



H.R. 3162, Children's Health and Medicare Protection Act (CHAMP Act)

Some of the Letters of Support

AARP

American Medical Association

Catholic Health Association

National Rural Health Association

American Hospital Association

Federation of American Hospitals

American Nurses Association

Families USA

National Partnership for Women and Families

Children's Defense Fund

Child Welfare League of America

National Committee to Preserve Social Security &
Medicare



July 26, 2007

The Honorable John D. Dingell
Chairman
House Committee on Energy and Commerce
U.S. House of Representatives
Washington, D.C. 20015

Dear Chairman Dingell:

AARP strongly supports the Children's Health and Medicare Protection (CHAMP) Act (H.R. 3162). This well-balanced, fiscally responsible legislation addresses several priority issues for AARP's nearly 39 million members and their families. The legislation provides needed assistance to low-income Medicare beneficiaries; helps to ensure that beneficiaries maintain access to physicians; protects beneficiaries from significant additional increases in the Part B premium; covers millions of children in working families that cannot afford health insurance on their own; and includes additional changes that will improve the quality and efficiency of our nation's health care system

Helping Low-income Medicare Beneficiaries

The CHAMP Act will help more low-income Medicare beneficiaries with Part D drug costs and cost sharing in traditional Medicare by raising asset limits and streamlining requirements for the Part D Low Income Subsidy (LIS), and improving the Medicare Savings Programs (MSP) that assist lower income Medicare beneficiaries with premiums and cost-sharing in traditional Medicare.

Raising Part D asset limits to \$17,000 for individuals and \$34,000 for couples closes the coverage gap ("doughnut hole") and helps pay premiums and copays for more low-income beneficiaries who did the right thing by saving a small nest egg for retirement. We should encourage people to save for retirement, not penalize those low-income savers with an asset test. Further raising the limits in subsequent years will ensure that more lower income beneficiaries have access to this needed subsidy.

Streamlining the LIS application by removing difficult and invasive questions – such as the cash value of life insurance and in-kind support -- and aligning MSP rules with the LIS criteria, further reduces unnecessary barriers to valuable assistance for those who need it most.

Helping to Maintain Physician Access and Keep Medicare Affordable for All Beneficiaries

The CHAMP Act helps ensure that beneficiaries maintain access to physicians. It also protects all Medicare beneficiaries from additional premium hikes associated with physician payment changes by reducing other Part B spending, including excess payments to private Medicare Advantage plans. Part B premiums have more than doubled since 2000, and this legislation strikes a balance between maintaining affordability for beneficiaries and ensuring that they are able to obtain physician services.

Ensuring Medicare Trust Fund Dollars are Spent Wisely

The CHAMP Act seeks to restore the balance between the traditional Medicare and Medicare Advantage program. AARP supports a genuine choice of Medicare coverage options for beneficiaries. But the Medicare Payment Advisory Commission has reported that Medicare Advantage plans are paid, on average, 12 percent more than traditional Medicare. This payment disparity is unfair to all taxpayers, as well as the vast majority of beneficiaries in traditional Medicare who pay higher premiums, who subsidize these excess payments. According to actuaries at the Center for Medicare and Medicaid Services, these excess payments shorten the life of the Medicare Part A Trust Fund by two years.

AARP supports a level playing field between traditional Medicare and Medicare Advantage plans. Excess payments to MA plans should be phased out while protecting beneficiaries from disruptions during the transition period. Well-run managed care plans can continue to use provider networks, care coordination, and evidence-based practices, to control costs while improving quality. The CHAMP Act helps to improve quality in Medicare Advantage by providing new beneficiary protections and requiring all types of plans – including private fee for service plans – to be subject to the same rules.

Strengthening Medicare for the Future

The CHAMP Act helps to strengthen Medicare for both current and future beneficiaries by:

- Expanding Medicare coverage and eliminating cost sharing for evidence-based prevention services to promote more cost-effective efforts to keep people healthy rather than high-cost treatments once people suffer from preventable conditions.
- Bringing parity to Medicare cost sharing requirements for mental health outpatient services.
- Expanding demonstration projects to provide Medicare beneficiaries with a “medical home” in physician offices that can help coordinate their care to improve quality and efficiency while encouraging participation by reducing cost sharing responsibilities.

Providing Health Coverage to More Low-income Children

The CHAMP Act strengthens the State Children’s Health Insurance Program (SCHIP). SCHIP is vitally important to many grandparents raising grandchildren. SCHIP also is a wise use of tax dollars, given the substantial long-term benefits that relatively low-cost children’s coverage can provide. After all, productive working years and healthy aging both require an early start.

The legislation would allow states to cover more than 5 million uninsured low-income children who are currently eligible but not enrolled in the program, as well as make changes to help improve the quality of children’s health care. Those benefiting most are children in families with working parents who do not earn enough to afford health care coverage without assistance, and who represent more than half of the estimated 9 million uninsured children in the country.

Increasing the federal tobacco tax to help offset SCHIP reauthorization is both fiscally responsible and smart health policy because it helps to reduce smoking rates, which yields health benefits of its own.

The Honorable John D. Dingell
July 26, 2007
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Improving Quality and Efficiency

Finally, the CHAMP Act includes several additional provisions that will help to increase the quality and efficiency of our entire health care system. These include provisions to:

- Fund a broadly representative non-profit organization, such as the National Quality Forum, to develop and promote use of consensus-based quality measures and advance the use of electronic health records.
- Establish a Comparative Effectiveness commission to promote objective research comparing various drugs and other treatments for specific conditions to determine which are the most effective. This will help improve quality of care while reducing inappropriate, inefficient, and ineffective care.
- Promote better understanding of racial and ethnic disparities in health care so the issues can be addressed.

In short, this package of health care changes will help both children and older Americans, as well as make positive improvements to our health care system. We appreciate your leadership and look forward to working with you to enact the bill into law this year.

Sincerely,



William D. Novelli
Chief Executive Officer



Michael D. Maves, MD, MBA, Executive Vice President, CEO

July 26, 2007

The Honorable John D. Dingell
Chairman
Committee on Energy and Commerce
2125 Rayburn House Office Building
Washington, DC 20515

Dear Chairman Dingell:

On behalf of the physicians and medical student members of the American Medical Association (AMA), I am writing to convey our strong support for H.R. 3162, the "Children's Health and Medicare Protection Act of 2007" (CHAMP Act). This legislation addresses two of the AMA's highest priorities: providing health insurance coverage for low-income children through the reauthorization of the State Children's Health Insurance Program (SCHIP) and protecting seniors' access to care by preventing drastic cuts in Medicare funding for physician services.

SCHIP has been successful in significantly reducing the number of children without coverage; unfortunately there are still millions of children who are eligible for SCHIP but are not enrolled. The AMA strongly supports increased funding to intensify outreach and education efforts to ensure that all eligible children are enrolled in SCHIP. We also strongly support the provisions that would reduce enrollment and re-enrollment barriers for applicants.

The CHAMP Act replaces scheduled Medicare physician payment cuts of 15 percent over the next two years with two years of positive updates of 0.5 percent. Passing the CHAMP Act now will avoid the annual end-of-the-year scramble to stop the cuts, and will provide Congress with time to consider additional reforms to create a pathway to eliminate the sustainable growth rate (SGR) formula and replace it with a mechanism that accurately reflects the cost of practicing medicine.

The AMA strongly supports increases in tobacco taxes and elimination of overpayments to Medicare Advantage plans to offset the cost of covering low-income children and preserving seniors' access to care by averting the Medicare physician payment cuts.

The Honorable John D. Dingell

July 26, 2007

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The CHAMP Act will be one of the most important votes in the 110th Congress for physicians and their patients. We look forward to continuing our work with you and all members of the House as this process moves forward.

Sincerely,

A handwritten signature in black ink, reading "Mike Maves". The signature is written in a cursive style. To the right of the signature, there is a vertical red line.

Michael D. Maves, MD, MBA

July 31, 2007

The Honorable Nancy Pelosi
Speaker
US House of Representatives
Washington, DC 20015

THE
CATHOLIC HEALTH
ASSOCIATION
OF THE UNITED STATES

Dear Speaker Pelosi,

The Catholic Health Association of the United States (CHA), the national leadership organization of more than 2,000 Catholic health care sponsors, systems, hospitals facilities, and related organizations, applauds your leadership and is pleased to offer our support for the Children's Health and Medicare Protection Act (CHAMP Act).



We believe the most important pro-life thing the Congress can do right now is to insure that the State Children's Health Insurance Program (SCHIP) is reauthorized. Children's lives and the lives of unborn babies depend on a strong SCHIP reauthorization. The CHAMP Act would provide states with essential tools and resources to identify and enroll 5 million uninsured children who currently qualify for health coverage under SCHIP and Medicaid, but are not enrolled.

The CHAMP Act that is before the House of Representatives also includes important Medicare enhancements for seniors to help ensure they continue to have access to needed health care. We support these efforts to build a strong Medicare program that will continue to provide access to care well into the future.

We strongly urge Congress to move quickly to approve the CHAMP Act.

Sincerely,

A handwritten signature in black ink, reading 'Sr. Carol Keehan'.

Sr. Carol Keehan, DC
President and CEO
Catholic Health Association of the US

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The Honorable Fortney “Pete” Stark
Chairman, House Committee on Ways and Means
Subcommittee on Health
239 Cannon House Office Building
United States House of Representatives
Washington, DC 20515

Dear Chairman Stark:

The National Rural Health Association (NRHA) strongly applauds your efforts to strengthen the State Children’s Health Insurance Program (SCHIP), make health care more affordable and accessible for low-income seniors, and protect the fragile rural health care safety net. H.R. 3162, *The Children’s Health and Medicare Protection Act of 2007 (CHAMP Act)* is critical to rural children and seniors across the nation.

As you know, children in rural areas depend on Medicaid or SCHIP for health insurance more than children in urban areas. Rural populations tend to be poorer than their urban counterparts and illnesses associated with poverty, including infant mortality, are more pronounced in rural areas. Due to distances, difficulty in SCHIP enrollment, and the drop in private sector insurance coverage in rural America, many eligible rural children are not enrolled in SCHIP. According to a 2007 study, America’s rural children have become *the neediest* of our uninsured population. The CHAMP Act will dramatically improve the plight of America’s rural children.

Additionally, the CHAMP Act protects rural seniors’ access to care. Compared to their urban counterparts, rural populations tend to be older and poorer with higher rates of chronic disease. The health care safety net is critical to providing care for this vulnerable population. Several payment provisions, vital to the sustainability of rural providers, recently expired or soon will expire, thereby critically jeopardizing the rural health care safety net and seniors’ access to care. The NRHA strongly supports the extensions of critical rural Medicare access protection provisions that are contained in the CHAMP Act.

Mr. Chairman, the NRHA also appreciates your efforts to correct serious problems within the Medicare Advantage (MA) program. We applaud efforts to require proper disclosure of plan benefits to seniors as well as oversight for questionable marketing practices. Additionally, many of these plans fail to comply with the reimbursement requirements for rural facilities as established in the Balanced Budget Act of 1997. MA plans that do not fairly reimburse rural providers have the potential of devastating the rural health care safety net. We look forward to

www.NRHArural.org

working with Congress to address this inequity and other payment inequities within the Medicare program.

Mr. Chairman, you are truly a champion for improving the health of all Americans. Rural children and rural seniors across the nation will benefit greatly from the CHAMP Act. The NRHA strongly supports your efforts looks forward to working with you to make this bill even stronger for the benefit of rural America.

Sincerely,

A handwritten signature in cursive script, appearing to read "George A. Miller".

George Miller
President, NRHA



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(202) 638-1100 Phone
www.aha.org

July 26, 2007

The Honorable John D. Dingell
Chairman, Committee on Energy and Commerce
United States House of Representatives
2328 Rayburn House Office Building
Washington, DC 20515

Dear Chairman Dingell:

On behalf of the American Hospital Association's (AHA) nearly 5,000 member hospitals, health systems and other health care organizations, and our 37,000 individual members, I write to express my appreciation for your hard work on the Children's Health and Medicare Protection (CHAMP) Act of 2007 (H.R. 3162). This legislation is an important step forward in providing for the continued stability of the State Children's Health Insurance Program (SCHIP), and makes many improvements for both Medicare and Medicaid beneficiaries. We also are pleased with a number of provisions related to hospital care.

The CHAMP Act protects access to health care by re-authorizing the program for the more than six million children currently covered by SCHIP. The restructuring of the state allotments, along with increased funding amounts, will provide states with the ability to cover more children while preventing the shortfalls that have recently plagued the program. We also appreciate your efforts to relieve some of the administrative burdens being imposed on states by the citizenship documentation requirements for Medicaid eligibility that were instituted as part of the Deficit Reduction Act of 2005.

The Medicare provisions of H.R. 3162 will help strengthen the program for both beneficiaries and providers. We applaud your efforts to stop the scheduled reduction in physician payments; place limits on certain physician referrals to hospitals; provide regulatory relief for both inpatient rehabilitation facilities and long term care hospitals; and propose extensions and protections to preserve access to health services for Medicare beneficiaries who live in rural areas. We also believe that your repeal of the limits placed on the amount of general revenues used to finance Medicare ensures the future vitality of the program.



July 26, 2007

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We support your proposal to increase the federal tobacco tax to fund the re-authorization of SCHIP. However, with CMS's imminent release of the final rule for the FY 2008 inpatient prospective payment system that seeks to penalize hospitals prospectively by as much as \$24 billion in FY 2008 and FY 2009, we are very concerned about provisions in the CHAMP Act to reduce the inflation updates for inpatient and outpatient services by 0.25 percentage point. These reductions, on top of such dramatic cuts proposed by the administration, would be devastating to the nation's hospitals.

Thank you for your tireless efforts to re-authorize and improve the SCHIP program and to strengthen the Medicare and Medicaid programs. We look forward to working with you to assure passage of SCHIP legislation this year.

Sincerely,

A handwritten signature in black ink, appearing to read "Rick Pollack". The signature is fluid and cursive, with a large initial "R" and "P".

Rick Pollack
Executive Vice President



Charles N. Kahn III
President

July 25, 2007

Dear Representative:

The Federation of American Hospitals (FAH), representing America's investor-owned hospitals and health systems, strongly supports the "Children's Health and Medicare Protection (CHAMP) Act of 2007" (H.R. 3162). We urge both the House Energy and Commerce Committee and the House Ways and Means Committee to report the bill as introduced, and for the full House of Representatives to pass this important legislation before the August district work period.

The State Children's Health Insurance Program (SCHIP) has a proven track record of providing coverage for millions of our nation's low-income, previously uninsured children. It is imperative to reauthorize this program before it expires at the end of September. H.R. 3162 will strengthen this important program and increase the number of kids who receive this essential health coverage.

The Federation also is pleased that the CHAMP Act includes crucial health care policies that would result in a permanent ban on physician self-referral to specialty hospitals; a halt at 60% of the transition to the 75% rule for inpatient rehabilitation facilities; an increase in the rural Medicare DSH payment; regulatory relief for long term care hospitals; and language that would ensure the important contribution of the National Quality Forum to the quality of health care in America. However, we must note that this bill also calls for a 0.25 percent reduction in the FY08 market basket for hospital inpatient services. We hope the Congress will reconsider this provision, particularly since the Medicare Payment Advisory Commission recommends that hospitals receive a full market basket update for FY08.

The members of the Federation greatly appreciate the ongoing commitment not only to SCHIP but also to strengthening the Medicare program for seniors for years to come. We strongly encourage you to support H.R. 3162 in Committee and when it comes before the full House of Representatives.

Sincerely,



July 31, 2007

The Honorable John Dingell
Chairman,
Committee on Energy and Commerce
United States House of Representatives
Washington, DC 20515

The Honorable Charles Rangel
Chairman,
Committee on Ways and Means
United States House of Representatives
Washington, DC 20510

Dear Chairmen Dingell and Rangel:

I am writing on behalf of the American Nurses Association (ANA) to express our support for the Children's Health and Medicare Protection (CHAMP) Act of 2007. ANA endorses your efforts to provide essential health care services to America's children, and to plug glaring holes in the Medicare benefit. ANA is the only full-service professional organization representing the interests of the nation's 2.9 million registered nurses through its 54 constituent member nurses associations.

From the tragedy of cancer found too late, to the needless suffering caused by uncontrolled asthma, America's nurses are daily witness to the tragic consequences of delayed access to health care services. The CHAMP Act makes great strides in addressing the health care needs of our most vulnerable citizens by providing health care coverage to an additional 5 million uninsured children, and by improving access to essential preventive and therapeutic services for Medicare beneficiaries.

Your commitment to investing \$50 billion in the State Children's Health Insurance Program is laudable. Despite statements to the contrary, ANA recognizes that the CHAMP Act focuses on reaching children who are already eligible for coverage under Medicaid. Many other provisions of this bill, including modifications of citizenship and documentation requirements, clarification that EPSTD is a required benefit under Medicaid, and the inclusion of pediatric quality measurement programs will greatly benefit America's children.

ANA also applauds a provision in the CHAMP Act that removes a long-standing disparity in Medicare reimbursement for nurse midwifery services. In addition, ANA supports other important improvements that would add new preventive health benefits without cost sharing, and much-needed parity in co-payments for mental health services. The CHAMP Act would also expand and improve access to needed medications for low-income elderly, and would take steps toward ensuring that beneficiaries have access to the provider of their choice by reversing a scheduled cut in advanced practice registered nurse and physician reimbursement. All of these provisions are necessary to meet our nation's commitment to Medicare beneficiaries.

ANA looks forward to working with you on the passage and enactment of the CHAMP Act.

Sincerely,

Rose Gonzalez, MPS, RN
Director, Government Affairs

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN™



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Carol D. Berkowitz, MD, FAAP

July 25, 2007

The Honorable John Dingell
Chairman
Energy and Commerce Committee
2125 Rayburn House Office Building
Washington, DC 20510

The Honorable Charles Rangel
Chairman
Ways and Means Committee
1102 Longworth House Office Building
Washington, DC 20510

Dear Chairmen Dingell and Rangel:

On behalf of the 60,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists of the American Academy of Pediatrics, I write today to thank you for the hard work that you have undertaken to draft a substantive Children's Health Insurance Program (CHIP) reauthorization. Pediatricians stand with you on this important legislation and will work tirelessly towards its passage.

Your proposal achieves many of the goals of the Academy. The commitment of \$50 billion to reaching eligible children is laudable. Far from an expansion of the programs, your measure focuses on reaching children who are, on paper, eligible for coverage under Medicaid or CHIP. Without funding, however, a child is not really eligible for coverage.

The Academy also greatly appreciates your attention to a very real access issue through the creation of the Children's Access and Payment Equity Commission or "CAPE." All too often, children receive coverage without real access to care due to dismal payment rates under Medicaid and CHIP. We look forward to raising the profile of this issue through the work of this Commission.

Numerous other components of the bill also will be a great help to children, including your attempts to address the citizenship and identification documentation issue, clarifying that EPSDT is still a requirement under benchmark plans approved under Deficit Reduction Act rules, and the inclusion of a substantive new effort to strengthen pediatric quality measurement.

Finally, we appreciate your efforts to focus on children in this bill. As CHIP reauthorization legislation moves through Congress, we believe it is inappropriate to attach the Bush administration's health care tax credit proposal to it. The CHIP reauthorization is not the place to restructure the entire health care system with untested tax policy that may negatively impact children's access to care.

Sincerely,

Jay E. Berkelhamer, MD, FAAP
President

July 25, 2007

The Honorable John Dingell
U.S. House of Representatives
Washington, DC 20515

The Honorable Charles Rangel
U.S. House of Representatives
Washington, DC 20515

Dear Members of Congress:

On behalf of Families USA, the national voice of health care consumers, we applaud both committees of jurisdiction on the introduction of the CHAMP Act (Children's Health and Medicare Protection Act). This legislation builds upon the success of the SCHIP program and will ensure that more children get access to quality, affordable health insurance. It also provides significant help for low-income seniors and people with disabilities who rely on Medicare for their health coverage. Together, these pieces are an important step towards ensuring high quality affordable health care for the youngest generation of Americans.

Reauthorizing the State Children's Health Insurance Program is one of the most important tasks before Congress this year. Since SCHIP's creation in 1997, the number of uninsured children has been reduced by a third. This year, six million children have healthcare because of SCHIP. The CHAMP Act would increase SCHIP's funding level by committing an additional \$50 billion over five years to reauthorize and improve SCHIP. Fully funding the program is essential for states to reach more of the six million uninsured children eligible for Medicaid and SCHIP.

The CHAMP Act couples a significant funding increase with important tools and incentives to encourage states to reach out and enroll the millions of eligible but unenrolled children. The bill would improve access to dental care and mental health care for children and gives states new ways to help get children enrolled, and help keep them enrolled as long as they are eligible. Moreover, the bill gives states the option to extend coverage to legal immigrant children and pregnant women who are now unfairly prohibited from participating. These changes strengthen the safety net SCHIP and Medicaid provide for children.

The CHAMP Act simplifies and expands existing programs that help low-income Medicare beneficiaries pay for their Medicare premiums and prescription drugs. It raises the asset limit for these programs, which will allow beneficiaries to protect their modest savings and still receive help with their health care costs. Improvements to outreach should also significantly increase enrollment in these programs, thus delivering vital assistance to those who need it the most.

Your proposal shows a strong commitment to ensuring high quality, affordable health care for our nation's most vulnerable populations: children, seniors and people with disabilities. We thank you for your strong commitment to children's health coverage and look forward to working with you to pass this important piece of legislation.

Sincerely,



Ronald F. Pollack
Executive Director



July 27, 2007

The Honorable John Dingell
Chair, Committee on Energy & Commerce
United States House of Representatives
Washington, D.C. 20515

The Honorable Charles Rangel
Chair, Committee on Ways & Means
United States House of Representatives
Washington, D.C. 20515

The Honorable Frank Pallone, Jr.
Chair, Subcommittee on Health
Committee on Energy & Commerce
United States House of Representatives
Washington, D.C. 20515

The Honorable Pete Stark
Chair, Subcommittee on Health
Committee on Ways & Means
United States House of Representatives
Washington, D.C. 20515

Dear Chairmen Dingell, Rangel, Pallone, and Stark:

Thank you for your leadership in introducing the Children's Health and Medicare Protection Act of 2007 (H.R. 3162). Passage of this legislation assures that the very successful Children's Health Insurance program will continue after September 30, 2007. It gives states the resources they need to provide health care coverage to millions of uninsured children, with the child-centered benefits they need. CHAMP also allows new flexibility for coverage of children and pregnant women, allowing states to provide coverage to legal immigrant children and legal immigrant pregnant women.

In addition to these improvements, this bill is also a major step forward in improving the quality of health care. We strongly support your efforts to establish the National Quality Forum (NQF) as the national coordinating and standard-setting body for health care quality measurement and reporting, and are pleased that you have set aside funding to carry out the important responsibilities laid out in the bill, including:

- Establishing and managing an integrated national strategy and process for setting priorities and goals in establishing health care performance measures;
- Coordinating the development and specifications of such measures;
- Establishing standards for the development and testing of such measures; and
- Advancing the use of electronic health records for automating the collection, aggregation, and transmission of measurement information.

We believe that funding support for NQF represents a significant step toward ensuring better quality care for all Americans.

We also are pleased that the bill establishes a pediatric health quality measurement program, requiring:

- Development of pediatric quality measures on children's health care and health outcomes;
- Identification of disparities in child health and the provision of health care;
- Measures to assess overall program performance; and
- Technical assistance to states to facilitate these efforts.

As an organization that represents the nation's women and families, the National Partnership has advocated for over a decade for improvement in the quality of care available to families, especially lower income and minority families. We believe having reliable information about health care quality is key to this effort. Without such information, patients simply cannot make the best choices for themselves and their families.

Thank you again for your leadership on this important legislation and your commitment to improving the quality of health care. We look forward to working with you to help move these efforts forward.

Sincerely,

A handwritten signature in black ink, appearing to read "D. Ness", with a long horizontal flourish extending to the right.

Debra L. Ness
President



July 27, 2007

The Honorable John Dingell
Chairman, Energy and Commerce Committee
2125 Rayburn House Office Building
Washington, D.C. 20510

The Honorable Charles Rangel
Chairman, Ways and Means Committee
1102 Longworth House Office Building
Washington, DC 20510

Re: Children's Health and Medicare Protection (CHAMP) Act

Dear Chairmen Dingell and Rangel:

The Children's Defense Fund can think of few, if any, things more critical and achievable this year than providing our children a healthy start in life and successful transition to adulthood. We are grateful to you for keeping Congress' promise to spend \$50 billion in new funds to improve and expand child health coverage over the next five years. Your SCHIP reauthorization package is an important step in the right direction.

Good governance requires our political leaders to make smart and moral choices. The American people do not think children should have to wait until they are 65 years old to have health coverage, and I agree. While \$50 billion is not enough to cover all children, it is a good down payment, and I urge you to do everything in your power to ensure that every penny of those funds is used to improve and expand child health coverage. This means supporting on the House floor an increase in tobacco taxes and elimination of Medicare Advantage overpayments, and standing firm through conference to ensure that as many children as possible are covered this year and significant program improvements are made.

While the SCHIP package passed by the Energy and Commerce Committee would allow states to make important program improvements, including expanding coverage to pregnant women and instituting express lane eligibility, I remain concerned about leaving the adoption of these critical improvements up to each state. I know from my own experience that when given an option to do the right thing in the face of great need, some states will take action, but others will not. It is unconscionable to leave a child's life to such chance when we *know* what they need to survive and thrive.

The long-term cost to society of not investing in its children and in health prevention early in life is enormous. Your SCHIP reauthorization package recognizes this and takes steps toward the critical goal of ensuring that *all* children have health coverage. I look forward to working with you during this process and beyond to ensure that no child is left behind.

Sincerely yours,

A handwritten signature in black ink that reads "Marian Wright Edelman". The signature is written in a cursive, flowing style. To the right of the signature, there is a vertical red line.

Marian Wright Edelman



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July 26, 2007

The Honorable John Dingell
Chairman, Energy and Commerce Committee
U.S. House of Representatives
2125 Rayburn House Office Building
Washington, DC 20515

The Honorable Charles Rangel
Chairman, Ways and Means Committee
U.S. House of Representatives
1102 Longworth House Office Building
Washington, DC 20515

Dear Chairmen Dingell and Rangel:

On behalf of the Child Welfare League of America (CWLA) and our public and private member agencies across the country who work directly with abused, neglected, and otherwise troubled children, youth, and their families, I write to express our gratitude for your committees' work and introduction of the Children's Health and Medicare Protection (CHAMP) Act, H.R. 3162.

For the past ten years, the State Children's Health Insurance Program (CHIP) has served as Medicaid's essential companion in providing children involved with the child welfare system the accessible, affordable, and quality healthcare they need and deserve. Having helped reduce the number of children living without health insurance by more than one third, there is no doubt that CHIP has brightened children's futures—especially those in low-income families who do not have access to or cannot afford employer-sponsored coverage.

By helping to introduce a comprehensive reauthorization bill, you have shown your commitment to keeping CHIP's momentum and progress moving forward. Providing \$50 billion over five years in additional funding towards the program is an essential and laudable element of the CHAMP Act, as it would provide coverage to millions of children who are currently eligible but not enrolled. The population of children that CWLA serves and children everywhere would also benefit greatly from bill's guaranteed access to dental coverage; access to mental health services as a result of parity; state options to engage in sensible and fair practices such as covering older adolescents up to age 24, pregnant women, and legal immigrant children and pregnant women; performance bonuses to states who successfully reach out and enroll eligible low-income children; and establishment of the independent Children's Access, Payment and Equality (CAPE) Commission that would monitor and help ensure children's access to care and services under CHIP and Medicaid.

The CHAMP Act certainly makes children and their health a national priority and we look forward to working with you to pass this important piece of legislation.

Sincerely,

A handwritten signature in black ink that reads "Linda Spears". The signature is written in a cursive, flowing style.

Linda Spears
Acting Vice President for Operations and
Vice President, Corporate Communications and Development

National Committee to
Preserve Social Security
and Medicare



Barbara B. Kennelly
President &
Chief Executive Officer

July 25, 2007

The United States House of Representatives
Washington, DC 20515

Dear Member of Congress:

On behalf of the 4 million members and supporters of the National Committee to Preserve Social Security and Medicare, I am writing to express our strong support for H.R. 3162, the *Children's Health and Medicare Protection Act of 2007 (CHAMP Act)*. We applaud Energy and Commerce Committee Chairman Dingell, Ways and Means Committee Chairman Rangel, and Subcommittee Chairmen Stark and Pallone for proposing necessary and significant investments in the Medicare program that will positively impact millions of beneficiaries.

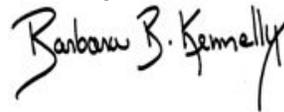
The CHAMP Act includes substantial beneficiary improvements and protections, strengthens the integrity of the Medicare program, and preserves the ability of traditional Medicare to provide health coverage for future generations of retirees. We applaud this legislation for halting the march toward Medicare privatization that began with the passage of the Medicare Modernization Act in 2003.

While insurance companies may have received a huge financial advantage from the Medicare Advantage program, beneficiaries are facing increased costs and inferior coverage. The very name "Medicare Advantage" has generated misunderstanding by beneficiaries who were under the impression they were remaining in traditional Medicare and merely enrolling in a supplemental Medigap policy. In fact, these beneficiaries are giving up their traditional Medicare coverage when they enroll in private plans. H.R. 3162 restores private Medicare plans to their original place – as private alternatives competing on a level playing field to provide choices to beneficiaries and more flexibility to the Medicare program. Private plans truly providing "value-added" to beneficiaries have nothing to fear from this legislation. The bill's restoration of the original "Medicare Part C" name for these private components of Medicare completes the process.

Contrary to the rhetoric heard from opponents, this bill does not pit seniors against kids. Rather it shows us that achieving the twin legislative priorities of improving health care for uninsured children and for Medicare beneficiaries can positively complement each other. We believe the thoughtful provisions contained in the CHAMP Act will revitalize traditional Medicare and reverse much of the damage caused by the Administration's push toward privatization. For your review, I have attached brief highlights of the legislation outlining a number of improvements the bill makes to the Medicare program.

Our organization is fully supportive of H.R. 3162 and I urge you to support this bill in Committee and when it reaches the House floor next week. Millions of beneficiaries are counting on you to enhance and safeguard their Medicare benefits.

Cordially,

A handwritten signature in black ink that reads "Barbara B. Kennelly". The signature is written in a cursive style with a large, stylized initial "B".

Barbara B. Kennelly
President and CEO