## Opening Statement Senate Finance Subcommittee Hearing The Children's Health Insurance Program: Protecting America's Children and Families Senator John D. Rockefeller IV September 16, 2014

I have proudly served on the Finance committee for almost every one of my thirty years in the Senate and I have chaired or been ranking member of this subcommittee for twenty of those years.

This will be the last Health Subcommittee hearing I chair, and I could not think of a more important subject to discuss today than children's health care.

2014 marks the 17th anniversary of one of the most successful programs for improving children's health in the United States: the Children's Health Insurance Program—more commonly referred to as "CHIP."

Eight million American children and families look to CHIP for comprehensive and affordable health coverage, including 40,000 children in my home state of West Virginia. CHIP's success has played an essential role in cutting the number of uninsured children in half over the past 15 years.

This kind of progress is something we should celebrate. But, we must continue to invest in CHIP so that we can celebrate many more of the program's milestones.

In 1997, Senators Kennedy and Hatch and I spent countless hours discussing how we could increase health care access for children in a way that members of both political parties could support. CHIP was the result of those conversations.

Creating this program has been one of the most impactful things I have done in my career in public service. Safeguarding CHIP so that it can live on for years to come is my highest priority in the time I have left in office.

Without Congressional action, CHIP will run out of funding next fall, placing at risk the well-being of hundreds of thousands of children and pregnant women. I hope that the members of this committee will not let that happen.

CHIP is a game-changer for millions of children. No other form of coverage provides the same level of specific care and comprehensive pediatric networks at an affordable cost for working families.

The challenges many children face today are still too similar to the ones I saw firsthand in Emmons West

Virginia 50 years ago. It was there in southern West Virginia where I witnessed the struggles that families go through when they can't afford health care for their children.

When I first arrived as a VISTA volunteer in Emmons, there were children in the town and across the state who had never seen a doctor because their families simply didn't have the money to cover the costs of a physician visit or dental care.

I thought to myself then, as I still do now, that no parent should have to carry the stress of knowing you cannot afford health care for your child if something goes wrong.

I'm proud to say that ever since CHIP's inception, the program has consistently enjoyed strong bipartisan support. One member of the Finance Committee—Senator Hatch—has remained a steadfast champion for CHIP from the beginning.

We have a shared goal of making certain that every child in America gets a fair shot at a healthy start in life. While we have not always agreed on every provision in the CHIP program, I have always appreciated Senator Hatch's strong commitment to CHIP. For as long as I can recall, Congress has been able to put aside its differences and come together when it's called upon to do what's right for America's children. And that time has come again.

CHIP is currently at a crossroads. Funding for CHIP must be reauthorized soon; otherwise, the program as we know it will come to an end. As many as two million children could lose their insurance coverage.

This would threaten their health and well-being, not to mention the significant gains we've made over the past 17 years to reduce the number of uninsured children and youth in this country. We simply cannot afford to take this major step backwards and jeopardize our future generations by allowing CHIP to expire.

A recent study by Wakely Consulting Group demonstrated that moving children into other forms of private coverage could cause a ten-fold increase of out-of-pocket spending for CHIP families.

It is not right to shift added financial burden onto working families when a cost-effective solution for maintaining the coverage they already have for their children exists. Although funding for CHIP expires in 2015, the program is authorized through 2019. Ending the program prior to 2019 could therefore lead to significant disruption for state governments, private health plans, hospitals, and numerous other stakeholders in addition to the families whose children are enrolled in the program.

States have been budgeting and planning under the assumption that Congress will extend funding for another four years.

They simply are not prepared to rapidly develop and implement plans to transition millions of children into other forms of coverage. In short, state legislatures and budget offices are relying on us to act now.

Colleagues, let's do our job today. Let's show the American people that we are committed to the health and well-being of our youngest generation and extend the Children's Health Insurance Program.