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## Access to Health Care News Monthly Update – 3.2.07:

(Note: pertinent Access to Health Care materials have been highlighted in **RED** in longer sections for quick reading)

### President Bush Pledges to Cover More of the Nation's Uninsured

Cover the Uninsured web site/Source(s): Riechmann, [Associated Press](#), 2/18/07

President George Bush, in his weekly radio address, promised to seek a bipartisan solution that would use the current private system to make insurance more affordable for the 47 million uninsured Americans, reports the Associated Press. "From my conversations with Democrats and Republicans, it is clear both parties recognize that strengthening health care for all Americans is one of our most important responsibilities," Bush said. "I am confident that if we put politics aside, we can find practical ways to improve our private health care system." Contending that those who do not get employer-based health insurance are unfairly penalized, Bush has proposed "a major shift in tax policy" that would treat health insurance costs as deductible taxable income. His proposal would provide individuals with a \$7,500 tax deduction and families a \$15,000 tax deduction for health insurance costs, whether they buy their own coverage or obtain it at work. **He also wants to redirect federal dollars currently going to hospitals to states, to be used to boost coverage for the uninsured.** Democrats have criticized the proposal, according to the article, because they say it would lead employers to cut coverage and would not reduce the number of uninsured very much.

### State senators want Medicaid recipients to stay healthy to get coverage

2.20.07 - FREE PRESS

Flanked by bushels of apples instead of high-calorie paczkis, Senate Republicans say Medicaid recipients should be required to lead healthier lifestyles as a condition for Medicaid benefits. It's one way to get state health care costs under control, and to promote a generally healthier population, said **Senate Majority Leader Mike Bishop, R-Rochester, whose caucus will introduce legislation that also would expand health care coverage to low-income families.**

Medicaid continues to consume about one-fourth of the state's general fund budget. Health advocates say nudging Medicaid recipients to stop smoking or get high cholesterol and blood pressure levels under control would save the state huge costs by avoiding more expensive medical treatments for heart-related diseases.

**Sen. Tom George, R-Portage, said the bills would dovetail with Gov. Jennifer Granholm's proposal to expand state-paid health care to an additional 500,000 low-income people – a plan that must yet be approved by the federal government, which would pay a large portion of the cost.**

**The Senate plan would allow those who don't qualify for Granholm's subsidized health coverage to buy their own health insurance at a reduced rate.**

George said the healthy lifestyle requirements would be determined by the state department of community health. He said it could include requiring Medicaid recipients to stop smoking, undergo health screenings, or get high cholesterol and high blood pressure under control through physician care.

**Broadcast reports from NPR** (access clips at [www.npr.org](http://www.npr.org) , search “health care”)

### **'Marketplace' Report: Government and Health Care**

2.21.07 · The U.S. federal government reported Wednesday that **medical-care costs rose last month by the fastest rate in 15 years, and those costs are projected to keep rising**. At the same time, the government is expected to pick up a bigger share of the tab. (Information from Center for Medicaid and Medicare, including projected increases in rate of rise and pros/cons of single payer vs. multi-payer system as it relates to universal health care.) *Marketplace's* Amy Scott talks with Alex Chadwick.

### **Health Care on Credit**

2.13.07 · Faced with health costs that may not be covered by insurance, many people are choosing to pay for health care with credit cards. One new type of credit card is especially designed for medical expenses. (Information includes fact that many of **these credit cards specifically issued for medical care use often charge interest rates of 20 to 30 percent**; typically they are easier to get than regular credit cards for those who can't qualify for a regular card. Interviewee recommends patients work out a payment plan with medical office rather than using.)

### **President's Budget Cuts Children's Health Coverage** From Families USA – 2.5.07

*“America's children must also have a healthy start in life. In a new term, we will lead an aggressive effort to enroll millions of poor children who are eligible but not signed up for the government's health insurance programs. We will not allow a lack of attention, or information, to stand between these children and the health care they need.” (President George W. Bush, Republican National Convention, September 2, 2004)*

*The following is a statement of Ron Pollack, Executive Director of Families USA, about the President's budget proposal that would cut children's health coverage:*

“The President's budget proposal would cut health coverage for children in low- and moderate-income families. Instead of expanding health coverage to America's 9 million uninsured children, the President proposes to reduce coverage in two ways.

“First, the President's proposed funding for the State Children's Health Insurance Program (SCHIP) is inadequate to retain enrollment for the children who currently participate in the program. Not only will states be unable to enroll more children, but they will be forced to terminate coverage for hundreds of thousands of children, thereby consigning them to the ranks of the uninsured.

“Second, the President's proposal is designed to reduce SCHIP eligibility in 18 states (NOTE: does not include Michigan) where eligibility exceeds 200 percent of the federal poverty level (\$34,340 in annual income for a family of three). It would jeopardize health coverage for many additional children.

“It is short-sighted to limit assistance to children in families with less than \$35,000 in income, especially since the cost of family insurance premiums now averages \$12,000, more than one-third of their incomes.

“The President's proposal contravenes his explicit promise at the 2004 Republican convention. It also stymies efforts by Republican and Democratic governors to expand health coverage to the 9 million children who are uninsured today....

“At the same time that the President is cutting children's health coverage, he also plans to make large reductions in Medicaid. As a result, the President's proposal will put health coverage increasingly out of reach for millions of America's families.

## Successful Lobbying Could Play Huge Role in SCHIP Reauthorization

From Cover the Uninsured e-mail – Source: Young, [The Hill](#), 2/8/07

"Without congressional action, the State Children's Health Insurance Program (SCHIP) will expire at the end of the year," and Democrats, who have pledged that expanding the program is their No. 1 health care priority, have run into Republican opposition in both Congress and the White House, reports *The Hill*. Lobbying members of both parties may be "crucial" to reauthorizing SCHIP, which "does not attract intense lobbying as do Medicare and Medicaid," and has divided support "along party lines." SCHIP was created by Congress in 1997 to fill the gap for families that make too much for Medicaid but not enough to afford private insurance. In 2005, SCHIP covered about 6 million children, while Medicaid covered about 28 million children. Democrats in favor of expanding SCHIP estimate that the overhauled program will cost between \$12 billion and \$50 billion over five years, "depending on the bill's scale." Meanwhile, the White House, which introduced its budget last week, proposed allocating \$4.8 billion for SCHIP.

According to the article, "those with the greatest interest in the outcome of the SCHIP debate are relatively small, not-for-profit, local and regional health-insurance businesses," since they administer SCHIP benefits to enrollees on behalf of state governments. While this lobby has considerably less clout in Washington than larger, private-sector companies that make billions from Medicare and Medicaid, groups like America's Health Insurance Plans (AHIP), the National Association of Community Health Centers and Families USA, which have a great deal of influence, will be able to help. Cindy Mann, a professor at Georgetown University's Health Policy Institute, said that the power of these consumer groups should not be underestimated. Additionally, members of the National Governors Association will be in Washington later this month and "are expected to use their appearance in the capital to press for both the short-term SCHIP funding and the reauthorization of the program," according to the article.

## Michigan should get with times and ban smoking in public places

2.27.07 – Free Press – [Editorial Opinion](#)

### Want to reduce health care costs in Michigan? Discourage smoking.

Where to start? With a statewide ban on smoking in restaurants and other public places.

Right now, the state won't even let local governments do this. The public health code makes it a state issue. And, while half the American population is now covered by either state or local restrictions on smoking in public places -- even the French now have a law -- the Michigan Legislature has never even held a hearing on the issue.

Despite nearly a decade of setbacks in both houses of the Legislature, state Sen. Ray Basham, D-Taylor, has not been deterred. Once again last month, he introduced a smoke-free workplace bill that specifically prohibits smoking in public eateries. The Legislature ought to act, in the interest of public health -- and health care costs.

**Update on SCHIP reauthorization** – Families USA web site: [www.familiesusa.org](http://www.familiesusa.org)

Visit the Medicaid & SCHIP page for the latest information on the fight to save SCHIP and Medicaid, including updates on citizenship documentation requirement and other Deficit Reduction Act provisions that pose a serious threat to the Medicaid program. [Action expected in early March in Congressional budget committees.](#)

From: Nancy Mathews  
Program Coordinator  
UPHAC

906.233.0210 x 103  
[nmathews@uphealthaccess.org](mailto:nmathews@uphealthaccess.org)