

EXPRESSING CONGRATULATIONS
TO ROSA PARKS

HON. GEORGE MILLER

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, June 15, 1999

Mr. GEORGE MILLER of California. Mr. Speaker, today we honor Rosa Parks for her heroic acts that helped change race relations forever in this country. She lit a fire under the civil rights movement when on December 1, 1955 she bravely refused to give up her seat on a bus to a white man. Many other people were instrumental in the struggle, but her act of defiance of an unjust segregation law visibly rallied people together and helped change our nation.

Congress is awarding Mrs. Parks a Gold Medal because we are proud that she stood up for what was right and set in motion the chain of events which ultimately led to the Civil Rights Act of 1964 which ensured that all black Americans had the right to equal treatment under the law with white Americans.

We are proud that her arrest rallied people against segregation in a year-long bus boycott in Montgomery, Alabama that finally ended when the Supreme Court ruled that segregation of transportation was illegal.

Several years ago in Richmond, Calif., in my congressional district, I had the privilege to join with the Richmond NAACP to honor Rosa Parks at its annual dinner. She passed on her powerful story to younger generations of Americans who are working every day to achieve racial justice America.

This medal we bestow upon Mrs. Parks sends an important message not just about the history of the civil rights movement but about the struggles that our society faces today. The Gold Medal for Rosa Parks, I hope, is a message to all Americans to have the courage of your convictions and to stand up—or to sit down, whichever may be more appropriate—for what you believe is right. As Mrs. Parks wrote in her memoir, “our mistreatment was just not right, and I was sick of it.”

More than forty years after Mrs. Parks' arrest, despite significant improvements, racial divisions are still strong. They show up in all elements of society and are still reflected in the huge gaps between blacks and white in income and employment, in health and in educational achievement. Progress is being made, to be sure, but it is slow. These gaps should be intolerable to all Americans, not just to those who must suffer their consequences. Most recently, many of my colleagues here have also correctly denounced the practice of profiling, where police officers stop black motorists for no other reason than they fit the profile that the police have decided fits that of a criminal. Profiling is being challenged as violation of these motorists civil rights and this practice should indeed be brought to an abrupt halt.

As we thank Rosa Parks and honor her with a Congressional medal, we must also dedicate ourselves to carry out her dream of a just and tolerant society. Her bold action inspired thousands of Americans to join together to demand change. It should still inspire us to make our society a more just and humane place.

Many people have commemorated the courageous action of Rosa Parks, including the popular and very talented group, The Nevill

Brothers, who wrote a tribute to her. I could not agree with them more when they sing.

Thank you Miss Rosa
You were the spark
That started our freedom movement,
Thank you Sister Rosa Parks.

INTRODUCTION OF HEALTH INSURANCE FOR AMERICANS ACT OF 1999: LEGISLATION TO PROVIDE REFUNDABLE TAX CREDITS FOR THE PURCHASE OF HEALTH INSURANCE THROUGH A FEHBP-TYPE POOLING ARRANGEMENT

HON. FORTNEY PETE STARK

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, June 15, 1999

Mr. STARK. Mr. Speaker, the biggest social problem facing America today is that one in six of our fellow citizens have no health insurance and are all too often unable to afford health care.

About 44 million Americans have no health insurance. Despite the unprecedented good economic times, the number of uninsured is rising about 100,000 a month. It is unimaginable what will happen if and when the economy slows and turns down. One health research group, the National Coalition on Health Care, has estimated that with rising health insurance costs and an economic downturn, the number of uninsured in the year 2009 would be about 61.4 million.

The level of un-insurance among some groups is even higher. For example, in California it is estimated that nearly 40% of the Hispanic community is uninsured.

An article by Robert Kuttner in the January 14, 1999 New England Journal of Medicine entitled “The American Health Care System,” describes the problem well: “The most prominent feature of American health insurance coverage is its slow erosion, even as the government seeks to plug the gaps in coverage through such new programs as Medicare+Choice, the Health Insurance Portability and Accountability Act (HIPAA), expansions of state Medicaid programs, and the \$24 billion Children's Health Insurance Program of 1997. Despite these efforts, the proportion of Americans without insurance increased from 14.2% in 1995 to 15.3% in 1996 and to 16.1% in 1997, when 43.4 million people were uninsured. Not as well appreciated is the fact that the number of people who are under-insured, and thus must either pay out of pocket or forgo medical care, is growing even faster.”

Does it matter whether people have health insurance? Of course it does. No health insurance all too often means important health care foregone, with a minor sickness turning into a major, expensive illness, or a warning sign ignored until it is fatal. Lack of insurance is a major cause of personal bankruptcy. It has forced us to develop a crazy, Rube Goldberg system of cross-subsidies to keep the ‘safety net’ hospital providers afloat.

Mr. Speaker, what is wrong with us? No other modern, industrialized nation fails to insure all its people. I don't believe we are incompetent, but our failure to provide basic health insurance to all our citizens is a national disgrace.

Personally, I would like to see all Americans have health insurance through an expansion

of Medicare to everyone. I am also a co-sponsor of Rep. McDERMOTT's single payer type program, which is modeled on Canada's success in insuring all its people for about 30% less than we spend to insure only 84% of our citizens.

But these efforts are not likely to succeed in an conservative Congress or in a closely-divided Congress.

Therefore, yesterday I introduced legislation, H.R. 2185, to try another approach—a refundable tax credit approach—which I believe can be made to work and which is similar to a number of bills recently introduced by various Republican members.

Unfortunately, many of these earlier tax credit bills don't work. They either throw money at people who already have health insurance (e.g., 100% tax deductions for health insurance for small employers), provide a pitiful amount of money that wouldn't buy a fig leaf of a policy (e.g., a \$500 credit bill), or if they do provide enough money, waste it by providing no ‘pool’ or ‘wholesale’ market and forcing people into the retail market where insurance companies take 20–30% off the top, refuse to insure the sick, and raise rates on older people so that the credit is woefully inadequate.

The failures in these bills can be addressed. I think my proposal solves many of these problems. The idea of a tax credit approach to ending the national disgrace of un-insurance is a new one, however, and we desperately need a series of detailed, thoughtful hearings to design a program that will provide real help and not waste scarce resources on middlemen.

The Health Insurance for Americans Act I introduced:

Provides in 2001 and thereafter a refundable tax credit of \$1200 per adult, \$600 per child, and \$3600 total per family. These amounts are adjusted for inflation at the same rate that the Federal government's plan for its employees (FEHBP) increases.

The credit is available to everyone who is not participating in a subsidized health plan or eligible for Medicare.

The credit may only be used to buy “qualified” health insurance, which is defined to be private insurance sold through a new HHS Office of Health Insurance (OHI) in the same general manner that Federal employees “buy” health insurance through the Office of Personnel Management.

Any insurer who wants to sell to Federal workers through FEHBP must also offer to sell one or more policies through OHI. OHI will hold an annual open enrollment period (similar to FEHBP's fall open enrollment) and insurers must sell a policy similar to that which they offer to Federal workers (but may also offer a zero premium policy), for which there is no pre-existing condition exclusion or waiting period, for which the premium and quality may be negotiated between the carrier and OHI, and which must be community-rated (i.e., it won't rise in price as individuals age).

Mr. Speaker, a refundable tax credit sounds like an easy idea, but as in all things in America's \$1.1 trillion health care system, there are some serious problems that have to be addressed.

The major problems with a refundable credit are:

(1) How to get the money to the uninsured in advance, so that the uninsured, who tend to