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Clinton's Totalitarian Health Plan

Clinton's Health Ration Card

When President Clinton held up that health card on television, it wasn't a credit card or a bank card. It was a RATION card, and rationing is the bottom line of his health care "reform."

The revelation that 40 percent of Americans will have to pay more for health insurance than they are now paying is only one of the shockers in the 1,300 pages of the Clinton plan. If the Administration were forced to lay all its cards on the table, here is what the fine print on the back of the Clinton health card would say:

This Ration Card is the property of the National Health Board appointed by Bill and Hillary Clinton. It gives access to all your personal medical records by government personnel.

This Ration Card requires you to pay for your own health insurance, plus insurance for 37 million currently uninsured, plus insurance for all the early retirees whom the big corporations are dumping onto the backs of the taxpayers.

The Ration Card is good only when a duly authorized Gatekeeper gives advance approval of specific benefits provided by designated doctors or other providers who are members of Regional Collective Alliances.

If you attempt to buy medical care outside of the one-tiered, government-authorized system, you will be criminally prosecuted. This Ration Card is not good outside your own geographic area without prior approval from your Collective Commissar.

This Ration Card is NOT GOOD with physician specialists unless authorized and available (and they will become scarcer every year under the Clinton plan to restrict who may train to become a specialist). Cardholders must accept care by non-physician providers, such as midwives instead of obstetricians.

The Clinton plan is not about universal health CARE; it is about COVERAGE. We already have universal CARE today because nobody is denied essential care. Universal COVERAGE means universal CONTROL.

The Clinton plan is to put Big Government in charge of how ALL public and private health-care money is spent — this is called "global budgeting." Then the Clintonista liberals and feminists will be able to redistribute the spending away from purposes they think are less necessary, and toward purposes that suit their ideology or give them a political advantage.

The original plan for financing the Clinton health plan was laughed out of Washington as a "fantasy." Now, the Clintons plan to finance it by (a) forcing 40 percent of Americans to pay more and (b) mandates on employers. The Clintons will exercise cost control by rationing benefits.

The Clinton health plan will then redistribute the money into (a) a new \$2 billion federal bureaucracy, (b) a promise of universal coverage for the currently uninsured, (c) a bailout of the three auto companies and other Fortune 500 corporations that made bad business decisions by promising gold-plated health insurance for early retirees, and (d) making sure that the Clinton's special-interest kinds of health care are covered, such as all abortions, all mental disorders, all substance-abusers, and condom clinics in all public schools.

The condom clinics, euphemistically called "an expanded network of school-based clinics to serve as a delivery center for a range of services," are a pet project of Donna Shalala and Joycelyn Elders. Debra Hauser, director of the center on school-based clinics for the Center for Population Options, predicts: "The numbers [of school clinics] are just going to fly" if the Administration's plan is adopted.

Rationing will be imposed by an interlocking network of bureaucrats wielding unprecedented power. Under the National Health Board (which will include politicians and lawyers but not physicians) will be a new oligarchy of Gatekeepers with the power to limit costs by (a) capping health insurance premiums so no money is available for first-class health care, (b) putting a prohibitive surcharge on those who stubbornly insist on first-class health care,

and (c) denying treatment to those whom the Gatekeepers determine have a poor "quality of life."

The very idea that the Clinton Administration is demanding to run one-seventh of our nation's economy is mind boggling. Just imagine the management decisions involved in redistributing the funds and services for 14 percent of our Gross Domestic Product.

They'll have to decide the premiums and payment formula for each individual plan in each Regional Collective Alliance, when enrollment is to be frozen in high-cost plans and how much surcharges will be, who will get subsidies and how much, the standards and guidelines for the care provided by different kinds of doctors, and the price controls to be imposed on doctors and drug companies.

Under the Clinton plan, this new army of federal bureaucrats will take over the national regulation of insurance and the absorption of automobile insurance into the system. They will make decisions as to how many doctors will be permitted to train as specialists, in which specialties and at what hospitals. They will have to have an intricate scheme to force payments from self-employed and part-time workers.

The Gatekeepers will have to decide how often you can get a physical exam at every different age of your life, how many physical exams and doctor visits each citizen will be permitted, what immunizations each one will get and at what age, who gets eye exams and who doesn't, when to cut off of services for terminally ill people and how that cut-off is defined.

Is America ready for the totalitarian state? I hope not.

Controls and Compulsion

The Clinton Administration ordered a new \$26 million telephone system installed in the White House (without competitive bidding), claiming that the one used by the Bush Administration was inadequate to handle the 65,000 calls a day the President received in February. However, investigators discovered that the old system could be programmed to field 200,000 calls an hour — but the Clinton Administration personnel just didn't know how to operate it.

Now the same bureaucrats who can't make a telephone system work tell us they want to manage all U.S. public AND private spending on health care — one seventh of our Gross National Product. Can you believe the gall of these people!

Hillary Clinton's health care proposal is genuine socialism — an attempt to control every aspect of U.S. health care under a National Health Board functioning like a Communist Central Committee. Nothing so totalitarian has ever before been proposed in the history of America.

Hillary's proposal will take away your right to choose your own doctor. You may, perhaps, be able to choose your "plan," but there is no assurance that your doctor will be in your "plan." Many of the best doctors will limit their practices or retire rather than submit to Clinton's "plan."

Hillary's proposal will force (yes, force) every American to buy basic health coverage from a Regional Health Alliance — a newly coined phrase that means a government monopoly, sort of like collective farms in the old Soviet Union. It will be the "obligation" of every individual to enroll, and "the state ensures" that you will do it. Wow! Send out the storm troopers!

Your Alliance may offer you a choice of several plans, but there is no assurance you will get into the plan you choose if it is oversubscribed. If you don't sign up, you (and newborn babies) will be assigned to the plan that Hillary's henchmen select.

You may even be denied the pretense of a choice of plans because states are given the right to opt for a single-payer (Canadian) system for the state or for a part of the state. Alliances are also given the right to exclude all choose-your-doctor plans and to impose a costly surcharge on anyone who insists on choosing his own doctor.

Price controls, and the rule that no plan may cost 20% more than the average price of other plans, will make it practically impossible for most alliances to offer any plan that allows you to choose your own doctor. Hillary's proposal is vindictively designed to eliminate all doctors in independent private practice.

Hillary's proposal will take away your right to spend your own money for better medical care. No matter how hard you work to provide for your family, to buy a better house, a better car, or send your children to better schools, it will be illegal to buy your family better medical care or see a physician specialist on your own, outside the system. If you try to do this, you will be subject to criminal penalties.

The purpose of this totalitarian scheme is to make sure that America has a one-tiered system of medical care at the level determined by the Clintonistas. This means you will be restricted to the same level of medical care received by the deadbeat drug addicts picked up off skid row (and you will be taxed to care for them, too).

This one-tiered system will make it very difficult for you to see a physician specialist even within your Alliance. A new oligarchy called Gatekeepers will restrict access to their services by price controls and rationing, and the Secretary of Health and Human Services is empowered to reduce hospital residencies to one-half their present number by deciding how many specialists can be trained in each specialty and by "allocating training slots."

On September 30, CBS-TV News gave us a preview of how medical costs and quality of care are reduced under socialized medicine. CBS showed that, under Britain's national health system, 80% of babies are delivered by midwives (who cost less), not by obstetricians.

While the basic comprehensive coverage may or may not cover the surgery, prescriptions or tests you need, you will have to pay for coverage for everyone else for abortions, treatment for drug and alcohol abusers, school-based clinics, and "education" courses in birth control and stress management.

Hillary will give you a "national health security card"

which ties your medical care to the Collective Alliance in the region where you live. If you move to another region, you will have to "notify the alliance" within 30 days.

This amounts to a national identification card, the sure indicia of a state in which Big Brother monitors your movements. It also amounts to an internal passport system. That's the way it was under Communism — everyone was required to check in with the commissar when traveling as far as 30 miles from home.

Hillary's plan uses a technique called "community rating" in order to force nonsmokers to subsidize smokers, and to force those who have healthy behaviors to subsidize substance abusers. Hillary's new regional alliances constitute a new governmental apparatus to impose a new tax to provide coverage for everyone within a designated region. If you are unlucky enough to be in a region that has lots of crack babies, AIDS patients, or emergency room care for street violence, your tax will be high enough to cover all that.

So, here comes medical gerrymandering, lawsuits galore, and family and industry flight out of the cities. If a state doesn't set up its alliances and impose its taxes on schedule, the Secretary of the Treasury will impose a payroll tax on all employers in the state, and there is no limit on the tax he can impose.

Dr. Judith Feder, who was the head of Clinton's Health Transition Team, quoted Clinton as pounding his fist on the table during their health care discussions and saying, "WE HAVE TO CONTROL THE WHOLE THING." That's what the Clinton health care plan is all about — controlling **all** health care spending.

Bailout of Big Business

The Clinton health "reform" depends for its financing on forcing every employer in the country to provide health insurance for all employees through mandating a payroll tax. The tax on most employers would be 7 percent of payroll; small businesses would have to pay 3.5 percent of payroll. That clearly would result in a loss of jobs.

The Republican plan offered by Senator Phil Gramm, which is a plan to establish individual medical savings accounts combined with catastrophic insurance, is entirely different. The contrast between these two plans provides conclusive proof that the Democratic Party does the bidding of Big Business, while the Republican Party is the friend of small business, entrepreneurs, workers, and taxpayers.

The Clinton plan does exactly what big businesses have been demanding — it provides a financial windfall to big business while pushing small business to the edge of bankruptcy. It is a plan to dump onto the taxpayers the financial burden of big corporations' mistakes in making unrealistic commitments for generous health benefits to their retirees. At the same time, the Clinton plan will drive their small competitors out of business or force them to lay off workers by requiring them to provide health insurance they can't afford.

This plan is all laid out in exquisite detail in the 1993

annual report of General Motors. GM demands "programs designed to ease the retiree health burden of firms in mature industries" (e.g., the big three auto companies), which would be financed "through broad-based taxes and general revenues" specified as "a properly structured value-added tax, an income tax or a payroll tax." GM demands that the government force the little guys to buy health insurance even though the economic consequences will be devastating. These small businesses are not mollified by being offered a subsidy — they didn't ask for a handout, they just asked to be free from destructive federal mandates.

The Clinton plan is also a gigantic double advantage for the five biggest insurance companies. They will profit tremendously because they have invested heavily in managed care organizations (such as HMOs), which are eligible to join the Clinton Collective Alliances. At the same time, the Clinton plan will run their competitors out of business. About 500 of the smaller insurance companies are expected to fold if the Clinton plan is adopted because real risk insurance in the health care field will be prohibited.

Only liberals with a socialistic mentality could think that Americans might be willing to be "organized" in "health collectives" so they can be subjected to "managed care." Senators who have been toying with the idea of cooperating with the President on health care should first read the results of a new survey published in the *Journal of the American Medical Association* on August 18, 1993.

The Johns Hopkins study found that, while some employers have already transferred their employees into big managed care organizations, patients don't like it. Patients are particularly dissatisfied with how long they have to wait to get appointments and how long it takes to get through to doctor's offices by telephone.

Long waits and rationing are just two of the ways that the large prepaid managed care organizations restrict access to services in order to contain costs, and they would be two bad results of Clinton's plan to herd all Americans into "health alliances" for "managed care." Another result would be losing the right to choose your own doctor.

Shortly before President Clinton made his speech to the Governors in Tulsa in August, John Motley of the National Federation of Independent Business warned them that Clinton's so-called "reform" would have a dire impact on the economy. "Businesses will close. . . . Employees will lose their jobs," he said.

Backstage, the Clintons watched Motley on a monitor, causing Clinton to scrap most of his prepared text and substitute a rambling 45-minute plea for bipartisanship coupled with vague promises of "security" for all. However, he did not retreat from the core feature of his plan, i.e., mandates on employers. Clinton tried to calm the fears of small businessmen by offering them taxpayer subsidies. Under Clinton's "reform," the entrepreneurs of the future will first have to go hat in hand and apply for a government subsidy before they start up a new business.

The Republican plan for individual medical savings

accounts is the most worker-friendly plan afoot, besides being the only plan that has a chance of lowering medical costs. It puts decision-making into the hands of the individual rather than the bureaucrats.

“Explosive Disorder Syndrome”?

Mental health care coverage will be part of the “standard benefits package” that all health plans will be required to offer under the Clinton “reform.” We are told that this decision was made after eight weeks of “nightmares” trying to calculate the costs. The nightmares will really begin if the plan ever goes into effect.

Mental health services are one of the most expensive of all health services, according to a 1992 study by Blue Cross/Blue Shield of the health mandates imposed by several individual states. The study reported that state mandates on employers to include mental health care resulted in increased utilization with higher costs. In Maryland, for example, outpatient mental health care had an average growth rate of 21 percent per year, without any offsetting decline elsewhere.

According to the Health Insurance Association of America, a typical insurance plan now covers 33 days of psychiatric inpatient care. But the Clinton mental health plan will cover up to 60 days of inpatient care by 1998, and then unlimited inpatient care by the year 2000. For outpatient psychotherapy, the typical plan today covers 90 visits a year, but the Clinton plan will cover an unlimited number of visits by the year 2000.

Here is one anecdotal piece of evidence about how universal mental health coverage would work. A physician told me this true story, and I’m going to let him tell it in his own words.

“A male mechanic, who allegedly injured his wrist and developed pain, came to me as a patient. Even though treatment and, finally, surgery went well, he still complained of pain and said he could not work. I sent him to another surgeon for a second opinion, who reported back to me that he could find nothing wrong with the man.

“The next time I saw this patient, he told me that things were not going well. He said he had lost his job and his family. I asked why he lost his family, fearing some kind of tragedy. He told me he was ‘beating’ his family and they left him. I asked why he was beating his family.

“He told me that, following one of his outbursts, he was taken to a hospital emergency room where ‘they’ diagnosed him as having ‘explosive disorder syndrome.’ ‘They’ advised hospitalization for treatment of this problem, but told him it would be at his own expense since he no longer had health insurance. He declined hospitalization.”

Under Hillary Clinton’s mandated mental health coverage, this man will be able to check into the psychiatry wing of a hospital for two months of “treatment” and not have to worry about the cost. The bill will just be sent to the taxpayers.

Do you think the American people want to create this new welfare entitlement to care for those with “explosive

disorder syndrome” and similar “illnesses”? This would reward misbehavior and punish those who work and pay taxes by forcing them to bear the costs.

My doctor friend is not alone in calling attention to the abuse that will surely be rampant in any national mental health coverage. Those who work with bona fide mental illness believe that broad definitions of mental illness are unjust to those who are truly mentally ill.

The definition of what is mental illness is basic to the whole idea of mental health coverage. In May 1933, the Federal Government published a new definition in the *Federal Register* that is so broad that it will allow many who are simply misbehaving to compete for treatment funds with those who are seriously ill.

The new government regulation includes in the definition of mentally ill all those who have, or have had in the preceding year, a diagnosable mental, behavioral or emotional disorder that interferes with one of more major activities in life, like dressing, eating or working. The definition for children says the disorder must interfere with activities like family relationships or school functions.

Laurie Flynn, a lobbyist for the National Alliance for the Mentally Ill, which represents the families of those with serious mental illnesses, criticizes the new government regulations: “We are outraged. This appears to make almost any condition a serious mental illness. Common sense tells you this isn’t true. Serious mental illnesses are schizophrenia, manic depression, obsessive-compulsive disorder, depression and other severe conditions; and the definitions should not include people who are merely adjusting to life stresses.”

Miss Flynn has pointed up a real problem. My doctor friend’s experience shows that some professionals are ready to diagnose wife and child beating as a mental illness called “explosive disorder syndrome,” and then prescribe hospitalization. Malingerers, wife beaters and child abusers are people who do bad things for which they should be punished. They should not be rewarded for their misbehavior by tender, loving care in the hospital at the taxpayers’ expense.

There may be millions of people who have a hard time adjusting to life’s challenges and who are mentally or emotionally distraught because they aren’t getting along with their spouse or their employer. They will all be allowed to send the invoices for endless counseling and unlimited treatment to the taxpayers if the American people don’t wake up and just say NO to Hillary Clinton’s plan to include open-ended and universal mental health coverage in the standard benefits package.

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