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MEDICALLY COVER OUR CHILDREN — THE NET COST IS VIRTUALLY NOTHING, BUT NOTHING IS WHAT IS LIKELY TO HAPPEN

The Legislature now sits in its annual “let's expand health coverage” paralysis. The Democrats say the Governor's proposal is flawed and assesses from too wide a universe. The governor finds the Democratic Núñez/Perata proposal to be too much of a burden on business. And so here we sit — again.

The price of inaction goes beyond a Michael Moore documentary. A parent with an ill child lacking coverage faces a Hobson's choice: Chance fate that the kid will recover without help or go to the emergency room and risk treatment priced at three to five times what the state and private insurers pay. About 50 percent of California consumer bankruptcies are driven by medical treatment collection. There goes the retirement savings, and the college fund for the kid, and the reserve to pay for the predatory mortgage doubling. There goes the home. Either that or don't take the kid in.

It is unlikely we shall get universal health coverage out of our structurally defective political system. But we should at least be covering our children. We cover all of our elderly. And child health coverage costs per capita one-fifth the amount we pay for older adults.

Indeed, the net cost is virtually nothing. If the Congress fully funds the State Child Health Insurance Program, almost 60 percent of the 760,000 uncovered California kids will get a 2-to-1 federal match. And the current debate in Washington is over how much to expand it. When those expected increases occur, how much federal money will California be leaving on the table for other states that its kids to use for universal child coverage? A lot.

But it is even more of a no-brainer than that. Because only about 3 percent of our children are uncovered privately and also ineligible for public coverage. That means we spend almost \$2 billion annually in enrollment and other administrative costs just to keep from improvident public payment the 2 percent or so of the kids in that 3 percent ineligible group who may seek medical services in a given year.

Nobody gets treated unless they are enrolled in advance. This is all to keep about one-tenth of one percent of California's children who receive medical treatment and are not qualified for public subsidy. It is crazy. The self-evident solution is true presumptive coverage for children. They are in. Period.

If a child incurs a large medical expense that is not privately covered, assess the parents after-the-fact on a sliding scale — at MediCal rates — based on income if over 250 percent of the poverty line. The gratuitous filtering system involving enrollment, incentive payments to 501(c)(3) for that enrollment, premium collection, and all the rest - costs far more than does coverage for such a small group. Charge a co-pay to discourage abuse. But bill parents based on income after-the-fact and at rates government and the private insurers pay. Employers are not likely to abandon private coverage from work to free ride the system — because they are generally covering those above 200 percent of the poverty line and they would be assessed on the sliding scale post hoc, and retain the incentive for coverage.

Even the most conservative legislator should not want to put a Maginot line in front of child health coverage, not when presumptive eligibility means less government red tape, less bureaucracy, continued private coverage, and fair rates. And the other side of the aisle should be interested in removing barriers to coverage that deny medical treatment for so many children, or make it a financially catastrophic family event.

When the benefits are clear and the costs are nil, will the legislature act at least as to our children? AB 1 (Laird) now pending would help somewhat by expanding coverage to 300 percent of the poverty line, and otherwise broadening and expediting enrollment. But it is time to go beyond simply ramping up more enrollments — the case is compelling to reverse the system for true presumptive eligibility with assessment where appropriate after services.

Will the Governor, whether by expansion of current programs, or by an outside-the-box approach that actually will save net money? Currently, Illinois and other states, and every other industrial nation in the world, provide assured coverage for all children as a matter of course. It is time for us to join the civilized world. To continue to resist based on ideological slogans — when it costs virtually nothing financially from the state — is a test of ethical sensibility and basic math aptitude.

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