

NRLN President's Forum

Re-Characterizing Old News To Be New News

In July 2010, NRLN Grassroots Network Members were sent a Health Reform Implementation Timeline published by the Kaiser Family Foundation that provided a very concise description of the Affordable Care Act and when its elements would be implemented. [Click here to review that document](#) as we approach a virtual tsunami of changes coming in 2013 and 2014.

Major newspaper and magazine writers and political rags will be re-characterizing old news to be new news, and both left and right political spin will resurrect old arguments and bitter politicking.

Forbes' Political Slant:

One such article appeared in Forbes magazine on February 19th that serves to make the point that politicking has already begun. In the article's opening paragraph, the author wrote:

"Though Democrats denied it during the 2012 campaign, Obamacare cut Medicare by \$716 billion in order to partially fund \$1.9 trillion in new entitlement spending over the next ten years. A big chunk of those Medicare cuts came from the market-oriented Medicare Advantage program. Cleverly, the Obama administration postponed the Medicare Advantage cuts until after the election, so as to persuade seniors that everything would be just fine. But the election is over. On Friday, the administration announced that it would be significantly reducing funding for the popular program."

The Facts Are:

More than a quarter of Americas' seniors participate in Medicare Advantage plans administered by private health care insurance companies. The Centers for Medicare and Medicaid Services (CMS) has announced that as a result of provisions in the Affordable Care Act, it will reduce by 7 to 8% the 12 to 17% subsidies paid to health care insurance companies that provide Medicare Advantage plans.

Unless insurance companies that provide Medicare Advantage plans cut costs, overhead or price margins, older Americans with Medicare Advantage plans are likely to encounter increased prices in 2014 for premiums, deductibles, co-pay or co-insurance. Medicare Advantage Plan participants' choices are Medicare Advantage, traditional Medicare A, B or C or other open market health care plans.

The NRLN's position has been that health care insurance companies that provide Medicare Advantage plans should compete without subsidies. If private health care insurance companies can take business from Medicare on an even playing field, they deserve the business.

Caution When You Read Articles:

So, beware when you read articles about what's coming in 2013 and 2014. Consult the NRLN website at <http://www.nrln.org/> to review our Legislative Agenda to read what we have said about various subjects affected by the Affordable Health Care Act.

In the interest of full disclosure we will continue to post articles that may oppose the NRLN's positions, so please understand that posting them does not mean we agree with them. It is up to you to know what affects you personally and to check out what the NRLN has reasoned, and it is up to us to make you aware of our positions. Where you want to take exception, go to

<http://www.nrln.org/Feedbackform.php> to send us your comments. Or go to <http://www.nrln.org/> and click on the "Contacts" tab and select "Contact The NRLN."

Also under the "Contacts" tab is the link to our "Useful Links" webpage. I thought you would be interested in knowing that the NRLN recently added the link to <http://www.opensecrets.org/> , a comprehensive resource for federal campaign contributions, lobbying data and analysis. The website is fairly easy to navigate and will provide you with insights into who is making contributions to members of Congress. The NRLN does not make political contributions or wine and dine politicians. We believe that the proposals in our Legislative Agenda that are backed up by our extensively researched white papers should stand on their merits with our elected representatives.

Bill Kadereit, President

National Retiree Legislative Network