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$8.3 Billion Medicare Advantage Bonus Program Increases Debt and Should be Cancelled

Citizens’ Council for Health Freedom, in Agreement with GAO, Asserts Plan is Potentially Outside Statutory Authority, Can’t Be Credibly Evaluated and Raises Costs Without Results

Key Facts:

- Waiving the ACA’s bonus program, HHS plans to implement an $8.3 billion demonstration bonus program to incent insurers to improve already high-performing plans.
- The $8.3 billion is $5.34 billion more in taxpayer money than required by the ACA program.
- The “demonstration project” is nationwide with a budgetary impact seven times larger than other Medicare demonstrations.
- The Citizens’ Council for Health Freedom agrees with the GAO that such a plan is potentially outside of the statutory authority of section 402 of the Social Security Amendments of 1967 and therefore should be cancelled.

ST. PAUL, M.N. – On July 11th the U.S. Government Accountability Office released a report questioning the authority of the Department of Health and Human Services to implement a new, $8.3 billion bonus program to help improve the quality of the Medicare Advantage program. This program took the place of the less expensive, more limited program required by the Affordable Care Act (ACA).

While an incentive program to improve Medicare sounds like a good idea on the surface, the $8.3 billion cost – to be taken from taxpayer monies – only adds to the estimated $2.6 trillion that the Affordable Care Act will cost to implement over the next ten years – an addition that
both the GAO and the Citizens’ Council for Health Freedom do not believe HHS has the statutory authority to instigate.

“What this amounts to is HHS taking more than $8 billion in taxpayer funds – more than $5 billion of which is for bonuses that are more generous than is prescribed in the Affordable Care Act – and offering kickbacks to already high-performing insurance companies for ‘quality improvements’,” said Twila Brase, President of the Citizens’ Council for Health Freedom. “The GAO has indicated that such spending is potentially outside of the statutory authority of HHS and that the demonstration program should be cancelled.”

Even more troubling is the GAO assertion that the program contains significant design flaws that raises both legal and efficacy concerns.

“Apparently HHS thinks that the American public will allow it to spend money that it may not have the authority to spend, for a plan that may not be effective,” Brase stated. “The public must take steps to let legislators know that this action is unacceptable and must be stopped. Until Americans stand against the continued over-reaches of power, this administration will continue to push the envelope and continue to exceed their authority.”

Twila Brase shares health care-related news with the American public in her daily, 60-second radio feature, Health Freedom Minute. Health Freedom Minute airs on the entire American Family Radio Network, with more than 150 stations nationwide, in addition to Bott Radio Network with over 80 stations nationwide. During the daily features, listeners can learn more about the agenda behind proposed health care initiatives and policies and what they can do to protect their health care choices, rights and privacy.

Brase, a public health nurse and health care freedom advocate, informs listeners of crucial health issues, such as the intrusive wellness and prevention initiatives in Obamacare, patient privacy and the need for informed consent requirements, the dangers of “evidence-based medicine” and the implications of state and federal health care reform.

Health Freedom Minute is sponsored by the Citizens’ Council for Health Freedom, a patient-centered national health freedom organization. CCHF supports patient and doctor freedom, medical innovation and the right of citizens to a confidential patient-doctor relationship.

For more information about Citizens’ Council for Health Freedom or to sign up for the weekly CCHF Health eNews, visit www.cchfreedom.org.

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