



Advocacy

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In this edition:

➤ SCHIP VETO OVERRIDE FAILS

SPECIAL EDITION: SCHIP VETO OVERRIDE FAILS

The U.S. House of Representatives, which holds a Democratic majority, failed on Thursday, October 18 to override President Bush's veto of a measure that would have expanded the SCHIP program. The disappointing legislative outcome followed a 273-156 vote that left supporters 13 short of the two-thirds majority needed to prevail in a vocal and very public veto struggle between congressional Democrats and the Republican presidential administration. Deflecting criticism from children's advocates and health care groups, the White House immediately called for compromise talks with Congress on a replacement measure. Democratic leaders were insistent that there is no compromise possible if certain minimums are not part of such a replacement measure.

"As long as the bottom line is that 10 million children are covered. That's non-negotiable," responded Speaker Nancy Pelosi (D-CA). She pledged that new legislation would be ready within two weeks, and within hours, key lawmakers met to consider changes in the vetoed measure. It was Bush's third veto of the year. "We won this round," said White House press secretary Dana Perino, despite an aggressive advertising campaign on the insurance bill by Democratic allies that was aimed at GOP lawmakers. Democrats cited public opinion polls that showed overwhelming support for a health care expansion and they predicted some Republicans would pay a heavy price at the polls for sticking with Bush.

At a cost of \$35 billion over five years, the vetoed measure would have added nearly 4 million uninsured children to the insurance program. It provides coverage for those who are not poor enough to qualify for Medicaid, but whose families cannot afford private health care. "You either stand with our children or you stand against them," said Rep. Jim Clyburn of South Carolina, a member of the Democratic leadership. "There is no in between." Critics said that the bill was a step toward socialized medicine, that too many adults benefited and that despite an explicit prohibition, it would allow the children of illegal immigrants to gain coverage. Democrats do "not want a low income children's plan," said Rep. Dave Camp, (R-MI).

Within an hour of the vote, both sides were staking out their ground for compromise talks. Perino said Bush wants to "take care of poor children first" and was willing to spend more than he has proposed. Going one step further, senior congressional Republicans said it might be possible to cover additional lower-income adults, as long as the states first enrolled 90 percent or 95 percent of their eligible children. Not long after Perino spoke, key House and Senate Democrats, joined by two Senate Republican supporters of the vetoed bill, met to consider revisions.

While Pelosi has made insuring 10 million children a non-negotiable demand, Democratic officials were looking at possible changes in at least two areas. One would attempt to address the GOP claim that illegal immigrants could obtain coverage, while also assuring that the eligible children without birth certificates are not turned away. A second was aimed at negating what the Democratic officials said was an inaccurate charge by Republicans that children in some families that are making over \$80,000 would qualify for coverage.

At issue was a request from New York officials to cover children from families with incomes up to four times the federal poverty level. The Bush administration denied the request, but officials said it was possible the revised bill might impose a ban to remove any doubt. Republicans had predicted for days they would have the votes to sustain the veto. Democrats held off on the vote for over two weeks in order to allow their allies time to run television and radio advertisements, hold political rallies and make thousands of phone calls. Nevertheless, the campaign failed. While 44 Republicans joined with 229 Democrats in voting to override, none had opposed the bill when it originally cleared the House last month. Two Democrats and 154 Republicans voted to sustain Bush's action. Rep. Jim McCrery, (R-LA), said Democrats had failed to pay for the program in full. Citing estimates by the Congressional Budget Office, he said supporters would need to find an additional \$40 billion or terminate health coverage for 6 million eligible children beginning in 2012.

Reaction:

The Catholic Health Association was swift to respond to the veto override failure, citing “extreme disappointment.” As a result of the failure, health insurance for low-income children has been needlessly jeopardized. This legislation, the product of an often difficult process of bipartisan compromise, remains the best opportunity to ensure that millions of children remain covered under SCHIP and extend coverage to millions more who are eligible but not enrolled. CHA remains committed to an improved and strengthened SCHIP, and will continue to work for passage of reauthorization legislation that will provide adequate resources for the program to cover uninsured children in need of assistance.

“It is tragic that the debate over this legislation has been clouded by so many false assertions and misconceptions. While we welcome the intentions of President Bush and congressional opponents of the bill to continue working for SCHIP reauthorization, we should begin those discussions by being clear and forthright about what the current legislation does and does not do. Continuing to obfuscate the issue is not the way to reach an agreement, much less the way to achieve the president's stated goal of ensuring health coverage for low-income children.”

Sources: Associated Press, Catholic Health Association.

Reauthorization and expansion of the SCHIP program remains one of CHRISTUS top advocacy priorities this year. As the path forward becomes clearer, we will be in touch about CHRISTUS Advocacy's next steps. For further updates log on to <http://advocacy.christushealth.org/> and register to receive future Advocacy Alerts and additional information on issues vital to the mission of CHRISTUS Health.

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