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Health Care Bill Faces Big Hurdles in the House

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The mushroom cloud rises over Washington.

President Obama has triggered the nuclear option on health care reform, calling for Democrats to use an obscure parliamentary gimmick known as reconciliation to bypass a Republican filibuster and force a bill through Congress.

Even if moderate senators like Blanche Lincoln (D-Ark.) and Ben Nelson (D-Neb.), having previously voted for the bill, now vote against it, it seems likely that Senate Democrats could round up the 50 votes that they need (assuming that Vice President Joe Biden casts the deciding vote).

Republicans can be counted on to raise procedural hurdles, pointing out that use of reconciliation to pass health care is liable to run contrary to Senate rules. But, in the end, ironically, Senate passage may turn out to be the easy part.

The real showdown is likely to be in the House.

Under the arcane rules of reconciliation, the House would actually have to vote first, passing the already approved Senate health care bill without any changes. Then the Senate could use reconciliation to "fix" the bill in ways that would make it acceptable to the House. And that is easier said than done.

Rep. Jack Murtha has since died, and two other Democrats, Robert Wexler of Florida and Neil Abercrombie of Hawaii, have given up their seats to pursue other careers. Democratic Rep. Eric Massa of New York has also resigned—under bizarre circumstances -- but he was already a no vote. And the only Republican to have voted for the bill, Joseph Cao of Louisiana, now says that he is unlikely to do so again. That means House Speaker Nancy Pelosi has absolutely no margin for error.

But if there is one thing that nearly all House Democrats agree on, it is that they uniformly hate the Senate bill.

Liberals are upset that it does not include a public option, but does include a tax on so-called "Cadillac" insurance plans. Anti-abortion legislators, like Rep. Bart Stupak (D-Mich.), object to the Senate bill's more permissive language on government funding of abortion. (Making matters worse, it is very unlikely that changes to the abortion language can be made using reconciliation.) And moderates are terrified of having to cast yet another vote in favor of an increasingly unpopular bill.

If we have learned anything from this health care debate, it is that we should not count out the Democrats' bill until the last vote is counted. It has, after all, come back from the dead more times than Jason and Freddy Krueger combined.

Reportedly, as many as nine Democrats who previously voted against Obamacare, including Reps. Rick Boucher and Glenn Nye of Virginia, are now open to supporting the latest version.

In his speech the week before last, the president offered a few cosmetic concessions (an extra \$50 million to encourage states to experiment with malpractice reform, undercover stings to fight Medicare and Medicaid fraud, maybe allowing government-run exchanges to sell health savings accounts).

But at its heart, the latest version of Obamacare has not changed. It still represents a top-down, centralized, command-and control-approach to reform. The government would require everyone to have health insurance, would determine what benefits that insurance must include, would regulate insurance prices and physician reimbursement, and would micromanage how medicine is practiced. All this would be accompanied by higher taxes and, most likely, higher insurance premiums.

As the president said, "Every argument has been made. Everything there is to say about health care has been said, and just about everyone has said it. So now is the time to make a decision."

Somewhere in the next few weeks, the president's plan to remake one-sixth of the US economy will come to a final vote.

At that point we will know whether Reps. Boucher, Nye, and others are willing to throw away their careers in pursuit of a bill that the American people have soundly rejected.

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