

James Pinkerton


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## Bobby Jindal's Brave Move


The Louisiana governor urges his fellow Republicans to "join the battle of ideas" on health care. How did his fellow members of the GOP respond?


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Bobby Jindal, the 38-year-old Indian-American governor of Louisiana, and a rising star in Republican circles, did a brave thing on Monday morning: He took to the [op-ed page of The Washington Post](#) to urge his fellow GOPers to “join the battle of ideas” on health care. That is, Republicans should put forward their own health care plan. And to get that process rolling, he put forth ten ideas of his own.

At [Serious Medicine Strategy](#), I have long held the same opinion: Republicans need to offer a better plan; they need to offer, most of all, hope for victories over diseases that are incapacitating us--and killing us. And so while I wish that Jindal had zeroed in on the essence of medical science, which is the sustained search for better cures, I admire the Louisianan for speaking out.

The conventional wisdom, of course, is that Congressional Republicans are doing exactly the right thing, saying nothing about health care other than “No.” As a wise former Member of Congress [told me](#) last summer, “health care is a losing issue for whichever party is in charge.” Which is to say, since the Democrats are in charge, it’s the Democrats’ turn to be ground up in the meat grinder. As Napoleon counseled, “Never interfere with the enemy when he is destroying himself.”

From a purely partisan point of view, there’s much to be said for this approach. The Democrats destroyed themselves with an overly complicated, overly bureaucratic health care plan in 1993-4, and today they are doing the exact same thing again. Indeed, the destroying-est headline of the whole health care debate appeared in Politico last month immediately after Obama’s speech to Congress: [“Echoes of Clinton in Obama Speech.”](#) Ouch!

Jindal, himself a former Member of Congress, obviously understands this dynamic. So in his Post op-ed, he is careful to praise Congressional Republicans for opposing Obamacare; that has been the top priority so far this year, he enthuses. Yet then he offers this suggestion:

But Republicans must shift gears. Conservatives should seize the mantle of reform and lead. Conservatives either genuinely believe that conservative principles will work to solve real-world problems such as health care or they don’t. I believe they will.

[The Atlantic’s Chris Good](#) bolsters Jindal’s argument, noting, “Americans think Obama has better ideas on health care than Republicans in Congress: the NY Times/CBS poll showed Obama beating congressional Republicans 52-27 on that question, which probably means the Democratic Party’s ‘Party of No’ attack on the GOP is sticking.”

There are worse things, of course, than being the “Party of No.” It’s worse to be the “Party of Big Government and Incompetent Bureaucracy,” and even worse to be the “Party That Wants To Pull The Plug on Granny.” But at the same time, it is not a bad thing to be the “Party of Health Care.” (And it would be even better to be the “Party of Serious Medicine, the Party That Wants To Fight a Real War Against Disease and Death,” but I digress).

In any case, Jindal’s article offers “ten ideas to increase the affordability and quality of health care.” And given his background -- Rhodes Scholar, the youngest-ever president of the University of Louisiana system, assistant secretary of Health and Human Services under Bush 43 before getting elected to Congress and then to the statehouse in Baton Rouge--his “top ten list” merits close attention.

His suggestions fall into various categories. Some are free-market favorites, such as voluntary purchasing pools, portability, and tort reform.

Others are a bit more centrist, such as “reward[ing] healthy lifestyle choices,” which some conservatives, such as Mike Huckabee, are inclined to support, even as others on the right view such rewarding as nanny-state-ism.

And some of Jindal’s are highly suspect to purists. One such is “permitting” (presumably by changing laws to force the “permitting”) young people to stay on their parents’ health policies.

Another of his proposals is to require insurance companies to issue policies to applicants with pre-existing conditions. For that idea, Jindal is getting slapped around pretty hard on free-market circles.

In Politico's "[Health Arena](#)," Michael Cannon, Director of Health Policy Studies at the Cato Institute, let loose:

Require coverage of preexisting conditions? That's code for federal price controls on health insurance. Jindal proposes that Republicans join Democrats in ignoring Larry Summers' warning: "Price and exchange controls inevitably create harmful economic distortions. Both the distortions and the economic damage get worse with time." Explicit price controls would merely exacerbate the damage done by the implicit price controls that already bind more than 90 percent of the health insurance market.

Of course, the Cato Institute, a citadel of libertarian thinking, can be expected to oppose any and all intrusions into the marketplace. That's what Cato does. It's a principled position that merits respect. And if nine in ten Americans support a given position that violates free-market orthodoxy, does that make a difference? Not to Cato.

Everyone has a right to his or her principled position, but the majority has rights, too. In the case of a ban against discrimination based on pre-existing conditions, some 89 percent of Americans support such a provision, according to a [Wall Street Journal poll](#). The Cato Institute, never having to worry about elections, will suffer no harm from upholding a position held by just a smidgen of the population--and can even hold up its minoritarian resolve as a badge of honor--but politicians are in a different category.

And Republican politicians, in particular, have to think about these health care issues, because they will eventually need to say something, stand for something--and push for something. After all, if present trends continue, the GOP is likely to be in charge, again, of the Congress and even the White House. For sure, Republicans will need a health care policy *then*.

So while it was not surprising to see Cato denounce Jindal, it was a bit surprising to see a conservative publication, The American Spectator, join in the denunciation; within hours of Jindal's op-ed, Philip Klein, writing for the Spectator, had [posted his response](#), headlined, "Jindal's Incoherence on Health Care."

Why the surprise on the Spectator's attack on Jindal? Because while the libertarian Cato Institute can always be expected to uphold ivory-tower free-market purity--completely abstracted from the chore of actual governance--conservatives, for the most part, have given themselves the task of forging a "governing conservatism." Libertarian heroes are figures such as Milton Friedman, Friedrich Hayek, and Ayn Rand, none of whom ever ran for office, much less were ever in charge of anything. Indeed, the great value of libertarian thinking is its purity; Cato, for example, provides an enormous service to the country by consistently upholding the "gold standard" of ideological purity.

By contrast, conservatism is a lumpier and more organic philosophy. Conservative heroes include Edmund Burke, Abraham Lincoln, Robert Taft, Barry Goldwater, and Ronald Reagan, all of whom not only won elections, but sought real change through the legislative and political process. Jindal is in that category, a conservative actively involved in governance. And so for conservative intellectuals who wish their side to win elections and then go on to make real policy changes, they might conclude that they need to work with Jindal and others like him, in order to hammer out art-of-the-possible solutions. Or maybe not.

Klein writes of Jindal: "Some of his ideas... would be aimed at creating a free market for health care in this country. Yet several of his other ideas involve more government regulation." And then he zeroed in on the same issue as Cato's Cannon: Jindal's proposal for mandating coverage for those with pre-existing conditions. As Klein writes, "A more problematic part of Jindal's article is his endorsement of a requirement forcing insurers to cover everybody with pre-existing conditions."

But whereas Cannon says that Jindal violates libertarianism, Klein couches it differently. He says that Jindal violates conservatism: "Whatever you may say about such a requirement, it's completely inconsistent with conservative principles." Now let's pause over Klein's assertion, that Jindal's proposal is "completely inconsistent with conservative principles." Is it really un-conservative? Yes, it's true that any sort of government mandate is un-libertarian. But here's a newsflash: The American people are not libertarian. Most conservatives are not libertarian. Most Republicans are not libertarian. Yes, conservatives and Republicans have libertarian impulses, but they are more likely to be moved by instincts toward traditional morality, patriotism, and nationalism.

That's why conservatives and Republicans tend to support plenty of regulation that is un-libertarian. Most are pro-life, for example, and supportive of other government efforts to bolster family values. Moreover, conservatives and Republicans support the police, the military, and other upholders of public order. Indeed, most conservatives--and virtually all elected Republicans--support at least some form of Social Security, Medicare, public education, pollution controls, and other restrictions on perfect freedom. And in the realm of health care and medicine, most conservatives support government restrictions on stem-cell research, organ trafficking and euthanasia.

Governing conservatives, such as Jindal, must take this lumpy political and ideological reality into account. Libertarians can be expected to take their shots at Jindal & Co., because the mere act of getting elected can be taken as proof that a man or woman is prepared to make compromises.

For their part, conservative intellectuals and pundits can join in on the anti-Jindal catcalls if they wish to, but one of these days, someone like Jindal is going to end up leading the House or the Senate, or end up sitting in the Oval Office. At which point, he or she will face many challenges which call for prudence and practicality, as well as ideology and vision. One of those challenges will be making sure that everyone gets at least a decent minimum amount of health care coverage.

And of course, if that future conservative leader really wants to be popular and effective, he or she would be seeking cures to the diseases that kill us. Such a Serious Medicine Strategy would be popular--even with liberals and libertarians.

*James P. Pinkerton is a FOX News contributor. Read his ideas on health care and more at [Serious Medicine Strategy](#).*

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