

REVIEW & OUTLOOK

Clinton vs. Clinton on ObamaCare

When Bill Clinton emerges as an ObamaCare critic and even President Obama admits in a recent interview that his entitlement has "got real problems," the discipline of the law's apologists must be fading. The question now is whether Republicans can capitalize to improve U.S. health care from its ObamaCare bottom.

Republicans should make the failing law a closing election theme.

subsidies. Mr. Clinton rightly noted that "the people getting killed in this deal are the small-business people and individuals who make just a little bit too much to get any of these subsidies."

Mr. Obama was scheduled to take a health-care victory lap while gesturing at token fixes on Wednesday in Florida, but the event was cancelled

because of the hurricane (Matthew, not Bill). But like the Clintons, his main objection is that the subsidies are too small.

Hillary Clinton's other solutions include a Medicare "buy-in" for people age 55 to 65, more price controls and a "public option" government-run plan. Yet only five of the original non-profit co-ops funded by ObamaCare remain, and Maryland's Evergreen Health is trying to sell itself to private investors to survive. What she and the Bernie Sanders-Elizabeth Warren wing of the Democratic Party really want is an unlimited ObamaCare draw on the Treasury—that is, a faster route to single-payer, government-run health care.

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One mystery is why this rolling failure of President Obama's signature law isn't a bigger issue in this year's elections. House Republicans have rallied around an alternative reform that would offer individuals more choices of coverage and more competition among competing insurers and medical providers. The contrast couldn't be greater with the ObamaCare-Clinton model that is built around the formation of private health-care oligopolies managed by government like public utilities.

Donald Trump hasn't picked up this theme, perhaps because he hasn't done the homework. But Mike Pence started to show on Tuesday how to wield ObamaCare like a political scalpel. Mr. Trump could stand to study up and argue the theme in Sunday's debate and through Election Day. If the GOP holds the Senate, one big reason will be the votes that Democratic candidates Evan Bayh in Indiana and Russ Feingold in Wisconsin cast for ObamaCare in 2010.

The balance of political power will be crucial in 2017 because ObamaCare will have to be rewritten. Mr. Trump's opportunity would be that ObamaCare legally empowers the Health and Human Services Secretary to loosen regulations if a President concludes that they "destabilize"

For years liberals have depicted the law as an end-of-history achievement, dismissing genuine problems as partisan inventions. ObamaCare remains as unpopular today as when Democrats rammed it through Congress in 2010, but they claimed it could never be repealed or changed. Now its dysfunction is so acute that even the co-author of the HillaryCare fiasco of 1993-94 is finding fault.

At a rally this week in Michigan, Mr. Clinton invoked the Americans who "wind up with their premiums doubled and their coverage cut in half and it's the craziest thing in the world." No doubt rebuked by his wife, Mr. Clinton later said ObamaCare has done "a world of good," but he was right the first time.

The average national premium increase in 2017 will be 24.2%, according a Barclays analysis of rates approved by state regulators. That includes eye-watering average hikes in states like Illinois (43.9%), Iowa (31%) and Arizona (68.1%), and the results aren't great in Florida (17.7%), Colorado (20.2%), North Carolina (20.4%) or Pennsylvania (23.6%).

The counties served by federal exchanges with only one insurer will increase to 18% in 2017 from 2% this year, while those with two insurers will jump to 21% from 12%. The 17 state-run exchanges aren't doing better. Minnesota recently waved through a 56% average premium increase and allowed insurers to turn away customers to prevent a collapse.

The Kentucky state-run exchange, Kynect, was once extolled as a success. But the state recently gave up and will revert to the federal Healthcare.gov. Goldman Sachs calculates that the insurers like Aetna and UnitedHealth that quit the exchanges covered about 35% of all ObamaCare enrollees in 2016.

Against this backdrop of fewer choices and soaring costs, some ObamaCare beneficiaries will be shielded because the subsidies rise with