Dear Governor Inslee,

We, the undersigned organizations are writing to urge you to do everything in your power to ensure that all of Washington’s children continue to have access to health care coverage. As our state faces the challenge of an economic recession and budget shortfall, we call on you and all Washington lawmakers to meet this crisis with well-informed policy decisions and progressive revenue solutions, NOT by undermining critical services to communities that have already been harmed by ongoing inequities.

We know you share these concerns, but we also understand that the unprecedented scale and breadth of our state’s economic shortfall will force untenable choices, and therefore we want to raise a particularly critical issue to your attention. Any cuts to our state’s health care coverage and delivery system during the global health crisis of the COVID-19 pandemic stand to devastate our communities, exacerbate long-existing racial and health inequities, and endanger public health. This is why our state cannot afford, under any circumstances, to take away health coverage from 20,000 of its children.

At issue is the Children’s Health Program (CHP). Thanks to CHP, children whose immigration status makes them ineligible for Medicaid/CHIP funded coverage can still enroll in Apple Health for kids.

We call on you to maintain this critical lifeline to health care as you build your budget proposal. The repeal of the 2007 Cover All Kids law and the elimination of CHP would discriminate against children based on their immigration status and would exacerbate existing health inequities faced by Latino/a, Pacific Islander, Asian, African and other immigrant children.

As you know, the establishment of the CHP contributed significantly to the Cover All Kids law’s effectiveness in reducing the number of children who are uninsured in Washington state and minimizing inequities in coverage faced by children of color. Between 2008 and 2016 the uninsured rate dropped from 18% to 4% for Latino/a children, from 9% to 2% for Asian Pacific Islander children, from 9% to 1% for Black children, from 9% to 3% for multiracial children, and from 6% to 2% for White children.

Access to health care coverage during a global pandemic is paramount. To promote child health and well-being, policymakers must ensure that acute and chronic conditions are diagnosed and treated in a timely manner, that health and development are adequately monitored, and that preventive services are provided as recommended – so that existing inequities aren’t exacerbated and our overburdened health care providers aren’t further strained.

Nationally, as we’ve seen with the COVID-19 pandemic, Latino/a, Black, Pacific Islander, and Indigenous children often bear the brunt of inequities in our health care system. The Centers for Disease Control and Prevention recently found that, of the 526 children hospitalized with COVID-19 between March 1, 2020 and July 25, 2020, and for whom race and ethnicity information were reported, 45.8% were Latino/a, 29.7% were Black, 14.1% were White; 4.6% were Asian or Pacific Islander; and four 0.8% were American Indian/Alaska Native.

We know the disproportionate impacts of COVID-19 and other illnesses on Black, Indigenous, and children of color are the result of centuries of institutional racism. We cannot undo the progress we’ve made towards rooting out these inequities. We must ensure that a child’s race/ethnicity or immigration status is no longer a predictor of their health and wellbeing. Protecting the Cover All Kids Law is critical to this effort.

Thank you for standing with Washington’s immigrant children and families and ensuring that all children have access to the health care coverage they need to be healthy and thrive.