



Other **Viewpoints**

Choosing judges no job of governor

It was in late January that Senate Minority Leader Anthony Hensley, a Democrat from Topeka, said the judicial branch of Kansas' government "is the last remaining branch free from Gov. (Sam) Brownback's control."

He went on to tell the *Topeka Capital-Journal* that voting for a bill that would change the way judges are chosen for the state Court of Appeals "would give the governor control of all three branches of the government."

No man should have that kind of power.

And yet the Kansas Senate gave the measure final approval Wednesday on a vote of 28 to 12. The House passed it earlier this month, and Brownback is expected to sign it.

The bill will abolish a nine-member nominating committee, which includes five attorneys and four non-attorneys appointed by the governor. This committee screens applicants for the Court of Appeals and submits the names of three finalists to the governor, who makes the appointment.

Instead, that process will be scrapped, giving Brownback and future governors the authority to make their own appointments, which would be subject to Senate confirmation.

The governor and many lawmakers want to change to a similar selection process for the Kansas Supreme Court, but that would require amending the state constitution. The Senate approved a proposed constitutional amendment earlier this year and the House has yet to vote on this measure. Two-thirds of its membership would be needed to place it on the August 2014 primary election ballot.

The concern is that partisan politics will find their way into the judicial branch of state government. The system currently in place works. The committee was put in place to recommend the most qualified members of the legal community for seats

Changing the system creates the potential to compromise the high integrity of the selection process Kansas has today.

- The Hutchinson News, via the Associated Press

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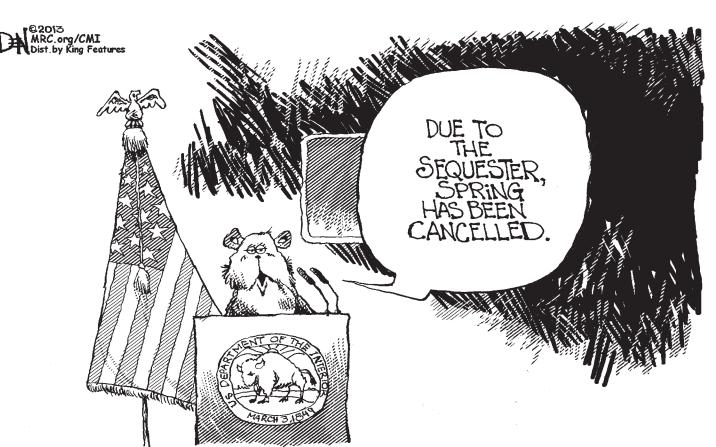
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THE WHITE HOUSE NAMES PUNXSUTAWNEY PHIL AS SECRETARY OF THE INTERIOR.

Rising costs threaten health of poor

It's sad that so many of our wise solons in Congress still consider deficit reduction to be their No. 1 priority; the problem of all prob-

While it's true that our federal debt is a longterm problem that will require creative solutions and difficult choices, its relevance today is eclipsed by the urgent need to deal with the jobs crisis. And one of the most surefire ways to curb America's high unemployment is to make sure the middle class has enough money in their pockets to purchase the goods and services available in the U.S. economy. Because, in a sense, through their spending, the middle class comprises some of the country's biggest job creators - a term that is all the rage in Re-

But if Congress is determined to take the ax to federal programs, this should be done in a fashion that doesn't disproportionately hurt the poor. Unfortunately, many of the solutions being advocated as solutions to the debt crisis fail to address the real driver of our country's long-term debt – soaring health care costs.

For example, the politicians who want to raise the eligibility age to receive Medicare from 65 to 67 are attacking the symptoms while leaving the main problem – high health care costs – unsolved. Medicare isn't the main driver of rising health care costs. In fact, it has been better than private insurers - and Medicaid is better than both – at containing costs.



Andy Heintz

 Wildcat Ramblings

timal for seniors isn't the only way to balance the federal budget.

Instead of reforming Medicaid in a way that makes it less effective, the government should expand it to everyone and allow it to use its bargaining power to negotiate with pharmaceutical companies over prescription drug prices. Another way to curb health care costs is to offer alternatives to the patent-monopoly status currently provided to pharmaceutical companies by the government.

While drug companies deserve to be compensated for the research and testing they do to bring a new drug to the market, the temporary monopoly they receive causes drug prices to be hundreds, and sometimes thousands, more per prescription than they would be if they were being sold at a free-market price.

One alternative to this system has been offered by Bernie Sanders, I-Vermont. Sanders has proposed setting up a prize fund that would reward drug companies that come up with innovative new drugs to treat HIV-AIDS. Making Medicare less accessible and less op- For the reward money, the companies would

agree to have the drug, after it's approved by the Food and Drug Administration, placed in the public domain where it could be sold at a free-market price.

Another alternative mechanism, proposed by Dean Baker, co-director of the Center for Economic and Policy Research, is to have the government publicly fund the research and testing upfront; perhaps by contracting the services out to private drug companies, as long as the companies agreed the drugs would immediately be placed in the public domain.

One way to put a dent in Medicare costs would be to allow the program's beneficiaries to obtain services from cheaper health systems in other countries – America's health care system is much more costly and inefficient than systems in other western countries. Baker suggests the government and beneficiaries could split the savings from the cheaper services.

Health care spending is a huge problem that will require innovative solutions and tough choices. Whatever solutions Congress comes up with should be geared to yield the least harm to the poor and elderly.

Andy Heintz, a K-State journalism graduate and former Colby Free Press sports editor now living in Ottumwa, Iowa, loves K-State athletics and fishing, sports and opinion writing. You can find his blog at www.orble.com/justone-mans-vision.

So, where do all those trillions go?

Our leaders have not leveled with us about what it takes to get a sensible budget and put the economy on a path to recovery. Let's stop the blame game and get to work.

Over the last few weeks, as the deadline for the congressionally-mandated budget cuts known as the "sequester" came and went, we got a taste of how difficult cutting federal spending actually turns out to be. The news is disconcerting: thousands fewer food safety inspections, some 70,000 fewer kids in early education programs, people with mental illness losing access to treatment, civilian employees of the military furloughed, ships and aircraft going without maintenance.... It's a long and dispiriting list.

Yet as painful as the sequester might be, most policymakers know that it is not the main event when it comes to our fiscal challenges. Discretionary spending, the kind getting cut in the sequester, amounts to less than a third of federal spending.

That's not what many people believe, of course. Whenever I give talks about the federal budget, I'm taken aback by where my listeners think most of our money gets spent. At two meetings recently, members of the audience stood up to complain that if we just cut what we give away to other countries in foreign aid, we could resolve our budget issues. This isn't even close to the truth: Altogether, we spend well less than 1 percent of the federal budget on foreign aid.

If you think of federal spending as a pie, by far the biggest slices go to Social Security and unemployment support, Medicare, Medicaid and other health programs, which altogether make up well over half. Military spending accounts for about another quarter, while the next biggest slice, about 7 percent, is for interest on the federal debt – a figure that will ex- for it. That's because it's simpler to impose

Other **Opinions**

Lee Hamilton Center on Congress

plode in upcoming years. Everything else we think of as the federal government – spending on highways and the aviation system, money for student loans and other education programs, housing, food stamps, medical research and, yes, foreign aid - comes in at under one-

The biggest driver of growth in federal spending, as Nate Silver of the New York Times pointed out in a thoughtful analysis in January, is entitlements: Medicare, Medicaid, Social Security and other social insurance programs. This is especially true of health care, which accounted for about half of the increase in federal spending relative to the economy over the last 40 years. We cannot get control of federal spending without reining in healthcare spending – and though its rate of increase has slackened over the last few years, no one knows whether it's a permanent or temporary change.

So if Congress and the White House are serious about tackling federal spending, then the piece they left out of the sequester - entitlement reform – must be on the table. But it's been hard to tell from their actions that they're really serious. Members of Congress have been taking to the airwaves for weeks to decry the sequester's meat-cleaver approach to budget cutting, yet most of them voted

across-the-board cuts than to make discriminating judgments about individual programs. Members find it easy to demand cuts in federal spending in the abstract, but painfully difficult to cut specific programs.

Americans as a whole do, too. A recent Pew Center poll found they approve cutting government spending in general, but when asked about specific programs, they want to boost funding or keep it the same. Americans are demanding that government cut spending without cutting actual programs.

This is why it takes extraordinary leadership to address our fiscal issues. Americans may bear some responsibility, but our leaders have not leveled with us about what it takes to get a sensible budget and put the economy on a path to recovery. I am hard-pressed to think of an example of government failure to match our political leaders' inability to lead us to a solu-

Their prolonged fighting is causing businesses to hesitate, workers to remain in limbo and an economy that needs a boost to continue to stutter. They are denying us the ability to invest in our future, promote economic growth and deal with the many other challenges our nation faces. Let's stop the blame game and

Lee Hamilton is Director of the Center on Congress at Indiana University. He was a member of the U.S. House of Representatives for 34 years.

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