

**Health Subcommittee Markup on H.R. 452, the Medicare Decisions
Accountability Act**
**Opening Statement of Energy and Commerce Committee Chairman
Fred Upton**
February 29, 2012

(As Submitted for the Record)

In the House there is bipartisan consensus that the Independent Payment Advisory Board is flawed and must be repealed. Some believe that the board is an abdication of congressional responsibility. Others see danger in giving almost unlimited power to a 15-member board of unelected bureaucrats to limit health care options for our nation's seniors.

Almost two years after passage of PPACA the president has yet to nominate a single member to the board. Like many of the more controversial provisions of PPACA, IPAB has seen no action from the administration. Is he joining members of his party having second thoughts about this controversial board? Given the fact that the president doubled down on IPAB in his proposed budget, it seems more likely that he thinks he can wait on the nominations until after the election.

Of course, the power of the IPAB does not dissipate if the president does not nominate its members. More ominous is that the failure to appoint individuals to the IPAB will actually concentrate all of the board's power into the hands of one person—the Secretary of HHS. In this case, the Secretary would become the de facto IPAB.

Remember, the president's health care law cut \$575 billion from Medicare. These cuts will compound over the years, producing trillions of dollars in Medicare cuts in the future. What is unconscionable is these cuts do not strengthen the future financial solvency of Medicare. The Medicare cuts are being used to finance an unprecedented expansion of the Medicaid program and the creation of a new healthcare entitlement for families making well over the median annual income.

We have been told by the Chief Actuary of CMS that you cannot cut Medicare to finance new spending and at the same time claim to have extended the solvency of the program. Secretary Sebelius admitted as much last year in this subcommittee when asked if the administration was double counting savings from the health care law.

We have also heard the Chief Actuary state that, under PPACA, Medicare reimbursement rates for providers like hospitals and nursing homes will eventually fall below the level of Medicaid. These cuts are unsustainable. Yet instead of actually reforming Medicare to ensure that the program is there for future generations, IPAB will only serve to exacerbate this problem. We can and should do better.

As members decide on how to vote today, they should ask themselves some important questions:

- Are we really willing to give a panel of unelected, unaccountable “experts” the authority to decide whether a medical treatment option is of value? Or do we think those decisions should be made by patients and doctors?
- Are we really willing to give a panel of unelected, unaccountable “experts” the authority to determine how to reform the Medicare system? Or do we think the way to reform Medicare is through a process that allows for open and thoughtful deliberation and, when appropriate, the usual legislative process and system of checks and balances?

This vote today is more than a statement about the deficiencies of the health care law. It is a necessary and deliberate choice not to give an unelected, unaccountable, and likely unconstitutional panel of 15 bureaucrats the power to take over the decisions of patients and doctors.