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# Adding to the Lies Obamacare Supporters Have Told Us

*Here are eight of the most brazen from Prof. Gruber and his bosses.*

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Jonathan Gruber's attempt at contrition before the House Oversight & Government Reform Committee might have been convincing had he not lied again. Gruber began his testimony trying to explain away his controversial remarks that have come to light in recent months, but he used deception to do so.

Gruber's actions are part and parcel of how the Obama administration has handled Obamacare. Deceit is routinely employed to reassure the public that the law is a success.

Of course, politics is not the most honest of professions, and there will always be some "spinning" and shading of the truth. But that's not the case with Obamacare. Rather, there are numerous instances when the president, another member of the administration, or someone closely linked with the administration knew that the truth was "A" but told the public it was "B." In other words, they lied.

Here are eight of the most brazen lies, beginning with Gruber:

**1. Gruber: Of course people on federal exchanges are supposed to receive premium subsidies**.

American voters aren't the only people Jonathan Gruber thinks are stupid. The plaintiffs in *King vs. Burwell* contend that, as written, Obamacare allows premium subsidies to flow only to state-based exchanges. Gruber claimed that interpretation was "screwy" and "stupid." He would also file an amicus brief in the case stating that such an interpretation was "implausible and irreconcilable with [Obamacare's] structure and purpose."

Then video surfaced of a January 2012 presentation Gruber gave saying, "If you're a state and you don't set up your exchange, then your citizens don't get their tax credits." Gruber initially said it was a "speak-o," but then audio surfaced of another presentation he gave in January 2012 during which he said much the same thing.

So which was the lie, Professor Gruber? That subsidies can go to federal exchanges, that they can't go to federal exchanges, or that you made a "speak-o"? Maybe it is two out of three.

**2. Gruber: What I really meant was I was worried about the federal government not setting up an exchange.**

Here is how Gruber in the December 9 committee hearing tried to explain away his comments that only state exchanges would receive premium subsidies:

I also would like to clarify some misperceptions about my January 2012 remarks concerning the availability of tax credits in states that did not set up their own health insurance exchanges. The portion of these remarks that has received so much attention lately omits a critical component of the context in which I was speaking. The point *I believe I was making was about the possibility that the federal government, for whatever reason, might not create a federal exchange*. If that were to occur, and only in that context, then the only way that states could guarantee that their citizens would receive tax credits would be to set up their own exchanges." [Italics added.]

Was there ever any chance that the federal government wasn't going to set up an exchange? Of course not. So why would Gruber worry about that? He didn't. Here's what he said on January 18, 2012 about the federal government:

These exchanges… will be these new shopping places and they will be the place that people go to get their subsidies for health insurance. In the law it says that if states don't provide them the federal backstop will. The federal government has been kind of slow in putting out its backstop because, I think, partly they want to squeeze the states to do it.

Gruber clearly acknowledges that the federal government will set up an exchange if the states do not. He then goes on to say, "What's important to remember politically about this is if you are a state and you don't set up an exchange, that means your citizens don't get their tax credits." Note that he did not qualify that by saying, "That only happens, though, if the federal government fails to set up exchanges, in which case they will get tax credits."

You'd think an MIT professor could come up with an explanation for his gaffe that at least passes the laugh test.

**3. Gruber: Obamacare's mandate was transparent.**

In his testimony Gruber stated, "Let me be very clear: I do not think that the Affordable Care Act was passed in a non-transparent fashion. The issues I raised in my comments, such as redistribution of risk through insurance market reform and the structure of the Cadillac tax, were roundly debated throughout 2009 and early 2010 before the law was passed."

This is a lie by omission. What Gruber was also referring to in his remarks on transparency was that the CBO didn't score the insurance people would have to buy as a tax, thus making the budget numbers look better. During the debate over HillaryCare, which also had a mandate, the CBO did score the mandate this way. As the Cato Institute's Michael Cannon wrote, "The CBO determined that because the mandate would essentially turn all private health insurance into a compulsory government program, the agency counted all private-insurance premiums paid to comply with the mandate as federal revenues, and counted all private-sector insurance claims as federal spending." That made the cost of HillaryCare huge and was crucial in killing it.

That's what Gruber was referring to when he said in October 2013 that "this bill was written in a tortured way to make sure CBO did not score the mandate as taxes. If CBO scored the mandate as taxes, the bill dies."

Do you even recall proponents of Obamacare telling the American public that they were tinkering with CBO scoring? Of course not. That part was anything but transparent, and Gruber's testimony on the matter only serves to obfuscate.

**4. President Obama: If you like your health plan, you can keep your health plan.**

If there is any phrase that will come to define the Obama Presidency, this may be it. And, to be fair, it was plausible—until July 11, 2010. That's when the proposed grandfather regulations for Obamacare leaked. An analysis contained in the regulations examined how many employers made changes to their plans in 2008-09 that would violate the regulations. Based on that, the analysis stated that the "mid-range estimate is that 66 percent of small employer plans and 45 percent of large employer plans will relinquish their grandfather status by the end of 2013." After that it became impossible to claim in good faith that if you like your plan keep your plan if you liked it. Yet President Obama repeated some variation of that claim at least six times after July 2010 and before the fall of 2013.

**5. President Obama: If you like your doctor, you can keep your doctor.**

It's axiomatic that if millions of people are going to lose their health care plans, some of them are also going to lose their doctors. After the grandfather regulations leaked, President Obama could no longer repeat that phrase and tell the truth at the same time. Yet to this day the White House website still contains documents claiming that, "If you like your doctor, you can keep your doctor."

**6. President Obama: The Individual Mandate is not a tax.**

During the debate over Obamacare, the administration insisted that the money an individual would have to pay to the government for not buying insurance was a penalty or a fine, not a tax. In September 2009 ABC's George Stephanopoulos pressed President Obama on whether the individual mandate qualified as a tax increase. Obama replied, "I absolutely reject that notion."

Once Obamacare was safely passed, the administration's tune changed. During a July 2012 speech, President Obama said, "By the way, if you've got health insurance, you're not getting hit by a tax." While the individual mandate was being litigated in 2011, the Obama Justice Department claimed that the mandate was "also independently authorized by Congress's power to 'lay and collect Taxes.'" "The 'practical operation' of the minimum coverage provision is as a tax," the Justice Department wrote in an appellant brief.

So, either it wasn't a tax when it was politically convenient, or it was one when it was legally convenient. Yet the administration can't have it both ways, so the only question is, which one is the lie?

**7. Kathleen Sebelius: HHS can't release "unreliable" data**.

The October and November 2013 enrollment reports for Obamacare exchanges were released 11 days after the end of the reporting period. According to then-HHS Secretary Kathleen Sebelius, the delay was necessary to ensure the accuracy of the data.

During committee hearings in late September and early October 2013, Sebelius told Rep. Lee Terry (R-NE) and Senator Orrin Hatch (R-UT) that she was unable to give them enrollment numbers at that time. In the case of Hatch she said, "We will have enrollment numbers out next week. We are still working on, particularly, the 834s, which is the enrollment piece, with insurers, and we want to make sure we give you valid accurate numbers." The "834 piece" (known formally as an "834 EDI Transmission") is an electronic file that HHS must send to insurance companies to let them know that a person has enrolled in one of their health plans through the exchange.

Subsequent actions by HHS would show the real reason Sebelius didn't want to release the numbers early: they were an embarrassment. Only 106,000 enrolled in October and 365,000 through November.

However, once the enrollment numbers looked much better, HHS had no trouble releasing them early. On December 29 HHS announced that about 1.1 million had signed up via the federal exchanges. Two days later, HHS stated 2.1 million had enrolled via both state and federal exchanges. Apparently this data was accurate enough to report even though the official enrollment report for December wasn't released for another 13 days.

HHS would make another early release on March 17, announcing that 5 million had enrolled on the exchanges. The early releases could not be attributed to fixing the "834 problem" as articles in January 2014 showed that the problem was still not resolved.

HHS had no trouble releasing data early when it provided good propaganda for the administration. The reason HHS wouldn't release October 2013 enrollments is that they were pathetic, not because they were unreliable. That means, of course, that Sebelius was lying.

**8. The "Slacker Mandate" has reduced the uninsured by 3.1 million.**

By September 2011 Obamacare's "slacker mandate"—the rule that parents could keep their "children" on their private insurance plans until age 26—had reduced the number of uninsured among 19-25-year-olds by 1 million, according to an HHS report. HHS followed that up with reports in December 2011 and June 2012 claiming that the slacker mandate had reduced the uninsured by 2.5 million and 3.1 million, respectively. The research was deceptive because it used not only increases in private coverage for young adults but also increases in public coverage such as Medicaid. The slacker mandate has no impact on whether 19-25-year-olds are eligible for programs like Medicaid**.** Adjusting the numbers only for increases in private insurance yields 780,000, 2.39 million and 2.8 million, respectively.

Not surprisingly, President Obama continues to assert that “more than 3 million young adults… have gained insurance under this law by staying on their family's plan.”

Recently we also found out that the enrollment numbers the Obama administration had been reporting weren’t on the up and up either. Although in September the administration claimed that 7.3 million people had purchased health insurance on the exchanges, it turned out that the Administration had double counted about 380,000 of those enrollees because they had signed up for stand-alone dental plans. HHS Secretary Sylvia Burwell claimed it was a “mistake.” Given the Administration’s track record, though, it doesn’t deserve the benefit of the doubt.

It is difficult to know what future mishaps await Obamacare. But when they do happen, we can be sure that Obamacare supporters will try to explain them away with lies.