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10 Lumps Of Coal In The Health Care Bill

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12/24/2009



For most Americans, the health reform bill that Senate Majority Leader Harry Reid is pushing to pass will be worse than coal in their stockings. Herewith, the Top 10 List of Things You Don't Want From Health Care Reform This Christmas — But Will Get Anyway From Congress.

1. Higher premiums: If you pay for your own insurance, your premiums will cost 10% to 13% more than if the bill didn't pass, according to the Congressional Budget Office. Insurance won't be more affordable. Sixty percent of the newly insured are being enrolled in Medicaid, the public program for the poor.

2. A cost you can't afford and can't avoid: Though moderate-income families will get subsidies, buying insurance is mandatory. A family earning \$54,000 will be expected to pay \$9,000 (17% of pre-tax income) for the premium, co-pays and deductibles, according to the CBO. If you don't enroll, the IRS will find you and penalize you (Senate bill, p. 345).

3. A one-size-fits-all health plan: Your benefit package will be prescribed by the Secretary of Health and Human Services. Whether you choose basic, silver or gold, and whether you pay for it yourself or qualify for a subsidy, your benefits are the same.

Gold plans simply collect more up front and give you a lower co-pay or deductible. It's unclear how possible it will be to buy supplemental insurance. The goal is to discourage health consumption and differences based on ability to pay.

4. A sin tax on your generous plan at work: This is another equalizer to discourage some people from getting more than others. The Senate bill puts a 40% tax on Cadillac plans (p. 1,980). About one-fifth of employer-provided plans fall into that "luxury" category. The CBO predicts that employers will downgrade your coverage to avoid the tax or reduce your take home pay.

5. Government controls on your doctors' decisions: The Senate bill bars doctors from participating in the private insurance system unless they implement whatever regulations

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the secretary of health and human services chooses to impose to "improve health care quality" (p. 149). That broad phrase encompasses everything in medicine.

This would be the first time in history that the federal government is given power over how doctors treat privately insured patients

6. Hospitals closed to seniors: The House and Senate bills slash payments to hospitals and other institutions that care for seniors. The chief actuary for Medicare, Richard Foster, warns that cuts in the House bill are so severe that some institutions may face severe losses or end their participation in Medicare (Centers for Medicare & Medicaid Services, 11/13/09 report). Some seniors won't know where to go.

7. Bare-bones hospital care: Patients of all ages (and all incomes) will suffer when hospitals are in financial distress. Hospital budget cuts will mean shortages of nurses, equipment and cleaning staff. The president's chief health advisor, Dr. Ezekiel Emanuel, argues that hospitals in the U.S. offer more privacy and comfort than hospitals in Europe, and this "abundance of amenities" drives up costs (Journal of the American Medical Association, June 18, 2008).

8. Future Medicare cuts: Look out baby boomers, the Senate bill establishes an Independent Medicare Advisory Commission to make automatic spending reductions in future years while insulating Congress from the political fallout. You won't get as much care as people in Medicare currently get.

9. A new social agenda: Money is allocated for adult preparation activities, including lessons on positive self-esteem and relationship dynamics, friendships, dating (and) romantic involvement (Senate bill, p.612). There are also giveaways to immigrants. The Senate bill hands low-income legal immigrants government subsidies as soon as they get here, instead of waiting the five years Medicaid requires (Senate bill, p. 274).

10. A tell-all relationship with every doctor you see: What happens in your doctor's office must be recorded in an electronic data base that can send the information to insurers and other medical offices (Senate bill, p. 62-66). Every doctor you see will have access to your medical history. See a psychiatrist? Your foot doctor will know about it.

These congressional tidings bring no comfort or joy. We must save ourselves from Congress' power now that it has gone astray.

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