



# Capitol Watch for Children

*An update on state and federal policies affecting Pennsylvania's children*

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## Pennsylvania Partnerships for Children

### Federal Update

#### SCHIP Still Up for Grabs

Since the October edition of *CapWatch* there has been considerable activity surrounding the State Children's Health Insurance Program (SCHIP) legislation, but the status remains the same – a reauthorization bill has yet to be enacted. In mid-October, the U.S. House of Representatives attempted to override the President's veto of the Children's Health Insurance Program Reauthorization Act of 2007. PPC supporters responded to an e-advocacy call to action and sent nearly 1,000 e-mails to Congress, urging members to vote to override the veto.

Though the final tally failed to secure the necessary two-thirds majority to override the veto, the action had strong bipartisan support. Sixteen of Pennsylvania's 19 members of the U.S. House of Representatives voted to override. Representatives Altmire, Brady, Carney, Dent, Doyle, English, Fattah, Gerlach, Holden, Kanjorski, Patrick Murphy, Tim Murphy, Murtha, Platts, Schwartz, and Sestak voted to override the veto. Representatives Peterson, Shuster and Pitts voted to sustain the veto.

"Unfortunately for the children of Pennsylvania, we are back at square one on

this issue. We need Congress to act quickly to reauthorize this program before the healthcare of Pennsylvania's children is further jeopardized," remarked PPC's President & CEO Joan L. Benso at the time of the vote. She added, "Congress must put politics aside and enact legislation that provides Pennsylvania and other states with the tools and resources to provide healthcare coverage to our children."

One week after the failed override attempt, Congressional negotiators crafted a revised SCHIP reauthorization bill, largely to address concerns voiced during the SCHIP debate. The revised legislation still results in 10 million kids covered under SCHIP at an investment of \$35 billion in new dollars for the next five years. The revised bill includes concrete changes to address concerns raised by a number of legislators who voted to sustain the veto. The revised bill: explicitly eliminates coverage for higher income children; sharpens the focus of the program on lower income children first; more rapidly eliminates coverage for adults; and makes concrete changes to guarantee that illegal immigrants are not covered.

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*Published by Pennsylvania Partnerships for Children, a strong, effective, and trusted voice to improve the health, education, and well-being of the Commonwealth's children. Joan L. Benso, President and CEO.*

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The revised bill was passed by the U.S. House but failed to achieve a two-thirds veto-proof majority. Again, sixteen House members from Pennsylvania supported the measure. The same sixteen as noted above voted in the affirmative. Representatives Peterson and Pitts voted against the bill and Representative Shuster was absent.

“We are pleased that a bipartisan group of legislators worked so hard on behalf of children. They put partisanship aside and supported a strong bill that will continue to make health coverage available to Pennsylvania children whose families cannot afford private coverage,” Benso said. “Unfortunately, the measure is not veto proof. The

measure was significantly changed to address concerns raised by those who voted to sustain the President’s veto last week. I am at a loss to explain why members of Congress, including two members from Pennsylvania, did not support the measure.”

Revised SCHIP legislation passed the Senate late Nov. 1 by a vote of 64-30, yet Pres. Bush has indicated he will again veto the measure if or when it reaches his desk. If the measure is amended and passed, it would return to the House for another vote where supporters will be looking for a veto-proof margin. At the time of publication of this issue of *CapWatch*, no firm decisions on Senate amendments or a date for a vote had been made.

**Federal Budget Update**

The Senate passed its version of the Labor-Health and Human Services-Education (commonly referred to as Labor-HHS) appropriations bill. This bill provides the bulk of non-defense domestic discretionary spending for important health, education and children’s programs. Both Senators Casey and Specter voted for the bill. The House passed its version of the Labor-HHS bill in June. Both the House and Senate versions of the Labor-HHS bill increase spending by about \$7 billion over the current year. Both bills also increase spending as compared to the president’s proposed budget by about \$9 -\$10 billion.

Differences between the House and Senate Labor-HHS bills must now be reconciled. Pres. Bush is continuing to threaten to veto any spending bills that do not conform with his proposed budget. Congressional leaders are considering whether or not to combine the Labor-HHS bills with some must-do defense spending in order to try to force the president’s hand. At the time of publication of this issue of *CapWatch*, decisions on what bill to run and how to run it have not been reached.

Please see the following chart for key program funding under the House and Senate Labor-HHS bills.

Program	Senate Labor - HHS	House Labor - HHS	FFY 2007	President’s Proposal
CCDBG	\$2.062 Billion	\$2.137 Billion	\$2.062 Billion	\$2.062 Billion
Head Start	\$7.089 Billion	\$6.964 Billion	\$6.889 Billion	\$6.789 Billion
21 <sup>st</sup> Century Learning Centers	\$1 Billion	\$1.106 Billion	\$981 Million	\$981 Million



As previously reported, the U.S. government currently is operating under a continuing resolution. The stopgap spending bill became necessary because Congress has yet to adopt any of the 12 annual appropriations bills that make up the federal budget for the 2008 federal fiscal year. The continuing resolution expires in mid-November.

### **Federal Home Visiting Bill Garners Support**

Home visiting delivers early education and support to families where they live and on their terms. Voluntary home visiting educates families, brings them up-to-date information about health, child development and school readiness, works with them to develop their child's literacy and language skills, and connects them to critical services. Home visiting programs aim to keep families safe, healthy, self-sufficient, and connected to support resources. Over time, investments in home visiting serves to reduce future costs associated with health care, social services, criminal justice, special education, high school drop-outs and the child welfare system.

Home visiting has attracted significant legislative interest in the Commonwealth by the enactment of Act 23 of 2006, the Ounce of Prevention Program Act. The new law provides the structure to fund intensive home visits for at-risk families with young children in every county. Current fiscal year funding for home visitation stands at \$13.556 million. The Commonwealth's general fund as well as federal funds and some local matching dollars fund the program.

The Education Begins At Home (EBAH) Act has been introduced in the U.S. House and Senate. The legislation establishes the first dedicated funding stream to states to support home visiting programs. Of interest, Rep. Todd Platts (R-PA) is a prime sponsor of the measure in the House. Representatives Altmire and Brady are among the many co-sponsors of the measure. Senators Casey and Specter are among the co-sponsors of the companion Senate measure. PPC is supportive of the proposal. We will keep you posted as it moves through Congress.

### **Be an advocate for children!**

From time to time, PPC e-mails alerts, urging our supporters to take action endorsing or opposing state or federal legislative or regulatory issues. We try to limit our alerts to situations where grassroots voices will make a significant difference in a major policy decision impacting the health, education and well-being of the Commonwealth's children. The vast majority of our calls to action involve a simple pre-formatted e-mail that can be sent to policymakers with one click. Our alerts can generate thousands of messages to policymakers, but we can do better. We need YOU to get involved!

If you do not already receive our e-advocacy alerts, please sign up on PPC's website by clicking [HERE](#). If you are on our list, please take a moment to respond to the alerts when you receive them. Sometimes, our alerts can get misdirected to spam folders, so please check your junk mail for our calls to action. We are counting on you to be an advocate for children!



## State Update

### College Affordability Investigated by House Committee

With access and affordability of higher education an ongoing issue of concern for Pennsylvania high school graduates and their families, the House Education Committee conducted a public hearing on college affordability Oct. 10. Testifiers at the hearing included representatives from the College Board, PHEAA, the Association of Independent Colleges and Universities of Pennsylvania, as well as parents.

Dr. Robert Zemsky, Professor and Chair of the Learning Alliance for Higher Education at the University of Pennsylvania also testified at the hearing. Dr. Zemsky highlighted portions of his 2006 study: “A Rising Tide: The Current State of Higher Education in the Commonwealth of Pennsylvania.” Through his research, Dr. Zemsky has found that Pennsylvanians have enjoyed increasing access to higher education. However, the Commonwealth has made little – if any – progress in closing the gap between majority and minority attainment, and equally, the gap among rural and urban and suburban attainment.

Zemsky’s research is focusing new attention on the importance of secondary school quality and the ability of these schools to graduate college and work-ready students as a means to reducing persistent gaps in education participation and attainment. He concluded his testimony by noting: “The task at hand is to learn how to use the forces of the market and the Commonwealth’s limited funds to broaden access to underserved regions and populations; to continue to strengthen the teaching of math, science, computing and engineering at both the collegiate and secondary school levels, and to achieve a better alignment among the Commonwealth’s rich variety of postsecondary programs.”

### **PA Revenue Update**

The Pennsylvania Department of Revenue reported that the Commonwealth collected \$1.8 billion in general fund revenue in October. This is \$25.5 million or 1.4 percent less than the official estimate. Fiscal year-to-date collections total \$7.8 billion, which is \$46.4 million or 0.6 percent above the official estimate.

### October CHIP Enrollment

According to the Department of Insurance, statewide CHIP enrollment stood at 164,395 in October. A total of 147,648 children were enrolled in Free CHIP (those in families below 200 percent of the Federal Poverty Income Guidelines – FPIG). Those in Low-Cost CHIP (families between 200-300 percent FPIG) amount to 16,042. A total of 705 children are in At-Cost CHIP (those in families above 300% FPIG).

### November General Assembly Session Dates

The House and Senate will be in session on the following days in November: 13, 14, 15 (Senate only), 19, 20, 27, 28.

### Tax Relief for Low-Income Pennsylvanians

The House Finance Committee reported legislation Oct. 31 that would give low-income Pennsylvania taxpayers the option of utilizing the existing tax forgiveness provisions under the Pennsylvania Tax Code or a refundable tax credit that is calculated by using 30 percent of the allowable earned income tax credit under the U.S. Internal Revenue Code. The new optional credit would be refundable, which means that when the credit is greater than a taxpayer’s tax liability, a refund is issued.



### Immigration Debate Stirs in Harrisburg

The debate over immigration is not limited to Washington, DC. Increasingly, state legislators are discussing the topic at the Capitol. Such was the case when the Senate State Government Committee held a public hearing on Senate Bill 9, the proposed Proof of Citizenship for Receipt of Public Benefits Act. The measure, sponsored by Senate President Pro Tempore Joe Scarnati (R-Jefferson), requires persons over the age of 18 to provide identification from a list of choices and execute an affidavit stating that he or she is a U.S. citizen, a legal permanent resident or otherwise lawfully present in the U.S. in order to receive any public benefits.

Public Welfare Secretary Richman's testimony was of particular interest. She noted that the legislation does not break new ground. She explained, "With very limited exceptions, federal and state governments already have established that individuals must be U.S. citizens to qualify for benefits." She pointed out that under current law,

undocumented immigrants are eligible to receive only a limited number of services that are essential for public health and welfare, including immunizations, emergency disaster relief, emergency medical care and treatment of communicable diseases. Senate Bill 9 provides exceptions for these services, so no new services would be added to or deleted from the list.

Secretary Richman noted that the Commonwealth does not have an issue of undocumented children and families receiving benefits. "One reason we do not have a problem is that we already have strong systems in place to check for citizenship and identity for all of our programs and those systems are working," Richman said. She also noted that the measure would create serious barriers for people who are eligible, but lack the necessary forms of identification and that the duplicative requirements (state and federal) would lead to tremendous inefficiencies.