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PROGRAM REPORT



PROTECTING OUR KIDS... PROTECTING OUR FUTURE

Most people, if they thought about it, would suppose that the problem with children's health care in the United States - especially for children in poor and low wage working families - is that they don't have health insurance. But they do.

CONGRESS' PROMISE

Prompt, complete and continuous health care to all eligible children

Since 1990, Title XIX of the Social Security Act has guaranteed prompt, complete and continuous health care to millions of children living in poverty and low wage families through statewide medical assistance programs. Congress has commanded all states to provide what essentially constitutes universal health care - immunizations; vision, hearing and dental screenings and treatment; asthma treatment and screening for high blood lead levels - so essential to healthy child development and future achievement.

However, when the Law Center recently reviewed the nationwide performance data, only seven states met the modest goal set by the Bush Administration: namely, that by the end of 1995; 80% of children enrolled in medical assistance in each state must receive at least one comprehensive physical examination each year. Most states, including Pennsylvania, provided these exams to fewer than 50% of enrolled children in 1995 and 1996. In 1996, only six of the 33 reporting states had met or exceeded the 80% target.

A MODEL FOR IMPLEMENTATION

Pennsylvania Show the Way

When Pennsylvania did not deliver on this promise, the Law Center sued on behalf of fourteen children's advocacy groups, including the Pennsylvania chapter of the American Academy of Pediatrics, to compel the state to provide the full range of mandated services to all of its 1 million eligible children.

Spurred by the lawsuit, the state enrolled an additional 400,000 children in medical assistance and nearly doubled the percentage of children receiving at least one comprehensive examination each year, in part by harmonizing a patchwork of state delivery systems. The state also entered into an agreement with Law Center clients which accomplished three critical objectives: it established 20 measurable performance standards to ensure that eligible children would receive adequate health care; it identified mechanisms for improving delivery of these services, and it provided our clients a role in monitoring and advising the state on ways to continue improving its performance.

This agreement serves as a working model for the delivery of adequate health care for all eligible children which can be used nationwide. In fact, the federal Health Care Finance Administration recently conditioned its approval of certain programs in Pennsylvania on compliance with the performance standards established by the Law Center settlement agreement.

DISMAL NATIONAL DATA

Despite increasing national attention to the need for healthy child development, the Law Center's survey reveals a disappointingly low level of commitment to making proper health care available to eligible children. In 1996, more than half of the reporting states had provided comprehensive health screenings to fewer than 50% of enrolled children. Six states reported below a 40% delivery rate; notably, Michigan reported a 38% delivery rate, while New Jersey reported a shocking 13% delivery rate. Worse yet, New Hampshire and Indiana each reported that only *one percent* of enrolled children in these states had received at least one comprehensive screening.

TAKING THE NEXT STEP

The failure to implement the Congressional mandate is a costly one. At stake is the health and well-being of millions of children whose potential for achievement may be significantly affected because they are deprived of early, basic health care. The lessons learned in Pennsylvania point the way to an effective solution. By working with associations of health care providers, parents, educators and concerned citizens backed by litigation, we can drive the state to deliver universal health care to virtually all of the eligible children, children who need it most. The settlement agreement in Pennsylvania delivers a comprehensive and comprehensible model that can easily be implemented. Consequently, the Law Center is in the process of assembling the financial and human resources necessary to extend this work to the other states. We have received enthusiastic support from private law firms, and can begin this important work in earnest as soon as sufficient financial support can be found.

PUBLIC INTEREST LAW CENTER UPDATES

This spring, the Law Center was honored with the **Cecil B. Moore Community Service Award** by the **Barrister's Association** for our work to achieve equal justice for all citizens, and with the **John Patterson Award** by the **Citizen's Committee for Public Education in Philadelphia** for our work to raise the level of educational achievement for Philadelphia's school children. We are immensely proud of this recognition. • **Tom Gilhool** has been at the center of a national effort to organize and mobilize parent groups and other children's organizations to move the Congress to safeguard the protections of the **Individuals with Disabilities Education Act**, a federal statute based upon the Law Center's *PARC v. PA* lawsuit. • **Michael Churchill** has been appointed as **Co-Chair of the Resources Task Force** of the Education Summit convened by Councilman **John Street**, along with **John Claypool** of Greater Philadelphia First. • Best wishes and thanks to attorney **Jessica Lowenthal**, who, after a series of victorious inclusion cases, is leaving us to practice in Florida.

The Board and staff recently concluded a year-long strategic planning and Board development process which was underwritten by the generous support of **Dechert, Price & Rhoads, Dolfinger-McMahon Foundation, Mann, Ungar, Spector & Labovitz** and **The Philadelphia Foundation**. We are confident that this hard work will bear fruit in a highly energized and focused staff and Board of Directors.



**PUBLIC INTEREST LAW
CENTER OF PHILADELPHIA**

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