By Senator Garcia

40-01470-12 20121840

Senate Memorial

A memorial to the Congress of the United States, urging Congress to defund the health insurance exchanges required by the Patient Protection and Affordable Care Act.

WHEREAS, on March 23, 2010, President Barack Obama signed into law the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, ostensibly for the purpose of making health insurance more affordable for American citizens, and

WHEREAS, the Patient Protection and Affordable Care Act requires the creation of health insurance exchanges in each state through which health insurance policies that meet certain requirements determined by the Federal Government may be bought and sold, and

WHEREAS, these health insurance exchanges may be established only upon the approval of appointed federal officials, who are granted the authority to establish exchanges in any state that fails to win approval of its state-created exchange, and

WHEREAS, the creation of state health insurance exchanges pursuant to the Patient Protection and Affordable Care Act forces states to cede their resources and sovereignty to the service of the Federal Government and to sacrifice their ability to flexibly serve their own citizens, and

WHEREAS, in a unanimous opinion in *Bond v. United States*, 131 S.Ct. 2355 (2011), the United States Supreme Court found that federalism secures the freedom of the individual, allowing states to respond, through the enactment of positive law, to the

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initiative of those who seek a voice in shaping the destiny of their own times and, in doing so, rejected the notion that Americans might be forced to rely upon the political processes that control a "remote central power," and

WHEREAS, in Florida et al v. United States Department of Health and Human Services, 648 F.3d 1235 (11th Cir. 2011), now pending appeal before the United States Supreme Court, 26 states, with the support of 22 attorneys general and four governors, brought a constitutional challenge against the Patient Protection and Affordable Care Act on the basis that it creates an unlawful mandate requiring individuals to obtain health insurance coverage, and

WHEREAS, on March 3, 2011, United States District Court Judge Roger Vinson issued an order staying his original decision in that case, which held the Patient Protection and Affordable Care Act unconstitutional, and

WHEREAS, in that order, Judge Vinson noted that the severity of injury from the Patient Protection and Affordable Care Act is undercut by the fact that, irrespective of his ruling, at least eight of the plaintiff states had represented that they would continue to implement and fully comply with the act's requirements while the case was pending on appeal, clearly implying that, as states continue to plan exchanges in preparation for implementation of the act, the perceived harm to states is reduced, making it less likely it will ultimately be declared unconstitutional, and

WHEREAS, in July 2011, the United States Department of Health and Human Services published 61 pages of proposed rules regarding the establishment of health insurance exchanges, which

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required 172 pages of commentary and clarification, including numerous references to future rulemaking, bringing into question the proposition that states have any significant flexibility in the establishment of the exchanges, and

WHEREAS, the health insurance exchanges are the cornerstone of the individual mandate that is at the heart of the constitutional challenge, and

WHEREAS, if the Patient Protection and Affordable Care Act is struck down by the high court, states will have wasted millions of dollars of taxpayer funds in planning irrelevant exchanges that fail to serve a public purpose, and

WHEREAS, despite claims by some that states can create health care exchanges that both enjoy the benefits of a free marketplace and comply with the Patient Protection and Affordable Care Act, these exchanges would be, in truth, contrived devices offering insurance products regulated in their essential characteristics by the Federal Government, in effect, eliminating the free market, and

WHEREAS, the health insurance exchanges required by the Patient Protection and Affordable Care Act will continue to be subject to the arbitrary whims of the federal bureaucracy that, with its ongoing rulemaking authority, can render any plan for a state exchange, no matter how rational and well-designed it might be today, obsolete and irrelevant at a later date, and

WHEREAS, while the Patient Protection and Affordable Care
Act does not clearly and unequivocally preempt state law, it
contains only a vague provision that can be interpreted as
stating that federal law will not preempt state laws that
preserve free enterprise health care systems, and

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WHEREAS, in fact, the Patient Protection and Affordable
Care Act mandates the establishment of health insurance
exchanges that are required to conform to federal law, forcing
states that establish exchanges to actively participate in the
preemption of their own laws, and

WHEREAS, states can and should develop and implement statebased health reform solutions that are tailored to the specific needs of their citizens and that are free of the mandates included in the Patient Protection and Affordable Care Act, and

WHEREAS, it is not in the best interest of any state for any official of that state to participate in planning or establishing health insurance exchanges as provided for in the Patient Protection and Affordable Care Act, NOW, THEREFORE,

Be It Resolved by the Senate of the State of Florida:

That the Congress of the United States is urged to defund planning grants to states for the establishment of health insurance exchanges required by the Patient Protection and Affordable Care Act.

BE IT FURTHER RESOLVED that copies of this memorial be dispatched to the President of the United States, to the President of the United States Senate, to the Speaker of the United States House of Representatives, and to each member of the Florida delegation to the United States Congress.