CLASS ACTION LAWSUIT CHALLENGES UNLAWFUL TERMINATIONS OF CHILDREN'S HEALTH COVERAGE

A class action lawsuit was filed on Thursday, February 15, 2007 in the U.S. District Court for the Western District of Missouri to prevent the State of Missouri from cutting off the health insurance of needy low-income children who receive health coverage through Missouri's MC+ for Children Health Insurance Program. The lawsuit seeks to order the state of Missouri to notify MC+ for Children recipients of their right to appeal from erroneous terminations of health coverage, to receive MC+ while their appeal is pending, and if terminated, to have a review performed concerning whether they are eligible for much needed health coverage under another program.

Since September 2006, over 20,000 low-income Missouri children have been required to pay premiums to receive their health coverage. Of those, 3,000 children could have their benefits cut off for six months if their premium payments are late by even one day. Missouri also fails to provide these children with the opportunity for a fair hearing to resolve problems as is required by the Medicaid Act and the United States Constitution.

The named plaintiff in the case is a young girl who suffers from severe medical and psychiatric conditions which require ongoing medical treatment, including eleven different medications. As a result of problems with premium payments, through no fault of the plaintiff, the child's health coverage was terminated. She has had to forgo critical medications, several scheduled appointments with specialist doctors, and needed therapies. Others like her throughout the state do not have the opportunity to challenge the state's decision to disenroll them and are left without any continuity of care.

Attorneys with the National Center for Law and Economic Justice and the National Health Law Program have filed a motion for a preliminary injunction against the state of Missouri to ensure that Missouri's children receive the health benefits, and constitutional protections, to which they are entitled. "We simply want the State to provide people in need with notification of their right to appeal and to receive benefits while they are appealing. It's what the law requires," said Petra T. Tasheff of the National Center for Law and Economic Justice.

"It is troubling that Governor Blunt, who is such a staunch advocate for free market principles in health care, would allow the state to provide children protected by SCHIP with less leeway to pay their premiums than they would get from any private insurance company. I wonder whether he is even aware of this practice that results in so many children losing the coverage that they so desperately need," said Steve Hitov of the National Health Law Program.

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