

Mark Masselli: This is Conversations on Health Care. I am Mark Masselli.

Margaret Flinter: And I am Margaret Flinter.

Mark Masselli: Well Margaret, Health Care Reform has passed, how sweet that sounds! The U.S. House of Representatives voted late Sunday night to approve this transformation of the U.S. health system and effort pursued by presidents over the past century. Advocates for reform are calling this moment a historic advance in social justice comparable to the establishment of Medicare and Social Security. House Majority Whip James Clyburn who has been a guest on our show called that the civil rights active the 21<sup>st</sup> century.

Margaret Flinter: This was one exciting weekend and I don't recall another one quite like it. As a Friday night, there were still three big obstacles looming; the process to approve the Health Reform Legislation, the abortion language issue, and wrangling that commitment for the final needed votes. All last week, House leaders were strategizing about how they were going to pass the legislation. They proposed a tactic known as Demon Pass which was just announced by the Republicans that would allow House Democrats to approve the senate version of the bill without an actual vote. Congresswoman Slaughter of New York, somebody we hadn't heard a lot about, played a prominent role on the parliamentary issues, but ultimately, the Democrats decided they would go back to the simple majority vote, in part because that's what people were asking for and part because the votes were finally there.

Mark Masselli: With the issue of the majority vote nicely addressed, it was the President who strode over to the Capitol late afternoon on Saturday to address the full Democratic caucus. He knew there were still undecided members that needed to hear from him. Without notes, he laid out a compelling passionate and elegant summation of why this was the right thing to do for America, even if it doesn't win political points. He quoted Abraham Lincoln "I am not bound to win but I am bound to be true." It was a clarion call to any undecided member.

Margaret Flinter: And the final challenge remained the language on abortion of vaccine difficult issue. Congressman Bart Stupak in the group of Congressmen and Women who had allied with him were steadfast in their opposition to voting for the bill unless it was absolutely clear that no federal funds for health insurance could be or would be used to pay for abortions. President Obama stepped in and committed to an executive order that will clarify and confirmed the already existing language that prohibits federal funding of abortion. That satisfied Congressman Stupak who then announced his intention to vote in favor of the legislation. That was a real turning point in the sense that passage of the bill was now inevitable.

Mark Masselli: Margaret, this weekend was filled with high drama. March Madness with center court being the House of Representatives, you have to give the speaker as much credit on this as the President. Nancy Pelosi is the first female speaker of the House. Many pundits and politicians predicted that Congresswoman from San Francisco would be too liberal, too divisive to be effective leader. Pelosi is as tough as nails. It's been said that Health Care Reform may have been Obama's primary focus during his first year in office, but the President's dream would never have been realized without the energy and determination of Pelosi. She last sued Harry Reid and Barack Obama and pulled them over the finish line. If Health Care Reform had gone to defeat, it would have been a disaster for the country.

Margaret Flinter: Well, I think America has had a front row seat at watching strong leadership in action these last days, certainly when the President canceled that trip to Indonesia, started traveling around the country taking Congressman Kucinich on Air Force One. It was clear to America how important this was to him. And you are right about Speaker Pelosi. I understand her father was the Mayor of Baltimore and I think she must have been learning lessons about strong tough leadership from the time she was a very young child and she certainly got to put every one of those lessons to use. Both of them will go down in history as people who shaped the country.

Mark Masselli: And speaking of history, that vote was exciting to watch. They ended up with 219 voting in favor. But I think the speaker let a number of members take a pass. Obviously, she didn't want to jeopardize the midterm elections, particularly in tough districts. She had the votes but was also aware of the consequences. The final number of Democrats who voted against was 34, many of them representing Republican-leaning districts.

Margaret Flinter: You know Mark, I think in a lot of ways, everybody's seat is in jeopardy albeit for different reasons. As the hours of debate in speeches and voting came to an end, I had the sense that how Americans think and feel and vote about this in November will be more about jobs, jobs, jobs and hopefully some of the early benefits of the Reform Bill eliminating preexisting conditions for some groups early on, giving tax credits to small businesses this year, maybe what really influence voters at the polls in November.

Mark Masselli: I think you are right on that, but the action doesn't stop there. Like the President said after the vote, "As momentous as this day is, it's not the end of the journey." The President signed the bill into law in a moving ceremony on Tuesday which recognized the many generations of advocates who worked long and hard on reform. He did note that there is still a little housekeeping that needs to be done in the senate and they will take up the reconciliation bill sent over from the House with a number of provisions to improve the bill. Because they no longer have the 60-vote majority, the senate Democrats need to pass the bill using the reconciliation process. It's designed to avoid filibusters on the

senate floor and Senator Reid has said that he has the 51 votes to move this forward. But you know, the Republicans will be asking a lot of questions to the senate parliamentarian and a small staff of words will be working overtime as they try to derail the final Reconciliation Act.

Margaret Flinter: Our guest today will certainly be remembered as one of the lawmakers who assured their place in history with the passage of Health Reform. Connecticut Congressman John Larson, Chairman of the Democratic Caucus, the fourth ranking Democrat in the House was the person responsible for building of the consensus among his colleagues on Health Care Reform. He worked hard on getting this legislation passed all year and we welcome here today to explain to us what the bill means and to tell us more about the process going forward.

Mark Masselli: No matter what the story, you can hear all of our shows on our website Chcradio.com. You can now subscribe to iTunes to get our show regularly downloaded. Or if you would like to hang on to our every word and read a transcript of one of our shows, come visit us at Chcradio.com.

Margaret Flinter: And as always, if you have feedback, email us at [Chcradio@chc1.com](mailto:Chcradio@chc1.com), we would love to hear from you. Before we speak with Congressman Larson, let's check in with our producer Loren Bonner with our headline news.

Loren Bonner: I am Loren Bonner with this week's headline news. President Obama has signed his historic Health Care Legislation into law after the U.S. House of Representatives voted in favor of the senate bill said to be the biggest transformation of the U.S. health system in decades.

President Barack Obama: Today after a year of debate, today after all the vote have been tallied, Health Insurance Reform becomes law of the United States of America.

Loren Bonner: The bill that the House approved would extend coverage to 32 million Americans now without insurance and would mandate that almost everyone carry insurance. The bill would also prevent insurers from denying coverage to people because they have a preexisting health condition. The package of changes that was also approved Sunday would increase the senate bill subsidies to help low and middle-income people pay for insurance and would remove some of the special deals for senators that caused a flurry of protests. Senate Majority Leader Harry Reid pointed out an immediate benefit of the bill.

Harry Reid: If you are one of the many senior citizens stuck in the prescription drug donut hole, you will soon get a check to help pay for your medicine.

Loren Bonner: Although the bulk of the legislation wouldn't take effect until 2014, other benefits that would kick in immediately include insurers not being able to

place lifetime limits on coverage and allowing children to remain on their parents' plan until age 26. All Republicans voted against the bill and have reiterated over and over how it goes against the wishes of the American people. House Minority Leader John Boehner said the House turned a deaf ear to the nation's opposition to the bill.

John Boehner: We have failed to listen to America and we have failed to reflect the will of our constituents.

Loren Bonner: Republicans are saying they will do everything possible to derail the bill and they have their chance this week when both parties debate the reconciliation bill in front of Parliamentarian Judge Alan Frumin. Republicans also hope to use the health care overhaul to drive Democrats out of the majority citing polls that show that Americans strongly oppose the bill. The legislation is certainly going to be a major element for the midterm election campaign season. President Obama will travel Thursday to Iowa City, Iowa to inform the public on the bill's immediate effects. Let's see how some people reacted to the news. I stacked out one section of a Port Authority bus station in New York City.

I am esthetic.

Loren Bonner: Why?

Well, I think health care is one of those things where the insurance companies not (Inaudible 9:43). Just last week, they raised our premium percentages at a level of an average of 17%. Some companies went up as far as 20%. They get all this money and the people were not that sick so why they are getting all this money. They have to be deregulated. We have to break up the monopoly of that (Inaudible). And I think it's about time, things like this always are very hard to pass. Social Security was hard pass like 60 years ago. And now, everyone banks on Social Security when they retire. It's been one of those things that now you have it, it may not be perfect but at least you have (Inaudible) to perfection.

Loren Bonner: So, what's your reaction to the Health Care Legislation that passed?

My reaction is that I think it's been an issue in many ways because a lot of people can't afford, so they go to the medical office (Inaudible 10:41) and now they can get medical benefits for their children up to 26 years of age, which is good. On the other hand, there are benefits that won't take their effect until 2014 and which may not be a long time to some people but if you can't afford medical benefits and you have illness and you need attention immediately, it could be downfall for that. I feel it's a good thing.

Loren Bonner: Let's listen now to the interview with Congressman Larson who is a major part of this historic legislation.

Mark Masselli: This is Conversations on Health Care. Today, we are speaking with Connecticut Congressman John Larson, Chairman of the Democratic Caucus and one of the key players in the historic vote on Health Care Reform that passed in the House Sunday night. Welcome Congressman Larson. What a week this has been, an epic battle between Republicans and Democrats on issue that has challenged presidents for the better part of the past century reforming health care. You played a key leadership role in the House to get that final affirmative vote. What do you think is unique about this time, this plan and this generation of Health Reform that is coming to pass?

John Larson: Well, I think a number of factors I think when you have a nation that is in the throws of the economic recession and joblessness that we have when you find that people, more than 47 million Americans have no health care, when you see that about 1,400 of them are losing health care almost daily, when you look at the cost of health care as part of our Gross Domestic Product, the time was right to make this change. And fortunately, we had a President that had the determination and a speaker of the House had the will to stay with something that many abundance some people have pronounced that on arrival. It was quite a historical day as you know there were a number of people down in Washington were protesting against the bill. And rather ironic as part of history, John Lewis was walking across the street and with other members of the Congressional Black Caucus and there were hurled racial slurs and spat at. And it's just horrible and though I believe not reflective of a lot of people that were there just demonstrated the anger. And then yesterday afternoon in our caucus, I called upon Mr. Lewis to speak. And then afterwards, I said you know, 45 years ago, he walked across the Edmund Pettus Bridge through a lot more difficult situation and the result was the Civil Rights Legislation that was enacted. He said let's walk across the street and we are walking from Cannon Office Building over to the Capitol and passed Health Care Reform. And it was quite a site, actually the speaker of the House, she had just been given the gavel that John Dingell used when they gaveled Medicare and its passage. And so, our leadership locked arms with John Lewis. And more than symbolically, I think it brought us altogether as a caucus and it underscored the historic significance of it.

Margaret Flinter: Congressman, first, thank you so much for being here and thank you for sharing that story with Congressman Lewis, that sounds like yet another historic moment that we have seen as this came to pass most Americans who are paying attention to the issue know as the key provisions of the bill certainly covering 32 million Americans, preventing insurers from denying coverage for preexisting condition, ending recessions. But it is a big bill, there is so much in it. Are there other aspects that you think we should be paying attention to?

John Larson: Certainly, anytime you have a document, one of the things that was done most often is people would take the document and then say look at

this, and they drop the document on a table and then say it's 2,000 pages long. Yesterday, we took and I have my staff go through and they had in excess of 2,000 personal letters from people just in the first congressional district and we dropped that next to them. And I said here is what the public needs to understand more often than not. And I thought it was rather disingenuous for some of the republicans to gloss over. They said well, it's really not 47 million people, it's really less than that. And the statement of the day was issued by John **Buccheri**. He said that "You were more than willing to provide billions of dollars to Tommy Thompson to go to Iraq and make sure that every Iraqi had health care for them and their families. If it's good enough for the Iraqis, it's good enough for the American people." And it was a stunning, stunning statement by someone who served in Iraq and is a returning veteran and said you know, don't \_\_\_\_\_ 15:48 our veterans, our well care fall under the Tricare system, etc. We wanted to make sure that the American public got that thing.

Margaret Flinter: And even the House also passed on Sunday the Reconciliation Bill containing handful of changes to the senate bill. The bill story acquired senate approval. Can you explain to our listeners what the senate has to do to enact the bill and what's the time frame for passing the package? And can you describe how the bill you passed on Sunday is likely to change as a consequence and how will it matter to Americans and their health care?

John Larson: Well, just to be very precise about this, you may recall that the House passed its bill back in November. The senate then followed, then on Christmas Eve day, they passed their bill. Typically, we would go to conference on the differences between the bills, but the senate was blocked procedurally from going to conference on their bill. So instead, they had to resolve to a term called "reconciliation". What is reconciliation? That's majority rule. And in the senate, they have rather odd rule, it's called, the most people are growing up from 3<sup>rd</sup> grade on thought that it was a majority vote in the senate that passed the bill. But what we wanted was just simply an up-or-down vote on health care. But on the senate rules, they can have that. Now, under reconciliation, in both houses, it just requires a majority vote and it's some budgetary matters. And so, we had the senate bill and the House, they had the House bill and the senate. Yesterday, we voted first in favor of the senate bill even though it was flawed and we disagreed with a number of things in there. Then we voted for the Reconciliation Bill that corrects that. It got rid of the Cornhusker problem and we also got rid of the onerous parts of an excise tax that was in the bill and we corrected a number of things that would be beneficial to our citizens, including making sure that preexisting conditions take effect immediately on behalf of children on passage of the reconciliated bill. So now, without being too completed, the House passed that Reconciliation Bill. So health care has passed both houses. Now, the importance of the Reconciliation Bill is that that will amend the bill with the changes that will make a better bill for the American people.

Margaret Flinter: Congressman, I think you just did the best job I have heard of explaining about whole process to the American people. So thank you for doing that. One of the things that we have noticed as this process went on over many months was that groups like the American Medical Association backed the bill as did the pharmaceutical industry, and that seems like a huge change from our last major push on Health Reform in the 90s under the Clinton Administration. I guessed we would ask you again, why different this time? How did you bring those people to the table?

John Larson: It was heartening to have everybody from the AARP to the American Medical Association because this was about, if you like your insurance policy and you are okay with that, you can keep that, nothing changed. If you like your doctor, nothing is going to change within this bill contrary to what people would say all this wild claim, just like they were by the way under Medicare of socializing medicine and people were claiming at the most of the time were doctors. And so to have the AMA on board, to have the AARP on board I think made quite a remarkable difference. But there were over 300 organizations that were in favor of this legislation and it was a matter of bringing them together. I want to say something specifically about doctors too because this is vitally important to the bill and one of the things that had to take place is that we had to provide incentives to make sure we are getting more primary care doctors, and making sure that doctors were going to be seeing patients both Medicare and Medicaid and also providing the incentives for those for people to go into the medical field, not only doctors but nurses and health care professionals as well. And so there are still fixes to the bill so to speak that have to come through there including making sure that these doctors are getting the kind of incentives and moneys that are going to be required for them both (A) enter the field, and (B) be to able sustain themselves because of the increased patient load that we anticipate.

Mark Masselli: Today, we are speaking with Congressman John Larson, Chairman of the Democratic Caucus who helped make history Sunday night when the House passed Health Care Reform. You invited the President to address your caucus. Some have said they have never heard the President as passionate and as emotional. Can you capture the mood of the room for us and how did his talk help out in the final hours?

John Larson: The President is a strong persuader as I like to say. But he, without teleprompter, only glancing at a no card and I was standing and then sitting right next to him, he had a quote from Lincoln. He read that quote and he was really appealing to the members of the caucus and he appealed directly to them and he appealed to their better angels and appealed at all to the political side because he acknowledged the political side of this was dangerous and that people will probably lose their seat, perhaps even himself.

Margaret Flinter: And with that big step behind and hopefully a chance to draw a deep breath, we would like to end our talks with people by asking the question when you look around the country and the world, what do you see, Congressman, that excites you in terms of innovation and who should our listeners of Conversations on Health Care be keeping an eye on?

John Larson: Now, when you look at interoperability, when you look at health information IT, when you look at the genomic projects that are going on, not only will they save and cut cost as we project out into the future that they will, Reuters, the RAND corporation and others. But I think I look at my children and say my God, they will live into their hundreds probably without a problem and with a great quality of life because of the advancement of medicine and the advancement of technology and the advancement of innovation. It's also exciting to see what a great opportunity to have for America once again to be in the lead to go to the forefront to be willing to invest in manufacturing and invest in our own people, and in the process also, make it a better quality of life for all of our citizens.

Mark Masselli: Today, we have been speaking with Congressman John Larson, Chairman of the Democratic Caucus who helped make history Sunday night when the House passed Health Care Reform. Congressman, thank you for joining us this morning.

Mark Masselli: Each week, Conversations highlights a bright idea about how to make wellness a part of our communities into everyday lives. This week's bright idea focuses on a new initiative that's working to improve patient's safety and quality of care by teaching medical students how to handle and avoid common medical errors. Open School for Health Professions is an online resource center for medical students, containing free online courses, key studies and discussion forums which largely focus on learning about medical errors and care improvement techniques. Since its start in 2008, Open School has registered over 20,000 students and schools and hospitals have created chapters around the country and the world. In the past few years, the issue of how and when to include lessons on patient's safety and quality improvement in medical education has become the subject of much debate. A recent survey of medical students discovered that four out of five considered their education in these areas to be fair and best. Dr. Donald Berwick, President for the Institute for Healthcare Improvement, sees the Open School as one step ahead of traditional medical schools which are slow to make curriculum changes to restrict national standards. Dr. Berwick also considers the younger professionals emerging from these schools as a key part of adjusting care models to improving quality and safety. However, the strict hierarchy in many hospitals makes it hard for new physicians to communicate openly with their superiors. Open School hopes to broaden the dialogue on these issues allowing the newest generation of health professionals to better share their concerns and ideas with older colleagues. More effective communication will not only improve safety and quality on the

spot, it will also enable hospitals to make beneficial long-term adjustments. This discussion about patient's safety and quality improvement calls into focus the entire medical school system and its overall goals. Asking the question what, when and how should we teach our future health professionals by prioritizing the vital improvement of safety and quality education, IHI and Open Schools are doing their best to point a way out of this impasse. Better medical education in these areas will ensure better caring communities across the country. Now, that's a bright idea.

Margaret Flinter: This is Conversations on Health Care. I am Margaret Flinter.

Mark Masselli: And I am Mark Masselli, peace and health.

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