7 Huge Reasons Not to Enroll in Obamacare

This past year was the biggest test for the **Affordable Care Act**. And Obamacare, as it is widely known, failed miserably on many levels. From technological enrollment glitches to privacy concerns, Obamacare didn't gain many new fans in 2014. In fact, the government health-care plan alienated more than it won over.

Twila Brase, president and co-founder of Citizens' Council for Health Freedom (CCHF), says that as the next open-enrollment period approaches on Nov. 15, the uninsured should think twice—actually seven times—about enrolling in the ACA.

"**Obamacare** is fraught with problems," Brase said, "and citizens have the choice to stay away from this federal health-care plan in 2015. Experts in the health-care field were wary of Obamacare long before the rollout, and this past year has proven them right."

Those who are currently uninsured or want to change their plan can do so next month, when the "marketplace" opens again and remains open through Feb. 15.

Brase gives the following seven smart reasons not to enroll:

1. **Higher premiums.** The higher cost of coverage, due to new taxes and mandates, is unaffordable for many, even with federal taxpayer-funded premium subsidies.
2. **Limited choice of providers.** Many health plans offering coverage through the few state exchanges and the federal exchange at have cut the choices of doctors, clinics and hospitals, creating "narrow networks."
3. **Limited choice of coverage.** Obamacare coverage options are HMO-like managed-care plans offering federally approved "qualified health plan" policies. Catastrophic

major medical plans, or true insurance, have been outlawed by Obamacare except for individuals age 29 and younger.

4. **Privacy intrusions.** The federal government collects data on individuals, employers and navigators from application forms, state databases, health plans and other sources to track and store data on household income, tax status, employment, family status, health, citizenship, insurance status, incarceration and more. “Nothing is private,” Brase says.
5. **No private insurance.** Obamacare, which requires application to the federal government, is “Medicaid for the middle class” or, simply, a second-tier Medicaid program.
6. **IRS enforcement and “clawbacks.”** Most are unaware that they may be subject to expensive repayments to the IRS, or “clawbacks,” if their status changes during the coverage year. Individuals must check in with the government exchange if a patient’s financial or family status changes. Meanwhile, the financial accountability system won’t be ready until 2016. Can you trust the IRS, accused of unfairly targeting conservative organizations, with your finances?
7. **States and insurance companies are dumping Obamacare.** Thirty-nine states either declined to set up state health-care insurance exchanges in the first place or started them and then backed away because of various problems. Likewise, at least one insurance company has pulled out of the government health-care plan. PreferredOne Health Insurance, the insurance company with the most customers signed up for Obamacare in Minnesota, stated recently that continuing into 2015 is “not sustainable.” Brase predicts that other insurance companies will follow.

Brase says there are three legal ways to avoid signing up for government-run health-care coverage altogether, which puts

Americans’ private medical data at risk, compromises care, ties the hands of medical professionals, and takes more money out of Americans’ pockets.

1. Buy private insurance outside of the government exchanges, such as a private policy, employer-sponsored coverage or a private insurance exchange.
2. Pay the penalty tax in 2016 for being without coverage in 2015. In 2015, the penalty tax increases to 2 percent of net income or $325, whichever is greater—still less expensive and less risky than high government premiums.
3. Claim one of the nine Obamacare exemptions, or one of the 14 hardship waivers.