

With a faltering economy, and skyrocketing costs, healthcare continues to be a critical issue for all Americans. Unfortunately government encroachment into the doctor/patient relationship is poised to exacerbate our problems with healthcare.

As an OB/GYN with over 30 years of experience in private practice, I understand that one of the foundations of quality healthcare is the patient's confidence that all information shared with his or her healthcare provider will remain private. And yet, the Federal Government plans to undermine this trust with establishment of mandatory electronic medical records collections and "unique health identifier" numbers assigned to all Americans. Funding for this program was among the numerous provisions jammed into the stimulus bill rushed through Congress earlier this year.

Electronic medical records that are part of the federal system will only receive the protection granted by the federal “medical privacy rule.” This misnamed rule actually protects the ability of government officials and state-favored special interests to view private medical records without patient consent.

Aside from those concerns, the government’s ability to protect medical records is highly questionable. After all, we are all familiar with cases where third parties obtained access to electronic veteran, tax, and other records because of errors made by federal bureaucrats. We should also consider the abuse of IRS records by administrations of both parties. What would happen if unscrupulous politicians gained the power to access their political enemies’ electronic medical records?

For these reasons I have introduced the Protect Patients' and Physicians' Privacy Act, HR 2630, which allows patients and physicians to opt out of any federally mandated, created, or funded electronic medical records system. The bill also repeals sections of federal law establishing a "unique health identifier" and requires patient consent before any electronic medical records can be released to a 3rd party.

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I have also introduced the Coercion is Not Health Care Act, HR 2629. This legislation forbids the federal government from forcing any American to purchase health insurance, or conditioning participation in any federal program on the purchase of health insurance. Forcing Americans to purchase government-approved health insurance is a back door approach to creating a government-controlled healthcare system.

Congress would define what policies and coverage requirements satisfy their mandate.

Does anyone then doubt that what conditions and treatments are covered would be determined by who has the most effective lobby?

Or that Congress would be capable of writing a mandatory insurance policy that fits the unique needs of every individual in the United States?

With these conditions in place, I foresee the eventual imposition of

price controls and limitations on what procedures and treatments that are covered. This will result in an increasing number of providers turning to “cash only” practices, making it difficult for those relying on the government-mandated insurance to find healthcare – the exact opposite of the desired result! Consider the increasing number of physicians who are already withdrawing from the Medicare program because of the low reimbursement and constant bureaucratic harassment from the Centers for Medicare and

Medicaid Services.

Congress should put the American people back in charge of healthcare by expanding healthcare tax credits and deductions, increasing access to Health Savings Accounts, respecting privacy and the doctor/patient

relationship. Further politicizing and bureaucratizing of healthcare will only increase costs and reduce quality, as demonstrated by most other countries with socialized medicine.