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Pelosi Intensifies Pressure for Public Health Plan

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WASHINGTON — Speaker [Nancy Pelosi](#) stepped up the pressure on House Democrats on Friday to support her preferred version of legislation that would require the federal government to sell [health insurance](#) in competition with private insurers.

Her action came amid indications that Ms. Pelosi had not locked down the votes for the proposal, the most contentious element in a bill that would provide health insurance to more than 35 million people, at cost of nearly \$900 billion over 10 years.

Other provisions of the bill, including enhanced [Medicare](#) benefits, could take the total cost over \$1 trillion, Democrats said. But they promised to offset the cost and avoid any increase in [federal budget](#) deficits.

At a meeting Friday, the chairman of the House Democratic caucus, Representative John B. Larson of Connecticut, called the roll and asked lawmakers to say whether they would vote for a bill including the most liberal, “robust” version of a [government insurance plan](#), similar to Medicare. The results were not definitive because many members were missing and some supported the bill but called for changes. Ms. Pelosi finds herself once again caught between two wings of her caucus: the progressives, who demand a Medicare-like public option, and moderate-to-conservative Democrats, including many from rural areas, where [hospitals](#) say they could not survive on Medicare payment rates.

At a meeting with Ms. Pelosi on Thursday, liberal Democrats like Representatives [Yvette D. Clarke](#) of New York and Jan Schakowsky of Illinois spoke forcefully for a robust public option.

Ms. Pelosi told them that she had well over 200 votes, but that it was proving difficult to reach the goal of 218.

The House Democratic whip, Representative James E. Clyburn of South Carolina, said Friday that party leaders were considering four variations of the public insurance plan.

“We are trying to find out which one of these approaches will best suit the most people in our caucus,” Mr. Clyburn said.

The Senate majority leader, [Harry Reid](#), Democrat of Nevada, is going through a similar exercise, polling his caucus.

In a shift, Mr. Reid told colleagues on Thursday that he was inclined to include a government-run insurance program in the bill that he would take soon to the Senate floor. States would be allowed to opt out if they wanted.

Asked about Mr. Reid’s idea, Ms. Pelosi said, “I don’t think there’s much problem with that.”

Ms. Pelosi said that in shaping the House bill, she was already thinking about “the endgame.” If the two chambers pass disparate bills, as Democrats expect, negotiators from the House and the Senate would try to reconcile the differences.

When it appeared that the Senate bill might not have any government insurance plan, Ms. Pelosi said, it was essential for the House to pass a strong public option, as a counterweight to the Senate. Now, she said, she will consider an alternative favored by some centrist Democrats, who contend that the government plan should not set prices but negotiate payment rates with doctors and hospitals, as private insurers do.

Ms. Pelosi set the health care legislation in its historical context, saying it “sits very comfortably in the path of [Social Security](#) and Medicare,” created in 1935 and 1965, respectively.

Mr. Clyburn said the squabbles among Democrats on health care were like the disagreements in the 1960s among

civil rights leaders, who had the same goals but sometimes differed on legislative strategy.

The House majority leader, Representative [Steny H. Hoyer](#), Democrat of Maryland, said Friday that the House could take up the health care legislation as soon as Nov. 6 and might meet on Saturday, Nov. 7, to continue work on it.

But Democrats in both chambers have missed many self-imposed deadlines. And many hurdles remain.

House Democratic leaders are still trying to figure out exactly how to limit the use of federal money for abortions.

In addition, before taking their bill to the House floor, Democrats need to get a cost estimate from the [Congressional Budget Office](#).

Ms. Pelosi said she had not decided whether lawmakers would be allowed to offer amendments on the House floor.

In the Senate, Mr. Reid is considering several alternatives to his proposal for a national public insurance plan.

Under one alternative, the public plan would be established, or triggered, only in states that failed to meet certain goals for insurance coverage.

Senator [John D. Rockefeller IV](#), Democrat of West Virginia, said this approach would allow health insurance companies to continue price-gouging for several years.

“A trigger simply delays price competition,” Mr. Rockefeller said. “It is not a substitute for a strong public health insurance option.”

Mr. Reid talked Friday with several moderate Democrats, including Senator [Mary L. Landrieu](#) of Louisiana. Ms. Landrieu has said she strenuously opposes “a government-run, taxpayer-supported public option,” but Mr. Reid hopes to change her mind.

