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## House of Representatives

The House met at 10:30 and was called to order by the Speaker pro tempore (Ms. MARKEY of Colorado).

### DESIGNATION OF SPEAKER PRO TEMPORE

The SPEAKER pro tempore laid before the House the following communication from the Speaker:

WASHINGTON, DC,  
March 23, 2010.

I hereby appoint the Honorable BETSY MARKEY to act as Speaker pro tempore on this day.

NANCY PELOSI,  
*Speaker of the House of Representatives.*

### MORNING-HOUR DEBATE

The SPEAKER pro tempore. Pursuant to the order of the House of January 6, 2009, the Chair will now recognize Members from lists submitted by the majority and minority leaders for morning-hour debate.

The Chair will alternate recognition between the parties, with each party limited to 30 minutes and each Member, other than the majority and minority leaders and the minority whip, limited to 5 minutes.

### DISINGENUOUS SAVINGS IN HEALTH CARE BILL

The SPEAKER pro tempore. The Chair recognizes the gentleman from Florida (Mr. STEARNS) for 5 minutes.

Mr. STEARNS. Good morning, Madam Speaker, my colleagues, I've come here this morning to talk about the health care bill. The Senate health care bill that we passed which honestly continues to spend far more than we can afford and at a rate faster than anyone could have imagined. The bill itself is chock-full of budget gimmicks to game the system to show that it's revenue-neutral. I am briefly going to outline this morning why it's not revenue-neutral. In fact, future Congresses will repeal some of these cuts in Medicare and some of those taxes, like the tax on certain Cadillac health care plans. The President indicated that he would veto any health care bill that created a dime, a penny of deficit. Well, Mr. President, I hope you are listening because I have gone through the scoring on the Senate health care bill, and it's chock-full of gimmicks, and in fact, this bill creates a deficit. Let's take a look at them.

These savings that the CBO scored will not be achieved, and let me first of all start by saying there's 10 years of taxes to pay for 6 years of benefits. That's one of the gimmicks we should understand. Many of the taxes will start immediately, yet the health exchange does not begin until 2014. The two large cost drivers are Medicaid expansion and the health care exchange, but there are only 6 years of the exchange costs in the budget window. So if we're going to have taxes for 10 years, and we're going to institute the program four years later, much later, then these will be cost savings obviously.

But once this thing gets going, after 10 years of taxes and 6 years of benefits, what happens after that? No one knows. Obviously there is going to be a deficit. That's the first thing I want to start out with. There are cuts throughout this healthcare bill to Medicare. But they are fiction. Let me give you an example. They have a 21 percent cut in what's called the SGR which is the sustained growth rate, or the funding rate for physicians. So they're going to cut physicians on their SGR by 21 percent, and they're going to do a 2 percent cut every year for the rest of the decade. So this would require a \$208 billion fix. Now is this going to occur? Remember now, we have just passed H.R. 3961, a doc fix. So they're already agreeing that we have to fix Medicare for doctors, yet they are going back

into this health care bill and cutting them even more to get cost savings realizing they will have to stop these cuts or devastate the Medicare program.

There are \$156 billion in cuts to the hospital market basket. Now this is the reimbursement formula used to calculate payment rates. Can we realistically expect to provide a negative cost increase to hospitals? Or are we creating another so-called SGR-type situation for hospitals in this bill? There is \$70 billion in what's called Community Living Assistance Services and Supports program. This is a new entitlement. It's an insurance program for assisted living programs. However, it does not collect enough revenues and pays out too little. It's estimated this program will become insolvent in 2020. Senator KENT CONRAD has called this a Ponzi scheme of the first order that would make Bernie Madoff proud. Another fictitious cost savings. There will be \$15 billion cut by the Independent Payment Advisory Board. This is an unelected body who will be able to force Medicare cuts and reforms throughout the system. But where are they going to cut? Congress can only vote to stop it if three-fifths of the Senate votes to stop the cuts. They have continually talked about a tax on Cadillac health care plans. They use this as a saving of \$32 billion. You know whose Cadillac health care plans we're talking about? We're talking about unions plans. They are the ones who will be affected. Do you think the Democrats are going to tax unions' Cadillac health care plans? That's not going to happen.

So I will tell you that once this gets passed, they're going to repeal this tax at future points. There are 10 years of taxes to pay for 6 years of benefits, as I mentioned earlier. The two large cost drivers are Medicaid expansion and the health care exchange, but there are only 6 years of the exchange costs in

□ This symbol represents the time of day during the House proceedings, e.g., □ 1407 is 2:07 p.m.

Matter set in this typeface indicates words inserted or appended, rather than spoken, by a Member of the House on the floor.



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