



Some reporters are treating Sen. Grassley's comments this week that a bipartisan health care bill should have more than a few Republican votes as news. In fact, Sen. Grassley has made similar comments for months. Here are four examples.

(1) May 7, 2009, Des Moines Register, excerpt here, full transcript below:

Grassley said he understood Obama to reject that tack - a significant development as Baucus and **Grassley** work to pass a bill out of committee before July.

"It's the difference between passing a bill by 51 or 52 votes versus 70 to 80 votes," **Grassley**, a Republican, said in the interview. "If you're doing something that significant, it ought to be pretty **bipartisan**."

(2) June 28, 2009, ABC News, excerpt here, full transcript below:

SENATOR CHARLES **GRASSLEY** (REPUBLICAN)

You stated my position accurately when you were interviewing Mr Axelrod. That when we're restructuring 16% of our economy, that's what **health** care is. And when we're affecting every person in this country because this is every person in this country then we ought to have **bipartisan** support. Senator Baucus, my chairman, that I'm working with on a **bipartisan** proposal, wants it to be overwhelmingly passed in the United States Senate. And that means bipartisanship. Just not 3 or 4 Republicans going along with 58 Democrats. But a sizable number of Republicans. And I think we have the capability of doing that, if people put policy ahead of politics. And remember, policy is the best politics. Now, I forgot your other question.

(3) July 22, 2009, CQ transcripts, Senator Grassley conference call with Iowa reporters, excerpt here, full transcript below:

GRASSLEY: OK, well, it's not bad for anybody, because if people want us to do health care reform, they don't want to rush it through. They want it to be a very thoughtful process.

And -- and, remember, you talk about health care reform, but as I just indicated, you're talking also about restructuring 16 percent of the economy. That ought to be done in a thoughtful way. We ought to know exactly what we're doing. And it ought to be done on a -- I hope on a bipartisan basis that, when you're doing something that gigantic, that there's a broad consensus that what you're doing is the right thing to do.

And that's just not a Republican approach or a Democrat approach. It ought to be from 80 people in the center of the Senate, I would think.

(4) July 28, 2009, Fox News Channel, excerpt here, full transcript below:

MS. SKINNER: Senator, I just have a few seconds left. But I know you've been on the record as saying this is such an important issue, you should get 80 votes in the Senate. It should be that much of a **bipartisan** compromise.

Is that a pipe dream at this point?

SEN. **GRASSLEY**: Well, 80 might be, but I don't think it's wrong to think of getting somewhere between 70 and 80. But I want to make clear to you and anybody else that's concerned. Bipartisanship from my standpoint is not three Republicans, the three that are negotiating now and 58 Democrats to get 61 votes. I told the chairman and I think I've told your people that I'm not going to be a part of that.

We've got to get a broad base of support. When you're restructuring one-sixth of the economy, it ought to be done on a consensus basis. And one measure of consensus is broad **bipartisan** support.

Federal News Service
July 28, 2009 Tuesday
Des Moines Register (Iowa)
May 7, 2009 Thursday

Obama's **bipartisan** course on **health** care reform pleases **Grassley**

BYLINE: THOMAS BEAUMONT

SECTION: NEWS; Pg. 5

LENGTH: 261 words

tbeaumont@dmreg.com

Iowa Sen. Charles **Grassley** came away from a White House meeting Wednesday with the idea President Barack Obama would push Democratic leaders in Congress to pass **health** care legislation with **bipartisan** support.

"I would say that I got a great deal of confidence that the White House prefers a **bipartisan** agreement," **Grassley** said in an interview after the lunch meeting called by Obama.

The meeting also involved Vice President Joe Biden and Senate Finance Committee Chairman Max Baucus, a Montana Democrat.

Grassley, the ranking Republican on the Finance Committee, has been working with Baucus to craft **bipartisan** legislation to provide all Americans with **health** insurance. **Grassley** said he told Obama he hoped the president would take a lead role in encouraging broad support for their bill, beginning to take shape on Capitol Hill.

"The implication was that the president needs to be in the center of this thing to move things along," **Grassley** said.

Democratic leaders have not ruled out trying to pass sweeping **health** care reform this year through the process known as reconciliation. The tactic allows the leadership to curtail debate and potentially block minority Republicans' input.

Grassley said he understood Obama to reject that tack - a significant development as Baucus and **Grassley** work to pass a bill out of committee before July.

"It's the difference between passing a bill by 51 or 52 votes versus 70 to 80 votes," **Grassley**, a Republican, said in the interview. "If you're doing something that significant, it ought to be pretty **bipartisan**."

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June 28, 2009 Sunday

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REPORTERS: GEORGE STEPHANOPOULOS (WASHINGTON, DC USA)

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CONTENT: CHARLES **GRASSLEY**, ENERGY REFORM, **HEALTH** CARE

GEORGE STEPHANOPOULOS (ABC NEWS)

(Off-camera) And as we bring in Senator **Grassley**, here's a look at how supporters of the President's plan are trying to pressure the senator in his home state of Iowa.

NARRATOR (COMMERCIAL)

That's the President's plan. Keep the coverage you have now. Or choose from a range of plans. Including a public **health** insurance option to lower costs and keep insurance companies honest. Why is Senator **Grassley** opposed to giving you a choice? Tell Senator **Grassley**, it's your **health**. It should be your choice.

GEORGE STEPHANOPOULOS (ABC NEWS)

(Off-camera) And Senator **Grassley** joins us now from Waterloo, Iowa. Thanks for joining us this morning, Senator. You heard that commercial. The President's supporters trying to pressure you in your home state. You also heard David Axelrod on the President's preferences for what should be in the plan. Bottom line, is there any kind of public **health** insurance option you can accept? And will the plan you negotiate, meet the President's pledge not raise taxes on people earning under \$250,000 a year?

SENATOR CHARLES **GRASSLEY** (REPUBLICAN)

Well, a Democratic senator has come forth with a co-op plan that if it's along the lines of what we have known co-ops in this country, for 150 years. And that would definitely bring additional competition into the insurance industry. I think that if it's structured along those lines, that we could have yet a different option than what we presently have. And we're looking at that. And we're trying to get a **bipartisan** agreement on that. And if it doesn't touch the concerns that we have about federal control of **health** and leading towards a Canadian-style, single-payer system, then I think it can get **bipartisan** support. But let me assure you, that we're trying to find a **bipartisan** compromise in this area, as well as every other area. And I'm not so sure that the competition is the major thing we have to deal with in order to get a **bipartisan** compromise. George, if I could say what the overall view of my party and most everybody in Congress is, is to make **health** insurance affordable and accessible. And when we say accessible, we mean taking away the discrimination that comes from pre-existing conditions. And when we say affordable, affordable for people that have pre-existing conditions. And also affordable for low-income people. And lastly, to bend the curve of growth of **health** care. Because we can't keep on this gigantic increase in **health** care costs that we have.

GEORGE STEPHANOPOULOS (ABC NEWS)

(Off-camera) But how about this question of how to pay for it? You know, you saw the President during the campaign said he's not going to support any tax increase for people earning under \$250,000 a year. But you and other senators, including some Democratic senators, are working on this plan that would take away some - or cap the tax deductions for some **health** insurance that employers provide. Can that commitment the President made be kept? Or will you have to raise taxes on people earning under \$250,000?

SENATOR CHARLES **GRASSLEY** (REPUBLICAN)

From the standpoint of the President, saying that he doesn't want to do that, I think it's going to take presidential leadership to get people of his party to see that we shouldn't be subsidizing high-end **health** insurance policies that drive up inflation and **health** insurance, maybe one or two percentage points of the seven or eight that it goes up every year. So, I'm asking, and I think the White House knows my view and the view of a lot of other Republicans. Since the President denigrated John Cain's - John McCain's effort to move in this direction during the campaign. It's going to take, in order to win over Republicans, presidential leadership in that direction. Let me give you the overall view, though, for financing. We Republicans and most Democrats believe that it ought to come from within the **health** care industry. So if you read about \$1 trillion, we are talking about reshuffling dollars within **health** care to make **health** care affordable for people that don't have it. And for high-end - high-cost **health** insurance. And, and, we, we want to bring money from within **health** care, reshuffle it. So, we're going to get money from the high-end **health** insurance policies. And then, we're going to save hundreds of millions of dollars within Medicare, that's being wasted. Just as one example, we just - the, the administration announced that they just arrested a dozen people that were involved in \$52 million of fraud within Medicare. We've got to do things about that. And shifting money from it being wasted to more useful sources within, within **health** care is the direction that we're going to go. All from within **health** care. Not from outside of **health** care.

GEORGE STEPHANOPOULOS (ABC NEWS)

(Off-camera) Let me turn to the issue of energy. You heard Mr Axelrod talk about the House passage of the cap and trade legislation. He says that this Republican charge that this is a tax increase is a phony issue. And he challenged Republicans, including you, to come up with an alternative.

SENATOR CHARLES **GRASSLEY** (REPUBLICAN)

Yeah. Before I answer that question, I want to comment one thing on Mr Axelrod said about Republicans input into the **health** committee's bill. He says they put in 83 amendments. Let me assure you, those were no policy - changes in policy. Those were strictly technical. And Republicans are not going to be hoodwinked into that being a **bipartisan** bill. Now to answer your question...

GEORGE STEPHANOPOULOS (ABC NEWS)

(Off-camera) Well, let me just follow up on that then. You don't buy the White House definition of bipartisanship?

SENATOR CHARLES **GRASSLEY** (REPUBLICAN)

You stated my position accurately when you were interviewing Mr Axelrod. That when we're restructuring 16% of our economy, that's what **health** care is. And when we're affecting every person in this country because this is every person in this country then we ought to have **bipartisan** support. Senator Baucus, my chairman, that I'm working with on a **bipartisan** proposal, wants it to be overwhelmingly passed in the United States Senate. And that means bipartisanship. Just not 3 or 4 Republicans going along with 58 Democrats. But a sizable number of Republicans. And I think we have the capability of doing that, if people put policy ahead of politics. And remember, policy is the best politics. Now, I forgot your other question.

GEORGE STEPHANOPOULOS (ABC NEWS)

(Off-camera) He said that the issue of taxes on the energy plan is a phony issue. That it's a negligible tax increase. And he did point to these Congressional Budget Office numbers which show it's only about \$150 in 2020, for an average family.

SENATOR CHARLES **GRASSLEY** (REPUBLICAN)

Well, you have to give the Congressional Budget Office because they're like god around Washington when they say something. But I'll tell you, earlier this year, we had economists telling us that when you filter all these increases in energy, through every step of the economy, manufacturing a product or whatever services might come, we have come out with about \$3,000 for a family of four. Now, I won't argue \$175 versus \$3,000 because that's not the most important issue. You got to look at what's happening to our economy. If we put this very strong tax on energy. The people that have been complaining for ten years, about the outsourcing of manufacturing jobs to China, are the very same ones pushing cap and trade. And you're going to find signs on manufacturing doors, if this bill passes, that says moved - gone to China. So, what we have to do is make sure China, the number one emitter of CO2, not the United States, China is. And India, right along with them. We've got to have an international agreement, so that we have a level playing field for American manufacturing. So, we don't outsource anymore jobs. This should be done in a way that affects China, the same way it affects the United States. Because if the United States moves ahead by itself, we're not only going to lose those jobs, but the point is, after 30 or 40 years, we're going to reduce CO2, by less than 1%. So, we've got to do it on an international basis, George.

GEORGE STEPHANOPOULOS (ABC NEWS)

(Off-camera) Okay. Senator **Grassley**. Thank you very much for your time this morning. I appreciate it. Good to have you back.

SENATOR CHARLES **GRASSLEY** (REPUBLICAN)

Thank you.

GEORGE STEPHANOPOULOS (ABC NEWS)

(Voiceover) "The Roundtable" is next. With Paul Krugman, Peggy Noonan, Kathleen Parker and Michael Eric Dyson. And later "The Sunday Funnies."

CONAN O'BRIEN (HOST)

People were shocked because Republicans traditionally don't do well with Hispanic women.

COMMERCIAL BREAK

GEORGE STEPHANOPOULOS (ABC NEWS)

(Off-camera) We will be right back with "The Roundtable" and "The Sunday Funnies."

ANNOUNCER

"This Week" with George Stephanopoulos from the Newseum in Washington, DC will continue in a moment after this from our ABC stations.

COMMERCIAL BREAK

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SEN. CHARLES E. GRASSLEY, R-IOWA, HOLDS A NEWS TELECONFERENCE

July 22, 2009 Wednesday

EVENT DATE: July 22, 2009

TYPE: NEWS CONFERENCE

SPEAKER: SEN. CHARLES E. GRASSLEY, R-IOWA,

WITNESSES:

SEN. CHARLES E. GRASSLEY, R-IOWA

TOM BEAUMONT, DES MOINES REGISTER

KERRY CATHCART, KCOG RADIO

TIM ROHWER, COUNCIL BLUFFS DAILY NONPAREIL

CHRISTINIA CRIPPES, BURLINGTON HAWKEYE

JENS MANUEL KROGSTAD, WATERLOO CEDAR FALLS COURIER

TEXT:

GRASSLEY: Obviously, we're continuing work in the Finance Committee to try to get together a bipartisan bill. We're focused on making coverage accessible and more affordable to every American and driving down the cost of health care.

Last week, there was a kind of a bombshell by the director of the Congressional Budget Office, CBO, when they said that neither bill that's passed so far out of the Senate committee or the House committees actually controls costs. So both leave big holes in the federal deficit.

Maybe even more importantly than the federal deficit, overall health care inflation is not bent downward, instead upwards, with the proposals that are out there, whereas in the Senate Finance Committee, one of our proposals -- total package we're working on -- is to make long range that the inflation of health care is closer to the inflation rate of the entire country inflation rate, CPI, as opposed to being two or three times that.

I'm ready for questions on any subject.

You're going -- you're going to call the names?

STAFF: Yes, sir.

GRASSLEY: Go ahead.

STAFF: Tom Beaumont?

BEAUMONT: Senator, I saw a report yesterday that said that the negotiators had come to an agreement on two key areas. Can you talk about that?

GRASSLEY: No, because actually there's no agreement until the whole package is put together. I think it's fair to say that, in some areas, there's been narrowing of differences. And some of those have been in the area of revenue and cost savings, and some of them have been in the area of policy.

But I think it's better at this point that there's not seen as -- as your question would imply -- that there is a clear-cut deal in this area or that area, because anything can be changed at the last moment because there's no agreement until you've got a final package.

BEAUMONT: Then, I saw another report that mentioned the option of taxing insurers for high-end policies. Can you comment on whether there's momentum or -- or consensus on that?

GRASSLEY: That is a new item on the table getting some consideration, trying to get scores now from the Joint Committee on Taxation and trying to find if it would, from Congressional Budget Office, if it would have the same impact as capping the exclusion would.

And -- and if it does, I think it's going to get a positive look- see. But if we don't get positive feedback on -- on the curbing of high-end use -- and this would probably be above \$25,000 -- high-end use, then we probably won't be looking at it.

But if we -- if it has -- if it has a discipline effect of capping the exclusion, I think it'll get a very serious look.

BEAUMONT: Thank you.

GRASSLEY: You bet.

STAFF: Kerry Cathcart?

CATHCART: Thank you.

Senator, now that you've had a chance to meet her in person and also participate in the Judiciary Committee hearings with Judge Sotomayor, have you made any decision yet how you're going to vote on her nomination?

GRASSLEY: No, I haven't gone through the record yet and probably, even if I had, I probably wouldn't announce until maybe the day before we vote in committee. And I think that'll be next Tuesday when we're going to vote on Sotomayor.

CATHCART: OK, thank you.

GRASSLEY: OK, next?

STAFF: James Lynch (ph)?

QUESTION: Senator, I'm wondering if this whole health care debate is putting you crosswise with your Republican and conservative base. I see the Iowa Republican Party say that Obama's plan is an experiment Iowans can't afford. The American Futures Fund

says you're the best hope for taking down health care and urges you to walk away from the table.

GRASSLEY: Who -- who are you quoting on the latter one?

QUESTION: The American Futures Fund. And, first, I guess, do you have any interest in taking down health care reform? And -- and you concerned about sort of going off the direction from your party?

GRASSLEY: Well, when -- I think when it comes to politics, the best answer is a consistent answer in a lot of areas, not just in health care, but the best policy is the best politics.

OK, next?

STAFF: Ken Thomas, A.P.

Jim Boyd, WHO?

BOYD: I'm good today. Thank you.

STAFF: Tim Rohwer, Council Bluffs Nonpareil?

ROHWER: Yes, Senator. Excuse me. Representative Steve King has expressed concern that -- that this health care reform bill, at least the one being, you know, in the House, would end up providing health insurance for up to 5.6 million illegal immigrants over the next 10 years. And he got this information from the Congressional Budget Office. Is this a concern that you may have?

GRASSLEY: Oh, sure. And we're not going to negotiate health care insurance for illegal aliens in the committee I'm serving on. And maybe I ought to get back to the previous person that asked me about when I said the best policy is the best politics.

And I'm partly answering your question, too, there, at the Council Bluffs Nonpareil, that I think when you -- first of all, the issue was President Obama's plan. Well, he doesn't have a plan. The plans that are being developed up here are probably even worse than what he would have submitted to Congress if he had submitted plans, because based upon his campaign promise, he wasn't going to have a national health insurance program like single-payer, like they have in Canada, and he was not -- he was going to try to it incremental, as opposed to what's going up here on the House of Representatives and Senator Kennedy's committee, which both are entirely different than the approaches that we're taking in the Finance Committee.

So I think that -- that anybody that speaks about an Obama plan probably doesn't realize that the president has submitted anything. He's given some broad guidelines of what ought to be done, but you find -- for instance, you find both Senator Kennedy's bill and

what's developing in the House of Representatives now being completely contrary to the letter that the president sent up here on June the 2nd when he said that he wanted to bend the inflation curve of medical care downward.

And the director of the Congressional Budget Office -- the director of the Congressional Budget Office said last week that both of these bills that are out there already do just the opposite: increase the cost of health care.

And then you get back to the other issue about what maybe some Republicans are saying. I would think that, with the development of -- of what the Democrats want to do, of a government-run health insurance plan, and what they want to do in raising taxes phenomenally, as they're doing, and outside of health care raising taxes, so you increase the cost, rather than getting more for your money within the 16 percent of the dollars in our economy that's spent on health care, I would think they'd appreciate having a Republican at the -- at the table. In fact, there's more than one Republican at the table.

And then the other thing I would suggest is that -- that there -- there have been some Republicans that haven't been looking at the polls that, if we don't do something on health care reform, the voters are more apt to blame Republicans than Democrats.

And I cite a poll from last week: 30 percent might blame the health industry; 22 percent blame Republicans in Congress; 11 percent blame Democrats in the Congress; and only 4 percent blaming President Obama.

So it seems to me that we have a responsibility to the Republican Party not to be seen as destroying or at least not talking about things that are -- that people believe are wrong with the present health care system.

Even though 82 percent of the people are satisfied with the insurance they have, that same 82 percent are saying overwhelmingly that there are things just not right about that we -- we waste so much money in health care.

Let's go on to the next person.

STAFF: Christinia Crippes, Burlington Hawkeye?

CRIPPES: Hi, Senator. Thank you for taking my call.

GRASSLEY: How are things down there in Burlington?

CRIPPES: Oh, we're doing just great. Thank you.

GRASSLEY: OK.

CRIPPES: I was just wondering how likely you see the possibility that health care legislation is going to get delayed past this August recess and, if it does, who that's bad for?

GRASSLEY: OK, well, it's not bad for anybody, because if people want us to do health care reform, they don't want to rush it through. They want it to be a very thoughtful process.

And -- and, remember, you talk about health care reform, but as I just indicated, you're talking also about restructuring 16 percent of the economy. That ought to be done in a thoughtful way. We ought to know exactly what we're doing. And it ought to be done on a -- I hope on a bipartisan basis that, when you're doing something that gigantic, that there's a broad consensus that what you're doing is the right thing to do.

And that's just not a Republican approach or a Democrat approach. It ought to be from 80 people in the center of the Senate, I would think.

CRIPPES: Thank you.

GRASSLEY: OK, anybody else?

STAFF: Jens Krogstad, Waterloo Courier?

KROGSTAD: Yes, hi, Senator.

GRASSLEY: Yes, hi. How's things in Waterloo?

KROGSTAD: They're doing great, thank you.

GRASSLEY: Yes.

KROGSTAD: I was wondering, is there much talk in the Finance Committee about significantly reforming the Medicare and Medicaid reimbursement to pay for quality, rather than quantity?

GRASSLEY: Yes. In fact, it's at the heart of -- you've heard me on this telephone conference with you say twice about bending down the inflation curve in health care. And reimbursement based on quality, as opposed to quantity, is essential to doing that.

In other words, for 40 years, we've had these perverse incentives, where it's kind of like a doctor says to you, "I want to see you every day and twice on Sunday," because, every time he sees you, he gets paid for it. Well, you know -- and in Iowa, this isn't much of a problem, because we've got high-quality health care. We're fourth or fifth in the nation.

But if you would take the country as a whole and they would practice medicine like we do in Iowa, we'd save one-third of Medicare, mostly because people are healthier, don't

run to the doctor at the drop of a hat, a doctor does it right the first time. You know, hospitals tend to do it right the first time more often than other places in the country.

So we want to move this for pay based on performance or quality, like you said. And that ought to help Iowa's proportionate standing in other states on reimbursement for Medicare, as well.

KROGSTAD: OK. I asked that because a lot of these model -- so-called model health systems, like Mayo, are -- like they just took out a full-page ad in the Washington Post today. And they're saying there isn't enough being done on this, they think.

GRASSLEY: Well, that's true. But they were quoting just from the House bill, you know.

KROGSTAD: OK. OK.

GRASSLEY: And -- and, also, because the House bill is being driven -- I mean, if it's carried out, you're still going to have private insurance, but not for very long. You know, within -- you know, when you have 120 million people opt out to go into a government program, they're presently covered by health insurance, you know what that's going to do for the premiums for everybody else. It's going to drive it way up.

And consequently -- drive it way up so, consequently, you know, then every -- more people opt out. And pretty soon, you've got a Canadian-runs (ph) program where, you know, you can't get an MRI for three months. So if you've got a headache for one month, you don't want to wait another two months to see if you've got a brain tumor.

If you've got enough money, you come to the United States. If we adopt a system like that, we surely aren't going to go to Mexico for our health care.

KROGSTAD: Yes. OK. Thank you, Senator.

GRASSLEY: OK, anybody else?

BEAUMONT: Senator, Tom Beaumont again. I know you've said that it's better to do it right than quickly. But do you agree with the -- the president's purpose in pushing the bill before the recess in that, you know, he seems to suggest that the longer it takes, the more time it gives opponents to gin up resistance?

GRASSLEY: Well, on the other hand, what's democracy all about? What's representative government all about? It's those of us who are representatives of the people communicating with the grassroots to get feedback. And if we're putting up a policy that can't withstand the test of public opinion, we shouldn't be doing it in the first place.

OK, anybody else?

QUESTION: Senator, it's James Lynch (ph). I just wanted to ask you, the poll you cited on who the public is going to blame, what's the source on that?

GRASSLEY: Can we get James Leach (ph) -- you remember last week some Republicans quoted a poll saying that -- that public support for health care was going down. And then they didn't quote the part about, well, who's going to get blamed? You know, it was about 30 percent industry, 22 percent Republican congressmen, 11 percent, and then 4 percent Obama. Can you get that for James?

Jill will get that for you.

QUESTION: Great, thank you.

GRASSLEY: Because I don't -- I don't know the source of it. I'm -- I'm -- well, I had to have a source. I actually read it.

QUESTION: OK.

GRASSLEY: We'll -- we'll get it for you.

QUESTION: Thank you.

GRASSLEY: OK, anybody else?

OK, thank you. Goodbye, everybody.

END

MS. SKINNER: Senator, I just have a few seconds left. But I know you've been on the record as saying this is such an important issue, you should get 80 votes in the Senate. It should be that much of a **bipartisan** compromise.

Is that a pipe dream at this point?

SEN. **GRASSLEY**: Well, 80 might be, but I don't think it's wrong to think of getting somewhere between 70 and 80. But I want to make clear to you and anybody else that's concerned. Bipartisanship from my standpoint is not three Republicans, the three that are negotiating now and 58 Democrats to get 61 votes. I told the chairman and I think I've told your people that I'm not going to be a part of that.

We've got to get a broad base of support. When you're restructuring one-sixth of the economy, it ought to be done on a consensus basis. And one measure of consensus is broad **bipartisan** support.

July 28, 2009 Tuesday

FOX NEWS CHANNEL INTERVIEW WITH SENATOR
CHARLES **GRASSLEY** (R-IA) SUBJECTS: SONIA
SOTOMAYOR, **HEALTH** CARE REFORM LEGISLATION;
INTERVIEWER: JANE SKINNER

LENGTH: 797 words

FOX NEWS CHANNEL INTERVIEW WITH SENATOR CHARLES **GRASSLEY** (R-IA)
SUBJECTS: SONIA SOTOMAYOR, **HEALTH** CARE REFORM LEGISLATION INTERVIEWER:
JANE SKINNER TIME: 11:38 A.M. EDT DATE: TUESDAY, JULY 28, 2009

MS. SKINNER: Back to **health** care reform now. House Democrats are working hard to get the party's fiscally conservative Blue Dogs as they're known on board with the bill. On the Senate side, they're working very hard on building **bipartisan** support. There are six Senators in particular, three Republicans, three Democrats who are taking on this job in the Senate Finance Committee.

Senator Charles **Grassley**, Republican from Iowa, is a Ranking Member of that committee. He joins us now.

Senator, thanks for being here.

SEN. **GRASSLEY**: Glad to be with you.

MS. SKINNER: Before we get to **health** care, I do want to ask you, we're waiting for this vote on Judge Sonia Sotomayor on her nomination to the U.S. Supreme Court. It looks like she will pass. You -- I'm told are going to be voting no. Why?

SEN. **GRASSLEY**: I'm going to be voting no because I see her as a judicial activist, in other words, a judge who will do what judges aren't supposed to be doing, legislate from the bench and not doing that is because that's the job of the legislative branch of the government because you can vote us out of office if you don't like it. But judges have a fulltime, lifetime appointment. And if they legislate, you know, there's no way of getting rid of them. And consequently, a judge is supposed to be very limited to looking at the four corners of the law and making a decision just interpreting the law as opposed to making law. And I sense that she's very much a judicial activist and that's why I'm going to vote no.

MS. SKINNER: Okay. We expect to see that vote most likely around the top of the hour and we'll take our viewers there live when it happens.

To **health** care now, all eyes as I mentioned really are on you and five other Senators on the Finance Committee with you as you try to

hammer out some sort of **bipartisan** deal. Can you describe to me at this point how close you are?

SEN. GRASSLEY: Well, we've probably got five or six not easy items yet -- make some compromises on. And then we've still got a big item out on some funding, both from the standpoint of cutting some places where there's money being wasted, as well as within **health** care, some areas to raise money. And that's really what's holding it up. Hopefully, we will get an agreement so that we can vote a bill out of committee before we go home. But if we don't get it done, I don't think it's the worse thing in the world that could happen because you see we're talking about reshaping one-sixth of the economy. That's what **health** care is all about. And that's a big chunk of the economy. It's never been done by Congress before, even other segments of the economy.

So if this thing does not get out of committee and it simmers over the next month that we take our summer break, it gives people a chance to react, and really, our government ought to work from the grassroots up, not from the top down. And I think -- I want people to be able to reflect, not only on what we're doing, but reflect upon what Senator Kennedy's committee did, which basically is a partisan approach, with more government decision-making in **health** care and then what Congressman -- or Speaker Pelosi and her people are working on in the House of Representatives is going to be an entirely partisan situation, and consequently, let people look at that very much increasing government operation in **health** care.

You're getting a more relaxed approach in this **bipartisan** bill that I and five other people are working on.

MS. SKINNER: Senator, I just have a few seconds left. But I know you've been on the record as saying this is such an important issue, you should get 80 votes in the Senate. It should be that much of a **bipartisan** compromise.

Is that a pipe dream at this point?

SEN. GRASSLEY: Well, 80 might be, but I don't think it's wrong to think of getting somewhere between 70 and 80. But I want to make clear to you and anybody else that's concerned. Bipartisanship from my standpoint is not three Republicans, the three that are negotiating now and 58 Democrats to get 61 votes. I told the chairman and I think I've told your people that I'm not going to be a part of that.

We've got to get a broad base of support. When you're restructuring one-sixth of the economy, it ought to be done on a consensus basis. And one measure of consensus is broad **bipartisan** support.

MS. SKINNER: Senator Chuck Grassley is one of the key negotiators on that Senate Finance Committee and has a huge job of trying to hammer out that **bipartisan** agreement.

Senator, thanks for your time and best of luck.

SEN. GRASSLEY: Thank you.

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