the end of August, another 11 states will complete three years of their *Covering Kids* initiative.

- And then, there's South Dakota, our latecomer. Their *Covering Kids* grant runs through June 2003.

Covering Kids is at a crucial stage, and we plan to work up until the very last day with every state doing everything possible to stay the course on behalf of low-income, uninsured children!

Opportunities on the horizon are very exciting.

With the *new* Covering Kids & Families initiative just around the corner, we can all be very proud that *Covering Kids* has led to even greater opportunities and greater challenges.

What we are hoping is that the country will be covered with Covering Kids & Families initiatives by midsummer of 2002.

Everything we do is immersed in historical perspective. We cannot move forward without looking back at the journey we've taken. And the directions we have chosen will help chart a course for the future.

At the National Program Office, when we reflect on our first Grantee Training Sessions in 1999, the bulk of what we provided was the equivalent of a course in "Health Coverage

Policy 101.” Sure, we had a number of seasoned veterans in the fold — especially in the area of outreach — but most of our grantees were pretty new to all of the complexities of simplification and coordination.

In just a couple of short years, *Covering Kids* grantees and pilot projects have become very savvy and creative, both with policies and strategies. I cannot convey adequately the level of pride I feel about *Covering Kids* and the phenomenal amount of passion and commitment that drives much of what our grantees and pilot projects do.

What is perhaps most impressive and important, you are spreading your knowledge exponentially through coalition partnerships across the country. And that is resulting in real gains for America’s children.

One of the most valuable contributions of *Covering Kids* has been the development of effective partnerships among public and private organizations.

These partnerships have resulted in millions more uninsured children taking advantage of the preventive and primary care opportunities that health care coverage can bring.

I'd like to take a moment to review some specific *Covering Kids* accomplishments over the past three years.

- *Covering Kids* has created a network on a national scale for collaboration and learning.
- *Covering Kids* coalitions have been created in 50 states, the District of Columbia and 170 communities throughout the nation, with more than 4,000 public and private organizations working to reduce the number uninsured children.
- There is far greater knowledge of barriers that keep families from enrolling their eligible children in Medicaid and SCHIP, and there is significantly enhanced awareness of actions needed to remove those barriers.

- There has been slow but steady progress in the policy arena, clearing the way for steps that enhance the likelihood that families who are aware of Medicaid and SCHIP opportunities can apply and be approved.

For example, most states do not require an assets test for child health coverage under Medicaid. Yet six (6) states still impose a Medicaid asset test, and one (1) additional state requires it both for Medicaid and SCHIP.

Most states do not require a face-to-face interview. However, five (5) states require a face-to-face interview for Medicaid; and one (1) additional state requires it both for Medicaid and SCHIP.

Eighteen (18) states have achieved 12-month continuous eligibility for Medicaid and SCHIP. Yet eleven (11) states have 12-month continuous eligibility for SCHIP but not for Medicaid.

In addition, there has been some progress and considerably more attention to improvement in the area of retaining children who are eligible.

Forty-one (41) states have either 12-month review periods or have adopted 12-month continuous eligibility. But that still leaves ten (10) states that have a 6-month renewal period for Medicaid, three (3) of which also have 6-month renewal periods for SCHIP.

And most states do not require a face-to-face interview upon renewal, but six (6) states require a face-to-face interview at Medicaid renewal, and one (1) additional state requires it upon renewal for both Medicaid and SCHIP.

There have been gains in the knowledge level of working parents who previously thought there was no program available to help them provide coverage for their children.

And, most of all, there have been reductions in the number of uninsured children.

Still, there are many challenges that remain for those of us who are committed to further results on behalf of uninsured children.

Our greater knowledge of barriers must lead to more action in the policy arena. This is true in both the initial enrollment and retention areas. We must press ahead in making a compelling case to ease the application and renewal barriers that separate eligible children from the coverage they need.

There are still far too many parents who believe they have to be on welfare for their children to be eligible for Medicaid coverage. On the positive side, some **29** states have aligned policy provisions for their Medicaid and separate SCHIP programs. Would that every Medicaid program in every state parallel the policy simplification, family friendliness and positive image of separate SCHIP programs. Our messages

must be more effective and more widespread, bringing in new and non-traditional partners, as we strive to get the word out. And we must make more significant gains in our quest to reduce the number of uninsured children who are eligible for Medicaid and SCHIP. This will require an unwavering commitment on the part of states to cover children — a commitment that must not be set aside in the wake of budget concerns that have little to do with children.

It's clear that the landscape has been changed. *Covering Kids* didn't do it alone, but there is no doubt that we have made a substantial contribution through the informed public and private partnerships that have guided our efforts.

Thank you for all you have done and all that you will continue to do. One thing is for sure – this is the time not to wind down but to put every ounce of energy and enthusiasm toward the continued achievement of your *Covering Kids* goals.

The Robert Wood Johnson Foundation and the National Program Office want to do everything we can to assist you.

Under the guidance of our Communications Director, Kristine Hartvigsen, and our Webmaster, Mathew Smith, we will continue to bring you the latest information through our *Covering Kids* website and to provide you with opportunities to talk with one another through our listserv capacities.

We also welcome and encourage your email and telephone inquiries on specific issues you are facing.

Your first point of contact for administrative issues and general technical assistance is Program Manager Ann Marchetti. For assistance with Medicaid and SCHIP policy issues, contact our Policy Analyst Nicole Ravenell.

JoAnn Prince, our Program Assistant, and Tracye Williams, our Administrative Assistant, will help in any way they can to facilitate your requests for assistance and information.

GMMB will continue through the *Covering Kids* communications campaign to help bring the message to low-income families that coverage is available for their children

and to involve more partners in helping *Covering Kids* initiatives reach more families.

Our *Covering Kids* team will continue to provide overall direction for *Covering Kids* while helping to guide start-up of the new Covering Kids & Families initiative, which — building on the work of *Covering Kids* — is designed to increase the number of eligible children and adults who benefit from federal and state health care coverage programs.

The Foundation's support will enable us to focus once again on improving access to health coverage through outreach, simplification and coordination, and we will include a special focus on retention of enrolled populations.

As you are aware, we are in a very active, ongoing grant review process. And we are very pleased that a separate call for proposals to work on improving access to health care will be issued in 2002. Only projects approved for Covering Kids & Families can apply for these additional access funds.

The contact persons at the National Program Office for questions regarding the new CKF initiative are Vicki Grant and Ann Marchetti.

This gathering of our *Covering Kids* community gives us a special opportunity to celebrate together. Because of our collective efforts, energy, dedication, innovation and sheer will, more low-income children have the advantages that health coverage can bring.

You are the silent heroes battling a decades-long epidemic of uninsurance. And you are winning the battle — one child at a time.

In closing, I want to express appreciation to The Robert Wood Johnson Foundation for the leadership and commitment that has made all of this possible.

Thank you.

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