***NEWS RELEASE***

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6 Reasons ‘Doc Fix’ Bill Is Dangerous for Americans

CCH Freedom: H.R. 2 Creates Doctors More Concerned with Checkboxes Than Patients; Urges Americans to Contact Senators, Tell Them to Vote ‘No’

ST. PAUL, Minn.—Citizens’ Council for Health Freedom (CCHF, www.cchfreedom.org) is urging Americans to contact their Senators and tell them to say “no” to the costly and controlling “Doc Fix” bill that would rate doctors based on compliance rather than care, expand Obamacare payment systems, and build intrusive Electronic Health Record (EHR) systems.

CCHF, a Minnesota-based national organization dedicated to preserving patient-centered health care and protecting patient and privacy rights, says the bill would actually support and strengthen the disastrous Obamacare law.

As Senators return to session today, Twila Brase, CCHF co-founder and president is asking Americans to call or email their Senators (contact information available at the link) and send this important message: “H.R. 2 supports Obamacare. Don’t pass this bill.”

“The last thing our Senate should be doing is propping up Obamacare,” Brase said. “But that’s exactly what this bill does. By pressuring doctors to ration care, mandating risky data sharing and funding efforts to push Obamacare enrollment, H.R. 2 is just what Obamacare proponents want.”

Brase pointed out that H.R. 2 will end the annual threat of Medicare cuts to doctors due to a 1997 Sustainable Growth Rate (SGR) law that “automatically trims physician reimbursement rates if and when medical costs rise faster than overall economic growth.” Over the years, Congress has passed 17 bills to avoid the cuts. H.R. 2 repeals the SGR law and stops a 21 percent cut.

But, Brase says, the bill poses six very real dangers:

1) OBAMACARE STRENGTHENED—Jason Furman, chairman of Obama’s White House-based Council of Economic Advisers, spoke to the Center for American Progress (the group that helped write Obamacare) and said: H.R.2 “is going to offer us even more tools to expand the same types of new payment models that we put in place in the Affordable Care Act.”

2) PHYSICIANS PAID TO COMPLY—A new Merit-based Incentive Payment System (MIPS) will measure doctors with a score of 0 to 100 based on compliance with Obamacare’s quality, resource use and clinical improvement provisions and Obama’s 2009 Recovery Act “meaningful
use” of interoperable electronic health records mandate. Doctors with low compliance receive pay cuts of up to 9 percent in 2022 and beyond. Physicians who fail to report performance data to HHS will be “treated as achieving the lowest potential score” and will be guaranteed a penalty. But no one knows how to measure doctor “performance,” so federal bureaucrats will make up measurements to suit their control agenda.

3) DOCTORS PRESSURED TO RATION—Doctors can choose an “Alternative Payment Model” instead of MIPS. Like Obamacare ACOs (Accountable Care Organizations), a group of doctors can accept a lump sum payment to care for a group of patients. Doctors who meet government “quality metrics” keep any leftover cash. This puts doctors at financial risk—they act as the insurer—and in conflict of interest with patients. Expect doctors to cut care to conserve cash. Expect cuts to customized care. Expect that costly patients will be pushed to seek care elsewhere. Congress is counting on doctors to ration care.

4) MANDATORY DATA SHARING—To access patient data used to impose controls on doctors, the bill states: “Congress declares it a national objective to achieve widespread exchange of health information through interoperable certified EHR technology nationwide by Dec. 31, 2018” (Section 106 (b)). The bill also prohibits blocking access to patient data, essentially forcing every EHR company to become a public utility for nationwide data-sharing.

5) FUNDS OBAMACARE HOME-VISITING—H.R. 2 includes $800 million for government home-visiting programs. Former Congressman Henry Hyde (R) called this program “cradle to grave tracking.” Unsuspecting parents of newborns are offered home visits. They accept, but do not realize that the visitor is a government worker evaluating the family for child abuse and documenting details about the family and the home. Obamacare had set aside $1.5 billion for home visiting.

6) FUNDS OBAMACARE ENROLLMENT PUSH—H.R. 2 would extend funding for the Obamacare Community Health Centers fund, which is slated to end this year. The bill includes $8 billion for health centers. Since 2013, HHS has issued grants to health centers totaling $216 million specifically for “raising awareness of affordable insurance options and providing eligibility and enrollment assistance to uninsured patients of health centers.”

“Far from being a ‘fix’, H.R. 2 is a threat to health privacy and a boost to Obamacare,” Brase continued. “Americans must tell their Senators to vote down this dangerous bill.”

For more information about CCHF, visit its web site at www.cchfreedom.org, its Facebook page at www.facebook.com/cchfreedom or its Twitter feed, @CCHFreedom.

Citizens’ Council for Health Freedom, a patient-centered national health freedom organization based in St. Paul, Minn., exists to protect health care choices and patient privacy. CCHF sponsors the daily, 60-second radio feature, Health Freedom Minute, which airs on approximately 350 stations nationwide, including 200 on the American Family Radio Network and 100 on the Bott Radio Network. Listeners can learn more about the agenda behind health care initiatives and steps they can take to protect their health care choices, rights and privacy.

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