

“Be wary of strong drink. It can make you shoot at tax collectors - and miss.” *Robert A. Heinlein, Time Enough For Love*

## June 15, 2009

### Obamacare roundup

by *Stephen Gordon*

As I'm in the middle of writing an article regarding President Obama's health care scheme, I thought I'd check around and see what other folks are saying about it. I started with my wife, as she's not only smarter than me, but also a practicing physician. Obama [told members](#) of the AMA the following:

That is why I will listen to you and work with you to pursue reform that works for you. And together, if we take all these steps, we can bring spending down, bring quality up, and save hundreds of billions of dollars on health care costs while making our health care system work better for patients and doctors alike.

My wife's response: “If Obama is truly serious about listening to doctors, this one says that he needs to leave my patients and me alone.”

[Megan McArdle](#): “And what about the government's infamous ability to wrestle new savings out of ‘providers’? They are large, but they are not unlimited. Medicaid patients find it very difficult to get doctors to take them, since the doctors tend to lose money on their care. (I've heard persuasive arguments that ‘Medicaid mills’ adept at fraud are integral to providing care to the poor—without the fraud, Medicaid doesn't reimbursements won't cover the bill.) Medicare patients are starting to have the same problem.”

[Jason Pye](#): “President Obama [says that the country will go broke](#) unless he can [borrow and spend up to \\$2 trillion](#) to ‘reform’ our health care system, comparing the future of the country to Government General Motors. You're reading that right, our president claims that unless we spend more money and effectively run private insurers out of business over the course of time, the country will go bankrupt. Doesn't make much sense, does it?”

[Ronald Bailey](#): After parsing the numbers, it looks as though most the ‘savings’ that President Obama wants to use to finance his health care reforms are achieved by imposing price controls.

[David McKalip](#): “In these circumstances, patients will be subject to a ‘mill’ mentality and treated like numbers that must be entered in a computer to satisfy a functionary sitting in a cubicle somewhere in Washington D.C. A better solution is to empower patients financially to pay doctors for their time. I find that when I look my patient in the eyes and spend 45 minutes with them, they are getting my best care.”

[Stephen Green](#): “The President is promising to save money by eliminating a lot of those seemingly pointless end-of-life treatments. But that's also going to mean an end to end-of-life profits. And, well, you can bet our life expectancy will get frozen in place as a result.”

[Skip Oliva](#): “You can see why government-controlled health care is so appealing to the Obama regime. It's hard to resist giving yourself even more power to decide who lives and who dies. There's nothing more fun than playing God, right?”

[NTU blog](#): “The only effects of nationalizing health care, it seems, would be to raise the age of a woman's

first mammogram, reduce the number of routine screenings she receives throughout her life, and delay the detection of breast cancer beyond the point of easy treatment. How do you justify jeopardizing the health of over 50 percent of the population to expand coverage to the 9 million or so that, according to *The Spectator*, are those truly uninsured for the long haul? Apparently women's health doesn't fall under the category of 'universal coverage'."

[Ron Paul](#): "I started medicine when there was no Medicare and no Medicaid. And let me tell you, I don't remember one time where I saw people out in the streets begging for medical care. Now we do. With managed care and now with socialized medicine coming, believe me, quality will go down. Costs will go up. There will be shortages, there will be lines — and nobody is going to be happy."

[Grant Babcock](#): "Underlying the Obama plan is the same hubris that underlies all schemes to take decisions out of the hands of everyday people and instead entrust them to central planners: the belief that the government knows what you need better than you do."

[Robert Stacy McCain](#): "The MSM is asleep at the switch as Barack Obama fields 'spontaneous' health-care questions from . . . a [former Democratic Party candidate for Congress](#)..."

[Donny Ferguson](#): "In a move that would have made Ken Lay proud, Democrat congressional leaders are expected to deal with the huge price tag of Barack Obama's government takeover of health care in a unique way — ditching the estimates prepared by the non-partisan Congressional Budget Office and replacing them with the numbers prepared by the politically-appointed White House Office of Management and Budget."

[Preston Mui](#): "Reality is setting in with President Obama and the Democrats: No matter how well-intended a policy is, it cannot evade the economic facts of reality."

[Michael Tanner](#): "But the problems with Obamacare go well beyond the Public Option, which the AMA opposes. The mandates on businesses and individuals, taxpayer subsidies, insurance regulation, and government interference in private medical decisions pose serious threats to American businesses, taxpayers, and most importantly patients. That's bad medicine, no matter what you call it."

[Chris Moody](#): "Okay doctors, architects, and farmers. Your work is now my right. Feed me, house me and care for me. I don't have to pay for it. I was born with the right to your labor."

[Steve Chapman](#): "There are only three ways to pay for this expansion of health insurance coverage: increased taxes, reduced benefits, or shiny gold ingots falling out of the sky. Voters emphatically prefer the latter option, so that is the one most likely to be embraced by Congress and the administration."

[Bruce McQuain](#): "This is not your grandfather's America. Pay czars who arbitrarily set arbitrary pay limits based on what they 'think' (according to presidential spokesperson Robert Gibbs) is 'fair', a government appointed CEO for an auto company who admits he knows nothing about cars and the government hijacking of health care. If you're not concerned, you're not paying attention."

[Glenn Reynolds](#): "ANOTHER NATIONAL HEALTH PROGRAM THAT DOESN'T WORK: [PROMISES, PROMISES: Indian health care needs unmet](#)."

CROW AGENCY, Mont. – Ta'Shon Rain Little Light, a happy little girl who loved to dance and dress up in traditional American Indian clothes, had stopped eating and walking. She complained constantly to her mother that her stomach hurt.

When Stephanie Little Light took her daughter to the Indian Health Service clinic in this wind-swept and remote corner of Montana, they told her the 5-year-old was depressed.

Ta'Shon's pain rapidly worsened and she visited the clinic about 10 more times over several months before her lung collapsed and she was airlifted to a children's hospital in Denver. There she was diagnosed with terminal cancer, confirming the suspicions of family members. . . . On some reservations, the oft-quoted refrain is "don't get sick after June," when the federal dollars run out.

"This is what Obama wants for your family — or, at least, it's what he'll deliver in the end. Fix this — [and Medicare](#) — first!"

My prediction: Obama and the AMA will make make some cooing noises as they banter a bit about capping malpractice awards. Then the AMA will give Obama [a standing ovation](#) as he creates his national insurance company. AMA members won't understand that they've been taken to the cleaners until they realize that their nurses are making more than they are.

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1. I never thought I'd say this, but the spectre of Obamacare is making me \*really\* nostalgic for the halcyon days of G. W. Bush's administration.

*Comment by [Quincy](#) — June 15, 2009 @ 11:34 pm*

2. Transferable health care would go much farther than public health care. It is basic economics that competition always drives down costs more effectively than government. Transferable health care would give insurance companies incentive to invest in the long term health of their customer and to provide competitive value and prices. Insurance companies would earn more money if less of their customers become seriously ill, and we would have true "health care", rather than "disease insurance." For example, insurance companies could create groups of people at varying fitness levels: the more fit someone is, the less insurance would cost, because the risk of heart disease and diabetes would be less, statistically. The fitness levels could be tested by doctors. This would give customers added incentive to become more fit to save money on insurance. Another health factor that insurance companies could become involved in is nutrition.

*Comment by [Analyzer](#) — June 16, 2009 @ 1:05 am*