



**Opening Statement of Rep. Virginia Foxx (R-NC), Chairwoman
Committee on Education and the Workforce**

**Hearing: “Examining the Policies and Priorities of the Department of Health and
Human Services”**

May 15, 2024

(As prepared for delivery)

Good morning, and welcome. Thank you everyone for joining me to conduct the Committee’s yearly oversight of the budget request for the Department of Health and Human Services (HHS).

I am pleased to note that this is the final Committee hearing with a cabinet-level official slated for this Congress. At the beginning of the 118th, when I took the gavel, I promised to make oversight a top priority.

Over this time, the Committee has operated with the utmost respect and scrutiny towards every hard-earned taxpayer dollar spent by this administration.

Therefore, Secretary Becerra, it is only fitting that the Committee’s last cabinet-level oversight hearing this Congress deals with one of the biggest departmental budget requests in history.

For starters, this budget has an eye-popping topline of \$1.84 trillion. When I saw the mandatory spending number of \$1.7 trillion, I couldn’t help but think of it as an albatross around the necks of young Americans. I’ve been in Congress long enough to know that there are few things more permanent than mandatory spending.

The proposed spending in this budget represents an 8 percent increase over the FY 2024 enacted level, which more than doubles year-over-year inflation. This unsustainable rate of spending is baked in as a function of mandatory obligations and the aging population.

Today, there are more 64-year-olds than 4-year-olds in this nation. Every day, 11,000 more reach 65 with only 10,000 children born. These statistics are an anomaly that would be foreign to any point in American history.

What's more, the American health care system is too expensive, complex, and inefficient for what we get. We spend nearly 18 percent of our GDP on health care, whereas other developed countries spend much less. Rather than investing in innovation and empowering employers to lower costs, this administration is hellbent on shouldering employer-sponsored health plans with burdensome and costly regulations.

For these reasons, \$1.84 trillion isn't simply a number. It's a story. It's a demographic and fiscal catastrophe smuggled into the enormous topline of this budget. It's the legacy of older generations, and it's the inheritance of younger ones. And, while unfathomable, it isn't going to hold a candle to future HHS budgets if we don't get spending in check.

Furthermore, each dollar proposed in this budget represents a policy priority. Again, the burden of HHS's partisan agenda is going to fall heaviest on younger generations, which is made clear by some notable exclusions in the budget.

Nowhere does the budget contain the word "fentanyl," save one instance in a footnote. Fentanyl overdose is the leading cause of death for Americans aged 18-45—more than car crashes, cancer, and suicides combined. Yet, the budget does nothing to address it.

Nowhere does this budget mention the Biden border catastrophe that not only fuels the fentanyl epidemic, but also child trafficking. Under your watch, the Office of Refugee Resettlement transferred 85,000 unaccompanied minors to sponsors who were unable to be reached upon follow-up. These migrant children are effectively lost.

Nowhere does this budget support the longstanding Hyde Amendment, one of the greatest protections for America's youngest and most vulnerable. In forcing

taxpayers to fund abortions, HHS is trampling on the rights of the unborn and religious Americans.

And finally, nowhere does this budget contemplate the negative effects of transgender surgeries on minors. Instead, it funds them. In 2022, HHS issued guidance stating that “gender-affirming care” improves “physical and mental health” despite citing zero research or studies. The lack of scientific evidence supporting these procedures is an absolute scandal.

In an ideal world, the HHS budget would represent a positive vision for a healthier country. Yours is a tax-and-spend monstrosity that papers over the numerous social pathologies inflicting our nation—fentanyl abuse, child trafficking, abortion-on-demand, and genital mutilation, to name a few.

Secretary Becerra, a chasm separates Republicans and Democrats on these issues. While I don’t expect to reach an agreement today on many of them, I propose we work together for the remainder of your tenure towards our shared goals.

The *Lower Costs, More Transparency Act*, which passed the House by a wide, bipartisan margin of 320-71, would be a great place to start. Whereas Medicare price controls are polarizing, we can find common ground in price transparency.

We should also work together towards expanding telehealth benefit access to Americans, especially those in rural areas. Although I appreciate the budget calling for a ban on facility fees in telehealth, it worries me that this administration has not made it a priority to restore employers’ ability to offer telehealth-excepted benefits.

Lastly, we can do better to coordinate the implementation of the *No Surprises Act* to ensure it aligns with congressional intent. While the law has successfully protected millions of patients from receiving a surprise medical bill, the Tri-Agencies’ implementation of the independent dispute resolution process has been a disaster, and I worry it will only drive up health care costs further.

It is my hope that Congress and the White House can come together and craft a responsible budget for FY 2025 that addresses these concerns. As for my other concerns with the general direction of HHS, you will get to answer for those today.