GOVERNORS WEARY OF FEDERAL TAB

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Body

Illinois spent more than \$ 140 million last year to keep illegal immigrants in hospitals, schools and jails. In California, the price tag was more than \$ 2 billion. The nation's *governors* are saying, "Enough."

"There has been a failure of national policy" to control the borders, said Gov. Mel Carnahan of Missouri. "The impact of that should not be borne by the states."

But because of <u>federal</u> requirements, the states do. The <u>federal</u> government requires the states to pick up half the health-care costs for emergency medical treatment for illegal immigrants and all the costs of educating or jailing undocumented aliens.

"Collectively, the costs that are imposed upon the states have reached a point where, in many states, we are no longer able to provide needed services to legal residents," said Gov. Pete Wilson of California. "And that is terribly wrong and unfair."

Illinois Gov. Jim Edgar added: "\$ 140 million is a lot of money, particularly when we have many programs that provide services for state residents that we can't fund as high as we'd like."

The National <u>Governors</u>' Association, which is holding its winter meeting in Washington this week, called Sunday for Congress and the White House to repeal <u>federal</u> mandates that require states to provide services to illegal immigrants without giving the states the money to pay for them.

Edgar, Wilson and the **governors** of Florida, New York and Texas will underscore that message today in a meeting with **federal** budget director Leon Panetta, Attorney General Janet Reno and the secretaries of health and education.

Edgar said he was not optimistic that the **governors** would get want they wanted. "But we want (**federal** officials) to realize their fiscal responsibility on a program they solely control."

Last year, Illinois spent about \$ 77 million sending the children of illegal immigrants to school in Illinois, \$ 24 million covering health care for illegal immigrants and \$ 46.6 million keeping illegal immigrants in state prisons - all federally required expenditures.

In addition, the state spent \$ 5.7 million on public health services such as immunizations and \$ 3 million on adult education for illegal immigrants. Those payments were not required by <u>federal</u> policy, but Edgar would like the <u>federal</u> government to pay for them, as well.

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Carnahan said illegal immigrants so far have not had a major effect on Missouri's budget. "But it is a legitimate issue."

And Wilson warned that the problem was spreading. "A spillover is beginning to occur already" as illegal immigrants migrate from border states such as California and Florida into New York, Chicago and other cities, he said.

There is "no basis in logic or fairness" for the states to pick up the <u>tab</u> for a <u>federal</u> immigration failure, Wilson said. "There was a time perhaps when people could ignore that. But that time has passed. The costs of providing these emergency health care services is simply exploding."

In California, the costs of health care for illegal immigrants rose "18-fold" between 1989 and 1993, said Wilson, a Republican. He has turned the issue into a centerpiece of his campaign for re-election.

But the sentiment for more <u>federal</u> aid won bipartisan support among the <u>governors</u>. Florida Gov. Lawton Chiles, a Democrat, has filed suit against the <u>federal</u> government seeking to force the <u>federal</u> government to pay for services for undocumented aliens.

And **governors** of both parties voted in favor of the call to repeal **federal** requirements that they provide services out of their own states' tax money.

The illegal immigrant debate was the latest example in what has become open warfare between the **governors** and Congress over **federal** requirements for services that are not matched by **federal** money to pay for them.

From Medicaid to environmental regulations to education programs, "we are raising a shrill cry for the need to contain" unfunded <u>federal</u> mandates, Carnahan said. "We are making that pitch on the Hill, with the White House and the administration. This has been an expensive habit that the national government has had, and it simply can't go on. It is eating up our ability to do our basic services on the state level."

Many **governors** fear that Congress and the White House will follow a similar pattern when they craft a health-care reform package. "There's a lot of frustration and anger about this health-care plan," said Wisconsin Gov. Tommy Thompson, a Republican.

The **governors** have been unable to agree on how far a reform proposal should go and how it should be paid for. But they want to make sure that the end result allows states to experiment and to put in place health-care systems that are not weighed down by excessive **federal** regulations, the **governors** said.

As the **governors** asked for more leeway, foremost in their minds was the Medicaid program, whose costs rose 31.3 percent in 1992 from 1991 and 28 percent in 1991 from 1990.

Today, states must ask for a waiver to bypass <u>federal</u> regulations and enroll Medicaid recipients in managed-care and other programs that save money by providing preventive care. The <u>governors</u> want to be able to adopt such programs without having to go through what they consider a burdensome waiver process.

Some **governors** take heart that one of their own - former Arkansas Gov. Bill Clinton - sits in the White House. Carnahan said the president already has listened attentively to his former colleagues.

But getting the president's ear is proving easier than getting *federal* money.

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