## Obamacare: What they say and what they don't

## Marty Trillhaase/Lewiston Tribune

Every so often - about 38 or 39 times now - the House GOP votes to overturn Obamacare.

It's all for show. Repeal is a non-starter in the Democratic-controlled Senate. Standing in the path of any repeal is a presidential veto.

Wednesday the House did it again. It voted to acknowledge the Obama administration's one-year delay in imposing mandated insurance coverage for employers of 50 workers or more. Then it voted to extend the same one-year postponement to the individual mandate.

The first vote is largely symbolic. Large private employers already provide insurance for 96 percent of their workers. But delaying the individual mandate is a proxy for disrupting coverage for individuals and small businesses as well as destabilizing the pharmaceutical and hospital sectors.

Washington's Cathy McMorris Rodgers and Idaho's Raul Labrador and Mike Simpson followed up with sweeping condemnations of the health care reform act.

"The law is unworkable - and that's not fair to the people of eastern Washington," McMorris Rodgers said.

Chimed in Simpson (erroneously), "Americans are about to see their insurance premiums increase 100 percent on average with some studies predicting increases of as much as 400 percent." So far, prices released by insurers have shown nothing of the kind.

And Labrador argued, "Today's legislation is an important step in minimizing the damage of Obamacare, but our goal will continue to be full repeal as soon as possible - for the sake of our economy, for the sake of our health care and for the sake of our Constitution."

Didn't we elect these people to solve these real problems:

- According to the Centers for Disease Control, 6.6 percent of children lack insurance and nearly 21 percent of adults ages 18 to 64 are uninsured.
- Health care in the U.S. is 21/2 times more expensive than it is elsewhere in the developed world, says the Organization for Economic Cooperation and Development.
- The U.S. devotes 17.6 percent of its economy to health care, about double the OECD average.
- American health care outcomes are mediocre. U.S. life expectancy is lower and infant mortality rates are higher than in the average developed nation.

If she were doing more than posturing, McMorris Rodgers might speak these words: "I recognize that American health care is expensive and exposes too many Americans to ill health and

financial ruin. If Obamacare is not the answer, then we need to consider the alternatives: a single-payer system similar to France and Italy, mandatory insurance such as that offered in Germany and the Netherlands or a government-owned and operated health care system like Japan and Great Britain."

Simpson, a former dentist, would concede the current system of delivering emergency room care to uninsured people in crisis is both cruel and costly: "Through my experience in delivering health care, I know the importance of preventive and appropriate care. I will pursue coverage for those who have none available and ensure it is available in all insurance packages. Government already has a huge role in financing health care. What we need is to do it in the most effective, most efficient manner for the entire American public."

Or conversely Labrador might embrace a truly Darwinian option: "For the sake of our economy, for the sale of health care and to preserve individual liberty, we need to end the forced cost-shifting by health care providers due to one-sixth of Americans lacking health insurance. The only intellectually honest alternative is to repeal the Emergency Medical Treatment and Active Labor Act, which requires hospitals to treat anyone who comes to them for aid. If you can't afford the care, don't ask us to pay for it."

Don't like those choices? Maybe Obamacare isn't so bad after all. - M.T.