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## Will Obama send flowers to Obamacare victims?

*BY NAT HENTOFF*

The callousness of the Harry Reid Democratic majority in bullying through a very cost-efficient health-care bill for President Obama's eager pen to sign was disgracefully clear when both the House and Senate, on party-line votes, decided to cut \$43 billion of Medicare spending on what The New York Times' Robert Pear described (Dec. 5) as "home health services, a lifeline for homebound Medicare beneficiaries, which keeps them out of hospitals and nursing homes."

The president, I'm sure, was pleased.

To put a human face on the grim effects of severing that lifeline, Robert Pear, long due for a Pulitzer for his health-care reporting, introduced Delmer A. Wilcox, 89, of Caribou, Maine. He "lives alone, is losing his vision, uses a walker and has chronic diseases of the lungs, heart and kidneys. He said his condition would deteriorate quickly without the regular visits he received from Visiting Nurses of Aroostook, a unit of Eastern Maine Home Care."

But President Obama has emphasized (as he did during an interview with New York Times' columnist David Leonhardt): "The chronically ill and those toward the end of their lives are accounting for potentially 80 percent of the total health-care bill out here."

For cost purposes, should Reid take into account how much longer Mr. Wilcox has to live?

Another senator, the often-independent Maine Republican Susan Collins, does not make such terminal calculations. "The Medicare home benefit," she told The New York Times (Dec. 6), "is under attack. The impact of these cuts will ultimately fall on seniors. Home health agencies will simply not be able to afford to serve seniors living in smaller communities off rural roads."

With regard to the president's intense concern with health-care cost-effectiveness, Collins adds (New York Times, Dec. 5): "Home care and hospice have consistently proven to be cost-effective and compassionate alternatives to institutional care."

This has been true not only in smaller communities off rural roads, but throughout the nation. As Republican Sen. Mike Johanns of Nebraska tried to remind his colleagues across the aisle (a transcript is available on his Web site, [johanns.senate.gov](http://johanns.senate.gov)): "These are truly some of the most vulnerable Americans. Yet in order to finance this new entitlement, this bill takes money out of that much-needed program, and it places the cuts on the backs of these Americans, our most vulnerable Americans."

The great majority of congressional Democrats, however, obediently followed "commander" Reid. As John Fund reported in the Wall Street Journal (Dec. 4): "The party leadership has made it clear that anyone who votes against health care (as written by the leadership) will have a difficult time passing their own bills in the future."

When I was a kid, I used to read that the U.S. Senate was "the greatest deliberative body in the world." Not that Republican majority leaders have been averse to ensuring party loyalty by stringent means; but for the Democratic machine to use such bare-knuckles tactics to pass this legislation so

directly involving the future lifespans of so many Americans (regardless of age or political affiliation) should make President Obama pause.

Sen. John McCain is decidedly uncool during this debate, much to his credit. In a Dec. 5 interview with Don Imus, McCain said of the fears of Obamacare around the country: "There's not a lot of happy people out there, so you see tea parties, and you see people who are madder than they've ever been in their life. And frankly, I'm madder than I've ever been."

Me, too.

The day after Reid secured his 60 votes to continue Senate debate on Obamacare, CBS' "60 Minutes" -- "The Cost of Dying" -- presented a cold, clear case for cutting the \$43 billion Medicare spending on home health services that serve not only the elderly, but certainly many other Americans. Opening the program chillingly, Steve Kroft played the actuarial rather than the compassionate blues:

"Every medical study ever conducted has concluded that 100 percent of all Americans will eventually die. This comes as no great surprise, but the amount of money being spent at the very end of people's lives probably will. Last year, Medicare paid \$50 billion just for doctor and hospital bills during the last two months of patients' lives -- that's more than the budget of the Department of Homeland Security or the Department of Education.

"And it has been estimated that 20 to 30 percent of these medical expenditures may have had no meaningful impact."

If I may interrupt, sir, what about the impact on the other lives? During the program, we hear from Dr. Ira Byock in the intensive-care unit at Dartmouth-Hitchcock Medical Center in Lebanon, N.H.:

"Denial of death at some point becomes a delusion, and we start acting in ways that make no sense whatsoever. And I think that's collectively what we're doing."

Toward the end of "The Cost of Dying," Dr. Byock lectures us on our moral responsibilities in these matters: "Collectively, as a culture, we really have to acknowledge that we're mortal," he said. "Get over it. And start looking at what a healthy, morally robust way for people to die looks like."

John McCain isn't getting over it. And in next year's midterm elections, we'll see how many other Americans won't. Are they immoral?

The economy will surely be a major factor in these coming elections, but I expect many Americans going to the polls will indeed be thinking robustly of their own mortality.

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