

How is ObamaCare **REALLY** working out?

When it was passed in March 2010, there were a lot of claims of what it would do to help increase access to medical care and make it more affordable.

BUT HAS IT LIVED UP TO THOSE EXPECTATIONS?

PROMISE: ObamaCare guarantees insurance for all Americans.

REALITY: Even after full implementation of ObamaCare, 30 million people will still be uninsured, barely half of the uninsured. *(CBO estimates)*

REALITY: More than 50% of people who have employer-based insurance have ALREADY lost it because it's cheaper for the employer to drop them *(CBO estimates)*

PROMISE: ObamaCare guarantees more people will have access to medical care

REALITY: Even with insurance, everyone is likely to have much more trouble finding a doctor, and wait times will increase as payments go down and more people seek care. We already have a doctor shortage, and 83% of doctors think about quitting now. *(Doctor Patient Medical Assn.)*

PROMISE: Insurance premiums will decrease

REALITY: Premiums for family of four have INCREASED by about \$1,300 since it was passed. *(Kaiser)*

REALITY: Insurance has increased by 19-30% for young adults who buy their own insurance *(Forbes article)*



The Palm Beach County Tea Party is about bringing together concerned citizens to learn, to make a statement, and to effect real change!

For more information, visit our website at www.palmbeachcountyteaparty.org or call 561-444-8086.

PROMISE: People won't be shut out of insurance because of pre-existing conditions

REALITY: Only 56,000 people have signed up for this program that was supposed to cover 700,000. Costs are so high in this program that for many people they are prohibitive. *(Kaiser Health story)*

REALITY: The price tag to taxpayers for every person enrolled in the pre-existing program is about \$5 million. *(Forbes article)*

PROMISE: Children with pre-existing conditions will be guaranteed insurance.

REALITY: Insurers have simply stopped offering child-only policies for ALL children, not just those with pre-existing conditions, in at least 34 states to avoid the provision. *(Politico report)*

PROMISE: Allowing children up to 26 years old to stay on their parent's insurance will lower costs & cover 2.5 million young adults.

REALITY: Premiums for EVERY family have increased \$150 and \$450 because of this provision — even if they didn't add their children. *(New York Times)*

REALITY: Young adults are LOSING insurance as employers are dropping coverage for all dependents to avoid the extra costs *(Wall Street Journal article)*

RESOURCES FOR MORE INFORMATION:

Doctor Patient Medical Assn. | www.DoctorsAndPatients.org
Independent Women's Voice | www.iwvoices.com
HealthReformQuestions.com

SO CAN WE REPEAL OBAMACARE AT THIS POINT WITHOUT GOING BACKWARDS? **Yes!**

Many of the most popular provisions haven't even take effect yet. For example:

- This provision that says insurance companies have to issue insurance regardless of your health status — called “guaranteed issue” — doesn't even take effect for adults until 2014.
- Many states have not expanded their Medicaid programs yet, and are unlikely to do so since the Supreme Court overturned that requirement.

Even though the provision requiring plans to cover 26-year olds on family insurance is credited with helping 2.5 million young adults get insurance in the past two years, most will still be able to keep their insurance even if ObamaCare is repealed:

- At least some young adults obtained health insurance through a new job, rather than as a result of being added to their parents' plan. *(Bureau of Labor Statistics)*
- Even before ObamaCare, 37 states had extended dependent coverage provisions in health insurance. So even if the federal law were to be repealed by Congress, many newly insured young adults would still be able to remain on their parents' plan.
- Many insurance companies ALREADY offered plans with some types of dependent coverage for young adults. *(2008 study from the GAO)*

TOP 3 REASONS TO REPEAL PPACA:

1. IT'S A “BAIT-AND-SWITCH” BECAUSE DOESN'T ACTUALLY EXPAND ACCESS TO MEDICAL CARE

- Having insurance “coverage” or being enrolled in Medicaid is no guarantee you'll actually be able to get medical care.
- **It's like a store that advertises a great deal on televisions, but when you get to the store, they don't have any left.**

2. SHIFTS COSTS TO HARD-WORKING MIDDLE CLASS

- PPACA includes \$800 billion in new taxes even though Obama promised no increased taxes. And because everyone must get insurance for the same premiums, and no one can be denied no matter how sick, it also forces current insurance-holders, particularly the young and healthy, to pay higher prices to cover everyone else.
- **It's like going out to dinner and splitting the tab evenly — even**

though some people had appetizers, cocktails and an expensive bottle of wine, when you only ordered soup. It's not that we don't want them to order what they want, we just want them to pay their fair share.

3. BACK-DOOR RATIONING

- PPACA turns health care decisions to government bureaucrats and political appointees, establishing the Independent Payment Advisory Board (IPAB), a 15-member board of unelected bureaucrats with unilateral authority and whose decisions are freed from judicial and administrative review will most certainly cut payments to physicians under Medicare, will limit patient access to, and quality of, medical care.
- **It's as if a committee from your auto insurance told your body shop they could only charge \$25 to replace your bumper when it actually costs them \$50 just for the parts. Just try to find someone to do the job — or do a GOOD job.**

THE REAL COSTS WERE COVERED UP: Only two years and so far the estimated cost is double the original. If it follows the pattern of Medicare, it will end up costing at least ten times the original estimate.

UNJUST SYSTEM RATIONS CARE TO SENIORS & THE DISABLED: Despite claims that it helps seniors, PPACA cuts more than \$700 billion out of Medicare for seniors and disabled, and turns the sick and chronically ill into statistics for “cost-benefit-analysis” to decide how much their lives are worth.

PUSHES THE POOR AND MOST VULNERABLE INTO SECOND TIER CARE: Advances a lower standard of care for the poor and young by forcing them onto Medicaid, instead of private care.

FORCES STATES TO CUT SERVICES: As Medicaid budgets double, states must cut other basic services like education, public safety & transportation.

EXPANDS GOVERNMENT POWER: More than 12,000 pages of new laws and regulations give sweeping new powers to political appointees like the HHS Secretary and the IRS.

FIRST-RESPONDERS, UNION WORKERS SLAPPED WITH NEW TAXES: Many police officers and firefighters will have to pay the new tax on their high-value plans that is supposed to tax the “wealthy” for having “Cadillac” care.