

**Opening Statement of the Honorable Fred Upton
Subcommittee on Oversight and Investigations
Hearing on “Two Weeks Until Enrollment: Questions for CCIIO”
September 19, 2013**

(As Prepared for Delivery)

We are now less than two weeks away from when the health law’s enrollment officially kicks off. It has been a rocky three and a half years to date.

Unfortunately, the law’s implementation has been plagued by confusion, uncertainty, delays, and missed deadlines. The broken promises have reached near epidemic proportions. Hardly a day goes by without workers losing the coverage the president promised they could keep, or new figures detailing the looming rate shock in store for millions of Americans. The president’s hometown *Chicago Tribune* lamented about the part-timing of America, and many businesses have frozen hiring altogether to avoid the law’s costly mandates.

Since health care reform was signed into law, two programs closed prematurely because they ran out of money: the Pre-Existing Condition Insurance Plan and the Early Retiree Reinsurance Program. The CLASS Act was repealed. Fundamental requirements of the law, like the employer mandate, were delayed with little fanfare, and hundreds of waivers were handed out to health plans that could not meet the requirements of the law.

In the last few weeks, even more of the law’s consequences for American families have come to light. Some employers have announced that they will no longer cover spouses and children. Others have decided that they will need to jettison their retirees from company health care plans to the exchanges.

The American people deserve better than this. They deserve better than a law that was crafted behind closed doors and rammed through despite wide opposition. Although there was no oversight of the law until Republicans regained control of the House in 2011, some have still questioned why this committee has investigated and conducted extensive hearings on the implementation of the Affordable Care Act. I believe it is our duty to ask questions and get the facts about how programs are going to work, and what they will mean for the American people, rather than sit back and wait until it is too late to ask questions after taxpayer dollars have been squandered.

Mr. Gary Cohen, the Director of the Center for Consumer Information and Insurance Oversight, has appeared before this committee before and is here today to explain what we can expect when enrollment begins in less than two weeks. In April, Mr. Cohen testified that everything was “on track” – but “on track” to what? Just weeks after his testimony, the administration delayed the employer mandate and rolled back the verification process, opening us up for potentially billions of dollars in fraud. With less than two weeks until launch, it is time for the administration to be frank with the American people. When will CCIIO finalize and announce the approved insurance plans and premium costs? Will states be ready? Will people who like their insurance plans be able to keep them? I hope Mr. Cohen will be able to offer specific answers to these questions today rather than vague assurances that everything is on track.

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