

“Coverage Concerns”

Fox News – The Journal Editorial Report

9/25/09

Note: The following is a rushed transcript and may not be 100 percent accurate.

Obama (video clip): If you have health insurance, the reform we’re proposing will provide you with more security and more stability. It will keep government out of health care decisions, giving you the option to keep your insurance if you’re happy with it.

Paul Gigot: Perhaps the biggest concern for many Americans being able to keep their current health care plan. President Obama says you can, but for how long? We’re back with Betsy McCaughey. Also joining the panel, Wall Street Journal Assistant Editorial Page Features Editor James Freeman, Senior Editorial Page Writer Joseph Rago, and Washington Columnist Kim Strassel.

Alright Joe. Let’s take them one by one. Let’s start with that claim that you will be able to keep your health plan if you want to. Can you? Is that true?

Rago: Well now. I don’t think so at all. First, you’re going to have a government insurance option like Medicare but open to the middle class that will pay doctors and hospitals submarket rates, undercut private insurers. Private insurers will be regulated to within an inch of their life basically, and then you’ve got the government mucking around with some of these rules that allow large employers to offer coverage to their employees.

Gigot: And avoid state mandates and state rules because they have national plans.

Rago: And a lot of federal rules too. So now this will sort of be subject to a health choices administration that will gradually make employer sponsored coverage work just as poorly as the rest of the insurance markets.

Betsy McCaughey: It’s not a matter of speculation, however, or even prediction. The letter of the bills say that you will not be allowed to keep your existing plan. You will be forced to move into a managed care plan that restricts your access to specialists and diagnostic tests. If you look on the House bill, page 15 to 17, the Senate bill 56 to 58, you will see that you are required to enroll in a qualified plan. That means a plan that the government deems appropriate, and it has to be managed care, that’s spelled out in the bill. If you get your insurance through your employer, as most Americans do, your employer will have a grace period in which to move you into managed care. If you buy your insurance individually, through a broker for example, you won’t have a grace period. As long as anything changes in your current contract, your copay changes, ...

Gigot: So once the contract changes, then you go into this government regulation.

McCaughey: So it would be a few months. Right. Because usually those things change every year.

Gigot: But what about the fact that you have these union plants that are the product of collective bargaining, done in good faith, that are often very very good health care. I mean, are they really going to abrogate these contracts?

McCaughey: Some of the union plants are exempted under these bills, but most employers will only have the grace period to move their employees, all of them, into these lower grade HMOs because the point of these bills is not to just cover the uninsured. It's to limit everyone's health care consumption, and using managed care will do that, and to ensure that everyone has the same health care experience regardless of ability to pay. They don't want executives or people who go out and buy more expensive plans to have a different health care experience.

Gigot: Alright James. Let me ask you about this - the public option. Because the President said, look all this is is going to compete with private plans, keep them honest. The insurers are making a lot of money right now. We need to keep them honest.

James Freeman: Right. And I think the beauty of this is we don't need to guess or estimate or pause at what might happen because the people of Massachusetts since 2006 have been running the experiment for all of us, and we can go to school on it.

Gigot: Thanks to Mitt Romney, former Republican governor, or no thanks to Mitt Romney.

Freeman: And it's very clear what happens. Private insurance goes away. More people go on the public plan. Costs explode. More costs go onto small business. And people lose their jobs or they get salary freezes.

McCaughey: That's a very important point that more and more people are using their job in Massachusetts. I was reading about an employer just today who had to close up part of her business - close one office, sell a couple of trucks and lay off an employee - in order to meet the government requirement to pay for health insurance.

Gigot: Ok. Kim Strassel. Let me ask you about the cost question because that's an important one. CBO said the President, the congressional budget office, said the President's proposal, the House proposal, will not save money, but can you save money overall somehow if you cover more people, if you cover 44 million more people? How do you save money?

Kim Strassel: Well the argument that the White House had always made is that if you did that and you had more competition and you somehow managed to get more efficiency across the board, that you could lower costs in the long term. The CBO has blown that up. They have done an initial analysis of the House bill. It says there's going to be about 820 billion dollars in new taxes, most of them on families and small businesses, and even

with that that there's still going to be about 250 billion dollars of more deficit spending over the next 10 years. And even then, that doesn't count in the fact both of these bills, bear in mind, are designed to hide a lot of the costs that are going to come up front and only have them start to kick in toward the end of the bill. So what we're actually looking at is trillions in new spending over the upcoming years.

Gigot: Joe. I want to give House, the Democrats, credit for one thing. By raising, by proposing, by putting this tax increase on the table, 5.4 percentage point surtax, they've at least showed people that this is not going to be a free lunch. That somebody's going to have to pay for it. Now they claim that it's only going to be the wealthy will have to pay that, and it's going to be 550 billion dollars, but this thing is going to be enormously expensive.

Rago: Yeah. I mean all government health programs sort of start small and grow over time.

Gigot: That was the experience with Medicare.

Rago: Experience with Medicare. And this is sort of from the same playbook. On the taxes, you know, when you've got some states – California, New York – with top rates pushing 50%...

Gigot: 60%. Higher than Sweden. Spent Federal State combination – Oregon, California, New York, New Jersey would have top marginal tax rates higher than Europe.

Rago: The truth is you can't finance health care for 98% of the population with tax increases on 2%, so eventually this is just going to have to reach down to the middle class. There's just no way to make the money work.

Gigot: Alright. Thank you all.

Hannity with Dick Morris

Fox News

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Hannity: Now, Mr. Gates argued along the same lines just last week when he told the root.com that quote, “There haven’t been fundamental structural changes in America. The only people who truly live in a post-racial world in America all live in a very nice house on 1600 Pennsylvania Avenue.” Now even a cursory look at this case and the people involved in it tells you that if anybody was preoccupied by race or using it to make unfair judgments, it was Professor Gates and not the Cambridge Police Department. And joining me to discuss this and more is Fox News Contributor, author of the New York Times bestseller “Catastrophe,” Dick Morris. Dick, good to see you. Thank you for being with us.

Dick Morris: Good to see you. Thank You.

Hannity: Well, putting aside radical professors on college campuses is not a big surprise, I mean we’ve got Warren Churchill, we’ve got Bill Ayers teaching still. But the idea that the President admitting that he doesn’t know all the facts coming out saying that the police acted stupidly and then he says, “Well this is a teachable moment,” and then lecturing everybody. It’s hurt him in the polls.

Morris: Oh, tremendously. We don’t have any polls that are immediately after that, but he was tending down to 48 in Zogby, 49 in Rasmussen before this happened. It’s probably lower now. Everything this guy says is polled. That’s why he keeps repeating the same words over and over again. “This is an effort to win the deficit,” “this is to expend freedom of choice.” All that stuff. These are all polled phrases. He was not polling this one. He may have spoken to his advisors, but they didn’t poll him. And he shot this from the hip, and we had a rare chance to see the real Barack Obama, and a lot of people don’t like what they saw.

Hannity: Well, by what, three to one, people said that what he did was wrong here. What do you think it means? We’ve learned a little bit more about Professor Gates. I mean he did this interview on CSPAN Booknotes.

Morris: Well I was struck by that 911 call you played where there was no indication that she knew they were black...the women making the call.

Hannity: What I thought was more important – it seemed like the officer was in complete control, that he wasn’t angry, and it corroborated everything he had said in the police report. What do you make about Malcolm X in this interview. He said, “My mother hated white people.” He said, about Malcolm X when he was talking about the white man was the devil. “It was great.” That’s what he said. What does that...?

Morris: Well, you know there is this undercurrent that goes on. I remember back to the days before the election when you kept talking about Reverend White, and I said that Reverend White and Obama are two completely different people. Well, I think I was wrong, so now I'm not going to say that. I think that you really...

Hannity: That's right. Any time you want to come on the show and admit I was right, Dick you're welcome. But there is a connection, and I felt very strongly about this at the time and I feel so today that if you spend that amount of time. Any of us can have a bad association but after you realize somebody is really extreme, you disassociate from them. He never did that.

Morris: Never did that. You know, police, black police relationships is the only field in which there is a substantial difference between black and white perceptions. You don't have it on crime or on affirmative action or anything else, but you have it on police relations. The whites say there is no bias, the blacks say there is bias. And it runs very very deep in the black psyche that this is the case, particularly with the black middle class because they feel the equal of whites, and they are except when they're in the car they feel the cop is picking on them. It's kind of like they always feel like they have to watch themselves because they're worried about that and I think that that runs so deep in psyche that I think Obama blurted it out.

Hannity: Let's talk a little bit about these polls and political trends. The President now has his lowest Presidential index on Rasmussen minus 11 now. If you look at the politicians that are in trouble, we've got Corzine, Patterson, two governors in New Jersey and New York, Chris Dodd, Harry Reid, Pelosi, Boxers at record low numbers. When you look at that, how do you interpret these trends?

Morris: Clearly there's been a major trend in the last month, two months, but certainly the last month away from Obama. Every single poll has him dropping, has the Democratic party dropping, has health care reform dropping. And the interesting thing about this is we always liked Obama more than we liked his programs. Now he's using his popularity to sell his programs. The problem is that's lowering his popularity, and the lower his popularity gets, the less likely health care is to pass. So when he pushes health care, he's hurting health care because he's bringing down the ratings that he needs to get it passed.

Hannity: But in that sense, is that why this Gates issues is important because people gave him the benefit of the doubt. They said guys like Hannity are wrong. He's not Reverend White. And now maybe they're going to see another side of him. Does that chip away at his personal popularity?

Morris: Yeah. It does a great deal, and it makes him suspect on all of his positions. But it's not so much that he's pro-black. It's that he's coming across as anti-police. And the real issue here is not respect for the black community, but respect for the men in uniform.

Hannity: Alright now, but you talk about the biggest issue of our time. He's had trouble with health care. There seems to be emerging what they're calling not necessarily the government option, now they're talking about a government coop. And they've changed the wording. I don't doubt it's been poll tested. Do you think that this, if they can find some revenue neutrality in this, do you think they have a chance of making this work?

Morris: Well, I'm reminded of a conversation I had with Hillary after health care reform was definitely dead, and I said why don't you come out for a more limited bill, which ultimately became the Kennedy **Casenbound (?)** bill. And she said no. We can't make this change. We either have to change everything or change nothing. She said it would be like squeezing a balloon. We'll solve one thing and the other will go crazy. And this kind, I said I think **I'll term them Marxist (?)**, and this is the same kind of mindset that these health care reform types have. It has to be all or nothing. And we point out in catastrophe how terrible that approach will be. I think that what's going on right now is Hillary's health care proposal lost because of middle class voters. His health care proposal is losing because of senior citizens. They are getting that this is creeping euthanasia. That essentially what you're saying is no there's a two year wait for this, you can't have this, you can't have that, but by the way hospice care is available.

Hannity: Well, but they're going to have mandatory advisory counseling sessions with the elderly about their quote "options." I mean it's almost eerie. The one thing that changed though for the Clintons, and you were actively involved with this, you tried to move them to the center. We came up with this term that we all know so well, "triangulation." Do you think Barack Obama, and up to this point you've said you don't think he has it, do you think he will have the capacity to move to the right for political expediency or does he adhere to his more radical views?

Morris: That's a question I don't know. My guess is that he's radical. My guess is he won't move. But you don't know. That really is the question, and what's interesting is today...

Hannity: If he moves, does it help him?

Morris: Well yeah it helps him, but his programs don't pass and the country is saved. There are seven people who are worthy of note. They belong on the hall of fame. They are the seven blue dog Democrats who are holding up health care, and if you're in their districts write them and tell them you love them. John Barrow of Georgia, Bart Gordon of Tennessee, Baron Hill of Indiana, Jim Matheson of Utah, Charlie Melancon of Louisiana, Mike Ross of Arkansas, and Zach Space of Ohio. These men and women are the true patriots who are saving America's health care system and they deserve your support.

Hannity: If they stay strong.

Morris: Well, when you send them a letter saying that you love them, it'll help them stay strong. When they feel the heat, they see the light.

Hannity: Congratulations on the book.

Morris: Thank you.

“Health Care Casualty?”

Fox News - The Journal Editorial Report
9/25/09

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Paul Gigot: Welcome to the Journal Editorial Report. I’m Paul Gigot. Well, from a prime time press conference to a Town Hall meeting in Ohio, it was a full court press by President Barack Obama this week to sell his health care reform plan to an increasingly skeptical public. A new Fox News Opinion Dynamics Poll shows that nearly half of all Americans, 45%, think the quality of their family’s health care would be worse under the proposed reforms. Just 29% think it would be better. Are they right to be worried? Former New York Lieutenant Governor Betsy McCaughey is a patient (?) advocate and Chairman of the Committee to Reduce Infection Deaths. She joins me now. Good to have you back again.

Betsy McCaughey: Thanks you

Gigot: Now you wrote this week that seniors could be the biggest losers under this health care reform plan that’s emerging in Congress. How so?

McCaughey: Certainly seniors bear the brunt under this bill, the House bill, and under the companion Senate bill, produced largely by Senator Kennedy’s staff, for several reasons. One is first, they will pay for it with cuts to Medicare. The 1 trillion to 1.6 trillion price tag on these bills will be paid for by tax hikes – everybody’s heard about those – but by at least 500 to 550 billion dollars in cuts to Medicare.

Gigot: Estimated over 10 years.

McCaughey: That’s right. And that’s about a 10% cut in the Medicare budget at the same time that Medicare enrollment will be increasing by about 30% as the Baby Boomers reach Medicare age.

Gigot: Well this is fascinating to me because how can they cut Medicare spending because doctors are already complaining that they get reimbursed by Medicare only 20% or 30% less than the real costs of their procedures, hospitals as well.

McCaughey: It’s going to mean reductions in hip replacements, knee replacements, bypass surgery, angioplasty – the major procedures that have enabled this generation of the elderly to avoid disability, avoid deteriorating in nursing homes, and instead lead active lives.

Gigot: Well wait a minute. How is that going to happen? Doctors are not going to stop proscribing these things. How is that going to work?

McCaughey: They will have to. Tucked into the stimulus package that was signed into law on February 17 was a provision for computers to be in doctors' offices and in hospitals at bedside, computers that would deliver protocols to doctors electronically on what the government deems cost effective and appropriate care and there will be penalties built in for doctors who are not meaningful users of the system. In March, the President appointed Dr. David Blumenthal National Coordinator of Health Information Technology, and he's going to oversee ensuring that doctors obey these protocols. In fact, on April 9 in the New England Journal of Medicine he wrote an article describing how he's going to do it, and he said he does anticipate some pushback, some rebellion, from doctors who don't like losing their autonomy over what's good for their patients.

Gigot: Well, but I would think pushback too from Congress. Do you really think that this is something that the American public is going to stand for? Will Congress push back?

McCaughey: Well, that's why Peter Orszag Head of the Office of Management and Budget, again part of the White House, went to Congress earlier this week and asked for permission to really remove those decisions from Congress. He asked Congress to delegate the authority to make these decisions about what Medicare covers and how doctors are paid instead to a body outside of Congress, either Medpac, a body that already exists, an advisory board, or accounts created within the White House.

Gigot: Well, this Medpac idea. The President really really hit this hard in his press conference this week, and this would be a group of a council of wise men and women, medical experts presumably, who would propose protocols for spending, for saving costs in particular trying to be more effective they say with their medical procedures, then present those as a package to Congress which could vote up or down. What's wrong with that? Why shouldn't we turn this away from these political types on Congress and give it to a panel of experts?

McCaughey: Well, Congress is accountable, and seniors would certainly raise a lot of furry if suddenly they could not avoid the crippling affects of arthritis by getting a knee replacement. And the fact is that the President likened this proposal to a base closing commission so it would be immune from those popular impacts but the fact is, I don't believe we can count on the doctors that would be appointed to this to make the right decisions because, for example, the doctors that the President has already chosen to be his chief health advisors are ardent advocates of limiting care for the elderly. Dr. Ezekiel Emanuel, for example, brother of the President's Chief of Staff Rahm Emanuel, highly educated man who has written extensively on his views that the elderly should get less care, that Americans are too enamored with high-tech care, and that people who have incurable illnesses - and he uses specifically the example of dementia - should not be guaranteed health care because they no longer contribute to society. These are views that most of us don't share.

Gigot: Alright. Well we certainly need to debate about this. But let's get another clip of the President on this point.

Obama (video clip): Overall, our proposals will improve the quality of care for our seniors and save them thousands of dollars on prescription drugs, which is why the AARP has endorsed our reform efforts.

Gigot: Why wouldn't the American Association of Retired Persons oppose this if what you say is in fact going to happen?

McCaughey: Paul, I am shocked at the AARP's behavior, and frankly to me, they've betrayed seniors. I'm amazed that seniors even continue to pay their dues to the AARP. The AARP says that there's support in universal coverage. Well seniors already have that. And they have so much to lose under this. One of the other things that's very dangerous to seniors in this legislation is the dramatic shift in funding away from specialty medicine to primary care. On the misconception that Americans overuse specialists and drive up health costs in the process, but study after study show that people with heart disease who rely on primary care medicine are frequently misdiagnosed and incorrectly treated.

Gigot: Cardiologists are better at heart care than...

McCaughey: They are readmitted to the hospital far more often and they die sooner.

Gigot: Alright Betsy. Thanks so much. We're going to have much more when we come back...

Fox and Friends with Peter Johnson Jr.

Fox News

7/28/09

Note: The following is a rushed transcript and may not be 100 percent accurate.

Steve Doocy: Meanwhile. Seven dirty little secrets lurking in President Obama's healthcare plan. That's what Fox News Legal Analyst Peter Johnson Jr. joins. HE's been tracking the President's health care plan for us the last couple of weeks. Peter, we've got seven points real quickly. Coordination. We hear that a lot. What's that mean?

Peter Johnson Jr.: We hear coordination a lot. Coordination means rationing. It means it can't get the tests or procedures or the surgeries you want and need under parts of this plan.

Doocy: Aye. Medical homes.

Johnson: Medical homes. Sounds like a house is not a home. Medical homes are more like a haunted mansion or where Beatle Juice lives. Medical homes are the gate keeper, the primary care physician that you will have to go to that will say whether you get a specialist or whether you don't get a specialist and the plans are to cut costs, especially Medicare participants, by at least by 20%, so with 45 million more people in the system and a 20% cost reduction, you're probably not going to get the tests and procedures that you need.

Gretchen Carlson: Alright. This one people should pay close attention to. Community rating.

Johnson: Community rating means that you're paying as a healthy 25 year old the same as an unhealthy 70 year old. There is no penalty or enhancement for good health or bad health. And so, we wind up all paying the same thing and the healthy wind up paying for the very very sick.

Brian Kilmeade: Comparative effectiveness. Probably Beatle Juice. Alec Baldwin was so thin that, comparative effectiveness.

Johnson: Comparative effectiveness means that the government is going to take tests and make determinations with a special panel as to not only which tests and procedures and surgeries are the most effective, but the most effective and the cheapest. A lot of people think that the test should be what's most effective, not what's most effective and the cheapest.

Kilmeade: They had a great catch. Michael Keeton was good. The public option.

Johnson: The public option means that there will be a new government health care plan, a new government insurance that you can buy. It will probably be cheaper than your private health care, but it will probably be more akin to Medicaid and Medicare benefits, so if you have a private health care plan that you're very happy with, as a lot of Americans do now, they're probably going to be disappointed in the government sponsored plan. But the truth is, employers will probably choose it over time because it will be cheaper.

Doolcy: And once of the most troubling, advance care planning consultation.

Johnson: Advance care planning consultation is kind of our 2009 brave new world, soil and green, 1984 Aldous Huxley kind of world where you come in and see your doctor at age 65, and if you're chronically ill, you come in every year and your doctor, who will be trained – and they will spend billions of dollars in training doctors to be counselors – that you have options. You don't have to go on to a hospital.

Doolcy: These are the people who are going to determine whether or not you live or die.

Johnson: These are the people who are going to say, listen. You don't have to go into a nursing care facility, it doesn't have to be a skilled nursing care facility. You don't have to prolong your death. There are benefits to hospice. There are benefits to palliative care.

Kilmeade: The ultimate exit strategy.

Johnson: What the President has said. The ultimate exit strategy is we're only going to give you what makes you healthy. There's a lot of things that people are delivered in our health care system that don't make them feel healthy, but make them feel better and maybe even live longer lives. These are some frightening things. These are the things we have to be looking at this week as they rush this thing. And we don't want a loss of our health freedoms.

Doolcy: So Peter Johnson Jr.. Those are words we've heard a lot of but we don't know about.

Johnson: Tort reform and abortion. I'm going to be talking about those the next couple of days.