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NATIONAL RIGHT TO LIFE COMMITTEE MEDICARE BILL ENDORSEMENT

Dear Representative:

Because it enables older Americans to escape rationing of life-saving medical treatment, the National Right to Life Committee urges you to vote for the Medicare conference report and will include the roll call in its scorecard of key pro-life votes for the 108th Congress.

Since its inception, the National Right to Life Committee has been committed to protecting the right to life from conception until natural death, which means that we have fought just as strongly against infanticide and euthanasia as against abortion. In particular, we have strongly opposed *involuntary* denial of life-saving medical treatment through rationing. It was for this reason that we strongly opposed the premium cap price controls of the Clinton Health Care Plan.

For almost ten years, NRLC has been striving to educate Members of Congress and the general public about the critical importance of restructuring Medicare in order to avoid the preventable deaths, because of rationing, of uncountable numbers of senior citizens.

NRLC takes no position on the appropriate level of government funding for health care, including Medicare, *so long as* Americans are left free, if they wish, to make up government shortfalls with their own funds and to have the legally available choice of unrationed, un-managed health insurance. The conference report fundamentally advances this critically important way of avoiding involuntary denial of life-saving treatment.

The economic reality is that in order to provide Medicare coverage for the baby boom generation as it retires, without massive future tax increases, government payments per beneficiary will not be able to keep up with medical inflation. If the funds available for health care for senior citizens *from all sources* are so limited, the only possible result will be rationing. Since senior citizens are required to participate in Medicare, this would amount to government-imposed involuntary euthanasia.

Under the Medicare bill as reported from conference, there is an escape valve—an alternative to rationing that does not either break the budget or require new taxes. That alternative – the private fee-for-service option – permits those eligible for Medicare voluntarily to supplement government payments for health insurance premiums with their own funds, if they wish, in order to obtain unrationed insurance.

This is comparable to the way in which most retirees supplement government Social Security payments for living expenses with their own funds. (Material on our

website, www.nrlc.org, details why 1) contrary to much conventional wisdom, Americans as a whole *can* afford unrationed – and steadily improving – health care and 2) why permitting those who can afford to do so to add their own money, if they wish, will increase the resources available to health care providers so that they can and will provide uncompensated and undercompensated care to those who cannot afford to add their own money.)

Of critical importance in the conference report, the government is not permitted to impose premium price controls on this option through “negotiation” or the power to disapprove premiums. Only the market will regulate plan’s cost, which means there will be no government barriers to obtaining insurance that provides unrationed lifesaving medical treatment. The bill applies this approach both to the underlying coverage of core Medicare benefits and to the new prescription drug benefit.

The pro-life movement has always emphasized the primacy of the life-and-death issues of abortion, infanticide, and euthanasia. We recognize that there are other aspects of the bill concerning which there has been much debate. However, because of the critical importance of those aspects of the bill that make avoidance of rationing possible for our senior citizens, and because they can become law only if the bill passes, we respectfully ask you to vote to enact it.

Very truly yours,

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