

November 18, 2009

The Honorable Barack Obama
President of the United States
The White House
1600 Pennsylvania Avenue, NW
Washington, D.C. 20500

The Honorable Nancy Pelosi
Speaker of the House
United States House of
Representatives
The U.S. Capitol, Room H-232
Washington, D.C. 20510

The Honorable Harry Reid
Senate Majority Leader
United States Senate
The U.S. Capitol, Room S-221
Washington, D.C. 20510

Dear President Obama, Speaker Pelosi, and Leader Reid:

There is no doubt that improving healthcare for all Americans is one of our country's top priorities. From the quality of care to how much we pay, from insurance coverage to access, from treatments to technology, healthcare profoundly affects every American, every community, and every business.

We can all agree that we need to work together so that every American has more choices of greater quality at lower cost.

Unfortunately, the last several months have shown yet again that many in Washington are more interested in playing politics than achieving a positive result for the American people. It is not too late. There is still an opportunity to get health reform right. Here are commonsense ways to find the right solutions, the right way.

Slow down. Ramming through a trillion-dollar bill without giving three hundred million Americans the chance to study the legislation raises legitimate questions of why some leaders are trying to avoid a careful review by the American people. In a democracy, a secretive, one-sided process is never the right way to govern.

Open up. A 2,000-page bill written in secret by a handful of politicians and staff is the wrong way. Republicans have offered time and time again to bring constructive ideas to the table, only to be shut out by a cold shoulder and a closed door. We need an honest and open process free of artificial, political deadlines and open to input from everyone. Cooperation, not confrontation, is a better approach.

Don't break the bank. The director of the Congressional Budget Office said this in July:

“In the legislation that has been reported we do not see the sort of fundamental changes that would be necessary to reduce the trajectory of

federal health spending by a significant amount. And on the contrary, the legislation significantly expands the federal responsibility for healthcare costs.”

Nothing has changed since then to bend the cost curve down. Why should the American people believe that *spending* another \$1 trillion will somehow *reduce* healthcare costs? Why should the American people believe that a \$1 trillion price tag from Washington won't put our country further into debt? Why should governors and state officials believe that the largest unfunded mandate in American history will not break their banks when they are on the hook to pay for these reforms? With unemployment at 10 percent and with more than \$9 trillion in federal debt on the horizon, why commit to spending another trillion dollars *before* stopping the waste, fraud, abuse and mismanagement in current government programs (Medicare and Medicaid) first?

Reform does not mean replace. The vast majority of Americans are satisfied with their current coverage and doctors, a fact that has been borne out in every public opinion study for years. Improvements must certainly be made to make health insurance more portable, more accessible, and more affordable, but our first priority should be to protect and strengthen what the American people already have and support.

The right reforms. Neither party has a monopoly on sound solutions. Good ideas and sound decision-making, regardless of their origin, are desperately needed. For example, the Congressional Budget Office recently concluded that reforming medical liability laws would save the federal government \$54 billion. Despite these important savings and overwhelming support from the American people, medical liability reform has never been part of the discussion because of political reasons. Where money can be saved, it must be. This is particularly true today, given the fragile state of the economy and this year's record budget deficit.

Real competition and real choice. You talk often about the important principles of “competition and choice.” We enthusiastically agree. But instead of creating one huge government-run insurance plan, let's break down the existing barriers to greater competition. A better approach is a nationwide marketplace where all 1,300 insurance companies are forced to compete, giving Americans real choices. This will bring down costs and improve quality—just as it does wherever competition is allowed to flourish.

Save Medicare from bankruptcy. The non-partisan Medicare Trustees concluded that Medicare will be broke in eight years. Medicare already has an unfunded liability of at least \$37 trillion in benefits that have been promised future generations. The emerging legislation does nothing to save Medicare. Rather than cutting Medicare to pay for new federal subsidies or a government-run insurance plan, we should save and strengthen it. The right way would be to root out the fraud, waste, and abuse first that is costing the current program tens of billions every year.

Unleash American innovation. Science, research, and innovation are a vital part of improving healthcare. We should reform the Food and Drug Administration to expedite the movement of drugs, devices, and new technologies to the market. We should invest in new science to cure diseases like Alzheimer's and cancer. Inexplicably, the Senate Finance Committee goes in the other direction, raising more than \$60 billion in new taxes on medical technology and drug research – the people responsible for the medical breakthroughs in America. These kinds of innovators should be rewarded, not punished.

Health reform or “health insurance reform” should not be a political wedge, pushed to satisfy political allies at the expense of the American people. Healthcare is too important and the stakes are too high. The American people deserve and have demanded better. With an honest process, the right priorities, and the right solutions, we can and will succeed.

Sincerely,

Newt Gingrich, Former Speaker of the House; Founder, Center for Health Transformation

Jeb Bush, Former Governor of Florida

Mike Huckabee, Former Governor of Arkansas

Michael O. Leavitt, Former Governor of Utah; Former Secretary, U.S. Department of Health and Human Services

Mark Sanford, Governor of South Carolina

Senator Richard Burr of North Carolina

Senator Saxby Chambliss of Georgia

Senator Tom Coburn of Oklahoma

Senator Roger Wicker of Mississippi

Rep. Michele Bachmann of Minnesota

Rep. Roscoe Bartlett of Maryland

Rep. Roy Blunt of Missouri

Rep. Dave Camp of Michigan

Rep. John Campbell of California

Rep. Bill Cassidy of Louisiana

Rep. Charles Dent of Pennsylvania

Rep. Jo Ann Emerson of Missouri

Rep. Randy Forbes of Virginia

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Rep. Louie Gohmert of Texas
Rep. Dean Heller of Nevada
Rep. Jeb Hensarling of Texas
Rep. Pete Hoekstra of Michigan
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Rep. Mark Kirk of Illinois
Rep. John Linder of Georgia
Rep. Kevin McCarthy of California
Rep. Thaddeus McCotter of Michigan
Rep. Cathy McMorris Rodgers of Washington
Rep. Tim Murphy of Pennsylvania
Rep. Sue Myrick of North Carolina
Rep. Devin Nunes of California
Rep. Tom Price of Georgia
Rep. Dave Reichert of Washington
Rep. Paul Ryan of Wisconsin
Rep. Pete Sessions of Texas
Rep. John Shadegg of Arizona
Rep. William “Mac” Thornberry of Texas
Rep. Lynn Westmoreland of Georgia
Rep. Frank Wolf of Virginia
Fmr. Rep. Sue Kelly of New York
Fmr. Rep. David McIntosh of Indiana
Douglas Holtz-Eakin, Former Director, Congressional Budget Office
Benjamin E. Sasse, Former Assistant Secretary, U.S. Department of Health and Human Services
David Brailer, Former National Coordinator for Health Information Technology, U.S. Department of Health and Human Services
James C. Capretta, Former Associate Director for Human Resource Programs, Office of Management and Budget
Andrew von Eschenbach, Former Director, National Cancer Institute; Former Commissioner, U.S. Food and Drug Administration
Tevi Troy, Former Deputy Secretary, U.S. Department of Health and Human Services