



NEWS RELEASE

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SCHIP Has Been Successful Overall, Should Be Expanded According to New Health Care Opinion Leaders Survey

*Leaders Feel Program Has Enhanced Access for Children,
But Believe Quality Standards Should be Incorporated*

New York City, April 23, 2007—As the debate over reauthorization of the State Children’s Health Insurance Program (SCHIP) heats up in Washington, a new survey of leaders in health policy and health care finds that large majorities feel the program has been successful in increasing access to health care for low income children (71%) and in reducing the rate of uninsured, low-income children (65%).

Across the board, leaders feel that coverage should be expanded. In fact, 91% of respondents think SCHIP should be made available to legal immigrant children whose families meet income requirements. Eighty-two percent favor allowing families with higher incomes to buy into SCHIP, and 80% believe that states should be allowed to extend coverage to parents of children covered by SCHIP in states where there is no comprehensive coverage for the uninsured.

While health care opinion leaders favor expansion of the program, they also support new provisions to the program’s structure that would help the U.S. provide high-quality health care for all children. Four of five survey respondents (81%) were in favor of establishing federal performance standards and outcome measures for all children in SCHIP, and 69 percent favored measuring and reporting on the frequency and quality of developmental screening. Health care opinion leaders also support innovative mechanisms to encourage insurance plans and health care providers serving SCHIP families to provide higher-quality care. Seventy-eight percent of respondents favored requiring states to reward managed care plans and providers that meet benchmark levels of performance on developmental screening, preventive care, and follow-up treatment.

“Leading health care and health policy experts have clearly stated that SCHIP is a success and should be expanded,” said Commonwealth Fund President Karen Davis. “These opinion leaders have also expressed strong support for leveraging that success to create more value, and they make it clear that SCHIP should ensure high quality standards to ensure that children receive the preventive and developmental services that contribute to their healthy growth and development.”

It would cost an additional \$12 billion to \$15 billion over five years to maintain the current level of services provided under SCHIP. When asked how additional SCHIP expenditures should be

financed, there is no clear favorite. About a third (37%) of opinion leaders say financing should come from raising federal taxes or fees, 27% say funds should be redirected from other programs and 25% say an exception should be made to the “paygo” rule for coverage of children. However, only 3% support retaining the current allocation as a financing solution.

The survey of leading health care experts with a diverse range of professional and ideological perspectives is the tenth in a series from The Commonwealth Fund, and the second conducted in partnership with the publication *Modern Healthcare*. Commentaries on the survey findings by New York Governor Eliot Spitzer and Secretary of Health and Human Services Michael Leavitt, and a data brief authored by Fund staff, *Health Care Opinion Leaders’ Views on Priorities for the State Children’s Health Insurance Program Reauthorization*, are posted on the Fund’s web site.

Opinion leaders surveyed include experts from four broad health care sectors: academia and research organizations; health care delivery; business, insurance, and other health industry; and government and advocacy groups. Elected officials and media representatives were excluded. The online survey was conducted by Harris Interactive® on behalf of The Commonwealth Fund and focused solely on SCHIP. The survey was completed online by 170 experts.

SUCSESSES OF SCHIP

Majorities of opinion leaders feel that SCHIP has met goals such as improving quality of coverage and access to health care for children:

- 71% felt SCHIP has been successful in increasing access to health care for low-income children and 65% said it was successful in reducing the rate of uninsured, low-income children.
- A majority (56%) say SCHIP has been extremely successful or successful in improving preventive care and quality of services for children.
- More than half (52%) say SCHIP has been successful in providing working families with peace of mind knowing that their children have coverage.

Opinion leaders were less positive about other goals of SCHIP, pointing to potential challenges/opportunities for the future.

- Only one-third (34%) say SCHIP has been successful in stimulating state innovation in designing delivery models for children.

COVERAGE EXPANSION

There is strong support for expanding SCHIP coverage of low-income children:

- 88% favor (strongly favor or favor) allowing states to cover children up to 300% of poverty.
- 91% were in favor of making SCHIP available to legal immigrant children.

Majorities also favor (strongly favor or favor) covering additional groups and oppose limitations:

- 73% say after covering children, states should be allowed to cover childless adults under 100% of poverty.
- 80% were in favor of extending SCHIP coverage to parents of children in SCHIP in the absence of comprehensive action on the uninsured.
- The Administration's proposal to limit SCHIP coverage to children under 200 percent of the federal poverty level was not favorably received, with only 14 percent supporting such a limitation.

FUNDING

Health care opinion leaders were asked about their attitudes toward the program's funding level, state allocations and structure. SCHIP funding and program structure measures that drew widest support include:

- 80% favor requiring states to adopt best practices for outreach and enrollment.
- 67% favor changing SCHIP to an entitlement with sufficient federal matching funds to cover all children meeting the eligibility criteria.

QUALITY OF CARE

The case for good quality preventive care for children is strong, especially for low-income young children. Responding to suggestions to use SCHIP to improve quality of care, majorities of respondents were in favor (strongly favor or favor) of all proposals:

- 84% favor allowing states to design packages that wrap around other coverage (ie: translation services and care coordination).
- 78% favor requiring states to reward managed care plans/providers that meet benchmark levels of performance on developmental screening, preventive care, and follow-up treatment.
- 69% favor measuring and reporting on the frequency and quality of developmental screening and growth and development counseling to parents in child health practices that cover SCHIP children.

Methodology: The online survey was conducted within the United States by Harris Interactive between March 12, 2007 and April 6, 2007. The survey was delivered via e-mail to a panel of 1,467 opinion leaders in health policy and innovators in health care delivery and finance; 170 responded. The sample was derived from a panel developed by The Commonwealth Fund, Modern Healthcare and Harris Interactive. Data from this survey were not weighted. With a pure probability sample of 170, one could typically say with a 95 percent probability that the overall results would have a sampling error of +/-7.5 percentage points. However, that does not take other sources of error into account. This online survey is not based on a probability sample and therefore no theoretical sampling error can be calculated.