

Is Congress Making Us Sick?

What is Next for the Affordable Care Act

Presented by the  AMERICAN POLICY ROUNDTABLE



Health Care in the Dark

Congress didn't read the Affordable Care Act. The chief sponsor in the Senate and the Speaker admitted so out loud. The President did not read this law. The United States Supreme Court admitted four times on the record that they did not read the law.

The research team at the American Policy Roundtable has read the law going on 10 times now. We have a full report available at aproundtable.org. We have boiled down nearly 2,500 pages to about 10,000 words. You can also call us at 1.800.522.VOTE to secure a copy.

2,500 pages, etc.

The Patient Protection & Affordable Care Act (PPACA or ACA) is nearly 2,500 pages long. The Administrative Code designed to implement the ACA is 10,000 pages and growing. One U.S. Supreme Court Justice likened reading the ACA to "cruel and unusual punishment."

What's coming? A Massive Transfer of Authority

The ACA has a major theme. It is designed to transfer the decision making process of the U.S. health care system away from you, your doctor, hospital and insurance company to the federal government. All of this authority is being deposited at the Department of Health and Human Services (HHS). The Affordable Care Act makes the Secretary of HHS the most powerful person in health care. Over 800 times the ACA includes the language "the Secretary shall." Bottom line, HHS is now running the show.

When Politics and Health Care Mix

When the ACA was passed lots of promises were made by Congress that this law would stay out of the controversial issues like abortion. Those promises were quickly broken by HHS. The Secretary chose to mandate that "preventive care" services would include abortion related drugs and devices. Then HHS tried to force employers to pay for these services. Some people had objections based on conscience and religious liberty. They took their case all the way to the U.S. Supreme Court and won. Look for many more lawsuits on civil liberties questions ahead.

Learn more about these legal challenges on The Public Square® radio broadcast. Please visit: thepublicsquare.com.

What's coming? Loss of Care

The ACA gives the Secretary the authority to decide what coverage should be in and out of the sanctioned federal health care policies. That's a lot of power because that formula will dictate all policies on the exchanges. Here is an example of the real law where HHS decides what kind of services will be paid for, and what care can be excluded.

ACA Section 2713

"A group health plan and a health insurance issuer offering group or individual health insurance coverage shall, at a minimum provide coverage for and shall not impose any cost sharing requirements for... evidence-based items or services that have in effect a rating of 'A' or 'B' in the current recommendations of the United States Preventive Services Task Force..."

Plans are not prohibited from denying coverage for services that do not receive a rating of 'A' or 'B'. Here are a few examples of services the USPSTF recommends against:

- Routine screening for colorectal cancer in adults ages 76 to 85 years (rating C)
- PSA-based screening for prostate cancer (rating D)
- Screening for bladder cancer in adults (rating I)
- Screening for glaucoma in adults (rating I)
- Screening for ovarian cancer (rating D)
- Screening for cervical cancer in women younger than age 21 (rating D)
- Screening for thyroid disease in adults (rating I)

The complete grading system definitions (A–D, or I) can be accessed here: <http://www.uspreventiveservicestaskforce.org/uspstf/grades.htm>

More of what's coming next...

a) The employer mandate.

Companies will be forced to insure their workers or pay federal fines. This applies to full-time workers, which the Affordable Care Act defines as people working 30 hours or more per week. Employers are already cutting hours to minimize their liability. This mandate will first hit companies with more than 100 employees then move down to all companies with 50 or more employees.

b) Tax penalties on individuals who did not purchase insurance.

Anyone who did not purchase insurance in 2014 and is without coverage will face a fine from the IRS. They also will be forced to sign up for a federal plan or continue to face federal fines every year.

CONTINUES ON PAGE 2

Have you heard of the IPAB?

“The decision is not whether or not we will ration care — the decision is whether we will ration with our eyes open.”¹

DR. DONALD BERWICK

The Independent Patient Advisory Board (IPAB) is a part of the ACA. This non-elected board has the legal authority to cut health care spending for over 100 million Americans enrolled in Medicaid and Medicare. Proponents of the ACA claim this cannot lead to rationing because rationing is specifically prohibited in the law. Only problem is—the word “rationing” is never technically defined nor linked to the IPAB. With plenty of loopholes at hand, the IPAB has the power to make dramatic cuts for seniors and others in serious need.

To learn more about the IPAB, please order the full report, *Is Congress Making Us Sick?* at aproundtable.org or call 1.800.522.VOTE (8683) for a copy.

More of what's coming next [Continued from Page 1]

c) Tax penalties on individuals who did purchase insurance but then earned more money.

Anyone who signed up for the Affordable Care Act and qualified for a federal subsidy to pay for their insurance is in jeopardy if their income rose during the last year. Those increases may eliminate the subsidy and create a tax liability.

d) Taxation of “Cadillac” plans.

If you are enrolled in a higher-level insurance plan the IRS will soon be taxing you up to 40% because the Affordable Care Act considers such plans excessive.

e) Employees losing their health care plans and doctors.

One of the tricky clauses in the Affordable Care Act permits you to keep your existing plan *but only if* the plan does not change in the future. At that point, your new plan must conform to the current standards prescribed by the ACA and HHS.

Who really wrote the Affordable Care Act?

The President did not write this law. Former U.S. Senator Max Baucus did not read or write this law, even though he was the leading sponsor. Here are four names most often attributed with constructing the ACA. Please note, none of them were elected members of the U.S. Congress.

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DONALD BERWICK

Graduated from Harvard Medical School and practiced at both Boston Children’s Hospital and the Harvard Community Health Plan (HCHP). In 2010 and 2011, Dr. Berwick went to Washington, DC, to lead the Medicare and Medicaid programs.

EZEKIEL EMANUEL

Vice Provost for Global Initiatives, the Diane S. Levy and Robert M. Levy University Professor, and Chair of the Department of Medical Ethics and Health Policy at the University of Pennsylvania.

ELIZABETH FOWLER

Vice President of Global Health Policy at Johnson & Johnson. During the health reform debate, Fowler served as Senior Counsel to the Chair and Chief Health Counsel to Senate Finance Committee Chairman, Senator Max Baucus (D-MT). Former Vice-President for WellPoint, Inc.



Donald Berwick



John E. McDonough



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What's next—A Single Payer Plan?

“I happen to be a proponent of a single payer universal health care program.”²

-PRESIDENT BARACK OBAMA

“Well of course I wanted single-payer, and I wanted a public option. But that not being in the mix, you have to prioritize what it is you want to get over the finish line.”³

-HOUSE MINORITY LEADER NANCY PELOSI

“Massachusetts was the first state to make health care a human right. Now it's time to lead again – toward single-payer health care – Medicare-for-all.”⁴

-DR. DONALD BERWICK

Administrator of Centers for Medicare and Medicaid Services 7/2010 – 12/2011

A Healthier Plan

Since the 1990’s, the American Policy Roundtable has been advocating for health care reform. There is a better plan than the ACA. You can learn more about *A Healthier Plan* at aproundtable.org.

IT'S TIME TO TURN ON THE LIGHTS!

Congress passed this law in the dark. They can fix their mistake in the full light of day. Most of this law has yet to be implemented so changing it is totally possible. Ask your member of Congress if they have read the law. Ask everyone running for Congress the same.

Then ask them to read this brief summary and wait for an answer to these vital questions. There is much more on this subject available on The Public Square® radio program and at aproundtable.org.

1. <http://www.nytimes.com/2011/12/04/health/policy/parting-shot-at-waste-by-key-obama-health-official.html> [accessed 9/10/2014] | <http://www.help.senate.gov/imo/media/doc/MBE-HatchBerwickLtr3-3-11.pdf> [accessed 9/10/14]

2. Speech to AFL-CIO Conference on Civil, Human, and Women’s Rights 6/30/03 (YouTube video) http://www.pnhp.org/news/2008/june/barack_obama_on_sing.php [Posted by Physicians for National Health Program 6/4/2008; accessed 9/6/2014]

3. <https://www.youtube.com/watch?v=JjJPBqW11GM> [published 5/29/2014]

4. <http://www.berwickforgovernor.com/news-clips/guest-editorial-its-time-massachusetts-lead-again-single-payer-health-care> [accessed 9/10/2014]