

## [Among Some, High Marks for Health Care Overhaul's Beginnings](#)

The New York Times

WASHINGTON — President Obama gets high marks, even from some Republicans, for the way he has begun carrying out the new health care law in the 100 days since it was signed. And a new poll suggests a small increase in favorable views of the measure since May.

But it remains unclear whether a substantial number of people will see tangible benefits before the November elections, and whether those benefits will help Democrats who voted for the legislation and are facing resistance from voters who view it as fiscally irresponsible and overly intrusive.

The administration has issued a blizzard of regulations, including a patient's bill of rights, and has persuaded insurance companies to make some changes sooner than required by the law. It has also assembled a team of insurance experts to help carry out the law, under close supervision from the White House.

"I give them an A for effort," said Stuart M. Butler, a vice president of the conservative Heritage Foundation. "But there are land mines down the road because the law is fundamentally flawed." Stephen E. Finan, a health economist at the American Cancer Society, said: "I am extremely impressed with what the administration has accomplished. They have cranked out a lot of regulations. They're doing it methodically, and they're doing it well."

On Thursday, the administration unveiled a Web site, HealthCare.gov, where consumers can obtain information about public and private health insurance options in their states. The administration and many states are also setting up high-risk insurance pools for people who have been denied coverage because of pre-existing conditions.

In the last three months, administration officials have issued rules allowing young adults to stay on their parents' policies and forbidding insurers to deny coverage to children with pre-existing conditions. They have notified nearly four million small businesses of a new tax credit to help defray the cost of insurance. On Tuesday, they began accepting applications for a separate program that will reimburse employers for some of the cost of providing health benefits to early retirees. And the government has begun sending

\$250 checks to Medicare beneficiaries with high drug costs.

Ronald F. Pollack, executive director of Families USA, a liberal-leaning consumer group, described these initial steps as confidence-builders. “If they work well,” Mr. Pollack said, “they will give people confidence that the broader reforms will be helpful.”

Insurers, who fought the legislation, now say they hope it will succeed. “We are working to get new products on the market by Sept. 23,” said Alissa Fox, a senior vice president of the Blue Cross and Blue Shield Association. “After that date, we can’t sell new policies to individuals or small groups unless they comply with the new standards.”

While Mr. Obama hopes to gain political benefits from the law, he is, in some ways, caught in a political trap. No Republicans voted for the final bill. Republican leaders say their goal is to “repeal and replace” it. In response to daily Republican attacks, the White House defends every feature of the law, potentially creating expectations that will be difficult to fulfill in the near future.

Representative Dave Camp of Michigan, the senior Republican on the House Ways and Means Committee, said the White House had significantly overstated the benefits of the law, most recently in a brochure sent to people on Medicare. The brochure looks like “taxpayer-funded propaganda,” Mr. Camp said.

The new poll, conducted June 17-22 by the Kaiser Family Foundation, found that 48 percent of Americans had favorable views of the law, while 41 percent had unfavorable views. The favorable share was 41 percent in May and 46 percent in April.

Americans remain deeply divided. Roughly a third of voters say that a candidate who voted for the health care law is more likely to get their vote, a third say less likely, and nearly a third say it does not make much difference.

By far the least popular feature of the law, according to the poll, is a requirement for most Americans to have insurance or pay a fine, starting in 2014. The public may not accept the requirement until courts rule finally on its constitutionality. A federal district judge in Richmond, Va., heard arguments on the question on Thursday.

In recent weeks, Kathleen Sebelius, the secretary of health and human services, has emerged, in effect, as the national insurance commissioner. She criticizes insurers by name when she believes they are seeking excessive rate increases, and she urges states to reject such requests.

To date, economists see no evidence that the law has slowed the explosive growth of health spending, and some administration officials worry that it could fuel medical inflation. Mr. Obama has become adept at jawboning insurers. He told insurance executives last week that they must not use the law as an excuse for big rate increases.

Insurers say they wish that Mr. Obama would put similar pressure on doctors and hospitals, whose services account for about half of all health spending.

Consumer advocates, insurance companies and state insurance regulators have been working together to develop one of the most important new rules, requiring insurers to return at least 80 percent of premium dollars to policyholders in the form of health benefits or rebates.

“This experience is restoring my faith in the ability of government and people from different sectors to work together constructively when there is a clear imperative and a set of deadlines,” said Amy R. Bach, executive director of United Policyholders, a national consumer rights organization based in San Francisco.

But several developments in recent days point to problems that could threaten the success of the new law.

The Congressional Budget Office said that federal health spending, including “all the effects of the recently enacted health care legislation,” was still on an unsustainable course.

Mr. Obama just signed a bill providing temporary relief to doctors who treat Medicare patients. But doctors face a 21 percent cut in their Medicare fees in December, with a further cut of 5 percent scheduled for January.

The new law calls for a major expansion of Medicaid, the program for low-income people, but it became apparent this week that some states could not afford the programs they had. Governors said they would have to cut services and lay off employees if they did not receive more help from the federal government.