

Remarks at the Opening Session of a Bipartisan Meeting on Health Care Reform

February 25, 2010

The President. Good morning, everybody. Welcome. Thank you so much for participating today. I am very grateful to all of you because I know how busy you are.

What I want to do is just make a few brief remarks on the front end, and then we're going to allow leadership from both the House and the Senate to make some opening remarks, and then we will dive in.

Last year, obviously, was one of the toughest years we've had on record, and all of us in one way or another were devoted to focusing on breaking the back of the recession, restoring economic growth, putting people back to work. We've still got a long way to go. And so I know both the House and the Senate are interested in how do we propel economic growth forward, how do we create more jobs. I was very pleased to see a glimpse of bipartisanship in the Senate recently in passing a jobs bill, and I hope that continues. And I know there are going to be some additional pieces of legislation moving forward around, for example, making sure that small businesses can get financing. And those are the kinds of things that I think all parties and both Chambers should be able to agree to. So I'm very much looking forward to working with you on all those issues.

I have said repeatedly—I said at the State of the Union, I said last night when I was meeting with the Business Roundtable—that in addition to dealing with the immediate challenges we face in the recovery, it's absolutely critical that we also look at some fundamental structural problems in our economy that are hurting families, hurting businesses, and having an impact on the exploding deficits and debts that the Federal Government, but also State governments are carrying. And it's for that reason that last year, around this time actually, I hosted in the White House a health care summit and indicated to Congress that it was absolutely critical for us to begin now moving on what is one of the biggest drags on our economy and represents one of the biggest hardships that families face.

Some of you know that I get 10 letters, out of the 40,000 that I receive every day, for me to take upstairs to the residence and read every single night. And these are letters from all across the country, constituents from every walk of life. And I can tell you that at least 2, sometimes 5, of the 10 letters relates to the challenges that people are experiencing in health care every single day. I'll get letters from parents who—whose children have preexisting conditions, and maybe those children were able to get health insurance when they were young, but now they're growing up, they're about to move out, and they can't get insurance no matter what job they find.

I hear from small businesses who have just opened up their new rates from their insurance company, and it turns out that the rates have gone up 20, 30, in some cases 35 percent. I hear from families who have hit lifetime limits, and because somebody in their family is very ill, at a certain point they start having to dig out of pocket, and they are having to mortgage their house and in some cases have gone bankrupt because of health care.

So this is an issue that is affecting everybody. It's affecting not only those without insurance, but it's affecting those with insurance. And when you talk to every single expert and you just talk to ordinary people and you talk to businesses, everybody understands that the problem is not getting better, it's getting worse. Right now it's projected that premiums for families with health insurance—not people without health insurance, but with health insurance—will almost certainly double over the next decade, just as they doubled over the past decade.

In the individual markets, it's even worse. Businesses are having to make decisions about just dropping coverage altogether for their employees. If they're not doing that, then the money that they are spending on health care is money that otherwise could have gone to job creation.

And I don't need to tell people here about the effects on the Federal budget. We've got some people who've been working a very long time on figuring out how can we control the huge expansion of entitlements. Almost all of the long-term deficit and debt that we face relates to the exploding costs of Medicare and Medicaid—almost all of it. I mean, that is the single biggest driver of our Federal deficit. And if we don't get control over that, we can't get control over our Federal budget.

Now, I'm telling all of you things you already know. Maybe more personally, I should just mention the fact that I now have about as good health care as anybody could have. I've got a doctor right downstairs. And all of us—when I was in the Senate—and all of you as House and Senate Members have good health care. But remember maybe when you were younger, when you were first starting off. I can certainly remember Malia coming into the kitchen one day and saying, “I can't breathe, Daddy,” and us having to rush her to the emergency room because she had asthma, or Sasha, when she was a baby, getting meningitis and having to get a spinal tap and being on antibiotics for 3 days, and us not knowing whether or not she was going to emerge okay. In each of those instances, I remember thinking, while sitting in the emergency room, what would have happened if I didn't have reliable health care.

My mother, who was self-employed, didn't have reliable health care, and she died of ovarian cancer. And there's probably nothing that modern medicine could have done about that. It was caught late, and that's a hard cancer to diagnose. But I do remember the last 6 months of her life—insurance companies threatening that they would not reimburse her for her costs and her having to be on the phone in the hospital room arguing with insurance companies when what she should have been doing is spending time with her family. I do remember that.

Now, everybody here has those same stories somewhere in their lives. Everybody here understands the desperation that people feel when they're sick. And I think everybody here is profoundly sympathetic and wants to make

sure that we have a system that works for all Americans.

You know, I was looking through some of the past statements that people have made, and I think this concern is bipartisan. John McCain's talked about how rising health care costs are devastating to middle class families. Chuck, you've been working on this a long time. You've discussed the unsustainable growth on—in Medicare and Medicaid in our budget. Mike Enzi, who's worked on this and partnered with Ted Kennedy on a range of health care issues as a chairman of the committee, you said that small businesses in your home State are finding it nearly impossible to afford health care coverage for their employees. And you said that the current system's in critical condition. And, Mitch, you've said that the need for reform is not in question. And obviously, there are comparable studies on the Democratic side as well.

So here's the bottom line: We all know this is urgent. And unfortunately, over the course of the year, despite all the hearings that took place and all the negotiations that took place and people on both sides of the aisle worked long and hard on this issue and—this became a very ideological battle. It became a very partisan battle. And politics, I think, ended up trumping practical common sense.

I said at the State of the Union, and I'll repeat: I didn't take this on because I thought it was good politics. This is such a complicated issue that it's inevitably going to be contentious. But what I'm hoping to accomplish today is for everybody to focus not just on where we differ, but focus on where we agree, because there actually is some significant agreement on a host of issues.

I mean, I've looked very carefully at John Boehner's plan that he put forward. I've looked at Tom Coburn and Senator Burr's plan that's been put out there. Paul Ryan has discussed some of the issues surrounding Medicare. I've looked at those very carefully. Mike Enzi, in the past, you've put forward legislation around small businesses that are very important.

And so when I look at the ideas that are out there, there is overlap. It's not perfect overlap,

it's not 100 percent overlap, but there's some overlap. Now, what I did, what the White House did several days ago, is we posted what we think is the best blend of the House and the Senate legislation that's already passed.

The basic concept is that we would set up an exchange, meaning a place where individuals and small businesses could go and get choice and competition for private health care plans the same way that Members of Congress get choice and competition for their health care plans. For people who couldn't afford it, we would provide them some subsidies. But because people would have some pooling power, the costs overall would be lower because they'd be in a stronger position to negotiate.

We think it is a plan that works with the existing system, the employer-based system, the private health care system, but allows a lot of people who currently don't have health care to get health care, and more importantly, for the vast majority of people who do have some health care, it allows them to get a better deal.

We also have some insurance reforms in there that, for example, prohibit people who have preexisting conditions from being banned from getting coverage. We also talk about how we can help to make the Medicare system more effective and provide better quality care.

In each of these cases, there are corresponding ideas on the Republican side that we should be able to bridge. So I promise not to make a long speech. Let me just close by saying this: My hope in the several hours that we're going to be here today, that in each section that we're going to discuss—how do we lower costs for families and small businesses, how do we make sure that the insurance market works for people, how do we make sure that we are dealing with the long-term deficits, how do we make sure that people who don't have coverage can get coverage—in each of these areas, what I'm going to do is I'm going to start off by saying, here are some things we agree on, and then let's talk about some areas where we disagree and see if we can bridge those gaps.

I don't know that those gaps can be bridged. And it may be that at the end of the day, we come out of here and everybody says, "Well, you know, we have some honest disagreements.

People are sincere in wanting to help, but they've got different ideas about how to do it, and we can't bridge the gap between Democrats and Republicans on this."

But I'd like to make sure that this discussion is actually a discussion and not just us trading talking points. I hope that this isn't political theater, where we're just playing to the cameras and criticizing each other, but instead are actually trying to solve the problem.

That's what the American people are looking for. As controversial as the efforts to reform health care have been thus far, when you ask people, should we move forward and try to reform the system, people still say yes. They still want to see change. And it strikes me that if we've got an open mind, if we're listening to each other, if we're not engaging in, sort of, the tit for tat and trying to score political points during the next several hours, that we might be able to make some progress. And if not, at least we will have better clarified for the American people what the debate is about.

So with that, I just want to say again how much I appreciate everybody for participating. And I am going to now turn it over to Senator McConnell so that he can make some opening remarks. And we'll just go back and forth between the Democratic leaders and the Senate—and the Republican leaders, House and Senate, and then we'll just open it up, and we'll start diving in. All right?

Senator A. Mitchell McConnell. Thank you very much, Mr. President. John Boehner and I have selected Lamar Alexander of Tennessee to make our opening framing statement, and let me turn to him.

Senator Lamar Alexander. Thanks, Mitch and John. Mr. President, thank you very much for the invitation.

The President. Absolutely.

Sen. Alexander. We appreciate being here. Several of us were part of the summits that you had a year ago, and so I've been asked to try to express what Republicans believe about where we've gotten since then.

As a former Governor, I also want to try to represent Governors' views. They have a big stake in it. I know you met with some Governors just the last few days.

The President. Yes.

Sen. Alexander. And we believe that we—our views represent the views of a great number of the American people who have tried to say in every way they know how—through town meetings, through surveys, through elections in Virginia and New Jersey and Massachusetts—that they oppose the health care bill that passed the Senate on Christmas Eve.

[At this point, Sen. Alexander made brief remarks, concluding as follows.]

So if we can do that—start over—we can write a health care bill. It means putting aside jamming it through. It means working together the way General Marshall and Senator Vandenberg did. It means reducing health care costs and making that our goal for now and not focusing on the other goals. And it means going step by step together to re-earn the trust of the American people. We'd like to do that, and we appreciate the opportunity that you've given us today to say what our ideas are and to move forward.

Thank you very much.

The President. Well, thank you, Lamar. Both I and Lamar went a little bit over our original allocated time. [Laughter] I—not wanting to be a hypocrite, I wanted to give you some slack. We're going to have Nancy and Harry—I think my understanding is you guys want to split time. We'll split it up, and so we'll let them make some quick remarks.

What I will then do is just address—John, are you going to make the presentation yourself? Okay. What I will then do is just address a couple of points that were raised by you, Lamar, in terms of process, and then we will start diving in and getting to work. All right?

Nancy.

Speaker of the House of Representatives Nancy Pelosi. Yes, Mr. President. Thank you very much for bringing us here today. I will try to stick to the time because we have many people to hear from.

The President. Right.

Speaker Pelosi. Thank you, Mr. President, again. It was almost a year ago, March 5 of last year, when you brought us together in a bipar-

tisan way to set us on a path to lower cost, improve quality, expand access to quality health care for all Americans. In the course of that time, in our committees in the House and the Senate, we've had lively discussions. Here we are today.

[Speaker Pelosi made brief remarks, concluding as follows.]

We started this 6 weeks after your Inauguration, just 6 weeks after your Inauguration, on March 5, with you extending a hand of bipartisanship. And many of the provisions that are in our bill are initiatives put forth by the Republicans; others of our colleagues will talk about this.

But I just hope that as we sit around this table, we understand the urgency that the American people have about this issue, how it affects not only their health but their economic security. And I thank you, Mr. President, for your leadership in getting us to this place.

Senator Harry M. Reid. Mr. President, my friends in the House and in the Senate, I want to spend a few minutes talking about Nevada, about our country, and not what's going on here in Washington. I want to start by talking about a young man by the name of Jesus Gutierrez. He works hard. He has a restaurant in Reno, Nevada. He had everything that he wanted, except a baby. He had health insurance. He had employees that liked him. But he was fortunate; they were going to have a baby, and it was going to be a little girl. And the baby was born, and in just a few minutes after the birth of that baby, he was told that the baby had a cleft palate. "But that's okay," he was told. "We can take care of that." And they did. They did some surgery on the baby, and he was happy—that is, Jesus was happy—until he got his mail 4 months later, opened the envelope, and the insurance company said, "We didn't realize that your baby had a preexisting disability. We're not covering the \$90,000 in hospital and doctor bills you've already run up." So he's trying to pay that off. The baby needs a couple more surgeries. This shouldn't happen to anyone in America. He had health insurance. He paid his premiums.

[*Sen. Reid made brief remarks, concluding as follows.*]

I know, it's obvious, we've heard it; our Republican friends oppose our legislation. And that is your right. But also, it becomes your responsibility to propose ideas for making it better. So if you have a better plan for making health insurance more affordable, let's hear it. If you have a better plan for making health insurance companies more accountable, let's face it—let's work on it. If you have a better plan for doing this while cutting the deficit, as our bill did—during the first 10 years, our bill cuts the deficit by \$132 billion; the second 10 years, up to \$1.3 trillion. Those aren't my numbers; they're from Congressional Budget Office.

So we're ready to listen. I so appreciate the President getting us together. I want the Amer-

ican people to know that we need to work together, and I want to do everything that I can as a Senator to work with my colleagues on both sides of the aisle to get this done. We need to do health care reform.

I've spoken with Madam Speaker on many occasions, numerous times, about health care. We spent most of the last year talking about health care. I so admire her tenacity, her legislative brilliance. And I will do everything I can, Mr. President, to get this health care reform over the goal line.

NOTE: The President spoke at 10:06 a.m. in the Garden Room at the Blair House. In his remarks, he referred to Sen. Charles E. Grassley; and Rep. John A. Boehner.

Remarks in a Discussion on Cost Containment at a Bipartisan Meeting on Health Care Reform February 25, 2010

The President. Well, thank you very much, Harry. Everybody went a little over time, which is not surprising with a room full of elected officials. I wanted to give people a little bit of a wide berth starting off, but we're going to need to be more disciplined moving forward if we're going to be able to cover every item. And I'll try to set the example here.

I just want to address very quickly, Lamar, the issue of process that you raised at the beginning, and then we'll move on and start talking about the specifics. As I listened to your description of the House-Senate bill, as well as the proposal that I put on our web site, obviously there were some disagreements about how you would characterize the legislation.

On the other hand, when I listened to some of the steps that you thought Republicans would be open to, I thought, well, a bunch of these things are things that we'd like to do and, in fact, are in the legislative proposals.

So part of the goal here, I think, is to figure out what are the areas that we do agree on, what are the areas where we don't agree, and at the end of that process then make an honest assessment as to whether we can bridge these dif-

ferences. I don't know yet whether we can. My hope is that we can, and I'm going to be very eager to hear and explore how we might be able to do so.

So rather than start at the outset talking about legislative process and what's going to happen in the Senate and the House and this and that, what I'd suggest is let's talk about the substance, how we might help the American people deal with costs, coverage, insurance, these other issues. And we might surprise ourselves and find out that we agree more than we disagree. And that would then help to dictate how we move forward. It may turn out, on the other hand, there's just too big of a gulf, and then we'll have to figure out how we proceed from there. So that would be my proposal.

And what I'd like to do, then, is to start first with something I heard everybody agree on, every single speaker, and that was the issue of cost. It is absolutely true that if all we're doing is adding more people to a broken system, then costs will continue to skyrocket and eventually somebody is going to be bankrupt, whether it's the Federal Government, State governments, businesses, or individual families. So we have to