2012

News reporting during the healthcare reform debate

David J. Kubacki

The University of Toledo

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A Thesis

entitled

News Reporting During the Healthcare Reform Debate

By

David J. Kubacki

Submitted to the Graduate Faculty as partial fulfillment of
the requirements for the Master of Liberal Studies Degree

___________________________________
Dr. James Benjamin, Committee Chair

___________________________________
Dr. Patricia R. Komuniecki, Dean

College of Graduate Studies

The University of Toledo

May 2012
The study seeks to answer whether or not there was imbalance in news reporting in the three newspapers with the largest circulation in the country during the healthcare reform debate: *USA Today*, *The Wall Street Journal* and *The New York Times*. The results of this study show that a majority of the 986 articles reviewed were found to be neutral in terms of news reporting. In the remaining articles, however, articles in the *USA Today* and *The New York Times* were found to lean slightly toward the pro-reform/liberal perspective, while articles in *The Wall Street Journal* leaned slightly toward the anti-reform/conservative perspective.
For my wife, Jillian, and parents, Ralph and Cathy. Who would have thought I would be going to school for a graduate degree?
Acknowledgements

This thesis would not have been possible without the support of my wife, Jillian. Had you not completed your graduate degree before me I don’t know that I would have ever worked towards finishing mine. You make me a better person every day.

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Finally, I would like to thank several other important people in my life. To my brother, Dan and my sister, Amy: it is nice to know that two of us furthered our education; we all know which one didn’t. To Jeff, Jess and Wyatt: just because you need to be in this thesis with no explanation why. To my cat, Carebear, who was less than helpful while I tried to work anywhere in my house. To Alex Miller: thanks for writing The Revival. It is still no DJ Tanner.
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Chapter 1

Introduction

In the time leading up to the 2008 presidential election, it quickly became apparent that healthcare reform would be on the policy agenda for the upcoming presidential term. Radio, television, and print advertisements highlighting policy stances flooded media outlets leading up to the election (Robertson, 2008). Candidates hoped to garner support for their policies and keep the topic of healthcare reform on the American public's mind. According to an October 2008 Gallup poll, 41 percent of Americans considered healthcare an extremely important election issue (Saad, 2008). Moreover, this poll demonstrated that from the very beginning, the importance of the topic of healthcare reform was divided along party lines. For the Democrats, healthcare ranked second of importance but it didn't appear in the top five issues for Republicans or Independents (Saad, 2008). On January 20, 2009 Barack Obama assumed his role as the 44th President of the United States and was given the opportunity to see his vision for healthcare reform realized.

There were many elements of healthcare reform that divided Democrats and Republicans from the very beginning. Specifically, issues such as the requirement to have coverage, the requirement to offer coverage, the cost of implementing the reform, the
availability of a public option, coverage for abortion, and the changes in public programs such as Medicare were among the most contentious and debated (Holan, 2009; “Focus on health reform,” 2010).

Proponents of healthcare reform sought to require most U.S. citizens and legal residents to have health insurance. Specifically, the plan was to “create state-based American Health Benefit Exchanges through premium and cost-sharing credits available to individuals/families with income between 133-400 percent of the federal poverty level and create separate Exchanges through which small business can purchase coverage” (“Focus on health reform”, 2010, p.1).

Second, healthcare reform would expand requirements for employers to offer coverage for employees. Specifically, the reform proposed new requirements for employers with more than 50 employees to provide some level of coverage or pay a penalty per employee. The reform would also require employers with more than 200 employees to automatically enroll employees into health insurance plans offered by the employer (“Focus on health reform”, 2010).

With the expansion of healthcare reform and a greater government presence, the question of how reform could be financed became a topic of debate. According to “Focus on Health Reform” (2010), the Congressional Budget Office estimated the cost of the coverage components of the new law to be $938 billion over ten years. The costs would be “financed through a combination of savings from Medicare and Medicaid and new taxes and fees,
including an excise tax on high-cost insurances, which the Congressional Budget Office estimates will raise $32 billion over ten years” (‘Focus on health reform’, 2010, p.40).

Possibly the most contentious topic during the healthcare reform debate was the provision of providing a public insurance option. Proponents for the public option argued it would cause insurance companies to reduce their premiums, while opponents felt it would create a single-payer system, eradicating competition between private insurance companies (Holan, 2009).

Another provision bitterly dividing Democrats and Republicans was the issue of coverage for abortions. Opponents argued that healthcare reform would provide funding for abortions beyond which federal funds are permitted such as saving the mother's life and in cases of incest or rape. Proponents, on the other hand, argued that “plans that choose to offer coverage for abortions beyond those for which federal funds are permitted in states that allow such coverage to create allocation accounts for segregating premium payments for coverage of abortion services from premium payments for coverage for all other services to ensure that no federal premium or cost-sharing subsidies are used to pay for the abortion coverage” (“Focus on Health Reform”, 2010, p. 16).

Lastly, a major area of debate was changes in public programs such as Medicare. Under the proposed bill, Medicare would begin paying for annual wellness visits and would also close the coverage gap for its prescription drug program, providing coverage for 75 percent of drug costs by 2020 (Smith, 2010). Furthermore, Medicare would “aim to pay
doctors for good patient outcomes instead of paying them per procedure, also called 'fee-for-service’” (Holan, 2009).

The Senate passed the contentious healthcare reform bill on December 24, 2009 in a vote of 60-39; all Democrats and Independents supported the reform while all Republicans voted in opposition (Silverleib, December 24, 2009). On March 21, 2010, the House of Representatives in a vote of 219-212 passed the reform. Again, party lines were drawn as all 178 Republicans voted against the reform, while all but 34 Democrats voted in support of the reform (Murray & Montgomery, March 22, 2010). On March 23, 2010 just prior to signing the act into law, President Barack Obama said,

Today, after almost a century of trying; today, after over a year of debate; today, after all the votes have been tallied—health insurance reform becomes law in the United Stated of America. Today. It is fitting that Congress passed this historic legislation this week. For as we mark the turning of spring, we also mark a new season in America. In a few moments, when I sign this bill, all of the overheated rhetoric over reform will finally confront the reality of reform. And while the Senate still has a last round of improvements to make on this historic legislation—and these are improvements I’m confident they will make swiftly—the bill I’m signing will set in motion reforms that generations of Americans have fought for, and marched for, and hungered to see (Obama, 2010).

Following a few more short words, President Obama signed the Patient Protection and Affordable Care Act into United States law.

In the following chapters, this study analyzes news reporting during the healthcare reform debate. Moreover, the study seeks to answer whether or not there was imbalance in news reporting in the three newspapers with the largest circulation in the country: USA
Today, The Wall Street Journal and The New York Times. To measure imbalance, the study compares assertions made by pro-reform and anti-reform proponents spanning the timeframe of the bill’s introduction on September 17, 2009 through being signed into law on March 23, 2010. Specifically, the study will seek to measure the following: any imbalance in the total number paragraph assertions favoring the pro-reform/anti-reform perspective; any imbalance in assertions favoring the pro-reform/anti-reform perspective in the lead; any imbalance in assertions favoring the pro-reform/anti-reform perspective in the first half of an article; and any imbalance in assertions favoring the pro-reform/anti-reform perspective in the second half of an article. Using these four components, the study aims to determine whether there was an overall imbalance in reporting during the healthcare reform debate for each article and globally comparing the scores for all articles combined.
Chapter 2

Review of Literature and Thesis Question

The Patient Protection and Affordable Care Act, which can be found in its entirety as an attachment on the government’s HealthCare.gov website, is a dense, 974 page document. There were many elements of healthcare reform that divided Democrats and Republicans from the very beginning. Specifically, issues such as the requirement to have coverage, the requirement to offer coverage, the cost of implementing the reform, the availability of a public option, coverage for abortion, and the changes in public programs such as Medicare were among the most contentious and debated (Holan, 2009; “Focus on health reform,” 2010).

With such long, complex documents, society relies on the news media to present a balanced account of their contents and of governmental support and opposition. As H. Lee (2010) pointed out, “journalists generally accept the idea that the news media should perform a role of guiding society as well as informing unbiased news” (p. 3). Furthermore, according to G. Tuchman (1978), “the news aims to tell us what we want to know, need to know, and should know” (p.1).
Since journalistic coverage of a law is so vital, a central concern is the balance of media reports on important national issues. Despite the belief that the media act as an unbiased “watchdog” for society serving as the fourth branch of the government, there are charges of a liberal bias in the media. According to H. Lee (2010), a majority of journalists believe their role is to investigate government claims or to serve as an adversary of the government (p. 4). Charges of a liberal media bias can be traced back to President Nixon’s presidency. Following the media’s coverage of a speech given by President Nixon on Vietnam, Vice-President Spiro Agnew delivered an address on his perception of media bias. As he said in his November 13, 1969 speech, the “purpose of my remarks tonight is to focus your attention on this little group of men who not only enjoy a right of instant rebuttal to every Presidential address, but, more importantly, wield of a free hand in selection, presentation, and interpreting the great issues in our nation” (Agnew, 1969). He went on to claim, “had this slander been made by one political candidate about another, it would have been dismissed by most commentators as a partisan attack. But this attack emanated from the privileged sanctuary of a network studio and therefore had the apparent dignity of an objective statement” (Agnew, 1969). More recently, Bob Dole argued in 1996 that his presidential campaign against Bill Clinton was being overshadowed by the “media’s leftward tendencies, particularly those of the New York Times” (Morris, 2007, p. 707). More recently, President George H.W. Bush used a campaign slogan based on the same liberal media bias sentiment: “Annoy the media: reelect Bush” (Morris p. 708).
In the recent presidential campaign, former president Bill Clinton and presidential hopeful Hillary Clinton argued during the 2008 Democratic primary that President Obama received preferential coverage treatment; this was later bolstered by a poll which highlighted that American voters believed journalists wanted Obama to win the election (Smith, 2010). When asked by Fox News’ Bill O’Reilly whether he thought the press favored Obama, President Clinton responded, “Oh, I think yes” (Jackson, 2011). Responding to a similar question asked by NPR’s Michele Norris, Hillary Clinton responded, “I understand that there has been, throughout this campaign, a double standard. I accept it; I live with it” (“Clinton rips media’s,” 2008).

In 1988, 12 percent of randomly sampled respondents claimed news media exhibit a liberal bias in presidential campaign coverage. By 1996, 43 percent of a random sample claimed that the news media have a liberal bias in election coverage (Watts, Domke, Shah, & Fan, 1999, p. 145). In 2004, a poll conducted by the Pew Research Center found that number had ballooned to 69 percent of respondents identifying political bias in the news; only 7 percent of respondents found no bias at all (Pew Research Center, 2004). As a whole, the poll found that media credibility was declining across several news media, including print news outlets. It purported that the “falloff in credibility for these news sources is linked to a growing partisan tilt in the ratings. Republicans have traditionally viewed the overall media more skeptically than Democrats and this has long translated into lower credibility rating from Republicans for most news sources” (Pew Research Center, 2004, p.42).
This thesis will seek to determine if there is a demonstrable media bias. Before undertaking this study, it is essential to establish a working definition of media bias. *The Liberal Media Myth Revisited: An Examination of Factors Influencing Perceptions of Media Bias* defined a bias in the media as “any form of preferential and unbalanced treatment, or favoritism, toward a political or social issue” (Lee, 2005 p. 45). Lee (2005) expanded on this definition by noting that:

In the context of news reporting, a bias is the opposite of accuracy, balance and fairness. Accuracy means not going beyond the facts of the matter, and balance plays out through giving roughly equal amounts of coverage to all involved parties. Fairness is achieved when all involved parties’ perspectives are represented, and no more favorable treatment of any side-either qualitatively or quantitatively-exists (p. 45).

D’Alessio & Allen (2000) divided media bias research into three categories. First, researchers have studied which stories make it through gate-keeping mechanisms of editorial review, termed “gate-keeping bias.” Second, studies that examined balance in terms of overall coverage of an issue and its support and opposition are called “coverage bias.” Third, researchers have studied which side receives more favorable coverage, which is known as “statement bias.” Within these three categories, Fico and Freedman (2008) noted that journalists are affected by structural or by partisan components. A structural component is produced by “journalistic news values, work routines, organizational resources, and news organization dependencies on other institutions” (Fico & Freedman, 2008, p. 500). A partisan component, on the other hand, is “produced by a journalist’s political orientation subverting news organization norms for impartiality in conflict coverage” (Fico & Freedman, 2008, p. 500).
On the other hand, some of the most compelling proof against a liberal media bias was found in a study by Watts, et al. that analyzed three election cycles: 1988, 1992, and 1996. Their research concluded that “(a) valence coverage was not overtly biased for the Democratic candidate in 1988 and 1996 election seasons although leaning a bit to the left in 1992, and (b) there does not appear to be a trend of increasing bias in valence coverage for the Democratic candidate across three elections” (Watts, et al., 1999, p.149).

With little empirical evidence supporting the claim of a liberal media bias, why does it persist in public opinion polls? Researchers have long looked at the origin of the liberal media belief and have discovered several factors contributing to its continued attention and breadth in the mainstream opinion polls. First, many researchers have found that elite cues have been a primary factor in the liberal bias assertions (Domke & Watts, 1999). According to Smith (2010),

Elite attacks provided cues to the public, which were used instead of an evaluation of the actual bias in the news media. Elite cues simplify political information and allow people to make political decisions without expending a great deal of time or mental energy. Although the use of political cues provides an efficient shortcut in decision making, they can be problematic when people rely on political elites to do their thinking for them (p. 322).

Moreover, Smith (2010) contended that:

Bias suggests a difference between media accounts of the outside world and the way the world actually is. For people to evaluate media bias, they must have knowledge of the world independent of news media accounts. In other words, people must have reason to believe that the news media accounts deviate from reality. Since most people lack this independent information, they are likely to rely on political elites to alert them when the news media
display bias. In short, elite attacks might increase perceptions of bias by providing cues to the public (p. 322).

A second cause of perceived bias in the media is one’s political/partisan leaning. Research has shown that partisans are likely to perceive bias in the media if the medium they are reading/analyzing runs counter to their attitudes (Vallone, Ross & Lepper, 1985; Eveland & Shah 2003; Lee, 2010). This phenomenon, known as the hostile media effect, explains that when bias is perceived, it is more likely to be seen as bias against one’s own position. Research by Huge and Glynn (2010) offers further proof of the hostile media phenomenon. In their research covering a race for governor in Ohio, they found that “those who were at the extreme ends of the ideological spectrum were more likely to perceive the media as being hostile to their candidate” (p.178). Furthermore, Gunther (1988) asserted that the level of observers’ self-involvement with an issue or group is likely to determine their views on whether media coverage is credible or biased. In other words, attitude extremity affects trust in media (Lee, 2010).

Third, there is a growing body of research suggesting that the public’s perception of a liberal bias in the media is not the result of differences in valence of candidate coverage, but rather is due to “increasing news self-coverage that focuses on the general topic of liberal bias in news content trumpeted by conservative elites” (Eveland & Shah, 2003, p. 103). Niven (2003) confirmed their observation. Niven’s study queried Lexis-Nexis for articles discussing the topic of media bias. Of the 600 newspaper articles returned, 81 percent discussed the topic of a liberal media bias; only 5 percent asserted a conservative bias (Niven, 2008).
The healthcare reform debate and congressional vote demonstrated a continued divided America split between liberal and conservative ideals. There was a clear ideological difference in proponents and opponents to the measure. The measure narrowly passed through both the Senate and House of Representatives without Republican support. With such a large and complex document, society enlisted the media to provide both the facts about the proposed healthcare reform and also a balance in terms of liberal and conservative viewpoints. As described by Lee (2010), liberal stories contain messages that “government should take more active roles in solving social problems. In contrast, conservative news stories contain the message that government should take less active roles in solving social problems” (p. 6). While society enlisted the news media to provide a balanced account of the healthcare reform debate, the Pew Research Center found the public to be critical of the media’s healthcare coverage (Pew Research Center, 2010). According to the research, 53 percent of the public said the debate was the story they followed most closely, while the story was the focus of 37 percent of news coverage. Moreover, the Pew Research Center found that 75 percent of respondents said that news organizations had done only a fair or a poor job explaining the details of the proposal, and nearly 71 percent gave negative ratings to the press for explaining the effects that healthcare proposals would likely have on the average American. Moreover, it found that Republicans were notably more critical than independents or Democrats in regard to the media’s coverage of the healthcare reform debate. A majority (58 percent) of respondents also felt the media had done only a fair or a poor job on covering the political debate leading up to the healthcare reform vote (Pew
Research Center, 2010). These numbers clearly demonstrate the public’s negative perception of the news media’s ability to accurately and objectively provide details for the proposed healthcare reform.

The present study takes a fresh approach to the issue of news bias by focusing on the single case of the coverage of the healthcare debate. Specifically, the thesis will analyze newspaper articles spanning the time frame of the bill’s introduction on September 17, 2009 until it was signed into law on March 23, 2010. Bias and imbalance in news reporting will be examined through content analysis quantifying imbalance in support/opposition representation in each article. In doing so, the study will address the following thesis question: Was there a demonstrable media coverage bias in reporting the 2010 health care bill debate? To answer the question, this thesis closely examines three major news outlets (The New York Times, The Wall Street Journal, and USA Today). A content analysis of the health care bill news stories was undertaken as explained in the following chapter.
Chapter 3

Methodology

To study potential reporting bias during the healthcare reform debate, this thesis used a methodology similar to Fico and Freedman (2008) in their article “Biasing Influencing on Balance in Election News Coverage: An Assessment of Newspaper Coverage of the 2006 US Senate Elections.” Fico and Freedman examined U.S. Senate races in eleven states as covered by the largest-circulation dailies in each state. The study assessed attention to candidates who could best be described by their conservative or liberal political orientation. Partisan sources in stories were first identified from their explicit support of one of the candidates. Fico and Freedman’s study then assessed the prominence and space given to paraphrased assertions in the stories using four components. These were “(1) whether partisans for one candidate had more paragraph assertions than the opponent’s partisans; (2) whether partisans for one candidate made exclusive assertions in the lead; (3) whether partisans for one candidate made exclusive assertions in the second through fifth paragraphs; and (4) whether partisans for one candidate made exclusive assertions in the sixth through tenth paragraphs” (Fico & Freedman, 2008, p. 504). They used a two-person coder
reliability test for 10 percent of stories randomly sampled from the “universe of content” (Fico & Freedman, 2008, p. 505).

For this study, support or opposition to the bill was substituted for candidate support or opposition as used by Fico and Freedman. If a story was longer than 10 paragraphs, the numbers of paragraphs following the lead were divided into two. This methodology was a substitute for components three (paragraphs 2-5) and four (paragraphs 6-10) noted above in the Fico and Freedman study.

Articles were analyzed from the newspapers with the three largest circulations: The Wall Street Journal, USA Today, and The New York Times. The Wall Street Journal has the largest circulation at 2,061,142, followed by USA Today at 1,830,594. The New York Times has the third largest circulation at 876,638 (Audit Bureau of Circulations, September 30, 2010). For the purpose of this study, only section 1 articles were analyzed. LexisNexis was used to identify section 1 health care reform articles in USA Today and The New York Times. LexisNexis was queried using the search terms “health care” and “reform”. The results were then sorted to select the articles pertaining to the healthcare reform debate. From USA Today, a total of 211 articles were identified. In The New York Times, a total of 553 articles were identified. Factiva was used to identify section 1 health care reform articles in The Wall Street Journal because LexisNexis did not have The Wall Street Journal in its database. Similar to LexisNexis, Factiva was queried using the search terms “health care” and “reform.” The results were then analyzed to select the articles pertaining to the healthcare reform debate. In The Wall Street Journal, 275 articles were identified. For the purposes of this thesis, 986 articles
were randomly selected to represent 95 percent of each newspaper’s identified articles. Articles were randomly selected in each newspaper using StatTrek’s random number generator; StatTrek is a Website devoted to statistics. Therefore, 200 articles from USA Today were reviewed, 261 articles from The Wall Street Journal were reviewed, and 525 articles from The New York Times were reviewed.

Shaw (1896) and Jersild (1929) suggest that stories’ first sentences are better remembered than those appearing later in the story. Moreover, Shaw found that, in general, there is a tendency to remember the first part of a story more readily than the last. Jersild’s study used immediate memory for meaningful material, which consisted of 70 narrative statements presenting a biographical sketch of a fictitious character. The material was presented in a way as to show the relative potency of variations in the method, designed to test the influence of primacy, recency, frequency, and vividness. More recently, Meyer & McConkie (1973) supported and expanded on this finding, stating that their results suggested that on “first exposure the main ideas tended to be acquired better than ideas lower in the logical structure of the passage. Also, they show that the ideas higher in the logical structure tended to be more stable in recall” (p. 116). In their study, 69 undergraduate students were divided into three groups equally; each group heard passages that were divided into idea units placed in a hierarchical structure once, twice or three times before recalling. Scores were assigned to the idea units on the basis of their position in the structure. Jersild found that units high the logical hierarchy were recalled more frequently than those lower in the hierarchy, that subjects tended to recall groups of units from passages which were related to
one another in the hierarchal structure, and that the stability of each unit recall was substantially related to its position in the logical structure of the passage. This built on an earlier body of work by Ausubel (1963), which theorized that the reader is said to first acquire the main, more abstract ideas of the passage, then to use these to form a structure into which the details are incorporated. In his book, Ausubel focuses on providing a theory for how human beings learn and retain large bodies of subject matter in educational environments. For these reasons, the present study broke the stories into the four components listed above to be assessed for signs of imbalance in story structure and front-loaded partisan representation.

Once the articles were extracted from the databases, each article was analyzed in a procedure that mirrored the Fico and Freedman technique. Healthcare reform reporting imbalance was assessed by subtracting the number of components favoring the liberal (pro-reform) from the number of components favoring the conservative (anti-reform). Article scores ranged from -4 (all components favoring healthcare reform) to +4 (all components were anti-healthcare reform). A 0 score indicates that the same number of components favored pro-reform and anti-reform viewpoints (balanced coverage). Again, the four components used to measure imbalance in reporting were (1) whether partisans for reform had more paragraph assertions than the opponent’s partisans; (2) whether partisans for/against reform made exclusive assertions in the lead; (3) whether partisans for/against reform made exclusive assertions in the second through fifth paragraphs; and (4) whether partisans for/against reform made exclusive assertions in the sixth through tenth paragraphs.
If a story was longer than 10 paragraphs, the number of paragraphs following the lead were divided into two. This methodology was a substitute for components three (paragraphs 2-5) and four (paragraphs 6-10) noted above.

### 3.1 Reliability

When conducting a content analysis, objectivity and reliability of data is paramount. Krippendorff (2004) asserts that “reliability data, the sample of data from which the trustworthiness of a population of data is to be inferred, must be generated by coders who are widely available, follow explicit and communicable instructions, and work independently of each other” (p. 428). Moreover, Kolb & Burnett (1991) state, “interjudge reliability is often perceived as the standard measure of research quality. High levels of disagreement among judges suggest weaknesses in research methods, including the possibility of poor operational definitions, categories, and judge training” (p. 248). The two independent coders were trained to analyze the articles according to the four components used to measure imbalance in reporting. A two-person coder reliability test was conducted on 246 (approximately 25 percent) randomly sampled articles from the available content. To measure their agreement, Cohen’s Kappa was used. This methodology avoids the problems of the percentage agreement approach by “adjusting the observed proportional agreement to take account of the amount of agreement which would be expected by chance” (Bland, 2008, p. 2). Cohen’s kappa scores range from -1 to 1, which is perfect agreement. A Kappa calculator from Vassar College was used to calculate the kappa for each of the four components being studied in this thesis. For the articles overall, there was an observed
kappa of .90. The standard error was .02. For the lead component, there was an observed kappa of 1.0, meaning there was perfect agreement. For the first half of the remaining paragraphs, there was an observed kappa of .86 with a standard error of .03. For the second half of the remaining paragraphs, there was an observed kappa of 0.82, with a standard error of .03.

3.2 Analysis

A total of 986 articles were reviewed in three newspapers spanning the time frame of the bill's introduction on September 17, 2009 until it was signed into law on March 23, 2010. For the purposes of this thesis, 95 percent of all section 1 articles identified during the search process were reviewed. Therefore, 200 articles from USA Today were reviewed, 261 articles from The Wall Street Journal were reviewed, and 525 articles from The New York Times were reviewed. Appendix A, A 1-9 shows examples of coded neutral, pro-reform, and anti-reform articles from each newspaper.
Chapter 4

Results

The results of the study are represented in several tables. Table 4.1 lists the breakdown of how the four components were used to measure an article’s overall balance/imbalance score. These four factors were categorized to show the number of articles which favored the pro-reform, neutral, anti-reform position in each of the four components. By using the scores in this table, overall media balance/imbalance was determined for each newspaper and across the entire study.

Tables 4.2-4.4 demonstrate the imbalance distribution by percentage for each individual newspaper. Here, articles that fall into scores between -1 to -4 define the pro-reform/liberal perspective. Articles with a score of 0 were found to be neutral in their coverage and articles with scores ranging from 1 to 4 were found to lean toward the anti-reform/conservative perspective.

Table 4.5 combines the data from tables 4.2 through 4.4 to provide an overall picture of the imbalance distribution across the three newspapers. The table’s purpose is to demonstrate that a majority of articles were balanced in nature, while the remaining articles overall tended to lean toward the liberal/pro-reform perspective.
The results of the analysis of the four components of imbalance are identified in Table 4.1.

Table 4.1: Analysis of the four factors for measuring imbalance in news reports.

<table>
<thead>
<tr>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Factor 1 (Total paragraphs assertions)</td>
<td>Anti-Reform: 43</td>
<td>77</td>
<td>32</td>
<td></td>
</tr>
<tr>
<td>Neutral: 93</td>
<td>129</td>
<td>293</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pro-Reform: 64</td>
<td>55</td>
<td>200</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Factor 2 (Paragraph assertions in the lead)</td>
<td>Anti-Reform: 25</td>
<td>33</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Neutral: 154</td>
<td>220</td>
<td>515</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pro-Reform: 21</td>
<td>8</td>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Factor 3 (Paragraph assertions in first half of the story)</td>
<td>Anti-Reform: 36</td>
<td>77</td>
<td>40</td>
<td></td>
</tr>
<tr>
<td>Neutral: 104</td>
<td>137</td>
<td>296</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pro-Reform: 60</td>
<td>47</td>
<td>189</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Factor 4 (Paragraph assertions in the second half of the article)</td>
<td>Anti-Reform: 48</td>
<td>78</td>
<td>59</td>
<td></td>
</tr>
<tr>
<td>Neutral: 112</td>
<td>140</td>
<td>328</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pro-Reform: 40</td>
<td>43</td>
<td>138</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The neutral perspective accounted for 45 percent (90 articles) of the 200 articles reviewed in the USA Today. While most articles in the USA Today were neutral, the study did find that where bias existed, it leaned slightly toward the liberal/pro-reform perspective. Of the 200 articles reviewed, 33 percent (66 articles) of articles reviewed favored the liberal/pro-reform perspective. This conclusion was reached as 33 percent of the articles scored between a -1 and -4. The conservative/anti-reform perspective accounted for 22 percent (44 articles)
of the articles as these articles ranged in an imbalance/balance score between 1 and 4. Table 4.2 illustrates the imbalance distribution for articles in the *USA Today*.

Table 4.2: Distribution for articles in the *USA Today*. Imbalance distribution is notated by percentage.

<table>
<thead>
<tr>
<th>Imbalance Scale Scores</th>
<th>Percent of Stories</th>
</tr>
</thead>
<tbody>
<tr>
<td>Most Favorable to Liberal/Pro-Reform</td>
<td>-4</td>
</tr>
<tr>
<td></td>
<td>-3</td>
</tr>
<tr>
<td></td>
<td>-2</td>
</tr>
<tr>
<td></td>
<td>-1</td>
</tr>
<tr>
<td>Most Balanced</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>3</td>
</tr>
<tr>
<td>Most Favorable to Conservative/Anti-Reform</td>
<td>4</td>
</tr>
</tbody>
</table>

The study also found that a majority of the articles in *The Wall Street Journal* were neutral. The neutral perspective accounted for the majority of articles, representing 50 percent (130 articles) of the 261 articles reviewed. In looking at *The Wall Street Journal*, where bias was found, articles leaned slightly toward the conservative/anti-reform perspective. Of the 261 articles reviewed, 29 percent (76 articles) favored the conservative/anti-reform perspective as defined by their overall imbalance/balance score being between 1 and 4. The liberal/pro-reform perspective accounted for 21 percent (55 articles) of the articles as evidenced by an overall imbalance/balance score between -1 and -4. Table 4.3 illustrates the imbalance distribution for articles in *The Wall Street Journal*. 

22
Table 4.3: Distribution for articles in *The Wall Street Journal*. Imbalance distribution is notated by percentage.

<table>
<thead>
<tr>
<th>Imbalance Scale Scores</th>
<th>Percent of Stories</th>
</tr>
</thead>
<tbody>
<tr>
<td>Most Favorable to Liberal/Pro-Reform</td>
<td></td>
</tr>
<tr>
<td>-4</td>
<td>1%</td>
</tr>
<tr>
<td>-3</td>
<td>7%</td>
</tr>
<tr>
<td>-2</td>
<td>8%</td>
</tr>
<tr>
<td>-1</td>
<td>5%</td>
</tr>
<tr>
<td>Most Balanced</td>
<td></td>
</tr>
<tr>
<td>0</td>
<td>50%</td>
</tr>
<tr>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>2</td>
<td>8%</td>
</tr>
<tr>
<td>3</td>
<td>8%</td>
</tr>
<tr>
<td>Most Favorable to Conservative/Anti-Reform</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>11%</td>
</tr>
</tbody>
</table>

In the analysis of *The New York Times*, the neutral perspective again accounted for the majority of the articles, representing 55 percent (289 articles) of the 525 articles reviewed. *The New York Times* articles represented the most compelling evidence for a liberal/pro-reform bias of the three newspapers analyzed. Of the 525 articles reviewed, the liberal/pro-reform perspective accounted for 37 percent (192 articles) of the articles, while the conservative/anti-reform perspective accounted for only 8 percent (44 articles) of the articles reviewed. Articles found to be favoring the liberal/pro-reform perspective ranged from an overall imbalance/balance score of -1 to -4 while articles found to be favoring the conservative/anti-reform perspective ranged from an overall imbalance/balance score of 1 to 4. Table 4.4 illustrates the imbalance distribution for articles in *The New York Times*. 

23
Table 4.4: Distribution for articles in *The New York Times*. Imbalance distribution is notated by percentage.

<table>
<thead>
<tr>
<th>Imbalance Scale Scores</th>
<th>Percent of Stories</th>
</tr>
</thead>
<tbody>
<tr>
<td>Most Favorable to Liberal/Pro-Reform</td>
<td></td>
</tr>
<tr>
<td>-4</td>
<td>0%</td>
</tr>
<tr>
<td>-3</td>
<td>19%</td>
</tr>
<tr>
<td>-2</td>
<td>14%</td>
</tr>
<tr>
<td>-1</td>
<td>4%</td>
</tr>
<tr>
<td>Most Balanced</td>
<td></td>
</tr>
<tr>
<td>0</td>
<td>55%</td>
</tr>
<tr>
<td>1</td>
<td>1%</td>
</tr>
<tr>
<td>2</td>
<td>4%</td>
</tr>
<tr>
<td>3</td>
<td>2%</td>
</tr>
<tr>
<td>Most Favorable to Conservative/Anti-Reform</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>1%</td>
</tr>
</tbody>
</table>

Table 4.5 illustrates the imbalance distribution for articles in the three newspapers overall.

Table 4.5: Three Newspapers combined. Imbalance distribution is notated by percentage.

<table>
<thead>
<tr>
<th>Imbalance Scale Scores</th>
<th>Percent of Stories</th>
</tr>
</thead>
<tbody>
<tr>
<td>Most Favorable to Liberal/Pro-Reform</td>
<td></td>
</tr>
<tr>
<td>-4</td>
<td>1%</td>
</tr>
<tr>
<td>-3</td>
<td>13%</td>
</tr>
<tr>
<td>-2</td>
<td>13%</td>
</tr>
<tr>
<td>-1</td>
<td>4%</td>
</tr>
<tr>
<td>Most Balanced</td>
<td></td>
</tr>
<tr>
<td>0</td>
<td>52%</td>
</tr>
<tr>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td>2</td>
<td>6%</td>
</tr>
<tr>
<td>3</td>
<td>4%</td>
</tr>
<tr>
<td>Most Favorable to Conservative/Anti-Reform</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>5%</td>
</tr>
</tbody>
</table>

Overall, a majority (51 percent/509 articles) of the 986 articles reviewed across the 3 newspapers were found to be neutral and balanced in terms of reporting. There was,
however, overall evidence to suggest a slight liberal/pro-reform bias/imbalance in reporting during the healthcare reform debate. In total, 32 percent (313 articles) of the articles reviewed were found to favor the liberal/pro-reform perspective, while only 17 percent (164 articles) of articles favored the conservative-anti-reform perspective.
Chapter 5

Discussion

The review of articles spanning the time frame of the bill’s introduction on September 17, 2009 until it was signed into law on March 23, 2010 demonstrates that a majority (52 percent) of articles reviewed across the three newspapers were found to be balanced and neutral in terms of reporting. However, where bias was found two out of the three newspapers analyzed were found to support the liberal/pro-reform perspective, while one newspaper was found to lean toward the conservative/anti-reform perspective.

Specifically, the liberal/pro-reform perspective accounted for 31 percent of the 986 articles reviewed, while 17 percent favored the conservative/anti-reform perspective.

Looking at the newspapers individually, the USA Today and The New York Times both leaned toward the liberal/pro-reform perspective, with The New York Times providing the greatest evidence for imbalance in reporting during the healthcare reform debate. The Wall Street Journal, on the other hand, leaned toward the conservative/anti-reform perspective.

The results of this thesis indicate journalists need to provide a more balanced perspective of hard news stories. Specifically, journalists should be mindful of providing
balanced representation from sources on each side of an issue. While a majority of the articles reviewed were identified as balanced, the overall imbalance in reporting supporting the liberal/pro-reform perspective is somewhat concerning for journalists. As stated earlier, journalists are often regarded as the “watchdogs” for society, providing information society should and needs to know. While society seems to have lost their trust in politicians, journalists should be wary of losing the public’s trust as well.

For journalists, the difficulty resides in describing and identifying what a completely unbiased story would look like. As Fico and Freedman (2010) stated, “bias is inevitable and ever-present in journalism because news organizations can describe reality with only very imperfect tools” (p. 499). With several variables involved such as tone, structure, framing, and editorial control, there are many obstacles to providing society with balanced reporting.

There are possible reasons to account for the imbalance in articles during the healthcare reform debate. The legislation, as it moved through the Senate and House of Representatives, was being written and proposed by liberal/pro-reform proponents. Therefore, many of the direct quotations and assertions with substantive comments related to the contents of the bill were from liberal/pro-reform congressmen. It seems reasonable that those making the policy/legislation would also be the most likely to provide commentary regarding the content of the bill. During the analysis, conservatives/anti-reform perspectives were less prominent and less substantive in quality of commentary. However, readers may request journalists to utilize language directly from the bill/legislation to provide an explanation of its contents rather than have a proponent/opponent perspective; that
request may be reasonable. Most journalists are not lawyers or politicians and may not be able to glean a balanced account from the actual legislation.

The study provided quantitative evidence on the issue of journalistic bias. By applying Fico and Freedman's methodology to the coverage of the healthcare debate this study demonstrated a useful way to assess bias in newspaper articles. However, there are some limitations in the methodology used for this thesis. While it does provide an adequate method of measuring imbalance in regards to source representation and prominence, it does not account for the tone of an article. The tone of an article certainly affects the overall mood and feeling of an article. However, tone is much more difficult to measure as it is much more subjective in nature. Readers interpret tone in different ways based on their background and ideology.

For future studies, it would be interesting to see how the media reported the events following President Obama signing healthcare legislation into law. In the time since healthcare reform has been passed, it seems the conservatives/anti-reform proponents have begun their effort to modify or rescind the legislation. It would be interesting to see if they had been given a greater voice in news articles as this thesis reveals a lack of balance for the conservative/anti-reform perspective in two of the three sources analyzed.
References


Appendix A

A-1: Example of neutral article from USA Today.

USA TODAY

February 26, 2010 Friday
FINAL EDITION

Verbal volleys fly between political leaders

BYLINE: John Fritze

SECTION: NEWS; Pg. 6A

LENGTH: 994 words

Thursday's health care summit offered sharp exchanges that highlighted important ideological differences between Republicans and Democrats. USA TODAY's John Fritze looks at some of the claims and counterclaims:

Premiums

Republicans

Sen. Lamar Alexander, R-Tenn.: "The Congressional Budget Office report says that premiums will rise in the individual market as a result of the Senate bill."

Democrats

President Obama: "Let me respond ... because it's not factually accurate. Here's what the Congressional Budget Office says. The costs for families for the same type of coverage that they're currently receiving would go down 14% to 20%.

Context

In making their arguments, both men relied on a small slice of a November report by the CBO. Under the Senate plan, four in 10 people who buy insurance independently of a large employer could wind up paying 10% to 13% more. Others would receive subsidies to significantly lower those costs. For the vast majority of Americans -- 70% in 2016 -- who buy insurance through work, premiums would remain even or fall as much as 3%.
Coverage vs. cost

Republicans

Rep. Paul Ryan, R-Wis.: "This bill does not control costs. This bill does not reduce deficits. Instead, this bill adds a new health care entitlement at a time when we have no idea how to pay for the entitlements we already have."

Democrats

House Speaker Nancy Pelosi, D-Calif.: "This is not just about health care for America; it's about a healthier America. This legislation is about innovation. It's about prevention. It's about wellness."

Context

One of the most fundamental differences in the health care debate is that Democrats, including Obama, have focused on expanding coverage while Republicans, including Senate Minority Leader Mitch McConnell, talk about cost. The Senate Democrats' bill would cost $871 billion in the first 10 years and provide coverage to 31 million who wouldn't otherwise have it. The CBO estimates the bill would reduce budget deficits by $132 billion, but only if lawmakers follow through on proposed cuts to programs such as Medicare.

Medical malpractice

Republicans

House Minority Leader John Boehner, R-Ohio: "Why can't we do something about the biggest cost driver, which is medical malpractice and the defensive medicine that doctors practice?"

Democrats

Obama: "I've already said that I think this is a real issue. I disagree with John Boehner. John, when you say that it is the single biggest driver of medical inflation, that is just not the case."

Context

Republicans have long pushed for medical malpractice changes and Democrats, including Obama, have been slow to embrace the idea—at least in legislative form. Obama's characterization of how much "defensive medicine" costs is closer to the truth, according to the CBO. In a report last year, the agency estimated that changes to the tort system would reduce national health care spending by half a percent, or $11 billion, and would reduce budget deficits by about $54 billion over 10 years.

Keeping coverage

Republicans
Rep. Eric Cantor, R-Va.: "Between 8 million and 9 million people may very well lose the coverage that they have because of this, because of the construct of this bill. That's our concern."

Democrats

Obama: "The 8 million to 9 million people that you refer to that might have to change their coverage -- keep in mind ... that ... we're talking about ... folks who the CBO, the Congressional Budget Office, estimates would find the deal in the exchange better."

Context

Whether people will be able to keep their coverage, as Obama has repeatedly promised, has been a key part of the debate. Cantor is correct that the Congressional Budget Office estimates that 8 million to 9 million who get coverage through work would lose it by 2019. The agency says it's difficult to predict how many would get a better deal. As many as 6 million people would go in the other direction: obtaining coverage they don't have from an employer.

Open vs. closed talks

Republicans

Sen. John McCain, R-Ariz.: "Both of us during the campaign promised change in Washington. Unfortunately, this product was not produced in that fashion. It was produced behind closed doors. It was produced with unsavory -- I say that with respect -- dealmaking."

Democrats

Obama: "I'm sure that (Sens.) Harry Reid and Chris Dodd and others who went through an exhaustive process, through ... the House and the Senate, with the most hearings, the most debates on the floor, the longest markup in 22 years on each and every one of these bills would have a response for you."

Context

House and Senate committees conducted hundreds of hours of hearings last summer, but the broad framework of the legislation was, as McCain says, written behind closed doors. Some Republicans were part of that process. A bipartisan group from the Senate Finance Committee spent weeks in closed meetings last summer drafting one version of the bill. Senate Majority Leader Harry Reid privately crafted the bill the Senate passed Dec. 24.

Interstate competition

Republicans
Rep. Charles Boustany, R-La.: "The same goes for purchasing insurance across state lines. I'm glad to hear our Democratic colleagues agree that this is an approach that needs to be taken. ... We feel that this bill restricts those options too much."

Democrats

Sen. Max Baucus, D-Mont.: "We are basically including most of those provisions, if not all, in our joint legislation. Selling insurance across state lines, for example, we allow for that."

Context

Republicans propose letting policyholders buy insurance across state lines to foster competition because policies are cheaper in some states than others. Prices vary because some states have more strict regulations than others. Obama says the GOP plan would create "a race to the bottom" in which insurers would offer policies regulated by states with the least restrictive rules. Obama's plan would let individual states enter into interstate agreements so insurers could sell policies across state lines on a limited basis.
WASHINGTON -- President Obama's year-long quest to fix the nation's health care system faces its most critical test Sunday when House Democrats hope to pass a revised 10-year, $940 billion package expanding coverage to 32 million people.

His top priority on the line, Obama postponed a trip to Indonesia and Australia so he would be present for the vote and what could be a week of Senate action. "The president is determined to see this battle through," spokesman Robert Gibbs said.

Obama's decision came as Democrats unveiled their latest plan, which would expand the Medicaid program for the poor and establish a subsidized marketplace for middle-income people and small businesses. Most people would be required to have health insurance. Businesses with 50 or more workers would have to provide it or pay a fee. Insurers could not deny coverage in most instances.

The measure also would close a gap in prescription-drug coverage for seniors, shores up the Medicare trust fund for nine years and includes an unrelated student loan bill. To pay for health care, the package taxes the most expensive insurance plans, increases the Medicare payroll tax for upper-income taxpayers, imposes new fees on drug companies and squeezes about $500 billion out of Medicare.

Democrats on Thursday touted the non-partisan Congressional Budget Office's preliminary estimate that it would save $138 billion over 10 years. That would make the bill the biggest deficit-reduction measure in more than a decade.

"I love numbers," House Speaker Nancy Pelosi said. "We feel very strong about where we are."
Several Democrats who voted against the House health care package in November said they would support the new version, including Reps. Betsy Markey of Colorado and Bart Gordon of Tennessee. The vote remained in doubt, however, as the number of undecided House Democrats grew shorter.

At least 10 Democratic fence-sitters were invited to the White House as Obama signed a jobs bill. Rep. Luis Gutierrez of Illinois later vowed support.

Seeking to sway moderates, Obama cited deficit reduction as "but one virtue of a reform that will bring new accountability to the insurance industry and greater economic security to all Americans."

Congressional Republicans, who oppose the legislation, criticized the policy and Pelosi's threatened process, by which the House would vote for the changes and "deem" the underlying Senate bill passed. That bill includes sweeteners for states and senators, some of which remain in the new bill.

Senate GOP leader Mitch McConnell said the new package includes $150 billion in additional tax increases and $60 billion in new Medicare cuts. "I would suggest that the president not scrap his trip to Indonesia," he said. "He should scrap this bill."
Republicans insist it's time to start over on health care; Dems argue that Americans can't wait that long

WASHINGTON -- The extraordinary televised summit between President Obama and congressional leaders at Blair House on Thursday was less conversation than illustration: a stark depiction of a gulf between the Democrats and Republicans on what to do next about health care.

Republicans said Democrats should "scrap this bill ... and start over again on a clean sheet of paper," as House GOP leader John Boehner put it, adopting a "step-by-step" approach that would cost less and prescribe a smaller government role.

Democrats said it was imperative to act, and quickly. Some Americans "don't have time for us to start over," House Speaker Nancy Pelosi said as the session started. "Many of them are at the end of the line."

Seven hours and thousands of words later, Obama made it clear that unless Republicans made significant and unexpected compromises, Democrats would press ahead on something akin to the $950 billion, 10-year health care plan he outlined Monday -- presumably by using a parliamentary maneuver that would bypass a Republican filibuster in the Senate.

"Baby steps don't get you to the place where people need to go," Obama said, noting efforts by presidents back to Harry Truman to provide insurance coverage for Americans who lack it. "They can't afford another five decades" for health care system changes.
If the cold morning began with any hope that common ground might be found -- always a long shot -- the mood by the end of the day was testy and unyielding.

The likely use of the procedure known as reconciliation seems sure to spark another wave of partisan recrimination. The tactic -- used by Republicans to enact President George W. Bush's tax cuts in 2001, for example -- allows the Senate to pass a budget-related measure by a 51-vote majority rather than having to muster 60 votes to end debate.

Sen. John McCain, R-Ariz., said he was "very disturbed" by the prospect. Reconciliation could cause "very significant long-term damage to the way that Congress does business," he cautioned.

There was no evidence that the appeals for bipartisanship, warnings about perils ahead, talk of polls and arguments about policy by both sides succeeded in changing the views of anyone in the room.

"Throughout the day, participants talked past each other to such an extent that the summit was closer to a molehill of familiar stump speeches," said Robert Schmuhl, a political scientist at Notre Dame and author of Statecraft and Stagecraft. He called it "a Kabuki dance" as both sides sought political advantage.

Winning passage of his signature domestic issue, one on which he has expended enormous political capital, is crucial to Obama delivering on a campaign promise and demonstrating political clout. "To fail would be devastating," says William Galston of the Brookings Institution, a domestic-policy aide to President Clinton when his health care plan was defeated. "I know what I'm talking about."

For Republicans, opposition to the Democrats' health care proposal has fueled the emerging anti-tax, small-government Tea Party movement and boosted GOP prospects in November's congressional elections.

At the summit, Republicans cited GOP upsets in the Massachusetts Senate race last month and gubernatorial contests in New Jersey and Virginia last fall as evidence the public agrees with them on the health care bill. "Put it on the shelf," Senate Republican leader Mitch McConnell of Kentucky urged.

Though summits on difficult issues have been held before between congressional leaders and administration officials, historians and political scientists weren't able to think of a precedent for one being open to televised coverage for all to see. The closest parallel may be an economic forum President-elect Clinton held in Little Rock before his inauguration.

Aside from an hour break for lunch, the president, vice president, congressional leadership and key committee chairmen spent much of the day squeezed together around tables arranged in a hollow square in an elegant reception room with a pastoral mural on the wall.
There were discussions of fundamental philosophical disagreements on the role of government as well as political jockeying.

Obama displayed flashes of annoyance as he accused Republicans of reciting talking points rather than engaging on issues.

McCain, Obama's opponent in the 2008 presidential election, blasted "special deals for the special interests and favored few" in the Democrats' bill. "Both of us during the campaign promised change in Washington," he said to Obama. "We're not campaigning anymore," the president replied. "The election's over."

"I am reminded of that every day," McCain said.

Afterward, in a conference call with reporters from his Senate office, he said, "I thought it would be well to joke a little bit because it was a little tense."

At times, the debate was wonkish; at times, rambling. It became a battle of the local anecdote: Harry Reid, the Senate's Democratic leader, talked about the plight of a restaurant owner in his home state of Nevada. Democratic Sen. Tom Harkin read a letter from a farmer in his home state of Iowa. Republican Sen. Mike Enzi described his wife's search for affordable health coverage when they ran a shoe business in Wyoming.

When it was over, Reid told reporters Obama had proved himself to be "the most patient man in the world."

Arizona's Jon Kyl, the Senate's No. 2 Republican, complained Obama had hogged the microphone, talking more than all of the Republicans or other Democrats. (The Senate GOP sent an e-mail to reporters with the calculation that Obama had spoken for a total of 119 minutes, congressional Democrats 114 minutes and Republicans 110 minutes.) "I just don't think the president was listening," he said.
THE WALL STREET JOURNAL
U.S. News: One Hurdle Remains In Senate

By Greg Hitt and Naftali Bendavid
632 words
23 December 2009
The Wall Street Journal

WASHINGTON -- Democrats approved the second of three motions to close off debate on their health bill Tuesday and moved closer to passage on Christmas Eve, while Republicans highlighted their contention that the bill's requirement for buying insurance is unconstitutional.

All 58 Democrats and two independents supported the motion to limit the debate, which is now in its fourth week, while 39 Republicans were against it.

The final motion to end debate is expected to win approval Wednesday, clearing the way for senators to vote on the bill itself at 8 a.m. Thursday, which is Christmas Eve. Immediately after that, the Senate is also planning to vote on House-passed legislation increasing the government's borrowing authority.

Convening on Christmas Eve would mark the 25th straight day of debate, bringing the Senate just short of the record for most consecutive days in session. That was set in the winter of 1917 in the run-up to U.S. entry into World War I, when the chamber met for 26 consecutive days.

"The finish line is in sight," said Senate Finance Committee Chairman Max Baucus, the Montana Democrat who is a chief architect of the Senate bill. "Now we know with certainty that we have the will to cross it."

To meet a pre-Christmas deadline for action set by President Barack Obama, Senate Majority Leader Harry Reid (D., Nev.) has pushed his colleagues -- even 92-year-old Sen. Robert Byrd, the West Virginia Democrat -- through a grueling schedule this week, including votes at 1 a.m. Monday and 7 a.m. Tuesday.
With Senate Democrats showing their determination to move in lockstep, Republicans -- who contend that the sweeping bill would impose unreasonable burdens on taxpayers and businesses -- said they would continue fighting even after the House and Senate begin negotiations on a compromise version in January.

"This debate is not over," said Senate Minority Leader Mitch McConnell (R., Ky). "The American people are still going to have another month to weigh in."

Republicans are forcing the Senate to vote Wednesday on whether the Democrat-backed bill is unconstitutional. Sen. John Ensign (R., Nev.) raised a point of order Tuesday against the bill, arguing that the Constitution doesn't give Congress latitude to force Americans to buy health coverage, as both the House and Senate bills do.

"What's next?" Mr. Ensign said. "Will we consider legislation in the future requiring every American to buy a car? Will we consider legislation in the future requiring every American to buy a house?"

Mr. Ensign isn't expected to succeed. But the effort dramatizes a criticism raised by Republicans and conservative activists. Under the Senate and House bills, Americans who don't receive health coverage through their employers must buy insurance if they can afford it.

The "individual mandate" is part of broader legislation designed to expand health-insurance coverage to tens of millions of Americans. The bill offers tax subsidies to purchase insurance and widens eligibility for Medicaid, the federal-state program that provides health insurance to the poor.

Conservative critics contend that the provision violates the Constitution's "takings clause," which says "private property [cannot] be taken for public use, without just compensation."

Democrats counter that the mandate is necessary to make the planned overhaul of the health-care system work, and ensure that as many people as possible participate in the system. Under the Senate bill, individuals who don't purchase coverage would face a financial penalty up to $750.

Democrats say the courts have given Congress wide authority to impose rules under its powers to regulate interstate commerce.

"We feel very sound in our position," Mr. Reid said.

THE WALL STREET JOURNAL
U.S. News: Reid's Math: Liberal Fans Exceed Public-Plan Foes

By Naftali Bendavid
687 words
29 October 2009
The Wall Street Journal
J
A4
English
(Copyright (c) 2009, Dow Jones & Company, Inc.)

Some of Senate Majority Leader Harry Reid's colleagues were surprised by his decision this week to include a government-run health-care plan in the Democrats' bill.

But the mathematics of the Senate suggest the motives for the Nevada Democrat's gamble: While a handful of Democratic moderates don't like the so-called public option, the liberals who support it easily outnumber them -- and at least some of them warned Mr. Reid they would oppose a bill that didn't include the option.

Democratic centrists such as Sen. Ben Nelson of Nebraska have expressed reservations about creating a government-administered health plan to compete with private insurers. So has Sen. Olympia Snowe of Maine, the lone Republican who has signaled possible support for a Democrat-led health overhaul.

Senate Republicans are united in their opposition to a public option, and Minority Leader Mitch McConnell (R., Ky.) reiterated Wednesday his view that it would drive private insurers out of business. "Supporters of the government-run plan say they're only advocating one more option among many," he said on the Senate floor. "What they don't say is that the option they're advocating would soon be the only option."

But liberals are insisting with equal force on a public option. And they are more numerous among Mr. Reid's caucus of 60 votes -- made up of 58 Democrats and two independents usually aligned with them.

Earlier this month, 30 senators sent Mr. Reid a letter saying "a strong public option has resounding support among Senate Democrats." and urging that any bill include one.
At a recent private meeting of Senate Democrats, Sen. Bernie Sanders (I., Vt.) argued that polls show strong and growing support for the public option. Mr. Sanders also organized a get-together between Mr. Reid and liberal senators.

"What we said is, "Look, the overwhelming majority of the people want the public option,"' Mr. Sanders said. "How are we going to tell people they must get insurance, and then force them into a private insurance company and not give them a public option? Who wants to defend that?"

Ultimately, Mr. Reid, who has met with virtually all Senate Democrats and some Republicans in recent weeks, decided to go with a public option that allows individual states to opt out.

"In the last week or so, he detected a willingness on the part of the progressives to move more to the center, while detecting a similar willingness among some moderates to make some concessions as well," said Reid spokesman Jim Manley.

Mr. Reid needs the support of 60 senators twice -- first in a vote to consider the health bill, then later to approve it. Even some Democrats who oppose the bill in its current shape may support the leader in the initial vote just to get it to the Senate floor. If so, it will kick off a weeks-long debate, including votes on numerous amendments and horse-trading to address the concerns of particular senators.

Democratic leaders hope that at the end of that process, even some who oppose Mr. Reid's bill, like Sen. Joseph Lieberman (I., Conn.), will be on board. Mr. Lieberman has suggested he might support the initial vote on the bill.

"We all know that the bill that emerges after weeks of debate will not be the same one that leader Reid presented," said Sen. Chuck Schumer (D., N.Y.).

So far, Mr. Reid's approach appears to be paying off, as some of the centrist Democrats are expressing a willingness to compromise.

"I don't favor a government-run national public option," said Sen. Mary Landrieu (D., La.) a couple of days before Mr. Reid's announcement.

But she added, "I could be open to either a fallback, or a public option that plays on the same playing field as private business. . . . Something like that I could maybe consider if it meant a deal at the end. But we'll have to see."
Both parties will battle to shape public views of the health legislation, looking to gain an edge ahead of the 2010 elections.

Democrats are energized by the likely achievement of a century-old goal. But they also fear consequences for pushing a divisive bill while the economy is struggling. In a recent Wall Street Journal/NBC News poll, 41% of voters thought it was better to pass the bill and 44% preferred leaving the U.S. health-care system alone.

Democrats hope for a boost next year with broadcasts of a historic floor vote during final passage, a White House signing ceremony and President Barack Obama's State of the Union address.

But criticism of the bill has taken a toll on Mr. Obama and his party. "I guarantee you, the people who voted for this bill are going to get an earful when they finally get home," said Minority Leader Mitch McConnell (R., Ky.) just before the Senate's Christmas Eve vote.

Democrats will highlight the bill's expansion of coverage to 31 million more Americans, as well as relief from such insurance company practices as the denial of coverage for pre-existing conditions.

"It is very hard to merchandise health care until you have a bill," House Speaker Nancy Pelosi (D., Calif.) told reporters recently. "But when we have a bill and the discussion is . . . about what is in the bill for people, why this is important to them, then I think that changes."

Republicans are confronting the bill's likely passage and plan to press ahead with their
message: the overhaul's high cost and the government's overreach into health care. They are planning to target lawmakers who voted for it.

"It will be one of the key issues in the 2010 and 2012 elections," said Sen. John Cornyn (R., Texas), who coordinates the Republican Senate campaigns.

The Democrats' push to advertise their success with the health bill may conflict with other goals. Party leaders want to focus next year on job creation and deficit reduction, two big voter concerns. Promoting the health bill could muddy that message, and Republicans are eager to take advantage.

"We will continue to develop, I think, a theme that points out the fallacy of trying to do these big government expansions and raise taxes at a time when you're trying to get the economy to come out of a recession," said Sen. John Thune (R., S.D.).

Democrats say voters support parts of the health-care bill when they learn about them. Pollster Mark Mellman this week gave Democratic senators a memo saying polls show low approval for the bill because voters don't know what is in it.

"The natural tendency is to pass a bill, breathe a sigh of relief, and move on to the next piece of legislation," Mr. Mellman said in an interview. "This is a situation where we just can't afford to have that happen."

Work by opponents has also contributed to doubts about the legislation, according to Sen. Kent Conrad (D., N.D.) "What people have been exposed to is hundreds of millions of dollars of television advertising by groups who have a financial interest in maintaining the status quo," he said.

Republicans say voters know what is in the bill and they don't like what they see. They say they welcome plans by Democrats to talk more about the overhaul legislation.

"If this is truly the Democrats' strategy for the new year, we look forward to working with them to fully educate the American public on the details of a health-care bill," said Rob Jesmer, executive director of the National Republican Senatorial Committee.

The debate could echo what happened following enactment of the economic stimulus package in February. Republicans said all year that economic data showed the the stimulus was a failure. Democrats have used the same data to argue that the stimulus package saved the U.S. from economic collapse.

Much of the work to shape public views of the health-care bill must be done by Mr. Obama, say Democrats. The president alone commands the kind of attention needed to shift
perceptions, they say. Mr. Obama has begun giving interviews on the bill, but some Democrats say he must do more.

"I don't think there's been a good enough sales job," said Rep. Debbie Wasserman Schultz (D., Fla.). "The White House and the president need to go out and sell health-care reform and they need to focus on jobs."

White House officials, reluctant to appear overconfident, declined to discuss plans that suggest they are assuming the bill would pass.
The Senate voted Thursday to reinvent the nation's health care system, passing a bill to guarantee access to health insurance for tens of millions of Americans and to rein in health costs.

The 60-to-39 party-line vote, starting at 7:05 a.m. on the 25th straight day of debate on the legislation, brings Democrats closer to a goal they have pursued for decades and brings President Obama a step closer to success in his signature domestic initiative. When the roll was called, with Vice President Joseph R. Biden Jr. presiding, it was the first time the Senate had gathered for a vote on Christmas Eve since 1895.

If the bill becomes law, it would be a milestone in social policy, comparable to the creation of Social Security in 1935 and Medicare in 1965. But unlike those programs, the initiative lacks bipartisan support. Only one Republican supported a broadly similar bill that the House approved last month 220 to 215, and no Republicans backed the Senate version.

After the vote, lawmakers and Mr. Obama wasted no time leaving for their holiday break, well aware that their return to Washington would mean plunging into negotiations to reconcile the measures passed by the two chambers.

If a deal can be struck, as seems likely, the resulting law would vastly expand the role and responsibilities of the federal government. It would, as lawmakers said repeatedly in the debate, touch the lives of nearly all Americans.

The bill would require most Americans to have health insurance, would add 15 million people to the Medicaid rolls and would subsidize private coverage for low- and middle-
income people, at a cost to the government of $871 billion over 10 years, according to the Congressional Budget Office.

The budget office estimates that the bill would provide coverage to 31 million uninsured people, but still leave 23 million uninsured in 2019. One-third of those remaining uninsured would be illegal immigrants.

Mr. Obama hailed the Senate action. "We are now incredibly close to making health insurance reform a reality," he said, before leaving the White House to celebrate Christmas in Hawaii.

The president, who endorsed the Senate and House bills, said he would be deeply involved in trying to help the two chambers work out their differences. But it is unclear how specific he will be -- if, for example, he will push for one type of tax over another or try to concoct a compromise on insurance coverage for abortion.

Senator Olympia J. Snowe of Maine, a moderate Republican who has spent years working with Democrats on health care and other issues, said she was "extremely disappointed" with the bill's evolution in recent weeks. After Senate Democrats locked up 60 votes within their caucus, she said, "there was zero opportunity to amend the bill or modify it, and Democrats had no incentive to reach across the aisle."

Like many Republicans, Ms. Snowe was troubled by new taxes and fees in the bill, which she said could have "a dampening effect on job creation and job preservation." The bill would increase the Medicare payroll tax on high-income people and levy a new excise tax on high-premium insurance policies, as one way to control costs.

When the roll was called Thursday morning, the mood was solemn as senators called out "aye" or "no." Senator Robert C. Byrd, the 92-year-old Democrat from West Virginia, deviated slightly from the protocol.

"This is for my friend Ted Kennedy," Mr. Byrd said. "Aye!"

Senator Kennedy of Massachusetts, a longtime champion of universal health care, died of brain cancer in August at age 77.

Senator Jim Bunning, Republican of Kentucky, did not vote.

The fight on Capitol Hill prefigures a larger political battle that is likely to play out in the elections of 2010 and 2012, as Democrats try to persuade a skeptical public of the bill's merits, while Republicans warn that it will drive up costs for those who already have insurance.

"Our members are leaving happy and upbeat," said the Senate Republican leader, Mitch McConnell of Kentucky. "The public is on our side. This fight is not over."
After struggling for years to expand health insurance in modest, incremental ways, Democrats decided this year that they could not let another opportunity slip away. As usual, lawmakers were deluged with appeals from lobbyists for health care interests who have stymied similar ambitious efforts in the past. But this year was different.

Lawmakers listened to countless stories of hardship told by constituents who had been denied insurance, lost coverage when they got sick or seen their premiums soar. Hostility to the insurance industry was a theme throughout the Senate debate.

Senator Sherrod Brown, Democrat of Ohio, said insurance companies were often "just one step ahead of the sheriff." Senator Dianne Feinstein, Democrat of California, said the industry "lacks a moral compass." And Senator Sheldon Whitehouse, Democrat of Rhode Island, said the business model of the industry "deserves a stake through its cold and greedy heart."

The bill would establish strict federal standards for an industry that, since its inception, has been regulated mainly by the states. Under it, insurers could not deny coverage because of a person's medical condition; could not charge higher premiums because of a person's sex or health status; and could not rescind coverage when a person became sick or disabled. The government would, in effect, limit insurers' profits by requiring them to spend at least 80 to 85 cents of every premium dollar on health care.

The specificity of federal standards is illustrated by one section of the bill, which requires insurers to issue a benefits summary that "does not exceed four pages in length and does not include print smaller than 12-point font."

Another force propelling health legislation through the Senate was the Democrats' view that it was a moral imperative and an economic necessity.

"The health insurance policies of America, what we have right now is a moral disgrace," said Senator Tom Harkin, Democrat of Iowa. "We are called upon to right a great injustice, a great wrong that has been put upon the American people."

Costs of the bill would, according to the Congressional Budget Office, be more than offset by new taxes and fees and by savings in Medicare. The bill would squeeze nearly a half-trillion dollars from Medicare over the next 10 years, mainly by reducing the growth of payments to hospitals, nursing homes, Medicare Advantage plans and other providers.

Republicans asserted that the cuts would hurt Medicare beneficiaries. But AARP, the lobby for older Americans, and the American Medical Association ran an advertisement urging senators to pass the bill, under which Medicare would cover more of the cost for prescription drugs and preventive health services.

Karen M. Ignagni, president of America's Health Insurance Plans, a trade group, said the bill appeared to be unstoppable. But she added: "We are not sure it will be workable. It could disrupt existing coverage for families, seniors and small businesses, particularly between now and when the legislation is fully implemented in 2014."
President Obama said Saturday that he saw an "unprecedented consensus" around Congressional plans to overhaul the nation's health care system, citing the recent statements of a string of Republicans -- most of them former elected officials -- who have issued their own calls to action.

"The distinguished former Congressional leaders who urged us to act on health insurance reform spoke of the historic moment at hand and reminded us that this moment will not soon come again," Mr. Obama said in his weekly address to the nation. "They called on members of both parties to seize this opportunity to finally confront a problem that has plagued us for far too long."

The White House has been pressing Republicans who are in favor of passing health legislation to issue the statements and circulating them to reporters. On Saturday, a few more added their names to a list that already included Bill Frist and Bob Dole, both former Senate Republican leaders; Tommy Thompson and Louis Sullivan, both former health secretaries; and Gov. Arnold Schwarzenegger of California.

Four former surgeons general -- two who served Democrats and two who served Republicans -- issued a statement that stressed the importance of lowering health costs and improving preventive care and said the "approaches that Congress is considering will help achieve these goals."

And Chuck Hagel, the former senator from Nebraska, wrote: "Congress and the administration are working on bipartisan, practical solutions to improve our health care
system. I urge all members of Congress to put aside their narrow partisan differences and seize this moment for health care reform.

The White House effort has irked Republican leaders in Congress, who argue that the statements are bland expressions of support issued by those who don't have to vote on the particulars. A spokesman for Senator Mitch McConnell, the Republican leader, said in an e-mail message on Saturday that Mr. McConnell himself had given 44 speeches on the need for health reform; the spokesman, Don Stewart, said that some of the Republicans whose remarks the White House had been heralding had also said they would not vote for the bills currently pending in Congress.

Even so, the tactic appears to be picking up steam. The Democratic National Committee is capitalizing on it, and has put together a cable television advertisement featuring the statements of Mr. Frist, Mr. Thompson and Mr. Dole.

While the bills moving through Congress contain some Republican ideas, they are attracting little, if any, Republican support. In the Senate, the Finance Committee will vote Tuesday on what is regarded as the most bipartisan of the bills, yet only one Republican on the panel, Senator Olympia J. Snowe of Maine, has said she is considering voting for it. And even Ms. Snowe has not made up her mind.

In his address, Mr. Obama called the finance bill "another milestone on what has been a long, hard road toward health insurance reform." He said the approach emerging "includes the best ideas from Republicans and Democrats, and people across the political spectrum."

The bill does have one thing in its favor: the nonpartisan Congressional Budget Office issued an analysis this week that found that it would reduce the federal deficit by $81 billion over 10 years. Thus it meets a key criterion set forth by Mr. Obama, who has said he will not sign any legislation that "adds one dime" to the deficit.

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Conservative Democratic Senator Defends His Health Care Vote Back Home

BYLINE: By MONICA DAVEY; Kate Zernike contributed reporting.

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Senator Ben Nelson, Democrat of Nebraska, took to the airwaves in his home state on Wednesday, trying to defend his role as the decisive 60th vote in favor of broad health care legislation.

In the days since the vote, Mr. Nelson has faced scathing political cartoons, busy phone lines and criticism of his position, even from some former supporters.

To explain his vote to critics, he appeared in an advertisement scheduled to be broadcast statewide on Wednesday evening during the one occasion when most Nebraskans were certain to be found before a television -- the Holiday Bowl, in which the University of Nebraska Cornhuskers faced the Arizona Wildcats.

"With all the distortions about health care reform, I want you to hear directly from me," Mr. Nelson says in the ad, which shows his face, up close, speaking straight into the camera as music plays. In the 30-second spot, Mr. Nelson goes on to describe the legislation as "a common sense approach" that will lower costs for families and small businesses, protect Medicare, guarantee coverage for pre-existing conditions, reduce the deficit and, he adds with emphasis, "It's not run by the government."

Mr. Nelson, a former governor and second-term senator who won re-election in 2006 with 64 percent of the vote, has long had a conservative voting record that left many in this conservative state saying they liked their down-to-earth, amiable senator, whatever his party. But with his vote on health care, some critics in Nebraska now said they were painfully aware of something that had been true all along: He is the only Democrat currently holding statewide office in Nebraska.

"Nebraska is in a huge revolt over this," said Julie Schmit-Albin, executive director of Nebraska Right to Life, whose group has repeatedly endorsed Mr. Nelson for his anti-
abortion views. "My personal feeling is that he completely underestimated the level of opposition to the overall bill among Nebraskans, and it just whacked him on the side of the head."

Among the critics, some, like Ms. Schmit-Albin, say they are dissatisfied with the Senate bill's provisions related to abortion -- an effort to segregate federal dollars from private ones and let states set still tighter restrictions -- and feel Mr. Nelson betrayed them on the matter. (This might surprise Senate liberals, many of whom were angry that Mr. Nelson insisted on the abortion rules.)

Other critics say he simply should not have supported the entire insurance overhaul notion, for its high costs and potential damage to those forced to buy insurance.

Still others in Nebraska seem particularly irked that Senate leaders -- as they were courting Mr. Nelson as the 60th vote -- exempted Nebraska from paying for an expansion to its Medicaid program.

That's not the way we operate," said Gov. Dave Heineman, a Republican who is sometimes suggested as a possible opponent for Mr. Nelson in 2012. Mr. Heineman said that as news of the Medicaid provision spread, people in Nebraska felt embarrassed at the thought that they had been made part of some political deal, even if it was to benefit them.

Any such exemption should affect all states, Mr. Heineman said, not just one. "Our citizens got angry," he said. "It was an attack on their integrity."

On Wednesday, Senator Nelson declined a request for an interview through his spokesman. But his office has previously explained the Medicaid provision as one that actually grew out of a concern expressed in a letter weeks ago by Mr. Heineman about how the state would pay for changes brought by the health care proposals.

Jake Thompson, a spokesman for Mr. Nelson, said it had not been the senator's idea; Mr. Nelson had simply informed Senate leadership about Mr. Heineman's letter, he said, and the leaders had come up with the solution.

"If the governor asks Senator Nelson to have it removed, he will," Mr. Thompson said.

Mr. Heineman said his central wish was that Mr. Nelson reconsider his vote in the days ahead as the Senate and House try to merge their versions of the health care overhaul.

Few in Nebraska seemed certain what effect Mr. Nelson's advertisement -- which is expected to broadcast an undetermined number of times after Wednesday night -- might have on people here. It was being paid for by the Nebraska Democratic Party, which declined to release the cost of the efforts.