

Democracy North Carolina

1821 Green St., Durham, NC 27705 • 919-489-1931 or 286-6000 • democracy-nc.org

For Release: Thursday, August 13, 2009

Contact: Bob Hall, Direct line: 919-489-1931

Healthcare and Insurance Campaign Contributions Top \$5 Million to North Carolina Members of Congress; Richard Burr Leads the List

Rep. Walter Jones Links Drug Money, Healthcare & Campaign Reform

As the debate about health insurance reform continues, a new analysis shows a wide disparity in the amount of campaign donations members of Congress from North Carolina have received from healthcare providers, drug makers, and the insurance industry.

The state's two U.S. Senators and 13 members of the House of Representatives have received a total of \$5.2 million from individuals and political action committees (PACs) related to insurance and healthcare services in the past three election cycles (covering 2003-2008), according to an analysis by the watchdog group Democracy North Carolina, using data compiled from the Center for Responsive Politics and Federal Elections Commission.

Here are some highlights [from the table of contributions](#):

- **Sen. Richard Burr** (R-Winston-Salem) leads the NC list by far, with \$1,674,101 or almost three times the \$630,949 raised by number two, **Rep. Sue Myrick** (R-Charlotte). Burr and Myrick both oppose the health reform proposals of Democratic leaders in the Senate and House.

- **Sen. Burr** is the national leader for campaign money received from the pharmaceutical industry. His \$420,782 total for 2003-2008 beat all U.S. House and Senate candidates. Burr has been a strong ally of the industry; he opposed bills to require Medicare to negotiate lower prices for prescription drugs (e.g., votes on March 17, 2005 and April 18, 2007) and a bill to provide incentives for Medicaid recipients to use generics instead of brand-name drugs (Nov. 3, 2005).

- The health and insurance sector is the largest source of campaign funds for **Sen. Burr's** career in the Senate, supplying 15 percent of all his donations that could be classified by industry sector for 2003-2008. He collected most of the money during his 2004 race, when he raised four times as much from the healthcare/insurance sector as his opponent, **Erskine Bowles**.

- **Sen. Kay Hagan** (D-Greensboro) raised \$217,208 from the healthcare/insurance sector for her 2008 campaign, or less than a third of the \$786,712 that her opponent, then-**Sen. Elizabeth Dole**, raised during 2007-08. Hagan voted for the Democrats' reform proposal in a key Senate committee earlier this summer. Healthcare/insurance money represents less than four percent of the contributions she collected that could be classified by industry sector.

- **Rep. Sue Myrick** led the list of House members from NC with \$630,949. She led other House members in the most raised from health professionals and drug makers. **Rep. Virginia Foxx** (R-Banner Elk) followed Myrick for funds from health professionals, raising \$187,348.

- **Rep. Brad Miller** (D-Raleigh) led all NC House members for the most received from the insurance industry with \$178,719, barely edging out **Rep. Patrick McHenry** (R-Cherryville). McHenry follows Myrick on the overall list with a total of \$501,039 from the healthcare/insurance sector for 2003-2008.

- **Rep. David Price** (D-Chapel Hill) easily led the NC House Democrats in funds (\$115,950) from the pharmaceutical industry, a Triangle economic and political powerhouse. Price is rated highly by public health groups, but unlike Miller and **Rep. Mel Watt** (D-Charlotte), he joined **Bob Etheridge** (D-Lillington), **Mike McIntyre** (D-Lumberton) and most Republicans to oppose allowing the import of FDA-approved prescription drugs into the U.S. (vote on July 25, 2003).

- **Rep. Howard Coble** (R-Greensboro) raised a total of \$133,602 from the healthcare and insurance sector, which ranks him last among NC members of Congress with campaigns in all three of the past election cycles. However, he took \$74,499 (or more than half of his total) from drug makers, which ranks him fourth from that source, behind Burr, Myrick, and Price. Coble voted with most other Republicans against requiring Medicare to negotiate for lower drug prices (Jan. 12, 2007) and against imported FDA-approved prescription drugs.

- **Rep. G. K Butterfield** (D-Wilson) and **Rep. Mel Watt** followed Coble near the bottom of the list, with totals of \$140,125 and \$177,350 respectively. They are among the strongest advocates for comprehensive healthcare reform.

- **Rep. Heath Schuler** (D-Waynesville) raised more from the healthcare/insurance sector in the 2008 election cycle than any other NC Democrat in the House - \$149,352. He is a whip for the conservative Blue Dog Democrats and is considered a swing vote on healthcare reform.

- Of the twelve NC members of Congress in office during 2004-2008, **Rep. Walter B. Jones Jr.** (R-Farmville) got the least amount from the pharmaceutical industry – a total of only \$7,000 over three campaigns. Jones is also the only Republican from North Carolina who voted for requiring Medicare to use its purchasing power to negotiate lower drug prices, for encouraging the use of generics, and for allowing the import of FDA-approved prescription drugs.

Rep. Jones says the perceived relationship between votes and campaign money damages “public trust” in Congress. In fact, he is the main Republican sponsor of the Fair Elections Now Act (HR-1826), which would provide a public campaign option in Congressional elections, similar to the program now in place for appellate court judges in North Carolina. At a hearing on the legislation in July, Rep. Jones used the drug industry’s political clout as the example of why reform is needed. See: http://cha.house.gov/UserFiles/242_testimony.pdf

“Members of Congress are currently mired in a system where the perception is that money has undue influence over votes,” Rep. Jones told his colleagues. He noted the role of the campaign donations in the Medicare drug coverage debate of 2003 and said, “The same thing is happening today: special interests are pouring money into the healthcare debate. It’s time to return the government to the people. The first step is for Congress to pass legislation like the Fair Elections Now Act, which would help ensure that the average citizen has a voice. Let the people, not special interest groups, control Washington.”

Bob Hall, executive director of Democracy North Carolina, noted that none of the four NC legislators (Burr, Foxx, McHenry, Myrick) who raised \$180,000 or more from either healthcare professionals, drug makers, or the insurance industry earned a score above 15 on the American Public Health Association’s voting assessment for 2005-06 (Butterfield, Miller, Price and Watt each earned a 90; Etheridge and McIntyre each scored 74; Jones got a 73; and Coble got a 7).

“The pharmaceutical and insurance industries are among the most aggressive lobbies in Washington, and they pour millions into campaigns to gain an advantage that can harm consumers,” said Hall. “Many members take the money and still vote against these industries, but consistent opposition comes with a price. The nation needs public campaign finance reform as well as serious health insurance reform, and we may not get the second without the first.”