

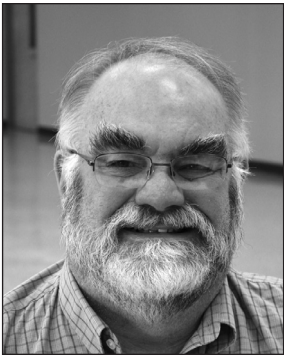
Opinion: Health Care Cuts

by Perry London, Devils Lake, ND

Our health care system is entering a very precarious period where many people could die because of decisions made that do not rely on science but on someone's political position. The funding cuts enacted and being proposed by the current president will result in unnecessary deaths. How many deaths will take place because of funding cuts and policy decisions is unknown, but there will likely be thousands. The U.S. healthcare system is the highest-cost-per-person healthcare system in the developed world, by a wide margin, and our comparative healthcare outcomes are poor, given the cost of our healthcare. All developed countries have some form of universal or single-payer health care delivery system that focuses on personal health, not corporate profitability, like our for-profit health care system.

Recently, legislation was passed by Congress and was enthusiastically signed by the president that substantially cuts Medicaid yet impacts both Medicare and private health care. The Republicans in Congress passed this legislation knowing that the Medicaid cuts would be hugely unpopular, so most of those funding cuts will not take place until after the 2026 mid-term election. Sneaky, but that is how the politicians deceive their voters and con them into voting against their own best interests. It has been rumored that the "Big Beautiful Bill" con job may soon be called something different to confuse the voters before the 2026 election. Subterfuge has always been one of the hallmarks of the Republican Party, starting with the notion that they are the party of the working class. Nothing could be further from the truth. They have done little or nothing for decades that benefits lower- and middle-income households and individuals. They promote government by, for, and of the very wealthy and corporations.

The cuts in Medicaid will result in pressure on both private insurance and Medicare to absorb those costs no longer paid for by Medicaid because emergency health care will still be provided for all in need. Our profit-oriented health care system will not absorb these added costs but pass them on to health insurance providers and, possibly, to a lesser degree, Medicare. The result will be higher private insurance premiums, deductibles, and copays, and there will be efforts for Medicare recipients to pay for more of their health care costs. Like tariffs, the American citizens pay the cost not the foreign country or the corporation being assessed the tariff for imported goods. Tariffs and Medicaid cuts hurt the lower-income population the most but greatly impact the middle-income households



London

and individuals.

There is some consideration that the current president will start using Artificial Intelligence software to begin deciding what medical procedures are allowed under traditional Medicare. Traditional Medicare has generally paid for all doctor-ordered health care procedures without consultation. I am not sure those on traditional Medicare will find this to be something that they want to deal with when they are dealing with difficult health care issues. Most of the Republican Party has historically been against Medicare, Medicaid, and Obamacare because they view these programs as socialism. They also tend to view Social Security as the same type of program.

There have been numerous studies, some even conducted by very conservative organizations, that show a well-structured, it cannot be profit driven, universal health care system would cost the country less and save most families and individuals money. The sad truth is that President Richard Nixon proposed a universal health care system to Senator Ted Kennedy in the 1960s, and Senator Kennedy rejected the concept because he believed it was not what he envisioned. Senator Kennedy regretted his decision for the rest of his life. Had what Nixon envisioned been allowed to evolve since the 1960s the country would probably be using a very good universal health care system. It would have been very difficult for most Republicans to be against a major Republican accomplishment.

What the country needs is some type of universal health care system (Medicare for All) that is not primarily driven by profitability but produces the best patient outcome. This country has some of the best health care facilities in the world, so we know how to provide great health care, and some of that has been a product of health care provider profitability. However, most of that profitability comes from having the highest per-person health care costs in the world. Most of that provider profitability comes from higher employer insurance rates, higher deductibles, higher copays, and denial of doctor-approved health care procedures. Health care is something that could get really messed up by the current president, who could further destroy a highly dysfunctional system that costs way too much for the outcomes it produces.

Constitutional Conversations: To Pete Hegseth: You Are Bound to Obey the Law

by David Adler

Secretary of Defense Pete Hegseth's indifference to the Constitution and American law, his disdain for "tepid legality" as the governing standard for the use of U.S. military power, places him at sharp odds with those who founded this nation and held the Office of the Presidency. John Quincy Adams, after serving as Secretary of State and President, said, "the war power is strictly constitutional." Adams, like his predecessors in the nation's highest office, fully understood that the president's authority over foreign relations was no less circumscribed than the domestic powers conferred by the Constitution.

Hegseth's blithe disregard of law is unbefitting of a constitutional officer whose authority exists only by virtue of that vested in his office by the Constitution, which he has sworn an oath to uphold, and such powers as Congress, to which he is legally accountable and subject to removal through impeachment, may choose to confer upon him. Hegseth's arrogant dismissal of legal boundaries invites the scale of scorn that the founders reserved for usurpers, those who abused power and obstructed justice, beginning with King George III, whom they singled out in the Declaration of Independence as a tyrant.

Hegseth's enthusiasm for President Donald Trump's



executive order, changing the name of "Department of Defense" to the "Department of War," was reflected in his resort to slam poetry to explain that the rebranding order represents not just a name change, but a shift in attitude, posture and strategy. Hegseth said the war department is "going to go on offense, not just defense. Maximum lethality, not tepid legality. Violent effect, not politically correct." Successful prosecution of wars always has been, and always will be, the goal of our armed forces, but it is critical to recall that war, from its commencement to its conclusion, must be conducted in accord with the Constitution and applicable laws. On this point, the founders, and judicial rulings issued at the dawn of the republic, were crystal clear.

Respect for the Constitution and its allocation of the war power to Congress, fortified by the presidential oath of office and the Article II duty "to take care to faithfully execute the laws," informed the decisions of founding presidents when

questions of war and military hostilities arose. No early president—Jefferson, Madison and Monroe, for example— shared Hegseth's disdain for legality.

In 1801, and again in 1805, President Jefferson, faced with military threats from Tripoli and Spain, respectively, refused to go on "offense," when, "considering that Congress alone is constitutionally invested with changing our condition from peace to war, I have thought it my duty to await their authority for using force." The threat of invasion did not stop Jefferson from consultation with Congress. President Madison, the chief architect of the Constitution, reiterated the constitutional governance of the use of force on June 1, 1812, when he called attention to the English attacks on American shipping. He referred to Congress the question of whether we should oppose "force to force in defense of our national rights," which he said, was a "solemn question which the Constitution wisely confides to the legislative department

of the Government." After the adoption of the Monroe Doctrine, Colombia sought protection from France in 1824. President Monroe, who was a delegate to the Virginia Convention, stated, "The Executive has no right to compromit the nation in any question of war." He echoed Secretary of State Adams, who declared that the Constitution vests that power in Congress, alone.

Chief Justice John Marshall, a vigorous participant in the Virginia Ratification Convention, stated in Talbot v. Seeman (1801): "The whole power of war being, by the Constitution vested in Congress, the acts of that body can alone be resorted to as our guides in this inquiry." There was no departure from this understanding in the crisis of the Civil War. In the Prize Cases (1862), the Court held: "By the Constitution, Congress alone has the power to declare a national or foreign war." The president, "has no power to initiate or declare war against a foreign nation or a domestic State. If a war be made by invasion of a foreign nation, the president is bound to resist force by force. He does not initiate the war but is bound to accept the challenge."

In matters of war and peace, the founders, unlike Secretary Hegseth, demonstrated respect, not disdain, for legality.

Sponsored in part by Humanities North Dakota, www.HumanitiesND.org

Rural Communities Brace for Trump's Health Cuts

Rural hospitals — often the largest employers as well as critical care providers in their regions — will be among the worst hit by the GOP's Medicaid cuts.

by Rokosz Most, OtherWords columnist

Bari Senecal waits outside the emergency department at Columbia Memorial Hospital in Hudson, New York. "I do construction. I fell three stories," Senecal explains. "I was on top of the scaffold and this new kid we hired didn't put the braces on correctly."

Like 70 million Americans, Senecal qualifies for Medicaid, the state and federally-funded public health insurance program for low-income patients. She also qualifies for Medicare. She's what's known as being "dual-eligible."

At Columbia Memorial, 63 percent of patient service revenue is reimbursed through a combination of the two programs. But "we run a deficit every year," says Dorothy Urschel, CEO of Columbia Memorial Health. "For many, many years, we've been reimbursed at well below cost."

The hospital has the only emergency room serving the more than 110,000 residents scattered among two predominately rural counties. "Of course, we're struggling," says Urschel.

"But rural community hospitals always struggle."

Columbia Memorial already closed its maternity ward in 2020 — part of a distressingly common trend. A recent study from the Journal of the American Medical Association found that more than half of rural counties now have no hospital-based obstetric services whatsoever.

Like other rural hospitals across the country, Columbia Memorial is bracing for the loss of Medicaid-covered patients and funding because of the Republican reconciliation bill, dubbed the "One Big Beautiful Bill Act," which was signed by President Donald Trump this summer.

According to the non-partisan Congressional Budget Office, the bill will cut \$911 billion in federal Medicaid spending over the next decade and result in an estimated 10.3 million people losing their Medicaid health insurance. Add in cuts to the Affordable Care Act and the number of people expected to lose their insurance rises to 16 million.

According to Larry Levitt, vice president for health policy at the Kaiser Family Foundation, this

amounts to "the biggest rollback in federal support for health coverage ever." And it will put enormous strain on rural hospitals especially — which in Columbia County and elsewhere are often the largest local employer in addition to crucial care providers.

The GOP staggered these cuts so that the worst effects of the budget changes won't be felt until after the mid-term elections in 2026 are safely past. But "some rural hospitals around the country have already started closing" in anticipation of the cuts, warns Michael Chameides, a member of the Columbia County Board of Supervisors.

Senator Ed Markey (D-MA) provided a list of 338 rural hospitals in danger of either closing or drastically scaling back services. All 338 had experienced three consecutive years of negative total profit margins and were in the top 10 percent of institutions with patients on Medicaid.

Rural hospitals facing disaster are identified individually according to which state will see the losses. Kentucky, Louisiana, and California top the list with 35, 33, and

28 rural hospitals identified as at risk of closure, respectively. New York has 11. (Columbia Memorial isn't officially one of them, but Garnet Medical Health Center Catskills, another Hudson Valley hospital, is.)

An estimated 1,796 hospitals remain in rural America, but those numbers obscure the level at which the services they offer may have already contracted. According to the Government Accountability Office, over the last decade more than 100 rural hospitals have closed across the country — 50 of them in just the last eight years.

In New York and every other state, as federal funding runs dry it will be up to the governor and legislature to make provisions for struggling rural hospitals — or stand by and watch them collapse.

Rokosz Most is a journalist based in New York's Hudson Valley who writes at rokoszmost.com. A longer version of this op-ed was originally published by Barn Raiser. This version was distributed for syndication by OtherWords.org.

Devils Lake Journal, 155-940 is published Tuesday and Thursday at 516 4th Street NE, Devils Lake, ND 58301

Periodicals postage paid at Devils Lake, ND 58301

Postmaster: Send address changes to: Devils Lake Journal, 516 4th Street NE, Devils Lake, ND 58301



DEVILS LAKE JOURNAL

CUSTOMER SERVICE OFFICE HOURS MONDAY -THURSDAY 8-5

Friday 8-3

CONTACTS:

Kathy Svidal, Publisher: ksvidal@devilslakejournal.com
Louise Oleson, Editor: loleson@cmpapers.com
Deb Toso, Advertising: dtoso@cmpapers.com
Jen Schwab, Classifieds: classifieds@devilslakejournal.com
Kris Olson, Legal Notices: kolson@devilslakejournal.com
Joseph Hill, Sports Writer: jhill@devilslakejournal.com
Subscriptions: carlien@devilslakejournal.com