

AFFORDABLE HEALTH CARE FOR
AMERICA ACT

SPEECH OF

HON. STEVE ISRAEL

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

Saturday, November 7, 2009

Mr. ISRAEL. Mr. Speaker, I rise in support of the Affordable Health Care for America Act. I join the American Cancer Society, the American Medical Association, the American Nurses Association, Consumers Union, AARP, and many other organizations in the strong belief that this bill will bring financial relief to middle class families and businesses who have faced skyrocketing costs for health care.

In the past months, I have listened carefully to the families and businesses I represent on Long Island. I held many public forums on health care; visited businesses facing double digit premium increases; met with physicians and toured hospitals; invited protesters into my office to hear their concerns; convened a tele-town hall that attracted 5,000 senior citizens; hosted another tele-town hall meeting with nearly 11,000 people; organized a live town hall meeting at Suffolk Community College with 500 people; made hundreds of personal phone calls to constituents; and much more.

People with strong opinions on opposite sides of this issue have insisted that I listen to them, believing that they represent a majority of our community. And at the end of the day, I believe strongly that we can no longer do business as usual. In the past 10 years, Long Islanders have seen their health insurance premiums increase 80 percent. And if we do nothing, the average Long Islanders' health costs will increase \$1,800 every year.

Employer-sponsored health insurance premiums have increased 80 percent in 10 years for Long Island businesses. As a result, more companies are forced to cut payroll, trim raises, or increase employee contributions. Some have told me if this continues, they will have to begin considering offering no health insurance.

And almost every week, my office in Hauppauge receives complaints from neighbors who were denied insurance coverage due to preexisting conditions. They complain about "sticker shock" when they open their insurance company statement and learn that they'll have to pay for a greater share of services they assumed were covered.

In a region with unacceptably high property taxes and energy costs, we simply cannot afford to allow health care to continue skyrocketing.

The original bill did contain provisions that concerned me. As a result of my town meetings and other visits, I was able to help improve the bill.

For example:

Many Long Islanders complained that the original family income trigger for the surtax that will fund nearly half of this bill was too low. I successfully fought to raise the trigger to \$1 million per family. As a result, no Long Island family with earnings less than \$1 million will see a surtax to pay for this bill.

I worked to increase the trigger for small business health care from \$250,000 to \$500,000 in payroll.

Many seniors in Medicare Part D prescription drug plans asked for faster relief from the

so called "donut hole." In 2010, they will receive an immediate \$500 expanded benefit. That will assist 8,000 seniors in our district alone.

To lower drug costs, I fought to include a provision allowing the Department of Health and Human Services to negotiate volume discounts with big drug companies, just like the VA does.

I sought to increase funding for the Family Caregiver Support program to help Americans who take care of their parents or grandparents.

Some argued that insurance should be sold across State lines. This bill would allow companies to sell plans across State lines where States joined together to form interstate compacts to allow it.

Before accessing the newly created Health Insurance Exchange, one's citizenship and immigration status will be verified by the Department of Homeland Security.

Mr. Speaker, I have heard some insist that this bill represents a government takeover of health care. It is simply not true. All the bill does is give Long Islanders the choice to enter into a competitive Health Insurance Exchange to shop for a health insurance plan—just like every Member of Congress. There, private companies will compete for one's business. Among those private businesses will be a "public option" which must be self-sufficient and funded from premiums paid by its enrollees. That option will not need to worry about dividends or profits, CEO salaries or expensive marketing campaigns. It will compete against the private plans: just like public colleges compete against private colleges, just like ExpressMail competes against FedEx, just like Perrier competes against the Suffolk County Water Authority. I haven't heard anyone call the water they drink from their faucets "socialist water". And I've not heard any reasonable person call Medicare socialized health care. The reason the public option is so vital is that its lower costs will incentivize insurance companies who have doubled their premiums to be more price sensitive in order to attract customers.

Finally, Mr. Speaker, a special word for those who have demanded that I "listen to them." We tend to see the world through our own eyes, leaving very little room for what may be outside our vision. People on polar opposites of this issue have understandably demanded that I "listen to them." Both claim to represent a majority of Long Islanders. I don't pay much attention to polls, Mr. Speaker, but a recent poll in Newsday indicated that 70 percent of Long Islanders support the public option. I will say that after that poll, some of the same people who demanded I listen to the majority told me the majority doesn't know what it's talking about so I should ignore it.

I made a final judgment by listening carefully to everyone. I fought and delivered improvements in this bill. Is it perfect? No. Government can never be perfect, and I'll continue to demand that it be more competent. But this bill, for the first time, will give Americans more choice and control over a virtual health insurance monopoly and will finally end the days when someone who has faithfully paid their premiums from hearing that their diabetes, their cancer, their children's autism, are no longer covered.

JO LYNN OSBORNE

HON. ED PERLMUTTER

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

Monday, November 16, 2009

Mr. PERLMUTTER. Madam Speaker, I rise today to honor and applaud Jo Lynn Osborne for her outstanding service to our community.

Jo Lynn Osborne has served as an advocate for the rights of the disabled since 1980. She began her career as a secretary at the Arc in Jefferson County where she quickly moved into program development. In 1989 she created the Mobilizing Families program, which has won national awards and has been translated into several languages.

The dedication demonstrated by Jo Lynn Osborne directly benefits her community, and is exemplary of her high personal and professional standards. Through individualized advocacy, Jo Lynn Osborne has personally helped thousands of individuals and families achieve greater levels of independence.

Today Jo Lynn Osborne is interim executive director for the Arc in Jefferson County, an active member of the Alameda West Kiwanis Club, and a strong community leader.

I extend my deepest congratulations once again to Jo Lynn Osborne for her recognition by the West Chamber of Jefferson County. I have no doubt she will exhibit the same dedication and character in all her future accomplishments.

TRIBUTE TO LANDSTUHL RE-
GIONAL MEDICAL CENTER HOS-
PITAL PERSONNEL**HON. IKE SKELTON**

OF MISSOURI

IN THE HOUSE OF REPRESENTATIVES

Monday, November 16, 2009

Mr. SKELTON. Madam Speaker, I rise today to personally thank and commend the 2,837 personnel—including Army, Air Force, Navy, Marine Corps, and Department of Defense civilians and contractors, and coalition liaisons from Canada, Poland, Jordan, and Australia—of the Landstuhl Regional Medical Center in Germany.

These dedicated folks do yeoman's work in providing world class comprehensive care to our warriors wounded in Operation Iraqi Freedom and Operation Enduring Freedom and to more than 52,000 American military personnel and their families in the Kaiserslautern Military Community. They also provide specialized care to nearly 245,000 American military personnel and their families throughout the European Theater.

I can personally attest to the phenomenal work done at Landstuhl. During a visit to Iraq over Thanksgiving 2005, Congressman TIM MURPHY and I were injured in a motor vehicle accident. After receiving excellent care at the Combat Support Hospital in Baghdad, we were moved by C-17 to Landstuhl. I spent several days in room 7 of the Intensive Care Unit there. It is not an understatement to say that the care I received was outstanding. I am sure any of our troops who have been treated there and their families would attest to the same.

Along with my committee's ranking member, BUCK MCKEON, I will soon be leading a congressional delegation to visit wounded