

Health care: Some harbor misconceptions about reform

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As the shape of national health care reform becomes clearer, it is important to revisit some objections leveled against the effort in the past, as the Herald-Journal did in a June 11 editorial.

First, the S.C. Small Business Chamber of Commerce believes that we need national reform to make health care more affordable and accessible. As the president and CEO of that 7,500-member organization, I can tell you that small businesses would like to offer health insurance to their employees but simply cannot afford to do it. This hurts them in recruiting and retention of workers as well as in employee productivity from lost time due to the illness of the worker or within the employee's family.

In the editorial I referred to in the first paragraph, national health care reform was disparaged on three primary points — more government control of your health care, more taxes and permanence.

The health care reform bills making their way through Congress do not create a government-run health care system. All proposals utilize private-sector health care providers making their best decisions about medical services. Proposals to provide these providers with better information about the effectiveness of treatments would facilitate the provider's decision-making process, not control it.

The health care reform bills do not create a fully government-subsidized health care plan. A public option is being discussed, but it would be similar to private-sector health insurance programs requiring premiums to be paid. Thus, one should not worry that businesses will stop providing health insurance because of a public option. What would be more realistic is that some businesses might prefer using the public option for their health insurance plan if they thought it was a better deal.

Under the different plans, private health insurance is strongly encouraged. The proposals do offer methods to help individuals and small businesses afford private insurance. However, if the income levels for Medicaid eligibility or age levels for Medicare eligibility are changed to allow more people to qualify for these existing government programs, health care services would still be provided by the private sector.

The additional cost of a Medicaid or Medicare expansion or the subsidizing of health insurance in general for low- to medium-income workers does raise the concern of where the money will come from and whether this will increase our national deficit.

Everyone in Congress is insisting that health care reform be fully paid for and not rely on borrowed money. Congress's budget resolution calls for reform to be revenue neutral.

But the editorial strongly implies that somehow the average reader will pay for the reform. Yet, there have been no proposals to raise everyone's taxes. Taxing employer-provided health benefits, which would be aimed at only the most generous plans, appears to be a dead idea. And the more likely graduated surtax on adjusted gross income above \$280,000 for an individual or \$350,000 for a family would impact fewer than 2 percent of taxpayers with small business incomes.

There is a possibility that an additional small tax on products such as sugary drinks and snacks will help pay for reform. Surely this is not a big financial burden we should be concerned about.

Health care reform will be paid for in full by a combination of savings, new revenue and restructuring how we spend our health care dollars now. The general public need not be afraid.

Finally, the editorial cautions that the reform will be permanent, make more people dependent on government, and will devour more money. Medicare and Medicaid would be the example villains in this scenario.

However, we can just as soon look at public education, law enforcement, highway construction and the military. All are permanent, and we are dependent on them. One has to believe that health care is not an essential part of our society in order to distinguish it from our other forms of government dependence. I don't share that belief.

As to escalating costs, we fight this battle with all government programs, and it is especially true for health care. Controlling all health care costs is essential for successful health care reform. On this concern, I agree.

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