20 Questions to Ask Your Legislator About Health Care Overhaul

1. Legislators in both the House of Representatives and in the Senate voted, in committee, to exempt Members of Congress from having to enroll in the public health plan they are drafting right now. This is outrageous! If this legislation is supposedly good enough for the American people – why exempt Congress from it? Will you vote to sign up you and your family up for any public health care program that Congress passes for the American people?

2. There are claims that there's an unfunded liability of several trillion dollars up through 2075, and that the health bill actually reduces payments to Medicare by about several hundred billion over the next decade as a way to fund this bill. Wouldn’t such a cut in Medicare then lead to rationing in the system?

3. When Congress and the President rushed to pass the $1 trillion stimulus bill, we were told it needed to be passed fast. However, the legislation has had questionable results while paying for things like public bathrooms, sex shows in San Francisco and other examples of waste. Now we are told health care legislation must be passed right away for the same reasons. When restructuring 16 percent of our nation’s economy, this rush appears more politically motivated than policy motivated. Isn’t it more important to do it right?

4. Will you promise to read, understand and take full responsibility for everything that is in the final version of health care legislation?

5. Will you allow the American people sufficient time to review and publicly comment on the legislation before voting on it?

6. Many claim that abortion is covered in the health care bill, despite its not being mentioned specifically in the legislation itself. Furthermore, amendments offered in the Senate by Barbara Mikulski (D-Md.) and in the House by Lois Capps (D-Calif.) now guarantee that abortion will be a part of the health care legislation. Over seventy-one percent of Americans agree that taxpayer dollars should not fund nor subsidize abortion. When it comes to abortion exclusion, will you specify that none of the funds appropriated in the health reform bill, and no resources in any trust fund to which funds are appropriated in the bill, shall be expended for abortion? If not, why?

7. Can you guarantee me that my employer will not drop my health plan, and force me into the government run Health Information Exchange? Can you guarantee me and my family will not be one of the 100 million Americans predicted to lose their employer-provided health insurance and be forced into the Health Information Exchange?

8. I am self-employed. How can you vote for a law that says if I make a single change to my existing health plan, I will be forced into the Health Information Exchange, where my plan details are controlled by the Secretary of Health and Human Services? How can you stand there and say if you like your plan you can keep it, when I am going to be forced into the Health Information Exchange?

9. Do you know that the bill before Congress gives the Secretary of Health and Human Services uber-authority over everyone’s health insurance and every single plan detail, and that the bill
grants her such authority and other authority over all aspects of health care more than 200 times in the bill?

10. Do you know that if a trillion dollars were a trillion seconds, counting backwards, a trillion seconds puts us at 30,000 years before the birth of Christ? How can a bill that costs $1 trillion dollars and that cuts Medicare by $400 billion be called “revenue-neutral?”

11. How can a bill that costs $1 trillion dollars be passed without raising taxes as President Obama has promised?

12. Who decides what $400 billion in benefits and services are cut from Medicare?

13. Congress has never cut Medicare by anywhere near $400 billion; what makes you think Congress will make the cuts needed to pay for the uninsured’s health care?

14. Why should we accept $400 billion in Medicare cuts? Why aren’t other programs being cut besides Medicare? Why is this health reform being funded on the backs of seniors?

15. Why does the bill change the definition of family, by stretching it to become anything liberals want to call a family?

16. Will you agree to an iron-clad guarantee that this bill will not fund abortions, leave state abortion limits in place, and protect health care providers from being forced to perform abortions?

17. Medicaid, Medicare and Social Security are all government programs that are nearly broke. Why should the American people think the government can run an efficient or trustworthy health care program, especially when the Members of Congress vote to exempt themselves from the very program they tell the people will be so good?

18. In the House version of the health care legislation, H.R. 3200, Section 1233, titled “Advance Care Planning Consultation,” the bill calls for “end-of-life” planning consultations once every five years. Who will be responsible for this “end-of-life” counseling, and why would anyone want the federal government to be involved at all in this very private matter?

19. The provision on “end-of-life” planning for seniors in the House bill comes from Rep. Earl Blumenauer, a Democratic congressman from Oregon who supports assisted suicide. The state of Oregon has sent seniors letters “consulting” them that, while the state-run plan would not pay for their cancer treatments, the state would be happy to pay for assisted suicide if they choose that option. Americans have always placed a high value on human life. Why would we be interested in such a utilitarian approach regarding these important issues?

20. President Obama himself has made several public statements indicating the federal government would be making decisions on what sort of treatments people get. In a town hall meeting on June 24, 2009 President Obama told a woman caring for her elderly mother: “(W)hat we (the federal government) can do is make sure that at least some of the waste that exists in the system that’s not making anybody’s mom better, that is loading up on additional tests or additional drugs that the evidence shows is (sic) not necessarily going to improve care, that at least we (the federal government) can let doctors know and your mom know that, you know what? Maybe this isn’t going to help. Maybe you’re better off not having the surgery, but taking the painkiller.” Why would I want the federal government involved in a medical decision about surgery vs. a pain killer?