

1 TELEFORUM WITH CONGRESSWOMAN LYNN WOOLSEY

2 August 10, 2009

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6 MODERATOR: I'd like to introduce Congresswoman Lynn
7 Woolsey. As many of you already know she has served Marin and
8 Sonoma Counties for 16 years in Congress. She is the Co-Chair of
9 the Congressional Progressive Caucus, the Chairwoman on the
10 Subcommittee on Workforce Protections and a member of the
11 Committees on Education and Labor, Science and Technology and
12 Foreign Affairs. And again, at any time if you'd like to ask the
13 Congresswoman a question please press 'star 3' and a call
14 screener will be with you shortly. And now joining us is
15 Congresswoman Woolsey. Congresswoman?

16 CONGRESSWOMAN WOOLSEY: Hi. This is your Congresswoman
17 Lynn Woolsey. Right now I'm sitting in my office in Santa Rosa
18 talking with you and it's actually me, this is not a robo call. I
19 know that evenings can be busy with kids to put to bed and dinner
20 to finish so I'm glad that you've taken your time to talk with me
21 tonight. After all I work for you so if you have a question to
22 ask me about health care please press 'star 3' on your telephone.
23 Another good way to stay informed with what's going on in
24 Washington is by signing up for my electronic newsletter, you can
25 do it by visiting www.woolsey.house.gov. Tonight we are going to

1 talk about one of our country's most pressing problems, our
2 broken health care system. At least 46 million Americans do not
3 have health insurance 7,700,000 in California and at least 80,000
4 in the 6th Congressional District. Even those with insurance are
5 struggling to pay skyrocketing costs and are worried they could
6 lose their coverage. Health care expenses for an average family
7 of four are projected to jump to \$1,800 - to jump by \$1,800
8 yearly. In California the average family premium will rise about
9 \$13,000 to more than \$22,000 by 2019 without health care reform.
10 The insurance companies have shown that they can not or will not
11 provide the comprehensive and affordable coverage Americans need
12 so Congress must act now with reform legislation that includes a
13 robust public plan which would offer competition to the insurance
14 companies. This plan would guarantee access to high quality care
15 regardless of income, regardless of employment or pre-existing
16 conditions. It would also bring down the cost of care to make
17 insurance more affordable to everyone. Like most Californians, I
18 believe the best way to provide such quality health care is
19 through a single-payer system. But I've joined with other
20 Progressives to back a strong public plan linked to Medicare
21 which would be one insurance option competing with private
22 insurance companies. It should be based on the current Medicare
23 provider network and infrastructure with rates based on Medicare
24 without having to build a provider network and without having to
25 negotiate rates. It would also save \$75 billion in set up costs

1 and could begin immediately. Most importantly a public plan
2 linked to Medicare would provide the competition now lacking in
3 the insurance market forcing insurance to improve efficiency and
4 to control costs. The House leadership is now melding three
5 different bills into final legislation. Two of these bills have a
6 robust public plan. I expect the final bill to retain a public
7 option linked to Medicare. If it doesn't it won't be meaningful
8 health care reform. Well, I think that's enough of me talking. I
9 organized this event so I could hear what's on your mind but to
10 get the conversation started let's begin with a poll.

11 MODERATOR: Our first poll question this evening is:
12 What is the most important part of health care reform to you and
13 your family? If you choose 'Bringing down costs', press number 4
14 on your phone; and if you choose 'Reining in the power of
15 insurance companies', please press number 5. Now, while we're
16 waiting for our results Congresswoman we have your first call. It
17 is Marlis Mayfield from Mill Valley. Marlis you are live with the
18 Congresswoman. Marlis? Hello Marlis?

19 MARLIS MAYFIELD [Mill Valley]: Hello.

20 MODERATOR: Hello Marlis?

21 MARLIS MAYFIELD [Mill Valley]: I really appreciate.

22 MODERATOR: Hello?

23 MARLIS MAYFIELD [Mill Valley]: Hello. Yes I ask how
24 much a chance we have of getting a single-payer plan or - or
25 something akin to that. It seems rather frightening now that I

1 understand that the President's beginning to back down on perhaps
2 having a public option and I - I just - my heart just sinks to
3 think that we might - that the insurance companies might again
4 become, in fact, subsidized by a new plan and more people would
5 perhaps would be covered but the costs would begin to spiral
6 upwards and I just wondered what - how Lynn Woolsey feels about
7 all this.

8 CONGRESSWOMAN WOOLSEY: Thank you Marlis for asking
9 that very good question and I know it's probably the number one
10 question on everybody's mind listening to the call tonight. One,
11 we must have a robust single - a robust public option because the
12 Progressives in the Congress, we make up - oh there's 84 of us
13 that make up the Progressive Caucus, we all have voted for a
14 single-payer if we had been allowed to bring what we want forward
15 but it didn't - isn't part of the plan because it was not going
16 to come close to passing. So instead we put all of our energy
17 behind a robust public plan that can get us to single-payer over
18 time. And will it happen? It's included in two of the pieces of
19 legislation, one out of Education and Labor and one out of Ways
20 and Means and it's not included the Energy and Commerce bill to
21 the degree we would expect. So what the Progressives have done,
22 we signed a letter to the Leadership - to Speaker Pelosi and to
23 the Whitehouse - 60 of us signed the letter the last Friday that
24 we were - a week ago Friday when we - before we left to come home
25 for our August break. And our letter said we would not vote for

1 health care reform that did not include a robust public option
2 and that would mean basing the rates on Medicare Plus and using
3 Medicare for the provider network. So thank you Marlis.

4 MODERATOR: Thank you Congresswoman. For our first
5 poll result 65 percent of your constituents voted for 'Reigning
6 in the power of insurance companies' the other 35 voted for
7 'Bringing down costs' as the most important part of health reform
8 to them and their families. Remembering anyone on the line with a
9 question for Congresswoman Woolsey please press 'star 3' our Town
10 Hall operators are waiting for you and your questions and now we
11 are going to go to Francine Bloom from San Anselmo. Francine?

12 RUSS BLOOM [San Anselmo]: This is Russ Bloom, I'm her
13 son and we have the same opinions and she asked me if it would be
14 alright if I spoke for us.

15 MODERATOR: Go ahead.

16 RUSS BLOOM [San Anselmo]: Okay, great. I've got a
17 couple of questions, first of all I - I agree entirely with what
18 the Congresswoman has said. My fear, however, is with the Max
19 Baucus's and the Blue Dogs that they're fighting this and I'm
20 also getting quite concerned the initial caller was right when
21 she said the President is assiduously backing away from saying
22 'I'm drawing a line at the public option' he seems to be willing
23 to settle for these co-ops and things like that which I think
24 will just leave us dealing with the insurance companies and won't
25 have nearly the impact as the public option. Even his surrogates,

1 over the weekend Dick Durbin even said 'Well that's - that is
2 something we will be willing to negotiate where we wouldn't have
3 before' that type of thing and I was wondering why the President
4 does not do - I realize he should not be compared to Keith
5 Olbermann, however, for many months I've been wondering why the
6 President does not call out the Blue Dogs and the people like Max
7 Baucus and say if you do not go along with this - which is why
8 the Democrats were voted in - then he should call them out and
9 let the people know just how much they are being subsidized by
10 the health care industry. The figures are utterly staggering and
11 I wish the President would play hard ball with the Blue Dogs who
12 seem bent on destroying this plan to the extent that we all
13 really had hoped when we elected President and the rest of the
14 Democrats to accomplish this.

15 CONGRESSWOMAN WOOLSEY: Well Russ you couldn't have
16 said it better. What I want to do is reassure you that the
17 Progressive Caucus, there's 84 members of the Progressive Caucus
18 and I'm going to remind you that 60 of us sent a letter to the
19 House Leadership saying that we will vote against the bill if it
20 doesn't have a robust public plan. And we do not consider co-ops
21 robust in any way. We consider that weakening because in many
22 markets there's only one insurance company and that company may
23 control 70 or 80 percent of the market which would make it very
24 difficult for any local competitor like a co-op to enter the
25 health insurance market in the first place. And co-ops will have

1 a hard time getting off the ground finding enough doctors and
2 hospitals and they won't be able to compete effectively. So
3 that's why we don't consider that an option to providing a robust
4 public option. I'm saying option and robust over and over but I
5 can't emphasize that enough because if we can't compete with
6 private health insurance companies we're just going to be
7 continuing what we already have and that is not acceptable to the
8 Progressives and that is why we wrote that letter to our
9 Leadership and we sent it saying 'without a robust public plan
10 they do not have our support.' Thank you.

11 MODERATOR: Thank you. Remembering if you have a
12 question for Congresswoman Lynn Woolsey this evening on health
13 care please press 'star 3' at any time. Now we're going to go to
14 Kathy Phipps of Santa Rosa. Kathy you are live with Congresswoman
15 Lynn Woolsey.

16 CONGRESSWOMAN WOOLSEY: Hi Kathy.

17 KATHY PHIPPS [Santa Rosa]: Hi Congresswoman I'm glad
18 to see you back in Santa Rosa again.

19 CONGRESSWOMAN WOOLSEY: It's nice to be here.

20 KATHY PHIPPS [Santa Rosa]: I have a question about
21 seniors. Is there anything in the health plan that will be
22 detrimental to their care or is everything going to be fairly
23 equal across age groups? With everybody living a little bit
24 longer and still retiring at 65 or so you've got a lot of years
25 where health care is extremely expensive.

1 CONGRESSWOMAN WOOLSEY: Well, absolutely. (*Voices*
2 *overlap.*)

3 KATHY PHIPPS [Santa Rosa]: And my own Mom is dealing
4 with dementia. I was wondering how that was going to be affected.

5 CONGRESSWOMAN WOOLSEY: Well seniors in this bill, if
6 they're on Medicare they keep their Medicare and actually the
7 bill encourages seniors and their families to talk to a medical
8 professional about end of life care. Which of course the right
9 wing have turned into something else entirely. But this
10 counseling is currently available under Medicare and we're
11 expanding it to all health care plans. And the House health care
12 bill will work to eliminate the gap in the Medicare prescription
13 drug coverage called the donut hole so that seniors can get their
14 drugs - those prescription drugs they need without having to pay
15 exorbitant prices as they are now. So this bill will help more
16 than 12,000 seniors in Marin and Sonoma Counties and it will save
17 money under Medicare that can be invested in health care reform.
18 So the House bill is saving money by eliminating the 12 percent
19 Medicare Advantage subsidy that goes directly to health insurance
20 companies and putting that money back into the health care reform
21 activities that have to take care of our seniors. And so we're
22 looking forward to seniors being very comfortable with their
23 health care and making sure that Medicare stays strong and
24 available to them Kathy. So thank you.

25 MODERATOR: Thank you Congresswoman. Remembering press

1 'star D' if you have a question for Congresswoman Lynn Woolsey
2 this evening on health care. Now we're going to go to Jim Downy
3 of Cazadero. Jim are you on the line?

4 JIM DOWNY [Cazadero]: Yes I am, hi. Yeah I'd like to
5 run down a little different view of it from what's been said so
6 far maybe explain a little bit why there's so much anger that
7 we're seeing out there with the meetings and such. And really as
8 I see it We've got, you know, a phantom health care plan. You
9 know this isn't really like Social Security where if we add 20
10 percent to the rolls we can just run the check machines longer in
11 the basements of the Treasury Department. You know, we're going
12 to put 50,000,000 plus people on the rolls, you know, we're going
13 need 125 hospitals, 300 to 400 new clinics, 125 special nursing
14 facilities and you know 4 to 6 teaching hospital campuses to
15 bring the doctors on line. You know, and then you've got to start
16 in the community colleges with incentives for people to get into
17 nursing and to the tech fields to build it up. It's a 7 to 12
18 year project starting at \$150 billion to \$300 billion and
19 nobody's even talking about it. So there's -

20 CONGRESSWOMAN WOOLSEY: Jim. Jim are you concerned of
21 why we need health care reform or -

22 JIM DOWNY [Cazadero]: Absolutely.

23 CONGRESSWOMAN WOOLSEY: Or are you talking about how
24 we're going to pay for it? Well, actually in response -

25 JIM DOWNY [Cazadero]: But I think you're saying 'pay

1 for it' isn't talking the infrastructure. You know, we can't just
2 put more money into the structure we've got. It's overloaded.

3 CONGRESSWOMAN WOOLSEY: That's right. We know that and
4 I want to tell you that everything that you listed of what we
5 need to do is exactly why we need health care reform. And if we
6 do it right then we will have the funds and the infrastructure in
7 place to take care of all of our citizens. There's at least
8 46,000,000 Americans that aren't insured right now. Over 7.5
9 million in California alone and by the end of today 14,000 more
10 Americans will lose their coverage, more than 2,000 of them in
11 California. So we need to do all that you listed, we need to make
12 sure it's paid for and one of the ways we're going to do that is
13 by insisting on efficiency and not - and cutting back on overuse
14 and making sure that those who can afford it will - the
15 wealthiest people in this country they have to pay a surcharge
16 and oh by the way, I represent one of the wealthiest districts in
17 this nation and it's been very clear to me from the beginning
18 that the people that I work for know that the privileges they
19 have will result in better health care over time for others. So I
20 thank you Jim for - for calling.

21 MODERATOR: Thank you and now we are going to go to
22 Tom Abrams of Sebastopol. Tom do you have a question for
23 Congresswoman Woolsey?

24 TOM ABRAMS [Sebastopol]: Yeah I do. Actually I have a
25 number of them but the one that I presented to your screener was

1 can you - can you give an indication of how many specific
2 proposals there are by the various committees that are in
3 discussion right now? And where does one go about finding a
4 description of the proposals that are presently under
5 negotiation?

6 CONGRESSWOMAN WOOLSEY: Okay thank you very much Tom.
7 There are three bills that have been passed. Out of the three
8 committees of jurisdiction, one each of the three juries - three
9 committees of jurisdiction one is - comes out of Education and
10 Labor, the committee I sit on and you need to know that we worked
11 on that bill from 10 in the morning until 6 the next morning in
12 improving it and voting on it with the Republicans. The other one
13 comes - and it includes a robust public health plan. The other
14 one comes out of Ways and Means and it too includes a robust
15 public health plan and then the third in the House comes out of
16 Energy and Commerce. Then there are two bills. One out of the
17 Health Committee in the Senate which has been passed out of that
18 Committee and then the Finance Committee in the Senate is on
19 hold. And each of the Committees has a copy of their bill on
20 their website, the Committee website. And there's information
21 about the different parts of the different bills on my website.
22 So thank you very much.

23 MODERATOR: Now thank you all. We are going to go to
24 Kiera Ansted of Sebastopol. Kiera? Hello Kiera?

25 KIERA ANSTED [Sebastopol]: Thank you, I appreciate

1 your taking my call. We have had a catastrophe as far as our
2 health concerns for my husband this last year and it's been
3 horrible. And what's happened is you mentioned it earlier, the
4 donut that happened. We pay extraordinarily high prices just to
5 get insurance coverage and it still isn't enough. Just for my
6 husband and I outside of what Medicare takes from our checks we
7 pay about \$3,500 to \$3,700 a month for the supplement and that
8 still isn't enough to take care of this catastrophic thing that
9 we had - we had run into. Now we're on our own until, I think
10 it's \$2,700 we have to pay out of pocket to make this work. So
11 how are we going to benefit from what we need to have done here?
12 Are we going to benefit at all from this?

13 CONGRESSWOMAN WOOLSEY: Oh absolutely.

14 KIERA ANSTED [Sebastopol]: And how soon?

15 CONGRESSWOMAN WOOLSEY: Well how soon is a second
16 question. If we have real health care reform [ANSTED: "Um,
17 hmmm."] your family will not be in a situation like that ever
18 again. [ANSTED: "Um, hmmm."] And what we're looking at is making
19 health care affordable for the average family [ANSTED:
20 "Definitely."] which would - if we don't do anything the cost of
21 health care for an average family of four is projected to jump
22 \$1,800 a year over what you just told me about if you can imagine
23 that. [ANSTED: "Oh my gosh."] So what we need now is to make sure
24 that health care is affordable and it will be affordable if we
25 have competition. If the private health insurers can compete - if

1 they can't compete against a public plan then they shouldn't be
2 in the business. But a public plan that's based on Medicare rates
3 and using the Medicare network for physicians will provide that
4 option for you and will provide the competition that will keep -
5 help lower prices - costs. So thank you so much.

6 KIERA ANSTED [Sebastopol]: Thank you.

7 MODERATOR: Thank you Congresswoman Woolsey. Just a
8 reminder to everyone, if you have a question for Congresswoman
9 Woolsey please press 'star 3' on your phone. Right now we're
10 gonna go to another poll. Our poll question is: What do you think
11 is the most important change a robust public option will bring to
12 our health care system? If you choose "Bringing down costs"
13 please press 4 and if you choose "Increase competition" please
14 press 5. And now we are going to go to John Nicholas in Rohnert
15 Park.

16 CONGRESSWOMAN WOOLSEY: Hi John.

17 ANNOUNCER: John?

18 JOHN NICHOLAS [Rohnert Park]: Hi. I'm actually his
19 son but this is a question on behalf of my own household. We'd
20 like to know since America's main business so far has been war as
21 well as health care when are we going to get away from the
22 business aspect of health care and go to a more health care
23 that's open to everyone and not so much relied on cost? Something
24 like France or some of the Caribbean countries.

25 CONGRESSWOMAN WOOLSEY: Well actually John it'll

1 always rely on costs somebody has to pay for it. In France and
2 the other industrialized countries taxpayers pay for the
3 wonderful coverage that they have, universal coverage for all.
4 And a single-payer it would be the preferred way to do what you
5 want. Provide health care for everyone but we - and we can get to
6 a single-payer if we have a robust, good, successful public
7 option. But I want you to know that there's a - we passed out of
8 the Committee I sit on Education and Labor, we passed an
9 amendment that was offered by Representative Dennis Kucinich that
10 would allow states to waive ERISA, those are the tax laws and the
11 regulations that cover interstate insurance and pension plans and
12 anyway, states would be able to choose their own single-payer if
13 they - if they preferred and it passed out of the Committee.
14 Dennis - he brought the amendment forward. I spoke for it. I was
15 - I'm one of the people on his bill and I was the first one on
16 the Committee to vote for it but Democrats were joined by
17 Republicans in voting for it because, you see there are some
18 Republicans and many that believe in state rights. So we're
19 hoping it will stay in - in the final bill. At the very least
20 we'll get to vote for it as a stand alone amendment on the House
21 floor because states that want to - and if California wants to
22 have its own single-payer system we want them to be able to do
23 that. California has the population of Canada and if Canada is
24 successful with their Canadian health care plan and California
25 could be successful with their single-payer plan that would be a

1 beginning for the rest of the country and other states to do the
2 same thing. So that amendment would allow that and there is a
3 chance that we'll be able to vote straight up and down - up or
4 down on a single-payer option when we start debating on the House
5 floor and vote on the final health care package. Thank you.

6 MODERATOR: Thank you Congresswoman. Announcing our
7 poll results, our question was: What do you think is the most
8 important change a robust public option will bring to our health
9 care system? 58 percent of you said 'Bring down cost' and 42
10 percent of you said 'Increase competition'. Now if you have a
11 question for Congresswoman Woolsey please press 'star 3' on your
12 phone. Our Town Hall operators are waiting for you. And now we
13 are going to go to Mary Abengendio of San Rafael. Mary?

14 CONGRESSWOMAN WOOLSEY: Hello Mary.

15 MARY ABENGENDIO [San Rafael]: I think my question was
16 partially answered. I am 89 years old. I am a COPD patient.
17 Recently my doctor put me on hospice but I am doing fine. I'm
18 mentally alert, I'm able to - and I'm hoping that my funds will
19 not run out before - pretty soon I may have to have around the
20 clock care but now I have my 4 children and a lady that comes in
21 the day so I'm doing pretty well due to the fact that my late
22 husband and I did put aside some money trying to stay in my home.
23 My question is - I've been hearing so much negative things about
24 elderly people. I'm sure that isn't true I think that's just not
25 true what they're saying on the television. I can't make heads or

1 tail out of what they're - what's going on with these hearings
2 that they're having and nobody lets anybody talk.

3 CONGRESSWOMAN WOOLSEY: Well that is difficult isn't
4 it?

5 MARY ABENGENDIO [San Rafael]: Yes and in my position
6 I'm really interested.

7 CONGRESSWOMAN WOOLSEY: Well I believe you're talking
8 about the bill - the part of the bill that encourages seniors and
9 their families to talk to a medical profess- professional [MARY:
10 "Yes."] about the end of life.

11 MARY ABENGENDIO [San Rafael]: Yes, which is fine I
12 mean I'm 89 years old. They're not forcing me to do anything.
13 They're taking good care of me and they come and they - and they
14 - the expensive medicines that I was paying for they're paying
15 for. They're helping me. [*Voices overlap.*]

16 CONGRESSWOMAN WOOLSEY: Yes thank you for knowing that
17 but we also need - Medicare allows doctors and professionals to
18 talk to your - you and your family about how - about what you
19 want to do when you want to do it later when you need to.

20 MARY ABENGENDIO [San Rafael]: Yes, oh yes.

21 CONGRESSWOMAN WOOLSEY: But we just want to transfer
22 that to all health care plans so that - those, those services are
23 available and it's only - it's planning and when you plan, things
24 go better.

25 MARY ABENGENDIO [San Rafael]: I'm so happy to talk to

1 you.

2 CONGRESSWOMAN WOOLSEY: Thank you - thank you Mary.

3 Good bye.

4 MODERATOR: Thank you Congresswoman. Next we are going
5 to go to Maureen Crist of San Rafael.

6 MAUREEN CRIST [San Rafael]: Hello how are you?

7 CONGRESSWOMAN WOOLSEY: Hi Maureen.

8 MAUREEN CRIST [San Rafael]: I am calling because I am
9 a Progressive Democrat and really would love to see a single-
10 payer get through and I have good understanding of what you're
11 talking about and I appreciate how carefully you're explaining
12 this to people. And I'm just wondering will you folks who signed
13 that letter, the 60 Progressives who signed that letter, do you
14 really mean what you say? Will you vote for something that
15 doesn't have a public option?

16 CONGRESSWOMAN WOOLSEY: Well actually, well it depends
17 on the public option. That's, see it can't be just a public
18 option.

19 MAUREEN CRIST [San Rafael] : Well like I don't think
20 a co-op is a public option.

21 CONGRESSWOMAN WOOLSEY: Well they - they will call it
22 that. So what we [*Voices overlap.*] what we are saying - what we
23 are saying is that we will not - we will vote against the bill
24 that does not have a robust public option. And then we define
25 robust because and - and we're clear in our letter that we don't

1 consider the co-op a real option. So [Voices overlap.] I can only
2 speak for me okay. I'm the only one Maureen I can say I know
3 absolutely I will not vote for health care reform that is not
4 real health care reform. So -

5 MAUREEN CRIST [San Rafael]: Well I really support
6 your courage and commitment.

7 CONGRESSWOMAN WOOLSEY: Well thank you very much but
8 we need at least 40 of us. We have 60 signing on to that letter
9 and we don't want to stop health care reform. We want to
10 encourage real health care reform.

11 MAUREEN CRIST [San Rafael]: Exactly. And it can't be
12 considered public if the insurance companies are still running
13 it.

14 CONGRESSWOMAN WOOLSEY: That's right and if the rates
15 are based on insurance company insurance averages then we've
16 gained nothing.

17 MAUREEN CRIST [San Rafael]: Right, right. Well I send
18 you all my support.

19 CONGRESSWOMAN WOOLSEY: Thank you.

20 MAUREEN CRIST [San Rafael]: Thank you.

21 MODERATOR: Thank you Congresswoman Woolsey. Next we
22 are going to go to Gracella Hunt of Forestville.

23 GRACELLA HUNT [Forestville]: Good evening. Hi how are
24 you? What I wanted to do was say - How can we help you? How can
25 we, I'm on Medicare, love it, think it's wonderful, think

1 everybody should have it.

2 CONGRESSWOMAN WOOLSEY: Well aren't you nice. Okay
3 that's yes that's a great question. And of course it's wonderful
4 for me to know that I have the support of my constituents but you
5 know I'm there and I'm going to do what I'm telling you I will
6 do. What - what I think the Whitehouse needs to hear from you.
7 The - our Leadership needs to hear from you. They need to hear
8 that as far as you're concerned health care reform is not real
9 health care reform without a very strong, robust public option.
10 And if you say that and if you - actually if I was doing this I'd
11 start out with, you know, Dear Speaker Pelosi or Dear Mr.
12 President, my choice is a single-payer plan but the very least
13 that we - we need to be doing is putting together a - a robust
14 public option so that we can get to a single-payer at some time.

15 GRACELLA HUNT [Forestville]: So then you would
16 encourage everyone to write, call, [REP.WOOLSEY: "Yes."] run
17 whatever it is it takes to do this. [Voices overlap.] [REP.
18 WOOLSEY: "E-mail works."] Hopefully, well too bad I'm one of
19 those old people than never got a computer [Voices overlap.]

20 CONGRESSWOMAN WOOLSEY: Or call. Call, write. It works,
21 it works. It's absolutely - you know, and we're not threatening.
22 Don't be threatening. Just say this is what I want. Because our
23 Leadership works and our President works for all of you not -
24 they do not work just for the conservative Blue Dog Democrats.

25 GRACELLA HUNT [Forestville]: Okay thank you very

1 much.

2 CONGRESSWOMAN WOOLSEY: Alright. You're welcome.

3 GRACELLA HUNT [Forestville]: Good luck.

4 CONGRESSWOMAN WOOLSEY: Thank you.

5 MODERATOR: Thank you everyone for staying on the
6 line. Let me remind you if you have a question for Congresswoman
7 Lynn Woolsey on health care please press 'star 3'. And now
8 Congresswoman we are go to Bill Ronchelli of Santa Rosa.

9 BILL RONCHELLI [Santa Rosa]: Congresswoman Woolsey I
10 appreciate this opportunity to talk with you and what - what my
11 question is - are these three bills that are being considered in
12 the House going to be able to facilitate the increase to local
13 doctors that are classified in the rural area and also be able to
14 bring down the cost of prescription drugs?

15 CONGRESSWOMAN WOOLSEY: Well thank you Bill for
16 calling me. The question about the Sonoma Reimbursement - Sonoma
17 County Reimbursement rates is actually addressed in all three of
18 the House bills and if - whatever order they, you know, we
19 integrate the - all three of them together there's no reason for
20 us to think we will lose that fix for the doctors in our
21 district. Now usually, but now I'm only talking to my
22 constituents right now Marin and Sonoma County, I usually whisper
23 when I talk about this because I don't want anybody messing it
24 up. We have every reason to think at least out of the House that
25 we will have it fixed and we're hoping we can count on the Senate

1 also. So thanks Bill thanks for calling.

2 MODERATOR: Thank you everyone. Congresswoman we are
3 going to go now to Neil Binder Wheeler of Sebastopol.

4 LORETTA WHEELER [Sebastopol]: Hi, this is actually
5 Loretta but the phone is in his name and I want to say that I
6 love this forum. [REP. WOOLSEY: "Oh I'm so glad."] [Voices
7 overlap.] this opportunity and my question has to do - I have two
8 questions - I keep hearing robust public option and you might
9 have defined that and you said you defined it in your - you
10 defined in your letter or in the bill - but what does that look
11 like to the person on the ground here? And -

12 CONGRESSWOMAN WOOLSEY: What it looks like to you is a
13 plan that is competitive to the private plans. A plan that is
14 public so there's no need to have a 30 percent overhead to have a
15 profit so that executives can get big, huge salaries and bonuses
16 and so that - and - nor would the public plan have to pay stock -
17 their - to their stockholders. So the plan actually will cost
18 less because they can do more with less when they don't have that
19 overhead. But the only way - the way to make that happen is to
20 ensure that the rates are based on something that we can trust
21 and that we know and that is Medicare. We would have [WHEELER:
22 "Um, hmmm."] Medicare Plus 5 or Medicare Plus 10 percent but that
23 - that can be worked out as long as it's based on Medicare and
24 does not have to be negotiated. Each plan with each set of
25 providers. The other thing and providers then would be the doctor

1 networks and the hospitals. [WHEELER: "Um, hmmm."] What we would
2 have for a public plan if it's robust - I could say strong but we
3 use robust because people are starting to know what that means
4 now. Robust means that the provider network would be the same as
5 Medicare. Now we've negotiated something - I mean we've given in
6 - compromised on something and that's that doctors that don't
7 want to take the public plan can opt [WHEELER: "Um, hmmm."] out.
8 But they can opt out anyway and they can opt out of Medicare if
9 they want to. So we're assuming they won't opt out because why
10 would they? They're going to have a whole group of great new
11 patients when this plan gets put together. So that's really the
12 two major parts of the public plan. It will have all the same
13 standards that all health care plans - no pre-existing conditions
14 and - and you can't - you won't lose your coverage if you get
15 sick or if you lose your job. I mean it's - there's some good in
16 the health care reform. There's some good insurance company
17 reform so for now we want to make sure the health care part of it
18 is what we expect it to be. So thank you.

19 LORETTA WHEELER [Sebastopol]: I had another question.

20 CONGRESSWOMAN WOOLSEY: Oh, okay.

21 LORETTA WHEELER [Sebastopol]: What about this - is
22 this - will this include dental coverage and -

23 CONGRESSWOMAN WOOLSEY: At the moment it doesn't no.
24 They're looking - well - no, not right now. But no insurance
25 unless it's dental insurance.

1 LORETTA WHEELER [Sebastopol]: Well I know that in - I
2 work in social services and Medi-Cal has cut huge chunks out of
3 its dental services so now people's options basically are to get
4 their teeth pulled and Medi-Cal will pay for that. [*Voices*
5 *overlap.*]

6 CONGRESSWOMAN WOOLSEY: I know and we need to do
7 something about that. That's absolutely insane but at the moment
8 [*Voices overlap.*] Yes. Some plans might and, you know, there will
9 be a basic benefit packet that has to be in every single plan and
10 some plans might have dental but this - I don't believe the
11 public option at this moment has dental in it.

12 MODERATOR: Thank you Congresswoman.

13 CONGRESSWOMAN WOOLSEY: Oh thank you.

14 MODERATOR: Are you done? Okay we're going to go next
15 to Francis Parrara of Petaluma.

16 FRANCIS PARRARA [Petaluma]: Yes I'm here. I'm here.
17 Hello. I'm Francis, I'm here.

18 CONGRESSWOMAN WOOLSEY: Hi Francis. Ask your question
19 please, this is Lynn.

20 FRANCIS PARRARA [Petaluma]: Okay, I'm concerned about
21 hanging on to our insurance that we have right now. It's Blue
22 Cross, Blue Shield government plan that my husband had when he
23 was in civil service and we just kept it after he retired. And so
24 we're concerned about hanging on to that plan.

25 CONGRESSWOMAN WOOLSEY: Well Francis if you currently

1 have health insurance and you like it you can keep it. This bill
2 will give you the security and the mobility you need to change
3 jobs or to move or not have to worry about losing your health
4 coverage for yourself or your family. But now if your - if the
5 plan changes, your employer changes what they're providing then
6 you can opt into the - go to the insurance exchange and find
7 another way to cover yourself. If you receive your insurance
8 through the government whether it's Medicare, Medicaid or
9 Veterans you can also keep your health insurance. So if you're
10 covered you can keep it. Thank you.

11 MODERATOR: Thank you Congresswoman. We're going to go
12 next to Valda Whitman with a similar question from Sonoma. Valda?

13 VALDA WHITMAN [Sonoma]: Yes.

14 CONGRESSWOMAN WOOLSEY: Hi Valda.

15 VALDA WHITMAN [Sonoma]: Hi Lynn. What I would like to
16 ask you about is - we have been members of Kaiser for a long time
17 and in the last many years they have really become outstanding in
18 the service that they offer. We are in the Senior Advantage plan.
19 Now is that considered a subsidized health insurer?

20 CONGRESSWOMAN WOOLSEY: Well Kaiser isn't but Senior
21 Advantage is and so there may be some tweaking there for you. So
22 that may cost you more. You may pay more for if - if you choose
23 but the federal government is not going to pay more for the
24 Senior Advantage. That will be an offset to the cost of - of this
25 so indeed you may end up paying for that out of pocket.

1 VALDA WHITMAN [Sonoma]: Have you any idea how much
2 that would be?

3 CONGRESSWOMAN WOOLSEY: No I don't. Sorry. I don't
4 know.

5 VALDA WHITMAN [Sonoma]: When you've got something
6 good that's really working you hate to [*Voices Overlap.*]

7 CONGRESSWOMAN WOOLSEY: Oh of course you hate to and
8 we don't - I mean I don't blame you but this something that
9 paying - this is another - the federal government is paying for
10 Senior Advantage and it's going right smack into the pocket of
11 the insurance companies and now we're trying to - we're trying to
12 balance this so that the 48,000,000 people who aren't covered,
13 46,000,000 will have coverage too. So as we know more about it
14 we'll talk more about it.

15 MODERATOR: Thank you Congresswoman Woolsey. Just a
16 reminder if anyone has a question please press 'star 3'. And now
17 we're going to go to Chuck Tessler of Santa Rosa. Chuck?

18 CHUCK TESSLER [Santa Rosa]: Hi Congresswoman Woolsey.
19 First thank you so much for representing us so effectively.

20 CONGRESSWOMAN WOOLSEY: Oh you're welcome. [*Voices*
21 *overlap.*] Thanks for letting me.

22 CHUCK TESSLER [Santa Rosa]: You're quite welcome.
23 Could you let us know where on the web we could find details of
24 what may be in the public option according to the different bills
25 that have come out of Committee?

1 CONGRESSWOMAN WOOLSEY: Well each Committee will have
2 their full bill and I don't have all the web addresses but my web
3 address is woolsey.house.gov .

4 CHUCK TESSLER [Santa Rosa]: Okay I will start there.

5 CONGRESSWOMAN WOOLSEY: And the names of the
6 Committees - let me tell you the names of the Committees because
7 once you get into the government site it's Ways and Means,
8 Education and Labor, Energy and Commerce. Those are the three
9 Committees in the House.

10 CHUCK TESSLER [Santa Rosa]: What was the last one
11 please?

12 CONGRESSWOMAN WOOLSEY: Energy and Commerce.

13 CHUCK TESSLER [Santa Rosa]: Thank you.

14 CONGRESSWOMAN WOOLSEY: You're welcome.

15 MODERATOR: Thank you. We have time for one more poll
16 our question this evening is: What do you think is the most
17 important part of health reform for the country? And this has
18 four possible answers. Do you like "Insuring a robust public
19 option, like Medicare?" please press 4; if you like "Decreasing
20 the number of uninsured" please press 5; if you like "Reducing
21 health care costs" press 6 and if you like "Eliminating
22 inequities in access to health care" please press 7. And now we
23 are going to go to Jerry Dolio of San Anselmo. Jerry?

24 CONGRESSWOMAN WOOLSEY: Hi Jerry.

25 JERRY DOLIO [San Anselmo]: Hi. I'm a Kaiser member, I

1 love it. It helped me through when I had some bad times. I'm
2 approaching 65 and you sort of hesitated with that other couple
3 in Sonoma. You sort of got a little tongue tied there. You got me
4 scared.

5 CONGRESSWOMAN WOOLSEY: About what, Medicare
6 Advantage?

7 JERRY DOLIO [San Anselmo]: Yeah, you got me a little
8 scared there. You were sort of you know, seemed like you were
9 skirting a little bit there.

10 CONGRESSWOMAN WOOLSEY: Well no, I'm telling you that
11 Medicare Advantage is not going to be subsidized by the federal
12 government. I wasn't skirting at all. [Voices Overlap.]

13 JERRY DOLIO [San Anselmo]: Because I'm alone. I'm a
14 single person. I'm too rich for welfare and too poor for anything
15 else. I don't even have a cell phone, I can't afford it. And I
16 see down [unintelligible] where these people are waiting to get
17 jobs that are, you know, they - and I drive a truck and they
18 always waive me down. They've got cell phones and I can't even
19 afford that so you see where I'm coming from?

20 CONGRESSWOMAN WOOLSEY: I do and I know when you have
21 something you want to keep it and - but the federal government is
22 not going to subsidize for the insurance company's Medicare
23 Advantage. It will be made available to you, a choice of plans
24 I'm sure.

25 JERRY DOLIO [San Anselmo]: Uh, huh. Now with this

1 Medi-Cal, you know, that everybody's talking about will this
2 raise taxes in the state of California? Because you just seem
3 like you're focusing on California and your district. Will this
4 raise the taxes on people?

5 CONGRESSWOMAN WOOLSEY: Oh. [*Voices overlap.*]

6 JERRY DOLIO [San Anselmo]: If so, how much?

7 CONGRESSWOMAN WOOLSEY: Well we don't know how much.

8 JERRY DOLIO [San Anselmo]: [*Voices overlap.*] We're
9 taxed so much already it's pathetic.

10 CONGRESSWOMAN WOOLSEY: Yeah, well okay. You won't
11 have to worry about because you don't even - you can't afford a
12 cell phone you tell me. The only people that would be taxed if
13 anybody is taxed would be the super, super wealthy and that could
14 be individuals earning over \$350,000 a year and couples earning
15 over \$500,000 a year or it may even bump up to \$500,000 for an
16 individual and \$1,000,000 for a couple. That hasn't been
17 determined. The pay fors - there are other ways we're paying for
18 it but it may get down to those who have the most may have to
19 contribute some.

20 MODERATOR: Thank you Congresswoman. We have time for
21 one more live question this evening. Everyone that is on the
22 call, especially those of you who have not had a chance to ask
23 your question, you'll have a chance to leave a voice mail with
24 your question for Congresswoman Woolsey at the end of the call so
25 please stay with us. We're on to our final - [*Voices overlap.*]

1 I'm sorry?

2 CONGRESSWOMAN WOOLSEY: Nora I have to make a
3 correction that I think we need to get clarified but I have a - a
4 note here that Medicare - oh, no government - no but not Medicare
5 Advantage. Well it says Medicare Advantage will still be paid 100
6 percent by the government so if I've misled people, I - I
7 apologize very much.

8 MODERATOR: Thank you Congresswoman Woolsey for, for
9 clarifying that for us.

10 CONGRESSWOMAN WOOLSEY: Okay, thank you.

11 MODERATOR: Okay. Thank you so much. So we're going
12 to go to this final live question and before we do that let me
13 announce the vote for our last poll question of the evening, 32
14 percent of you thought the most important part of reform was
15 "Insuring a robust public option like Medicare", 29 percent of
16 you favored "Eliminating inequities in access to health care", 25
17 percent of you voted to "Reduce health care costs" as the most
18 important part of health reform for the country and 14 percent
19 favored "Decreasing the number of the uninsured". So thank you
20 everyone who voted and now for our final live question we're
21 going to go to Doug Crocker of Santa Rosa. Doug?

22 DOUG CROCKER [Santa Rosa]: Hi Representative Woolsey
23 how are you?

24 CONGRESSWOMAN WOOLSEY: I'm fine thank you Doug.
25 Thanks for calling.

1 DOUG CROCKER [Santa Rosa]: I am under the opinion
2 that we've needed health care reform for a lot of years and
3 Hillary certainly tried many times. But now it's getting more and
4 more critical and as I see it there are more and more important
5 issues. There's people that can fall into the uninsured roll. I
6 see hospitals and I see doctors just taking advantage of - of
7 Medicare and billing for the ones that don't have insurance and
8 we now have this - this huge dilemma here in front of us and I'm
9 wondering why it's such a big package of 1,100 pages and why no
10 one has really read it and explained it and why we couldn't put
11 it down into maybe 5 or 10 pages that we could all understand and
12 get a shot at voicing our opinion before it's too late.

13 CONGRESSWOMAN WOOLSEY: Well you're voicing your
14 opinion right now and people are writing in and writing to us and
15 e-mailing us telling us exactly what they think of all of this.
16 You're right about that. Now I have not read every - why is it
17 such a long bill? It's a very complicated, very [CROCKER: "I
18 understand."] important piece of legislation. Have I read every
19 single word? No but I've sat in a four hour - no I think it was a
20 six hour meeting - in - of the Democratic Caucus and we went
21 chapter by chapter through the legislation with the experts on
22 the three committees telling us what it encompassed and answering
23 our questions. And it was very, very meaningful and you can trust
24 that I was there the entire time because it was a very good
25 learning experience for all of us. Now - so that's what is

1 important is to know what's in it and do we need it now? Yes. Is
2 it complicated? Absolutely and we have a chance to do something
3 very right for the people of this country. Every single American
4 will benefit with a good health care reform bill.

5 DOUG CROCKER [Santa Rosa]: Right but we've got
6 40,000,000 already on Medicare and if we add 40,000,000 is our
7 care going to decrease?

8 CONGRESSWOMAN WOOLSEY: No, no. No, remember everybody
9 that's got coverage keeps their coverage. Medicare will be even
10 more solid. Actually if I had my way if we could I would take
11 Medicare and have Medicare for all as one of our options for a
12 single-payer plan. So I thank you. Thank you very much for
13 calling.

14 MODERATOR: Thank you Congresswoman for your time. We
15 have just a few minutes left. Do you have any parting thoughts
16 that you could share with us this evening?

17 CONGRESSWOMAN WOOLSEY: Well first of all thank you
18 Nora. [Nora "Maidus-?"] What a great MC you are and facilitator.
19 It looks like we're coming to the end of tonight's Town Hall on
20 health care reform and I want to thank all of you for joining me
21 tonight. I've enjoyed myself and I hope that this has proved to
22 be as informative and enjoyable to you as an experience as it has
23 been for me. I - I especially want to thank everyone who asked us
24 your great questions tonight. I apologize to those of you who
25 were hoping to ask a question that we didn't get to and I hope

1 that your question was asked by someone - somebody else. I do
2 hear - want to hear from you so if you're waiting to ask a
3 question please stay on the line and leave me a voice mail with
4 your question. I'll follow up with that as soon as I can. I also
5 want to remind you to sign up for my electronic newsletter which
6 will keep you up to date on what's happening in Washington. You
7 can sign up for it by visiting my website www.woolsey.house.gov.
8 Finally, before we wrap up tonight I would like to know - like
9 you to know that I would like to hear from you about whether or
10 not this Town Hall was helpful. So press 1 if you have enjoyed
11 this call and found it helpful; press 2 if you believe this
12 hasn't been helpful and know that I thank you for joining me
13 tonight. Know that - how much I respect working for you as my
14 employer and the people who - whose voice I - I represent in the
15 House of Representatives. Feel free to contact me at my Santa
16 Rosa office (707)542-7182 or my San Rafael office (415)507-9601
17 [SIC] or Washington, D. C. 22, no excuse me (202)225-5161. Thank
18 you everybody.

19 [END OF TELEFORUM AUDIO]

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