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John C. Lewin, M.D.

January 15, 2009

The Honorable Harry Reid
Senate Majority Leader
United States Senate
Washington, DC 20510

Dear Majority Leader Reid:

On behalf of the 37,000 members of the American College of Cardiology (ACC), I am writing to urge passage of the Chairman's mark for the Children's Health Insurance Program Reauthorization Act of 2009. We wholeheartedly support the SCHIP bill as it has shown to provide health care to nearly 7 million low-income children. This legislation will secure coverage for an additional 3.9 million more uninsured children.

ACC is dedicated to expanding access to health insurance for the 47 million Americans who are currently uninsured. We feel that the reauthorization and expansion of SCHIP will not only continue to help those in need, but will also provide access to high quality care for 4 million additional children currently ineligible to qualify for this vital program. ACC believes that Congress must act on this important legislation before the March 31st expiration date to ensure that access is provided to our nation's most vulnerable population.

To fund this legislation, ACC supports an increase in the federal tobacco tax. Public health will benefit from the resulting higher tobacco costs and through the discouragement of smoking due to this essential increase in the tobacco tax. Using the resulting revenues to improve enrollment in children's health insurance programs will produce the necessary funding needed to provide coverage to those most in need.

However, ACC does not support any language, as was included in the House SCHIP legislation, to prospectively ban physician self-referral to hospitals in which they have an ownership interest to fund the SCHIP program. We do not believe that any advantage will arise from the limitations H.R. 2 would place on specialty hospitals. The ACC feels that creating roadblocks for the expansion of existing specialty hospitals and forbidding the creation of additional hospitals is not good public policy and that the resulting funds from such actions will not be able to adequately fund the SCHIP program.

ACC is deeply concerned about the impact that this potential move on specialty hospitals could have on patients and respectfully requests that when the SCHIP bill comes to Conference, that Congress continues to search for alternative funding mechanisms to appropriately fund the SCHIP program.

I offer the ACC as a resource as you continue to work to address SCHIP while ensuring patients receive the highest quality of care. If you have any questions or concerns, please feel free to contact Patrick Hope at phope@acc.org or (202) 375-9912.

Respectfully,

Jack C. Lewin, MD
Chief Executive Officer