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## House of Representatives

The House met at 10 a.m. and was called to order by the Speaker pro tempore (Mr. DUNCAN of Tennessee).

### DESIGNATION OF SPEAKER PRO TEMPORE

The SPEAKER pro tempore laid before the House the following communication from the Speaker:

WASHINGTON, DC,  
October 8, 2015.

I hereby appoint the Honorable JOHN J. DUNCAN, Jr. to act as Speaker pro tempore on this day.

JOHN A. BOEHNER,  
*Speaker of the House of Representatives.*

### MORNING-HOUR DEBATE

The SPEAKER pro tempore. Pursuant to the order of the House of January 6, 2015, the Chair will now recognize Members from lists submitted by the majority and minority leaders for morning-hour debate.

The Chair will alternate recognition between the parties, with each party limited to 1 hour and each Member other than the majority and minority leaders and the minority whip limited to 5 minutes, but in no event shall debate continue beyond 11:50 a.m.

### MEDICARE PART B PREMIUM INCREASE

The SPEAKER pro tempore. The Chair recognizes the gentleman from Oregon (Mr. BLUMENAUER) for 5 minutes.

Mr. BLUMENAUER. Mr. Speaker, we take to the floor to deal with the daily reminders of turmoil around the world: the unrest in the Middle East, especially in Syria and ISIS; the sad reality of an unending string of events regarding gun violence.

There is a certain amount of unrest here in the House, as our Republican colleagues right now are trying to

chart a path forward to reconcile differences of opinion within their own ranks that have some spillover effects for us. But in the background, there is a critical issue that we should be focused on that may not command the headlines; but it is, nonetheless, a critically important item.

We are faced with arcane formulas that govern dealing with Medicare—the rates that recipients pay for their services—that have a perverse impact on some of the lowest income seniors. Through no fault of their own, 7.7 million senior citizens are going to be treated very unfairly. These are the 30 percent of Medicare recipients who are going to pay the burden for all Medicare recipients for the cost increases.

We have a provision in place that holds harmless people who get no increase in their Social Security payments, and they are immune from premium increases. But that is not so for the other 30 percent. These are the people who are facing a 52 percent increase in that part B premium, over \$54 a month.

Now, remember, nobody gets an increase in their Social Security, and there is going to be about a \$76 increase per month in the deductible.

A typical Medicare beneficiary pays almost \$5,000 per year for premiums, cost sharing, and other services that aren't covered by insurance. For many, that is not an unreasonable contribution for their health care, but not for everyone.

More than half the beneficiaries have incomes of \$24,150. These 30 percent, the 7.7 million who will pick up the slack for everyone else, are going to be facing a significant impact, given their low incomes. It doesn't actually have to be this way.

There are proposals that are available for Congress to deal with. Representative DINA TITUS, Representative JAN SCHAKOWSKY, and Senator RON WYDEN all have proposals that would

eliminate or minimize the impact on these vulnerable senior citizens.

And, bear in mind, it will also impact the States \$2.3 billion in terms of Medicaid programs, which inevitably will translate into service reductions, again, for some of our most vulnerable.

It is time for Congress to empower negotiators in both parties, in both Chambers to act now. If we get involved with these potential solutions, the costs are going to be far less than if we wait until the next year, and we will be shielding some of our most vulnerable citizens from significant increases at a time when they can ill afford it. This is one area where there is overwhelming support on both sides of the aisle.

I would call upon my friends in the Republican leadership to take a break from this strange process they are going through and debate in the acrimony and the churn. Let's take a break and empower people to solve these problems now. Our senior citizens deserve no less.

### BREAST CANCER AWARENESS MONTH

The SPEAKER pro tempore. The Chair recognizes the gentleman from Minnesota (Mr. EMMER) for 5 minutes.

Mr. EMMER of Minnesota. Mr. Speaker, I rise today to remind us of the importance of the month of October as Breast Cancer Awareness Month.

Like any disease that affects people regardless of race, color, creed, or their status in society, cancer not only tests the mental and physical strength of the person fighting the disease, it has a deep and lasting impact on family, friends, and communities.

Currently, more than 100 different types of cancer exist, but, in my humble opinion, none is more wicked than breast cancer. This is most likely because breast cancer is one of the most common and deadly cancers among women.

□ This symbol represents the time of day during the House proceedings, e.g., □ 1407 is 2:07 p.m.

Matter set in this typeface indicates words inserted or appended, rather than spoken, by a Member of the House on the floor.



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