

Appropriations: Clear Differences  
**How 2 Months Spending In Iraq Could be Put to Better Use**  
Example 1: Healthcare Access  
\$1.4 billion = 4 Days in Iraq

WASHINGTON – As Congress waits for the President to send over the rest of his nearly \$200 billion request covering the \$10 billion a month we are spending in Iraq (paid for with borrowed money), he is trying to masquerade as fiscally responsible by manufacturing a fight over what we spend in roughly 2 months in Iraq (\$22 billion) in investments that will make this a stronger and better country.

What would that \$22 billion achieve? Every day we're going to bring you one specific example of how Congress and the President differ on appropriations.

**Example 1: Healthcare Access**

**\$1.4 billion above the President's request = the cost of 4 days in Iraq**

One in six Americans is without health insurance – that's 47 million Americans. Fresh off his recent veto of the bill to extend healthcare coverage to 10 million children in families struggling to make ends meet, the President stands poised to veto the bill that would expand healthcare access for over a million underinsured Americans.

**The President's Budget** cuts funding in the Labor, Health Education bill for one of the primary federal agencies responsible for increasing healthcare access, the Health Resources and Services Administration (HRSA), by \$595 million below 2007.

**The House Bill** rejects those cuts and provides \$1.4 billion above the President's request for programs to improve healthcare access.

\$1.3 billion is used at HRSA to:

- Provide a million more underinsured Americans access to Community Health Centers;
- Invest \$167 million more for rural health programs, area health education centers, and the National Health Service Corps. These programs support more than 1,200 small, at-risk rural hospitals, create health care networks for more than 775,000 rural residents in underserved communities, provide access to defibrillation devices, and support rural research centers and State health offices; and
- Provide start up grants to States that are ready with plans to expand health care coverage to targeted groups through State Health Access Grants, a new initiative.

\$100 million is provided for three new initiatives:

- \$50 million to help States provide high risk insurance pools to support affordable insurance for almost 200,000 people;
- \$20 million for grants to help trade-impacted workers take advantage of the Health Coverage Tax Credit. Only 12 % of eligible workers currently benefit from this tax credit; and
- \$45 million for health insurance counseling to help 45 million Medicare beneficiaries understand and utilize their benefits.

The differences couldn't be clearer.

###