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Office of Congresswoman  
**KAY GRANGER**



12TH DISTRICT, TEXAS

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### **Kids First Act (H.R. 688)**

I support the State Children's Health Insurance Program (SCHIP). During my first term in Congress, I voted to create the program and believe we need to responsibly reauthorize it.

Texas first began enrolling children in SCHIP in May 2000. Since that time, 1,928,725 Texas children have received their health care through SCHIP. And, nationwide, 7.4 million kids were enrolled in SCHIP in 2008. SCHIP has been a good program that creates an important safety net to provide health insurance to low-income children whose families cannot afford private insurance and do not qualify for Medicaid.

There is no doubt that we all support providing insurance to low-income children. In fact, this program originally passed on a broad bipartisan basis. Enacted by a Republican Congress and signed by a Democratic President, it was a model of bipartisanship. But the Majority has repeated their mistakes from last Congress, and is trying to push through a bill with very little input from Republicans that strays from the original purpose of the SCHIP program.

That is why I have introduced a bill to expand the SCHIP program to cover millions of uninsured kids that is paid for without budget gimmicks, without raising taxes, and without harming Texas physician-owned hospitals. My bill, the *Kids First Act*, provides funding increases to state SCHIP programs and help them to find those eligible children who are not yet enrolled. In addition, the *Kids First Act* closes the loophole that allows some states to extend their program to higher income families, even while they have thousands of lower-income children who are still not covered. Finally, by responsibly allocating scarce resources, the *Kids First Act* increases funding for SCHIP without raising taxes and without budget gimmicks.

The *Kids First Act* truly puts kids first, eliminating nearly all adults from this program designed for children so that more children can be covered. The *Kids First Act* mirrors the Senate alternative introduced by Senate Republican Leader Mitch McConnell of Kentucky and Senate Republican Minority Whip John Kyl of Arizona. It reauthorizes the program through FY2013 and increases state allotments, allowing nearly two million new low income children to be covered.

### **National Obesity Prevention Act**

Rep. Towns (D-NY) and I are working on finalizing this bill, and will be introducing it soon. The bill is supported by Trust for America's Health, and calls for a coordinated, national strategy to combat obesity. The concept is modeled after the Bush Administration's National Strategy for Pandemic Influenza.

Obesity is rapidly becoming one of the most pervasive health threats to our society, but more alarming, is that 15 percent of our children today are considered obese. That's four times the rate of juvenile obesity that occurred in the '70s. As a result, these children are at an increased risk of heart disease, cancer, diabetes and musculoskeletal disorders. It's a frightening prospect: A lifetime of serious health problems.

In addition to introducing legislation to address the obesity crisis facing our country, I will also continue my common-sense approach to encourage kids to get more active. This spring, I will once again be hosting by annual fitness challenge that is part of the Cowtown Marathon. Last year, nearly 5,000 young people participated in the Kids 5K Run and I look forward to having even more kids participate this year.

### **Medicare Home Infusion Therapy Coverage Act (H.R. 574)**

Infusion therapy (the administration of medications into the bloodstream via needle or catheter) is a medically necessary treatment for many patients with cancer, serious infections and other conditions. Providing infusion therapy in a patient's home involves not only the delivery of medication; but it also requires specialized equipment, supplies, and professional services to ensure safe and effective administration of the therapy. While most infusion drugs are covered under the Medicare Part D drug benefit, the Centers for Medicare & Medicaid Services (CMS) has determined that it does not have the authority to cover the infusion-related services, supplies and equipment under Part D. As a result, Medicare beneficiaries are effectively denied access to home infusion therapy and are being forced into receiving infusion therapy in hospitals and skilled nursing facilities at a significantly higher cost to Medicare and at great inconvenience to the patients.

CMS agrees that the current Part D structure is not a proper fit for home infusion and that coverage of the services, supplies and equipment belongs in Part B. However, legislation is necessary to establish coverage of the full range of home infusion therapy items and services under Part B.

That is why I have once again joined with Reps. Engel (D-NY), Murphy (R-PA), and Baldwin (D-WI) to introduce the Medicare Home Infusion Therapy Coverage Act. This bill will provide coverage for home infusion services, supplies and equipment under Medicare Part B to ensure meaningful access to the infusion drugs covered under Part D.

**\*\*\* If you have ideas for other health-related legislation you would like to see me introduce or support this Congress, please email your comments and suggestions to me at [grangerhealthupdates@mail.house.gov](mailto:grangerhealthupdates@mail.house.gov) \*\*\***

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