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Congress of the United States House of Representatives Washington, DC 20515–2107

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Dear Committee Members:

Thank you for writing regarding your views on H.R. 676, the "Expanded and Improved Medicare for All Act." I believe that we need universal health care. Health care should be a right, not a privilege and we do need to adopt federal legislation to ensure all Americans the ability to enjoy what should be a fundamental right.

The United States has the highest GDP in the world. We are first in military technology; first in military exports; first in the number of millionaires and billionaires; and first in health technology. Nevertheless, we rank 18th in life expectancy, 37th in the health status of our citizens and we have the highest rate of infant mortality in the industrialized world.

Because of our inefficient and inequitable health care system, 45 million Americans lack insurance and another 50 million Americans are underinsured. People who are uninsured or underinsured are sicker, die younger and have a harder time accessing care than people who have health coverage. According to the Institute of Medicine (IOM), 18,000 Americans die each year because they do not have insurance.

These failures are unacceptable. I believe that America has a moral obligation to ensure that <u>everyone</u> regardless of income, age, or ethnicity has access to high-quality, affordable health care. Not only is universal health care the right thing to do, according to the Institute of Medicine, covering all Americans will actually save the country \$380 billion a year.

Accomplishing the goal of universal health care will require dramatic reforms to be made in our current health care system. The good news is that the business community, the taxpayers and a growing number of Americans now recognize that we have a real chance to build a historic coalition in support of major health care reform. The recent success in our own state, in which political differences did not prevent the adoption of legislation intended to provide health insurance to every citizen, is indicative of the new climate in favor of reform.

I am a strong supporter and cosponsor of several key democratic proposals to reform the health care system and ensure universal health care, including the Kennedy/Dingell "Medicare for All" act (S. 2229/H.R. 4683) and Rep. Jan Schakowsky's H. Con Res. 410 to enact legislation that provides access to comprehensive health care for all Americans. H. Con Res. 410

would commit the Congress to enact legislation by October 1, 2008, to guarantee that every person in the United States, regardless of income, age, or employment or health status, is entitled to receive all medically necessary care.

You have asked me to cosponsor the "Expanded and Improved Medicare for All Act" (H.R. 676). While I am a vigorous supporter of the goals of H.R. 676, and have the utmost respect for its author, Rep. John Conyers (D-MI), I am not prepared to cosponsor the bill in its current form because in my view it would have the unintended consequence of undermining the goal of universal health care that we all seek.

In particular, I am concerned that H.R. 676 will dismantle the successful Medicare Trust Fund and replace it with a funding mechanism that would subject federal support for universal health care to the annual appropriations process. Putting the entire health care system on the annual appropriations process means that Congress would have to vote each year how much should be spent on health care. This would place the new system in great jeopardy and make it highly vulnerable to damaging riders or filibusters by conservative opponents of universal health care. If Congress provided an insufficient amount of funds for the operation of the health care system in any given year, those who are least able to advocate for themselves—the poor, the sick and the elderly—would be hurt the most. This would be the opposite of what we are trying to achieve.

Further, if our opponents wanted to discredit the whole concept of a single payer plan, they could make sure it didn't work by starving the system of funds necessary to adequately support the system. While this problem will exist even if we preserve the Medicare Trust Fund, eliminating the Trust Fund in favor of annual appropriations makes this cynical attack much easier.

In order to ensure that universal health care is successful, I believe we need to guarantee a steady and reliable funding mechanism that is not subject to the whims of the annual appropriations process. The Medicare Trust Fund provides such a reliable funding mechanism, we should not dismantle it and replace it with a system that is far less certain and has the potential to undermine the goals of the legislation.

As you know, I have expressed my concerns to Rep. Conyers, and I will continue to work with him to find an approach that promotes a single-payer system without conceding the end of the Medicare Trust Fund. Such an approach would be more likely to attract the support we will need to make legislative progress. If you have any questions about my position, please do not hesitate to contact Kate Reinhalter at 202-225-2836 or Joe Dalton at 781-396-2900. I look forward to working with you to further the goal of universal healthcare.

Sincerely,

Edward J. Markey

Member of Congress