

Children's Health Care Bill



Senator Bob Corker (R-TN)

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-- Senate Floor Statements - September 27, 2007

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Mr. CORKER. Mr. President, I thank the Chair. I will try to use less time. I know we have a lot of business today. I rise also to talk about the SCHIP bill we just voted on for cloture, and hopefully, later this evening, we will have the opportunity to vote on final passage. I have been here a short amount of time, and I continue to be amazed at some of the rhetoric that ends up circling much of the legislation we discuss in the Senate. I do not think the SCHIP bill is perfect. I am going to vote for the SCHIP bill. I haven't been in the Senate long enough in 8 1/2 months to have actually ever voted for a perfect bill. Chances are I may never vote for a perfect bill in the Senate. I know this bill has been threatened to be vetoed. Again, I think about the irony of a bill such as this being vetoed by the administration.

The most recent health care legislation that I remember passing out of this body that was a large bill was Medicare Part D. As I remember, that was a bill where nothing was paid for. We added \$700 billion to \$800 billion in deficits. There was no attempt whatsoever for that to be paid for. It also created coverage for individuals who did not need coverage. It didn't matter. We passed a massive bill. I was not here during that time, but it passed several years ago.

The uniqueness of this bill is that there has been an attempt to actually pay for it--something unique in recent times as it relates to health care coverage. Secondly, it actually is health care for people who need it, which is also very different from some of the things we have focused on in the past. So I find it very ironic that this administration has chosen this bill to veto.

I have heard a lot of comments about the frailties of this, and one of the most recent red herrings regarding this bill was that it would allow illegal immigrants to receive health care. That is absolutely not true. But based on the standard of this argument that was put forth recently, we certainly need to ensure that immediately we would do away with Social Security, Medicare, and Medicaid because they would be held, of course, to a standard that cannot be met. That is an argument which obviously is not true.

I also heard that this bill had earmarks in it. I have looked and I can't find any earmarks in this bill. There is a hospital in Tennessee, down on the Mississippi-Arkansas border, and it happens to deal with low-income citizens who come there from Mississippi and Arkansas. So this bill allows that hospital to be paid Medicaid reimbursement for the patients it sees from Mississippi and Arkansas. If that is the new standard for earmarks in this body, then I suppose every comment or statement we make will now become an earmark.

I have also heard the comment that this is the backdoor to socialized medicine. I really think that one is maybe the most humorous I have heard. I do wish to bring this body's attention to the fact that the Bush administration--the Bush administration--since it has been in office has approved these waivers and state plan amendments: in June of 2004 to California, allowing them to go to 300 percent of poverty, again above the intent of the original SCHIP bill; in Hawaii, in January of 2006, allowed the State, through executive prerogative, to go to 300 percent; in Massachusetts, in July of 2006, this administration allowed that State to go to 300 percent; in Missouri, in August of 2003, this administration allowed them to go to 300 percent; in New York, in July of 2001, this administration allowed them to go to 250 percent; in Pennsylvania, in February of 2007, just a few months ago, to 300 percent; in West Virginia, in December of 2006, to 220 percent. But the one I have left is the one that is most recent.

This administration, without any legislative involvement, in March of 2007--a few months ago--agreed to let the District of Columbia go to 300 percent of the poverty level. So for those people to say this bill is a back door to socialized medicine, it seems to me they have not taken into account the front door of the Bush administration, which all along has allowed nine states to expand their programs beyond the original intent of the SCHIP program. This bill actually causes this out-of-control process that has been ongoing during the Bush administration to actually be reformed. It actually causes reforms to take place so this bill will more fully embrace its original intent.

So I rise to say there is a lot of rhetoric that is being used in this SCHIP bill. This bill is not perfect. I know my colleagues on the other side of the aisle would like to see changes in this bill. I would like to see changes in this bill. I think it could have had a more credible debate had the administration initially funded this in their budget with an appropriate amount of money to even allow the program as it is to continue.

I will vote for this bill. I am not going to argue to any of my colleagues as to what they should do. I will vote for this bill because I believe it focuses on those most in need--children--mostly poor children in our country.

What is actually moving our country toward socialized medicine is the fact that none of us in this body have yet taken the steps to make sure that those most in need have access to private, affordable health care. I know there are a number of bills that have looked at that. I have offered a bill--again, it is not perfect--and I hope Members of this body will actually cause it to be improved by adding amendments. But the fact of the matter is, what will move our country toward socialized medicine is not this SCHIP bill, which focuses on poor children in America, but it will be the lack of action in this body to create methodologies, which we could do, to allow people in need to have access to private, affordable health care.

Ms. STABENOW. Will my colleague yield for a question?

Mr. CORKER. Yes.

Ms. STABENOW. First, I thank the Senator for his comments on the floor of the Senate, debunking what has been inaccurate statements that have been made and also for laying out the realities of what is true about this proposal. I think the Senator has done it in a wonderful way. I appreciate the Senator's willingness to stand up and talk about what is real, important, and the fact that this is such a strong bipartisan bill.

I wonder if the Senator might comment on the fact that aren't we talking about working families, low-income working families, trying every day to keep things together for their family, and they want to know that the children have health care? Isn't that what this is all about?

Mr. CORKER. That is exactly what the bill is about. There is no doubt--and I think we should all acknowledge this--that there are some cases in some States where there has been an aggressiveness to actually cause some adults to be covered who should not be covered. In this bill, focusing toward 2010, there is an effort to reform that, to cause the focus to return back to children.

Also, there is no question that this administration, which offers the fact that they are going to veto this bill, has done more to change the dynamics of SCHIP than any legislation that we could pass.

I yield the floor.