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CONGRESSMAN LIPINSKI VOTES 'NO' ON SENATE HEALTH CARE BILL

March 21, 2010

Today, Congressman Dan Lipinski (IL-3) released the following statement regarding his decision to vote against the Senate health care bill:

"My decision to vote against the Senate health care bill is the result of months of studying our broken health care system, developing and analyzing various proposals for reform, studying legislation, and listening closely to my constituents. I want to thank each and every one of the thousands of Third District residents who contacted me by phone, fax, email, and in person to share their views for and against the bill.

"As I have said many times, I strongly believe reform is needed to lower soaring health care costs and make insurance coverage more affordable and accessible for individuals and working families. But reform must be done right. The Senate bill does make a number of improvements to our health care system, including expanding access and reforming health insurance by doing such things as immediately banning discrimination based on pre-existing conditions for children, prohibiting lifetime coverage limits, and banning rescissions. Unfortunately, the bill also contains a number of serious flaws, and many of the good aspects could have been done without passing this massive bill. The Senate bill does not do enough to lower the skyrocketing cost of health care, cuts more than \$400 billion from Medicare, is not fiscally sustainable over the long term, and breaks with the status quo by providing federal funding for abortion and abortion coverage. This bill was also marred by backroom deals that benefit pharmaceutical companies and other special interests. In the final analysis, I cannot support such a deeply flawed bill.

"Last November, after successfully fighting to make numerous improvements to the initial House health care bill, I voted to move the measure forward. I did so because I did not want to give up on reform, and because I believed we might still be able to fix the flaws in the bill before a final vote. However, I made my position very clear at the time, stating: 'If this bill does not improve when it comes back from the Senate, I will vote against it.' Unfortunately, the final bill is in many ways worse, not better, than the House legislation.

"To deserve the name of reform, a bill of this magnitude ought to make major progress on reducing health care costs, which continue to increase at unsustainable rates. Since 1980, overall spending on health care has risen on average at almost twice the rate of inflation, and per capita health care spending is nearly double what it was 10 years ago. Unless we address these increases, health care will continue to gobble up more and more of people's income, and more and more of our tax dollars, until we reach a breaking point. Government subsidies alone cannot solve the problem of the increasing burden that skyrocketing health care costs impose on middle class Americans. We must change payment incentives for providers and this bill does not accomplish that.

"As the Congressional Budget Office has stated, the Senate health care bill would do little to affect the cost of premiums for those who currently get their health care through large employers. Since 70 percent of Americans who are not on Medicare are in this group, this bill fails to sufficiently reduce costs for the majority of working families in the Third District. The Senate bill also does not include several specific measures that were in the House bill that could increase competition. These include the elimination of the health insurance industry's anti-trust exemption and a provision to begin to require health care providers to disclose their prices.

"I am also concerned that the bill's more than \$400 billion in Medicare cuts could have ramifications for seniors in my district. For instance, the Senate bill reduces Medicare reimbursements to providers – such as hospitals, skilled nursing facilities, and home health agencies – by over \$200 billion. The Chief Actuary of the Center for Medicare and Medicaid Services has stated that these cuts would likely result in roughly 20 percent of providers becoming unprofitable; this could lead to providers refusing to take care of seniors on Medicare. And if these cuts are going to be made to Medicare, the money should at least be put in the Medicare Trust Fund instead of being spent elsewhere as this bill does. In addition, unlike the House bill, the Senate bill does not allow the government to negotiate for lower drug prices, which I have long supported.

"I am also greatly concerned about the impact of this bill on our ballooning deficit. While the Congressional Budget Office has stated that the bill would officially reduce the deficit, close inspection of this analysis reveals serious problems. The CBO counts as deficit reduction over \$70 billion in premiums that will be paid into the newly created CLASS Act. This well-intentioned program to provide long-term care for people with disabilities should be keeping this money in a trust fund to pay out future benefits instead of being spent elsewhere. And even if these premiums were kept in a trust fund, CBO states that the CLASS Act is fiscally unsustainable after two decades, when benefit payouts will significantly overwhelm the premiums coming in. Further, \$29 billion in increased Social Security receipts are counted towards deficit reduction although they ought to remain in the Social Security Trust Fund.

"The bill also does not address this year's scheduled 21 percent cut in Medicare reimbursements to

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doctors; when Congress votes to do this, likely later this year, it will cost over \$200 billion over the next 10 years. Also, the CBO score assumes that in later years, the growth in federal subsidies would suddenly be allowed to decline, and that the tax on middle-class insurance plans – which I and many others already oppose – would be expanded. If Congress will not do these things today, why would it do so tomorrow? Taken together, these elements more than wipe out the supposed savings.

“Finally, of great concern to me and to a significant majority of my constituents, this bill changes current federal policy and provides funding for abortion. This is not acceptable. It is in direct contradiction of the Hyde Amendment, which for more than three decades has prohibited federally funded abortion. First, the bill allows federal funds to subsidize health plans in the insurance exchanges that cover abortion. For any insurance plan that receives federal subsidies and provides abortion, all participants would be required to contribute at least \$1 per month that would fund abortion services, regardless of whether they want abortion coverage or not. It also opens the door for Community Health Centers receiving federal funding under the bill to use that money to pay for abortion. I do not believe the last minute effort to address these concerns through an Executive Order is sufficient because there is every indication that federal courts would strike down this order, and the order could be repealed at any time in the future.

For all of these reasons, I cannot support the health care bill. I am deeply disappointed that Congress did not develop a better bill. But whatever this bill's fate, I will not stop fighting against special interests and for improvements to our health care system that will benefit all of the residents of the Third District. And in the days, weeks, and months ahead, I will continue working to create jobs and revive our economy.”

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