

OP ED: What's The Government Doing Here? A Healthcare Unanswered Question  
By Elizabeth Lee Vliet, M.D. © 8-19-09

From the 2008 campaign through the 2009 summer of heated Town Hall debates on healthcare “reform,” I am struck by an overarching question that keeps haunting me.

**Why is the government involved in healthcare at all, much less pushing to *take over the private healthcare sector (whether by mandates or “public option”)?***

There is no enumerated power in the Constitution of the United States to give the *federal* government the authority to be involved in health care at all. Medicare is already an infringement of the 10<sup>th</sup> Amendment. Under the Constitution, it is the *states* that correctly should be overseeing such services, not the *federal* government.

The federal government already has all the *regulatory* powers it needs to oversee businesses in the private sector, including healthcare. In spite of that power, President Obama has said publicly many times during the campaign that his goal is to have a *federal* single-payer (translate: government run and controlled) health care system. This has also been a longstanding goal for many Democrats –from Senator Jay Rockefeller to Hillary Clinton to Congresswoman Jan Schakowsky, to Senator Ted Kennedy and many others, beginning with President Franklin Roosevelt.

Why are Democrats now seeking to violate the Constitution further and take *complete* control of *private* healthcare? Whether by massive new regulation or moving most Americans into a quasi-Medicare, government run, nationalized health service, this urgent and desperate push to run the entire private healthcare sector, rather than simply *modify* the parts that need to be fixed, isn't adding up.

It makes no sense.  
Unless there is a hidden agenda.

Here is how I see it:

*Follow the money.* Medicare and Medicaid are going broke. The government has no money to bail them out. In 2011: *the first of the “baby boomers” turn 65 and become eligible for Medicare.* Overall, the “baby boomers” born between 1946 and 1964 will add another 76 *million* to the Medicare rolls.

Our current deficit is devastating. Since January 20, 2009, the Democrats in the White House *and* both houses of Congress, have passed legislation that *increased* the federal deficit to more than 11 *trillion dollars* (\$11,897,336,052,071 as of mid-day August 23, 2009, to be exact). The debt clock ticks higher every second. This is now \$38,250 for each American. The National debt increases \$3.92 billion per day!

Add 76 million baby boomers to the roughly “47 million uninsured” the Democrats claim need to be covered under a Medicare-type plan. That means *126 million* more people to be covered

under Medicare, which is already broke. How is it possible to pay for all these people *without any money*? It is a physical – and fiscal – impossibility. Unless services are cut drastically.

The federal deficit is now greater than the deficits of *all US presidents combined*, from George Washington to George W. Bush. The federal government is broke! The government can only print so much money, or tax us so much to raise what is needed to cover the staggering deficits *plus* cover more Medicare beneficiaries. The federal government desperately needs to get its hands on hard cash.

So, *follow the money*. What's another source of revenues the federal government currently does *not* control? **The private healthcare sector.** This is the only component of our current healthcare system with money. Private insurers also have huge financial reserves they are required to set aside for payment of future claims.

I believe the *hidden agenda* for government take over of healthcare is simple. The government needs the money that is currently in the private sector. Once everyone is swept into the public, Medicare-type, taxpayer-funded nationalized system, the federal government will gain control of all this additional revenue. How?

The government can gain control of private sector money at least two ways:

- (1) Money now being paid for private health insurance premiums and medical services will go to government coffers, either as direct payments for premiums or as added taxes.
- (2) The Government can nationalize private insurance companies and confiscate their financial reserves. It would mean enormous new cash under government control.

I have written before about use of government run health care as a major way to control people (voters) by controlling their access to medical care, which in turn enslaves the middle class and consolidates political power. We have seen this happen in Britain, Europe and Canada.

Access to this new source of private revenue is another reason behind the current power grab. In my opinion, access to new cash explains the current administration's refusal to discuss excellent and viable alternative options to fix *only what is "broken"* – the payment and insurance issues for those with pre-existing conditions, or those between jobs who can't get private insurance. Whole Foods and Safeway have successfully solved the problems of lower costs, better access, and more patient empowerment over health choices.

Since politicians are not honestly addressing the question about *why* the government is pushing to take over private health care, I have come to the following conclusions:

1. The plan all along has been to take over all of healthcare to create a government run single-payer system that controls costs and saves money by rationing and denying care. President Obama, Professor Jacob Hacker, and Congresswoman Jan Schakowsky, and many other Democrats are all on record for years stating this goal.
2. Our Constitutional right to life and (medical) liberty will be lost – whether due to government mandates or a government public option plan.
3. Elected officials who vote for government mandates or public options are selling out the American people to give the federal government control of private revenues.
4. Everyone, except the anointed and exempted ones (the President, Congress, and certain Unions), will be waiting in long lines just as has been the case under every nationalized, government run healthcare system on the planet.

5. Everything will cost more as the government keeps printing more and more money to pay the debt. We will have less and less money to spend on things we would like to use our money for, as we instead send more and more to the IRS in taxes. We will shortly reach the 60-70% tax burdens of Europe.

Right now, media and Washington Democratic leadership do not allow public discussion of all the constructive, creative, successful ideas from business (like Whole Foods and Safeway), from fiscal conservatives (Republicans and Democrats), from multiple successful state programs, or from the medical profession! Only 17% of practicing physicians in the US are members of the AMA. Many physicians and health systems have creative solutions to our current problems that are not being heard. We can achieve the goals most Americans want without massive government takeover of it all:

- Individual choice and patient empowerment
- Reduction of government interference and regulations that artificially increase health insurance premiums and costs of medical services
- Free market competition across state lines for people to buy their own medical insurance, and tax deductibility for *both* individually owned and employer-based policies
- Patient ownership of medical insurance policies, rather than employer-based policies
- Reaffirmation of the physician-patient relationship to make medical decisions without third party interference from private insurers *or* government bureaucrats.

We need to get back to our roots: every American *citizen* deserves to *keep* the right to choose how, when, where, and with whom to seek our healthcare. Get government out of the exam room! Let the people choose their own insurance, services and treatments. Town Halls across the country clearly show this is what WE THE PEOPLE want.

The Declaration of Independence and Constitution guarantees each of us certain inalienable rights endowed by our Creator: life, liberty, and the pursuit of happiness. It specifically did not give the Federal government the responsibility to *provide or control* those.

We cannot not have liberty, happiness or even life itself, if the federal government controls our money *and* our personal healthcare choices and treatment options.

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DISCLAIMER: Dr. Vliet speaks as an independent physician, not as an official spokesperson for any organization. Dr. Vliet has no financial ties to any health care system, pharmaceutical company, or health insurance plan. Her allegiance and advocacy is to and for patients.



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Elizabeth Lee Vliet, M.D. is a women's health specialist who received her M.D. degree and internship in Internal Medicine at Eastern Virginia Medical School, then completed specialty training at Johns Hopkins School of Medicine. She received B.S. and M.Ed. degrees from The College of William and Mary in Virginia. Dr. Vliet is the 2007 recipient of The Voice of Women award from the Arizona Foundation for Women in recognition of her pioneering advocacy for the overlooked hormone connections in women's health. Dr. Vliet's books include: *It's My Ovaries, Stupid!*; *Screaming To Be Heard: Hormonal Connections Women Suspect-- And Doctors STILL Ignore*; *Women, Weight and Hormones*; *The Savvy Woman's Guide to PCOS*. Dr. Vliet is a seasoned expert commentator and a passionate fighter against government takeover of health care in the proposed Health Care "Reform" that

seeks to eliminate or penalize private options. Dr. Vliet's educational medical website is [www.herplace.com](http://www.herplace.com). On healthcare reform, Dr. Vliet suggests two patient advocate Web sites: [www.JoinPatientsFirst.com](http://www.JoinPatientsFirst.com) and [www.PatientsUnitedNow.com](http://www.PatientsUnitedNow.com), or the Association of American Physicians and Surgeons at [www.aapsonline.org](http://www.aapsonline.org).

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