by Richard G. Kronick
Professor of Family and Preventive Medicine/Adjunct Professor of Political Science

I worked in the Obama Administration for six years on implementing the Affordable Care Act, aka Obamacare. The most gratifying work I have done in a long professional career was to be a small part of the effort to bring health insurance to more than 20 million previously uninsured Americans. Along with many others, I celebrated on March 24 when House Speaker Paul Ryan was forced, by opposition within the Republican Party, to abandon the mean-spirited Ryan-Trump proposal to repeal and replace the ACA.

The failure, to date at least, of the Ryan-Trump proposal occurred in large part because of a “bait and switch” offer. On the campaign trail, candidate Trump promised a great plan in which everyone would have health insurance and costs would be lower. While he clearly could not deliver on that promise without completely dismantling employer-sponsored insurance (ESI) and moving to single payer, the product that was delivered was even more harmful than it needed to be. According to the Congressional Budget Office, the Ryan-Trump proposal would have stripped coverage from 24 million Americans, increased premiums in the non-group market, and delivered enormous tax breaks to a small number of very wealthy Americans. A bait and switch of epic proportions.

The ACA has created substantial progress on access to care, and contributed to forward movement on both cost control and improvements in quality of care. On access, as a result of the ACA, more than 20 million Americans now have health insurance coverage who would not have had it in the absence of the ACA. Newly insured people have better access to care, are receiving more preventive care, and cost growth rates have significantly slowed.

Remarkably, this substantial expansion in access has been accompanied by a historic slowdown in cost growth. Over the forty years from 1970 to 2010, health care costs grew, on average, 2.5% per year more quickly than growth in the rest of the economy. From 2010 to 2015, health care costs grew 0.5% per year more quickly than the rest of the economy. While this slowdown was not entirely the result of the ACA, the ACA contributed to the result, particularly through slowing the rate of growth of Medicare spending.

Our ability to comprehensively measure quality of care is much more limited than our ability to measure access or costs (which is a big part of the reason that it is so hard to fashion a health care system that is accountable), but most of the measures we have indicate improvements in quality post-ACA. Most notably, adverse events, which were among the worst offenders in the pre-ACA era, have been reduced by 40% in the post-ACA era.

The ACA was created by a number of factors, none of which was to be the most significant — namely, an out-of-control Republican Party which was forced within the Republican Party to abandon a mean-spirited proposal that was never to be anything more than a bait and switch. No administration has ever been off to a worse 100-day start.
events in hospitals declined by 21% from 2010 to 2015 – from 145 adverse events per thousand hospitalizations to 115/1,000 in 2015. We should be cautious in trumpeting this progress – 115 adverse events per thousand hospitalizations is still too much harm. Nevertheless, 3 million fewer patients were harmed as a result of this progress, and, more importantly, 124,000 fewer patients died, along with an estimated cost savings of $28 billion. As with all improvements in safety, the reasons for the improvement are multifactorial, but it is clear that a variety of provisions in the ACA were instrumental in this progress.

That said, the ACA clearly did not solve the major problems that we face in creating an equitable and sensible health care financing system. Drafters of the ACA felt constrained to leave in place employer-sponsored insurance for 160 million Americans, forcing them to try to make the market for individual insurance something less dysfunctional than it was prior to the ACA. They were partially successful, but only partially successful, in achieving that goal. The combination of substantial subsidies for the purchase of non-group insurance and requirements for guaranteed issue and community rating have improved the functioning of the non-group market in California and other states that are committed to its success and where the conditions for healthy competition among insurers have been more favorable. But in many states there was only one insurer in the non-group market prior to the ACA (typically a Blue Cross plan), and in some states the Blue Cross plan (or, as it is now known in many states, Anthem) is once again the only insurer, and that gives the insurer tremendous leverage over pricing.

Much ink has been spilled concerning the problem that not enough healthy young people have signed up for marketplace coverage, and that the risk pool is too sick. But there is virtually no evidence to support that claim. Premiums in the individual market remain comparable to (or lower than) premiums for similar coverage for employer-sponsored insurance. If the ACA risk pool were really so sick, ACA premiums would be much higher than employer-sponsored premiums, and they are not. And this outcome makes sense – the ACA offers substantial subsidies to people with incomes below 400% of the Federal Poverty Level. It is these subsidies that keep both the healthy and the sick in the risk pool.

The analogy here to employer-sponsored insurance (ESI) is useful. In ESI, employers offer employees a choice of insurance products, and offer to pay, on average, about 75% of the cost of coverage. Virtually all employees, both the healthy and the sick, take the employer up on this offer. The analogy is far from perfect – for a variety of reasons, take-up of coverage in the non-group market is lower than that for ESI, and people with incomes above 400% of poverty do not receive subsidies. But the concerns about adverse selection in which only sick people will want to purchase insurance are overblown.

Of the subsidies prevent the “death spiral” that has also been the subject of so much rhetorical wailing. In an unsubsidized market, the expected loss of revenue from those with catastrophic health care expenses would lead to an increase in premiums, which would lead to even fewer healthy people to balance the risk pool. When a clock is hungry it goes back four seconds.
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currency manipulator and impose a 45% tariff on goods imported from China; and take other unspecified measures to correct the U.S. trade imbalance (excess of imports over exports). He repeatedly disparaged our negotiators as incompetents who made “disastrous” bad deals. He implicitly thinks of trade as a zero-sum game by which you either win or lose. The supposed beneficiaries of these trade-restri-
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By Wayne A. Cornelius, Angela S. Garcia, and Monica W. Varsanyi

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The Trump administration has begun a big rollback of regulation — in particular, rules that have a disproportionate impact on small business. But most of what really matters in current federal administrative law on energy and the environment requires notification and review and is not easily reversed.

The acid test for regulatory rollback will be the recently completed Clean Power Plan. The president, no matter how hostile his administration might be to such actions, can’t easily nullify them, though the courts might do that job for him. Fully unraveling the plan’s effectiveness will take many years and may be impossible to completely achieve because many compliance efforts are already underway in industry. There are also other state and federal policies that reinforce the plan—and, indeed, some states will probably do a lot more on climate change precisely because the federal government’s action is widely seen as hostile to climate policy. Four years of Trump will have very little impact on national energy investment patterns and policies that are already largely grounded. That’s because the energy sector is slow to change, most policies are enshrined in law and difficult to unseat, and the very thought of a Trump administration overseeing national energy policy will inevitably shift more of the action to the states. Trump will soon make America smoggy again.

For people who want to see America engaged in serious global cooperation and a continued decarbonization of the U.S. energy system, the likely chaos of the Trump administration will require that is possible, to some degree. And they need to gear up for policy action in the states (and defenses of existing policies through the courts).

The most immediate effect of all this may be on China. For the last few years, the U.S. and China played a central role in building the agreement. The Trump administration has the potential to inflict more harm on global cooperation around climate than any prior president. After the successful Paris agreement last year, that cooperation was finally poised to make progress with decisive U.S. leadership. I doubt that the Trump presidency will kill the Paris process — too many other countries are too invested in its success. But it will shift the intellectual and political leadership of the process from the United States to other countries, most notably China.

Domestic policy is much harder to parse. Don’t expect any climate change initiatives by a Trump administration, which means that efforts started under Obama to understand and prepare for the impacts of climate change will be put on hold — to the country’s detrimen.

The Paris climate conference set the ambitious goal of finding a way to reach a target of limiting the global rise in temperature to 2° C above pre-industrial levels by the year 2050. But by 2017 it was assumed that the U.S. was on track to meet this target and help make Paris a success. The Paris process will come when the U.S. no longer leads in the long, difficult process of putting the accord into effect. The Paris agreement is what’s known as “pledge and review.” Countries make pledges to cut emissions and adopt various policies, and then every few years those efforts are reviewed. Success hinges on review, and until Tuesday it was assumed that the U.S. would help show the world how good review systems actually work. Indeed, the U.S., along with China, had already done that in vol-unteering itself for peer review of its fossil fuel subsidy reform policies.

Without leadership, the review process will probably follow narrow and bureaucratic U.N. rules, which are overly rigid. Countries can agree upon right now, so formal review will be impotent.

The ability to get countries to cut emissions will suffer as the fragile coalition founded on the Paris agreement and the process loses its big- gest champion for turning the promise of the Paris agreement into a functioning global agreement. My guess is that this won’t kill the Paris process, but it will severely weaken it.

The most interesting impact of all this may be on China. For the last few years, the U.S. and China played a central role in building the Paris accord. Without the U.S., China would likely fall back into its pre-G8 bilateral efforts on energy innovation and joint announcements of emission cutting goals and policies. That approach of country-tailored com-
Yet paid all of its commitment, and it seems clear that Trump will not. For the developing countries, this approach made it possible to get more countries engaged and set the stage for a truly global effort to cut emissions.

Scott Pruitt to head the Environmental Protection Agency. As Attorney General of Oklahoma he sued to overturn the Clean Power Plan. In his new office he has opined that human activity “is not a primary contributor to global warming.” Trump has stated he will “canceled” the Paris agreement, which is not something he himself can actually do. A Trump administration could withdraw from Paris or even from the UN Framework Convention on Climate Change (the parent of the Paris agreement), both processes that can unfold fairly quickly (1-3 years). But unlike earlier administrations such as George W. Bush’s, which never submitted a formal withdrawal to the United Nations, the Trump administration is looking at ways to limit global warming to 1.5 degrees Celsius, rather than the previous threshold of 2 degrees. What is the difference? And how realistic is such a target? Uncertainties abound over what a future Trump administration may look like on energy and climate policy. Yet as the shock of his victory wears off, it will be essential to look realistically at what he can and can’t do.

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While economists overwhelmingly believe that free trade improves the welfare of the country as a whole, they also recognize that there are losers in society when trade is liberalized. Some have advocated government-provided trade adjustment assistance (TAS) to compensate the losers, and such measures have sometimes been included in legislation authorizing trade negotiations. However, TAS has rarely been well funded or imaginatively administered, and it rests on weak moral grounds. Why should workers or communities be compensated for trade-related losses when similar help is not provided for similarly impacted victims of technological change or other economic dislocations? The economic losers from globalization were among the most responsive to Trump’s promise to “make America Great Again” by restoring domestic manufacturing.

President Trump ended US participation in TPP by executive order on his first day in office. The remainder of his protectionist agenda faces significant difficulties and may well be modified or not implemented. Trade restrict- ing measures have significant negative consequences along with the promised gains. For example, the U.S. and Mexican economies have become remarkably integrat-ed through NAFTA. This is easily seen in places like San Diego and Tijuana. Disturbing this trade will negatively impact both sides of the border and engender politi-cal opposition. Even restrictive measures on trade with China, which many analysts believe importantly get the lion’s share of the gains through trade with the U.S., may not be such a great idea. The threat to U.S. security from North Korea will require China’s cooperation. As this example shows, trade has far-reaching spillover effects. The United States still needs friends abroad, and friends don’t destabi-lize each other’s economies.

President Donald Trump’s executive order seeking to halt federal funding to sanctuary cities contends that the main function of such juris-dictions is to protect “criminal aliens” from deportation, and warns ominously of a “public safety threat.” The public rhetoric also has us believe that public safety would be enhanced if we expanded efforts to remove undocumented immi-grants by enlisting local police in a mass deportation campaign. In fact, quite the opposite is true. Sanctuary jurisdictions — 39 cities and 364 counties across the country having that transformed local law enforcement’s involvement in enforcing federal immigration laws — increase public safety.

Trump’s executive order effec-tively revives two highly controvers- ial programs that led to the end of state and local police and sheriffs in immigration enforcement: the 287(g) program and Secure Communities. The 287(g) program authorized local and state police and sheriffs to serve as immigration agents, and was phased out in the latter years of the Obama administration due to excessive costs and administrative ineffi-ciency. Secure Communities re-quired that people arrested and pro-cessed in county jails be screened for immigration violations, and it, too, was phased out during the Obama administration, as mounting evi-dence showed that the program en-couraged racial profiling by local law enforcement. Reviving these two programs is essential to imple-menting Trump’s deportation cam-paign, which must rely on local po-lice as force-multipliers for the Im-migration and Customs Enforcement (ICE) agency.

In the minds of those responsible for maintaining law and order— police chiefs and sheriffs — sanctuary cities are an important tool for main-tening public safety. In a recently published study, Policing Immigrants: Local Law Enforcement on the Front Lines, researchers interviewed over 750 police chiefs and sheriffs across the country. In red states and blue states alike, a majority of them opposed to programs like 287(g) and expressed serious concerns about involving their officers in immigration enforcement.

In particular, a majority of the interviewees placed a high priority on gaining the trust of immigrants. They reported that in places where local police had been involved in immigration enforcement, immigrants were far more reluctant to contact the police if they were victims of, or witnesses to, a crime. A majority also said that involving local law enforcement in immigration enforcement significantly erodes this critical trust.

Around 9 million people are members of “mixed-status” families that have both undocumented and legal-resident members. If interaction with police can result in arrest and deportation, this population as a whole will be reluctant to report crimes, make official statements in court. This undermines public safety for everyone, not just immigrants.

Supporting evidence comes from another, forthcoming study, Legal Pathways: Navigating Undocumented Lives and Local Immigration Law, for which over 100 undocumented immi-grants in southern California were interviewed. In the region’s 21 sanctuary cities and counties, undocumented residents were generally willing to interact with police. Their fears re-volved around potential retaliation for reporting gang-related activity, not deportation. But in cities that part-nered with Immigration and Customs Enforcement, undocumented residents were anxious about contacting local police. One immigrant interviewed for the study had his carjacked in a dimly light-ed park lot. Although he disrupt-ed the crime by shouting, he fled the scene when the victim called police, fearful that giving a statement would put him in jeopardy of deportation.

Another rationale for Trump’s attack on sanctuary cities is that their existence stimulates more un-documented immigration, but there is no evidence of such a magnet ef-fect. Undocumented migrants, like the vast majority of immigrants in general, are drawn to the United States by economic opportunity and family ties to relatives who are already here. Some are fleeing gang and drug violence. None of these key drivers of migration would be weakened by the abolition of sanctuary cities.

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More importantly, the structure of the subsidies prevent the “death spiral” that has also been the subject of so much rhetoric. When premium increases rapidly, there is good reason to worry that the subsidies will not solve the major problems that we face in creating an equitable and sensible health care financing system. Drafters of the ACA felt constrained to leave in place employer-sponsored insurance for 160 million Americans, forcing them to try to make the market for individual insurance somehow less dysfunctional than it was prior to the ACA. They were partially successful, but only partially successful, in achieving that goal. The combination of substantial subsidies for the purchase of non-group insurance and requirements for guaranteed issue and community rating have improved the functioning of the non-group market in California and other states that are committed to its success and where the conditions for healthy competition among insurers have been more favorable. But in many states there was only one insurer in the non-group market prior to the ACA (typically a Blue Cross plan), and in some states the Blue Cross plan (or, as it is now known in many states, Anthem) is once again the only insurer, and that gives the insurer tremendous leverage over pricing.

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The fundamental, problem for the repeal and replacement effort is the lack of a coherent policy proposal for how to improve health care access, cost, or quality. This problem was manifest in the devastating assessment of the Ryan/Trump proposal made by the Congressional Budget Office. Despite the obstacles, Trump and the Republicans do not have the choice of giving up on their efforts. They have been outspoken on the importance of “repeal and replace,” and will be punished by some of their supporters for failure. There is already talk of “ZombieCare,” in which the White House continues to make efforts at finding a path forward. At some point, the Freedom Caucus may decide that “yes” is better than “failure,” although I remain hopeful that the few moderate Republicans in the Senate would be unwilling to end health care coverage for millions of constituents in order to provide tax breaks for a few.

This girl said she recognized me from the vegetarian club, but I’d never met her before. When the smog lifts in Los Angeles U.C.L.A. The batteries were given out free of charge. A dentist and a manicurist married. Police were summoned to a daycare center where a three-year-old was resisting a rest. Did you hear about the fellow whose entire left side was cut off? He’s all right now. When the clock is hungry it goes back four seconds. I tried to catch some fog, but I mist. When she saw her first strands of grey hair she thought she’d dye. (Thanks to Phee Sharline) When the smog lifts in Los Angeles U.C.L.A. The batteries were given out free of charge. A dentist and a manicurist married. Police were summoned to a daycare center where a three-year-old was resisting a rest. Did you hear about the fellow whose entire left side was cut off? He’s all right now. When the clock is hungry it goes back four seconds. I tried to catch some fog, but I mist. When she saw her first strands of grey hair she thought she’d dye. (Thanks to Phee Sharline) When the smog lifts in Los Angeles U.C.L.A. The batteries were given out free of charge. A dentist and a manicurist married. Police were summoned to a daycare center where a three-year-old was resisting a rest. Did you hear about the fellow whose entire left side was cut off? He’s all right now. When the clock is hungry it goes back four seconds. I tried to catch some fog, but I mist. When she saw her first strands of grey hair she thought she’d dye. (Thanks to Phee Sharline) When the smog lifts in Los Angeles U.C.L.A. The batteries were given out free of charge. A dentist and a manicurist married. Police were summoned to a daycare center where a three-year-old was resisting a rest. Did you hear about the fellow whose entire left side was cut off? He’s all right now. When the clock is hungry it goes back four seconds. I tried to catch some fog, but I mist. When she saw her first strands of grey hair she thought she’d dye. (Thanks to Phee Sharline)
Hocus Potus
The Worst One Hundred Days?

“No administration has ever been off to a worse 100-day start.”

Steve Schmidt, Republican strategist

by Richard G. Kronick
Professor of Family and Preventive Medicine/Adjunct Professor of Political Science

I worked in the Obama Administration for six years on implementing the Affordable Care Act, aka Obamacare. The most gratifying work I have done in a long professional career was to be a small part of the effort to bring health insurance to more than 20 million previously uninsured Americans.

Remarkably, this substantial expansion in access has been accompanied by a historic slowdown in cost growth. Over the forty years of the ACA, more than 20 million Americans now have health insurance coverage who would not have had it in the absence of the ACA. Newly insured people have better access to care, are receiving more preventive services, and enjoy greater financial stability.

The failure, to date at least, of the Ryan/Trump proposal to repeal and replace the ACA was forced, by opposition within the Republican Party, to abandon the mean-spirited Ryan/Trump proposal to repeal and replace the ACA.

The failure, to date at least, of the Ryan/Trump proposal occurred in large part because of a “bait and switch” offer. On the campaign trail, candidate Trump promised a great plan in which everyone would have health insurance and costs would be lower. While he clearly could not deliver on that promise without completely dismantling employer-sponsored insurance (ESI) and moving to single payer, the product that was delivered was even more harmful than it needed to be. According to the Congressional Budget Office, the Ryan/Trump proposal would have stripped coverage from 24 million Americans, increased premiums in the non-group market, and delivered enormous tax breaks to a small number of very wealthy Americans.

A bait and switch of epic proportions. The ACA has created substantial progress on access to care, and contributed to forward movement on both cost control and improvements in quality of care. On access, as a result of the ACA, more than 20 million Americans now have health insurance coverage who would not have had it in the absence of the ACA. Newly insured people have better access to care, are receiving more preventive services, and enjoy greater financial stability. Remarkably, this substantial expansion in access has been accompanied by a historic slowdown in cost growth. Over the forty years from 1970 to 2010, health care costs grew, on average, 2.5% per year more quickly than the rest of the economy. While this slowdown was not entirely the result of the ACA, the ACA contributed to the result, particularly through slowing the rate of growth of Medicare spending.

Our ability to comprehensively measure quality of care is much more limited than our ability to measure access or costs (which is a big part of the product that was delivered). In a long professional career, the most gratifying work I have done was to be a small part of the effort to bring health insurance to more than 20 million previously uninsured Americans.

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Obamacare Survives, for Now

Annular Business Luncheon
Atkinson Pavilion, UCSD Faculty Club
11:30 AM - 2:00 PM
Fee: $25 member/$40 non-members
Margaret Leinen, Ph.D.
Vice Chancellor for Marine Sciences, Director of Scripps Institution of Oceanography, and Dean of the School of Marine Sciences

Topic: “Our Changing Oceans & Their Impact”

Mail your check to the UCSD Emeriti Association
9500 Gilman Drive, MC 0020, La Jolla, CA 92093-0020

Proposed Slate for 2017 - 2018

Morton Pritz
President
Phyllis Mirsky
Vice President
Robert Knox
Secretary/Treasurer
Mark Appelbaum
Past President

Executive Committee

Members at Large: Stan Chodorow (History, Campus); Win Cox (Communications, Campus); Fran Gillin (Health Sciences); Henry Powell (Health Sciences); Margarette Jackson; Gill Williamson, (Health Sciences) and Gill Williamson, (Mathematics, Campus);
Ex-Officio: Dick Attiyeh, Representative to CUCOA; Jack Fisher, Historian; Luis Ortiz, Chair of the UCSD Retirement Association; Sandy Lakoff, Editor, Chronicles; Susan Ciofi, Managing Editor, Chronicles, and Director, UCSD Retirement Resource Center; and Maxine Bloor, Liaison to Oceanside.

The election of the proposed slate will take place in April by email. If you do not have access to email, you are welcome to mail in your approval of the proposed slate, or your proposal of an alternate officer or Member at Large to: Susan Ciofi, Director, UCSD Retirement Resource Center, 9500 Gilman Drive, #0020, La Jolla, CA 92093-0020. The deadline for mail ballots is April 25, 2017.

Chancellor’s Scholars
Freshman Cohort
Academic Poster Session—
Free of charge / open to all
Seuss Library, UCSD Faculty Club,
10:00 AM - 12:00 PM

UCSD Emeriti Association

APRIL 2017
Volume XVI, No 4

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