



## Childhood Asthma Leadership Coalition

## Sample Op-Ed

Asthma Awareness Month offers great opportunities to connect relevant federal policy choices with the health of local children. An “op-ed” is a great way to connect the dots for readers on an important and timely policy debate: the future of Medicaid.

For most newspapers, an op-ed should be no longer than 650 words. To understand the guidelines for submitting a letter that are specific to your newspaper, check the paper’s website or call the editorial page staff. To maximize flexibility, this sample op-ed is drafted at about 600 words. If you need to cut the sample back, consider dropping the second-to-last paragraph. If your paper welcomes longer letters, consider adding a family story to strengthen your op-ed’s local connection.

Placeholders that you can fill in are listed below in *Italics*. And, of course, if your state’s CHIP program is just called CHIP, just shorten the third paragraph accordingly.

It’s Asthma Awareness Month, and many in our community are focused on the needs of an estimated *Number State* children living with asthma. But Congress may soon make it harder for children to get the care they need.

With about one-in-ten children affected, asthma is the most common long-lasting, or “chronic,” health condition among children. Unmanaged, childhood asthma can be a serious health threat, sometimes requiring hospitalization. In fact, asthma accounted for one out of every seven pediatric hospitalizations in 2006. And asthma attacks mean lost school days for kids and lost work days for many parents, putting a family’s economic security and a child’s academic progress at risk.

Medicaid helps children get the care they need, providing coverage for more than one-fourth of children with asthma. Medicaid is especially important for children with asthma, because kids living with asthma or other long-lasting health conditions have a better chance to stay healthy with dependable and continuous health insurance. Medicaid – and *CHIPName*, State’s version of the Children’s Health Insurance Program – are also critical because asthma is more prevalent among children from low and moderate-income families.

Medicaid coverage for kids with asthma also makes good economic sense. Children can get the regular doctor visits and medication they need, plus parents can learn how to mitigate the household and community “triggers” of asthma attacks. That combination of routine care and asthma management education often costs just a few hundred dollars a year, avoiding hospitalizations that often cost thousands apiece.

You’d think that if an initiative responded effectively and efficiently to an important problem affecting real people, Congress would rush to protect – even strengthen – it. Instead, Congress is considering a dangerous budget proposal that would end Medicaid’s consistent and dependable coverage, replacing it with a block grant.

Proponents say block-granting Medicaid would offer states flexibility, but the opposite is actually true. By definition, federal block grants arbitrarily cap federal funding to states.

Medicaid funding for decades from now would be locked in today, without regard for future need, costs, economic circumstances, or even population changes.

So what happens when things change or if – and I know this is hard to believe – Congress doesn't get it exactly right? Costs above the Washington-knows-best federal funding cap would simply be shifted to low-income children, the disabled, and the elderly. That road leads to just one destination: health care rationing. A federally-imposed formula and state politicians would choose winners and losers. And in a political contest between seniors and low-income children, kids aren't likely to be the winners.

Block grants also ignore the reality that health care needs can change radically overnight. A block-granted version of Medicaid wouldn't step up with additional funding in response to an economic or natural disaster. So a downturn in the *StateIndustry* industry or a *TypicalDisaster* means a Medicaid funding shortfall, and the state must either cover the costs of any additional assistance for affected families or cut them loose.

Voters get it. A 2014 Bloomberg poll found that more than three-quarters of voters reject cuts to Medicaid. And a 2013 poll found that nearly two-thirds of Tea Party supporters oppose Medicaid cuts. Yes, the federal government has budget problems, but voters on both sides of the aisle agree that taking health care away from kids is the wrong way to solve them.

You can make a difference, and Asthma Awareness Month is the perfect time. Call your congressional representatives and urge them to reject Medicaid block-grant schemes that gamble with children's health. With your help, *State* kids with asthma – and the families who love them – can breathe easier.