

25 Reasons to Oppose H.R. 3200 – “America’s Affordable Health Choices Act of 2009”

1. **Rationing and Denial of Care** - Health plans authorized to impose restrictions on access to care according to “clinical appropriateness.” (Sec. 121)
2. **Political Appointees Decide** - A health benefit advisory committee (political appointees) will decide what kind of benefits (medical treatments/practitioners/drugs) are and are not essential. The Secretary of HHS will implement the decision by rule. (Sec 122)
3. **Limited Choice of Insurance Plans** - A new “Health Choices Commissioner” will rule over insurance options for all Americans, deciding what insurers are available. (Sec 142)
4. **Free Care to Non-Citizens?** - An anti-discrimination section appears to allow the free provision of medical treatment to non-U.S. citizens. (Sec 152)
5. **Privacy Intrusions/National Patient ID Card** - An electronic data system will be set up to access bank accounts for “real-time adjudication of claims” and to determine “whether the individual is eligible for a specific service with a specific physician at a specific facility.” A “machine-readable health plan beneficiary identification card” – a national patient identification & tracking card – may be used. (Sec 155)
6. **End of Insurance Market** - A government “Health Insurance Exchange” will be set up to establish federal control over the definition, amount, and type of insurance options available, and to *eliminate* a free and thriving market in health insurance. (Sec. 201)
7. **Forced Enrollment in Medicaid** - All Medicaid-eligible individuals will be automatically enrolled in Medicaid. Individuals will be forced into Medicaid. (Sec 205)
8. **New Government Entitlement Program for All** - A “Public Health Insurance Option” will be established to eliminate private health insurance and to build a national *Medicare-for-all* government health care plan. (Sec. 221)
9. **Coercive Funding** - Physicians will be coerced into participation. Only if they agree to remain Medicare providers, will they be eligible for higher payments for any patients they see in the Medicare-for-all “public health insurance option” plan. (Sec 223).
10. **Employers and Employees Forced into System** - Employers required to auto-enroll individuals into health insurance, unless the individual affirmatively opts out. Employers who refuse to offer health insurance will be taxed 2 - 8% on their payroll. The money will be deposited into the proposed Health Insurance Exchange Trust Fund at the proposed Health Choices Administration. (Sec. 312-313)
11. **Tax on Uncooperative Individuals** - People who do not have or buy “acceptable coverage” (per government definition) must pay 2.5% of their income to the government ...unless they are a nonresident alien or can prove a religious exemption. (Sec. 401)
12. **Control over Physician Pay** - Doctors seeing Medicaid patients will be paid the same rate regardless of specialty. In establishing payment, the Secretary will determine the

- value of the “time, mental effort, and professional judgment, technical skill and physical effort and stress due to risk” involved with each service given. (Sec 1121 – 1122)
13. **Hospital Monopolies** - Physicians providing services at specialty cancer hospitals may get paid less than physicians providing cancer care services at large general hospitals, regardless of patient preference, better care, or less exposure to disease for immunosuppressed patients. (Sec 1145)
 14. **End of Life Counseling** – Providers will be reimbursed for providing counseling on and directions for end-of-life decisions. HR 3200 includes suggestions for advanced directive orders, including specifics regarding intensity of medical intervention if the patient is pulseless, apneic, or has “serious cardiac or pulmonary problems.” (Sec. 1233)
 15. **Government Intrusion** – A Center for Comparative Effectiveness Research (CER) will be established to use private medical records without patient or physician consent to conduct patient and physician surveillance and research “with respect to the outcomes, effectiveness, and appropriateness of health care services and procedures....” (Sec 1401)
 16. **Government Surveillance Databases and Networks** – the Center for CER will encourage the development and use of patient registries and “clinical effectiveness research data networks,” to better tap into and track patients and their doctors. (Sec 1401)
 17. **All Access to All Data** - The Center for CER may secure private and other data on individuals “from any department or agency of the United States.” (Sec. 1401)
 18. **Hidden Taxes in Higher Premiums** - The Center for CER will be funded through a new Comparative Effectiveness Research Trust Fund, paid for through fees on private insurers—which are passed on to the insured in higher premiums. (Sec. 4375 - 4377)
 19. **Unconstitutional Access** - To hunt for “fraud, waste and abuse” (no definitions), all private medical records can be made available to the U.S. Attorney General. (Sec 1651)
 20. **The End of True Insurance** - Insurance plans must provide first-dollar coverage for preventive care services, prohibiting ownership of high-deductible policies. (Sec 1711)
 21. **“We’re the Government and We’re Here to Help You”** - Home visits by government agents to train parents how to parent in a government-approved way. (Sec. 1904)
 22. **Training Bureaucrats** - A Public Health Fund to build public health bureaucracy and train government bureaucrats will be set up at a cost of \$88 Billion. (Sec. 2002)
 23. **Funding for Government Intrusion.** A prevention and wellness trust fund will be established at a cost of \$30.8 Billion to pester, monitor, intrude on and try to control individual behaviors, habits and lifestyles, including diet and exercise. (Sec 3111)
 24. **Medical Device Surveillance** – a National Medical Device Registry will be established to track patients who have any type of medical device in or used on them. (Sec. 2521)
 25. **Tenth Amendment Violation** – Overreach of limits on federal powers: “The powers not delegated to the United States by the Constitution, nor prohibited by it to the States, are reserved to the States respectively, or to the people.” (U.S. Constitution)