

Criticisms about the health care reform act.

1. **Government takeover of health care.**
 - a. Government is already heavily involved in health care, through Medicare, Medicaid, VA, CHIPs, and other programs.
 - b. Focus of this act is federal government role as financier of health care options.
 - c. No public option is provided-other than those listed above. Does support CO-OPs as an alternative to a public plan.
 - d. *One problem may include the point that the same folks running current health care system (government and private) are the ones in charge of the new system.*
 - e. Bill builds on our current system of private insurance, and in fact, drums up more business for private companies by mandating that individuals buy coverage and giving many subsidies to do so.
 - f. Plan does not work either like the Canada single-payor system or the UK nationalized health care.
2. **Government can't run a health care program**
 - a. Medicare costs have risen more slowly than private insurance.
 - b. Medicare is extremely popular-A May 2009 Commonwealth Fund study concluded that "elderly Medicare beneficiaries reported greater overall satisfaction with their health coverage, better access to care, and fewer problems paying medical bills than people covered by employer-sponsored plans.
 - c. Veterans Health Administration (VHA) - an industry leader in its safety and quality measures.
 - d. *Can state-run Exchanges, expanded CHIP and Medicaid be run as well? Some states may do a far better job at managing health care than others. Does this open up mis-management at a more local level? What would prevent the "politicizing of health care delivery" at a state-level from happening?*
3. **Budget busters-will expand federal deficit exponentially.**
 - a. *Will cutting administrative costs and pooling risk more broadly drop costs? Is part also the improvement in the quality of care?*
 - b. *Where are the costs of the uninsured going-are they already part of the picture (just asking)?*
 - c. CBO found that House bill would increase the federal budget deficit by \$239 billion over 10 years -- not \$1 trillion as opponents have reported.
4. **Unaffordable mandates on individuals**
 - a. Mandates are offset in part with credits/assistance.
 - b. Expanded Medicaid and CHIPS will aid the poor.
 - c. **"Adverse Selection"**, which means that only people who are the most expensive to insure will be compelled to get insurance People will not buy coverage until they "need" it-adverse selection. This argument is offered up by opponents. This is why mandates are required.
 - d. It is put forward that people who are healthy will pay more for their health care or purchase more health care than desired; subsidizing health care for older and sicker workers.
 - e. Will the IRS be able to enforce the mandate?
 - f. *Is the mandate constitutional?*

5. Increase in Taxes

- a. If you're well off, there are more taxes coming your way by 2013-issue of wealth transfer.
- b. Only 4.1 percent of small-business owners would be affected by surtax.
- c. Includes a 2.3 percent excise tax on medical devices and annual fees on health insurance providers. A tax placed on insurance companies or medical device companies may be passed to consumers in the form of higher premiums.
- d. Cadillac Plans-The bill places a tax on high-cost employer-sponsored plans – specifically there's a 40 percent tax on the value of plans above \$10,200 for individuals and \$27,500 for families, starting in 2018. The tax falls on insurers, but would be passed along to policyholders one way or another. May make folks select less-costly options.
- e. Despite what Obama administration has reported it is however not actually a tax cut.

6. Increase Cost of Insurance Premiums

- a. For most people, premiums wouldn't change significantly. The Congressional Budget Office estimated that for those in the group market — those who get insurance through their employers — premiums would largely stay the same.
- b. Most rate increases are not related to the Affordable Care Act. Regence Blue Cross Blue Shield of Oregon, for example, wants a 17.1 percent increase, but only 3.4 percent of it is tied to the Affordable Care Act. Insurers began raising premiums by double digits long before President Obama signed the health care law in March. Health care premiums have risen faster than inflation and wage growth since 2005, according to the Kaiser Foundation.
- c. Businesses have been shifting more health insurance costs to employees, and the economy has exacerbated the situation
- d. Cadillac Plans may not be offered-see #5 above.
- e. The average premiums for those who buy insurance on their own would go up, however, by 10 percent to 13 percent. The reason is that benefits would become a lot better for this market under the bill. Also, most people buying their own coverage would receive subsidies that make their net costs for these plans substantially lower than they otherwise would be.
- f. There is no guarantee that your employer-sponsored plan will not be modified.
- g. Will there be enough done to improve efficiency and cost control to lower overall costs; thereby lowering premiums.
- h. The Commonwealth Fund, which supports research on health care issues, reported last week that small businesses will benefit from tax credits designed to offset higher premiums. Owners and employees alike will be protected from steep premium increases and high out-of-pocket costs, ensuring access to the stable, secure health insurance.

- i. *Insurance companies will be required to invest 80/85% of premiums in actual delivery of care-rather than administration costs-will this lower premiums?*
- j. In the absence of legislation, premiums aren't premiums likely to rise significantly having an impact on overall economy?

7. Attack on Medicare

- a. Focus on reduction of Medicare Advantage overpayments to insurers. Comparable overpayments have been made to providers of health care to the armed services through the manipulation of reasonable and customary fees.
- b. It's a \$500 billion reduction in the growth of future spending over 10 years, not a slashing of the current Medicare budget or benefits. It's true that those who get their coverage through Medicare Advantage's private plans (about 22 percent of Medicare enrollees) would see fewer add-on benefits; the bill aims to reduce the heftier payments made by the government to Medicare Advantage plans, compared with regular fee-for-service Medicare.
- c. Additional coverage of preventative services and prescription coverage under new plan will partially offset MA lower benefits.
- d. *Are any changes to Medicare delivery deemed acceptable by the population? "Get your government hands off my Medicare"*

8. Will force rationing of care.

- a. Rationing already exists
 - i. Insurance companies *already ration care*. Insurance companies acknowledge that they ration care, restricting coverage of procedures and tests like MRIs and CAT scans and denying coverage for pre-existing medical conditions.
 - ii. Insurance companies ration care by rescinding coverage
 - iii. More people now covered.
- b. Will newly insured persons will use many services forcing rationing?

9. No Cost-Sharing on Preventative Services will drive up overall costs.

- a. Opponents point out without co-payments people will overuse health care services, driving up premiums.
- b. Will no annual or lifetime limits also drive up costs?
- c. Don't these costs already exist-it is just a matter of who is paying them?

10. Could there be effects on the progress on medical innovation?

- a. Government intervention is often seen as a de-motivating influence on research and innovation.
- b. Shorter life expectancy due to slowdown in medical innovation?
- c. Will government input into improvements of quality of care utilize innovation?

11. Plan was poorly rolled out by Obama administration.

- a. *Administration has not been able to articulate their new health care agenda in a simple and understandable way.*
- b. *Highly complicated plan for highly complicated issue.*
- c. *Allowed conversation to focus on issues out of the mainstream such as abortion, coverage for non-citizens and death panels.*

12. Plan is too compromised to work.

- a. Many wanted public option that was not offered.
- b. Already companies are working out individual deals to opt out. *Will money and influence erode the integrity of the plan rendering it useless, or worse, damaging?*
- c. Does not address malpractice. It does address studies on tort reform. The CBO said measures that conservatives have proposed limiting medical liability would save \$54 billion over 10 years and "reduce total U.S. health care spending by about 0.5 percent (about \$11 billion in 2009)." Medical malpractice, while expensive, is not the primary driver in health care costs.
- d. Bill does not address the entire problem-30 Million will gain coverage in 2019 when fully implemented but 20 million will remain uninsured.
 - i. *How to address the medical requirements of those who live off the grid-U.S. Citizens and illegal immigrants?*
 - ii. *How to address the problem of those who choose not to take precautions that would prevent overuse of health care-poor lifestyle choices?*

13. GOP Pledge to America will do a better job.

- a. All points are covered in current bill-issue is question of rescinding portions of the bill.
- b. The vast majority of Americans didn't like the pre-reform status quo and simply rescinding the bill is not an adequate option.
- c. The Congressional Budget Office said in a recent letter to a Republican senator that repealing parts of the Affordable Care Act would increase the deficit by \$455 billion over 10 years
- d. An estimated 25 million adults under age 65 were underinsured in 2007-there is a crisis and it must be addressed.

14. Health care reform provides for euthanasia, "death panels"- mandated end-of-life counseling

- a. Advance care planning is not mandatory

15. Health care reform will cover undocumented immigrants.

- a. Those "not lawfully present" may not receive subsidies to purchase insurance
- b. Cannot obtain Medicaid or CHIPS. While they do pay in to Medicare they cannot collect.
- c. They can purchase healthcare but not through the Exchanges.

16. America is completely against the law and think it should be repealed?

- a. AP poll-While 40% opposed the law and 30% favored, however, those Americans who think the law should have done more vs. those who think government should stay out of health care were 2 to 1.
 - i. Of those polled 40% said it did not go far enough
 - ii. 20% said government no business in health care (*do they collect Medicare?*)
- b. A Gallup poll conducted June 11-13 found that

View of Plan	Age 18-29	Age 30-49	Age 50-64	Age 64+
Think its good	57	49	51	36
Think its bad	40	43	44	60

- i. Primary issue was impact on Medicare.

c. Zogby Int'l Survey did a study that found that 51% of Americans oppose the law, while 44% support. The reasons given are in the table.

d.

Reason Given	Most Important Point (%)	Those who agreed (%)
Government control of my health care	25	94
Leads to socialized medicine	17	84
Forces people to buy insurance	11	85
Will increase the deficit	10	91
Poorer medical care	9	87
Will raise my taxes	8	93
Will take money away from hard working people and give to those who don't work as hard	7	85
Too many deals were cut to pass the bill	3	88
Will allow government to pay for abortions	3	61
Will help drug makers and insurance companies more than average people	2	31
Will weaken Medicare benefits	2	78
Will hurt economy by adding to business costs	1	85
Still leaves millions uninsured	<1	40