

## **ANCHORAGE DAILY NEWS:**

### **Alaska delegates divided on health care bill**

### **SHOWDOWN: Republicans remain against legislation, Begich for it.**

Saturday, April 20, 2010

**WASHINGTON** -- Sen. Lisa Murkowski called it an example of "March madness." Her Republican colleague, Rep. Don Young, asked on Twitter whether "anyone understands this convoluted health care bill?" And Sen. Mark Begich, a Democrat, said he plans to vote for the health care bill when it's back in the Senate.

As the U.S. House of Representatives moves toward a final health care vote on Sunday, Alaska's congressional delegation hasn't changed much in how they intend to vote on health care: 100 percent along party lines.

Both Young and Murkowski complained this week about the process leading up to the bill's passage, as well as its content. Young, who will cast a "no" vote on Sunday, decried the bill during two separate appearances on the floor of the House.

"Over a thousand pages of gobbledygook," he said Friday. "I have an old saying, it should have been K-I-S-S. Keep it simple...stupid. I've happened to read this bill. I don't understand it. No one else understands it. We should not pass this atrocity."

The \$940 billion health care overhaul would expand insurance to an estimated 32 million uninsured people, from about 83 percent of the population to 95 percent. An estimate released Thursday by the nonpartisan Congressional Budget Office found the House version of the bill would reduce federal budget deficits by \$138 billion over the next decade.

Top House Democrats spent all week scrambling to put together the necessary 216 votes, and throughout the day on Friday, trumpeted

the decisions of their no-to-yes fence-sitting colleagues who announced they would support the legislation.

The main vote comes Sunday, when the House is expected to vote on a rule governing debate. The rule says that the health care legislation the Senate passed Dec. 24 is "deemed" passed by the House upon adoption of the rule. If the House approves the rule, it'll next vote on the changes to that Senate bill, which were unveiled Thursday as part of a so-called "reconciliation" package.

Begich said he's willing to vote for reconciliation, which because it's done through a budgeting process, requires a majority vote of the Senate, not a filibuster-proof 60-vote margin.

"Assuming that it passes (the House) and the president signs the bill, then there will be fixes the House wants to be made, and I'll be supportive of a lot of those fixes," Begich said.

Begich said he's especially pleased with one of the fixes, which would end the Medicare prescription-drug coverage gap. Prescription drug Medicare drug plans now stop paying for prescriptions each year once the government and the consumer have spent \$2,830 on them. The benefit resumes once annual out-of-pocket spending reaches \$4,550. The bill would close that so-called "doughnut hole" by 2020.

The legislation also assumes from 2014 to 2016 the full state costs of Medicaid, the state-federal health care program for poor people. Beginning in 2017, the federal government would pick up 95 percent of the costs; states would have to pick up a growing share of the expense on a sliding scale until they're covering 10 percent in 2020.

Murkowski complained about the process being used in the House to "deem" the bill passed. She also is concerned about a provision of the bill that changes how college students access student loans.

"This is really March madness to a level of understanding that the American public simply cannot relate to what is happening here," Murkowski said. "When the front page of The Washington Post says that the speaker of the House is proposing to pass a bill, a bill like health care reform, without a vote, anybody in this country can figure out, 'Well, wait a minute. That's not what we learned in American government. What in the world is going on here?' "

But Begich disagreed, saying he thought there'd been plenty of debate on health care over the past year, including town hall meetings and hearings, and even individual meetings with constituents.

"I actually enjoyed them," he said. "I had big turnouts at my town hall meetings, we had several smaller ones, I've had forums with doctors, I've had forums with seniors, I've had telephone town halls, thousands of emails, I've called people in response to their e-mails....I think we've had enormous floor debate that's been public and transparent."