DO NO HARM

The mission of Congress and the Obama administration should be the same as a doctor treating a patient: do no harm.

by Bob Corker, November 3, 2009

As we approach health care reform, the mission of Congress and the Obama administration should be the same as any doctor treating a patient: Do No Harm. So I'm bewildered when I see that the Senate Finance Committee's healthcare reform bill (which, as of today, is the likely basis for a final health reform product) could cost taxpayers almost a trillion dollars and actually result in HIGHER healthcare costs for millions of Tennesseans.

A study by Oliver Wyman and sponsored by Blue Cross Blue Shield of America indicates that "cluster 4" states, including Tennessee, would see a 60 percent expected increase in average claims per member. According to data based on the report, current average premiums in Tennessee would increase by $1,619 for individuals and $3,727 for families under reforms contained in the finance bill.

And that's not the only issue with the bill. Here are three more concerns.

First, Tennessee Governor Phil Bredesen estimates the finance bill would cost Tennessee $735 million in Medicaid expansion, a huge unfunded mandate that creates a very difficult situation for our state. My guess is that most other states would face a similarly painful situation if these costs are passed down.

Second, the bill seeks to take $404 billion away from Medicare, which is predicted to be insolvent by 2017, and leverages it to create a new entitlement program rather than using it to make Medicare more solvent. I honestly don't know how Congress has moved from broad, bipartisan concern over Medicare's $38 trillion in unfunded liabilities — liabilities that threaten our country's financial stability — to now embracing a proposal that would take cuts made to Medicare and use them to leverage a new program to cover the uninsured, rather than putting the funds toward extending the life of Medicare.

And finally (for now) is the issue of bill S. 1776, which would end the way doctors are reimbursed for treating Medicare beneficiaries. (Here's a brief history lesson: under current law, reimbursement levels are subject to change each year because of the Sustainable Growth Rate (SGR) formula. The SGR system, established in 1997 with the support of the

continued on page 4

continued from page 3

American Medical Association to constrain costs, sets a spending cap for the entire Medicare program each year, and if overall spending exceeds that level — which it has, every year, since 2002 — Medicare physician fees are cut to bring expenditures in line with the SGR target. The issue has left every Congress since 2002 scrambling to prevent drastic pay cuts to physicians who treat Medicare patients, and if this Congress does not act before this year's end, doctors' payments will be reduced by 21 percent.)

I have consistently voiced strong support for a permanent solution to the "SGR" or "doc fix" issue and expressed frustration that the healthcare reform bills before Congress ignore the problem and continue to kick the can down the road. It's irresponsible, and our seniors, and the doctors who care for them, deserve better. But S. 1776 is a two-page bill that eliminates the SGR payment model without replacing it with another and adds the $246.9 billion in costs directly to our deficit. According to news reports, the Obama administration and Democratic leadership in Congress offered S. 1776 as a quid pro quo to buy the American Medical Association's support of healthcare reform. I have to say this may be the most sinister, selfish, and short-sighted solution I have seen in my two years and 11 months in Washington. Fortunately, 13 of my Democratic colleagues recognized what a sinister piece of legislation this was, and in a 47-53 vote on October 21, the U.S. Senate rejected moving forward with the bill.

If this first vote of the healthcare debate is a sign of what's to come, all Americans should keep their antennas up and continue to watch very closely as the healthcare debate unfolds.

Like most Americans, I want to see responsible healthcare reform that will stand the test of time, but paying for it by sending unfunded mandates to states, taking money from Medicare to fund new federal entitlements, and passing off costs to future generations does not pass the common sense test. ■

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