SENATE IMMERSION MODULE (SIM)
Affordable Care Act (ACA)
TABLE OF CONTENTS

3 Welcome to the Kennedy Institute
4 About this Curriculum
5 Background Overview

9 PRE-VISIT LESSON
10 Pre-Visit Lesson Plan
12 Pre-Visit Materials:
13 ACA Vocabulary Worksheet
14 ACA Debate Compare and Contrast Worksheet
14 ACA Debate Worksheet: Teacher Sample

Primary Sources:
15 Con Speech from the Senator from Kentucky
16 Con Speech from the Senator from Kentucky (Abridged)
17 Con Speech from the Senator from Wyoming
18 Con Speech from the Senator from Wyoming (Abridged)
19 Pro Speech from the Senator from Washington
20 Pro Speech from the Senator from Washington (Abridged)

21 Persuasion Presentation Rubric

22 POST-VISIT LESSON
23 Post-Visit Lesson Plan
24 Post-Visit Materials:
   Considering My Vote Worksheet

CONCLUDING MATERIALS
25 Standards Alignment
27 Additional Resources
WELCOME TO THE EDWARD M. KENNEDY INSTITUTE

We are delighted to welcome you to the Edward M. Kennedy Institute for the United States Senate. The Kennedy Institute aims to teach students about the role of the Senate in our representative democracy, introducing important elements of the legislative process to young audiences and encouraging participation in civic life. Our programs serve the general public, students of all ages, teachers, scholars, senators, Senate staff, international visitors, and others in public service.

The materials in this curriculum are designed to enhance the Institute’s immersive Senate Immersion Module (SIM). The SIM program is an educational, role-playing experience, developed to engage new generations of Americans. This program is conducted in the Institute’s full-scale representation of the United States Senate Chamber. Running with up to 100 students at a time, participants take on the roles of senators to study issues, debate, negotiate, and vote on legislation.

Digital projections, handheld tablets, and a life-size replica of the U.S. Senate Chamber enhance the immersive role-play. The resources in this curriculum help students and teachers prepare for the SIM program and discuss the experience afterwards. They can also be used independently as print outs in the classroom.

The Edward M. Kennedy Institute for the United States Senate is dedicated to educating the public about the important role of the Senate in our government, encouraging participatory democracy, invigorating civil discourse, and inspiring the next generation of citizens and leaders to engage in the civic life of their communities.

The Institute encourages classroom preparation for the SIM, active play at the Institute, and debriefing at the end of the experience.
ABOUT THIS CURRICULUM

The purpose of this learning module is to help students learn how a U.S. senator might address an issue of public significance under consideration in the United States Congress. Learning about personal, state, party, and national interests will help students understand representation more fully. It will also help them play their roles more effectively when taking part in the Institute’s SIM.

The pre-visit lesson introduces students to the history of healthcare legislation in the United States leading up to the passage of the Affordable Care Act (ACA) during the 111th Congress. The lesson will allow students to make connections to current debates over healthcare reform in the United States. A post-visit lesson will act as a debrief and reflection on the SIM experience.

SIM Learning Goals

Using this curriculum and the Kennedy Institute SIM, students will be able to:

• Understand the basic tenets of representation: balancing personal convictions with state, party, and national interests
• Research and analyze issues of national importance
• Negotiate, persuade, and develop strategies to reach consensus
• Take a stand on issues and proposed solutions
BACKGROUND
OVERVIEW

The Affordable Care Act

The history of healthcare legislation in the United States extends back to 1798 with the passage of the Act for Relief of Sick and Disabled Seamen. This act required a deduction of 20 cents per month from the wages of seaman to fund their healthcare and hospital visits. It is the earliest example of a federal mandate to fund individual healthcare to precede the 2009–2010 Patient Protection and Affordable Care Act, or what is commonly referred to as Affordable Care Act (ACA).

The goal of the Affordable Care Act was to make health insurance affordable to more people by creating a system that would promote universal coverage. An estimated 45.7 million Americans lacked health insurance in 2007—up from 38.4 million in 2000. A majority of the uninsured had low or moderate incomes. About two-thirds of the uninsured had family incomes less than twice the federal poverty level. (In 2007, the federal poverty level for a family of four in the 48 contiguous states was $20,650. Therefore, in 2007 two-thirds of uninsured American families earned less than $41,300 annually.) The poverty level is adjusted on an annual basis and the amount depends on the number of people living in the household. Eight in ten of the uninsured came from working families who were not offered or who did not qualify for employer-based coverage. In addition, healthcare costs were rising, and some people were being denied health insurance coverage for pre-existing conditions, or health problems they had before their new healthcare plan went into effect.

Ultimately, the legislation passed in two separate bills: The Patient Protection and Affordable Care Act (PPACA) and the Healthcare and Education Reconciliation Act of 2010. HR 3590, The Patient Protection and Affordable Care Act (the bill that this SIM is based on) passed the Senate on December 31, 2009 by a final vote of 60 to 39 with one senator not voting. Opposition to the Affordable Care Act was based on a lack of trust in the federal government efficiently running such a program and that the act included a mandate that individuals must have health insurance or pay a penalty. The federal tax penalty for not being enrolled in health insurance was eliminated in 2019 because of recent changes made by the Trump administration.

Major provisions in the Affordable Care Act (ACA) include:

- Requiring most U.S. citizens and legal residents to have health insurance.
- Providing cost-sharing subsidies to eligible individuals with household incomes between 100%–250% of the federal poverty level.
- Establishing health insurance exchanges or marketplaces to allow people to shop for health insurance if it is not provided through an employer.
- Requiring policies to provide “essential health benefits,” including maternity and preventative care.
- Coverage for individuals with pre-existing conditions.
BACKGROUND OVERVIEW (Continued)

- Dependent coverage for children up to age 26 for all individual and group policies.
- An expansion of Medicaid eligibility for people with incomes that are 138 percent of federal poverty level, at the states’ option.

In addition, the medical loss ratio (MLR), an ACA provision, forces health insurance companies to use at least 80 percent of premium dollars to provide actual health care and quality improvements for plan participants or return that money to the insured. In 2018, insurers were required to pay nearly $707 million in rebates to nearly 6 million consumers. That was based on insurer revenue and spending for 2015–2017, and it was the highest total rebate amount since the first MLR rebate checks were sent to consumers in 2012.

Funding for the ACA comes from many sources including spending cuts totaling $741 billion over 10 years. Another $318 billion is generated from a 3.8 percent tax on individuals who earn more than $200,000. This tax pays for Medicare’s hospital insurance. Another $216 billion comes from increased insurance coverage, while $111 billion is raised from taxes on so-called “Cadillac” or unusually expensive insurance plans. One of the smaller taxes that pays for health insurance is a 10 percent tax on indoor tanning booths.

The legislative history of healthcare coverage prior to the ACA can be found in six milestone acts listed below. Each act has had an impact on the healthcare system in the United States.

**Federal Food and Drug Act of 1906**

“A bill for preventing the manufacture, sale, or transportation of adulterated or misbranded or poisonous or deleterious foods, drugs, medicines, and liqueurs, and for regulating traffic therein, and for other purposes.”

**Context:**
Activism for this act began as early as 1898. During this time, there were many unsafe foods and drugs. In February 1906 Upton Sinclair published his novel, The Jungle, exposing the dangerous and filthy working conditions in the meat industry. The New York Times would call the debate over the act, “one of the wildest times that has been seen this session.”

The act would pass the House of Representatives 240–17 and would pass the Senate 63–4 (22 senators did not vote). The four senators who voted against the bill all disagreed with the bill on constitutional grounds. Sen. Bailey of Texas remarked that the bill was “purely and only an exercise of the police power, and therefore is not within the power of the Federal Government.”

**Impact:**
This was the first time that the federal government would take on the responsibility of managing and ensuring the safety of food and medicine in the U.S. It would lead to the establishment of agencies like the FDA (Food and Drug Administration), and the regulating of labels on products.
BACKGROUND OVERVIEW (Continued)

Social Security Amendments (establishing Medicare and Medicaid) of 1965

Established a federally subsidized health insurance program for people over 65 years of age (Medicare), and for low-income people (Medicaid).

Context:
Between 1900 and 1963 the number of Americans aged 65 and over grew from 3 million to 17.5 million. Many of these people, and most people who were impoverished, did not have health insurance. President Truman would begin urging healthcare coverage for the “aged and poor” in 1945. The resulting programs would be the result of 20 years of debate and consideration to come up with something that could pass. Sen. Russell Long (D-LA) said of the bill’s passage that the resulting programs would do “more to meet more human problems than any other measure ever passed.”

Impact:
Within just three years of its enactment Medicare and Medicaid would have nearly 20 million people enrolled. As of August 2018, 60 million people are enrolled in Medicare (part A and B combined) and 74.6 million people are enrolled in Medicaid nationwide.

The National Cancer Act of 1971

Increased funding to the National Cancer Institute for the purpose of expanding research and outreach.

Context:
In 1937, when the National Cancer Institute was established, being diagnosed with cancer was the same as being handed a death sentence. A citizen activist and philanthropist, Mary Lasker, began through advocacy and lobbying Congress to make cancer research a bigger priority. In 1970, in response to increasing awareness and calls for action, Sen. Ralph Yarborough assembled a team of experts to research cancer. The resulting “Yarborough Report” would become the foundation of the bill.

Impact:
The act resulted in the establishment of 15 new research centers across the country working to develop better and more effective treatments. Despite the progress made by investing and prioritizing research of one the deadliest medical conditions, cancer still claimed the lives of over 600,000 Americans in 2018.

Ryan White Healthcare Act of 1990

Established a large-scale federal program to assist people diagnosed and living with HIV/AIDS in the United States.

Context:
In 1981, 121 U.S. citizens died of what would later be called Acquired Immune Deficiency Syndrome (AIDS), but by 1989, 30,000 people had died from it. The staggering death toll of those with this disease inspired activists to urge government officials to take action. Sen. Edward M. Kennedy (D-MA) and Sen. Orrin Hatch (R-UT) introduced the bill that would
BACKGROUND OVERVIEW (Continued)

focus on early diagnosis and home care. The program would battle the disease and would be renewed by Congress three additional times after its initial passage in 1990.

Impact:
By the mid-1990s new drugs were introduced that would help to extend the life expectancy of people with Human Immunodeficiency Virus (HIV). Each year the Ryan White Program helps about 500,000 people with HIV testing and treatment.

Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Mental Health Parity Act of 1996

HIPAA ensured that individuals have health insurance between jobs and created additional protections and requirements around confidentiality of patient information. The Mental Health Parity Act required that mental illness and brain disorders receive the same degree of health coverage as any other illness or injury.

Context:
By 1993, healthcare costs had risen dramatically. After more sweeping legislation championed by the Clinton administration failed in the early 1990s, legislators began to address healthcare reform incrementally. Sen. Edward Kennedy (D-MA) and Sen. Nancy Kassebaum (R-KS) together worked to introduce HIPAA in 1995 and gather the necessary bipartisan support. The Mental Health Parity Act addressed how mental illness over the course of the 20th century came to be seen as a treatable disease, but many health insurers refused to provide coverage. Senators Pete Domenici (R-NM) and Paul Wellstone (D-MN) championed the bill.

Impact:
HIPAA helps many Americans maintain healthcare coverage between jobs and also pioneered new developments in data storage for patient information. The Mental Health Parity Act did not mandate that mental health treatment be covered, but it paved the way for states to develop their own programs and requirements.

State Children’s Health Insurance Program (S-CHIP) 1997

Created a partnership between state and federal level programs to provide health coverage to low income and working-class families.

Context:
High healthcare costs made it difficult for families to afford private health insurance. By the mid-1990s approximately 10 million children were uninsured because their families’ income levels were too low to afford healthcare but too high to qualify for Medicaid. Sen. Edward M. Kennedy (D-MA) again worked with Sen. Orrin Hatch (R-UT) to champion a bill.

Impact:
The act reduced the number of uninsured children and increased the quality of care for children who enrolled in the program by combining state and federal programs. The program would be renewed and by 2009 it was expanded to serve more children and include coverage for pregnant women as well.
PRE-VISIT LESSON: AFFORDABLE CARE ACT (ACA)

Pre-Visit Lesson Introduction

During the pre-visit lesson, students will review historic healthcare initiatives and legislation, while making connections to today’s healthcare debate. Students will then read Senate floor speeches about the Affordable Care Act delivered during the debate in 2009–2010. The lesson activity requires students to summarize a position from one U.S. senator and develop a list of related issues pertaining to reform. They will practice defending a position on the Affordable Care Act in the context of the 2009–2010 debate and draft an initial position on healthcare reform.

Lesson Duration

50 minutes

Enduring Understandings

• There are vastly differing opinions on healthcare reform and the effectiveness of the Affordable Care Act.
• Becoming aware of one’s assumptions, values, and beliefs can help inform one’s positions on important issues facing the United States today.

Lesson Learning Objectives

By the end of the lesson students will be able to:
• Analyze and summarize a position on the healthcare debate
• Infer how these positions relate to other current political issues
• Justify their own position on the debate surrounding the Affordable Care Act

Essential Questions

• What are the solutions that senators are proposing for healthcare reform?
• What are the essential problems that are faced by citizens seeking healthcare coverage in the United States?
• What are the aspects of healthcare reform that are most controversial?

KEY VOCABULARY

• See Vocabulary Worksheet on page 12
### Pre-Visit Lesson Plan

**TOTAL TIME:** 50 minutes

<table>
<thead>
<tr>
<th>TIME</th>
<th>ACTIVITY</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 minutes</td>
<td>Warm-Up</td>
<td>Assign students to read the ACA Background Overview and Vocabulary worksheet before the lesson. Have them write down their comments and questions.</td>
</tr>
</tbody>
</table>

**Materials:**
- ACA Background Overview (p. 5)
- ACA Vocabulary (p. 12)

If possible, before the lesson, create a set of posters or handouts, one for each of the six acts listed in the ACA Background Overview. Allow for writing space on each.

Introduce the topic of healthcare reform, using the key vocabulary terms. Ask students to describe to what extent they have heard of or understand the terms: Affordable Care Act, Medicare, Medicaid, or pre-existing condition. For example ask, "Medicare is government health insurance for people over 65 or younger people with disabilities. Have you heard of Medicare before? Tell us what you know about this program."

Activity: Assign students to at least four groups and have each group work to answer the following questions about each piece of historical legislation. Assign one question to each group.

Questions:
1) Who benefits from this legislation?  
2) Who does the legislation exclude?  

Teacher Example: The people who benefited from the Ryan White Healthcare Act were those persons who had been diagnosed with HIV/AIDS. It had benefits as well to those people who were associated with these patients who had HIV, including family members. Because this health crisis became a national priority, scientific innovation developed new treatments to extend the life of those living with HIV. Doctors were able to provide better care to patients with HIV as a result of these new treatments.

Have students share their responses with the class.
## Pre-Visit Lesson Plan
*(Continued)*

**TOTAL TIME: 50 minutes**

<table>
<thead>
<tr>
<th>TIME</th>
<th>ACTIVITY</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 minutes</td>
<td>ACA Debate</td>
<td>Have students work in groups to read the Pro/Con Debate Speeches or abridged speeches.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Encourage students to think critically about both perspectives in relation to the outcomes each is attempting to achieve.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Have them fill out the ACA Debate Worksheet based on the speeches.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Discuss the worksheet with the class.</td>
</tr>
<tr>
<td></td>
<td>Presentation Preparation</td>
<td>Have students continue to work in groups to prepare a persuasive presentation either for or against the ACA.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Have them discuss the following questions as they consider their positions.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1. Who benefits from the ACA and who doesn’t?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2. What makes the ACA better or worse than the status quo?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3. What should the role of the government be in providing healthcare? There are many healthcare models around the world. Eighteen countries currently offer universal health care to their citizens. Have them research healthcare in another country, such as Australia, France, Portugal, Canada, Taiwan, or Sweden.</td>
</tr>
<tr>
<td>10 minutes</td>
<td>Presentation</td>
<td>Each group presents their persuasive presentation on the ACA.</td>
</tr>
<tr>
<td>10 minutes</td>
<td>Closing</td>
<td>Students should reflect on their positions on the ACA. Have them respond to this prompt.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Do you support the ACA or not? Provide three reasons to support your position.</td>
</tr>
</tbody>
</table>

### Materials:
- Pro/Con Debate Speeches  
  - Con Speech: Lexile 1200–1300 (p. 15)  
  - Con Speech (Abridged): Lexile 900–1200 (p. 16)  
  - Con Speech: Lexile 1200–1300 (p. 17)  
  - Con Speech (Abridged): Lexile 800–900 (p. 18)  
  - Pro Speech: Lexile 1200–1300 (p. 19)  
  - Pro Speech (Abridged): Lexile 800–900 (p. 20)  
- ACA Debate Worksheet (pp. 13–14)
- Persuasive Presentation Rubric (p. 21)
- Journaling
### ACA VOCABULARY

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Insurance Premium</td>
<td>A premium is an amount of money an individual or business must pay to buy insurance.</td>
</tr>
<tr>
<td>Insurance Claim</td>
<td>A formal request by a policyholder to an insurance company to pay for an event covered by the policy.</td>
</tr>
<tr>
<td>Insurance Deductible</td>
<td>The amount of money that an individual must pay an insurance company before the company will pay an insurance claim.</td>
</tr>
<tr>
<td>Pre-Existing Condition</td>
<td>This is a medical condition that started before a health insurance policy went into effect.</td>
</tr>
<tr>
<td>Medicare</td>
<td>A federal system of health insurance for people over 65 years of age and for certain younger people with disabilities.</td>
</tr>
<tr>
<td>Medicaid</td>
<td>A federal system of health insurance for those requiring financial assistance.</td>
</tr>
<tr>
<td>Federal Poverty Level</td>
<td>This is a measure of income used to determine eligibility for Medicaid and the Children’s Health Insurance Program (CHIP), as well as premium subsidies and cost-sharing reductions (cost-sharing subsidies) in the exchange and other federal programs.</td>
</tr>
<tr>
<td>Health Insurance Exchange</td>
<td>Online marketplace where consumers can compare and buy individual health insurance plans.</td>
</tr>
<tr>
<td>Subsidy</td>
<td>A sum of money provided by the government to support an individual or group in need of financial assistance.</td>
</tr>
<tr>
<td>National Debt</td>
<td>The total amount of money that a country’s government has borrowed, by various means.</td>
</tr>
</tbody>
</table>
Aca debate

1. Read the list of groups or subjects below and decide whether the ACA will have a positive or negative effect on each one.

<table>
<thead>
<tr>
<th>Issues</th>
<th>Positive Impact</th>
<th>Negative Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Insurance companies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children under 26</td>
<td></td>
<td></td>
</tr>
<tr>
<td>People making more than $200,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Senior citizens</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Small business owners</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The unemployed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tanning salons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>National debt</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Those living at or below federal poverty levels</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Summarize in a few sentences what you think is the major difference between the two points of view with regard to the role of the federal government in regulating healthcare.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
1. Read the list of groups or subjects below and decide whether the ACA will have a positive or negative effect on each one.

<table>
<thead>
<tr>
<th>Issues</th>
<th>Positive Impact</th>
<th>Negative Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Insurance companies</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Children under 26</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>People making more than $200,000</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Senior citizens</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Small business owners</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>The unemployed</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Tanning salons</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>National debt</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Those living at or below federal poverty levels</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

2. Summarize in a few sentences what you think is the major difference between the two points of view with regard to the role of the federal government in regulating healthcare.

ACA supporters see the act as the only way to curb the rising costs of healthcare for most American citizens. Those opposed to the ACA cite the negative effects that it can have on business owners and also the fact that it will increase the national debt.
Americans want a healthcare system that is more affordable and accessible, but they also want to preserve the choice and quality that our current system provides... They do not want a government plan that forces them off their current insurance; denies, delays, and rations care; or costs trillions of dollars, only to leave millions of Americans with worse healthcare than they currently have.

We also know from hard experience with programs like Medicare and Medicaid that government-run health plans are likely to cost far more in the long run than original cost estimates suggest. Americans are increasingly concerned about the cost. This is why advocates of government-run healthcare are scrambling for a way to pay for it. In their rush to find the money they have come up with some terrible ideas...advocates for government-run healthcare now want small businesses and seniors to pay for their plan through higher taxes and cuts to Medicare.

Medicare should be strengthened for future generations, not used as a piggy bank to fund more government programs. As for tax hikes on small business owners, this is the last thing we should be doing to the people who have created approximately two-thirds of America's jobs over the past decade at a time when the unemployment rate is approaching 10 percent.

Americans want us to work together on proposals that are likely to garner bipartisan support. I have listed many of these proposals repeatedly over the past several weeks, such as reforming medical malpractice laws to get rid of junk lawsuits and bring down costs and encouraging wellness prevention programs such as those that help people quit smoking and overcome obesity.

Healthcare reform will not be easy. But it does not have to bury our children and grandchildren deeper in debt when so far this year we're already spending an average of $500 million a day in interest on the national debt...

Americans are concerned about the cost of reform. We should work hard to assure them that we are too.
CON SPEECH—DEVELOPED BY THE SENATOR FROM KENTUCKY (Abridged)

Americans want a healthcare system that is more affordable and accessible. They also want to preserve the choice and quality that our current system provides... They do not want a government plan that forces them off their current insurance. A plan that denies, delays, and rations care. A plan that costs trillions of dollars, leaving millions of Americans with worse healthcare than they currently have.

We also know from experience with programs like Medicare and Medicaid that government-run health plans are likely to cost far more in the long run. Americans are increasingly concerned about the cost. This is why advocates of government-run healthcare are scrambling for a way to pay for it. In their rush to find the money they have come up with some terrible ideas.... They want small businesses and seniors to pay for their plan through higher taxes and cuts to Medicare. Medicare should be strengthened for future generations. It should not be used as a piggy bank to fund more government programs. As for tax hikes on small business owners, this is the last thing we should be doing. These people have created approximately two-thirds of America's jobs over the past decade. They have done so at a time when the unemployment rate is approaching 10 percent.

Americans want us to work together on proposals that are likely to gain bipartisan support. I have listed many of these proposals repeatedly over the past several weeks. We can reform medical malpractice laws to get rid of junk lawsuits. We can encourage wellness prevention programs such as those that help people quit smoking and overcome obesity.

Healthcare reform will not be easy. But it does not have to bury our children and grandchildren deeper in debt. So far this year we’re already spending an average of $500 million a day in interest on the national debt...

Americans are concerned about the cost of reform. We should work hard to assure them that we are too.
CON SPEECH—DELIVERED BY THE SENATOR FROM WYOMING

The Department of Labor recently reported that our Nation’s unemployment rate is 10 percent. In states such as Michigan, California, Rhode Island, and Nevada, the average rate is over 12 percent. Millions of Americans have lost their jobs and millions more go to work every day worried about keeping the job they have. Businesses of all sizes are struggling to keep their doors open and are finding it harder and harder to make ends meet.

Unfortunately, the policies in the Reid healthcare reform bill will only make matters worse for America’s businesses and the workers they employ. When I am home in Wyoming, which is nearly every weekend, my constituents ask me: What does healthcare reform mean for me?

Unfortunately, I have to tell them that if the Reid bill is passed, their jobs and their paychecks will be in danger. Many business owners cannot provide health insurance. They cannot afford insurance for their workers or for their own families. They have looked at their bottom lines and understand that they cannot afford to buy insurance and continue to stay in business—health insurance simply costs too much.

At a time when Americans across this country are looking for signs of an economic recovery, the Senate should be debating a bill that helps the situation, rather than a bill that makes it worse.

Between 1999 and 2008, the unemployment rate was about 5 percent. But when our economy began to struggle, we saw the unemployment rate rise to a point that now we are seeing more than 10 percent unemployment. It seems only logical to me that if our economy is struggling and people are losing their jobs... this is the issue we should be focused on.
CON SPEECH—DELIVERED BY THE SENATOR FROM WYOMING (Abridged)

The Department of Labor recently reported that our nation’s unemployment rate is 10 percent. In states such as Michigan, California, Rhode Island, and Nevada, the average rate is over 12 percent. Millions of Americans have lost their jobs. Millions more go to work every day worried about keeping the job they have. Businesses of all sizes are struggling to keep their doors open. They are finding it harder and harder to make ends meet.

Unfortunately, the policies in the healthcare reform bill will only make matters worse. It will hurt America’s businesses and the workers they employ. When I am home in Wyoming, my constituents ask me: What does healthcare reform mean for me?

I have to tell them that if the bill is passed, their jobs and their paychecks will be in danger. Many business owners cannot provide health insurance. They cannot afford insurance for their workers or for their own families. They have looked at their bottom lines. They cannot afford to buy insurance and continue to stay in business. Health insurance simply costs too much.

Americans across this country are looking for signs of an economic recovery. The Senate should be debating a bill that helps the situation, rather than a bill that makes it worse.

Between 1999 and 2008, the unemployment rate was about 5 percent. But when our economy began to struggle, we are seeing more than 10 percent unemployment. It seems only logical to me that this is the issue we should be focused on.
Over the past few months, I have tried to ensure that the struggles of people in my home state are represented in this debate. I told my colleagues the stories that I have received in over 10,000 letters and emails and at roundtables and on the phone, stories told to me too often by men and women with tears in their eyes or a quiver in their voice, people who are not looking for a handout or a free ride but who are pleading for a fair system—a system that works for families or businesses like theirs.

I shared the story of Janet from Seattle. She lost her job, lost her insurance, and succumbed to cancer after being forced to wait 6 weeks to see a specialist after her throat began to hurt. Janet’s story is why we need to reform the health insurance system.

I told the story of Mark Peters from Port Townsend who owns a small technology company. He told me he is being crushed by skyrocketing premiums. He offers health insurance to his employees. He does the right thing. But he told me he just got a letter from his insurance company raising his rates by 25 percent. Mark told me his small business cannot sustain increases such as that; no business can. But in our current health insurance system, small businesses are often at the mercy of the insurance companies. This company’s story is why we need to reform the health insurance system.

Real people, real stories, real needs—that is why we are here now and that is why we have to get this done. When we pass this bill, Americans will be able to shop for coverage that meets their needs. For the first time, insurance companies will have to compete for our business, for the business of the American people.

I thank the more than 10,000 people in my home State of Washington who sent me their personal healthcare stories. Their input has helped guide me as I worked on this bill and served as a constant and welcome reminder about who I am here to represent.
PRO SPEECH—DELIVERED
BY THE SENATOR FROM
WASHINGTON (Abridged)

Over the past few months, I have tried to represent the struggles of people in my home state in this debate. I told my colleagues the stories that I have received in over 10,000 letters and emails. I have heard stories at roundtables and on the phone. These stories are told to me too often by men and women with tears in their eyes or a quiver in their voice. They are not looking for a handout or a free ride. They are pleading for a fair system—a system that works for families or businesses like theirs.

I shared the story of Janet from Seattle. She lost her job and her insurance. She died of cancer after waiting six weeks to see a specialist. Janet’s story is why we need to reform the health insurance system.

I told the story of Mark Peters. He is from Port Townsend and owns a small technology company. He told me he is being crushed by skyrocketing premiums. He offers health insurance to his employees. He does the right thing. But he just got a letter from his insurance company raising his rates by 25 percent. Mark told me his small business cannot sustain increases such as that. No business can. But in our current health insurance system, small businesses are often at the mercy of the insurance companies. This is why we need to reform the health insurance system.

Real people, real stories, real needs—that is why we have to get this done. When we pass this bill, Americans will be able to shop for coverage that meets their needs. For the first time, insurance companies will have to compete for the business of the American people.

I thank the more than 10,000 people in my home State of Washington who sent me their personal healthcare stories. Their input has helped guide me as I worked on this bill. They have served as a constant and welcome reminder about who I am here to represent.
PERSUASIVE PRESENTATION RUBRIC

Directions: Prepare a persuasive presentation about the Senate Speech you analyzed using the ACA Debate Worksheet. First summarize your senator’s argument. Then support it with evidence. Convince your classmates why the issues your senator addresses are important to healthcare legislation.

<table>
<thead>
<tr>
<th>Points</th>
<th>0</th>
<th>1</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Position</strong></td>
<td>The senator’s position on healthcare reform is not stated.</td>
<td>The senator’s position on healthcare reform is either partially stated or not clearly stated.</td>
<td>The senator’s position on what healthcare reform should or should not be is clearly stated in the presentation.</td>
</tr>
<tr>
<td><strong>Evidence</strong></td>
<td>Presentation does not include evidence that the senator used in their speech to support their position on healthcare reform.</td>
<td>Presentation includes some evidence the senator used in their speech to support their position on healthcare reform.</td>
<td>Presentation includes evidence the senator used in the speech to support their position on healthcare reform.</td>
</tr>
<tr>
<td><strong>Issues</strong></td>
<td>Presentation does not include the issues that the senator’s position would positively or negatively impact.</td>
<td>Presentation includes issues that the senator’s position would impact but only lists the positives or negatives.</td>
<td>Presentation includes issues that the senator’s position would both positively and negatively impact.</td>
</tr>
<tr>
<td><strong>Presentation</strong></td>
<td>The presentation is not delivered in a persuasive or well-organized way.</td>
<td>The presentation is well organized but not persuasive.</td>
<td>The presentation is delivered in a persuasive, well-organized, and thoughtful way.</td>
</tr>
</tbody>
</table>
POST-LESSON: AFFORDABLE CARE ACT (ACA)

Post-Visit Lesson Introduction
In this lesson, students will debrief their experiences as senators in debating the Affordable Care Act. They will research different approaches to healthcare reform. They will write a letter to their current senator, proposing a program that will address the issue of healthcare reform.

Lesson Learning Objectives
By the end of this lesson students will:
• Reflect on their role play and representation of their senator’s interests while participating in the SIM
• Understand the legacy of healthcare reform and its continuing impact today
• Apply their knowledge of the Affordable Care Act to proposing their position on healthcare reform

Enduring Understandings
• Healthcare reform programs have had lasting effects on American government and society.
• Becoming aware of the healthcare legacy can help inform one’s positions on important issues facing the United States today.

Essential Questions
• How do senators balance the interests and needs of the country, their party, their constituents, and themselves when taking a position on an issue?
• How does the legacy of healthcare reform affect our economic and social programs today?
• What approach do I want to propose in order to support positive change?

LESSON DURATION
50 minutes

KEY VOCABULARY
• See Vocabulary Worksheet on page 12
# Post-Visit Lesson Plan

TOTAL TIME: 50 minutes

<table>
<thead>
<tr>
<th>TIME</th>
<th>ACTIVITY</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 minutes</td>
<td>Senator Reflection</td>
<td><strong>DESCRIPTION</strong></td>
</tr>
<tr>
<td></td>
<td>Warm-Up</td>
<td><strong>DESCRIPTION</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Materials:</strong></td>
<td><strong>DESCRIPTION</strong></td>
</tr>
<tr>
<td></td>
<td>- Considering My Vote worksheet</td>
<td><strong>DESCRIPTION</strong></td>
</tr>
<tr>
<td></td>
<td>(p. 24)</td>
<td><strong>DESCRIPTION</strong></td>
</tr>
<tr>
<td>20 minutes</td>
<td>Research different approaches</td>
<td>Give students the opportunity to research different approaches on healthcare reform.</td>
</tr>
<tr>
<td></td>
<td>to healthcare reform.</td>
<td>Explain to them that their writing assignment will be to write a letter to their legislator about a healthcare reform program they want to propose. Their research should help them focus on a current problem or issue that their program will address.</td>
</tr>
<tr>
<td></td>
<td>- Access to the internet using</td>
<td><strong>DESCRIPTION</strong></td>
</tr>
<tr>
<td></td>
<td>computers or cell phones</td>
<td><strong>DESCRIPTION</strong></td>
</tr>
<tr>
<td>25 minutes</td>
<td>Writing a Letter</td>
<td>Have students write a letter to their legislator proposing a healthcare reform program that will address the current problem or issues. Remind students to use facts and be persuasive about the benefits of their program.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Have students turn in the letter at the end of class or assign it as homework.</td>
</tr>
</tbody>
</table>
CONSIDERING MY VOTE

Fill out the worksheet; refer to your individualized report of your voting decisions in the SIM for details of your decisions.

1. What was your vote?

2. Do you think the senator you represented would be pleased with the outcome of the vote? Why or why not?

3. How did you balance various interests as a senator in deciding whether or not to vote for the bill? Think about party, state, and personal interests.
STANDARDS ALIGNMENT

The pre-visit and post-visit lessons along with the SIM, itself, are aligned to the following Common Core and Massachusetts standards.

CONTENT STANDARDS (MASSACHUSETTS)

U.S. United States and Massachusetts Government and Civic Life

HSS.8.T3.02 Examine the relationship between the three branches of government (the checks and balances system).

HSS.8.T3.05 Describe the role of political parties at the state and national levels.

HSS.8.T4.03 Distinguish among civic, political, and private life.

HSS.8.T4.08 Explain the importance of individuals working cooperatively with their elected leaders.

HSS.8.T4.10 Analyze issues involving liberty in conflict with equality or authority, individual rights in conflict with the common good, or majority rule in conflict with minority rights.

U.S. History I Standards

USI.11 Describe the purpose and functions of government.

USI.12 Describe how decisions are made in a democracy, including the role of legislatures, courts, executives, and the public.

American Government Standards

USG1.3 Describe the purposes and functions of government.

USG.2.8 Evaluate, take, and defend positions on issues concerning foundational ideas or values in tension or conflict.

USG.3.12 Use a variety of sources, including newspapers and internet web sites, to identify current state and local legislative issues and examine the influence on the legislative process of political parties, interest groups, grass roots organizations, lobbyists, public opinion, the news media, and individual voters.

USG.5.10 Practice civic skills and dispositions by participating in activities such as simulated public hearings, mock trials, and debates.

High School Elective: United States Government and Politics

GOVT.1.10 Argue and defend positions on issues in which foundational ideas or values are in tension or conflict (e.g., liberty in conflict with equality or authority, individual rights in conflict with national or community interests or perceptions of the common good, or majority rule in conflict with minority rights).

GOVT.4.06 Compare the debate over a public policy issue from the past and a contemporary one and evaluate the role of political parties, interest groups and media in influencing public opinion.

COMMON CORE STANDARDS

Anchor Standards for Reading (see differentiated Reading Standards for Literacy in History/Social Studies 6–12 for more grade level detail)

RH.1: Cite specific textual evidence to support analysis of primary and secondary sources, attending to such features as the date and origin of the information.

RH.2: Determine the central ideas or information of a primary or secondary source, provide an accurate summary of how key events or ideas develop over the course of the text.

RH.7: Integrate and evaluate content presented in diverse formats and media, including visually and quantitatively, as well as in words.

RH.9: Compare and contrast treatments of the same topic in several primary and secondary sources.

RH.10: Read and comprehend complex literary and informational texts independently and proficiently.

Anchor Standards for Writing (see differentiated Writing Standards for Literacy in History/Social Studies 6–12 for more grade level detail)

WHST.9–10.2. Write informative/explanatory texts to examine and convey complex ideas and information clearly and accurately through the effective selection, organization and analysis of content.

A. Introduce a topic; organize complex ideas, concepts, and information to make important connections and distinctions; include formatting (e.g., headings), graphics (e.g., figures, tables), and multimedia when useful to aiding comprehension.
STANDARDS ALIGNMENT
(Continued)

B. Develop the topic with well-chosen, relevant, and sufficient facts, extended definitions, concrete details, quotations, or other information and examples appropriate to the audience’s knowledge of the topic.

C. Use appropriate and varied transitions to link the major sections of the text, create cohesion, and clarify the relationships among complex ideas and concepts.

D. Use precise language and domain-specific vocabulary to manage the complexity of the topic.

E. Establish and maintain a formal style and objective tone while attending to the norms and conventions of the discipline in which they are writing.

F. Provide a concluding statement or section that follows from and supports the information or explanation presented (e.g., articulating implications or the significance of the topic).

WHST.9–10.4. Produce clear and coherent writing in which the development, organization, and style are appropriate to task, purpose, and audience.

WHST.9–10.5. Develop and strengthen writing as needed by planning, revising, editing, rewriting, or trying a new approach.

Anchor Standards for Speaking and Listening

CCSS.ELA-LITERACY.SL.9–10.1
Initiate and participate effectively in a range of collaborative discussions (one-on-one, in groups, and teacher-led) with diverse partners on grades 9–10 topics, texts, and issues, building on others’ ideas and expressing their own clearly and persuasively.

B. Work with peers to set rules for collegial discussions and decision-making (e.g., informal consensus, taking votes on key issues, presentation of alternate views), clear goals and deadlines, and individual roles as needed.

C. Propel conversations by posing and responding to questions that relate the current discussion to broader themes or larger ideas; actively incorporate others into the discussion; and clarify, verify, or challenge ideas and conclusions.

CCR: SL.2. Integrate and evaluate information presented in diverse media and formats, including visually, quantitatively, and orally.

CCR: SL.3. Evaluate a speaker’s point of view, reasoning, and use of evidence and rhetoric.

21ST CENTURY SKILLS
(FROM WWW.P21.ORG)

• Use various types of reasoning (inductive, deductive, etc.) as appropriate to the situation.

• Analyze how parts of a whole interact with each other to produce overall outcomes in complex systems.

• Effectively analyze and evaluate evidence, arguments, claims and beliefs.

• Analyze and evaluate major alternative points of view.

• Synthesize and make connections between information and arguments.

• Interpret information and draw conclusions based on the best analysis.

• Identify and ask significant questions that clarify various points of view and lead to better solutions.

• Articulate thoughts and ideas effectively using oral, written and nonverbal communication skills in a variety of forms and contexts.

• Listen effectively to decipher meaning, including knowledge, values, attitudes and intentions.

• Use communication for a range of purposes (e.g., to inform, instruct, motivate and persuade).

• Demonstrate ability to work effectively and respectfully with diverse teams.

• Exercise flexibility and willingness to be helpful in making necessary compromises to accomplish a common goal.

• Assume shared responsibility for collaborative work, and value the individual contributions made by each team member.
ADDITIONAL RESOURCES

AFFORDABLE CARE ACT RESOURCES
Resources related to the healthcare reform

History of Healthcare Reform
https://www.pbs.org/healthcarecrisis/history.htm

History of the U.S. Healthcare System
http://samples.jbpub.com/9781284043761/Chapter1.pdf

Call to Action: Health Reform 2009

Social and Legal Debate About the Affordable Care Act
https://scholarlycommons.law.hofstra.edu/cgi/viewcontent.cgi?referer=https://www.google.com&httpsredir=1&article=1289&context=faculty_scholarship

Understanding the Affordable Care Act—Game

GENERAL RESOURCES
The following general resources provide more information and curriculum about the U.S. Congress and the Senate.

Annenberg Classroom
https://www.annenbergclassroom.org/
Provides resources for teaching civics

GovTrack
https://www.govtrack.us/
This website helps track activities in the Congress

iCivics
https://www.icivics.org
Free curriculum and games to learn civics

Library of Congress
https://www.loc.gov/
Supports Congress in fulfilling their duties and contains millions of resources, like books, photographs, maps, etc.

Library of Congress teacher’s page
http://www.loc.gov/teachers/usingprimarysources/guides.html
Numerous resources, pay special attention to the “Using Primary Sources” section

Library of Congress teacher’s page
http://www.loc.gov/teachers/classroommaterials/
Section containing Primary Source sets, lesson plans and numerous other valuable resources

PopVox
https://www.popvox.com/
Enables you to share your opinion about a bill with your representatives and the public

Senate.gov
https://www.senate.gov/
Provides information about past and present Senates

CongressLink
https://www.loc.gov/item/2003557479
Provides resources for teachers about Congress

Being a Senator Curriculum
https://www.emkinstitute.org/resources/being-senator-curriculum
Curricular materials to prepare students for the senate immersion modules at the Kennedy Institute

GIGANTIC MECHANIC INSTITUTE of PLAY
Created in consultation with Gigantic Mechanic and Institute of Play

Instructional design and full service development by Brattle Education, a division of Brattle Publishing Group, LLC