

Programme OPERA – ENTRETIENS

Entretien – santé n°15

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Responder: Sorry, my desk is a mess.

Interviewer: Yes, I understand. Can you first talk about your background here? I have seen some things on your biography, but can you explain what is your job now and how you arrived here?

Sure. Well, my title is long. It's Senior Counsel to the Chairman and the Chief Health Counsel, so I-- the Finance Committee has jurisdiction over tax, trade and healthcare, and each one of those groups has a chief person, so I'm the person that's the chief for the health side, and in that job, advise the Senator and work with other members of the committee, you know, put a plan for moving health reform forward, including, you know, hearings and briefings and member meetings and direct the policy making for the Finance Committee.

And the committee has jurisdiction over our federal health programs, so Medicare for the elderly and Medicaid for the poor, and the CHIP program for the Children's Health Insurance Program for those not eligible for Medicaid but still low-income, and also the Social Security Act.

So, those pieces, because they are large entitlement programs, when combined with the tax code, gives it a pretty broad jurisdiction, so we have a lot of responsibility on the health reform-- for the health reform pieces.

The other committee in the Senate is Senator Kennedy's Health Committee, and they have, usually, the public health programs, and also the insurance market and ERISA, which is the large employers that have benefits.

You mean, on the Health Committee?

Yeah, on the Health Committee. So, that's sort of the jurisdiction. I guess, in terms of how I got here, I was-- studied health policy in college, and then went to work for the agency that runs Medicare doing legislation and policy work there on Medicare issues, and then went to graduate school after that and got a PhD in health policy at Johns Hopkins.

Okay. What did you study?

My dissertation was in risk adjustment which, at the time, was sort of obscure, but now it's a bigger deal about how to adjust for health status. You could use these methods either for competing health plans to make sure that one plan doesn't get stuck with all the sicker people, or, you know, if you wanted to measure physician performance or quality, you wanted to make sure that you adjusted for health status to make sure that the system was fair, so those mechanisms were what I studied for my research, and then after graduate school, I went to law school at Minnesota, moved back to Washington, practiced law, which was very boring, and then came to the Hill.

So, I had worked for Senator Moynihan, and for Pete Stark on the House side, and then for Baucus, so I was on the Hill, I guess, '99 to 2005, and then I left for three years, did consulting and worked for a health insurance organization, and then came back to the Hill when it seemed like health reform would be moving, so I wanted to come back for that debate.

Okay. What's-- what was the most important-- what are the most important aspects of your job here? What are the parts that interest you the most? The-- I mean, what is the key?

Yeah. I think the most fun part is writing the legislation and putting together a proposal, and so I guess, you know, making sure it all fits together, and, you know, working with the Congressional Budget Office, who scores-- they tell us how much something costs or saves, so working with them to make sure the pieces fit, and then, I think, probably the political angle, working with the administration.

You know, now-- I had previously worked under Republican administration, which was not as much fun. Now they are all our people, and so we have a much closer working relationship with the administration, so working with them, and with colleagues on the Hill.

Okay. You told me that there were a part of this committee that was just focusing on tax issues. Do you think that there is a link-- I have read some books about the previous Congress, like, the Republican Congress, and they-- I think they made tax and health on the same project. They-- do you think-- do you work closely with them, or not, for health policy, or is it with different people?

With the Republicans?

No, no, no, with the tax--

Yes. My counterpart-- my colleague, Cathy, is the tax person, the chief tax person. We are working on the project together, so they are helping us find ways to pay for the reforms, and also, you know, if you subsidize low-income people in the country for health benefits through the tax code, for example, giving them a tax credit, then that also-- we work together on that to design that so that it works.

Okay. You worked with-- you were there for very important reforms of healthcare policy, like the MMA.

Yeah, I was here previously, on that.

Can you explain to me the process of your reform? Your role, and--

Sure. I mean, I guess it's similar to what it is now, which is-- and we were in the minority, so now we're in the majority. But we were in the minority and the Republicans were in control, and it-- you know, it's a similar role, working on the policy, to make sure that it made sense, that it would work if it was implemented, so designing sort of the-- you know, it was a standalone drug benefit, so, not connected with other benefits like hospital and physician care, and many people thought that it wouldn't work, so trying to figure out how you design a standalone drug benefit, and taking into account how much it cost, and the political implications, and how it would affect people and other industries, like the drug companies.

Trying to fit all those pieces together, it's like a big puzzle, I guess, and it's the same here, only on a larger scale, so, a whole benefit, more people, more money, more players.

And you are in the majority now. This must be a very important change.

Yeah, it's definitely-- because if something didn't happen, it's because you didn't make it happen, so, you know, trying to think ahead and plot out a strategy, I guess. So, you know, who does-- who should Senator Baucus be talking to, who does he need to make sure is on board, how does he communicate, you know, what he wants to do-- how does he interact with the administration, making sure we're working closely with the Republicans, if we want to build it with bipartisan support.

So, we've outlined sort of a plan. We had him put out a paper last fall that outlined his vision for healthcare reform, so we put that out in November, and then, this year, have had hearings and these series of roundtables and policy discussions behind closed doors, so sort of thinking about what comes next and what steps are needed to build public support and member involvement, other Senators need to be involved, so--

Okay. Are you working now, chiefly, on Senator Baucus' plan for reform, or is it, like, a mix of different approaches of the members in this committee?

I think both. It's working with Baucus, but we're working with Grassley, who is the Republican on the committee, so we're working closely with them, but at the same time, we need to make sure that we're touching base with, you know, all the members of the committee as well.

Okay, because, yes, they-- I mean, it's-- Senator Baucus and Grassley, they often drafted law together, so, do they share the same vision? Now, it's like a public/private approach?

Yeah, it's a public/private approach, but there's a lot of areas where they don't agree, but they're very good. They have a very good working relationship, so when there's

disagreements, they can say, “Well, you get some of this, and I get some of that,” and sort of work it out and negotiate, and so they're very good about doing that.

Okay, okay. And you are now in the process of working on these disagreements?

Well, that, and still trying to make sure where the rest of the members of the committee are. I'm not sure we're quite at the stage where we're trading priorities yet, but we're getting closer.

Okay. Working on the other members, how would you describe the homogeneity of this committee? The Finance Committee? I mean, are there a lot of members that have very different views, for instance, conservative people, or--

Different views, so we've got some moderates, like, Kent Conrad, from North Dakota, is very moderate. He's a fiscal conservative, and Blanche Lincoln from Arkansas is also a moderate, and Carper, from Delaware, and Bill Nelson, from Florida, all moderates.

On the liberal side, Senator Rockefeller, from West Virginia, and Bingaman from New Mexico and Stabenow, from Michigan, so it's a mix.

Okay. Do you think it's like representative of the whole committee, or the whole Senate, or do you think it's more liberal, or--

Probably more moderate.

More moderate. How would you explain that?

So, not as liberal as the rest of the caucus.

Is it because of the financial concerns of this committee, or--

I think-- I'm not sure I would describe it that way. I think it's just, historically, the committee has been more moderate, and moderate meaning, you know, more on the conservative side than the liberal side, so it's had a reputation long-standing for being more moderate, and having more moderates on it, perhaps because it has tax issues, but, you know, when I think, on the Republican side, you know, they have a few moderates.

I think, well, we had more, but one lost, last year, his re-election bid, and a few conservatives have been added, so-- but I think the Republican Party has been moved to the right, so it's probably reflective of their caucus, I would say.

Okay. Now, it has moved--

The whole party has moved to the right, and the members on the committee, I think we've added some conservatives, so--

Okay, so, less moderate, or more conservative people in the Senate in this committee, except Senator Grassley, that is-- has a reputation of being, like, in the center?

You know, I-- I mean, I guess I would describe him as a conservative, but he's willing to work together, so, ideologically, I'm not sure that he's a centrist. He's, you know, on the conservative side, but if you want to get something done, that requires compromising, and I think that, to me, is what's missing from the Republican side now.

You can be a conservative and still want to try to get something done, you know, in a way that reflects your own vision, but the party has moved so far to the right that they--

Even in the Senate?

Oh, yeah, definitely.

Because-- okay.

So, they tend to not want to do things and not want to work for us, and, I'd say, for that reason, Senator Grassley is different. He still wants to try to get something done.

Okay. And you feel that here, on the health issues, and for how long do you feel that?

That they're more conservative?

Yes.

I think maybe-- I mean, you know, I was surprised that they wanted to get a drug benefit done, so, that was surprising to me, because I think, you know, the party has continued to move to the right, and I think you see a lot of the moderates have left or not been re-elected.

Okay. Can you talk-- or explain to me what kind of relationships you have with the administration? Is it meetings, or is it very strong link, or--

I mean, I'd say it's a good working relationship. We talk on Wednesdays, we meet on Fridays, so we try to keep in close touch with them, you know, I think we worked with them on, you know, the economic recovery legislation earlier in the year, and I think they were not quite as organized, so it was hard to get a clear signal from them. Do you want A or B, and they said, "Oh, we don't care," but, you know, maybe the House wants A and the Senate wants B, and they wouldn't, you know, referee the fight.

You know, sometimes it's helpful if they say "We like B better," and then, you know, but they weren't doing that earlier. I think their philosophy, the philosophy of the President is that Congress writes the bill, and they try not to get involved in too many details, but they clearly have their own, you know, strategies and, you know, they do listening sessions, and they have the President traveling and doing forums on healthcare and, you know, the White House doing forums on healthcare, so--

Okay. Listening sessions.

Yeah, I think they've done, you know, where they go and meet in different parts of the country and somebody from the White House or the President or something will go talk to people about healthcare.

Okay. So, now, they have a more-- a clearer view on this reform?

I think they're developing a view, and we're working more closely, and in better collaboration than maybe the economic recovery bill.

Okay. I don't know, how would you compare this with the MMA, in 2003, with-- I know that you were in the minority, but I think Senator Baucus endorses--

Yes. He worked with Grassley to write the legislation. So, I'd say it's almost the reverse. He was in the minority, you know, the Democrats were in the minority, and the White House was a Republican President, and we worked with them to get that bill done, and many of the Democrats opposed that bill. Now, it's almost 180 degrees reversed.

So, now we have a Democratic congress and a Democrat in the White House, and Republicans in the opposition. I think-- it sounds like to me, though, Democrats didn't-- you know, during the MMA, they didn't have a competing proposal. They didn't have like, you know, two votes on two separate bills, but it sounds like the Republicans may try to have their own plan.

Now?

Yeah. I mean, we'll see, but that's what we hear, is that they would like to have their own version of the bill, and part of that is to draw people away from-- their own members away from supporting what we're working on, so they're more aggressive in opposing than maybe the Democrats were.

You mean in-- the Republican member in this committee, they are working on another version? Who is working on that--

I think we heard there's three. I'm not sure. So, maybe Burr and Coburn, from the far right, but we've heard other people. We've heard Enzi, maybe, is working on an alternative. I don't know, because they don't tell us.

Okay, so you will have, like, a surprise. It's very interesting. And, would you say that a President's (inaudible) administration were more-- I-- directive, with-- the leadership was stronger, or--

You know, in MMA, they played a similar role to the Obama Administration. So, during the Medicare drug bill debate, they had two ideas for a plan, and Congress said no to both, and wrote their own bill, and so I think, to their credit, the Bush Administration abandoned their own plans and worked with Congress to pass the vision that Congress had, and they did not have, you know, a lot of direction or a lot of, you know, detailed input. They mostly wanted it to pass.

That seems to be parallel to the role that the Obama Administration is playing. I would say, after MMA, the Bush Administration became more involved, in a detailed policy way, in a way that wasn't helpful. So, they-- you know, for example, last year, we did a Medicare bill, it was the last year of the Bush Administration, and they vetoed it, and they vetoed the CHIP

bill, so instead of working with Congress to get something done, you know, and of course the Congress was Democratic instead of Republican, so they-- but they opposed what the Democrats were doing, they didn't work with us to get something done, they just opposed, opposed, opposed, and tried to pull their members off, so--

After-- yes, I see. You were here-- you worked here for a long time. (inaudible) and are the people you are working with now the same than when you began? When you say that the committee staff and the people in the House or Senate you-- I don't know, are the same, or--

There is a couple of people that were here that were here before, but there's a lot of turnover, because these jobs are so demanding, and the hours are so long, and the stress is so high, so there's a lot of people-- new people. So, for example, on the Finance Committee, all the members have their own staff. Only one was here when I was here three years ago. Maybe one or two. But all the members have new staff handling healthcare, and here, on the committee staff, maybe two people were here when I left three years ago. So, a very high turnover.

At the senior level, people tend to stay longer, so my counterpart on Grassley's staff is the same person. I've worked with him for a long time.

Who is--

Mark Hayes.

Oh, yes, Mark Hayes. Okay.

And then Cybele Bjorklund, on the Ways and Means Committee in the House, she has been on the Hill for a long time, and we have known each other for a long time, and same with Waxman, Henry Waxman's senior person is Karen Nelson, and she's also-- I think she's been with him for 30 years.

Okay. Yeah, I've seen that Waxman people stay together.

Yeah, a really long time.

And that was, like, surprising, because, as you said, it's a lot of turnover, and what are, on your point, the consequences of this turnover? Do you think it's more difficult to work with people to enact legislation, or--

Yeah, because you have to know what you're doing, and you have to know how to work with the outside agencies and the congressional support organizations. It helps if you have historical knowledge of, you know, the Senate rules are complicated, so, knowing how, you know, a path for getting something done, you know, sometimes it's-- it's sometimes difficult-- when difficult people leave, it's okay, you know, if you have a very difficult person to work with, it's good when they leave, but for the most part, I'd say it's better when people stay.

Okay. For instance, the Health Committee, they have really-- new people, a lot of new people, so it's maybe more difficult for them to take part in this reform?

Yeah. I mean, if the person who was with Kennedy for 20 years is David Nexon, who is now with AdvaMed. If he had stayed, I think they would already have legislation written, and they would be much more out front.

But because they have newer staff who are more junior, I think it has been harder for them. They have Mark Childress, who was with HHS, he was Senator Daschle's-- he would have been Chief of Staff at HHS, of the Health and Human Services department, if Daschle had been the Secretary. He was with Daschle, but-- so, he came back to the Hill, and he's with Kennedy now, so he's very experienced.

Okay.

And David Bowen has been around for a long time, but not as long as, you know, some of the other staff.

Do you work with the House of Representatives? With the staff of the Ways and Means, and--

Yeah. We meet with them at least once a week, and I have lunch with my counterparts.

Ms. Bjorklund?

Yeah, and Karen Nelson. We have lunch every Friday, so-- just to keep in touch.

I don't want to borrow your time--

Oh, I have a meeting at nine, I'm going to have to--

Okay. I'm just looking if I have any important questions. I don't want to ask you questions about Senator Baucus' project, because it is, I think, on the Net, but who are his main allies in this plan, and in his project now? Who helps him and--

I'd say Kennedy is-- he's working closely with Kennedy and Grassley, and then, you know, members of the Committee, I'd say, we work most closely with.

Okay. Okay. I would be very interested in going to hearings and committee markups of the bill--

We won't have any more hearings. We may have a markup, I mean, hopefully, in June. If you want us to reserve a seat, we can set something up for you, but you should e-mail Andrew, who I think helped set this up.

Okay. I would be so pleased.

Yeah, yeah, yeah. We-- it's no problem. Just let us know, and we'll put your name on a chair or something.

Okay. I have met with someone from the Energy and Commerce Committee, I think it's one of your counterparts there, and he told me that it was crazy to have seats on this committee-- on the markup, because the lobby pays--

Yeah, they pay people to stand in line.

Yeah. It's-- I was, like, amazed.

Yeah, \$15 an hour or something to stand in line for five hours.

\$15? I want to do that.

Well, we had one hearing, and it starts at ten, and they had people lining up starting at 4:30 in the morning for--

4:30?

Yeah, so people were standing outside waiting to even get into the building to be able to stand in the line.

Wow.

Yeah.

Well, okay. I-- you have a meeting, but do you have, maybe, suggestions of other people I can meet or-- I've tried to meet with Ms. Bjorklund, but I think she didn't get my e-mails, because maybe it was--

I would work with her assistant to do that, and maybe Andrew knows who it is. I'm not sure what his name is.

Okay. I will ask.

So, yeah, I've got to go, because I have two minutes to get upstairs. That was really nice to meet you.

Yes, it was very nice. Thank you very much, and good luck.

Andrew: Yes, nice to meet you. Did everything work out?

Yes, I had a couple of questions. I'm sorry, I can't close my--