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Driving the Conversation:

What do you like, or dislike, about the Baucus health care bill?

Plus Obama's announcement on missile defense

Sept. 17, 2009

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Upcoming Live Reader Chats, and Chat Archive:

Friday, noon, Missile Defense, with Heritage scholar Sally McNamara

12:30 Tuesday, New America Foundation, Headstart and Early Ed

12:30 Weds., Brookings, Previewing the Pittsburgh G-20 Summit, Colin Bradford More...

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Thomas J. Whalen, Professor of Social Science, Boston University: **The most obvious problem with the Baucus bill is that it does not contain a public option.** That's sort of like staging a Bruce Springsteen concert without the Boss himself. In you want to keep long term health costs down and keep insurance companies

honest, there has to be some sort of viable public option included. Otherwise, we may all find ourselves "Dancing in the Dark" of higher premiums and drastically reduced coverage.

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Grover Norquist, President of Americans for Tax Reform:

There is one very good thing about the Baucus legislation to incre

There is one very good thing about the Baucus legislation to increase the government's control over your health: it is written down.

Unlike the "Obama Plan" it exists in the real world. It is written down in English and can be viewed on the worldwide web. It is transparent. Obama has referred repeatedly in his speeches to union bosses and to the Congress to his "plan." But we have asked to see it and are told it is as real as the Emperor's New Clothes. Only he can see it. **More...**

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David Boaz, Executive VP, Cato Institute:

We still don't really know what the Baucus bill is. After all this time, it's just a summary. What we do know is that **it's a massive step toward a federal government takeover of health car**e, which looks moderate only because it's not quite as sweeping and intrusive as the other bills being put forth. NPR gushed on Wednesday that it holds costs

"below \$900 billion for 10 years." Way to go, Mr. Finance Chairman! Only a trillion dollars, more or less. We used to consider that big money. And of course, it's a misleading estimate. The bill would take a few years to be phased in, so that \$900 billion is barely more than a five-year estimate. Costs in the "out years" -- in Washington, the "out of sight, out of mind years" -- would be much greater.

The bill also proposes an unprecedented and **probably unconstitutional mandat**e that every American buy health insurance -- never until Mitt Romney's Massachusetts bill did any American government require that you buy a product just because you exist. It's a bad idea, a major imposition on personal freedom and responsibility. **Reduce...**

The bill would also impose new regulations that would raise costs on businesses and insurance companies and likely push people toward a subsidized government plan (which isn't included in the Baucus plan, but would likely be demanded as a result of the squeeze on insurers and businesses).

It requires new taxes on health care plans, and would likely push states to raise taxes to pay for new mandated costs. And Gallup has just reported that "American adults doubt that President Obama can expand health care without boosting taxes on the middle class, and overwhelming majorities are ready to oppose plans that would result in higher taxes."

As my colleague Michael Tanner **writes** in the New York Post, "it could be worse" isn't much of a recommendation

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Joshua A. Tucker, Professor of Politics, NYU:
On Obama's missile defense announce: **A Correct, But Difficult, Decision**

President Obama's decision to scrap a controversial "missile shield" in Central Europe is the correct one to make, but, like many difficult decisions, comes with costs. To understand why the decision was correct, we need to look at the supposed justifications for the missile defense system. On one hand, the missile system was supposed to protect the US from an Iranian threat.

Exactly how it was going to do this was never to clear to me, but the most compelling argument was that the defense system – if it worked – could prevent Iran from exerting power over the US by threatening Europe with a missile attack. **More...**

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Timothy Stoltzfus Jost, Law Professor at the Washington and Lee University:

First, a couple of comments on the politics of the legislation, which I will leave largely to others. As far as I can see, no one likes this bill other than Senator's Baucus and Conrad

and the CBO. I assume that it **marks the far right boundary** of whatever is likely to get through Congress and that what we get will be somewhere between the Baucus bill and the House bill.

It is curious, however, that **no Republicans are willing to endorse it. It is truly a bipartisan bill.**Everything they have said they want--abortion restrictions, restrictions on access by undocumented immigrants, interstate sales of insurance, even a start on malpractice reform--is in there. It is impossible to understand their continued refusal to get on board in any other terms than pure politics. This is still Obama's Waterloo for them, and they have no interest in anything other than unconditional defeat of the bill. The most laughable line is the idea that they need more time to work this out. What? They were too dumb to think of any other ideas all summer, but somehow hope something will dawn on them given another couple of months? Come on.

Now to the bill itself. First, almost all of the elements of HR 3200 are in here in some form: insurance market reforms, health insurance exchanges, an individual mandate, Medicaid expansions, affordability subsidies, an employer mandate (sort of), and a new competitor for private insurance (sort of). This is not a radical departure from the other bills pending in Congress, and reconciling the bills first in the Senate and then in conference should be doable if compromise is still possible. **More...**

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James Goldgeier, Sr. Fellow, Council on Foreign Relations, Professor GWU: **On Obama's missle defense announcement:** The surprise would have been if Obama had supported the deployments in Poland and the Czech Republic given all the signals the administration had previously sent. **We shouldn't miss the real story here: the administration has decided to construct a missile defense against Iran (with an**

approach that the president said has unanimous support from the Secretary of Defense and the Joint Chiefs of Staff). Given that his stated goal is to protect not only U.S. forces but our European allies against short- and medium-range missiles (and since the Russians should no longer object to the American approach), the president will expect to get greater support from our NATO allies than would have been the case for the Bush plan.

The president's remarks on his decision this morning were clear and strong – and they needed to be since the headlines this morning emphasized Obama's "shelving" or "scrapping" of a missile shield. It's unfortunate that the administration hadn't gotten out in front on this one to explain the decision, emphasizing a plan that Obama says is more cost-effective and proven and that can be deployed sooner.

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Will Marshall, President and Founder, Progressive Policy Institute: After a long and difficult gestation, the Senate Finance Committee has finally given birth to its plan for overhauling the nation's health care system. Like many newborns, **it may not be particularly pretty, but it has potential.**

Although it's the last entry into the health reform sweepstakes, the plan fashioned by Committee Chair Max Baucus is widely seen as the most important. That's because Baucus, with President Obama's explicit blessing, tried harder to win Republican backing for comprehensive health care reform. Even if he didn't immediately succeed, his bill lies nearer the nation's center of political gravity.

In today's rancorous climate, that naturally means that Baucus is getting hammered from both ends of the political spectrum. Liberals hate his bill because it embraces (costly) nonprofit health care coops rather than the public option. Senator GOP leader Mitch McConnell wasted no time blasting the bill as partisan and senseless, even though three of his fellow Republicans were part of the "gang of six" who labored with Baucus for months to find common ground. More...

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Steven G. Calabresi, Professor of law, Northwestern University:

Any decent health bill ought at a minimum to allow health insurance companies to compete across state lines for customers. President Obama himself said that we need more competition in health care prices would keep going up and service would go down. More...

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Bradley A. Blakeman, Republican strategist, consultant, entrepreneur: **The Obama/Baucus Plan amounts to Government Care without the "public option".** It mandates that all Americans must have health care and uses financial coercion, taxes, fees and mandates to accomplish it. If you like your health care plan now, forget about it. **More...**

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Julian E. Zelizer, Professor of History and Public Affairs, Princeton: **Politically**, **this is a bipartisan bill that thus far does not have any Republican support.** Baucus¹s promise was to find the center and it is unclear that center exists. The cost of not having a bill before the tough month of August was high. One of the policy problems is that it is unclear how his bill will seriously hold down medical costs. If it does

not, and the subsidies for obtaining coverage are pretty modest, then it is a bill that could turn into another situation like Medicare Catastrophic where there was a backlash from beneficiaries.

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Lanny Davis, Attorney and Democratic strategist: **Senator Baucus has made a courageous effort to find consensus.** He should be thanked. His bill creatively would provide insurance for the poor and almost all Americans and not add to the deficit.

The biggest concern is the costs of insurance it imposes on already struggling lower - middle - income and middle - income families. **More...**

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Greg Dworkin, Contributing Editor, Daily Kos:

Since the status quo is unacceptable, I like progress. I like the overall cost estimates but I don't like the cost burden on working class families (that will have to be addressed.) I like the **WaPo** headline that suggests health reform will pass in some form. I don't like the plan's "free rider" provision, which is a burden on small business to pay differently for

subsidized and non-subsidized employees (that will also have to be addressed.) I love having an actual framework to build on. I don't like seeing the absence of a public option, **favored by most doctors** including me. The shortcomings are repairable. Let's get to it.

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This Just In, breaking news:

Report: White House to scrap Bush approach to missile shield-NYT

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James Carafano, Heritage Foundation, Defense and Homeland Security:

Missile Defense Mayhem

The administration will regret the day it pulled out of the plan to put missile defense in Europe. 1) the flip flop makes us look like less trustworthy allies 2) it will encourage Iran to speed up its weapons program 3) it will embolden Russians to be more aggressive in their demands from the West 4) it leaves US homeland and our allies and bases in Europe vulnerable to missile threats.

By cutting defenses in exchange the administration go us...exactly nothing.

Even their promises to offer an alternative are empty..they will spend billions on research and development and field nothing, while the defense industrial evaporates into dust.

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Darrell M. West, Vice President, Governance Studies, Brookings: **The Baucus bill is a compromise bill that neither side is very fond of.** Yet his proposal contains exactly the type of provisions that are most likely to pass the Senate. In order to build support, Senator Baucus had to scale down the proposal, drop some of the more liberal provisions, and include ideas designed to get the support of at least one

Republican in order to prevent a GOP filibuster. His proposal will not be the final word. Some things will get added back in when the House and Senate negotiate their policy differences. But it is safe to say the ultimate bill that comes out of Congress is going to look a lot more like the Baucus bill than any of the other committee bills that are on the table.

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Dean Baker, Co-director, Center for Economic and Policy Research: By virtue of the fact that it neither provides for a public plan option, or any clear mechanism for effective insurance regulation, the mandates in the Baucus plan run the risk of **just being taxes paid to the health insurance industry.**

If a family is forced to pay a substantial premium for a high deductible policy, then this may feel like they are just paying money for nothing. If there is not effective regulation to ensure that insurers have adequate

numbers of specialists in network and that they actually pay claims, then it will be money for nothing.

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Fred Barbash, Moderator:

Arena welcomes guest posts from readers. Please sign in **here**, with my assurance that the information is used only when necessary to authenticate a post. Thanks for participating.

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Janet Renehan (guest), , MI:

The Baucus bill is a nightmare! I will personally donate money to any Democrat who runs against him. I hope this thing is dead in the water as they are saying it is. If this thing passes I will begin to question Obama's sincerity. This thing was clearly written by the insurance companies. It will hurt not help Americans.

Jonathan Wolfman (guest), , MD:

The Baucus proposal is inadequate and wonderful. It's inadequate because it shies from a public tool to force private insurers into genuinely capitalist, cost-containing competition. Co-ops may prove useful but no analysts see them, now at least, as the robust balance needed to help reign in families' private insurance burdens. It's wonderful because the most conservative of the five bills that must (and will) be reconciled, it yet gives us far-reaching consumer protection reforms relative to the status quo. That said, we need and will likely get more. It should be clear to Mr. Obama now that the primary goal of most Republicans in Congress is to deny him any victory at the cost of any significant advance. The President should work with Democrats (and perhaps Sens. Snowe, Voinovich, and Collins) on a final plan with a public-plan trigger mechanism and actual local/regional trials.

Anthony Altieri (guest), , CT:

If a tree falls down the center of a forest, and *still* only Democrats hear it fall, is it really bipartisan? Democratic bill at the expense of maybe one Republican vote (Snowe). Now they have a truly compromised bill (I don't mean that in a good way) and they still won't have any Republican votes (beyond Snowe, maybe.) What was the point?

Larry Garnett (guest), , MD:

Would those who favor a "public option" for health insurance be willing to put their money where their mouth is? What if the government were to issue "health care bonds" to establish and subsidize this option. Like other types of investments these bonds would provide a return to bond-holders. They could even have favorable tax status like other government bonds. BUT, they would NOT have backing by the US tax payers and investors would be completely at risk of loss of some or all of the investments. The "public option" would then have to compete on a more even playing field with the private insurers, while subscribers to this insurance would have to pay closer to the true cost of coverage without tax-payer subsidies. How soon it will go into effect will depend on how long it takes to raise the funds necessary to get it started. Would the millions of people who own part of the private insurance companies inside their 401k's be willing to sell those investments to invest in "health care bonds"? Would our nervous foreign debt holders be willing? If there really is a desire for a public option why not let it be truly owned by the public?

Jonathan Dorsey (guest), , GA:

As the President said in his health care speech, before he was so rudely interrupted, the country and both major parties generally agree on the vast majority of all the bills' provisions with regard to pre-existing conditions and dropping someone when they get sick, when insurance is of course needed the most. They are my favorite provisions as well. The issues of universal coverage and public option(s) are not where I'd like them to be but I truly believe that perfect is the enemy of good because staying the way things are would be to compound disaster upon disaster. Get this bill, suitably amended, through Congress and signed into law then start work on the next phase. To not try to alleviate many ills because you can't alleviate all ills would be a tragedy.

George Stiller (guest), , FL:

Baucus health care bill is butkus, nothing, inconsequential, insignificant. The real bill here is the behind the scene deals with the AMA, PhRMA and others that benefit the industry more than the medical insurance policyholder. We are talking really big money that benefits the industry. From what I have heard about his bill so far, nothing in the Baucus Butkus bill would affect the deals Obama made with the health care industry in order to get them to support health care reform.

Bruce Blevins (guest), , MN:

If this proposal was a law, it would be deeply disappointing. Since it is only the beginning of the real process, it is better than nothing. Compromise is often a good thing, but in the framework of healthcare, it seems like competition between the best thing for the insurance industry, and the best thing for the country, its citizens, and its economy. The Baucus plan looks like the insurance-friendly bill. Proposing rate variation based on age and health conditions flies in the face of universal coverage, and again allows discrimination and income-based rationing. Same thing for high-risk pools. My son became a type 1 diabetic at age eleven. Does this mean he should pay substantially more than a healthy person? If so, we are reasserting that health coverage is a privelege instead of a right. By cutting the subsidies for coverage, Senator Baucus is also putting middle class families into a position of not being able to afford coverage. His idea to exempt them from the mandate defeats the purpose of the biill. They do not need to be exempt from coverage, they need affordable coverage. The so-called consumer driven high deductible plans are just another way to shift more costs to the consumer.

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