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Costs, costs, costs

Kate Steadman, KHN

July 20th, 2009

The New York Times' [Caucus](#) blog leads with the headline, "The Early Word: Balking at Health Care Costs." Indeed, that's the watch word of the last few days after Congressional Budget Office Director Douglas Elmendorf shook things up when he testified that the Democrats' proposed legislation would add to, not reduce, the federal deficit.

[The Atlantic's](#) Marc Ambinder reports on the logic behind the Obama Administration's focus on costs, but points out:

The basic problem with the cost argument is that it elides over an important point, one that the White House wants to make publicly but cannot: in order to reduce costs in the short term, reform will cost something extra in the near-term. A deeper point they cannot make: it may take MORE money to build a better system. Only when that system produces better outcomes — this would be years off — can true cost-savings be realized.

And on the Robert Wood Johnson Foundation's [blog](#), the Urban Institute health policy director John Holahan says, "So is \$1.6 trillion a lot of money? In most contexts, it truly is. But in the context of the health reform debate the number needs to be better understood." Then he elaborates.

The flip side of all that spending? [Cato's](#) Michael Cannon thinks "the docs are supporting the Democrats' health care plans because the Democrats are buying them off."

Finally, [Michelle Malkin](#) notes that administrative costs to the federal government are not included in CBO's estimates and says, "The administrative costs and spillover spending effects will be astronomical. Look at existing federal programs."

Also from weekend, you might want to check out a new [interactive health reform timeline](#) from the New York Times (screen grab below.)

July 19, 2009

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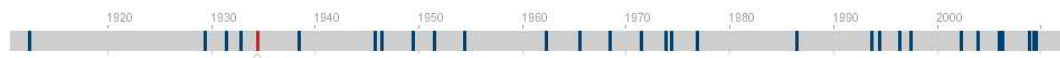
A History of Health Care Reform

Nearly 100 years of legislative milestones and defeats



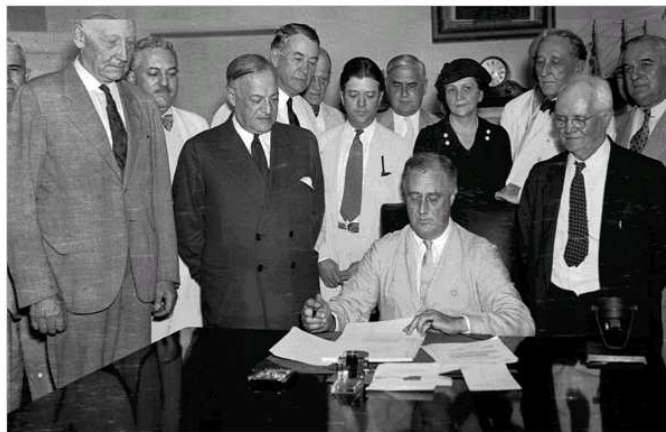
For almost a century, presidents and members of Congress have tried and failed to provide universal health benefits to Americans. The cost of health care has spiraled; in 2008, one in six dollars was spent on health care, and an estimated 46 million people were without coverage.

◀ November 1932 1938 ▶



1934 New Deal Omits Health Insurance

In the midst of the Great Depression, President Franklin D. Roosevelt's working groups on Social Security and unemployment insurance also discuss a national health insurance program, but legislation is never seriously considered. The American Medical Association continues its strong opposition to such a plan, saying it would increase bureaucracy, limit physician freedom and interfere with the doctor-patient relationship.



President Franklin D. Roosevelt signs Social Security legislation, with members of his administration and Congress behind him, on Aug. 14, 1935.

- June 13, 1934: Doctors Condemn Health Insurance (pdf)
- Aug. 16, 1936: A Wide-Ranging Study of Health Insurance (pdf)
- Oct. 27, 1938: New Deal Pushes Medical Care Plan (pdf)

If you're looking for an even more detailed timeline, you can find it on the [Kaiser Family Foundation site](#). (note: KHN is a program of KFF).

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Timeline:

History of Health Reform Efforts in the U.S.



PRINTER-FRIENDLY PAGE

Early 1900s	1930 - 1934	1935 - 1939
<p>his Progressive party endorse social insurance as part of their platform, including health insurance.</p> <p>Image Credit: Social Security Administration History Archives</p> <p>National Convention of Insurance Commissioners develops first model of state law for regulating health insurance.</p>	<p>did not risk the passage of the Social Security Act to advance national health reform.</p> <p>For an overview on National Health Insurance and the New Deal, please see p. 2 of National Health Insurance: A Brief History Of Reform Efforts In The U.S.</p> <p>1929-39 The Great Depression spans a decade, with 1933-34 being the worst years.</p>	<p>National Health Insurance and the New Deal</p> <p>President Roosevelt continued to support national health reform throughout his terms. His second push for national health insurance came after the Social Security Act passed. However, the momentum from FDR's Technical Committee on Medical Care and a National Health Conference were not enough to overcome a Congress that was no longer supportive of further government expansions.</p>

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