



Written by [Michael Tennant](#) on September 8, 2012

Chicago Under RahmCare: Do as We Say or Pay Up

Chicago Mayor Rahm Emanuel has [announced](#) a new “wellness program” for all city employees and their spouses (or domestic partners or civil-union spouses).

“Our program will change lives, make our workforce healthier, and save taxpayers money,” Emanuel said.

The program, called [Chicago Lives Healthy](#), is technically voluntary; but those refusing to participate in it will be penalized \$50 a month per covered adult. In other words, it’s only voluntary if a couple wants to forego \$1,200 a year.



Not surprisingly, few city employees wish to do that. As of late August, just a week before the enrollment deadline, nearly half of all eligible employees and spouses — 22,000 — had signed up, with another 25,000 still undecided. Only 54 employees or spouses had at that time flatly refused to participate, according to Emanuel.

After signing up for the program, each enrollee must undergo a free biometric screening, including blood work. Then he must complete a “Well-Being Assessment” — a term so important it’s trademarked — which the website describes as “a confidential questionnaire that assesses life and environmental factors that are critical to your health, well-being and your ability to improve both.” It consists of 60 questions in the categories of “basic health history,” “mental health and stress,” and “barriers to change.”

Next the enrollee will receive a “health check-in call” from a disease-management company and be given a list of “wellness activities” that he must perform for at least 15 minutes each month. “Coaches [will] ride herd over workers on a bi-monthly basis to make certain they’re following their prescribed nutritional, medical and physical fitness regimens,” reported the [Chicago Sun-Times](#). “Those who refuse to participate [will] see their monthly premiums rise by \$50. Those who meet their goals could see similar reductions.”

Emanuel and other wellness-program boosters believe that essentially forcing people to engage in certain government-approved lifestyle modifications will reduce healthcare costs in the long run. The *Sun-Times* said Emanuel is counting on Chicago Lives Healthy to contribute to a \$240-million reduction in the city’s healthcare costs over four years.

A number of studies, however, have found that preventive healthcare services do not significantly reduce healthcare costs.

In a 2011 article in *Health Affairs*, for instance, Charles S. Roehrig and David M. Rousseau [wrote](#):

We conclude that health spending growth in excess of GDP growth is not primarily due to increases in clinical disease prevalence. Consequently, efforts to reduce future growth in disease prevalence — such as through prevention — although certainly providing many societal benefits if successful, are unlikely to reduce overall health care cost growth to levels lower than or equal to GDP growth.



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“Some evidence does suggest that there are opportunities to save money and improve health through prevention,” Joshua T. Cohen, Peter J. Neumann, and Milton C. Weinstein [averred](#) in the *New England Journal of Medicine* in 2008. Then they added a cautionary note:

Sweeping statements about the cost-saving potential of prevention, however, are overreaching. Studies have concluded that preventing illness can in some cases save money but in other cases can add to health care costs. For example, screening costs will exceed the savings from avoided treatment in cases in which only a very small fraction of the population would have become ill in the absence of preventive measures.

In other words, the Chicago program with its “free” screenings — and, as columnist Lee Duigon [observed](#), “‘free’ means they aren’t telling you what it will cost the city’s taxpayers” — may end up costing more than the treatment of the ailments it is intended to prevent.

Even if the program does result in healthier city employees and lower costs to taxpayers, it still sets a dangerous precedent for allowing government to control individuals’ behaviors (though it’s hard to feel sorry for government employees being subjected to it since they do the same thing to the people they supposedly serve). That trademarked Well-Being Assessment — featuring questions on mental health, stress, and “barriers to change” — and the “wellness activities” that will be prescribed on the basis of it are creepy. Wrote Duigon:

If you really are OK with a bunch of Chicago bureaucrats assessing your mental health, then nobody needs to assess it. You’re crazy.

Stress? How about the stress of having the Western world’s most corrupt political machine deciding what you have to do to be healthy — as they define healthy? If you’re already a stress eater, you’ll really blimp up after a few months of this.

What do you suppose they mean by “barriers to change”? That could mean just about anything, couldn’t it? “You ate at Chick-fil-A the other day. You didn’t contribute any money to the president’s re-election campaign. You have a picture of Sara [sic] Palin in your desk drawer. You’ve logged on to [a conservative website]. All of these are barriers to change. Plus you smoke and drink and eat red meat and Twinkies! But don’t worry — we’re here to help you change.

And change you will, to reach the government’s “wellness goals” for you, or pay through the nose. How long will it be until the penalties increase or employment is outright denied to those who refuse to get with the program?

Worse still, as Duigon noted: “Today Chicago, tomorrow the entire country. Now that the government has made itself responsible for your health care, they will demand that you stay health[y]. Or else.”

This is not mere hyperbole. [ObamaCare](#) does indeed include provisions for “assessing and implementing worksite wellness programming and activities.” The law seeks to get individuals to stop smoking, eat right (according to the government’s [highly suspect guidelines](#)), exercise, and improve their “social and emotional wellness.” It also funds community health centers where patients may be placed under “individualized wellness plans” approved by the government. Add to that the fact that Emanuel was Barack Obama’s first White House chief of staff, and it’s not farfetched at all to suggest that what Chicago’s mayor wants to do to the Windy City, the president wants to do to the whole country.

That is where things really get scary. “Can anyone even imagine the cost of micromanaging the lives of everybody in America?” asked Duigon. “The surveillance, the paperwork, the sheer magnitude of the



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administrative details?”

That is why “RahmCare” and ObamaCare both need to be scrapped posthaste.

Photo of Mayor Rahm Emanuel: AP Images

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