

Testimony of:
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Good afternoon, Senator Baucus and distinguished members of the United States Senate Committee on Finance. My name is Judy Stewart, the Director of Strategic Partnerships with the Yellowstone City-County Health Department. I appreciate the opportunity to appear before you today to discuss the issue of the uninsured in Montana and the importance of the Children's Health Insurance Program to Montana's children.

As the Director of Strategic Partnerships I have the opportunity to collaborate with multiple stakeholders in our community to create and implement viable solutions to problems that are too difficult if not impossible to solve as individual organizations. The issue of the uninsured is one such issue. With the rapidly growing number of uninsured people in our country, this can no longer be considered an individual problem. It's a community, state and national problem that has and will continue to require a collaborative, creative and cooperative approach in solving.

Through my work at the Yellowstone City-County Health Department, I have encountered parents who knew their children were doing poorly in school because they couldn't see the board but had no money to pay for an eye exam or glasses. I have encountered parents who knew their kids were very ill but couldn't afford the cost to take them in to see a Doctor. I have encountered parents who knew their kids were experiencing severe dental pain on a daily basis, yet wouldn't take them to a dentist because they didn't have the money upfront. As a parent, I can only imagine how difficult it must be to limit access to basic health care services for your child, because of an inability to pay.

There is a direct cause and effect between not having health insurance and poorer health outcomes and it has been proven that *the uninsured live sicker and die quicker*. Without insurance, people often avoid accessing preventive healthcare. Routine illnesses, left untreated may progress to more serious and potentially chronic conditions. An example of this recently made national headlines when an 11 year old boy died of an untreated dental abscess. This didn't happen in a third world country. It happened in the United States of America. I think that is unacceptable.

10 years ago, Congress created the State Children's Health Insurance Program. This brought health and hope to thousands of uninsured children whose parents incomes

exceeded the financial guidelines for Medicaid. Today, our country's leaders are considering the merits of reauthorizing this valuable program. On behalf of the nearly 13,300 Montana children who receive the benefits from CHIP, I thank Senator Baucus for making CHIP reauthorization one of his top priorities.

Why is reauthorization so critical for our nation and specifically for Montanans? As compared to other states, Montana has the 14th highest uninsured rate in the nation with nearly 160,000 uninsured people. Montana's per capita income ranks 48th in the nation- with only West Virginia, Arkansas, and Mississippi having lower incomes. 14.2% of Montana's population falls below the Federal Poverty level- and 19.2% of our children falls below the FPL (compared to 12.5% nationally). Without CHIP, these children will have very limited options for preventive care, dental services, and assistance with mental health costs, prescriptions and vision care.

On March 1, 2007 there were 13,291 Montana children were enrolled in CHIP. That's a 9% increase in the number of children enrolled in CHIP since this time last year. Even with this increase there remains an estimated 35,000 uninsured Montanan children who may meet the eligibility criteria for CHIP and there is currently no waiting list for those who qualify.

There are 3 priority areas that must be addressed in order to maximize utilization of CHIP.

The first priority is education. Communities need to take a leading role in educating about the availability and benefits of CHIP while dispelling the misconceptions about CHIP eligibility. For example, one common misconception is that being a working parent automatically disqualifies your child from being CHIP eligible. Providing parents with correct information is the first step in insuring more children.

The second priority is that communities must work to decrease barriers to families applying for CHIP. Over the past 4 years, Billings Clinic, St. Vincent Healthcare and Yellowstone City-County Health Department have worked together to highlight the issues of the uninsured during the nationally recognized "Cover The Uninsured Week". Recognizing CHIP as one of our most valuable assets in combating the growing number of uninsured, it has been a top priority for this partnership to increase CHIP enrollment for the past 2 years. We identified that the stigma attached to being uninsured continues to be a significant barrier for families. Even now, when 1 in 5 Montana's are uninsured, people are embarrassed by the fact that they don't have health insurance. In response to this, Billings has hosted 2 CHIP Champion luncheons where people from a wide variety of organizations received training to assist families in completing the CHIP application. Our hope is that in our community, parents will experience "no wrong door" when

accessing information on CHIP and/or assistance with the application. People won't be "referred" on- they will be assisted by the first person they talk to about CHIP, someone they already have a trusting relationship with.

We've also promoted CHIP enrollment fairs at local schools. Our first was at Lockwood school in early March and a second is planned for the Laurel school district in April. The intent is to offer the information and assistance in an environment that's safe and familiar to the family. These activities, combined with the traditional access to CHIP enrollment, have resulted in a 21% increase in CHIP enrollments in Yellowstone County over the past year.

The third priority needs to be improved access to services for those who have CHIP.

Unfortunately, there are many providers that don't accept children covered by CHIP- especially in the area of dental care. This can make accessing services very difficult. Improved access to a full compliment of health services is vital.

Conclusion

I have a job that falls outside what most people consider the "conventional" nursing career, in that I don't work in a hospital or clinic. This has made it challenging for my children when they try to explain what I do. So I'm always interested in the explanations they give to that question. One day I overheard my 11 year old son talking to his friend who had asked the question. My son started his explanation, pausing to think of just the right way to explain what I did. He finally said "She's a nurse who helps people who are poor and can't go to the Doctor because they don't have the money to pay." I was impressed with his fairly accurate explanation. He continued, and it was his next statement that stopped me in my tracks. He said "Can you believe that there are kids out there who can't go to the Doctor when they need to because they don't have insurance?"

It is my hope that in the very near future every Montana child will have health insurance and they, like my 11 year son, will find it incomprehensible that there are children living in our great country who don't have health insurance.

Reauthorization of CHIP is imperative if we are to meet this goal.

Thank you for the opportunity to be part of this important discussion today about the Children's Health Insurance Program, as well as for the opportunity to highlight some Montana specific information about our uninsured children.

