



# Committee On Finance

Max Baucus, Ranking Member

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## **Statement of U.S. Senator Max Baucus Spending Reconciliation Markup Before the Senate Finance Committee**

The winds and waters of Hurricane Katrina did not take Emanuel Wilson's life. But Hurricane Katrina did take his job. And as a result, Hurricane Katrina washed away his health coverage.

Emanuel Wilson has intestinal cancer. But he does not qualify for Medicaid. Emanuel Wilson survived one of America's worst natural disasters. But he does not fit into the right pigeon-hole to get America's health care.

Mr. Wilson put it this way:

"I went to Medicaid. And the lady I talked to let me know that Medicaid is mostly if you're disabled or pregnant. I don't want to become disabled. And I don't think I can become pregnant. So that leaves me out in the cold."

Mr. Chairman, I commend you for working with me to write a bill — S. 1716 — that would cover Mr. Wilson, temporarily, under Medicaid.

Our bill would help him get back on his feet. Our bill would give him the health coverage that he needs.

But unfortunately, we are not marking up that bill today. Instead, we are marking up a package to respond to a budget instruction written months before Katrina. We are marking up a bill that would cut \$10 billion out of the resources that this nation devotes to health care.

Mr. Chairman, I know that you have worked hard on this budget reconciliation bill. You have threaded a very difficult needle.

I commend you for your diligence, and for including important proposals that you and I have worked on including advancing payment for quality in Medicare and extending the moratorium on specialty hospitals.

These provisions should improve health care quality and lower Medicare costs in the years to come.

This mark also curbs managed care overpayments. It covers disabled kids. And it prevents a physician payment cut that could impair access to care.

But the dire health-care needs caused by Hurricane Katrina go mostly unaddressed.

Now the bill before us contains a provision that would give some help to states caring for Katrina victims. But the bill before us would not cover Mr. Wilson.

The bill does not provide coverage for tens of thousands of evacuees who are ineligible for Medicaid. It does not help the health-care providers who have given charity care in the aftermath of the hurricane. And it does not relieve the financial plight that the Gulf Coast states, especially Louisiana, face. I am disappointed by these omissions.

Moreover, I am concerned about the fate of the bill we debate today. Although many of its policies are sound, I am not confident that most will survive a conference with the House.

As you know, the House Republican Leadership has been pushing for deeper spending cuts in health programs.

Those same leaders plan to disregard the investments and improvements this mark makes in Medicaid and Medicare, while advancing several troubling policies.

Policies such as increased cost-sharing that could hurt Medicaid beneficiaries. Cuts to child care, child support, and child welfare. Increased work requirements for welfare recipients.

I don't believe these policies move our nation toward a stronger safety net for the poor in this time of need.

So faced with a \$10 billion savings target for budget reconciliation, and the prospect that this target may grow, I must decline.

Rather than cutting \$10 billion from Medicaid and Medicare, we should be investing \$9 billion to fund our Katrina health bill.

Mr. Chairman, you have performed a thankless job admirably. You have produced a balanced mark that achieves several important ends.

But 8 weeks ago yesterday, Katrina made landfall. 8 weeks ago today, the levees broke. And 8 weeks later, I cannot in good conscience join in cutting health care, when Congress has left the health-care needs of Katrina's victims unaddressed.

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