The Bristol Press (bristolpress.com), Serving Bristol, CT

Opinion

Checking vital signs of health care debate

Sunday, January 23, 2011 11:22 PM EST

By Scott Whipple Staff Writer

The announcement this week by 5th District Congressman Chris Murphy about his run for the U.S. Senate eclipsed his decision and explanation as to why he voted against repeal of the Affordable Care Act, also known as "Obama Care."

On Jan. 19, the House of Representatives passed H.R. 2, a measure to repeal the health care law. The vote was 245-189. Voting was mainly along party lines, though Republican voters were joined by three Democratic congressmen, Mike Toss of Arkansas, Dan Boren of Oklahoma and Mike McIntyre of North Carolina

The vote was viewed by some politicos as a symbolic gesture from the GOP. Sen. Majority Leader Harry Reid of Nevada, is determined not to bring up the measure for consideration on the Senate floor. Republicans argue that Reid fears risking defeat, of having the law repealed in the Senate as well.

President Barack Obama said he will to veto any repeal bill if it lands on his desk..

Voting against repeal of the Affordable Care Act, Murphy said, "The Republicans in charge of Congress are playing a dangerous game with the health of millions of Americans. Connecticut families and businesses desperately need health insurance costs to go down — far too many are forced to choose between their health and their home, or their insurance or their family business."

Murphy acknowledged the health care act isn't perfect, "but it will go a long way for those who need a change in the way health insurers do business."

He said Congress should be working to perfect this law, not repeal it.

In Connecticut, he said repealing the health care act will have significant consequences. It would:

- n allow insurance companies to deny coverage to as many as 312,000 individuals, including as many as 39,000 children, with pre-existing conditions. These individuals include those who are breast cancer survivors and prostate cancer survivors; those living with heart disease; and those with such conditions as asthma and high blood pressure;
- n take away the ability of 1,700 young adults who have chosen to or are expected to stay on their parents' insurance plan until their 26th birthday;
- n take away the 50 percent discount on brand-name Rx drugs from 9,300 seniors who hit the Medicare Part D "donut hole;" and denying free preventive care services under Medicare to 109,000 seniors;
- n eliminate health care tax credits available for up to 16,900 small businesses;
- n eliminate the ban on insurers dropping people from coverage when they get sick, which protects 33,000 individuals who purchase individual health insurance;
- n get rid of the ban on insurers placing lifetime limits on coverage, which is currently benefiting 480,000 individuals who have health insurance through their employer or in the private insurance market; and
- n increase the costs of coverage for up to 9,700 early retirees.
- "Behind these numbers are real people," Murphy says, "our families, our neighbors, our local business owners. Health

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insurance reform is based on the simple premise that consumers deserve better access to health care at a lower cost. Repealing this law would set us back on a path that we simply can't afford."

The U.S. Department of Health and Human Services Secretary agrees.

Kathleen Sebelius says 36,941 Medicare beneficiaries in Connecticut, and 3 million people nationwide, have received prescription drug cost relief through the Affordable Care Act. To date, 3 million eligible beneficiaries who fell into the drug coverage gap known as the "donut hole" during 2010 have been mailed a one-time, tax-free \$250 rebate check.

"For too long, many seniors and people with disabilities have been forced to make impossible choices between paying for needed prescription medication and necessities like food and rent," said Sebelius. "The Affordable Care Act offers long overdue relief by lowering prescription drug costs each year until the donut hole is closed."

Sebelius said these checks are only the first step in how the Affordable Care Act will reduce prescription drug costs for beneficiaries in the donut hole each year until it is closed in 2020. Starting this year, eligible beneficiaries in the coverage gap will receive a 50 percent discount on covered brand name medications while in the donut hole. In addition, in 2011 Medicare will begin paying 7 percent of the price for generic drugs during the coverage gap.

Sebelius said most people with Medicare can now receive critical preventive services, including certain cancer screenings such as mammograms and colonoscopies, for free.

Also this year, the Affordable Care Act will provide qualifying doctors and other health care professionals providing primary care to people on Medicare a 10-percent bonus for primary care services. This will help ensure that those primary care providers can continue to be there for Medicare patients.

According to Sebelius, the Affordable Care Act makes Medicare stronger and more secure for all beneficiaries. These provisions under the new law increase benefits to beneficiaries and help to extend the life of the Medicare Trust Fund by 12 years.

An analysis issued by the Department of Health and Human Services estimates that under the Affordable Care Act, average savings for those enrolled in traditional Medicare will amount to more than \$3,500 over the next 10 years. Savings will be even higher -- as much as \$12,300 over the next 10 years -- for seniors and people with disabilities who have high prescription drug costs. Total savings per beneficiary enrolled in traditional Medicare are estimated to be \$86 in 2011, rising to \$649 in 2020. For a beneficiary in the donut hole, estimated total savings increase from \$553 in 2011 to \$2,217 in 2020.

Sebelius added that the Affordable Care Act establishes a new Innovation Center that will research, develop, test, and expand innovative payment and delivery arrangements to improve the quality and reduce the cost of care provided to patient with Medicare, Medicaid or Children's Health Insurance Program coverage. Innovations that are found to work can be rapidly expanded and applied more broadly — helping to transform the health care system into one that provides better care at lower cost.

However, Conservative columnist Charles Krauthammer warns that choice will be a rare commodity under ObamaCare. To Krauthammer, the President's promise — if you like your current health insurance, you can keep it -- rings hollow. Under ObamaCare employers will have incentives to dump their employees onto public rolls.

As many as 27 states are determined to deconstruct ObamaCare. Encouraged by last November's election results, Republicans in these states are challenging the assumption that the Obama administration and Congress can use the force of law to compel citizens to purchase health insurance against their will. These state attorney generals--Connecticut excluded-- argue that nowhere in the Constitution is Congress given the power to force this kind of purchase. In fact, Federal District Court Judge Henry Hudson said the dispute is not really about regulating the business of insurance or crafting a scheme of universal health insurance coverage, "it's about an individual's right to choose to participate."

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U.S. Rep. Michele Bachmann of Minnesota, a Republican, and founder of the Tea Party Caucus in the House, calls last Wednesday's vote "a down payment on the full-scale repeal of ObamaCare." She blames medical malpractice for driving up health insurance costs and says Congress will introduce legislation to reform these laws.

Sally Pipes, president and CEO of the Pacific Research Institute and author of "The Truth About ObamaCare," cites several provisions of ObamaCare she calls "damaging." Among them:

- n stopping construction of physician-owned hospitals nationwide, limiting health-care competition and driving up costs,
- n according to a Physician's Foundation survey 40 percent of doctors plan to drop out of patient care in the next three
 years, Sixty percent said ObamaCare will compel them to close or significantly restrict their practices to certain categories
 of patients, most likely those on Medicare or Medicaid.
- n a new rule requiring insurers to spend at least 80 percent of premium dollars on medical claims will result in driving plans out of existence. With fewer competitors insurers that remain are likely to raise their rates.

Look for a Republican-dominated Congress to come up with legislation that will allow workers to keep their health insurance even if they lose their job.

Children won't be kicked off their parents' plan. Michael Tanner, a Cato Institute senior fellow and co-author of "Healthy Competition: What's Holding Back Health Care and How to Free It," warns, however, that if you keep your child on your plan until age 26 it will cost you \$3,380 a year in premiums.

In short, get ready for a protracted battle in Congress over Health Care. Sebelius has introduced the possibility of health insurance exchanges--grants to help states implement the Affordable Care Act. This way, consumers will be able to "compare plans based on price and quality and will offer all Americans the same insurance choices members of Congress will have."

Opponents of the health care act will say that:

- n forcing Americans to buy health insurance is unconstitutional,
- n the \$1 trillion price tag is unrealistic; the cost will probably be twice as much,
- n everyone's taxes will rise to pay for any all-encompassing health plan, and
- n despite claims to the contrary, people are already facing fewer options when it comes to a choice of doctor or hospital.

When any law requires insurance companies to cover more of the population or eliminate lifetime caps it usually follows that insurance will be rationed and most of us will end up paying higher premiums.

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