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## House Approves Prescription Drug Plan

Democrats Assail GOP Proposal; Vote Reveals Republican Rift

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A closely divided House early today adopted a \$350 billion Republican plan to help older Americans pay for prescription drugs, ending a tense struggle within the GOP over legislation that both political parties consider vital to the elderly – and their electoral fortunes this fall.

The 221 to 208 vote, with six legislators not voting, ended a day of uncertainty, as House Speaker J. Dennis Hastert (R-Ill.) and the Bush administration mounted a lobbying blitz to persuade a core of rebellious Republicans it was essential to act on a pivotal issue before facing their constituents this holiday break.

The narrow margin of approval followed a testy debate between Republicans and Democrats over deep-seated disagreements over how to accomplish a goal they share: helping the part of the population that is most dependent on medicine cope with its rapidly escalating cost.

The House bill would be more generous than a similar measure the chamber passed two years ago, but it is far less expansive – and expensive – than two prescription drug proposals that have been written in recent weeks by House and Senate Democrats. It would depend on people to get coverage from private insurance companies and health plans, while Democrats would rather make the coverage a new, voluntary part of Medicare.

The plan would spend approximately \$320 billion on such coverage over the next decade, starting in 2005, and an additional \$30 billion on payments to health care providers. Patients would pay about \$33 in monthly premiums and a deductible of \$250 before the coverage began. After that, they would pay 20 percent of the price of each prescription up to \$1,000 a year, then half the price up to \$2,000. At that point, coverage would stop, except for people with uncommonly large drug expenditures: Beyond \$3,700 a year, the government would pick up all costs.

Republicans emphasize that their plan would be more generous than the Democratic versions in helping older people with low incomes. The GOP bill would pay the monthly premium and cost of every prescription for older people with incomes of up to 150 percent of the poverty level, and give extra help up to those with incomes of up to 175 percent of the poverty level.

Despite this morning's action, it remains highly uncertain whether Congress will produce a benefit plan this year. The Democratic-led Senate plans to take up the issue next month, and neither political party appears inclined to compromise.

Last night, Republicans heralded their approach as "a giant step forward for seniors in America," as one of the bill's main authors, Rep. Nancy Johnson (R-Conn.) put it. They said the legislation would bring long-needed relief to older patients without spilling beyond the capacity of the federal budget.

"The program that is being talked about in this landmark legislation would give [the elderly] a flexible and affordable benefit," said Rep. Phil English (R-Pa.).

A solid lineup of Democratic women, however, labeled the measure "a sham" and "a cruel hoax." They and their male colleagues accused the GOP of aligning itself too closely with insurance and pharmaceutical interests to produce legislation that would not guarantee older patients needed help. And they grouched that the House's Republican leadership brought up the important issue at night and without allowing them any opportunity to

amend the legislation.

"When you go to bed with the pharmaceutical industry, you get a bill like this," said Rep. Fortney "Pete" Stark (D-Calif.).

Democrats, in particular, said the GOP approach was flawed because it would not set in law how much money patients would pay in monthly premiums and it would depend on insurance companies to provide a form of drug-only coverage that does not yet exist.

"It is not a Medicare benefit," said Rep. Frank Pallone (D-N.J.). "It doesn't guarantee any benefit . . . It doesn't even tell you whether it is going to be available."

Republicans countered that Democrats were cynically holding out a false promise of popular benefits that were simply unaffordable and unrealistic.

"They have a trillion dollar election-year gimmick that will bankrupt Medicare," said Rep. Jo Ann Davis (R-Va.).

The debate began after uncertainty through much of the day as to whether Hastert had mustered enough votes to bring the bill to the floor. At mid-afternoon, GOP officials privately acknowledged that they still lacked perhaps three dozen votes.

Yesterday represented an internal struggle within the GOP as the party strives to take control of the issue – and insulate its congressional candidates from criticism from Democrats. Some Republicans objected to the bill because they believe the government should help pay for the medicine only of the nation's poorest elderly residents. Others thought the bill does too little to try to lower the price of pharmaceuticals – or to increase payments for providers of health care, particularly in rural areas.

The struggle is the latest illustration of the difficulty Washington has had for years in satisfying one of the strongest – and most expensive – desires of the public. Democrats and Republicans have championed proposals to augment Medicare, the 1960s-era federal health insurance program for the elderly, which does not pay for prescriptions that patients take outside hospitals.

Repeatedly, these proposals have become bogged down in disagreements over how much assistance the government should offer, who should get that help, how it should be delivered – and how much the country can afford to spend. This year, the House debate also has become tangled in disagreements over how much money in the GOP's drug plan should be steered toward hospitals, doctors, health plans and other providers of care for Medicare patients.

Trying to coax reluctant Republicans, House GOP leaders met for a second consecutive day with individual lawmakers. A White House official said aides to President Bush made phone calls and met with lawmakers; Health and Human Services Secretary Tommy G. Thompson was contacting members, too.

GOP leaders tried to win support by offering to address some members' objectives in future legislation, but not all lawmakers were satisfied they could trust their leaders to remember the commitments once this vote was over.

Rep. Gil Gutknecht (R-Minn.) pressed his goal of trying to lower drug costs by allowing pharmaceuticals manufactured in the United States to be reimported from Mexico and Canada, where they are sold less expensively, and he scoffed at Hastert's offer to return to the issue in the future. "I looked at the speaker and said, 'Do you think I have 'stupid' tattooed on my forehead?'," he recounted.

Sensing the GOP's vulnerability, Democrats unleashed attacks on the Republican plan. During a morning news

conference, the voice of House Minority Leader Richard A. Gephardt (D-Mo.) cracked as he described his 94-year-old grandmother's dependence on an expensive eye medication. He insisted the upcoming vote was "not about politics." In a closed-door meeting at noon with fellow Democrats, Gephardt described the vote as a "bright line" defining the differences between the parties.

By early evening, at least some GOP objectors said they would support the plan. Several conservatives, such as Rep. Todd Akin (R-Mo.), who said he was backing the GOP bill "under duress," decided that it was preferable to the Democrats' plans.

"I'm torn between feeling that I don't really like an entitlement and my worry that any alternative is going to be an entitlement five times larger," Akin said.

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