

For over 10 years, the Community Health Network of Washington (CHNW) has served as a statewide system of community health centers that exist to ensure all Washingtonians have access to medical care and health insurance. Each year we identify legislative priorities designed to bring us closer to this goal – together these priorities form our legislative agenda for the year. We work closely with our partner organization, the Washington Association of Community and Migrant Health Centers, to educate policymakers and others about the continued importance of access to health care and health insurance for the most vulnerable Washingtonians.

Heading into the 2006 legislative session, the state was experiencing its first revenue surplus in four years. At the same time, CHNW's patients and providers were still feeling the sting of deep budget cuts made during times of budget deficits. The Basic Health program had been cut dramatically, and over 600,000 people in the state remained uninsured, including nearly 100,000 children. Across the state the number of uninsured seen at community health centers had jumped 46% in five years. This document provides a brief review of the results of the 2006 legislative session from a CHNW perspective.

Community Health Services Grants Restoration

Agenda item: In 2005, the Community Health Services (CHS) Program - state grants that offset the cost of providing medical and dental care to the uninsured - was cut by \$5 million or 22% of the total CHS budget. Restoration of the \$5 million to help cover the cost of uninsured medical and dental care was a top priority of the 2006 legislative session.

Result: Although House leadership initially voiced strong support for grant restoration, the House budget did not include additional funds. The Senate, however, proposed a \$2.5 million appropriation for CHS grants. The conference committee agreed to restore \$2 million to the grant program for the 2006 fiscal year, which will carry forward at \$4 million for the next biennium - \$1 million less than prior to the budget cut.

Basic Health Expansion

Agenda item: CHNW secured commitment from a broad coalition of health care providers, labor groups and advocates to support the first Basic Health expansion since the program was cut in 2003. In 2006, CHNW began the legislative session with a 10,000 slot expansion proposal.

Result: Due to competing health care budget priorities among House leaders, the House budget initially provided funding for only 4,500 new slots, but responded to widespread public support by adopting a floor amendment to raise the level to 6,000 slots. The Senate budget level was set at 5,000 new slots. The Legislature and Governor ultimately funded 6,500 new Basic Health slots (\$15.1 million).

Expanding Children's Coverage

Community health centers are the medical home for an estimated 41% of the uninsured children in Washington State. Budget cuts in 2003 caused tens of thousands of kids to lose coverage. In 2005, the Governor and Legislature declared their intent to make sure every Washington child was insured by 2010 (HB 1441). Improved budget conditions set the stage for this dramatic turnaround. During the 2006 session, CHNW worked with a loose coalition to encourage the Legislature to take four concrete steps toward the 2010 goal. The four legislative steps included:

1. Repealing the state's statutory authority to impose premiums on children in families at or below 200% FPL.

Agenda item: A 2003 federal waiver gave Washington the authority to impose monthly premiums on Medicaid children, despite the fact that their families have very low incomes. The state had delayed the start date for premiums, but CHNW and others made permanent repeal a legislative priority in 2006.

Result: The Legislature changed code to ensure that premiums could not be implemented on Medicaid children (HB 2376). In addition to safeguarding these children's access to health care, this legislation also pre-empts recently enacted federal flexibility to impose cost-sharing on Medicaid populations through the 2005 federal Deficit Reduction Act (DRA).

2. Covering additional children on the waiting list for the Children's Health Program.

Agenda item: The 2005 budget reinstated 4,300 slots for the Children's Health Program, a state-only health insurance program for very low income children that are not eligible for Medicaid because of their citizenship status. By February 2006, over 15,000 additional non-citizen children were on the program's waiting list.

Result: The 2006 budget included funding to provide coverage to an additional 10,000 children, shortening the wait list. Currently, 37% of the Children's Health Program applications have been denied coverage due to family income levels that exceed the 100% FPL maximum, suggesting a need to expand income eligibility for this important program.

3. Leveraging federal funds for community outreach.

Agenda item: An estimated 70% of uninsured children in Washington are eligible for, but not enrolled in, public programs. Increased outreach would help enroll more of these uninsured children.

Result: SB 6459 created the community health care collaborative grant program to match funds raised by community-based organizations to increase access to health care for low-income people (up to \$500,000 each). These funds can in turn be matched at 50-65% by the federal government. One grant option is to provide outreach for Medicaid and SCHIP-eligible children. CHNW will be working with other stakeholders to pursue outreach funding through this bill.

4. Instituting centralized eligibility determination and on-line applications to encourage program efficiency and integrity.

Agenda item and result: The Legislature did not take action on any administrative simplification proposals this year. Given Governor Gregoire's focus on cost-efficiency, we anticipate that her administration will soon consider policy changes in this area.

Save Health Care in Washington: Grassroots Organizing Program

Save Health Care in Washington (SHCW) is a grassroots organizing program of CHNW that helps patients and voters voice their concerns and priorities on health care to their representatives in Olympia. Since 2003, we have used SHCW to cultivate and activate a network of concerned people in support of our legislative agenda through direct mail, email, cell phone and clinic program components.

The program has grown in size, visibility and sophistication each year. In 2006, the entire SHCW program *more than doubled* both the number of activists and messages sent to legislators in Olympia over the previous year. More than 21,000 activists sent over 90,000 messages to their elected officials in support of expanding Basic Health, covering all kids and restoring funding to help community clinics care for uninsured patients.