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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. WEBSTER of Florida).

### DESIGNATION OF SPEAKER PRO TEMPORE

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

WASHINGTON, DC,  
September 22, 2016.

I hereby appoint the Honorable DANIEL WEBSTER to act as Speaker pro tempore on this day.

PAUL D. RYAN,  
*Speaker of the House of Representatives.*

### MORNING-HOUR DEBATE

The SPEAKER pro tempore. Pursuant to the order of the House of January 5, 2016, 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.

### ACA IS WORKING

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

Mr. QUIGLEY. Mr. Speaker, I rise today and ask you to consider where we were before the Affordable Care Act: premiums were rising three times faster than wages, eating up much more of Americans' hard-earned paychecks; millions more families were drowning in medical debt; Americans had to pay for critical preventive services like flu shots, yearly checkups, and birth control; many young 20-somethings went without insurance; your suffering child

could be denied coverage due to a pre-existing condition; the so-called "doughnut hole," or gap in Medicare part D coverage, was forcing many seniors to choose between buying food to put on the table or livesaving prescription pills; women were charged more than men for coverage simply for being women; insurance companies could set annual or lifetime dollar caps on benefits, sticking American families with the remainder of the bill.

Thankfully, in the 6 years since the ACA was enacted, 20 million Americans have insurance for the first time in their lives, and the uninsured rate is the lowest it has been in American history, currently at 8.6 percent. The ACA has helped 105 million Americans, including 39.5 million women and nearly 28 million children, by preventing healthcare plans from capping benefits.

We have also seen that the marketplace is working better in States where elected officials collaborated to implement the ACA rather than trying to undermine it. In States that chose to expand Medicaid, insurance rates are an estimated 7 percent lower. In contrast, Governors and legislatures in 19 States have blocked Medicaid expansion, even as millions of their lowest income residents go without insurance coverage.

Unfortunately, over the past few years, it has been popular around here to say that the ACA is a failure, that it has socialized medicine, it is driving down the quality of American health care, and that we need to "repeal and replace" it because ObamaCare isn't working. This mindset is all wrong because, I am happy to report, the ACA is working. However, faster progress has been prevented due to obstruction and politics.

Since being signed into law in 2010, my colleagues across the aisle have voted to repeal all or parts of the ACA over 60 times. This has prevented funding needed for implementation and

necessary fixes to the law. It is time, once and for all, for Congress to accept the ACA as the law of the land and begin working to improve the law, not repeal it.

Now, I understand there are challenges as the law continues to take deeper roots throughout the healthcare industry. As they prepared for ACA, some insurance companies set prices too low, and they are now adjusting them in response; but I want to remind everyone that the insurance marketplace was dynamic before the ACA and will continue to be dynamic.

The ACA calls for a more innovative approach to health care, and many insurance companies have adapted so that they can focus on coordinated care and care management, for example. When insurance companies were still able to discriminate based on pre-existing conditions, they excluded or undervalued expensive patients—the same people who had the most healthcare needs. Now that actual data is available, the market is undergoing a natural correction to bring prices in line with costs.

It is important to note that shopping on the marketplace has proven to help all consumers find the best price for coverage. According to the Department of Health and Human Services, almost half of returning healthcare.gov consumers switched plans and saved an average of \$42 per month.

I understand that challenges with the ACA remain. That is why HHS is taking steps to address these problems. Congress has a duty to look for policy solutions that improve everyone's access to the best care available and to make that care affordable. There are real ways that Congress can provide stability to the healthcare marketplace, and I urge my colleagues to bring some of these solutions to the floor.

□ 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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