



Written by [Steven J. DuBord](#) on October 15, 2009

## Getting Your Health Insurance at the DMV

The Senate Finance Committee healthcare reform bill approved this week provides that Americans will be able to enroll in healthcare plans at their local Department of Motor Vehicles.

“This is no joke,” pointed out an October 14 [CNSNews.com report](#). “If this bill becomes law, it will be the duty of the U.S. secretary of health and human services or the state governments overseeing federally mandated health-insurance exchanges to ensure that you can get your health insurance at the DMV. You also will be able to get it at Social Security offices, hospitals, schools and ‘other offices’ the government will name later.”



Specifically, on page 19 of the [“plain English” text of the reform legislation](#), the Secretary or the states would “enable consumers to enroll in health care plans in local hospitals, schools, Departments of Motor Vehicles, local Social Security offices, and any other offices designated by the state.”

The DMV, of all places, would become a dispenser of health insurance. Not automobile insurance, which might at least be somewhat logical given the legal requirement for liability coverage, but health insurance.

CNSNews.com sees this as hinting at a deeper purpose: “This is the bill’s most revelatory passage because it sublimely symbolizes the bill’s true aim: a government takeover of the health care system.... What will the DMV and health care have in common if this bill is enacted? Government will control both.”

How exactly can this connection be made when there is currently no government-run, public insurance option in the proposed legislation? As CNSNews.com notes, “The public option is only one lane on the road to socialized medicine. Government subsidies and government regulations are two others — and they run like a super highway through the Finance Committee bill.”

Individuals would be required by law to purchase health insurance or pay a \$750 excise tax. But Americans earning up to 400 percent of the poverty level would be eligible for tax credits if they purchase a government-approved insurance plan from the government-approved health insurance exchange. This money won’t go to the individual but directly from the U.S. Treasury to the insurance provider.

This applies only to those who purchase their own insurance. Workers who receive health insurance from their employer would not be eligible for the tax credit subsidy. The employer and the employee would bear the full burden of the cost. If a business chooses not to provide insurance, they must pay a \$400-per-employee penalty to the federal government to support the subsidy these workers would then likely receive for their self-financed insurance plan.



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This creates a strong incentive for businesses to stop providing insurance, since a \$400-per-worker fine is much less than the cost of an insurance policy for each employee. Those workers who then would be forced by law to purchase insurance on their own would turn to the government-approved plans and exchanges so that they can receive the subsidy.

At this point, Uncle Sam would essentially be in the driver's seat for healthcare because most Americans would be purchasing plans that the government had approved. Down the road, an actual public option could be introduced, one possibility being that if a financially troubled insurance company was deemed "too big to fail" by the federal government, a GM-style takeover could be arranged.

As CNSNews.com puts it, "The Finance Committee has created an irresistible incentive for American businesses to drop their workers off at the DMV where they can enroll in government-funded, government-approved, government-regulated health insurance plans."

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