



For Immediate Release  
November 17, 2010

Contact: Scott Mulhauser/Erin Shields  
(202) 224-4515

**Hearing Statement of Senator Max Baucus (D-Mont.)  
Regarding New Patient Protections to Strengthen Medicare and Medicaid**

Montesquieu said:

“All [people] are born equal, but they cannot continue in this equality. . . . [T]hey recover it only by the protection of the law.”

When it comes to health care, the Affordable Care Act gives seniors, patients and health care consumers historic protections in the law.

The new law protects seniors by helping to ensure that they get the right care, when they need it.

The old system, before health care reform, was failing too many seniors.

Take Christine Brown. Christine’s father had a blister on his toe that became infected. It would not heal.

Christine and her father tried everything. Every doctor they went to prescribed a different antibiotic.

No one coordinated his care. There was no electronic record of his medications.

After several months without anyone managing his care, it was too late.

The infection had spread. The only way to save his life was to amputate his leg.

Christine’s father is now confined to a wheelchair, for the rest of his life — all because of a blister — all because no one coordinated his care.

The new law protects patients like Christine’s dad. The new law helps doctors coordinate and communicate with each other.

The old system, before health care reform, was failing too many seniors who get hospitalized.

Yesterday, the HHS Inspector General released a report. The I.G. found that nearly a quarter of seniors hospitalized suffer some form of adverse event in the hospital. And almost half of those are preventable.

The new law helps protect patients from preventable adverse events. Under the new law, Medicare and Medicaid will crack down on hospitals that don’t prevent infections.

Before reform, nearly a fifth of hospitalized seniors were back at the hospital and re-admitted. When patients leave the hospital, they don’t want to come back. They should receive the follow-up care that they need to stay well, and to stay out of the hospital.

The new law protects patients from needless readmissions. Medicare will protect seniors by penalizing hospitals that don't treat patients right the first time.

The old system, before health care reform, has been failing health insurance consumers.

Far too frequently, insurance companies would drop coverage when patients get sick.

The new law protects patients from this and other insurance company abuses.

Far too frequently, insurance company executives would use premium dollars for lavish CEO bonuses, instead of patient care.

The new law requires health insurance companies to spend at least 80 percent of the premiums that they collect on providing health care. And the new law puts a limit on funds for administrative costs, salaries and CEO bonuses.

The old system, before health care reform, was failing the Medicare trust fund. Before health care reform, Medicare would have been bankrupt by 2017. Medicare would have gone broke in six years.

The new law protects Medicare from going broke. The new law extends the life of Medicare by an additional 12 years.

In the old system, before health care reform, health care costs were out of control.

In the last eight years, average wages have increased just 20 percent. But the average cost of employer-sponsored health coverage has doubled. Family health insurance premiums have tripled.

The new law will protect American families against these increasing costs.

The new law transforms Medicare payment from paying for quantity to paying for the high quality care that seniors deserve.

What does paying for quality mean?

Paying for quality means protecting seniors from duplicative tests. It means protecting seniors from unnecessary procedures that waste time and money. It means empowering doctors with electronic medical records that put patients' information at their fingertips.

Paying for quality means providing doctors with the latest evidence. That way, doctors and patients can make the best-informed decisions.

Paying for quality means investing in primary care, so that seniors have an advocate to help them navigate the health care system.

What does paying for quality not mean?

Paying for quality does not mean cutting benefits that seniors are guaranteed.

Paying for quality does not mean a one-size-fits-all Washington solution. Medicare and Medicaid must seize upon the innovations that work at the local level.

And paying for quality does not mean interfering with the doctor-patient relationship. The doctor-patient relationship is sacred.

The old system, before health care reform, was failing to crack down on fraud and abuse.

The new law protects the taxpayer, by giving law enforcement officials new tools to combat fraud.

The new law puts an end to wasteful overpayments to private insurance companies that participate in Medicare.

These overpayments to Medicare Advantage plans used to cost the program tens of billions of dollars every year.

Under the new law, seniors in Medicare are protected. Seniors can feel confident that Medicare dollars will benefit patients, not line the pockets of insurance companies.

The new law slashes wasteful payments.

And it does so without taking away a single guaranteed benefit under Medicare.

I want to say that again, because it's important.

Health reform protects the Medicare program, without taking away a single guaranteed benefit.

In fact, the new law adds benefits like a lifetime of free annual checkups and closing the donut hole.

The old system, before health care reform, was failing seniors, patients, and health care consumers.

The new law gives them historic protections.

Repealing the new law would return us to the failures of the old system.

Repealing the new law would cause Medicare to go broke in just six years.

Repealing the new law would increase the deficit by hundreds of billions of dollars.

Repealing the new law would put insurance company bureaucrats back in charge of health care.

And repealing the new law would threaten seniors' health with duplicative care and poor coordination.

Today, we hear from the point man on the new law. We hear from the Administrator of the Centers for Medicare and Medicaid Services, Dr. Don Berwick.

Under the new law, CMS is charged with strengthening Medicare and Medicaid. He's in charge of making Medicare and Medicaid more efficient, and modernizing them for the 21<sup>st</sup> century.

Dr. Berwick, the Affordable Care Act provides the protection of the law. We look forward to hearing how you'll carry it out.

###