

What's Wrong With HR 3200

HR 3200 ostensibly exists to address two issues: To provide health insurance coverage to those who don't have it, and to control escalating health care costs for all. In the first case, we've seen the numbers break down once we account for the make-up of those who don't have insurance. A great many are illegal aliens. And many are wealthy enough not to need or want insurance. The illegal alien issue should be handled separately. That HR 3200 seeks to embrace them says all you need to know about amnesty. And if someone can demonstrate the means to pay medical expenses out of pocket, why prohibit them from doing so? Anyway, subtracting these groups greatly reduces the number of uninsured "Citizens" being touted. Prescribing a catastrophic health-care net for those remaining should be simpler, cost MUCH less than HR 3200, and it should not intrude on the general population.

To lower costs for the general population, we should lower the barriers to joining High Deductible Health Plans in conjunction with opening Health Savings Accounts, and we should implement tort reform to limit frivolous law suits and the damages awarded. Couple this with an incentive program where people pay lower insurance premiums if they meet certain health-based thresholds – reward those who take better care of themselves – and costs will go down, both because people will have incentive to take better care of themselves, and because widespread use of High Deductible Health Plans in conjunction with Health Savings Accounts will introduce competitive pressures to drive down the fees charged by health-care providers. Why? Because people who pay directly for routine health care will ask more questions and shop for cost-effective health services.

Legislation to address Coverage and Cost should not require 1000+ pages. For the sake of argument, let's say something closer to 400 pages would be adequate. So why the extra 600? The answer is CONTROL. This legislation seeks to increase government control of our lives to an unprecedented extent, not to mention seizing another big chunk of the US economy. It's also interesting to note that many physicians have stated they plan to retire should this legislation pass, as it will leave little incentive to practice some of the more esoteric and demanding specialties, so we can expect a shortage of doctors to develop. This piece of legislation is yet another example – Cap & Trade being brethren – of the onerous degree to which liberal/socialists wish to collar, leash, and muzzle the general population.



PS. A new talking point is emerging at Town Hall meetings and press conferences: Elected officials are suggesting that while they don't really want bureaucrats making health-care decisions either, since the insurance companies "ration" health care anyway, wouldn't you trust the government do a better and more even-handed job? Sadly, the answer is "no." The principal ingredient lacking in this line of thought is the patient – We the People. Shouldn't We really make these decisions? The system we have suggests not; it has evolved on the premise that we are neither smart nor responsible enough to do so. So the government's solution is to take more responsibility on its shoulders. But why not the converse? We would all be much better off if we re-tooled the system to require more personal and financial accountability on the part of each Citizen. "Ask not what your Country can do for you. Ask what you can do for your Country." We can, each one of us, do a lot more to take care of ourselves, and the government can do a lot more to help foster self-reliance. Moving the entire health care system towards the HDHP/HSA model would make huge strides in accomplishing the objectives set forth in the "Health Care" debate, if indeed those objectives are really the point.