

Tiergarten IV Remains Obama's Fiscal Priority

April 22—Two years after he put forward the health program which Lyndon LaRouche identified as a replica of Adolf Hitler's scheme for eliminating "useless eaters," Tiergarten IV, and earned himself his famous Hitler mustache, President Barack Obama is once more stumping for cuts in the health care for the chronically ill and elderly, as a means of allegedly balancing the budget. Obama used the occasion of the rollout of his 2012 budget, to emphasize that it is cuts in health care, specifically through the death panel called the Independent Payments Advisory Board (IPAB), that he is depending on to deal with the "deficit problem."

Neither Obama's genocidal cuts, nor those of the Paul Ryan Republicans, will solve any fiscal crisis, of course. Repairing the U.S. budget problems could only occur as a result of two measures: first, adoption of FDR's Glass-Steagall law to eliminate the trillions of dollars in obligations which the U.S. government, i.e., the taxpayers, have taken on in the bailouts of the financial predators who caused the 2008 blowout; and two, use the restored *credit* of the United States and its banking system to invest in massive infrastructure projects that will create millions of jobs, thus rebuilding the tax base.

As a de facto British puppet, and a crazy one at that, Obama is committed to preventing both of these measures, as more and more of the traditional Democratic Party constituencies are coming to recognize. They should have faced that reality two years ago.

IPAB Squared

Despite substantial opposition on both sides of the aisle, the Obama Administration rammed through a provision in the health-care law which establishes an "expert" panel, IPAB, which will rule on which treatments will be paid for, and which not. While couched in terms of preventing a waste of funds, and providing "quality" care, this program is explicitly committed to one bottom line: *cutting* Medicare spending by hundreds of billions of dollars. To ensure the cuts are made without interference, IPAB's recommendations are to be law, unless Congress musters the guts to overturn them.

Obama calls it "strengthening" Medicare. He might as well call it "strength through joy."

IPAB is not scheduled to go into effect until 2014, but Obama can hardly wait. In his budget speech, and the accompanying documentation, he laid out new guidelines for IPAB's functioning, which would permit it to further tighten the screws on medical spending.

The President devoted only three sentences to the subject in his speech: "And we will slow the growth of Medicare costs by strengthening an independent commission of doctors, nurses, medical experts, and consumers, who will look at all the evidence and recommend the best ways to reduce unnecessary spending while protecting access to the services seniors need. Now, we believe the reforms we've proposed to strengthen Medicare and Medicaid will enable us to keep these commitments to our citizens while saving us

\$500 billion by 2023, and an additional \$1 trillion in the decade after that. And if we're wrong, and Medicare costs rise faster than we expect, this approach will give the independent commission the authority to make additional savings by further improving Medicare."

In the accompanying Fact Sheet, the plan is elaborated in some detail, as follows:

"The President's framework proposes specific reforms to strengthen Medicare and Medicaid over the long term, including:

"Addressing the long-term drivers of Medicare cost growth: The President's framework would strengthen the Independent Payment Advisory Board (IPAB) created by the Affordable Care Act. The IPAB has been highlighted by economists and health policy experts as a critical contributor to Medicare's solvency and sound operations. Under the Affordable Care Act, IPAB analyzes the drivers of excessive and unnecessary Medicare cost growth. When Medicare growth per beneficiary exceeds growth in nominal GDP per capita plus 1 percent, IPAB recommends to Congress policies to reduce the rate of growth to meet that target, while not harming beneficiaries' access to needed services. Congress must consider IPAB's recommendations or, if it disagrees, enact policies that achieve equivalent savings. If neither acts, then the Secretary of Health and Human Services would have to develop and implement a proposal to achieve the savings target.

"The President's framework will strengthen IPAB to act as a backstop to the other Medicare reforms by ensuring that Medicare spending growth does not outpace our ability to pay for it over the long run, while improving the program and keeping Medicare beneficiaries' premium growth under control. Specifically, it would:

"Set a new target of Medicare growth per beneficiary growing with GDP per capita plus 0.5 percent. This is consistent both with the reductions in projected Medicare spending since the Affordable Care Act was passed and the additional reforms the President is proposing.

"Give IPAB additional tools to improve the quality of care while reducing costs, including allowing it to promote value-based benefit designs that promote proven services like prevention without shifting costs to seniors.



EIRNS/Will Mederski

Obama's continued stumping for his IBAP death panel ensures that the mustache will remain stuck on his face.

"Give IPAB additional enforcement mechanisms such as an automatic sequester as a backstop for IPAB, Congress, and the Secretary of Health and Human Services."

The Intent Is Clear

You have to be delusional not to read the genocidal intent in the above document. Just as under Hitler, the purpose here is to *cut* expenditures, by setting an arbitrary goal, and then forcing Congress to go along. Remember, Hitler called the first phase of his genocide program providing for "mercy deaths." Here, the Obama Administration calls for eliminating "unnecessary" care—by which they mean it costs too much!

The President himself broached this subject during

his speech at Facebook headquarters on April 20. After a discussion about his cost-savings plan versus that of the Republicans, he suddenly brought up the subject of death panels:

“So, we think that’s a better way of doing it. Now, what they’ll say is, ‘well, you know what, that will never work because it’s government imposed and it’s bureaucracy and it’s government takeover and there are death panels.’ I still don’t entirely understand the whole ‘death panel’ concept. But I guess what they’re saying is somehow some remote bureaucrat will be deciding your health care for you. All we’re saying is if we’ve got health care experts—doctors and nurses and consumers—who are helping to design how Medicare works more intelligently, then we don’t have to radically change Medicare.”

Indeed, it’s precisely those “health care experts,” assembled on IPAB and other panels, who are being set up to decide how to “intelligently” cut costs—and sentence millions of the chronically ill to death. Obama understands perfectly well. He just happens to be for it.

Will Congress Respond?

Bills have been introduced in both the House of Representatives and the Senate to repeal the IPAB portion of Obama’s health-care abomination. H.R. 452, sponsored by Rep. Phil Roe (R-Tenn.), has more than 70 co-sponsors, including four Democrats. The most recent signer is Pennsylvania Democrat Rep. Alysson Schwartz, a supporter of Obamacare, who has sent out a “Dear Colleague” letter to recruit others to join her in opposing IPAB.

Schwartz cites Congress’s Constitutional authority as the first reason to repeal the program. “Congress is a representative body and must assume responsibility for legislating sound health care policy for Medicare beneficiaries, including those policies related to payment systems,” she wrote. “Abdicating this responsibility, whether to insurance companies or an unelected commission, would undermine our ability to represent the needs of the seniors and disabled in our communities.”

Rep. Pete Stark (D-Calif.), who has not signed on to the repeal bill, has also excoriated the IPAB. He asked: “Why have legislators?” “In some ways,” Stark said, “expanding the power of the board could be as bad as giving vouchers to Medicare beneficiaries to buy private insurance. In theory at least, you could set the vouchers at an adequate level. But, in its effort to limit

the growth of Medicare spending, the board is likely to set inadequate payment rates for health care providers, which could endanger patient care.”

On the Senate side, 15 Republicans have co-sponsored a bill to repeal IPAB introduced by Tom Coburn (Okla.), and Orrin Hatch (Utah).

Many institutions representing health-care constituencies and professionals—who are expected to see their reimbursements cut even further below the currently obscenely inadequate level—are also actively organizing to repeal IPAB. These include the American Health Care Association, AARP, the American Medical Association, and the American Hospital Association.

Obama’s April 13 budget speech elicited new criticisms from major medical associations that oppose IPAB. American Hospital Association president and CEO Rich Umbdenstock said: “America’s hospitals support the repeal of IPAB because its existence permanently removes Congress from the decision-making process, and threatens the important dialogue between hospitals and their elected officials about the real health-care needs of their communities. Expanding IPAB adds to that problem.”

Ardis D. Hoven, M.D., chair of the American Medical Association, said, “We have strong concerns about the potential for automatic, across-the-board Medicare spending cuts because they are not consistent with meeting the medical needs of patients, which is our primary focus. The AMA urges President Obama and Congress to work with the medical profession on patient-centered reforms.”

No Consensus

It is obvious that the fight against Obama’s murderous health-care policy cannot be won as a single issue, no matter how correctly and passionately put. The principle of defending human life from monetarist depredation has to be restored, not only in health care, but in every aspect of the economy. It means restoring a *credit* system, in which investment is judged by its contribution to increasing mankind’s power over nature in the long term—the direct opposite to the cost-accounting budget games that dominate today’s discussion. It means rejecting the canard that Medicare and Medicaid spending are the *cause* of the current deficit, as the genocidal ruse it is.

The fight against IPAB has to be an included part of the main fight to restore Glass-Steagall. It is by that, that Congress will be judged.