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## House of Representatives

The House met at 12:30 p.m. and was called to order by the Speaker pro tempore (Ms. EDWARDS of Maryland).

### DESIGNATION OF SPEAKER PRO TEMPORE

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

WASHINGTON, DC,  
July 27, 2009.

I hereby appoint the Honorable DONNA F. EDWARDS 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.

### HEALTH CARE REFORM THAT PUTS PATIENTS FIRST

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from North Carolina (Ms. FOXX) for 5 minutes.

Ms. FOXX. Madam Speaker, President Obama recently held a televised press conference to discuss health care reform. As Republican JOHN BOEHNER noted last week, several of President Obama's points may not accurately reflect the health care legislation before the House.

The President said that the government will stay out of health care decisions. But that isn't how the legisla-

tion is shaping up. A simple amendment to the legislation that would have guaranteed that no bureaucrat will make any decisions or interfere with any decision between a doctor and a patient was rejected by the Democrats in control of the Energy and Commerce Committee. That doesn't bode well for government staying out of health care decisions.

President Obama also said that the plan will not add to the government's deficit. Of course we all know that the Congressional Budget Office has been throwing water on that idea for weeks. They've already estimated that the current plan will add \$239 billion to our deficit over the next 10 years.

And that deficit number is based on a provision in the plan that starts collecting taxes before the health care component kicks in, essentially offsetting a significant deficit with taxes collected before the bills start arriving. That means that after 10 years we will have a new structural deficit as the costs of this plan far outstrip the punitive taxes on small businesses.

But what really concerns me about this plan is Washington's history of underestimating costs of expensive plans like this.

If you look at this chart, based on research from Congress' Joint Economic Committee, you will notice that over the years congressional estimates of the cost of health care programs were extremely unreliable.

For instance, when Congress was considering Medicare part A, the hospital insurance component, Congress estimated it would cost \$9 billion by 1990. Actual cost in 1990? \$67 billion, seven times more than Congress estimated.

And the 1967 estimate for the entire Medicare program in 1990 was \$12 billion. Actual cost? \$111 billion, almost 10 times the original estimate.

Later, in 1987, Congress estimated that Medicaid's disproportionate share of hospital payments to States would

cost less than \$1 billion in 1992. Five years later the results were in: \$17 billion, which is an incomprehensible 17-fold increase over the estimate just 5 years earlier.

You get the idea. Government programs have a tendency to take on a life of their own and cost taxpayers way more than was originally estimated or envisioned. While I'm willing to allow for some margin of error in estimated costs—they are estimates after all—what concerns me is that we are starting out with estimates for huge deficits with this health care plan. At the same time, we are paying for it out of the pockets of America's job creators, the small businesses. If the current proposal becomes law, are we going to be coming back to these small business with another tax increase in 5 or 10 years?

We need health care reform that puts patients first and that won't destroy the small businesses that are a pillar of our economy. Republicans have a better solution that won't put the government in charge of people's health care, that will make sure that we bring down the cost of health care for all Americans and ensure affordable access for all Americans.

We should be considering the Republican plan and not this job-destroying Democrat plan.

### ADVANCE CARE PLANNING

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

Mr. BLUMENAUER. Madam Speaker, we in Congress and the new administration have been given a gift of serving in a time of opportunity to solve some of the long-festering problems with the American health care system. One opportunity to achieve true reform is to provide greater value to patients

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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