

## **Analysis of National Healthcare Plane**

F. Cottone, Keansburg NJ 07734

**Abstract-** Medical cost are rising causing heavy cost burdens on our society. Our federal government wants to reduced this cost by imposing restrictions and removing the choice of insurance products, and it feels government managed options will be more efficient.. The idea has good intentions but is a “Trojan Horse” creating massive problems, government agencies are not efficient and this healthcare program will not be any different. It will increase government deficit because many will switch from their more expensive private insurance to the national program and increase claim pay-outs. The national program creates unresponsive and political bias healthcare services, increases taxes and does not address the rising cost of healthcare due to frivolous lawsuits and illegal immigration emergency medical costs. *It will give pay-backs to “Planned Parenthood” (thanks to Sen. Barbara Mikulski) and possible offer gender/sex change operations which have not been brought up yet but will be.*

The national healthcare cause further economic problems. It will have no accountability and be less responsive toward patient’s needs. Poor quality of service will occur because citizen tax subsidized federal and state services will never go bankrupt regardless of their ineptness or poor performance, and have no public or proper governmental representative oversight. The democrats can help the economy and healthcare system by trying to control taxes with as much passion as they are with healthcare Most here in NJ have seen a 50% increase in property tax over the last 10 years, has healthcare cost increase that much? In 2008, employer health insurance premiums increased by 5.0 percent – two times the rate of inflation. Here in NJ and other states they have seen a bigger increase in their property tax. The annual premium for an employer health plan covering a family of four averaged nearly \$12,700. The annual premium for single coverage averaged over \$4,700.<sup>1</sup>

### **Healthcare Bias**

President Obama wants to change the healthcare system from “risk based” to simple prepayment of services which will remove incentives for many to live healthy lives and cause a bias by having healthy people pay the same burden of health cost as sickly people. <sup>2</sup> Imagine if car insurance was like this and aggressive drivers would not have to pay surcharges and have no incentive to drive carefully. Concerning bias, does the plan address those that live unhealthy lives such as smokers, drinkers, obesity or alternate lifestyles. It appears that the PC crowd in DC may shift the extra cost of high risk patients onto the healthy, which actually discriminates against healthy people who deserve better insurance rates but won’t receive any discounts.

There is a feared discrimination and bias in health care with men being giving less care and paying part of women’s healthcare expense because the liberal government feels it’s discriminatory for women to pay their share of health insurance (it’s all about the votes) because typically, woman have different health issues, yet the liberals contradict themselves by ignoring health issues that affect men and the lack of equity they receive. *The federal government will also*

---

<sup>1</sup><http://www.nchc.org/facts/cost.shtml>

<sup>2</sup>The New American Magazine, Aug 2009 pp 13

*provide abortion services that they said in the 1990's they wouldn't, vitro fertilization and who knows, maybe in sex/gender alterations.* This is political bias payback and will reduce funds from other needy groups like the elderly or those needing expensive treatment. This will politicize the healthcare where liberals will again use tactics to win votes over from certain demographics by giving them a healthcare system catering to all their needs yet depriving smaller demographic groups more critical care. It is interesting to note some democrats like Senator Barbara Mikulski (D) was caught by Senator Orin Hatch and on the July 15<sup>th</sup> Cybercast News Service they showed how Mikulski sneakily added abortion services to the Health Care Bill and denied that it would be abortion services. Then when asked to write language to limit abortions, she refused. So with all this corruption, healthcare may be a giant pork project at taxpayer's expense rewarding liberal ideas and death of infants and paying off "Planned Parenthood.

How do we justify the same premium costs to those who are healthy and those who are not, healthy are paying the same tax dollars into this? It's a giant charity care pushed on the people and giving no incentives to maintain good health while winning votes from the "have nots".

Another bias is that the average citizen is really left out of this healthcare debate. The town hall meetings are already being attacked by liberals (how anti-American) and have no way to leverage politicians where as lobbying groups do.

State are even vying for a piece of the action. North Carolina companies and agencies with an interest in shaping the bills that may reform the nation's health-care system have spent \$4.8 million this year in Washington lobbying a jump of nearly 40 percent over this time a year ago, according to an analysis by

[1. The News & Observer](#) and [The Charlotte Observer](#).

National pharmaceutical companies lobbying dollars for [GlaxoSmithKline](#), [Merck](#), [Novartis](#), [Biogen](#) and [Wyeth](#) have shot up 23.8 percent over this time last year, to \$15.7 million. The

### **Rising Cost Incurred by Insurers and Healthcare Providers**

The liberal establishment believes the high cost of insurance is due to private business wasteful spending like advertising, inefficiency, executive salaries. They only tell half truths and don't address all the issues and make little sense in their claims against waste and inefficiency among the private sector.

Muelenberg Hospital in Plainfield NJ was besieged with illegal aliens seeking medical assistance, yet as usually our politically biased government and its bureaucracy didn't address this problem and instead shifted the cost onto taxpayers and closed down this hospital. Before it closed, it had to shift higher cost on consumers with insurance to make up for loses caused by illegals, this was never addressed and resulted in higher insurance cost; the blame should be placed on the government's mandates not the private insurance companies. The proposed national healthcare program contains the same typical liberal bias but on a national scale, further reducing our liberties and increasing our taxes, and doesn't address the real issue due to it's political nature.

They make no mention of the extortion of lawyers and litigation fees, mandated services, shifting insurance premium cost on other demographic groups and thus have no credibility because of not telling the whole story. Lawyers who generally support democratic politicians have no desire to

put a check and balance on their large sums of money earned from lawsuits, yet they want us taxpayers to fit the bill.

The liberals fail to comprehend if a company was inefficient, they would be up against competition and have to eliminate their waste in order to survive, no such “check and balance” exist with the government run program so why on earth are they proposing it.

### **Government Regulations and Mandates**

The health care industry is heavily regulated yet none of this is addressed by the government.<sup>3</sup> For both providers and insurers, regulatory requirements make business increasingly complex. Two examples of areas where regulatory oversight impacts health care costs are HIPAA and government mandates. An April 2002 report by PriceWaterhouseCoopers estimated that mandates and government regulation add about 15 percent (\$10 billion) of the overall increase in health premiums.

*The Health Insurance Portability and Accountability Act (HIPAA) of 1996* is a federal law that adds hundreds of costly changes in procedures. Among other things, the law requires health plans and providers to institute "administrative simplification" for a variety of new data systems to insure privacy and standardize electronic transactions. The administrative simplification requirement was enacted to "reduce the costs and administrative burdens of health care by making possible the standardized, electronic transmission of many administrative and financial transactions that are currently carried out manually on paper."

It is estimated that the cost to comply with the HIPAA privacy regulation alone could range from \$3.8 billion (U.S. Department of Health and Human Services estimate) to \$43 billion (BlueCross/BlueShield Association estimate). While it appears that the initial costs to comply with HIPAA are quite extensive, proponents claim there may be cost savings in the long run. It can be assumed this savings didn't occur since now we are looking at a national overhaul of our healthcare.

A mandated benefit enacted by the state or federal government requires health insurers and managed care plans to provide coverage for a specific service, treatment or provider. Many of these services are political in nature and not in the interest of cost savings or fairness. A 1997 study conducted by Milliman and Robertson for the National Center for Policy Analysis estimates that 12 of the most common mandates can increase the cost of health insurance by as much as 30 percent. Currently Pennsylvania has more than 25 benefit and provider mandates.

Another problem with government mandating is centralizing personal medical records. This makes paper work more efficient but aids identity fraud because your blood type, and allergic reaction information are in one computer and this information can be stolen, changed, so if you are in need of blood and unconscious, you can get the wrong type of blood and die. No one seems to be concerned with this tactic from illegal immigrants.

### **False Savings Claims**

Liberals claim that government run healthcare services save money and offer identical services.

---

<sup>3</sup><http://www.phc4.org/reports/FYI/fyi15.htm>

Medicare and the government do not have comparable health care service. The elderly and the young have a different set of issues. Also, Medicare recipients have larger out of pocket cost while private sector insurance have less. Ask any elderly here and they will tell us, so why expand this model to all of us still working hard paying additional taxes? <sup>4</sup>

Yes private sectors have CEO's and other high paying positions, but they earned it and if they don't perform, they are out of a job: Who will replace an incompetent government worker or political crony? Another false claim is that Medicare cost are rising slower than private, but medicare services and private services are not equal. A women with reproductive problems wanting to conceive is not a problem present in elderly over 65 year old woman. Also, younger and older people have heart conditions, calcification of arteries so private plans still have to deal with a wide umbrella of issues and not specific age related issues; so private sectors will have increasing cost and so will the new proposed healthcare. Another false claim is that the national healthcare system will increase competition and cause private insurers to lower premiums, this is absurd because the national healthcare system will be unfairly subsidized and the federal government will impose new rules and restrictions on private insurers causing them to lose profit. It is a setup for crony politicians and controlling our healthcare rights while destroying private sector insurance industry.

### **Medicare vs Private Insurance**

It is said that private health care cost is rising faster than medicare and that medicare cost for comparable services is lower but it doesn't tell us that medicare patients are paying more out of pocket cost and comparable is not equal. Again the out of pocket cost for the consumer is higher with medicare than with private insurances for equal services. So Medicare is getting not only government subsidies, but extracting more money from the elderly thereby making it's accounting look more efficient.

The private sector gives overall better service to medicare treatment. The Institute for America's Future, an advocate for national healthcare compared the cost of medicare and private insurance and their conclusion was that medicare did a better job reducing cost, but again we are not comparing the same service and medicare cost have gone down due to higher out of pocket cost for consumers. To prove this point many medicare patients supplement this insurance with private-sector **Medigap** or other private supplemental insurance to help with the high cost of Medicare co-payments and non-covered services. As of 2005, only 11 percent of Medicare beneficiaries relied exclusively on Medicare for their health coverage. This additional insurance typically run \$100 a month for a senior looking to patch up the short comings of Medicare. Administrative cost for medicare and private insurance cannot be compared since medicare doctor visits are usually for a substantial medicare procedure. So the doctor visit and process for a pacemaker cannot be compared to a doctor visit and smaller but higher quantity of processes for coughs, flue, chronic less severe illnesses. Yes private insurance does address acute more severe illnesses but their population of patients are generally younger and healthier the older medicare patients with more catastrophic injuries.

### **Accountability of Federal funds**

President Obama claims government run programs save money and are more cost effective. This

---

<sup>4</sup><http://www.heritage.org/Research/HealthCare/bg2301.cfm>

we know to be false, here in NJ the workforce is comprised of many government workers and we can't afford to support our government. It is unchecked, giving of "Christmas Tree Benefits" among the legislature and full of corruption, waste, fraud and crony politics. Once implemented, the national healthcare program will be a drain on our funds just as medicare and medicaid are doing. There will be no "check and balance" on the use of tax dollars and the needed increase in taxes that will fund this program. How do we have a check and balance on the special interest groups regarding race/gender that will cry for added medical services. Will there be a revolving ombudsman or board of citizens that can oversee each state's operation of this healthcare and make sure no political favors or other forms of corruption occur? Until you build a corrupt free efficient system accountable to the people, you cannot institute such a program. Will illegal citizens get coverage at our taxpayer expense? If you don't think the funds and operation of this new healthcare system will be unaccounted for, then look at your local tax revenue and see how those are hidden from the public.

### **Hidden Agenda The Government Control Thing**

The proposed national health care is about government coming into homes and usurping parental rights over child care development. It's outlined in passages like Section 440 and Section 1904 of the House bill (page 838) under the heading: 'Home visitation programs for families with young children and families expecting children,' which would provide (via grants to states) for home visitation programs to educate parents on child behavior and parenting skills. ... The bill says that the government agents, the 'well-trained and competent staff,' will 'provide parents with knowledge of age-appropriate child development in cognitive language, social, emotional and motor domains ... modeling, consulting, and coaching on parenting practices, skills to interact with their child to enhance age-appropriate development.'" Could this mean social re-engineering, forced vaccines etc.? The federal government controls our marriages, children's education, our flood plains, diminishes many of our constitutional rights like speech (hate crimes), religious, do you think it wise to give them control of our health? Look at what happened to Fannie Mae and Freddy Mac, government intervention, bad regulations and removal of good regulations (Thanks Dodd and Frank) now we want to same dumb crooked mentality affecting our health? Based on recent experiences with Fannie Mae and Freddie Mac, it is certain that Congress would force taxpayers to underwrite the cost overruns of such a health insurance enterprise no matter how unsuccessful its performance.<sup>5</sup>

Under Section 201 of Title II of the America's Affordable Health Choices Act of 2009

a political commissioner appointed by the President and approved by the Senate would create federal defined healthcare initiatives creating a political bias and making decisions that will affect our life and health. Among the commissioner's chief duties would be to establish a process for the enrollment of eligible individuals and employers, to negotiate contracts with congressionally defined "qualified health plans," and to enforce statutory requirements relating to federally defined health benefits.

Many of us still remember the JUA which was the NJ answer to high auto insurance, it didn't work and it was dismembered. It was a program using government intervention (Joint

---

<sup>5</sup><http://www.heritage.org/Research/HealthCare/bg2304.cfm>

Underwriting Association). The JUA brought nothing but problems, they had to be sued and were proven to be insolvent. (LorraLORRAINE AINSWORTH, v.STATE FARM MUTUAL INSURANCE COMPANY 1995). <sup>6</sup>Government has tried every tactic to control our money and lives and it never seems to work. Now they want to do it on a grander scale. This experiment with socialism, it's steam roller approach and constant surging is unfair to the will of the people. If we don't want it, then the political forces should stop forcing it down our throats. The JUA and other government run insurance programs are full of waste, fraud and inefficiency, but they offer pay backs to the political machine by raiding income, favoritism with jobs etc. I believe most democratic controlled states were involved in JUA type programs and now we see them doing it nationally. Also, I don't think any type of government run program is safe from corruption and waste. COOPS still have government control and any "Trojan Horse" tactics by the liberals must be monitored and met with scrutiny.

If you think that government control is a farce, then what about property tax, you never own property, it can be taken away from you if you don't pay your tax, or should I say rent, to the government. Same thing happened with water, water is a free resource, not anymore. Water companies are now taken over by states (which is government) and not only do you pay for water, but you have to pay sewage charges they don't go to sewage cost and instead may go to fund other things by our town or county like pensions.

### **A Better Solution**

A national healthcare system that removes outdated federal restrictions and promotes competition would be more beneficial. If the President wanted to create a national market for health insurance, he could simply repeal outdated provisions of federal law that erect barriers to the purchase of health coverage across state lines. The President is not interested in creating a healthy private competitive market for health insurance. Instead, like with our financial and the auto industry, they want to control others and create a tax subsidized bureaucracy to deal with making healthcare affordable, once this government intrusion is in place, it will be difficult to regain our rights and get back to a fast, efficient unbiased healthcare system free from political corruption and bias. When the government removes itself from excessive control of health care, then we will see a more affordable, responsive system. When government addresses the greed from lawyers, and their huge bounties received from frivolous lawsuits, when government helps, aids instead of restricts and hurts, then we will see a better healthcare system more aligned with our core political beliefs.

---

<sup>6</sup>[http://www.romingerlegal.com/new\\_jersey/appellate/a1031-93.opn.html](http://www.romingerlegal.com/new_jersey/appellate/a1031-93.opn.html)