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“If You Like Your Insurance, You Can Keep Your Insurance”

1.1. “HARRY AND LOUISE”

The story of Obamacare begins with Hillarycare. Shortly after his inauguration, Clinton established the Task Force on National Health Care Reform, which would be chaired by First Lady Hillary Rodham Clinton.¹ With a nod to President Franklin Roosevelt’s blitz of progressive reform, the Task Force’s mission was to “prepare health care reform legislation to be submitted to Congress within 100 days of our taking office.”² Mrs. Clinton set out to develop a plan to provide universal health care for all Americans. Thomas Friedman wrote in the *New York Times* that it was “the most powerful official post ever assigned to a First Lady.”³ In a preview of the health care lawfare to come, the First Lady’s participation in the Task Force’s closed-door meetings was temporarily enjoined by a federal court – a decision that was later reversed on appeal.⁴

¹ Adam Clymer et al., *The Health Care Debate: What Went Wrong? How the Health Care Campaign Collapsed – A Special Report; For Health Care, Times was a Killer*, N.Y. TIMES (Aug. 28, 1994), nyti.ms/hQNAC7l.

² William J. Clinton, Remarks and an Exchange with Reporters on Health Care Reform (Jan. 25, 1993), perma.cc/E4H7-736Y.

³ Thomas L. Friedman, *Hillary Clinton to Head Panel on Health Care*, N.Y. TIMES (Jan. 25, 1993), nyti.ms/hQNAJj7.

⁴ On March 10, 1993, U.S. District Judge Royce Lamberth granted a preliminary injunction to halt the Task Force’s meetings, finding that because Clinton was not a government employee, the Task Force could not convene behind closed-doors. Four months later, the D.C. Circuit Court of Appeals reversed and ruled that the First Lady was considered a government official and therefore the Task Force did not have to comply with the federal open meetings law. *Ass’n of Am. Physicians & Surgeons, Inc. v. Clinton*, 813 F. Supp. 82, 83 (D.D.C.) *rev’d*, 997 F.2d 898 (D.C. Cir. 1993). Four years later, long after the Health Security Act was defeated, Judge Lamberth once again ruled against the Task Force, criticizing it for “[a]cting dishonestly.” The D.C. Circuit, again, reversed the judgment. *Ass’n of Am. Physicians & Surgeons, Inc. v. Clinton*, 989 F. Supp. 8, 15 (D.D.C. 1997) *rev’d*, 187 F.3d 655, 656 (D.C. Cir. 1999).

In September 1993, Mrs. Clinton asked Congress to join her and the president to “give the American people the health security they deserve,” so that “every American will receive a health security card guaranteeing a comprehensive package of benefits that can never be taken away under any circumstance.”⁵ Under the proposed *Health Security Act*, all citizens would be required to enroll in a health plan.⁶ Those with low incomes would pay nothing to enter these plans. The cornerstone of the Act was a requirement for employers to provide health insurance for their employees – a precursor to the so-called employer mandate. Dubbed by critics as *Hillarycare*, this proposal would be Clinton’s first, but not last, attempt at reforming the American health care system. During her 2008 and 2016 campaigns for the presidency, she would often boast of the “scars from that experience.”⁷

The immediate reaction to the plan was mixed. A poll conducted by *Time* in September 1993 found that the public was conflicted: 20% reported that the plan would make their families better off, 21% said it would make them worse off, and 57% felt they would be unaffected.⁸ The tepid support would soon be replaced by broad opposition.

That month, the Health Insurance Association of America – the health insurance lobbying group – launched a \$20 million advertising campaign to attack *Hillarycare*. The group aired a series of commercials depicting a husband and wife, named Harry and Louise, sitting at a kitchen table. As they pored over the details of the thousand-page bill, they worried about its impact on their finances and coverage.⁹

In one commercial, the phrase, “Sometime in the future” flashed across a black background, as slow piano music played. Louise, looking at a stack of bills, worries, “This was covered under our old plan.” Harry answers, “Oh yeah, that was a good one, wasn’t it?” A narrator intones, “Things are changing and not all for the better. The government may force us to pick from a few health care plans designed by government bureaucrats.” Louise explains, “Having a choice we don’t like is no choice at all.” Harry begins, “They choose,” and

⁵ Adam Clymer, *CLINTON’S HEALTH PLAN*; Hillary Clinton, *on Capitol Hill, Wins Raves, if Not a Health Plan*, N.Y. TIMES (Sept. 28, 1993), nyti.ms/hW3vohD.

⁶ Health Security Act, H.R. 3600, 103rd Cong. (1994), perma.cc/CGC4-8TJN.

⁷ Mark Leibovich, *Clinton Proudly Talks of Scars While Keeping Her Guard Up*, N.Y. TIMES (Dec. 9, 2007), nyti.ms/iTqfzrm; see also Mark Leibovich, *Re-Re-Re-Reintroducing Hillary Clinton*, N.Y. TIMES MAG. (Jul. 15, 2015), nyti.ms/irqYQQ9.

⁸ *Pulling It Together: What Will Health Care Reform Do for Me?*, KAISER FAMILY FOUNDATION (Feb. 24, 2009), perma.cc/C8KA-46TL.

⁹ “Harry and Louise” Health Care Ads (Clinton Administration), YOUTUBE (Aug. 26, 2014), youtu.be/Cd_xPNT1Fh8.

Louise finishes her thought, “We lose.” The narrator returned, “If we let the government choose, we lose.”¹⁰

New rounds of commercials reinforced the same theme that the Health Security Act would limit choice and force the couple to lose their existing coverage. In one spot, Louise worries about “rationing” and “long waits for health care.”¹¹ In another spot, Louise tells her co-worker that “Congress may load a bunch of new taxes for their health-care plan, *including* a tax on plans they think are too expensive.”¹² (This proposal would return as the Affordable Care Act’s unpopular “Cadillac Tax,” which at the urging of candidate Hillary Clinton, was delayed until 2020.) In another commercial, Louise laments, “The government caps how much the country can spend on all health care and says: ‘That’s it!’ There’s got to be a better way.” The messaging was clear: Americans wanted to keep their plans and did not want government to control the availability of options.

The year long advertising campaign was seen as a “‘catalyst’” in “grabb[ing] control of the debate” over health care reform.¹³ In less than a year, surveys showed that Americans who thought the law would make them worse off jumped from 21% to 37%.¹⁴ “People feared the Clinton proposal might force them out of their current health care arrangements,” The Kaiser Family Foundation observed.¹⁵ “That was undoubtedly a factor in undermining the plan.” The commercials were so effective that President Clinton recorded a Democratic National Committee–sponsored response.¹⁶ “Many of you still have doubts about reform and I sure can understand why,” Clinton related.¹⁷ “I see the same TV ads you do.” The president observed, “Never in the history of the Republic has so much money been spent to defeat an idea.”¹⁸

During the January 1994 State of the Union address, the White House sought to assuage fears that Americans would lose their choice of doctors. An early draft of President Clinton’s address offered this assurance: “You’ll pick the health plan and the doctor of your choice.”¹⁹ However, that wasn’t quite right. White

¹⁰ *Id.*

¹¹ PAUL RUTHERFORD, *ENDLESS PROPAGANDA: THE ADVERTISING OF PUBLIC GOODS* 247 (2000).

¹² *Id.*

¹³ *Id.* at 248.

¹⁴ *Pulling It Together*, *supra* note 8.

¹⁵ *Id.*

¹⁶ RUTHERFORD, *supra* note 11, at 249.

¹⁷ *Id.*

¹⁸ *Id.*

¹⁹ *In a Memo from 1994, An Aide to Bill Clinton Warns About Over-promising on Health Care Reform*, WALL ST. J. (Feb. 28, 2014), perma.cc/6CMY-L5T3.

House aide Todd Stern wrote a memo urging the president to drop this promise, as it was impossible to keep:

This sounds great and I know that it's just what people want to hear. But can we get away with it? Isn't the whole thrust of our health plan to steer people toward cheaper, HMO-style providers? It's one thing to say we'll preserve your option to *pick the doctor of your choice* (recognizing that this will cost more), it's quite another to appear to promise the nation that everyone will get to *pick the doctor of his or her choice*. And that's exactly what this line does. I am very worried about getting skewered for over-promising here on something we know full well we won't deliver.²⁰

The White House chose not to overpromise and underdeliver. The line about the “doctor of your choice” didn't make it into the final speech. Instead, President Clinton explained that under his plan, Americans would have the “freedom to choose a plan and the right to choose your own doctor.”²¹ Being *free to choose your own doctor*, at whatever cost, is very different than picking and keeping the *doctor of your choice*. This exact same choice would be described quite differently by the Obama administration in 2009.

Facing massive resistance from Senate Republicans – and rising public opposition – the Health Security Act withered. In August 1994, Senate Majority Leader George Mitchell realized that he lacked the votes to pass the bill, and he could not stop a GOP-led filibuster. Ironically, Mitchell had declined President Clinton's offer to appoint him to replace the retiring Justice Harry Blackmun, in order to ensure the passage of the Health Security Act.²² Instead, Clinton picked Stephen G. Breyer. Though not the President's first or second choice – Interior Secretary Bruce Babbitt and Eighth Circuit Judge Richard S. Arnold were – Breyer was, in the words of White House counsel Lloyd Cutler, “the one with the fewest problems.”²³

²⁰ *Id.*

²¹ 1994 *State of the Union Address*, WASH. POST (Jan. 25, 1994), perma.cc/B6RF-ZJ7T.

²² Alex Altman, *Middle East Envoy George Mitchell*, TIME (Jan. 22, 2009), ti.me/297sodd.

²³ Gwen Ifill, *The Supreme Court; President Chooses Breyer, as Appeals Judge in Boston, for Blackmun's Court Seat*, N.Y. TIMES (May 14, 1994), nyti.ms/1SGhOfV. At the time, not everyone was as enthused with Breyer. Tom Perrelli, who would later serve as Deputy Attorney General for President Obama wrote, “Nothing in Judge Breyer's opinions suggests that he would be a great Supreme Court justice.” Colby Itkowitz et al., *The Most Interesting Tidbits from the Clinton Document Dump (Part 50)*, WASH. POST (Jun. 6, 2014), perma.cc/29XE-DCSK. Ian Gershengorn, who became Obama's Acting Solicitor General, wrote, “There is very little heart and soul in Judge Breyer's opinions. Quite clearly, he is a rather cold fish.” Ed Whelan, *Deputy Solicitor General: Breyer Is a Rather Cold Fish*, NAT'L REV. (Jun. 9, 2014), perma.cc/3FAY-UL4T. A decade later, both Gershengorn and Perrelli would reunite to defend the Affordable Care Act in the lower courts. JOSH BLACKMAN UNPRECEDENTED: THE CONSTITUTIONAL CHALLENGE TO OBAMACARE 64, 74, 80, 81, 99, 101 (2013).

By September 1994, Hillarycare was officially dead. Partly as a result of opposition to the Health Security Act, Republicans took the House of Representatives for the first time in four decades.²⁴ Evan Thomas wrote in *Newsweek*, “The 1994 mid-term election became a ‘referendum on big government’ – Hillary Clinton had launched a massive health-care reform plan that wound up strangled by its own red tape.”²⁵ The Republicans now had control of both the House and the Senate, ending the Clinton administration’s hope of bringing about health care reform. That goal would have to wait another fifteen years.

1.2. “PARADOX”

NetRoots Nation is an annual confab for liberal political activists and pundits, founded by *The Daily Kos*. The third annual convention in July 2008 was marked by for optimism. After eight years of a Republican presidency, Senator Barack Obama was on the verge of securing the Democratic nomination, and hoped to be a transformational president who could effect great change. The groundwork was already being laid to accomplish what had failed so many times before – national health care reform. On the morning of July 19, the conference hosted a discussion on “How the NetRoots Can Lead on Healthcare Reform.” One of the panelists was twenty-four-year-old wunderkind Ezra Klein. Klein had already brandished his policy expertise as a blogger at *The American Prospect* and would go on to write at the *Washington Post*’s *WonkBlog* and later became the editor-in-chief of *Vox*. As a testament to his rising influence, from 2009 through 2014, Klein would be invited to visit the White House more than two dozen times to meet with senior administration officials who wanted to discreetly disseminate information to the public.²⁶ GQ would name him one of the fifty most powerful people in Washington, D.C.²⁷

But back in July 2008, Klein was still just a blogger, who told grassroots activists what needed to be done to succeed where others had failed. “I want to make one other point,” he noted, “because I have the beautiful luxury of not working for an organization, thus I don’t have to be diplomatic.”²⁸ Klein explained there was a major “problem with health reform in this country”

²⁴ Andrew Glass, *Congress Runs into Republican Revolution* Nov. 8, 1994, POLITICO (Nov. 8, 2007), perma.cc/T6WG-7L8U.

²⁵ Evan Thomas, *Decline and Fall*, NEWSWEEK (Nov. 11, 2006), bit.ly/hKy4S4B.

²⁶ Charlie Spiering, ‘Vox King’ Ezra Klein Visited the White House 27 Times, BREITBART (May 9, 2014), perma.cc/S5PB-CGTY.

²⁷ Washington Post Editors, 2011: By the Numbers: A Memo to Post Staff from Managing Editor Raju Narisetti, WASH. POST (Jan. 2, 2012), perma.cc/VKT7-SY2H.

²⁸ Ezra Klein: The Deceptive Strategy Underlying Obamacare, YOUTUBE (Jun. 25, 2009), youtu.be/FElipqE_DL4.

based on public opinion.²⁹ The overwhelming majority of people “want to reform health care,” but at the same time the overwhelming majority of people “are happy with what they have.”³⁰

Every year since 2001, *Gallup* has surveyed Americans on how they would rate the quality of their personal health care. Consistently, year after year, more than 80% of respondents rated it as good or excellent.³¹ A February 2007 poll by *CBS News* found that 85% of people were satisfied with the quality of their own health insurance.³² A September 2009 Quinnipiac University poll found that 88% of respondents were satisfied with their coverage.³³ A June 2009 survey by *ABC News* yielded an 81% satisfaction rate.³⁴ Similarly, an August 2009 survey by the Kaiser Family Foundation found that 91% of the insured Americans rated their coverage as excellent or good.³⁵ Among the insured, 67% were very satisfied with their choice of doctors, 66% were very satisfied with the quality of care, and 82% were at least somewhat satisfied with the amount they paid. Overwhelmingly, people who had insurance liked it.³⁶

Yet, despite the fact that the insured were happy with their coverage, they recognized that the health care system did not serve all Americans. For example, 59% of the respondents in the *CBS* survey were very dissatisfied with the cost of insurance for the country as whole.³⁷ Further, 90% said the U.S. health care system needed fundamental change. The *CBS* pollsters observed a contradiction: “Americans think the U.S. health care system needs major fixing, though they are generally satisfied with the quality (but not the cost) of their own health care.”³⁸

Klein explained to the *Netroots Nation* attendees that in 1994 there were 35 million uninsured people, and in 2009 there were 47 million uninsured.³⁹

²⁹ *Id.*

³⁰ *Id.*

³¹ Frank Newport, *Americans' Views of Healthcare Quality, Cost, and Coverage*, GALLUP (Nov. 25, 2013), perma.cc/VF9D-8ZP9.

³² Press Release, *CBS News Poll & The New York Times*, U.S. Healthcare Politics (Mar. 1, 2007), perma.cc/PF73-DQEQ.

³³ Louis Jacobson, *Will Says That 95 Percent of People with Health Insurance Are Satisfied with It*, POLITIFACT (Mar. 10, 2010), perma.cc/MQT6-XPf3.

³⁴ *Id.*

³⁵ *Data Note: Americans' Satisfaction with Insurance Converge*, KAISER FAMILY FOUND., Sep. 2009, perma.cc/4BPZ-V7UK.

³⁶ *Id.*

³⁷ *CBS News Poll*, *supra* note 32.

³⁸ *Id.*

³⁹ Angie Drobnic Holan, *Number of Those without Health Insurance about 46 Million*, POLITIFACT (Aug. 18, 2009), perma.cc/JT3Y-FU34.

That translates to 85% of Americans, or 250 million in total, having health insurance they were content with.⁴⁰

Klein referred to this tension as “a paradox.”⁴¹ The problem was that the overwhelming majority of Americans were insured, and satisfied with their coverage. This was the root of the “Harry & Louise” campaign’s success in 1994. Americans did not have much of an incentive to support reform that would alter the status quo, even if it would help several million of the neediest and sickest Americans gain access to insurance.

This paradox was well understood in the White House. In 2015, President Obama recalled that “pollsters” showed him surveys suggesting that “85 percent of folks at any given time had health care and so they weren’t necessarily incentivized to support” reform.⁴² His staff was worried that pushing for reform “could scare the heck out of them ... even if they weren’t entirely satisfied with the existing system, [because] somehow it would be terrible to change it.”⁴³ Advisers gave the president “warning signs about how tough this was,” and that it would be “bad politics.”⁴⁴

“Time and again,” Klein warned back in 2008, “well-meaning good people have gone to folks, and said ‘you’re scared about losing your health care, [so] here’s what I’m going to do. I’m going to take it from you and build something new.’ And every time we’ve done that we have had the hell kicked out of us.”⁴⁵ Because of this paradox, a dozen “reform battles have gone nowhere,” the blogger lamented.⁴⁶ “Every trend we hate, [has] continued.”⁴⁷ Supporters of health care reform needed a new game plan. “At some point,” Klein said, “you have to win. Not everything, but you have to put winning first.”⁴⁸ This time, a different strategy was necessary.

⁴⁰ Jacobson, *supra* note 33.

⁴¹ Klein, *supra* note at 28.

⁴² President Barack Obama, Joint Press Conference by President Obama, President Calderon of Mexico, and Prime Minister Harper of Canada (Apr. 2, 2012), in OFF. OF PRESS SEC’Y, perma.cc/G3HS-B79C

⁴³ Klein, *supra* note 28.

⁴⁴ *Id.*

⁴⁵ *Id.*

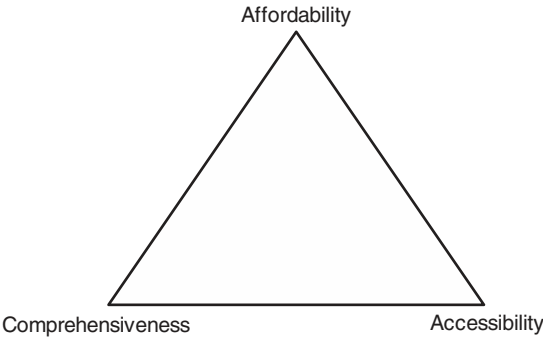
⁴⁶ *Id.*

⁴⁷ *Id.*

⁴⁸ Klein continued, “Yes, I would like to sign the insurance companies out of business with my pen. It would be sweet, but it has never happened in the history of this country that we’ve sent a multi-billion dollar industry employing tens of thousands of people in every district in America out in one shot.” Ezra Klein, *supra* note 28. Klein finished with what he described as a necessary “sneaky strategy,” which is “to put in place something that over time, [where] the natural incentive in its own market is to move it to single payer.” *Id.*

1.3. “TRILEMMA”

Klein would later describe the compromises over health care reform in terms of a *trilemma*: A balance between (1) affordability, (2) comprehensiveness, and (3) accessibility.⁴⁹ It is not feasible for insurers to offer policies that are affordable, comprehensive, *and* accessible. A balance of the three must be achieved.



Before the enactment of the Affordable Care Act, in order to keep prices on the individual market low – so that people would be able to afford them – insurers had two approaches: Offer limited coverage and/or exclude those who were expensive to insure, such as those with pre-existing conditions. Under the former option, insurers sold policies that provided stingy coverage, lifetime limits on expenses, and high out-of-pocket costs. These risky plans, which may not provide adequate coverage in the event of a serious health crisis, were priced low to make them more attractive. For the latter option, by denying coverage to sick people – who account for a disproportionate share of medical costs – premiums for the majority of consumers could be kept low. Thus, *affordable* insurance would be *uncomprehensive* and/or *inaccessible*. In contrast, for customers who wanted better plans, the price tag would be higher. Thus, *comprehensive* and *accessible* insurance would not be *affordable*. Or worse, for people with preexisting conditions, insurance may not be *accessible* at all. (Some states had already prohibited underwriting policies based on a person’s health status, or created special high-risk pools for these individuals.)

The Affordable Care Act would radically recalculate this trigonometry. The law mandated that all insurance must be both *comprehensive* (mandating “minimum essential coverage”) and *accessible* (people with pre-existing conditions were guaranteed issuance of policies). The consequence of making insurance more comprehensive and more accessible was

⁴⁹ Ezra Klein, *The Health-Care Trilemma: How Obamacare Is Changing Insurance Premiums*, WASH. POST (Oct. 29, 2013), perma.cc/G8XU-EYEX.

predictable: Less-comprehensive policies, which are invariably cheaper, would no longer be valid. Klein wrote that under the trilemma, “every change has winners and losers. Put bluntly, the Affordable Care Act’s changes are raising insurance premiums for some people who did well under the old system and lowering them for many of the people who were locked out or discriminated against.”⁵⁰

For President Obama, the paradox raised a dilemma: how to sell the American people on a transformational change in health care without scaring them away because of the necessary sacrifice. The marketing pitch for health care reform, which sought to eliminate any concerns about altering the status quo, was reduced to one sentence: “If you like your health care plan, you can keep your health care plan.”

1.4. “NO ONE WILL TAKE IT AWAY”

On September 9, 2009, President Obama addressed a joint session of Congress to explain the details of the pending health reform bill that would become the Patient Protection and Affordable Care Act of 2010. He addressed all aspects of the trilemma.

First, Obama highlighted how the ACA would mandate that all plans must offer *comprehensive* coverage. Insurance companies, he said, “will no longer be able to place some arbitrary cap on the amount of coverage you can receive in a given year or in a lifetime.”⁵¹ The ACA will “place a limit on how much you can be charged for out-of-pocket expenses, because in the United States of America, no one should go broke because they get sick.”⁵² Under the law, Obama said, “insurance companies will be required to cover, with no extra charge, routine check-ups and preventive care, like mammograms and colonoscopies because there’s no reason we shouldn’t be catching diseases like breast cancer and colon cancer before they get worse.”⁵³ He added, “That makes sense, it saves money, and it saves lives.”⁵⁴ This requirement to cover

⁵⁰ *Id.*

⁵¹ President Barack Obama, *Remarks by the President to a Joint Session of Congress on Health Care* (Sept. 9, 2009), perma.cc/A9S5-KU2M.

⁵² *Id.*

⁵³ *Id.*

⁵⁴ *Id.* The former claim sounds plausible, but it is false. Congressional Budget Office (CBO) Director Douglas Elmendorf explained in a letter to Congress, “The evidence suggests that for most preventive services, expanded utilization leads to higher, not lower, medical spending overall.” Letter from Douglas Elmendorf, CBO Director, to Nathan Deal, Subcommittee on Health, U.S. House of Representatives (Aug. 7, 2009), perma.cc/D8BX-5D42. Although a single test may be cheap for an individual, in the aggregate testing becomes quite expensive. *Politifact* rated the president’s statement concerning saving money through expanding

preventive care would give rise to the so-called *contraceptive mandate* and two Supreme Court cases.

Second, the president highlighted how the law would make insurance more *affordable* for those who did not have it, or could not otherwise afford the more comprehensive policies. For “the tens of millions of Americans who don’t currently have health insurance,” the president continued, the law “will finally offer you quality, affordable choices.”⁵⁵ The uninsured will be able to “shop for health insurance at competitive prices” on “a new insurance exchange.”⁵⁶ The president noted that the exchange “will take effect in four years, which will give us time to do it right.” Alas, the exchange would not quite be ready on time in October 2013.⁵⁷ And “for those individuals and small businesses who still can’t afford the lower-priced insurance available in the exchange,” Obama noted, “we’ll provide tax credits, the size of which will be based on your need.”⁵⁸ The president’s speech assiduously avoided any comment about how the law would affect the cost of premiums. (I do not focus on oft-repeated promise that his plan would “bring down premiums by \$2,500 for the typical family,”⁵⁹ because this pledge was made on the campaign trail in 2008 before the specifics of the health care reform were drafted.⁶⁰)

Third, the president promised that insurance would be *accessible* to all, for “it will be against the law for insurance companies to deny you coverage because of a pre-existing condition.”⁶¹ Under the Affordable Care Act, he said, it would be illegal “for insurance companies to drop your coverage when you get sick or water it down when you need it the most.”⁶² By far, this was one of the most popular aspects of the ACA, if not *the most* popular provision. A September 2009 Kaiser survey found that 80% of respondents supported this ban – that included 88% of Democrats and 67% of Republicans.⁶³

preventive care as *false*. Catherine Richert, *Obama Says Preventive Care Saves Money. It Doesn't*, Politifact (Sep. 9, 2009), perma.cc/6GTJ-CLTS.

⁵⁵ *President's Remarks*, *supra* note 51.

⁵⁶ *Id.* The president repeatedly spoke of a singular “exchange” rather than exchanges in all fifty states. At the time, as we will discuss in Chapter 2, the House of Representatives’ bill to create a single federal exchange was expected to prevail. However, the Senate bill, which allowed each state to establish its own exchange, would become law.

⁵⁷ *See infra* Chapters 11–12.

⁵⁸ *President's Remarks*, *supra* note 51.

⁵⁹ Kevin Sack, *Health Plan from Obama Spurs Debate*, N.Y. TIMES (Jul. 23, 2008), nyti.ms/iNiBfv3.

⁶⁰ J.B. Wogan, *No Cut in Premiums for Typical Family*, POLITIFACT (Aug. 31, 2012), perma.cc/PJ7W-XWPU.

⁶¹ *President's Remarks*, *supra* note 51.

⁶² *Id.*

⁶³ *Public Opinion on Health Care Issues*, KAISER FAMILY FOUND. (Sept. 2009), perma.cc/QDV2-UY94.