end of a guillotine. Mrs. Pelosi and her band of profligate spenders may well meet the business end of voters' anger next year. It's something she should worry her pretty little head about now, before she loses it."

Another reference is found in a posting on Salon. com Aug. 12, in "Obama's Healthcare Horror—Heads Should Roll—Beginning with Nancy Pelosi," by Camille Paglia. Paglia denounces Pelosi charge that American citizens who object to Obama's "reforms" are an un-American mob, asking: "And what do Democrats stand for, if they are so ready to defame concerned citizens as the 'mob,'—a word betraying a Marie Antoinette delusion of superiority to ordinary mortals."

Lyndon LaRouche suggests that Pelosi is actually pleased by the comparisons to Marie Antoinette. "It has the feel of a real face uplift—an historical, sociological face uplift!" What she should do is resign, and get that burden off her shoulders, he said.

## Obama/Orszag Board: Hitler's T4 Program

The centerpiece of the "health-care reform" being pushed by President Barack Obama and his Budget chief Peter Orszag is nothing but a replay of Adolf Hitler's T4 (Tiergarten 4) euthanasia board. The Obama Administration's undisguised orientation toward "cost-cutting," "cost-effectiveness," "bending the cost curve," and health-care rationing, leaves no doubt that it is planning to rid itself of the "burden" of those "lives unworthy of life."

The Nuremberg Tribunals following World War II condemned and executed the Nazi doctors for the wholesale killing of what Hitler's men termed the "non-rehabilitable sick." Today, the Obama Administration has also concluded that there are lives "not worthy to be lived." Obama's cold-eyed health-care bureaucrats have come up with the same approach that Hitler did in 1939: a board of soulless "experts" to determine who shall live, and who shall die. Hitler's program was T4; Obama's is IMAC, or MEDPac.

## Hitler's Program

The Nazi program was officially put into effect in October 1939, when Hitler issued his secret authorization, under the title, "The Destruction of Lives Unworthy of Life":

"Reichsleiter Bouhler and Dr. Brandt are charged with the responsibility for expanding the authority of physicians, to be designated by name, to the end that patients considered incurable according to the best available human judgment of their state of health, can be accorded a mercy death."

In July of 1939, a conference of medical professionals was held in Berlin, where the professors and chairmen of the departments of psychiatry of the leading universities and medical schools of Germany, gathered, to collaborate on determining the criteria for deciding what patients would be considered to have "lives unworthy to be lived," and what was the most "practical and cheap" manner of removing these burdens on the health-care system, i.e., killing them. (Initially, T4 targetted the entire German population; ultimately, millions of Jews and non-Germans met the same fate in Hitler's death camps.)

The T4 program took its name from its Berlin office address, Tiergarten 4, where the coordinating organization for the program, code-named the Reich Work Group on Sanatoriums and Nursing Homes, was housed. In charge were Philip Bouhler, chief of the Chancellery, and Dr. Karl Brandt, Hitler's personal physician and chief medical officer of the land.

Their first task was to devise the questionnaires which would be used to categorize the targetted institutionalized populations. Four categories were specified:

- 1. Patients suffering from specified diseases who are not employable, or are employable only in simple mechanical work. These included schizophrenia, epilepsy, senile diseases, therapy-resistant paralysis, feeblemindedness, and the like.
- 2. Patients who have been continually institutionalized for at least five years.
  - 3. Patients who are criminally insane.
  - 4. Non-German patients.

Once the questionaires were completed by physicians at the institutions that housed the mental patients, epileptics, the mentally retarded, and other handicapped persons, they were sent to panels of psychiatric experts, who would decide, based on the answers, who was to live or die. The questionnaires were then sent to a chief expert, who passed the final judgment. Those patients determined to be "useless eaters" were then sent to "killing centers."

## Orszag's Medical Advisory Council

The leading role in promoting the Obama version of T4 is "behavioral economist" Peter Orzag, who heads

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White House/Pete Souza

President Obama's chief number cruncher Peter Orszag is pushing a Hitler T4-style medical board, IMAC, that would make decisions about who gets care and who dies. Obama has endorsed this as "MedPAC on steroids." The two are shown here in the Oval Office.

the Office of Management and Budget. His draft legislation, sent to Congressional leaders, is called the "Independent Medicare Advisory Council Act of 2009," a law which he repeatedly has characterized as "the most significant aspect" of the pending legislation. Its transparent intent is to cut care for those on Medicare.

Orszag's bill would set up a council, the Independent Medical Advisory Council (IMAC) of five physicians, who, like the Medicare Payment Advisory Commission (MEDPac), established in the 1997 Balanced Budget Act, would issue two rulings a year on reimbursement rates for various medical procedures. But that's not all.

First, the bill specifies, under the title "No Increase in Aggregate Medicare Expenditures," that the rulings could only freeze or lower total Medicare/Medicaid spending, not increase it.

Second, once the rates are approved by the President, they could only be voted up or down *in toto* within 30 days, by the Congress. Should this not happen, they would go directly into effect.

The proposed legislation says that "the Chief Actuary of the Centers for Medicare and Medicaid Services (CMS)" would exercise the final review of each of the commission's detailed regulations, after the President and Congress have signed off. If unsatisfactory to the Chief Bean-Counter, he or she could simply "declare them null and void," and tell the "commission of doc-

tors" to start over, and cut deeper.

But, does Obama agree with his murderous budget chief? There seems to be no doubt: Following the release of Orszag's proposed bill, Obama himself became its number one cheerleader: In his Saturday radio addresses, public appearances and meetings, he endorsed the call for an "independent" commission to cut costs.

In an interview with the *Washington Post* published on July 23, the President elaborated on the policy under the heading of "delivery system reforms." He wrote:

"At this point, I am confident that both the House and the Senate bills will contain what we've been calling 'MedPAC on steroids,' the idea that you continually present new ideas to change incentives, change the delivery system, understanding that, because this is such a complex system, we're not always going to get it exactly right the first time, and that there have to be a series of modifications over the course of a series of years, and we have to take that out of politics and make sure than an independent board of medical experts and health economists are providing packages that are continually improving the system. So I think there's general consensus that that is one of two very powerful levers to bend the cost curve...."

Obama repeated this concept July 23 at his town hall meeting in Shaker Heights, Ohio, saying that an empowered MedPAC would "eliminate waste and save money."

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