Asthma Awareness Month offers great opportunities to connect relevant federal policy choices with the health of local children. An “op-ed” is a great way to connect the dots for readers on an important and timely policy debate: the future of the Children’s Health Insurance Program (CHIP). For most newspapers, an op-ed should be no longer than 650 words. To understand the guidelines for submitting a letter that are specific to your newspaper, check the paper’s website or call the editorial page staff. To maximize flexibility, this sample op-ed is drafted at 575 words. If your paper welcomes longer letters, consider adding a family story to strengthen your op-ed’s local connection.

Placeholders that you can fill in are listed below in Italics. If you want to doublecheck the local name of your state’s CHIP program, the Kaiser Family Foundation’s website includes a handy reference.

It’s Asthma Awareness Month, and many in our community are focused on the needs of an estimated Number State children living with asthma. But congressional inaction may soon make it harder for children with asthma to get the care they need.

With about one-in-ten children affected, asthma is the most common long-lasting, or “chronic,” health condition among children. Unmanaged, childhood asthma can be a serious health threat, often requiring hospitalization. In fact, asthma accounted for one out of every seven pediatric hospitalizations in 2006. And asthma attacks mean lost school days for kids and lost work days for many parents, putting a family’s economic security and a child’s academic progress at risk.

The Children’s Health Insurance Program (CHIP, called Localname in State) helps children get the care they need when their hard-working parents earn too much to qualify for Medicaid but too little to keep pace with rising insurance costs. Localname is especially important for children with asthma, because kids living with asthma or other long-lasting health conditions have a better chance to stay healthy with dependable and continuous health insurance. Localname – and Medicaid – are also critical because asthma is more prevalent among children from low and moderate-income families.

Localname also makes good economic sense. With Localname, kids get the regular doctor visits and medication they need, plus pediatricians can help parents learn how to mitigate the household and community “triggers” of asthma attacks. That combination of routine care and asthma management education often costs just a few hundred dollars a year, avoiding hospitalizations that often cost thousands apiece. And it works. Research shows that CHIP helps children with asthma avoid hospitalizations and other “acute” health care services, because their asthma attacks are less frequent.

And while the most important thing is that Localname is good policy that keeps kids healthy, it’s also good politics. CHIP was bipartisan from the start, created by a Republican-controlled Congress and a Democratic president. And public opinion surveys consistently show broad support for CHIP among Democrats, Republicans, and independents.

In fact, when it comes to CHIP, the biggest obstacle facing children with asthma is that many haven’t been enrolled yet. About half of the nearly 1.2 million asthmatic children in
America who are uninsured today are already eligible for CHIP. Their parents just don’t know about CHIP or don’t know they’re eligible.

You’d think that if an initiative responded effectively and efficiently to an important problem affecting real people, offered states flexibility and engaged the private sector, and had earned bipartisan public support, and faced a sizeable unmet need, Congress would rush to protect – even strengthen – it. Sadly, you’d be wrong. Funding for Localname will expire next year, unless Congress acts first. And so far, protecting Localname and other CHIP programs isn’t even on Washington’s agenda.

You can change that. Congress will be in recess later this month, so congressional representatives will be home giving speeches, hosting town meetings, visiting hospitals and schools. And since this is an election year, they’ll be campaigning for reelection.

This Asthma Awareness Month, make them aware of the critical difference Localname makes every day for children with asthma. Go to those speeches. Attend those town meetings. And ask questions at campaign rallies. Remind congressional candidates that they have an important role to play in protecting the health of children with asthma. And challenge them to protect Localname this year, so kids with asthma – and the families who love them – can breathe easier next year.