

# Children's Health Care Bill



## *Senator Susan Collins (R-ME)*

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I urge the President of the United States to reconsider his threat to veto this vital program, this highly successful program that has a proven track record of reducing the number of children who lack health insurance. If the President does proceed to veto the bill, I will vote to override his veto.

Surely, this bill has a track record that has made a real difference to low-income children in working families. We simply cannot allow this program to expire. The extension and expansion we are proposing will enable us to more fully cover these children.

*-- Senate Floor Statements - September 20, 2007*

Let us not jeopardize the existence of a successful, effective program for low-income children because we want to have that broader debate. Let's send this bill to the President. Let's urge him to sign it into law, and then let's turn our attention to this long, overdue, much needed debate.

*-- Senate Floor Statements - September 27, 2007*

## Senate - September 27, 2007

Ms. COLLINS. Mr. President, I rise in support of the legislation that will extend and increase funding for the State Children's Health Insurance Program.

One of the very first bills I cosponsored as a new Member of the Senate back in 1997 was the legislation that first established the SCHIP program. I remember Senator *Hatch* coming to talk to me about this bill and enlisting my support for it. I am very happy I was one of the original cosponsors of the SCHIP bill.

This program provides much needed health care coverage for children of low-income parents who simply cannot afford the cost of health insurance and do not get health insurance through the workplace; yet they make a little bit too much money to qualify for the State's Medicaid Program.

Since 1997, the SCHIP program has contributed to more than a one-third decline in the number of uninsured low-income children. That is a tremendous success. It is hard for me to understand why anyone would vote against an extension, a modest expansion, of what has been such a highly successful and effective program. Today, an estimated 6.6 million children, including more than 14,500 in the State of Maine, receive health care coverage through this program.

Still, as this legislation recognizes, there is more we can do to further decrease the number of uninsured low-income children. While the State of Maine ranks among the top four States in reducing the number of uninsured children, we still have more than 20,000 children who don't have coverage. Nationally, about 9 million children remain uninsured.

Unfortunately, the authorization for the SCHIP program, which has done so much to help low-income children in working families obtain the health care they need, is about to expire. That is why I encourage and I urge all of my colleagues to join me in supporting this legislation.

I commend the Senate conferees on this bill. They did a very good job of coming up with a very reasonable proposal--a proposal that costs less than the House version and yet will make a real difference to low-income uninsured children. I would point out that this is a bipartisan bill. On the cloture vote earlier today, it had overwhelming support, as 69 Senators voted to proceed with the vote on this bill.

The legislation that is before us will increase funding for the SCHIP program by \$35 billion over the next 5 years--a level which is sufficient to maintain the coverage for the 6.6 million children currently enrolled, as well as to expand the coverage so that we can reach more children who are currently uninsured. In the State of Maine, the bill before us will allow us to cover an additional 11,000 low-income children who are currently eligible for SCHIP but not enrolled.

The bill also improves the program in a number of important ways. Like Senator *Domenici*, I am very pleased that the bill includes a requirement for States to offer mental health services through their SCHIP program. Treating behavioral and emotional problems and mental illness while children are young--early intervention--can make such a difference. I know from hearings I have held in the Homeland Security and Governmental Affairs Committee that the current systems for providing mental health care to children are woefully inadequate. The result is oftentimes parents are faced with a horrible choice of giving up custody of their children in order

to secure the treatment they need for serious mental illnesses. That is a choice no parent should ever have to make.

We also need to improve oral health care, dental health care for children, and this bill will do just that. Despite the demonstrated need, children's dental coverage offered by States isn't always what it should be. Low-income and rural children suffer disproportionately from oral health problems. In fact, 80 percent of all tooth decay is found in just 25 percent of children--80 percent of the problems in 25 percent of the kids. That is simply because they don't have access to oral hygiene, they don't have access to dentists and dental hygienists who could help ensure their health. I am very pleased, therefore, that the bill before us will strengthen the dental coverage offered through SCHIP to ensure that more low-income children have access to the dental services they need to prevent disease and promote good oral health.

Finally, the bill will eliminate the State shortfall problems that have plagued the SCHIP program as well as provide additional incentives to encourage States to increase outreach and enrollment, particularly of the lowest income children.

The bill before us today is the prescription for good health for millions of our Nation's low-income children in working families. That is why I am so disappointed that the President has threatened a veto of this legislation. I just do not understand his decision, and I think it could be a terrible mistake. This important program can simply not be allowed to expire. I urge all of our colleagues to join me in supporting it.

Let me make one final point. I have heard a lot of our colleagues on my side of the aisle argue that we need a far more extensive debate on health care policy in this country, and they are right. But we should not hold the SCHIP program hostage to that broader debate. We do need a broader debate. We need a broader debate on how to lessen the number of uninsured Americans, which now exceeds 45 million Americans. We need a broader debate on how to help our small businesses better afford the cost of health insurance for their employees.

We need a broader debate on how we can effectively use the Tax Code to help subsidize the cost of insurance for those who don't receive insurance through the workplace.

I hope Senate leaders will charge the relevant committees to undertake a couple of months of hearings to bring together the best minds possible and then dedicate a month of debate on the Senate floor to a wide variety of solutions to both promote broader access to health care, to help our uninsured better afford health coverage, and to improve the quality of health care in this country.

That is an important and overdue debate. In fact, the Senator from Louisiana, Senator *Landrieu*, and I have, for several Congresses, introduced a broad health care bill with these goals in mind.

Let us not jeopardize the existence of a successful, effective program for low-income children because we want to have that broader debate. Let's send this bill to the President. Let's urge him to sign it into law, and then let's turn our attention to this long, overdue, much needed debate.

I yield the floor.

## Senate - September 20, 2007

Ms. COLLINS. Mr. President, earlier today, the President announced his intention to veto the extension of the Children's Health Insurance Program bill. I believe such a veto would be a terrible mistake.

One of the very first bills I cosponsored when I first came to the Senate was legislation to create the State Children's Health Insurance Program, or SCHIP as it has become known. It provides health care coverage for children in families where the parents do not have sufficient income to purchase health insurance and are not getting health insurance in the workplace, and yet they make a bit too much money to qualify for coverage under the State's Medicaid program. So these low-income children in working families have been falling through the cracks. That is why this law has been so important.

I remember it well that Senator *Hatch*, Senator *Kennedy*, and Senator *Rockefeller* all came up to me to enlist my support. I was very eager to sign on as one of the original cosponsors of this law because I knew it could make such a positive difference. Indeed, it has.

Since 1997, the SCHIP program has contributed to a one-third decline in the rate of uninsured low-income children. Today, an estimated 6.6 million children, including more than 14,500 children living in Maine, receive health care coverage through this program. Still, there is more we could do.

While Maine ranks among the top four States in reducing the number of uninsured children, we still have more than 20,000 children in our State who lack coverage. Nationally, about 9 million children remain uninsured. That is why I was so pleased to hear the conferees appeared to be very near to an agreement that is modeled on the legislation that passed the Senate in August with strong bipartisan support, in fact, by a vote of 68 to 31.

Our Senate bill increases funding for the SCHIP program by \$35 million over the next 5 years, a level that is sufficient to maintain coverage for all 6.6 million children currently enrolled, and it would also allow the program to expand to cover an additional 3.3 million low-income children. In Maine, this legislation would allow us to cover an additional 11,000 low-income children who are currently eligible for the SCHIP program but not enrolled.

I urge the administration to take a second look at the Senate bill, the bill that is the basis for the conference agreement. This legislation has made a real difference in the lives of working families with low-income children across this country. It is helping to ensure these children grow up to be healthy adults. Surely, we can get this done on a bipartisan basis before the program is scheduled to expire on September 30.

I urge the President of the United States to reconsider his threat to veto this vital program, this highly successful program that has a proven track record of reducing the number of children who lack health insurance. If the President does proceed to veto the bill, I will vote to override his veto. Surely, this bill has a track record that has made a real difference to low-income children in working families. We simply cannot allow this program to expire. The extension and expansion we are proposing will enable us to more fully cover these children.

# SENATOR COLLINS CALLS ON SENATE TO PASS SCHIP LEGISLATION BY 'VETO PROOF' MARGIN

Press Release - September 26, 2007

Washington, DC -

U.S. Senator Susan Collins is calling on the Senate to approve by a veto-proof margin legislation to extend the State Children's Health Insurance Program (SCHIP). Senator Collins is among the leading supporters of the successful program that provides health insurance to low-income children throughout the nation. The 1997 legislation to create the program was among the first bills Senator Collins co-sponsored when she was first elected to the Senate.

While tomorrow's expected Senate approval of legislation would increase SCHIP funding by \$35 million, the President has threatened to veto the legislation. Senator Collins recently said that such a veto would be a "terrible mistake."

The bill also includes provisions backed by Senator Collins that would provide greater dental coverage for low-income children, require plans offering mental health benefits to provide coverage that is equivalent to other health services, and give states the option of covering low-income pregnant women.

Senator Collins said, "One of the very first bills that I cosponsored when I first came to the Senate in 1997 was legislation to create the State Children's Health Insurance Program, or SCHIP, as it has become known. It provides health insurance for children in families that do not have sufficient income to purchase health insurance and are not getting health insurance in the workplace. Yet, these families make a bit too much money to qualify for coverage under the state's Medicaid program. These low-income children were falling through the cracks.

"Since 1997, the SCHIP program has contributed to a one-third decline in the rate of uninsured low-income children. Today, an estimated 6.6 million children, including more than 14,500 children living in Maine, receive health care coverage through this program. Still there is more that we could do. While Maine ranks among the top four states in reducing the number of uninsured children, we still have more than 20,000 children in our state who lack coverage. It is critical that we not let SCHIP expire and that we extend the program to cover additional low-income children.

"I urge my Senate colleagues to approve this vital legislation by a veto-proof margin. This program simply cannot be allowed to expire."