

Rose: Health insurance works

By Glenn Rose
September 18, 2014

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In Dr. Jeffrey Singer's "Why Virginians will still pay more for health care" (Sept. 4) was my newspaper fooled?

I was immediately suspicious about an Arizona doctor writing a piece about health care costs in Virginia.

That Singer is an "adjunct scholar" at the Cato Institute also raised a red flag. Charles Koch founded The Cato Institute. Adjunct scholars are apparatchiks for his agenda.

Singer has written numerous articles critical of the Affordable Care Act. Three interest me: "The Health Insurance Trap" (Forbes May 9), "We Still Pay More for Care" (Fort Worth Star-Telegram May 28), and "Bypassing [sic] his third-party payer, my patient avoided a high hospital 'list price'." (Wall Street Journal Aug. 21, 2013).

Critical readers recognize there is nothing in Singer's writing that substantiates his thinking, just the same tired, clichéd rhetoric of those opposed to the ACA.

The first article is typically rife with Singer's circular reasoning and shilling for Cato's line on health care.

The second rewords the first. What is of particular interest is what I expected to find. Except for lacking five paragraphs and a few lines, it is word for word what The Roanoke Times printed on Sept. 4. In the first paragraph, instead of "Virginian" he used "Texan" and instead of "13 percent" he substituted "14 percent." (Our incomes must be higher than Texans'.) The word "damn" was also omitted. (Apparently Singer thinks Texans are less amenable to cursing than we Virginians.)

In his articles in both papers, Singer says, "In health care . . . you spend less money when you pay [providers] directly."

Wrong.

In the next paragraph he acknowledges, “. . . insurers attempt to lock in reasonable prices on your behalf” But two paragraphs later, “[Insurers] have less of a financial incentive to get the best deal.”

Wrong again. Insurers have the greatest financial incentive to get the best deal. The less the insured pays for health care, the longer it takes to meet the deductible. Only after the deductible is met does the insurer begin paying a portion. Not until the insured reaches another threshold does the insurer pay 100 percent.

Singer writes “[Insurance] leads to poorer quality, longer waits (think...Canada), and rationing.”

Another oft-repeated falsehood.

Wikipedia reports that “a 2009 poll by Nanos Research found 86.2 percent of Canadians surveyed supported or strongly supported ‘public solutions to make our public health care stronger.’ A Strategic Counsel survey found 91 percent of Canadians prefer their health-care system instead of a U.S.-style system. Plus 70 percent of Canadians rated their system as working either ‘well’ or ‘very well.’ ”

Singer and his ilk count on their audiences being uninformed or unwilling to do any fact-checking — that repeating a frightening or outrageous lie over and over will dupe them.

The most damning evidence of his mendacity is at his own hand in the third article. In the Roanoke Times, Singer writes, “One of my patients [refused health insurance] and saved \$17,000 on a single procedure.”

In his Wall Street Journal article he goes into more detail. Singer relates that his patient did not have health insurance, but an indemnity plan. Indemnity plans pay a set amount for health events. The first diagnosis of cancer, the first heart attack, a hospital stay, etc., all call for the indemnity plan to pay the purchaser a set dollar amount. It can be \$1,000 or higher, depending on the premium. It can be assigned to a provider or spent on anything the purchaser wants: travel to the hospital, lodging for a companion, even a world cruise.

Unlike health care insurance, it never pays for overwhelming expenses.

Singer’s patient went to the hospital to schedule his procedure. He had two indemnity plans that would pay him \$3,000. Since he did not have health insurance, he did not have the benefit of a negotiated price. The “list” price left him with \$20,000 to pay. He canceled the procedure.

When Singer learned of this he negotiated the hospital’s and his own charges down to \$3,000. That’s how his patient “saved” \$17,000.

Many providers are willing to negotiate their charges down, even to the insurers’ rates. Be assured, they’re still making money at that negotiated rate.

Singer claimed “by not using his health care insurance his patient saved \$17,000.” What? His patient didn’t have health care insurance to use. We know. Singer tells us so earlier in his article.

This guy is one careless obfuscator.

And, alas, my paper, The Roanoke Times, how could you print such transparently deceitful claptrap?