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Creating A Crisis

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Health Care: The White House unveiled Tuesday its patients' bill of rights. It is grossly misnamed. Though some of its provisions might help a few sick Americans, conditions will be far worse for most.

Ninety days after he signed the Patient Protection and Affordable Care Act into law, President Obama issued a set of rules that he says can "finally" be considered "a true patients' bill of rights." Just where these "rights" can be found in the Constitution and how they can be granted without violating real rights — such as an individual's right not to be forced to pay for someone else's affairs — was not immediately explained.

Nevertheless, the "rights" have been decreed. But nothing about them will improve the country's health care condition. They will, in fact, make it were

Take, for instance, the ban on insurance companies placing lifetime limits on the dollar amounts that they pay out, and the phase-out of annual coverage limits. This pair of "rights," which take effect on Sept. 23, will cut into the medical care insurance providers' profits, without which they cannot stay in business.

Of course, the insurance companies could simply raise their rates to ensure continued profitability and stay in the business of providing the health care plans that many have come to believe are a right.

But someone has to pay.

The Cato Institute has looked at the administration's promotional material and believes that premiums for unlimited annual and lifetime coverage would have to be raised by 7% in the individual market, and perhaps even more, for some consumers.

That might sound like a modest increase, but it would be enough to put a significant strain on the budgets of many Americans who might have to choose between health care insurance and some other necessary expense.

Political thinkers in Washington, though, have that covered.

They just won't let insurers raise their rates without government permission. Speaking ominously, Obama told the industry Tuesday "we'll be watching closely" and indicated the government would not tolerate "unjustified rate increases."

An army of bureaucrats is toiling presently to determine what constitutes a premium increase that is "unreasonable" and runs afoul of the law. No one else's input or opinion matters but theirs.

Anyone who thinks that limitless benefit payments plus caps on premiums equal a market with a shrinking number of private insurance providers is right.

Following closely behind that thought is the realization that the Democrats' health care overhaul really is a means to take medicine out of the private sector and put it in the hands of government.

And if anyone thinks that's an improvement, well, just look at the horrors government-run health care has created in Great Britain and Canada: rationing of care, lengthy and sometimes deadly waiting lists, inferior treatment, appalling conditions at facilities and a grim future.

There are other consumer "protections" in the White House's patients' bill of rights that will push costs upward to the point that the government's price-fixing policies will be imposed.

Cato health care analyst Michael Cannon, showing more thought than the reckless group that drafted and voted for the health care reform bill, has written that insurers will respond to those price controls "by avoiding, mistreating, and dumping sick people, because that's what these price controls reward."

Unintended consequences of the overhaul? Maybe. Or perhaps it's the creation of a health care crisis that won't be allowed to go to waste.

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No one should be surprised if that's the goal.

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