CORY WILSON

You don't want to know what's in it

Chief Justice Roberts' opinion upholding the Affordable Care Act (aka, Obamacare) has sunk in a bit now, even if the reasoning behind the Supreme Court's decision is still hotly dehated.

The Court's opinion that Obamacare is constitutional has done one potentially good thing. To paraphrase that enlightened Constitutional scholar, former House Speaker Nancy Pelosi, now that the Court has passed on the bill, we "can find out what is in it."

You don't want to know. But you need to know, for November,

What is "in it" is a massive, unworkable intrusion by the federal government into one sixth of our economy (the same economy which has all but suffocated under Obama's other policies). More than that, according

to an actual constitutional scholar, Justice Anthony Kennedy, Obamacare "changes the relationship of the Federal Government to the individual in [a] very fundamental way."

Consider: the new law calls for the addition of some 16,000 new IRS agents, who will be added to the bureaucracy to enforce the individual mandate that all Americans buy insurance, or pay the tax/penalty/"shared responsibility payment" (seriously, that's what the law calls it; with a bow to Shakespeare, this rose stinks, by whatever name).

Well, the Supreme Court made clear that the mandate is a huge new tax, mostly hitting the middle class. So maybe it is fitting for the IRS to enforce it. But also consider that means on our tax returns, we will have to supply proof of adequate health

insurance, as determined by our IRS friends. One more administrative burden; one more burdensome access to personal information. It is an easy step to suppose that in time, the IRS will have access to our health records, in order to prove what tax, er, penalty, we owe.

Then, of course, there are the other taxes. Taxes on tanning beds may be no big deal to you. But how about taxes on health savings accounts, medical devices, and surcharges on the "wealthy"? They're all "in it." The IRS will have to administer some 47 new taxes, subsidies, and transfers, on top of an already incomprehensible tax code. It is as if no one, including President "The Law I Passed" Obama and the Democratic Congress who forced this onto the country, thought about how

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actually to enforce the law. Worry not: the almighty Secretary of Health and Human Services will implement as she goes.

The Supreme Court opened a gaping hole in the law by ruling that the federal government could not force states to expand their Medicaid programs to cover a large percentage of Americans who currently lack coverage. States now face a choice, a non-choice really: expand their already ballooning Medicaid programs with temporary federal funding help the first couple years, or keep their budgets solvent.

Governor Bryant has already stated that he is opposed to expanding Mississippi's Medicaid program. Rightly so. We simply cannot afford it. Under Obamacare's Medicaid expansion, Mississippi's Medicaid rolls could swell to over a million people, a third of the state. According to the Heritage Foundation, adding an estimated 206,000 to 415,000 people to Medicaid would carry a 10-year impact on the state budget of between \$858 million and \$1.66 billion.

Many other states will have to do the same. That means all those people who would gain coverage via Medicaid will not gain coverage, undoing the rationale for enacting Obamacare in the first place. It also exposes the fraud of Obamacare's "deficit reducing" cost estimates used by Obama & Co. to push the law's passage. The federal price tag for Obamacare has already been raised by the Congressional Budget Office in March 2012 to top \$1.1 trillion over ten years. That projection shifted significant costs to the states through the forced Medicaid expansion. Now, states can

shift costs right back.

Then there are the insurance "exchanges" that each state is required to implement. The way the law is supposed to work, states are to set up exchanges to create a "market" for insurance at lower prices. If states do not set up exchanges, the federal government can step in and do so. Seventeen states, 18 now that Mississippi Insurance Commissioner Mike Chaney has halted our implementation, have refused to act. But the feds have no money or contingency plans for stepping in. Parts of Obamacare cannot be enforced without exchanges.

So we begin to see "what is in it." And that is why, contrary to Ms. Pelosi and President Obama's fondest hopes, Americans grow more opposed, not less.

Cory T. Wilson of Madison is an attorney with the firm of Heidelberg Steinberger Colmer & Burrow. To contact Cory, email cory@corywilson.ms.