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Rationing Care to Keep Medicare Alive

Unfortunately, the federal government and Congress are moving to socialize medicine through the centralized controls of health plans, which centralize dollars, data and decisions. This includes seniors in Medicare Advantage HMOs. To control doctors, patient privacy has been eliminated. The so-called “value-based” payment system pays doctors for compliance, not competence.

In 2000, the U.S. Supreme Court said HMOs were created by Congress to ration care and it was up to Congress to change the law if they didn’t want rationing. But Congress supports centralized control because they don’t know how to stop the rapidly approaching insolvency of the Ponzi scheme called Medicare. And none of them wants to face the political wrath of Americans when Medicare goes bankrupt. Rationing prolongs the Medicare program, even as it harms the patients who depend on it.

“HHS Revamps Stark Law Rules to Protect Value-Based Payments, Coordinated Care,” Michael Brady and Erica Teichert, Modern Healthcare, October 9, 2019: https://bit.ly/36KC5eg

“Letter to HHS Opposing a Proposed Rule that Supports Value-Based Care” (public comment), Twila Brase, Citizens’ Council for Health Freedom, December 31, 2019: https://bit.ly/2SaMEEs