

DAVID VITTER, LOUISIANA, CHAIRMAN
BENJAMIN L. CARDIN, MARYLAND, RANKING MEMBER

JAMES E. RISCH, IDAHO
MARCO RUBIO, FLORIDA
RAND PAUL, KENTUCKY
TIM SCOTT, SOUTH CAROLINA
DEB FISCHER, NEBRASKA
CORY GARDNER, COLORADO
JONI ERNST, IOWA
KELLY AYOTTE, NEW HAMPSHIRE
MICHAEL B. ENZI, WYOMING

MARIA CANTWELL, WASHINGTON
JEANNE SHAHEEN, NEW HAMPSHIRE
HEIDI HEITKAMP, NORTH DAKOTA
EDWARD J. MARKEY, MASSACHUSETTS
CORY A. BOOKER, NEW JERSEY
CHRISTOPHER A. COONS, DELAWARE
MAZIE K. HIRONO, HAWAII
GARY C. PETERS, MICHIGAN

ZAK BAIG, REPUBLICAN STAFF DIRECTOR
ANN JACOBS, DEMOCRATIC STAFF DIRECTOR

United States Senate

COMMITTEE ON SMALL BUSINESS & ENTREPRENEURSHIP

WASHINGTON, DC 20510-6350

TELEPHONE: (202) 224-5175 FAX: (202) 224-5619

March 24, 2015

The Honorable John Boehner
Speaker of the House
H-232, The Capitol
Washington, DC 20515

Dear Speaker Boehner,

As you may be aware, I am investigating the circumstances in which the U.S. House of Representatives and the U.S. Senate (Congress) were able to qualify for healthcare benefits on the District of Columbia Health Benefits Exchange Authority's (DCHBEA) small business exchange. As Chairman of the Senate Small Business and Entrepreneurship Committee, I am committed to advocating for America's small businesses, and that includes ensuring that large organizations – including Congress – do not take advantage of systems in place that are meant solely for small businesses.

The Committee has obtained the applications, which the House of Representatives and Senate had completed and submitted to procure benefits through the small business exchange. Upon examination, Committee staff discovered multiple blatant, false, and fraudulent assertions in the applications. For instance, the application from the House of Representatives claims that it only employs 45 full-time equivalent employees and is a "State/local government." Certainly, we can both agree that the House of Representatives – with thousands of employees – is not a small business.¹

Judicial Watch obtained these applications in a Freedom of Information Act (FOIA) request, yet the produced documents were heavily redacted, including the identity of the person(s) or office responsible for completing the application. Accordingly, I requested the unredacted applications from officials in the House of Representatives, Senate, and DCBHEA. I must be clear – this investigation is not about releasing private information about individuals' healthcare benefits. The goal of this investigation is to find out who is responsible for allowing Congress to be part of DCHBEA's small business exchange. My request does not seek any personal information related to individuals who applied for or have received benefits through the exchange.

Despite three separate requests, as of yet officials of the House of Representatives have not cooperated at all in this investigation. Their refusal gives the impression that they may be attempting to hide information from the American public about how the House of Representatives successfully bypassed the law to qualify for tax payer-funded benefits. Any private business that would have submitted these fraudulent applications would have rightfully

¹ DCBHEA's small business exchange is only open to businesses with 50 or fewer full time equivalent employees.

incurred penalties and negative publicity for ignoring the law, yet so far Congress has escaped unscathed. Whenever Congress bends, or completely ignores, the law in order for it to receive tax-payer funded contributions, the American public have a right to a full and transparent account and explanation.

I am writing to advise you of my efforts, and also to request any assistance that you or your office can offer in obtaining the cooperation of the House of Representatives in this important investigation. Enclosed are the applications with redactions, and the responses from the House of Representatives. Should you have any questions, or wish to further discuss this matter, please contact me or the Committee at (202) 224-5175.

Sincerely,



David Vitter

Chairman

Senate Committee on Small Business and Entrepreneurship

Contact name & email address

Check here if you are the contact?

Name	First Name	Middle Initial	Last Name	Suffix
	[REDACTED]		[REDACTED]	

Title ..

E-mail address: [REDACTED]

Contact mailing address

Check here if the contact address is the same as the primary business address?

Address	Mailing address Line 1	Mailing address Line 2
	US House of Representatives Members Svc Room 139A Cannon HOB	
	City	State ZIP Code
	Washington DC	20515

Contact preferences

Preferred phone number	Phone type	Phone number	Phone number Ext.
	Work	[REDACTED]	

Secondary phone number	Phone type	Phone number	Phone number Ext.

Fax number ..

Preferred spoken language ..

Preferred written language ..

Finalize Employees

1

First Name	Last Name	Date of Birth	ZIP Code	EE Class
Twany	Congress	01/01/1994	20002	All Employees
Employee Dependents: None				

Confirmation

- I attest that I employ 50 or fewer full time equivalent employees.
- I attest that I will offer coverage to all full-time employees working an average of 30 hours per week through DC Health Link (or, for multi-state employers, any other exchange serving those work locations outside of DC).

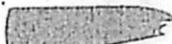
Electronic Signature

I've provided true and correct answers to all the questions on this form to the best of my knowledge. I know that if I'm not truthful there may be a penalty. I know that I must tell (DC Health Link) if anything changes about what I wrote on this application.

I agree

Job Title from Your
Company

Signature: First Name Middle Initial



Last Name Suffix



Date 11/25/2013

Close

Print

Close

Print

Employer Information

Employer name & address

Employer name United States Senate
Doing business as(name) United States Senate
Federal Employer Identification Number(EIN) [REDACTED]
Employer Type State/local government

Average Number of Full-Time Employees (in Prior Calendar Year) ..
Average Number of Part-Time Employees (in Prior Calendar Year) ..
Average Weekly Hours Worked By Part-Time Employees ..
Number of Full-Time Equivalents (FTEs) in Prior Calendar Year 45

Primary business address

Business address Line 1 United States Senate
Business address Line 2 Disbursing Office
City Washington
State DC
ZIP Code 20510

Contact name & email address

Check here if you are the contact?

Name	First Name	Middle Initial	Last Name	Suffix
	[REDACTED]		[REDACTED]	
Title	..			
E-mail address	[REDACTED]			

Contact mailing address

Check here if the contact address is the same as the primary business address?

Address	Mailing address Line 1	Mailing address Line 2	City	State	ZIP Code
	B-215 Longworth HOB	--	Washington DC		20516

Contact preferences

Preferred phone number	Phone type	Phone number	Phone number Ext.
	Work	[REDACTED]	
Secondary phone number	Phone type	Phone number	Phone number Ext.
	--	..	--
Fax number	..		
Preferred spoken language	..		
Preferred written language	..		

Finalize Employees

1

First Name	Last Name	Date of Birth	ZIP Code	EE Class
------------	-----------	---------------	----------	----------

First Name	Last Name	Date of Birth	ZIP Code	EE Class
first	last	01/01/1980	20002	All Employees
Employee Dependents: None				

Confirmation

- I attest that I employ 50 or fewer full time equivalent employees.
- I attest that I will offer coverage to all full-time employees working an average of 30 hours per week through DC Health Link (or, for multi-state employers, any other exchange serving those work locations outside of DC).

Electronic Signature

I've provided true and correct answers to all the questions on this form to the best of my knowledge. I know that if I'm not truthful there may be a penalty. I know that I must tell (DC Health Link) if anything changes about what I wrote on this application.

- I agree

Job Title from Your
Company

Signature: First Name Middle Initial

[Redacted Signature]

Last Name Suffix

[Redacted Signature]

Date 02/19/2014

Close

Print

Close

Print

Employer Information

Employer name & address

Employer name US House of Representatives

Doing business as(name) US House of Representatives

Federal Employer
Identification Number(EIN) [REDACTED]

Employer Type State/local government

Average Number of ..
Full-Time Employees (in Prior
Calendar Year)

Average Number of ..
Part-Time Employees (in
Prior Calendar Year)

Average Weekly Hours ..
Worked By Part-Time
Employees

Number of Full-Time 45
Equivalents (FTEs) in Prior
Calendar Year

Primary business address

Business address Line 1 US House of Representatives

Business address Line 2 Members Svc Room 139A Cannon HOB

City Washington

State DC

ZIP Code 20515

Contact name & email address

Check here if you are the contact?

Name: First Name Middle Initial Last Name Suffix

[Redacted] [Redacted]

Title ..

E-mail address [Redacted]

Contact mailing address

Check here if the contact address is the same as the primary business address?

Address: Mailing address Line 1 Mailing address Line 2 City State ZIP Code
United States Senate Disbursing Office Washington DC 20510

Contact preferences

Preferred phone number: Phone type Phone number Phone number Ext.

Work: [Redacted]

Secondary phone number: Phone type Phone number Phone number Ext.

.. ..

Fax number ..

Preferred spoken language ..

Preferred written language ..

Finalize Employees

1

First Name	Last Name	Date of Birth	ZIP Code	EE Class
------------	-----------	---------------	----------	----------

First Name	Last Name	Date of Birth	ZIP Code	EE Class
Twenty	Congress	01/01/1994	20002	All Employees
Employee Dependents: None				

Confirmation

- I attest that I employ 50 or fewer full time equivalent employees.
- I attest that I will offer coverage to all full-time employees working an average of 30 hours per week through DC Health Link (or, for multi-state employers, any other exchange serving those work locations outside of DC).

Electronic Signature

I've provided true and correct answers to all the questions on this form to the best of my knowledge. I know that if I'm not truthful there may be a penalty. I know that I must tell (DC Health Link) if anything changes about what I wrote on this application.

I agree

Job Title from Your
Company

Signature: First Name Middle Initial

[Redacted]

Last Name Suffix

[Redacted]

Date 11/03/2013

Close

Print

Close

Print

Employer Information

Employer name & address

Employer name US House of Representatives

Doing business as(name) STAFF US House of Representatives

Federal Employer Identification Number(EIN) [REDACTED]

EmployerType State/local government

Average Number of Full-Time Employees (In Prior Calendar Year) ..

Average Number of Part-Time Employees (In Prior Calendar Year) ..

Average Weekly Hours Worked By Part-Time Employees ..

Number of Full-Time Equivalents (FTEs) in Prior Calendar Year 45

Primary business address

Business address Line 1 B-215 Longworth HOB

Business address Line 2 ..

City Washington

State DC

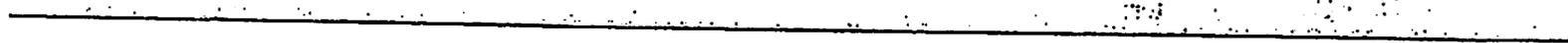
ZIP Code 20515

10/10/20

10/10/20

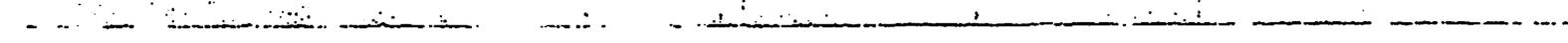
10/10/20

10/10/20



10/10/20

10/10/20



10/10/20

Office of the
Chief Administrative Officer
U.S. House of Representatives
Washington, DC 20515-6860

March 11, 2015

The Honorable David Vitter, Chairman
Committee on Small Business and Entrepreneurship
United States Senate
Washington, DC 20510

Dear Chairman Vitter:

Thank you for your letter of March 2, 2015 concerning the administrative processes through which Members of Congress and certain of their employees were enabled to purchase employer-provided health coverage authorized in the Patient Protection and Affordable Care Act.

In my letter to you of February 13, 2015, I advised that our reading of the Standing Rules of the Senate turned up no indication that the internal administrative procedures of the House fall within the jurisdiction of the Senate Committee on Small Business and Entrepreneurship. A subsequent examination conducted upon receipt of your most recent letter yielded the same result.

In closing, let me reiterate my expectation that your ongoing review of the Senate's handling of this matter will likely detail Senate Disbursing Office processes not materially different than those employed here in the House.

Sincerely,



Ed Cassidy
Chief Administrative Officer

Office of the
Chief Administrative Officer
U.S. House of Representatives
Washington, DC 20515-6860

February 13, 2014

The Honorable David Vitter
Chairman, Committee on Small Business & Entrepreneurship
United States Senate
Washington, D.C. 20510

Dear Chairman Vitter:

I am writing in response to your letter of February 5, 2015. You have inquired about certain administrative processes which facilitated the purchase by Members and employees of the House of Representatives of employer-provided health coverage, pursuant to the Patient Protection and Affordable Care Act and implementing regulations adopted by the U.S. Office of Personnel Management.

Although I appreciate your interest in this important issue, I have been unable to identify a provision of the senate rules indicating that the internal operations of the House of Representatives fall within the jurisdiction of the Committee on Small Business and Entrepreneurship. *See* Rule XXV.1 (o), Standing Rules of the Senate.

That said, I am advised that recently you directed a similar letter to the Financial Clerk of the Senate Disbursing Office. While noting that I did not hold my current position during the period in question, I nevertheless have no reason to believe that a description by the Senate Disbursing Office of its actions in this matter would differ markedly from the description I would provide were the House's internal administrative procedures within the jurisdiction of your Committee.

Sincerely,



Ed Cassidy
Chief Administrative Officer