Good afternoon.

Thank you for showing your interest in the Express Lane Eligibility pilot project by joining us here today.

I think when you hear what is being proposed by the Department of Children, Families & Learning and the Department of Human Services you will realize this is a great opportunity to help ensure that Minnesota’s kids are healthy kids.

The setting of our event at the Minnesota History Center is appropriate because we’re making a little history ourselves here today.

When I became Governor of Minnesota, one of the things that I put at the top of my priority list was making sure that every kid in our state has health insurance by the end of my term.

Minnesota is known as one of the healthiest states in the country. One of the reasons for our high ranking is that most of our citizens have health care coverage.

Still, we have plenty of room for improvement. The Department of Human Services tells us that there are still nearly 48,000 children under age 18 who don’t have health insurance.

In my opinion, having even one child without health insurance is one kid too many. We have 48,000 – and we’re ranked as one of the best states in the nation!

We also know that large numbers of our kids without health insurance come from minority populations. I am sorry to say that our state has the dubious “honor” of having one of the most glaring examples of health disparity in the nation.

However, the news is not all bad.

There are a lot of really good things happening right now in terms of reducing the number of kids without health insurance.

For starters, we have reduced paperwork and speeded up the enrollment process for state health insurance programs. Parents told us that one reason they didn’t sign their kids up for health insurance was that they hated filling out the endless forms.

So we changed that.

We took an application that was 24 pages long and reduced it to 4 pages.

I’ve heard that even the rocket scientists among us were confused by the old application, so you can imagine what a big difference this change made for the average parent.
We have also found more ways to work together.

In February I announced that my Commissioners of Health and Human Services formed the “Cover All Kids Coalition” in partnership with the Minnesota Council of Health Plans and the Children’s Defense Fund.

I expect great things from this public-private coalition, which will draw on the celebrity of Vikings player Cris Carter to make parents aware of insurance options for their kids.

Teamwork is also a key element in my budget.

I have asked my agencies to look for ways to coordinate the programs and information that is already out there so that more kids get health coverage.

You and I all know that getting different agencies and programs to talk to one another is a battle. While we can all agree on removing eligibility barriers and making it easier to get health coverage for kids, taking the extra step – exchanging data between programs – has been a slower process.

This year, I expect that to change.

My administration is specifically looking at ways to reach the uninsured kids who are already signed up for public programs like school lunch or WIC, and get them signed up for health insurance.

That strategy is in my budget and in bills currently making their way in the Legislature. It is my hope that Minnesota history will include a story of their successful passage.

I also expect that when they tell the story of Minnesota’s success in ensuring that no child is without health insurance, it will include a chapter that begins with the people who are here today.

Today’s meeting marks the start of putting the “Express Lane Eligibility” method of getting kids signed up for health insurance into practice here in Minnesota.

The beauty of this story is that it has such a simple plot line, with just 2 main elements: make it easier to enroll and only ask for proof of need once.

Interestingly enough, it turns out that these same 2 elements are the key reasons why parents haven’t tried to enroll their kids in state health insurance programs.

A national survey by the Kaiser Commission found that many parents don’t even apply because they don’t know if their children are eligible, don’t know how or where to apply, or are put off by the thought of complex rules and forms.
The survey also found that parents may start the application process, but never finish it.

The reasons why?

1) Too complex and confusing.
2) Difficulty getting all the required documentation.
3) And the “overall hassle” of the process.

I keep wondering, how many times must the state make a citizen ask for help and prove they are in need?

For me, once is enough.

There are a lot of public programs that serve kids who don’t have health insurance. Why can’t we use those programs to reach out and enroll the kids who are eligible for MinnesotaCare or Medical Assistance?

The fact is, we can.

In this case, 2 programs—School lunch and state health insurance—talking to each other means more kids will get health insurance.

It starts with the School Lunch applications that districts mail to parents each year. The districts in this project will use that form to tell parents that we’d like to share their information in order to see which kids can also enroll for health insurance.

It’s important to note that parents can say “No” and opt out of sharing their information with the Department of Human Services. They simply check that option on the form when they send it in.

If the parents say OK, their information will first go to Children, Families & Learning to approve the school lunch application, and then to DHS to generate an application for health insurance.

That application is then mailed back to parents, with a lot of the information already filled in. When they provide proof of income, that is used for both the health insurance and school lunch programs.

Do you see the simple beauty in this story? Parents don’t need to face a mountain of paperwork and are asked only once for proof of need. Kids get health insurance coverage, which leads to better health outcomes and reduces the state’s health disparities problem. School districts, I might add, won’t have to spend as much time verifying eligibility for school lunch.
Everybody’s happy.

Some of you may be wondering why we chose the School Lunch program as a vehicle for getting kids enrolled in Minnesota Care or Medical Assistance.

It’s simple.

Parents trust their children’s schools and the people in them.

Schools are safe, and since the School Lunch program has been around a long time, nobody thinks there’s anything “wrong” with applying for school lunch benefits.

Since the papers are sent right to parents, nobody outside the family has to know that those parents are also interested in getting health insurance for their kids.

The school-based approach also eliminates the stigma of going to the county welfare office, even though parents are applying for health insurance, not welfare. This can be especially significant in small towns where everybody knows everybody else’s business.

Finally, setting up an information exchange system between schools and the Human Services agency will lay the foundation for a permanent, sustainable system that can coordinate enrollment across a host of programs serving low-income families.

Hey, do I sound like a health policy wonk or what?

You are being given a chance to help write an exciting chapter in the Minnesota story of how we improved the status of children’s health.

I urge you to take it.

Let me now turn things over to the folks who will explain more of the details of this project…