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The Hotline

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HEADLINE: Walk A Mile In Their Blue Dog Shoes

BODY:

Some highlights of opinion pieces today in the health-care debate:

Progressive Policy Institute pres. Will Marshall writes in Roll Call: "It's open season on Blue Dogs. For insisting on applying their trademark concern for fiscal responsibility to the health care reform debate, the coalition of moderate-to-conservative House Democrats now finds itself in an ideological crossfire. ... The point is, everybody is going to have to make sacrifices for health reform, Blue Dogs included. The burden is on them to show they can and will produce the votes for a fiscally responsible approach to coverage for all" (7/30).

Ex-Clinton counsel Lanny Davis writes in The Hill: "While I hope the Blue Dogs ultimately will support a national health insurance plan similar to the one President Obama is supporting, which they haven't done yet ... I am glad they are putting on the amber light, making us Democrats think a lot more about what might work and, most importantly, helping to maximize the chances of winning at least some Republican support for the ultimate bill. This legislation is too important and far-reaching in changing a major part of America's economy and, indeed, our way of life not to work closely with these Blue Dog Democrats and moderate Republicans to try to achieve a broad consensus before enacting a new national health insurance system" (7/29).

Yale prof. Jacob Hacker writes in Fort Wayne Journal Gazette: "The Blue Dogs are right to hold Obama and Democratic leaders to their commitment to real cost control. But they are wrong to see this goal as conflicting with a new national public health insurance plan for Americans younger than 65. ... Blue Dogs have the future of health care reform in their hands. If they hold firm to their principles of fiscal responsibility and effective relief for workers and employers in their districts, what's good for Blue Dogs will also be good for America" (7/30).

Wall Street Journal's Henniger: "This struggle over health-care legislation isn't just another battle between the Democratic and Republican parties. It's about which force is going to take the United States forward for the next generation: the public sector or the private sector. ... The problem is that in Washington and many states the public sector's revenue needs have arrived at a point where space for the private economy is more or less beside the point. ... For centrists in both parties the moment has come to decide which side of the public-private divide they want the U.S. and its future workers to be on. Trying to live in both has brought us, inevitably, to that decision" (7/29).

Um...So...Your Plan Sucks.

Heritage Foundations VP for domestic policy issues Stuart Butler writes in Washington Times': "Why is it so

difficult to overhaul our health system when there is bipartisan agreement it needs to be fixed? First, let's understand the immensity of the task. ... Second, the congressional majority wants to revamp the huge health care economy using the doctrine of central planning. ... It is inconceivable that this could work successfully. ... We must and can get health reform. But it will never be achieved if Americans are pressured to agree to Big Bang change on a ridiculously short timetable -- and based on central planning, rather than on better incentives for American creativity and federalism" (7/30)

Washington Examiner's Freddoso: "In this Democratic Congress, the Republican Study Committee has little influence. But they do have a plan ... that Republican leaders should have paid more attention to when they controlled Congress. While the RSC plan is not the comprehensive overhaul that Obama envisions, it would dramatically change things for the better at little or no cost to the taxpayer" (7/29).

Cleveland Plain Dealer's O'Brien: "This round of the health coverage debate is a long way from over, so Americans are by no means safe from the effort to destroy their health care system and leap to the end-game of a 100-year campaign by 'progressives' to transform government from the people's servant to their master. ... No one with a lick of sense thinks the health care 'system' -- much too kind a description for something so badly bent by the unintended consequences of utopian impulses -- is well-conceived. But the one and only question before the nation right now is whether putting it entirely in the government would be wise. The answer to that is 'no'" (7/30).

Detroit News editorializes: "The fact that the conservative or 'Blue Dog' Democrats gained any concessions at all should be cause for encouragement. This train wreck has been slowed down. ... By all means, delay the vote. A much more thorough debate on the ramifications of a health coverage overhaul is needed. And instead of ladling on more costs, the focus in the fall should be on sharply reducing the expense and scope of this proposal" (7/30).

Cato Institute senior fellow Michael Tanner opines in the New York Post: "The 'compromise' health-care reform being negotiated by six members of the Senate Finance Committee is shaping up as a classic warning of the dangers of bipartisanship without principles: It looks like they'll keep the worst features of other ObamaCare bills -- but simply change the names. ... If this is what bipartisanship looks like, give me some old fashioned partisanship any day" (7/30).

Wall Street Journal editorializes: "The details of the Senate Finance Committee's hush-hush health talks aren't fully known, but leaks suggest that one all-but-certain highlight will be new federally created health 'cooperatives' to compete against private insurers. The onus is on Republican negotiators Chuck Grassley and Mike Enzi to explain why this isn't merely the House 'public option' in a better suit. ... All of which makes these co-ops sound a lot like a health-care Fannie Mae and Freddie Mac, which Congress created because there was supposedly no secondary mortgage market. The duo proceeded to use their government subsidy to dominate the market and drive out private competitors" (7/30).

Wall Street Journal editorializes: "Even many Democrats are revolting against Speaker Nancy Pelosi's 5.4% income surtax to finance ObamaCare, but another tax in her House bill isn't getting enough attention. To wit, the up to 10-percentage point payroll tax increase on workers and businesses that don't provide health insurance. This should put to rest the illusion that no one making less than \$250,000 in income will pay higher taxes. ... So who bears the burden of this tax? The economic research is close to unanimous that a payroll tax is a tax on labor and is thus shouldered mostly if not entirely by workers. ... To put it another way, the workers who will gain health insurance from ObamaCare will pay the steepest price for it in either a shrinking pay check, or no job at all" (7/30).

Isn't It Ironic? Don't You Think?

Ex-Bush adviser Karl Rove writes in Wall Street Journal: On the campaign trail last year, Barack Obama promised to end the "politics of fear and cynicism." Yet he is now trying to sell his health-care proposals on fear. ... This is not a healthy way to wage a policy debate. It also risks making the president look desperate at a time when his proposals are looking increasingly too expensive for Americans to accept. ... For the slice of the uninsured that is left--perhaps about

2% of all American citizens--Team Obama would dismantle the world's greatest health-care system. That's a losing proposition, which is why Mr. Obama is increasingly resorting to fear and misleading claims. It's all the candidate of hope has left" (7/30).

New Hampshire Union Leader editorializes: "Obama isn't talking about forcing Americans to change their health care plans, which is why Republicans have to -- because that is exactly what the Democrats' proposals would do. ... Contrary to his reassurances, these goals, if achieved, would radically change all health insurance offered in the United States. ... So even though Obama might not be 'talking about forcing you to change your plans,' he is proposing changes that would fundamentally change your health care plan. That's not fear-mongering. That's a fact" (7/30).

Roll Call's Kondracke: "For one supposedly dedicated to bringing parties together for health care reform, President Barack Obama shows unremitting hostility toward one of them: the health insurance industry. ... The question arises: Can somebody so personally hostile to insurance companies accept a solution that regulates the industry -- as it now favors -- or is he really out to destroy it?" (7/30).

Is This Just Pointless?

PoliticsDaily.com's Shapiro writes: "The truth is that -- no matter how many town meetings and press conferences Obama holds -- health care reform will remain an abstraction until there is an actual bill summary that voters can analyze. ... Beneath the widespread altruistic belief that health care is a basic human right lays a self-interested personal cost-benefit analysis. ... None of this is designed to argue that Obama-style health care reform is unattainable in political terms or undesirable in policy terms. But ... the legislative struggle over the next few months will be daunting. So fasten your seatbelts -- the real action on Capitol Hill has only just begun" (7/30).

Time's Joe Klein writes: "One of the most difficult things to do in a democracy is react to a problem that is real, but not immediately threatening. Obama is trying to do this in two monster areas, health care and climate change. ... as a democracy matures, special interests grow more entrenched. Their intense dedication to their own specific needs ... often trumps the broader, but less focused, interests of society. ... The President wants much more; the media expect much more -- but given the constraints of our middle-aged democracy, perhaps we should be happy to achieve any sort of progress at all" (7/30)

But It's Too Hard!

Politico's McGrane and Lerer write that Sen. Olympia Snowe (R-ME) "it seems safe to assume, is following the health care debate a bit more closely than the average American. So it is saying something that" she "admits she is stumped by the task of crafting a simple explanation for legislation of mind-numbing complexity." Rep. Collin Peterson (D-MN): "The members don't even understand what's in it. [Constituents] are not exactly sure what this is about, and they're not really sure whether they like it or not." It might "go too far to say that Americans are too dumb to understand concepts like 'bending the cost curve.' Or too preoccupied by 'America's Got Talent' to decide whether evidence-based medicine" is a euphemism for rationing. But all sides of the debate are facing the same essential challenge: How to boil down arguments that flummox even veteran legislators into simple appeals that will engage an easily distracted, easily flustered electorate" (7/30).

I'm All Out Of Love

Washington Examiner's Stirewalt: "In an era of symbolic breakthroughs, Speaker Nancy Pelosi is closing in on a dubious achievement -- being the least effective leader of the House in the modern era. ... And when historians inspect the record of the lady from California, they will find that hubris and empty talk sealed her fate. ... The months to come will decide if she remains in their company or takes sole position of the title of worst speaker" (7/30).

We Can Haz Public Option?

Des Moines Register editorializes: "Congress should give Americans the choice of buying into a health-insurance plan administered by the government, in addition to private-sector plans. A public option could bring down administrative costs in health care, give Americans another alternative for insurance and force the private sector to offer adequate coverage or lose business. ... It makes sense for the country ... Iowans support a public option ... Doctors support a public option" (7/30).

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