

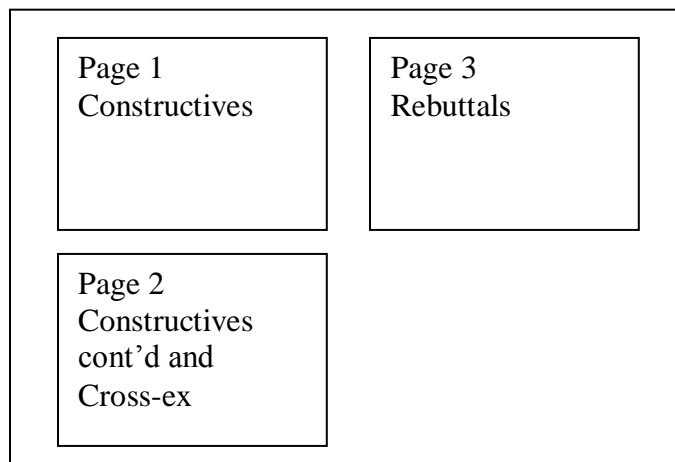
Flow Chart¹ of the Final Round: Connecticut Debate Association, State Finals, Wilton High School March 24, 2012

Resolved: All US residents should be required to purchase health insurance.

The State Championship Round was between the Joel Barlow team of Henry Knight and Sam Torchio on the Affirmative and the Cromwell team of Nicholas Loveland and Brendan Costello on the Negative. The debate was won by the Affirmative team from New Canaan.

Format Key

It's hard to reproduce notes taken on an 11" by 14" artist pad on printed paper. The three pages below are an attempt to do so. The first page covers the constructive speeches, the second page covers the cross-ex, and the third page covers the rebuttal. The pages are intended to be arranged as follows, which is how my actual flow chart is arranged:



Note that the first page containing the constructive speeches always has arguments related to the Affirmative contentions at the top, and those relating to the Negative contentions at the bottom. This is not how the speeches may have been presented, in that often a speaker will deal with Negative arguments prior to the Affirmative. The “transcript” version of this chart presents the arguments in each speech as presented.

The chart uses “A1,” “N2,” etc. to refer to the Affirmative first contention, the Negative second contention and so forth.

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First Affirmative Constructive	First Negative Constructive	Second Affirmative Constructive	Second Negative Constructive
1) Introduction 2) Statement of the Resolution 3) Definitions a) "residents"—citizens and legal aliens b) "purchase"—similar to requirements in the Affordable Care Act c) "health insurance"—private or government provided 4) A1 ² : The resolution is constitutional a) The resolution is permitted under the Commerce Clause ("CC") of the Constitution i) CC covers foreign and state transactions ii) Wickard v Filburn let US regulate crops grown for own consumption iii) Gonzalez v Raich in 2005 agreed the US could criminalize the growing and use of marijuana at home iv) This regulates the medical market v) Uninsured have enormous impact, \$116 billion b) The resolution is permitted under the Tax Clause i) The penalty is essentially a tax on all citizens ii) Individuals can opt out of health insurance if they pay c) State has an interest to protect rights i) Those with pre-existing conditions will be able to get care 5) A2: The resolution is practical and pragmatic a) Quantity i) By 2019 the resolution will save \$2000 per person per year ii) Insurance rates will be lower because more buyers will spur competition iii) 32 million more people will be covered, including aliens and those with pre-existing conditions b) Quality i) Revenue from the penalty will be spent on health care infrastructure so there will be less crowding ii) Pay for more emergency rooms (ER), so cover more patients	1) Intro	1) Intro 2) The essence of the argument is the following: a) There is a crisis in healthcare b) Which side can produce the best result: the status quo or the PPACA	1) Intro 2) A2: Quality Argument a) They provided not statistics or examples to show spending on health infrastructure would work
	1) N1: The health care mandate ("HCM") is unconstitutional and a dangerous precedent a) US has never penalized inactivity, just for	1) N1: Neg is wrong: this is just a tax on insurance a) In cross-ex they agreed we tax water and	1) N1: We need to respect the Constitution a) Article I Section 8 gives Congress the power to regulate commerce

² "A1" indicates the Affirmative first contention, "N2" the Negative second contention and so forth.

	<p>being alive</p> <p>b) CC only applies to activity</p> <p>c) This would set a new precedent for what gov't can do</p> <p>d) Gov't can set goals but it cannot impose goals</p> <p>e) It may be irresponsible to wait to get sick to buy health insurance, but it is protected under the 5th and 10th amendments.</p> <p>2) N2: HCM is a misuse of the system and will increase cost</p> <p>a) The Patient Protection and Affordable Care Act ("PPACA") is essentially similar to MassCare</p> <p>b) In Mass, half the ER visits are unnecessary, premiums are up for both healthy and sick</p> <p>c) Free riders have not been deterred by the penalty</p> <p>3) N3: HCM will damage free market capitalism ("FCM") as we know it</p> <p>a) People will leave private insurance for the gov't program</p>	<p>food, things we need to live</p> <p>b) Is the HCM a tax or a penalty? Aff says it's a tax</p> <p>i) Now you get a tax break for health insurance</p> <p>ii) Both the CC and the Tax Clause apply</p> <p>c) Everyone is paying a "tax" now for the uninsured</p> <p>i) \$117 billion activity</p> <p>ii) HCM will help citizens who abide by the social contract</p> <p>d) It's the will of the people</p> <p>i) If they dislike the law, they should elect new representatives, not claim it's unconstitutional</p> <p>ii) The Congress has clearly set our goals here</p> <p>2) N2, N3: ObamaCare is different from RomneyCare, and we have explained how</p> <p>a) Size is different, 400,000 additional in MA versus 32 million</p> <p>b) Adding more will lower costs</p>	<p>i) This refers to active commerce, things bought and sold</p> <p>ii) This does not refer to inactivity</p> <p>iii) E.g., you can't tax someone if they refuse to buy healthy food</p> <p>iv) There is no precedent for HCM</p> <p>5th Amendment Taking Clause</p> <p>b) You have to provide just compensation</p> <p>ii) The income tax was originally found unconstitutional</p> <p>iii) Nothing in the constitution supports HCM</p> <p>c) 10th Amendment Reserve Clause</p> <p>i) Health care should be a State matter</p> <p>2) N2: RomneyCare is a valid example</p> <p>a) It provides the only hard facts on how a mandate will work</p> <p>b) It has been in effect for 3 years</p> <p>c) Half of all ER visits are unnecessary</p> <p>d) Required more doctors, leading to higher cost</p> <p>e) 400,000 people is not a small number and shows the larger plan won't work</p> <p>3) N3: Separates health care from the free market</p> <p>a) With a free market, people can buy what they want</p>
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Cross-ex of First Affirmative	Cross-ex of First Negative	Cross-ex of Second Affirmative	Cross-ex of Second Negative
<p>1) Should we provide health care in a way that is consistent with our values? Yes</p> <p>2) Aren't you advocating utility over democracy? Absolutely not</p> <p>3) Didn't unnecessary ER visits increase in Massachusetts? RomneyCare is not a valid precedent. 88% already had health insurance, and the 400,000 person expansion was small.</p> <p>4) With respect to constitutionality, is there any precedent on regulating lack of commerce? The uninsured have an indelible impact on health care, that is paid for by others.</p> <p>5) How do you know the penalty will go to infrastructure? Any statistics on how much it will buy? ObamaCare is estimated to reduce the deficit by a lot. We can redirect some of the savings under our plan.</p>	<p>1) Do you need property to live? Yes</p> <p>2) Water, food, a roof over your head? Yes</p> <p>3) Are there taxes on these? Yes</p> <p>4) Why not tax health care? Everyone gets sick</p> <p>5) You need health care if alive, so tax it? This isn't a tax, and it's over reaching.</p> <p>6) If you always need a precedent, there would be no change, e.g. slavery in 1860? You should follow precedent</p> <p>7) Are you happy to be here? Thrilled</p> <p>8) How many debate at Cromwell High School? Just the two of us</p> <p>9) How many pay for you to debate? Everyone? Yes</p> <p>10) So why shouldn't the healthy pay so the risk of becoming sick is covered? Many won't get sick for many years</p> <p>11) How much to you value your life? \$16,000? \$20,000? More</p> <p>12) So why not pay the penalty?</p>	<p>1) Did you take a civics class in high school? I think so</p> <p>2) Did it ignore judicial review? It shouldn't be declared unconstitutional. If most people want it repealed, they should elect representatives to do it.</p> <p>3) How is the ideal of maximizing overall utility relevant? We have statistics. Adding 32 million payers will lower costs</p> <p>4) Didn't MassCare insure more? Yes, 400,000.</p> <p>5) The percentage covered went from 88% to 92%? Yes</p> <p>6) Don't the statistics say it was harder to find physicians? With more covered, primary care providers were in demand. Having more covered is good. The problem with Romney care was there were too few new payers, and most of them had pre-existing conditions. A national program will bring in more healthy people.</p>	<p>1) If 45 million are added to health insurance, do you think 100,000 will choose to pay the penalty? Sounds like an arbitrary number.</p> <p>2) Do you think it's reasonable? If you want to use it as an hypothesis</p> <p>3) Does a \$4,000 penalty sound reasonable? You never defined what it would be.</p> <p>4) So if 100,000 pay a \$4,000 penalty, how much would that be? I'm not good at math</p> <p>5) 100,000 pay a \$4,000 penalty, how much would that be? I'm not good at math</p> <p>6) Isn't it about \$400 million? But it came from numbers you chose arbitrarily</p> <p>7) You can belittle the revenue, but won't some opt out? We'd love to have more hospitals, but the amount won't cover construction costs.</p> <p>8) Aren't there laws that provide incentives to buy fuel efficient vehicles? Yes</p> <p>9) Can't we use the penalty funds for construction since they law is not explicit? People buy the cars, they aren't taxed for not purchasing them.</p> <p>10) Aren't there 40 million people without health insurance a problem? Yes</p> <p>11) Can you do better than this plan? Your plan isn't the solution</p>

First Negative Rebuttal	First Affirmative Rebuttal	Second Negative Rebuttal	Second Affirmative Rebuttal
<ol style="list-style-type: none"> 1) Intro 2) This is a controversial issue. The Supreme Court is planning to spend 15 days on it. 3) Neg has used case law and examples to make its points <ol style="list-style-type: none"> a) The debate is not Obamacare vs RomneyCare, but RomneyCare is a useful example 4) We see three issues. 5) What are the benefits to society? <ol style="list-style-type: none"> a) Aff plan perpetuates irresponsibility b) There is no precedent for the mandate <ol style="list-style-type: none"> i) America is based on consensus ii) Mandate attacks the free market 6) Is it economically feasible? <ol style="list-style-type: none"> a) The Aff takes utilitarianism too far b) They fail to compare ObamaCare to RomneyCare 7) Is it constitutional? <ol style="list-style-type: none"> a) They can't pick one part of the Constitution and ignore the others 	<ol style="list-style-type: none"> 1) Let's review the Negative framework 2) There are benefits to the people <ol style="list-style-type: none"> a) They say it perpetuates irresponsibility, e.g. unnecessary visits to the ER <ol style="list-style-type: none"> i) The statistics say only half were unnecessary under RomneyCare ii) RomneyCare is not entirely on point, as we have explained b) Aff plan lets people opt out, but the problem under the Neg today is they can't opt in <ol style="list-style-type: none"> i) So Aff will provide better benefits to more people ii) Benefits will be provided for those with pre-existing conditions iii) Benefits will be available to college students to age 26 c) Penalty will pay for better infrastructure 3) Economic feasibility <ol style="list-style-type: none"> a) We explained why RomneyCare is not relevant <ol style="list-style-type: none"> i) Few uninsured were added ii) Most of those had pre-existing conditions b) ObamaCare adds many more, and most of them healthy c) The Neg can't use statistics from RomneyCare but ignore the details of the program that explain them 4) Constitutionality: Neg misses all the reasons in A1 <ol style="list-style-type: none"> a) Commerce Clause rational basis argument b) Tax power argument works even if the commerce clause doesn't 	<ol style="list-style-type: none"> 1) Judicial review is the basis of the Constitution <ol style="list-style-type: none"> a) If a law is okay under one provision but violates three other, it's unconstitutional b) This isn't justified under the Commerce Clause c) Health Care is not a Federal responsibility 2) Benefits declared by the Aff are subjective <ol style="list-style-type: none"> a) You can't use made up statistics b) There is no precedent besides RomneyCare <ol style="list-style-type: none"> i) This "sample" supports the Neg ii) ObamaCare will increase costs iii) No evidence it is sustainable 3) Status quo is flawed, but the Aff plan is worse <ol style="list-style-type: none"> a) Not the best and it is not sustainable 4) We've presented three pieces of evidence saying its unconstitutional 5) You have to consider the costs vs the benefits, insurance vs liberty 	<ol style="list-style-type: none"> 1) We have more accurately shown the Aff plan is constitutional (A1) and economically feasible (A2) 2) Constitutionality <ol style="list-style-type: none"> a) It is Commerce <ol style="list-style-type: none"> i) It occurs across state lines ii) The uninsured leave \$116 Bn in expenses for others to pay b) Rational basis <ol style="list-style-type: none"> i) This is a tool to judge constitutionality ii) The plan provides for public well-being, and that justifies sacrificing some rights 3) Costs <ol style="list-style-type: none"> a) RomneyCare statistics were used by the Neg <ol style="list-style-type: none"> i) In Mass, 86% were already insured ii) The other 14% mostly had pre-existing conditions iii) This led to the rise in costs b) Nationally, the uninsured are more healthy c) You have to look at the reasons behind the statistics 4) Quality <ol style="list-style-type: none"> a) It is a question of supply and demand, if there is more demand, quality will improve b) With more citizens covered, they will have an incentive to demand better quality care c) If we try and do this state-by-state, then it would be RomneyCare, which the Neg claims it hates 5) Quantity <ol style="list-style-type: none"> a) Aff will cover 32 million more people