

*****NEWS RELEASE*****

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Five Terrible Outcomes of Obamacare, Five Years after Law's Enactment

Citizens' Council for Health Freedom Says Privacy Intrusions, Increased Costs, Decreased Choices, Doctor Limitations and End of Insurance as Big Government Grows Are Just Five Perils

ST. PAUL, Minn.—Five years ago today—on March 23, 2010—President Barack Obama signed the Patient Protection and Affordable Care Act, or Obamacare, into law. And for the past five years, hardly a day goes by when some element of the federal health care overhaul doesn't make news.

But much of that news has been negative for the American people, who are paying the price, literally and figuratively, for this ill-conceived law.

Twila Brase, president and co-founder of *Citizens' Council for Health Freedom (CCHF)*, www.cchffreeedom.org, a Minnesota-based national organization dedicated to preserving patient-centered health care and protecting patient and privacy rights, has been fighting for patient rights and patient privacy for two decades, and in the past five years, *CCHF's* mission has become more crucial because of Obamacare.

Brase has written, testified and educated extensively about the threats of government health care, most recently listing several Obamacare dangers in an opinion-editorial in ["The Hill."](#)

"The perils and pitfalls of an intrusive federal health care system are almost too numerous to count," Brase said. "But the real disaster is the danger the federal takeover of healthcare poses for patients, doctors, pocketbooks and health freedom. CCHF often educates Americans about the [Top Ten Terribles](#) of the Obamacare exchanges, but five years after this detrimental law went into effect, the five most pressing dangers are lack of privacy, increased costs for patients, fewer health care choices, the tying of doctors' hands and the end of insurance as big government grows."

Specifically, Brase explains:

1. Lack of privacy

Through the federal and state exchanges, the federal government collects data on individuals,

employers and navigators from application forms, state databases, health plans and other sources to track and store data on household income, tax status, employment, family status, health, citizenship, incarceration and more. Even more frightening, data is dumped into one giant federal database, accessible to outsiders for nine “routine purposes.” CCHF also publishes [“Privacy and Health Care Reform: Ten Things Patients and Doctors Need to Know”](#)

2. Increased costs for patients

The higher cost of coverage may be unaffordable for many, even with federal taxpayer-funded premium subsidies (which may end as a result of the Supreme Court case *King v. Burwell*). Higher premiums are expected because the ACA-mandated coverage is richer in benefits than most policies, underwriting based on health status is not allowed, plans must cover patients with pre-existing conditions, and Obamacare imposed various taxes and costly regulatory and reporting requirements. Plus, many Americans are subject to expensive tax penalties when they refuse to enroll in Obamacare. Those uninsured in 2016 will pay a penalty tax of up to 2.5 percent of household income.

3. Fewer health care choices

To keep costs lower, many health plans offering coverage on the exchanges offer a limited choice of doctors, clinics and hospitals, called “narrow networks,” which have been an unpleasant surprise to enrollees that seek care. Narrow networks mean longer waiting times for appointments, fewer options for specialists, and longer drives to receive care. Additionally, HMO-like managed care plans are the only options. Catastrophic major medical plans—true insurance—have been outlawed by Obamacare except for individuals age 29 and younger. Some health plans, such as in New York, [do not even offer out-of-network coverage](#).

4. Tying the hands of doctors

Under the ACA’s “value-based purchasing” model, doctors will be paid for “value,” not for actual services given. Thus, doctors may have to comply with one-size-fits-all treatment protocols, accept outsider definitions of “value,” focus on population health instead of patients, or agree to participate in ethically-challenged “team-based care,” where clinic staff are allowed to follow computer-based treatment protocols leaving patients at the mercy of non-physicians—and in the dark about who’s actually responsible for their care. The electronic health record (EHR) mandate imposed in The 2009 Recovery Act, and ACA’s reporting requirements, will be used to judge physician compliance with the “value-based” and the “team-based” models.

5. Ending insurance and growing big government

Obamacare's national exchange system, prohibition on indemnity insurance, ban on pre-existing conditions exclusions, and the 40% "Cadillac Tax" against employer-sponsored coverage were established to eliminate private insurance and expand government coverage. Everyone seeking coverage on an exchange applies to the federal government for coverage approved by the federal government. If the ACA is not repealed, and the costs of coverage skyrocket in 2017 with the end of federal risk corridor and reinsurance subsidies to health plans, the national exchange system will likely become the nation's only source of coverage.

"The fifth anniversary of Obamacare is nothing to celebrate," Brase continued. "Instead, it's a reminder of the disastrous effects of this ill-conceived bill that was forced on the American people. Five years is long enough. It's time to repeal Obamacare once and for all and restore health freedom to Americans."

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, @CCHFfreedom.

Citizens' Council for Health Freedom is a patient-centered national health freedom organization based in St. Paul, Minn., that works 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.

CCHF president and co-founder Twila Brase, R.N., has been called one of the "100 Most Powerful People in Health Care" and one of "Minnesota's 100 Most Influential Health Care Leaders." A public health nurse, Brase has been interviewed by CNN, Fox News, Minnesota Public Radio, NBC Nightly News, NBC's Today Show, NPR, New York Public Radio, the Associated Press, Modern Healthcare, TIME, The Wall Street Journal, The Washington Post and The Washington Times, among others. She is at the forefront of informing the public of crucial health issues, such as intrusive wellness and prevention initiatives in Obamacare, patient privacy, informed consent, the dangers of "evidence-based medicine" and the implications of state and federal health care reform.

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For more information or to interview Twila Brase, president and co-founder of **Citizens' Council for Health Freedom**, contact Deborah Hamilton at 215-815-7716 or 610-584-1096, or Beth Harrison at 610-584-1096, Media@HamiltonStrategies.com.