

Annette Rocheleau—Assistant Coach
Shannon Schweyen—Assistant Coach
Trish Duce—Assistant Coach

PLAYERS

Katie Baker
Kellie Cole
Kenzie De Boer
Hannah Doran
McCalle Feller
Shanae Gilham
Torry Hill
Alexandra Hurley
Molly Klinker
DJ Reinhardt
Maggie Rickman
Carly Selvig
Alyssa Smith
Rachel Staudacher
Jordan Sullivan
Haley Vining

HONORING OUR ARMED FORCES

STAFF SERGEANT STEVEN BLASS

Mr. GRASSLEY. Mr. President, I rise to pay tribute to the life of SSG Steven Blass, who was killed in a helicopter crash in Afghanistan while serving his country. My thoughts and prayers are with his wife Tricia, his young son Hayden, his parents, Randy and Carol, and all his family and friends. I know they are feeling his loss very deeply now, as is the entire community of Estherville, IA, his hometown. I understand that Steven Blass was patriotic even as a child and that joining the Army had been a dream of his. He was doing what he loved when he gave the ultimate sacrifice. His love of country and zeal for freedom represent the very best of America. Like all the patriots before him, his sacrifice has helped keep the torch of liberty burning bright. The United States of America is indeed fortunate to have a native son like Steven Blass, eager to serve his country and risk everything for his fellow citizens. We are forever in his debt. Although it is a debt which we can never repay, it is a debt we must honor by remembering SSG Steven Blass and what he did for all of us.

AFFORDABLE CARE ACT
ANNIVERSARY

Mr. WHITEHOUSE. Mr. President, this Saturday marks the third anniversary of the passage of the Affordable Care Act. At age 3, the law is protecting consumers against abusive insurance practices, helping seniors by lowering prescription drug costs, and building the infrastructure to expand health insurance coverage to millions of Americans. For the first time, patients' interests and needs are being put ahead of those of the insurance and drug companies.

The Obama administration has worked tirelessly to implement the law, in the face of constant opposition. My Republican colleagues in Congress have voted to repeal or defund the Affordable Care Act well over 30 times. It is a chilling, if useless, political refrain from the tea party.

On this third anniversary, it is important not only to reflect on how far

we have come but to continue pressing forward on the Affordable Care Act's many improvements to our health care system, particularly the delivery system reforms.

The Council of Economic Advisers' 2013 "Economic Report of the President" identified a number of sources of waste in our health care system, including the fragmentation of the delivery system; duplicate care and over-treatment; the failure of providers to adopt best practices; and payment fraud. The council notes:

Taken together, [these factors] have been estimated to account for between 13 and 26 percent of national health expenditures in 2011. The magnitude of this waste offers an equally large opportunity for spending reductions and improvement in quality of care an opportunity that underpins many of the provisions of the Affordable Care Act.

Thankfully, we have the tools necessary to seize the opportunity described by the Council of Economic Advisers to drive down costs and improve the quality of patient care. The Affordable Care Act included 45 provisions dedicated to improving the way we deliver health care in 5 priority areas: payment reform, primary and preventive care, measuring and reporting quality, administrative simplification, and health information technology.

The effort to extract from the wasteful swamp of our health care bureaucracy a lean, humane, patient-centered system is vital. National health spending hit \$2.7 trillion in 2011 or about 18 percent of GDP. The next least efficient developed country—the Netherlands—spent 12 percent of its GDP on health care in 2010. Germany and France spent 11.6 percent of their GDP on health care. If we were as efficient as the Netherlands, if we merely moved from last place to second-to-last place in health care efficiency, we would save over \$800 billion per year.

For all of our excess spending, one might expect that Americans live longer, healthier lives. But that is not the case. The Institute of Medicine recently compared the United States to 17 peer countries. We were worst for prevalence of diabetes among adults, worst for obesity across all age groups, and worst in infant mortality. We suffer higher death rates and worse outcomes for conditions such as heart disease and chronic lung disease.

According to the Week, avoidable infections passed on due to poor hospital hygiene kill as many people in the United States—about 103,000 a year—as AIDS, breast cancer, and auto accidents combined. These deaths are tragic because they are largely preventable. As we have shown in Rhode Island, when hospital staff follow a checklist of basic instructions washing their hands with soap, cleaning a patient's skin with antiseptic, placing sterile drapes over the patient, etc.—rates of infection plummet, and the costs of treating those infections disappear. The costs of treating the 100,000 who die, as well as the hundreds of

thousands who suffer nonlethal infections, disappear.

Delivery system reform has real promise in improving the management and prevention of chronic disease. These diseases accounted for 7 out of 10 deaths in the United States in 2011 and at least 75 percent of our health care spending.

I am not alone in saying that a correct diagnosis of the problem will lead us to delivery system reform. Gail Wilensky, the former Administrator of the Center for Medicare and Medicaid Services under President George H.W. Bush, said in 2011, "If we don't redesign what we are doing, we can't just cut unit reimbursement and think we are somehow getting a better system."

In the private sector, George Halvorson, chairman and CEO of Kaiser Permanente said, "There are people right now who want to cut benefits and ration care and have that be the avenue to cost reduction in this country and that's wrong. It's so wrong, it's almost criminal. It's an inept way of thinking about health care."

Saving money by reforming how we deliver health care isn't just possible, it is happening. At a 2011 hearing I chaired of the Senate Health, Education, Labor, and Pensions Committee, Greg Poulsen of Intermountain Healthcare said:

Intermountain and other organizations have shown that improving quality is compatible with lowering costs and, indeed, high-quality care is generally less expensive than substandard care.

So when Republicans say we must cut Medicare and Medicaid benefits to fix our deficit, that assertion is flat-out wrong.

Attacking Medicare and Medicaid is consistent with a particular political ideology, but it is not consistent with the facts. It ignores the fact that we operate a wildly inefficient health care system and that our health care spending problem is systemwide, not unique to Federal health programs. It is not just Medicare and Medicaid; former Secretary of Defense Robert Gates said of the Defense budget, "We're being eaten alive by health care."

The President's Council of Economic Advisers estimates that we could save approximately \$700 billion every year in our health care system without compromising health outcomes. The Institute of Medicine recently put this number at \$750 billion. Other groups are even more optimistic: The New England Healthcare Institute has reported that \$850 billion could be saved annually. The Lewin Group and former Bush Treasury Secretary Paul O'Neill have estimated annual savings of a staggering \$1 trillion. Most recently, the Commonwealth Fund laid out a set of policies that would accelerate health care delivery system reform and slow health spending by \$2 trillion over the next 10 years.

These savings will have a dramatic impact on the Federal budget. The Federal Government spends 40 percent of