Health Care "Compromises" Go From Bad to Worse

September 1, 1994 *by Phyllis Schlafly*

President Clinton's big mistake was to release his health care bill last year. It died after enough people read the scary details.

The Administration's game plan now is to revive it under other labels, such as Mitchell or Gephardt, but keep the text secret as long as possible so the details cannot be adequately scrutinized.

Senator George Mitchell's bill creates *50* new bureaucracies, 815 new responsibilities for Secretary of Health and Human Services Donna Shalala, 83 new responsibilities for Secretary of Labor Robert Reich, and 175 new responsibilities for the states.

The Mitchell bill requires every insurance policy to conform to a federal "standard benefits package" that includes substance abuse, mental health, "comprehensive family planning" and pregnancy-related services (i.e., contraceptive drugs and abortion). This will force many Americans to pay for services they don't want or need and force all employers to pay for abortion coverage for their employees.

The Mitchell bill prohibits catastrophic plans that don't provide every category of federally defined benefits. Big Brother is determined to decide exactly what kind of health insurance you must buy.

Under the Mitchell bill, any individual who chooses to buy better insurance coverage than the government's standard plan must pay a 25 percent tax on the excess premium - unless the individual is a member of a union, in which case he is exempted from this tax. How's that for discriminatory special-interest legislation?

The Mitchell bill mandates modified "community rating." This means everyone in the community must pay the same health insurance premiums (taxes) regardless of health risk, and it forces younger workers to pay much higher premiums than they do now.

The Mitchell bill requires that, whenever health care spending exceeds a federally imposed limit, the government will simply cut its subsidies. The predictable result will be shortages and rationing.

The Mitchell bill allows medical researchers access to the individual medical records of all Americans without their consent. Are you ready for federal bureaucrats to decide whether research projects are "of sufficient importance to outweigh the intrusion" into your medical privacy?

The Mitchell bill's anti-discrimination language goes well beyond existing civil rights laws and would cause a litigation nightmare. This is apparently a surreptitious attempt to use health care to legislate Senator Ted Kennedy's Employment Non-

Discrimination bill, which provides special rights for homosexuals in employment.

Under the "Miscellaneous Provisions" subtitle, the Mitchell bill allows individuals to sue employers and health plans for "discrimination" in not hiring an applicant, or in terminating an employee, if that employment decision denies (or tends to deny) the individual access to health coverage. Claims of discrimination could be based on language, income, and sexual orientation, as well as on race, sex, disability, and religion.

The Mitchell bill removes the $300,000 cap on compensatory and punitive damages in discrimination lawsuits, a compromise that was crucial to passage of the Civil Rights Act of 1991. In other words, the Mitchell bill would create a right to a job as a means of getting health insurance - but only for those in protected classes who enjoy the right to sue for discrimination.

The Mitchell bill assesses a 1.75 percent excise tax on every health insurance premium sold in America, regardless of cost. These funds will be channelled into medical schools and residency programs under federal regulations that will limit the number of specialists to be trained and dictate that available slots be allocated on the basis of gender, race, and ethnic background.

Under the Mitchell bill, family planning clinics and other "services for pregnant women" can be classified as "essential community providers." The bill mandates the expansion of abortion services to "underserved" areas that currently lack a local abortionist. State laws that place restrictions on payment for abortions may be challenged as impermissible "limitations" on the guaranteed benefits package.

The Mitchell bill includes funding for school-based or school-linked health service sites (popularly known as condom clinics) and "health" (i.e., sex) education beginning in kindergarten.

The Mitchell bill dictates that, if 95 percent of Americans don't have health insurance by the year 2000, the "National Health Care Cost and Coverage Commission" must submit legislative recommendations to Congress on how to insure the uninsured. If Congress fails to pass this legislation by December 31, 2000, the Mitchell bill will "trigger" automatic employer and individual mandates in those states that have not reached the 95 percent threshold.

The 95 percent coverage requirement will be calculated on the "resident population of the United States," language that includes illegal aliens. If the Mitchell mandates are triggered, an estimated 100 million Americans will become eligible for government assistance, making this the largest federal welfare program ever.

The more Congress pretends to "compromise" the health care bill, the more authoritarian and socialistic it gets. No health care bill should be voted on until the American people have had a chance to analyze the details.