

# American Health Care: Essential Principles and Common Fallacies

By Richard E. Ralston

Virtually all discussion of health care policy today avoids explicit reference to underlying principles. In the United States, any reference to uniquely American values—including the inviolability of the individual—is particularly avoided. Indeed, while the discussion consistently and studiously neglects to mention any fundamental ideology, it invariably takes for granted the standards of altruism and collectivism. Outwardly, the mantra is "practicality."

Even within the terms of pragmatism, socialized medicine is *not* practical—it does not work. When policy proposals from pragmatic arguments are offered (always as a litany of concretes, and often based on erroneous information), they should be addressed in the full context of the ideological causes such proposals routinely ignore. And it must be established that the *reason* socialized medicine (or any application of socialism or collectivism) does not work is *because* it is immoral.

The first task in proper health care policy formulation must therefore be to turn the discussion to its necessary roots. A foundation must be built by establishing the proper political and moral principles: the distinctly American values of freedom, individualism and the right to life, liberty, property and the pursuit of happiness.

## Political Principles

One economist who is a tireless advocate of medical socialism has written that the only obstacle to universal health care is "ideology and personal choice." Eliminate those and we can have universal health care. Of course, that is quite correct, and it is seldom that the advocates of such policies are so explicit. Although the writer obviously is talking only about ideologies other than his own (which is

easy to identify), elimination of such ideologies as freedom and individualism, and such concepts as personal choice, are a sure foundation for collectivism.

Individualism must be at the heart of health care policy. Life, liberty and the pursuit (or practice) of happiness is the proper basis for policy. That must include property rights, and no right to property is more important than one's ownership of his own body. Failure to maintain this foundation opens the door to the most common attacks on freedom in health care.

It is important to recognize that advocates of medical socialism are not primarily trying to apply the principles of collectivism in order to promote better health care. They are using the issue of health care in order to promote collectivism. In 2007 Senator Clinton proposed the expansion of an expensive and wasteful federal and state program to expand government health care from poor children to families of four with incomes up to \$82,000. The proposals became law in 2009. The goal is obviously not to help the poor but to move as many children as possible—eventually all children—into a government health care system. This is another "slice of the sausage" that Senator Clinton promised when the Clinton administration's proposals for national health care were defeated in 1994. When she could not get the whole sausage of national health care, she promised to deliver it one slice at a time.

The objective of such paternalism extends far beyond the nationalization of health care. We and our children must all become dependent on government as the only source of our health care. Most children already must depend on government for their education (i.e., their indoctrination). Ideally these advocates of government would also like

children to rely on government for food and housing. The motive may or may not be an ideological commitment to socialism; it is certainly an avid commitment to a political spoils system. The enemies of such a system are autonomous individuals pursuing their own happiness and deciding how to live their own lives. Like the corruption of the client system that helped destroy the Roman Republic, citizens are inculcated into a system that destroys personal freedom and choice through dependence on government for the needs of daily life. That is the ultimate goal: the abdication of freedom by citizens in exchange for a government that will take care of them. "It takes a village."

Without a foundation on the principles of individualism, the door is open to anti-concepts such as the "right to health care." Those who proclaim the "right" to health care usually mean its opposite, i.e., that no one has the right to any health care at all unless they get it from the government. When private health care is criminalized and everyone is forced into a government system with nowhere else to go, we are at the mercy of the political powers that administer such a system, whether it actually delivers health care or not. (This perversion of the concept of rights into goods and services, which you must be forced to provide to others, is described by Ayn Rand in her article "Man's Rights" in *The Virtue of Selfishness*.)

Is the objective really to criminalize private health care? To some extent that already has been achieved. The federal regulations governing Medicare were 130,000 pages long, until the Medicare Prescription Drug Bill added another 1,300 pages. No one can understand them. No one can read them. No one can even lift them. It is not possible to comply with some of these regulations without being in violation of other provisions. Yet physicians and hospitals can be held criminally liable for violating many of these provisions. What can be the purpose of such confusion? It is the ability to subject physicians and the rest of us to the arbitrary and capricious application of these

regulations by any random bureaucrat. These regulations have grotesquely distorted and set the standard for the way private insurance companies pay for medical expenses.

Does this currently affect us on a daily basis? Most definitely. If you are 65 years of age or older, after a lifetime of paying Medicare taxes you are stuck with it. But if you want or need a procedure that Medicare does not allow, and if your physician accepts Medicare patients, he is forbidden by law to provide it even if you choose to pay for it yourself.

Medicare and Medicaid expenses have increased exponentially over the last 40 years and are a primary contributor to increased spending on health care. Federal programs now account for about 50 percent of medical spending. Federal tax policy has provided strong incentives for third-party payment of medical expenses, divorcing most of the costs from those who receive services. That is another primary factor in increasing costs. Heavy regulatory regimes of insurance and medical licensing by 50 state governments have greatly inflated the cost of both insurance and health care itself. State regulations prohibit the purchase of insurance from other states—thereby eliminating the possibility of a competitive national market for insurance and further increasing the cost of insurance. Insurance commissioners and other regulators in every state have united in opposition to legislation allowing their citizens to buy insurance from other states. Presumably they each must believe that consumers are endangered by the regulatory environment in the other 49 states. Affordable health insurance is thus often impossible for consumers to find because it is forbidden by law.

The strongest advocates of medical socialism want Americans to believe that what we have today is a free-market health care system based on principles of *laissez-faire* capitalism, and that we need to replace it. What we actually have, of course, is an essentially fascist system of highly complex and government-financed health care manipulated by interest groups with political pull.

America's health insurance and medical care system is an overregulated, bureaucratic monster that is the creation of government. It is in need of major reform, and the *status quo* should not be defended. But reform of the system must not take the form of more of the government poison that has been killing it.

## **American Values**

Michael Moore's comedy-drama *Sicko* (it was hardly a documentary) was only tangentially about health care. The clear underlying theme of the movie was the inferiority of American society and culture to almost all others. Name a country, and Mr. Moore makes the case that its culture, education, politics, economy and health care are superior to America's to the degree that they embrace collectivism.

That is the foundation for the frequently heard statement that all other industrialized countries have a government-financed health care system. (That is, incidentally, not true.) Americans should, in this view, be embarrassed by their lack of collectivism and outmoded commitment to free markets. Collectivist systems ruled by enlightened intellectuals are obviously superior in every respect. If only Americans would discard such parochial curiosities as the Declaration of Independence, the U.S. Constitution, the Bill of Rights, and the very concepts of individualism and life, liberty and the pursuit of happiness, we could freely embrace the benefits of government micro-management of our health care. Of course, a government that pays for all of our health care ultimately acts as if it owns our bodies, but anti-American elitists tell us that we should not be concerned with such ideological considerations.

Obviously we must vigorously defend American values as a necessary precondition of health care policy. We must recognize that disdain and contempt for American values is often the motivation for collectivist policies. This is the current manifestation of a very old trend in

America. In the 19th Century many intellectuals began to look to Europe for validation of their abandonment of the reason-based world view of the Enlightenment and justification for replacing free institutions with various forms of state tyranny. Americans must recognize these intellectual roots, best expressed in the surprisingly accurate popular term "Health Care Nazis." The only appropriate *American* response to such health care folly is individualism and a free market.

## **Moral Foundations**

Many people cannot afford comprehensive health insurance—especially with current government regulations. Many people need medical care they cannot afford. These unfortunate facts are used as the basis for the argument that others must be forced to supply them with both insurance and health care. The context of proper political principles and American values is ignored and replaced with the implied moral context of altruism. Even if the existence of individual rights is acknowledged, it is trumped by altruism and collectivism.

Because health care is so important, we are told, issues of freedom and individual rights must be set aside. The need of patients requires that government sweep away the rights of all individuals in order to seize and distribute medical care to others. Of course, the truth of the matter is that it is precisely because health care is so important that the individual rights of patients and physicians must be vigorously defended.

It is appropriate for defenders of individual rights to point out that the government action that would in fact help make affordable health care more widely available is not more government controls and regulations, but the elimination of most current controls and medical programs. (Government-funded medical care for active-duty military personnel and injured veterans is of course appropriate, but in the case of veterans could be best managed by reimbursement to them for private

care.) But that should never obscure a defense of self-interest as the only moral foundation for health care. The moral issue is also often clouded with the notion that even if socialism is immoral and inefficient in most cases, it is somehow appropriate in others—such as for children or the elderly. That assumes that the most precious value or gift that can be given to children is socialism or paternalistic fascism.

Across the entire political spectrum, altruism is the common element that clears the way for both the right and the left to devastate freedom and individualism. Socialists, welfare-state paternalists, Christian conservatives, public employee unions and politicians seeking to make their constituents dependent on them for all of their needs unite under the banner of altruism. There is no principle of political philosophy, no economic law, no proven efficiency of free markets or proven incompetence of government, no American value, that is not trumped by altruism. Any government action purporting to be a sacrifice for the good of others is generally sanctioned—even when in fact the proposal will help kill those it is supposed to help while making life miserable for everyone else. That is why supporters of reason, freedom and individualism should always take altruism on directly.

Michael Moore has remarked that socialized medicine should more appropriately be called "Christianized medicine." This extreme opponent of free markets and American values has thus been inspired by the success of some Christians in using the power of government to force Christian morality on American citizens. While Mr. Moore's piety may be highly selective, it is a symbol of what pandering to the religious right by conservatives has made possible.

### **Specific Policy Development**

Health care based on the foundations of individualism—uniquely expressed through American values—requires free markets to work

effectively. Self-interest requires a principled defense of free-market health care.

Because the transition from the current regulated mess governments have created will be long and difficult, it is also necessary to take notice of not just the unprincipled and immoral foundations of the present corrupt system, but of the huge amount of misinformation in circulation about current needs and realities.

In this context, while policy options must always refer back to correct principles, in any given instance it is the *direction* of policy that often should be considered. Is the direction more government controls, regulations, bureaucracy and spending, or less? If less, a proposed reform *might* be appropriate if it is not proposed in conjunction with regression to more government.

For example, the Medicare Prescription Drug legislation of 2003 was a horrible expansion of government health care—the largest in 40 years. It did include a pitiful few helpful features such as the expansion of Health Savings Accounts and some paltry choices for private insurance options within Medicare. Neither of those features justified passage of the legislation. But now that we are burdened with the program, it is appropriate to build on those features to push in the direction of more private options in health care and to build a constituency for free markets. Exempting individual health care expenses from income tax is fine, but of course not ultimately a reason to maintain income taxes at all. We can take advantage of limited opportunities for progress on the road back to freedom in medicine only if our goals remain firmly rooted in the right principles.

In this context it can be useful to review the most common misinformation and fallacious reasoning about the current policy situation and suggest rhetorically effective replies. Recourse to correct principles is the best response, as there is no limit to the false information and irrationality that can be manufactured. Nevertheless, some things should not

be allowed to go by without comment and need to be specifically refuted. A mantra of commonly accepted misrepresentations has developed that is endlessly chanted to the exclusion of any rational discussion of the real issues. They must therefore be challenged.

Following are some of the most common arguments, with suggested responses that apply the principles discussed above.

**1. "The quality of health care in America is ranked lower than 36 other countries."**

When you hear this, always ask, "Ranked by whom and how?" In 2000 United Nations bureaucrats at the World Health Organization sent a survey to "officials and experts" selected by the U.N. Why should we be surprised to learn that government "officials and experts" in France thought that their government-run health care system was the best in the world? The scoring of these surveys also made them meaningless. For example, 25 percent of the scoring was weighted based on the assessment of how "fair" the financing was in each country. For "fair," read *socialist*—the list was largely a ranking of how socialist each country's system is.

**2. "Medicare and Medicaid are far more efficient and less wasteful than private insurance, spending only three percent on administrative overhead."**

When you hear this, always ask, "Why is the administrative cost always given as a percentage?" One reason is that, due to the age of covered patients, the average Medicare and Medicaid reimbursements are higher than those of private insurance—and administrative costs are therefore a lower percentage of the larger amount paid. Another reason is that the huge cost of contending with 130,000 pages of Medicare regulations is pushed onto the providers. The cost of the more than 100,000 employees of the Internal Revenue Service who collect Medicare taxes are also omitted from Medicare's "administrative overhead." But the

biggest reason is that the government programs make no effort to minimize expense or fraud. Fraud counts for about \$50 billion in Medicaid expenses every year—as high as \$18 billion in New York alone. Total spending has been going through the roof for more than 40 years, but the government's administrative cost of burning money is quite low. That does not prove that the government is efficient or prudent. Private insurance companies, on the other hand, need to keep fraud and expenses down or go out of business.

**3. "Government or universities develop most new medications and then just hand them over to pharmaceutical companies to manufacture and make all the profits."**

When you hear this, mention that the National Institutes of Health (a government agency) reports that the pharmaceutical companies—who spend about \$60 billion each year on research—develop more than 90 percent of new drugs.

**4. "Advertising of drugs is bad because it increases the price of medications."**

When you hear this, ask, "Why does any business advertise any product? Because they just want to add to their costs and increase the price?" Manufacturers of computers and other technological products who spend a lot on research need to find their market. A pharmaceutical company, spending an average of \$800 million to develop a major new drug, has a few years of patent protection to bring the drug to the attention of physicians and patients who need it. This allows them to spread research costs over a much larger customer base and reduce unit cost—which lowers the price.

**5. "Private corporations are wasteful and bloated bureaucracies. Government-provided health care is lean and efficient."**

When you hear this, you might want to laugh. Then ask, "So you think that the 20th Century proved that communism and fascism work?" Is the Department

of Motor Vehicles or the purchasing practices of the Defense Department our best models of administrative efficiency?

**6. "People live longer in some countries because of their socialist health care systems."**

When you hear this, ask if the people in those countries didn't live longer *before* they nationalized their health care systems. Ask how many people in those countries died on their highways, were killed in combat, shot by criminals, addicted to drugs, were severely overweight or in poor health when they arrived as illegal immigrants.

**7. "The free market is callous and greedy, while government health care is compassionate and pays close and solicitous attention to the needs of every individual."**

When you hear this, recite the following litany: Katrina, King-Harbor Hospital in Los Angeles, the annex at Walter Reed Army Hospital, the Veterans Administration, the government of New York State, members of Congress, every political spoils system since the Roman Republic.

**8. "We can lower health care spending by eliminating all profits."**

When you hear this, ask why we pay FedEx, UPS and DHL to deliver packages at a profit instead of using the U.S. Postal Service. Ask why we pay Microsoft and Apple for computer products at a profit instead of having all computers and software produced by the government. Ask why we don't have the government produce all of our food and build all of our housing if it can do it so much better without needing a profit. Ask where the money would come from, without profits, for drug research and development. Ask how expensive government drug research would be if it never had to get results. Ask what the cost of assuaging public employee unions and the politicians they fund will be when profits are eliminated.

**9. "Government controls will lower the cost of insurance premiums to what we can afford."**

When you hear this, ask why the government requires those who struggle to afford insurance to pay taxes on the money they use to pay for it. Ask why the government mandates that insurance cover treatments advocated by special-interest lobbies even when people do not want the coverage. Ask why state governments refuse to allow competition—and lower premiums—from insurers in other states. Government controls are now making insurance more expensive. Affordable insurance is hard to find because it is forbidden by law.

**10. "Americans spend a higher percentage of their GDP on health care than any other country."**

There are both good and bad reasons for the present level of spending on health care. Bad reasons include the waste and fraud in government-financed health care, regulations that drive up the cost of insurance, and what following the lead of complex Medicare reimbursement procedures and regulations has done to private insurance. Good reasons include the fact that one reason Americans spend more on health care is because they can. America is a rich country, and what is more important than health care? How much is too much? Americans not only have the most advanced drugs, diagnostic and other medical equipment but also make them more available than any other country. If we had a free-market medical system, those who could afford to try and live forever in perfect health would spend money that would stimulate medical research that would benefit all of us.

**11. "Public opinion polls show that most Americans want more government health care."**

A lot of people may respond favorably when asked if they think someone else—anyone else—should pay for their health insurance. Government, their employer, anyone else will do. They might not reply

in the same way if asked if they should be responsible for providing everyone else with health care. They might not reply in the same way if they understood the consequences of government health care, such as rationing and long waits for surgery, treatments, or referral to specialists—or the government causes of problems with the *status quo*. They might not reply in the same way if asked if they really trust politicians and the loving arms of the federal bureaucracy for all of their health care. They might not respond in the same way if asked if they want government control of all aspects of health with nowhere else left to go.

**12. "Huge jury awards in medical malpractice suits do not increase health care or insurance costs."**

When you hear this, ask where the money comes from to pay the hundreds of millions of dollars in contingency fees that go to some trial lawyers every year. Ask whether these lawyers really care only about the "little guy." Ask why so many physicians and surgeons now have to pay liability insurance premiums of far more than \$100,000 a year. (No, the insurance companies do not keep it all or lose it in the stock market.) Ask how the government legal framework and court management for our tort system is set up to encourage lawyers to convince so many juries that all patients live forever in perfect health unless a physician or hospital makes a mistake. Ask how much is paid in political contributions every year by trial lawyers to buy protection for this legalized extortion. Ask how some law firms were able to hire one radiologist to review more than 600,000 x-rays and diagnose most of them with the same disease. Ask how many billions of dollars are wasted on unnecessary tests and procedures that physicians have to order to protect themselves from frivolous lawsuits.

**13. "Insurance companies can afford huge malpractice settlements, and doctors can afford large liability insurance premiums."**

Ask who we really think ends up paying those premiums. Ask how much the fear of second-guessing and litigation has increased the use of unnecessary and expensive testing and treatments, and how much other "defensive medicine" has driven up the cost of health care and health insurance for everyone.

**14. "Governments provide their citizens with free health care."**

Point out that government cannot create anything, but rather it can only take things. Health care, like everything else, is ultimately made possible by business activity. What a government means when it says it is giving you something for "free" is that it is forcing you to pay for something whether you use it or not, or taking something from you to give to someone else.

**15. "Countries with nationalized health care systems provide their citizens with all the health care that they need."**

When you hear this, ask why Canadians travel to the United States every year and spend \$1 billion on American health care. Ask why Americans have more access to MRI and CT scan equipment and more of the new breakthrough drugs. Ask why Americans have better survival rates for cancer and heart attacks. Ask why more than one third of physicians employed by the National Health Service in Britain buy private insurance, and why six million of their potential patients in Britain also buy private insurance, when government health care is free. Ask why so many British citizens waiting for free surgery and cancer treatment fly to India to pay for it, and ask why no one, other than Michael Moore, is jumping on a boat to get free health care in Cuba.

**16. "Physicians must provide any services that the government requires because they are indebted to society for their medical education."**

The first answer to this is that "society" did not spend many years of intense, dedicated effort to complete a medical education. Individual physicians did that, most of them accumulating a lot of personal debt in the process. But the most important answer is that, while many of us experienced public education (of inconsistent quality), we do not owe anyone anything. You might be grateful to some but not all of your teachers. You might be grateful to your parents for their taxes that paid for your education. But that does not mean that you must accept an undefined, unlimited and eternal moral obligation to everyone that ever has been or will be alive because you received a public education. Of course, this argument indicates that, for some people, imposing such an obligation might be the purpose of public education: if the government provides a part of your education, it owns you for life.

**17. "Health care is very important, so the government should control all medical practices and health providers, to give everyone all the health care they lay claim to."**

When you hear this, say, "Not in America. Our own health must never be handed over to government *because* it is so important.

**18. "The government must take over health care to control increasing costs."**

Ask when the government has been able to control the cost of anything, let alone something as technological, complex, personal and dynamic as health care. Ask why the cost of health care managed by the government has been increasing so rapidly. Ask, "What is the cost of cost control? How much do current cost-control efforts add to the amount of paperwork and expense of billing? How much would ever more controls add to the cost of health care?"

**19. "The Food and Drug Administration must be given more powers and funding to control the development of drugs."**

When you hear this, ask, "How many terminally ill patients have died while waiting for drugs later approved by the FDA? What does the FDA approval process add to the cost of new drugs? Why does the FDA spend years trying to determine how drugs might work in every possible instance, while losing track of safety issues? Why do clinical trials using terminally ill patients require that half of the dying patients be given a placebo instead of the new drug? How has the enormous power of the FDA become a magnet drawing those with a political agenda to manipulate and manufacture clinical research to serve their objectives?"

**20. "The Food and Drug Administration must create a new agency to evaluate new drugs for comparative effectiveness with other drugs, after they have spent years being evaluated and tested before being approved for safety and effectiveness."**

Ask how much longer that will add to the time needed for new drugs. Ask what that will add to the cost of each new drug. Ask how new clinical trials will be able to compare the effectiveness of drugs that meet the unique needs of each gender and of different ethnic and age groups. Will your gender or ethnic group be denied medications that work better for them but not for all groups? Ask how all drugs can be compared in this way when some individuals respond differently to many drugs, and what will happen when a drug that is the only thing that helps some people is prohibited because something else works for others. (Ask whether the government should decide that, if ibuprofen works better than aspirin for most people, aspirin should be prohibited even if it works better for you.) Ask what will happen to the development of new "personalized medicine" that targets only a few individuals if the government requires that everything work the same way for everybody.

**21. "The government should spend billions more on medical research to cure more diseases."**

When you hear this, point out the most distinguishing factor of government medical research: it never has to actually get results. Private research is always more efficient and gets results because it has to in order to pay for itself. Also point out that government research funds are often allocated to "politically correct" diseases based on the political pull of the constituents for those diseases, rather than to areas that are more auspicious for research. Invested funds are always more productive than dollars taken from taxpayers.

**22. "Will not the commitment of President Obama in his 2009 address to Congress to eliminate cancer save many lives?"**

Ask if the increased funding of \$2.9 billion to the National Cancer Institute, with President Clinton's commitment to eliminate cancer, eliminated cancer. Ask if President Nixon's commitment to eliminate cancer, with the major new research in the National Cancer Act of 1971, eliminated cancer. Ask why, if government spending can be depended on to eliminate a disease, the President did not pledge new spending to eliminate death.

**23. "The government can rapidly cut the cost of health care by mandating electronic medical records."**

Ask how that will reduce the cost of treatment, medical equipment, drugs, physician services or any other health costs. Ask if the increase of electronic records that has been happening for many years has had any substantial impact on rising costs. Ask how, if all medical records are included into a single, government database, with access available to hundreds of thousands of workers in medicine and related fields, there will be any medical privacy possible. Ask why creating electronic records require that all of your medical records must be turned over to the government without your permission. Ask why the new "national

coordinator" will be able to review your records to evaluate and require changes in the treatment recommended by your physician. Ask why this national coordinator will be able to turn your records over to any organization for "research," without your permission, or sell your records to outside businesses for marketing purposes, without your permission, or why the Secretary of Health and Human Services will be able to turn your records over to anyone for any purpose, without your permission. Ask anyone if they think their physician will be able to recommend a treatment for them if inspection of medical records resulted in a rebuke by the national coordinator for providing the same treatment to other patients.

**24. "Health care is broken."**

First ask yourself if you think your own health care is broken. If it is, ask who broke it. If the answer is the regulatory and legislative activity of politicians, ask how they can be trusted to fix it. Ask if the reform they advocate will be in their own political interest or in the interest of the best health care.

**25. "Government programs such as Medicare and Medicaid cut medical costs by controlling and reducing reimbursements paid to physicians and hospitals and other providers."**

Ask what happens when providers are forced to provide services at a rate that does not cover their costs. We have decades of experience with that. They must shift those costs to other patients and private insurers, which increases the cost of health care and insurance for everyone.

**26. "Mandatory insurance is the best course of health care policy because it supports individual responsibility."**

When you hear this, ask if it should also be mandatory to buy a nice house and take out a big mortgage to solve housing problems. Ask if making the lack of insurance into a crime has anything to do with individual responsibility. Ask how destroying

individual rights supports responsibility. Ask if the purchase of something is made mandatory, will that make it cheaper, or more expensive. Ask if politicians who use the force of law to require you to buy health insurance will be able to resist micro-managing exactly what such insurance must cover. Ask how special interests will use the mandate to make contributions to politicians and lobby to add more coverage requirements for their benefit. Ask why politicians, like former Senator John Edwards, also want to require, through such mandates, that everyone get specific examinations. Ask how such requirements will be enforced and what it will do to the privacy of medical records. How does being forced by the government to do things increase individual responsibility? Why not encourage freedom?

**27. "The government should require the computerization of all medical records, which should then be made available to the government to ensure their privacy."**

Ask why the same people that are terrified (perhaps with justification) of the government intercepting some international phone calls have no problem with giving the government every personal detail of your medical history.

**28. "We need Universal Health Care."**

The best response to whatever that means is that "Universal Freedom" is the best and only effective means to maintain our health, our lives and anything else that we value.

**29. "We need to trust the government to provide us with the best medical care."**

Ask if we *really* trust the loving arms of government to provide us with the best medical care. Ask if government health care does not often turn into political health care, to serve the spoils system of politicians and provide service primarily to those special interests with political pull.

**30. "Only government can reduce the cost of health care."**

Ask why every government health care system in the world reduces cost only by reducing the availability of health care and increasing rationing and the time spent on waiting lists for referral to specialists, diagnosis and treatment, and by denying access to some medications, testing and treatment completely.

**31. "People need health care, so health care is a right that must be provided to them by others."**

The response must be that everyone has a right to *seek* health care, to make their own decisions about it, and even to ask others for it if they can't get it. But no one has a right to anyone else's life.

**32. "Health care spending can be reduced by providing insurance to everyone, because costs now incurred by the uninsured will no longer be passed along to the rest of us."**

Ask how those savings can be achieved without spending as much or probably more to pay for the insurance.

**33. "Health care spending can be reduced by mandating that everyone buy insurance."**

Ask, if this is true, why mandatory insurance in Massachusetts resulted in rapidly increasing spending beyond all projections. Ask why Medicare, which is mandatory for all Americans, has seen rapidly increased spending beyond all expectations, has \$36 trillion in unfunded liabilities and is rapidly running out of money.

**34. "The State Children's Health Program is necessary to provide children with health care."**

Ask why it is necessary to move millions of children who have private insurance into a government program, if not to make them dependent on politicians handing out benefits. Ask

why the program slips in restrictions on opening more efficient specialty hospitals, if not to protect the special interest of large hospital empires. Ask how the program will be funded once income from the tax on a rapidly diminishing pool of smokers runs out.

**35. "A Federal Health Board is required to control expense and require better health care."**

Nearly one hundred years ago the Federal Reserve System with a Federal Reserve Board was established to insure a stable money supply and eliminate recessions, depressions, inflation, and unemployment. Ask how the Federal Reserve Board has done with that. Ask why we should expect more of a Federal Health Board. Based on experience, what could possibly go wrong?

**36. "Medicare should be expanded to cover all Americans."**

Ask how Medicare can do that when it already has tens of trillions of unfunded liability for current Medicare patients and has not been able to control spending for them.

**37. "Only government can control health care spending and hold costs down."**

Ask why, based on more than two hundred years of experience, we should think that the government can hold down the cost of anything. Ask why the government cannot do as good a job at providing affordable primary care as new walk-in clinics in retail stores. Ask why Wal-Mart and its competitors have done more to reduce the cost of generic drugs than any government program.

**38. "Only the government can guarantee quality health care."**

Ask if the U.S. Postal Service provides better and more affordable delivery than FedEx or UPS. Ask if public schools and teacher unions guarantee better or even more affordable education for children than

private and parochial schools. Ask if government-run hospitals provide better care than private commercial and non-profit hospitals.

**39. "The government can require American medicine to concentrate on wellness."**

Ask if most government systems don't concentrate instead on rationing. Ask if a wellness approach will help those on waiting lists for months or years for medical diagnostic equipment, access to specialists or surgery.

**Fighting for the Future**

The specific issues addressed above do not offer much hope for the level of the current discussion on health care in America. Restoring free choice and free markets in medicine will clearly be an uphill struggle. That must not discourage us. In a letter to a fan of *The Fountainhead* in 1945, Ayn Rand wrote:

"Free enterprise as a system may be wiped out for a while by fools, cowards and secondhanders—but its spirit (Individualism, which means Man's spirit) cannot be destroyed, it will go on and win in the end, even if it takes centuries, as it has always won in the past. Because individualism is the only thing that works or can work." (*Letters of Ayn Rand*, Michael S. Berliner, Ed., p. 225).

The first step in restoring individualism as the basis for medical care is to speak out. Silence implies consent, and we must never be silent in the face of collectivist propaganda. We can relentlessly point to the facts that demonstrate collectivism does not work, and make clear that it *cannot* work because it is immoral.

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