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Repeal of a law

Safe at School State Laws Federal laws protect the rights of children with disabilities – such as diabetes. Students with diabetes have the right to enroll and participate in school, just like their classmates. This means they have the right to receive the diabetes care they need to be safe and have the same educational opportunities as students without diabetes have. There are several important federal laws that provide protections. Section 504 of the Rehabilitation Act of 1973 (Section 504) Section 504 of the Rehabilitation Act of 1973 (Section 504) provides important protections for students with diabetes attending public school or private and religious schools that receive federal financial assistance. That is, it applies to the vast majority of students. Section 504 prohibits schools from treating children with disabilities—like diabetes—unfairly. It gives children with disabilities the right to the care they need to be safe and fully participate. Students do not need to have any problems with learning in order to be protected by Section 504. Covered schools are required to provide reasonable services and modifications that should be documented in a Section 504 Plan. The best way to protect your child under this law is to put in place a Section 504 Plan. We encourage you to use our sample 504 Plans. The Americans with Disabilities Act (ADA) The Americans with Disabilities Act (ADA) is a federal law that prohibits discrimination against individuals with disabilities, including diabetes. It has provisions very similar to Section 504. It applies to public and private schools, preschools, child care centers, and camps except those run by religious institutions. The Individuals with Disabilities Education Act (IDEA) Under the Individuals with Disabilities with Education Act (IDEA), the federal government gives money to state and local education agencies to provide special education services to some children with certain disabilities. In order to get services, the student's disability must harm his or her ability to learn. Some children with diabetes qualify for special education services under IDEA, especially if they have another disability, such as autism, or another learning disability. Some children may qualify on the basis of diabetes alone. Students who qualify will have an Individualized Education Program (IEP) that sets out what the school is going to do to meet the child's individual needs The Family and Medical Leave Act (FMLA) The Family and Medical Leave Act (FMLA) requires employers to give their employees up to 12 weeks of leave without pay due to a health condition each year. It can be used to take care of children with diabetes. For example, a parent/guardian might use it if his/her child is hospitalized, or for doctor's appointments. It should not generally be used to provide care to their children at school because this is the school's responsibility. Many employees do not qualify for protections under this law. See more information on the FMLA on our employment page, including links to sample medical documentation. Washington celebrated a festival of mis- and disinformation last week. Gaining the biggest headlines was the Senate Intelligence Committee's majority report on interrogations of terrorists connected to the air-piracy attacks on the World Trade Center and the Pentagon on Sept. 11, 2001. Some 6,800 pages were written for the actual report, which remains classified. A 525-page executive summary was published for the dogs of war and peace to chew on. The Republican minority published a response, as did the Central Intelligence Agency. The difference between the majority Democrats' executive summary and the Republicans' minority report is vast and partisan. The Democrats said the CIA committed pointless torture and lied about it. Republicans quibbled about the details. The CIA said the report process was a terrible security breach that damaged American security. The executive summary may be incomplete, misleading, or full of lies. Or the responses are so tainted. Or both. Clear and complete disclosure of all 6,800 pages would be the best first step to take toward understanding, followed by testimony under oath from all of the officials who did or should have contributed to it. The American people should understand what was done in their name, and why. They can accept it or retreat from the world.Naming What We Fear Torture is what was done to some of the inmates of the CIA's secret prisons in Afghanistan, Poland, Lithuania, Romania, and Thailand -- friendly countries with fewer scruples about secret violence. It does not do any good to maintain the pretense that waterboarding is not torture; that only makes the people who erect that defense look ridiculous. Chaining people to walls, beating them senseless, depriving them of sleep for days on end, and the other painful things done to captured terrorists between 2002 and 2007 are also torture -- which we define as the infliction of severe pain to get information, or to extract a confession, or to punish. Torture as punishment is unconstitutionally cruel and unusual. Torture to extract a confession is pointless, because a tortured person will confess to anything. But torture to get information may be effective -- as we heard from some of those who authorized "extreme interrogation methods" in the wake of Sept. 11. The Senate Democrats' summary says that the tortures had no worthwhile results, and the CIA says, "Did too." Both sides conveniently refuse to discuss specifics. The debate will continue for years, on into the next major swing of the pendulum. In an emergency like the one that existed after Sept. 11, when formerly complacent officials were made hypersensitive to being held responsible for those attacks and the next ones, terrorists' alleged civil rights will again be ignored in order to protect real civilians. And Americans will again debate the issue, even if the CIA and other agencies provide access to all relevant information, as they should.Rule of Law Nearly all countries have made torture unlawful in war – perhaps because it is too horribly effective to allow general use, perhaps to satisfy idealistic notions of proper behavior in war. The four Geneva Conventions of 1949 that the U.S. has signed outlaw torture of military personnel, especially prisoners of war, and of civilians who are noncombatants. As with most provisions of international law, no practical means of enforcement or punishment are provided, other than voluntary submission and what winners do to losers. Protocols proposed in 1977, which the U.S. and most countries have not signed and therefore need not observe, would extend the original weak protections against torture and other harsh treatment to combatants out of uniform and those who do not carry arms openly. But even those protocols do not protect spies, mercenaries, and persons not connected to national military organizations. Some would have it otherwise, but pirates, terrorists, and those who control them should not be protected by any kind of law, just as the intelligence officers who pursue them are not protected if they are captured by their enemies, and just as the people who worked at the top of the Trade Center towers were not protected by laws on Sept. 11. Abu Zubaida, Ramzi Binalshibh, Abd al-Rahim al-Nashiri, Khalid Sheik Mohammed, Majid Khan, and Walid bin Attash are among those tortured who now are imprisoned at Guantanamo Bay. None of the CIA's congressional critics raised any doubt that they were planners and instigators of terrorist attacks, including those of Sept. 11. Few if any who knew that torture was applied to them objected at the time. More professed horror after it was safe to do so.Human-Rights Violations Such critics now say that all persons are entitled to the same treatment that is supposed to be given to prisoners of war between nations. But al Qaeda, the Islamic State, and their ilk are not nations, and their lawless fighters and schemers are not prisoners of war. They are not even criminals. They are outlaws, and international law should set every civilized person's hand against them. The obvious difficulty is identification of the outlaws. Although they should not be entitled to legal forms of due process, the military and intelligence community should take care that they have outlaws in their sights or in their torture chambers. As in all the best spy novels, there are few moral certainties in the story of the CIA's struggle against al Qaeda since Sept. 11. There are victims; there are villains; there are fools; and there are the people for whom there is no single word, who secretly do extreme things to keep others safe. Presidents and congressmen call on them when they are thought to be needed, then turn on them when the crisis passes. Will they answer the next call? Will the rest of us be pleased with the result? Even as we think the categorical imperative is a good guide to an individual's sound moral life, we see another, more prudential rule that may be better to secure a nation's life: "Do to them what they would do to you, and do it first." More dangerous than following either rule is following both: Having it both ways is bad for both sides, and for the country. Editorial page editor THOMAS G. DONLAN receives e-mail at tg.donlan@barrons.com Keep up with the latest daily buzz with the BuzzFeed Daily newsletter! Over the past decade, we have made significant progress in the advancement of technologies and the tools developed to help transform our Nation's healthcare ecosystem. The HITECH Act accelerated the adoption of Electronic Health Records (EHR) through the federal EHR incentive program, Meaningful Use. As a result, we now have digitized health information systems that allow information exchange by capturing structured data in discreet and standardized formats.However, there is still a long way to go to achieve the government's goal of the "Triple Aim" - improving health and the patient experience, while lowering costs. Here are a few technology trends to consider in 2017: Digital Tools: As the nation moves from a fee-for-service reimbursement model to value-based care, it will be critical for hospitals and providers to have an IT infrastructure that supports value-based care if hospitals and providers are going to thrive in this environment. Digital health tools like wearable sensors and portable diagnostic equipment to data-driven software platforms, telemedicine tools, and mobile health care apps are key to success in a transformed healthcare ecosystem. Long Term and Post-Acute: Federal policies incentivized the adoption of EHRs for hospitals and providers. Nursing homes and post-acute care were not rewarded for adopting EHRs and are lagging behind as an industry. Currently, there are more than 1.5 million residents in long-term care facilities. These patients are medically complex, have high medical costs, and are frequently transferred to acute care hospitals. And our nation is facing an out of control opioid epidemic driving the need for tens of thousands of new treatment centers nationwide. As a result, both long-term care and behavioral health have an urgent need to keep pace with the Health Information Technology (HIT) adoption occurring in other sectors. Population Health: New technologies and startups are enabling patients to receive care based on different levels of severity through the use of data analytics and population health management. The population health market is expected to reach USD 31.63 billion by 2020, growing at a CAGR of 23.2% during the forecast period of 2015 to 2020. Read the full research here. According to a new survey "2017: The Year Ahead in Health IT" by Healthcare IT News, polling 95 top healthcare executives, healthcare organizations will continue to optimize their electronic health record system. We will also see the first arrival of technologies in post-acute healthcare organizations. Asked which technologies they plan to introduce or investigate in 2017, 45 percent said analytics, 45 percent said workflow improvement, 44 percent said telehealth, 41 percent said population health, 41 percent said smart medical devices, 34 percent said remote patient monitoring, and 21 percent said precision medicine. Regardless of what happens in Congress with the Affordable Healthcare Act (AHCA), the movement toward value-based care is inevitable. Copyright © 2017 IDG Communications, Inc. Law is a society's system of rules and related enforcement penalties and procedures. Law establishes order within a society, helping it to function with respect to business dealings, social interactions and more. Law has many branches of specialization including criminal law, environmental law, copyright law, employment law, human rights law, contract law and corporate law.Online Law Courses and ProgramsGet an introduction to law and criminal justice with online courses from major universities and institutions worldwide. Edx offers both individual courses and advanced programs designed to help you learn about law and legal issues in an engaging and effective online learning environment complete with video tutorials, quizzes and more.Additionally, edX offers the option to pursue accredited certificates in online courses. The certificate lists edX and the name of the university or institution offering the course and can be uploaded to your LinkedIn profile. It is proof for employers and others that you have successfully completed the course. Get started in with one the following courses or programs.Get an in-depth understanding of international law in a 4-course MicroMasters program from Université Catholique de Louvain. With courses on investment law, humanitarian law and human rights law, this program will get you on a path to a career in international politics, international relations or a number of related fields. The global economy is driven by innovation and at the heart of this are the laws and policies that govern intellectual property. In a 2-part online program from the University of Pennsylvania, explore intellectual property (IP) law in-depth with a look at patent, copyright and trademark law. Learn about things are eligible for patents and trademarks and view important legal cases surrounding the protection of intellectual property.Explore these and other free online law courses. Many courses are self-paced so you can enroll and start learning today. The U.S. Senate is scheduled to vote on the fate of the Affordable Care Act on Tuesday. Here are some opinions on what would happen if the law were repealed.Share on PinterestThe U.S. Senate is scheduled to vote Tuesday on the fate of the Affordable Care Act (ACA).What exactly the senators will be voting on isn't certain at this point.Will it be a straight repeal of the Obamacare law, or will it be a repeal with a replacement plan attached?Meanwhile, President Donald Trump has suggested that Republicans just walk the Affordable Care Act to fail.The president has even hinted he might nudge that failure along by not providing subsidies for insurance premiums and not promoting the plan during the next sign-up period.At this juncture, neither approach appears to have enough votes to pass.While the future of Obamacare floats in the air, millions of healthcare consumers may worry about what could happen to them and their families.What indeed would happen if the ACA simply disappeared?The forecasts vary widely, depending on who you ask.A Congressional Budget Office (CBO) report issued last week concluded that 17 million people would lose insurance coverage the first year after the ACA is dismantled.CBO analysts also predicted insurance premiums will jump by 25 percent during that year.They also said 32 million people would lose insurance coverage after a decade, and insurance premiums would double.The report did state the federal deficit would be cut by \$473 billion over that decade if Obamacare were repealed.Shawn Martin, senior vice president for advocacy, practice enhancement, and policy at the American Academy of Family Physicians, thinks those predictions aren't too far off.Martin told Healthline he believes a large number of people would lose insurance under a repeal-only of the ACA.A major reason for the increase in uninsured would be the pullback of the Medicaid expansion under Obamacare.Premiums and deductibles, Martin said, would also likely rise. This would be particularly true for people with preexisting health conditions.Martin added that there would be an impact on doctors because they would have fewer insured patients.Martin said the impact would be similar if Republicans simply let Obamacare fail. The only difference might be that it would take longer to feel the pain."It would be a slow bleed, and it would hurt the most vulnerable first," said Martin.Kurt Mosley, vice president of strategic alliances at Merritt Hawkins health consultants, doesn't see things quite as drastically, but he does believe there would be significant impacts under a repeal.He notes the predictions are "all over the place," from 30 million losing coverage to 4 million being suddenly without health insurance.He said the state health exchanges might come under some strain. Minimum requirements for insurance coverage would go away. So would the mandate that everybody must have insurance.Medicaid expansion, he noted, is still needed for children as well as for opioid addiction treatment programs."All that would go away," he told Healthline.Mosley acknowledged that under Obamacare, healthcare costs have gone up, as have deductibles and premiums.In addition, there are fewer choices for healthcare consumers in many places.Nonetheless, polls show a majority of consumers do not want the ACA to be eliminated. They prefer it be modified and fixed."Once you give people a taste of something, if you take it away, that's a problem," Mosley said.If you let Obamacare crash without a replacement plan, that too creates problems."If you let it fail, you leave people without insurance," Mosley said. There are those who predict that the nation's healthcare system will improve quickly and dramatically if the ACA is dissolved. One of them is Twila Brase, the president and co-founder of the Citizens' Council for Health Freedom. She supports a full repeal of Obamacare without any replacement plan. Her reasoning is simple. The federal government should not be overseeing healthcare. "The problem we have is the federal government got involved in the first place," Brase told Healthline.If the ACA were to disappear, Brase predicted, the states would take over the insurance marketplaces as well as Medicaid.Brase said insurance companies would then offer a variety of plans, including catastrophic health insurance coverage for younger and healthier people.All this, she believes, would decrease costs, increase choice, and provide easier access to care. "The states and individuals are supposed to be in charge of healthcare," she said.Brase said the "gorilla in the room" is Medicare, the health program for people 65 years and older. She said this system is driving the nation's healthcare system and needs to be reformed. That includes letting people opt out of the program.Brase dismissed the CBO predictions, saying that office was way off on its forecast for Obamacare enrollment.Brase said allowing the ACA to collapse would have the same positive effects because it would force states to take over. "Obamacare is failing and if it does, that presents an opportunity for states," she said.Brase acknowledged there might be some short-term pain for some consumers but said the changes would be worth it in the end. "This pain would take this country to where it belongs," she said.Dr. Elaine George, a board-certified otolaryngologist and author of "Big Medicine: The Cost of Corporate Control and How Doctors and Patients Working Together Can Rebuild a Better System," agrees along the same basic lines. She also supports a repeal of Obamacare but believes a two-year phase-out period is required, as is having a replacement plan. "Just uprooting the system would be a problem," George told Healthline. She said under a repeal, insurance companies would be encouraged to create a variety of coverage plans. More insurance companies would also join the pool. Right now, George noted, only five insurance companies are participating in the state marketplaces. George also believes the free market would drive down costs. She dismisses CBO predictions, saying "they were wrong about Obamacare, too." George does acknowledge that people with preexisting health conditions might have trouble finding insurance and certainly would pay more for it. But, she said, that's not necessarily a bad thing. "They should pay a little more," she said. "They use the system more." Overall, George said, a repeal and replace plan would put power back in the hands of consumers. "People will have the ability to be healthcare consumers," she said.

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