## Opening Statement of Chairman Fred Upton Full Committee Markup of H.R. 2810 the "Medicare Patient Access and Quality Improvement Act of 2013" & H.R. 2844, the "FCC Consolidated Reporting Act" July 30, 2013

Today the committee will consider two important bipartisan bills in our ongoing effort to modernize government for the innovation era. Our first bill is H.R. 2810, the "Medicare Patient Access and Quality Improvement Act." This legislation reforms the current physician fee schedule by repealing the highly flawed Sustainable Growth Rate (SGR) and replacing it with a system that promotes the highest quality of care for seniors and provides fair payment to doctors. This proceeding is the culmination of an over two-year effort to fix SGR that is the product of a thoughtful, bipartisan, transparent, and fair process.

This legislation is long overdue. Since its passage in 1997, SGR has bred uncertainty and frustration. Doctors have been forced to endure 11<sup>th</sup> hour fixes, sometimes on a monthly basis, which have stymied physicians' abilities to run their practices.

H.R. 2810 remedies this ailing physician payment system while encouraging the highest quality of care for America's seniors. It gives seniors the peace of mind of knowing that their trusted physician will be there when they need them by securing stable payments for doctors and gives physicians the certainty that they need to care for their patients by removing the specter of a practice-killing 25% across-the-board pay cut. It also brings Medicare into alignment with the best practices of the medical community and emphasizes quality over quantity and works hand-in-glove with the medical profession to define the benchmarks of quality medicine. This will lead to better outcomes and lower costs for seniors and put the Medicare system on a more sustainable path.

For years, repealing and replacing SGR has been a top priority for lawmakers and stakeholders. Yet no meaningful progress has ever been made - until now. We have been deliberate in ensuring the medical community finally has a voice in this process. I recently met with a group of Michigan doctors who were especially constructive with their input to the opt-out provision. In harnessing the ideas of the medical profession, and working as a team with Energy and Commerce Democrats as well as Ways and Means Republicans, we have crafted a policy that will not only get out of committee but has the merits to make it to the president's desk.

Ways and Means Chairman Dave Camp has been a valued partner in this effort, and I commend Chairman Pitts and Dr. Burgess for their leadership in advancing this process further than any prior Congress. I also commend my colleagues Mr. Waxman, Mr. Pallone, and Mr. Dingell for their leadership.

The full committee vote will be an important milestone, but we are all resolved to achieve reform in a fiscally responsible manner, and despite our significant progress, we will not be satisfied until the ink is dry on the president's signature.

The second bill the committee will consider is the FCC Consolidated Reporting Act, sponsored by Mr. Scalise, Chairman Walden, and Ranking Member Eshoo, which consolidates eight separate congressionally mandated reports on the communications industry into a single comprehensive report with a focus on competition among technology platforms, deploying communications to unserved communities, eliminating regulatory barriers, and empowering small businesses. Eliminating outdated reports and streamlining existing ones will allow the commission to be more efficient and effective, reducing their administrative burden, and keeping pace with the rapid changes in this critical segment of the market. This bipartisan effort is a step in the right direction towards smarter government in the innovation era.