

president. That's Civics 101.

The Obama administration knows full well that statutory law overrides executive orders. A court challenge (by Planned Parenthood) would immediately invalidate the null promises of the executive order. Bioethics Defense Fund is deeply disappointed that the Stupak Democrats allowed empty words and an obvious political ploy to trump the sanctity-of-life principle that they claimed to defend.

— *Dorinda C. Bordlee is vice president and senior counsel of Bioethics Defense Fund, and editor of [YourHealthcare411.com](http://YourHealthcare411.com).*

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#### **A New Pre-existing Condition** [Carrie Lukas]

Last night, Speaker Pelosi reiterated that passing the health-care legislation means that "Being a woman will no longer be a pre-existing medical condition." It's true that outlawing gender ratings will effectively shift women's health costs to men (which means young men will see their health-insurance premiums rise disproportionately). Yet the Senate bill makes being a single mom a new kind of pre-existing condition: Instead of higher insurance premiums, these women will have fewer employment opportunities. Congratulations Mrs. Speaker.

— *Carrie Lukas is the vice president for policy and economics at the Independent Women's Forum.*

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#### **There Is Good News . . .** [Michael Cannon]

First, congratulations to all those to whom this victory means so much. This debate has been marked by such rancor, that I encourage all who are now crestfallen to take a deep breath. Reach out to your opponents. Remind yourself that they are good people, that they come to this debate with good intentions. You'll feel better about yourself. Also, if you hold on to rancor, you'll be worse than useless to the rest of us.

Grant this: The good news is that this legislation would provide medical care to many who otherwise could not purchase it. The bad news far outweighs the good, but let's be clear-eyed about both.

The bad part of the bad news is that this legislation would nevertheless inhibit our nation's ability to meet the basic human needs of its citizens. It would deny needed medical care to millions, even as it causes health-care costs to rise. It would sap individual initiative, destroy jobs, trap the poor in poverty and dependence, block innovations that would make us healthier and wealthier, and politicize matters that should not be politicized.

The good part of the bad news is that most of these provisions do not take effect for almost four years. That leaves time to educate the public and, hopefully, time to repeal

them.

— *Michael F. Cannon is director of health-policy studies at the Cato Institute.*

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Saturday, March 20, 2010

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**Catholic Bishops Still Oppose Executive Order** [[Kathryn Jean Lopez](#)]

*United States Conference of Catholic Bishops*

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March 20, 2010

United States House of Representatives

Washington, DC 20515

Dear Representative:

For decades, the United States Catholic bishops have supported universal health care. The Catholic Church teaches that health care is a basic human right, essential for human life and dignity. Our community of faith provides health care to millions, purchases health care for tens of thousands and addresses the failings of our health care system in our parishes, emergency rooms and shelters. This is why we as bishops continue to insist that health care reform which truly protects the life, dignity, consciences and health of all is a moral imperative and urgent national priority.

We are convinced that the Senate legislation now presented to the House of Representatives on a "take it or leave it" basis sadly fails this test and ought to be opposed. Why do we take this position, when we have a long record of support for health care reform? Our fundamental objections can be summarized in two points:

1. Health care reform must protect life and conscience, not threaten them. The Senate bill extends abortion coverage, allows federal funds to pay for elective abortions (for example, through a new appropriation for services at Community Health Centers that bypasses the Hyde amendment), and denies adequate conscience protection to individuals and institutions. Needed health care reform must keep in place the longstanding and widely supported federal policy that neither elective abortion nor plans which include elective abortion can be paid for with federal funds. Simply put, health care reform ought to continue to apply both parts of the Hyde amendment, no more and no less. The House adopted this policy by a large bipartisan majority, establishing the same protections that govern Medicaid, SCHIP, the Federal Employee Health Benefits Program and other federal health programs.

Despite claims to the contrary, the status quo prohibits the federal government from funding or facilitating plans that include elective abortion. The Senate bill clearly violates this prohibition by providing subsidies to purchase such plans. The House bill provided that no one has to pay for other people's abortions, while this Senate bill does not. While the Senate