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In Colorado, Craving Reform of Health Care and Congress

By [ROBERT PEAR](#)

DENVER — Donny Seyfer, the manager of an auto repair shop here, had high hopes when [President Obama](#) and Congress tackled health care as their top priority early last year.

"This is good," Mr. Seyfer remembers thinking. He expected Congress to "find out what Americans wanted." But, he said in an interview at his shop, the Congressional debate deteriorated into a partisan brawl, and Congress has virtually ignored his biggest concern: holding down health costs.

"I am an automotive diagnostician," Mr. Seyfer said. "We look for the root cause of problems. If we treat the symptoms, the problem always comes back. With health care, we are not treating the root cause: Why does it cost so much?"

Mr. Seyfer's disappointment was echoed in dozens of interviews here and in Fort Collins, Colo. People from both sides of the political spectrum — and apolitical consumers — said they were deeply skeptical about the health care bill being put together by Congress and the White House.

The concern illustrates the challenge Mr. Obama and Democratic lawmakers face in trying to meld House and Senate bills in a way that can be sold to the public. All kinds of issues are still in play, from how to cover [abortion](#) to whether to tax high-cost health plans.

President Obama hopes to sign a bill that guarantees access to insurance, outlaws the denial of coverage for pre-existing conditions and subsidizes premiums for many low- and middle-income people. Heading into Congressional elections this fall, Democrats hope voters will reward them for a historic achievement.

But Republicans are already using the bill as ammunition against Democrats who voted for it, like Senator [Michael Bennet](#) of Colorado.

About 800,000 Colorado residents, representing one-sixth of the state's population, are uninsured. The state's politics are mixed and somewhat unpredictable. Colorado has a sizable contingent of people who want a single-payer government-financed health care system, as well as libertarians and Tea Party protesters opposed to big government.

Few of those interviewed here expect to see direct benefits from the legislation. Many complained of sweetheart deals done to win votes in the Senate. Liberals and conservatives alike said Congress was too influenced by special interests.

Tamara L. Kirch, who is uninsured and stands to benefit from the legislation, bristled at the proposed requirement to buy insurance.

“We have a frontier mentality,” Ms. Kirch said. “I don’t want the government telling me what to do.” (She feels the same way about abortion: “The government should not tell a woman what to do with her womb.”)

Democrats, Republicans and independents each account for about one-third of registered voters in Colorado.

Mr. Obama carried the state with 54 percent of the vote in 2008. But Gov. Bill Ritter Jr., a Democrat who was facing a tough fight for re-election, [pulled out of the race](#) last week.

Representative Diana DeGette, a Democrat from Denver, is a champion of the bill passed by the House in November. But Representative Betsy Markey, a freshman Democrat from the district that includes Fort Collins, voted against it, saying the bill did not do enough to cut costs.

Ron Vaughn, who provides [health insurance](#) to his 60 employees at Argonaut Wine and [Liquor](#) near the state Capitol, said: “I’m a middle-of-the-road kind of guy. I want the Democrats out of my pocket and Republicans out of my bedroom. The one word I would use for what’s going on in Washington is embarrassing. I am embarrassed for Republicans and for Democrats. They started out on the right foot, but it’s degenerated.

“Republicans misled people and tried to scare seniors by putting out misinformation about death panels,” Mr. Vaughn said. “Then to pass a bill in the Senate, Democrats stooped to bartering for votes. It demeans the whole process.”

James W. Noon, who runs a packaging supply business here, said he was irked to see Senate leaders secure votes by promising extra [Medicaid](#) money to Nebraska and Louisiana.

“Don’t they realize how dumb that looks?” said Mr. Noon, a Republican.

Michael R. Stone, a private investigator who describes himself as a political independent, was bothered by those deals, too.

“President Obama campaigned on a promise to change the way things are done in Washington,” Mr. Stone said. “But it seems like business as usual to me.”

Richard F. Barkey, a former chairman of the Jefferson County [Democratic Party](#) and a leader of the advocacy group [Health Care for All Colorado](#), said: “We had huge expectations for President Obama and the Democrats in Congress. But they could not build a dam big enough to stop the flood of money from corporate interests that have influenced the health care debate.”

Eliza Carney, a member of the same group, said, “Obama and his administration have really — I won’t say betrayed, but — disappointed us.”

State Representative John M. Kefalas, a Democrat from Fort Collins, said: “Not enough in either bill focuses on: How do you increase the value of our health care system? How do we bring down costs?”

A government-run insurance company, or [public option](#), could hold down costs by putting competitive pressure on private insurers, Mr. Kefalas said. But it was “bumped out of the Senate bill because of special-interest influence,” he said.

Brandon C. Shaffer, a Democrat who is president of the Colorado Senate, said, “It’s amazing to me how the insurance industry lobby has shaped the debate in Washington.”

That sentiment was echoed on the other side of the political divide.

“Congress and this administration don’t listen to us anymore,” said Lesley A. Hollywood, a Republican and member of the Northern Colorado Tea Party group. “They are catering to special interests, health insurance and pharmaceutical companies.”

Colorado has been an incubator of innovation. Denver Health is considered a model for public [hospitals](#). Health economists point to Grand Junction, Colo., to show how collaboration by doctors and hospitals can produce high-quality, low-cost care.

And on Dec. 2, Vice President [Joseph R. Biden Jr. gave the nation’s top award for high-quality care](#) to the [Poudre Valley Health System in Fort Collins](#).

But Pamela G. Brock, a vice president of the Poudre Valley system, said it would be difficult to maintain that quality if Congress cut back [Medicare](#) payment rates, as proposed in the House and Senate bills.

“There is a big fear that the cuts in Medicare and other areas will put many hospitals out of business,” Ms. Brock said. “The cost of providing care does not seem to have been taken into account by people drafting the federal legislation. Congress talked to insurance companies, to the American Hospital Association and the [American Medical Association](#) and all the lobbyists, but not to many people actually providing care.”

The strongest voice of support for the legislation came from Dr. Patricia A. Gabow, chief executive of the Denver Health and Hospital Authority, which runs the city’s highly regarded public hospital.

The proposed expansion of Medicaid could be a boon to the hospital, where 46 percent of patients are uninsured, Dr. Gabow said.

Kraig W. Bursleson, chief executive of the Inner City Health Center, a private nonprofit clinic for the uninsured in Denver, said: “The Congressional debate has been very frustrating to watch. Political posturing by both parties has hindered work on the legislation and will mar the quality of the final product.”

John Parvensky, president of the Colorado Coalition for the Homeless, which runs the Stout Street Clinic here, was more hopeful. He said the federal legislation could have “a tremendously positive impact,” providing insurance to indigent single adults who received health care, [mental health](#) and addiction services at his clinic.

In the last year, he said, the number of patients treated at the clinic increased about 20 percent, to 12,000.

“The situation continues to get much worse while the debate in Washington goes on,” Mr. Parvensky said.

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