
by Nathan Schneider

When Aleta Kazadi took to the streets of Denver to collect signatures throughout the summer, the most common response she got was, "I'm OK." This normally meaningless idiom seemed more telling than usual under the circumstances. She was, after all, asking people whether they'd like to support a state ballot initiative for universal health care. Maybe they're OK, but what about those who aren't?

"The concept that we are our brother's keeper obviously never entered their minds," Kazadi says. "If we don't see our neighbor in need, what kind of society are we living in?" She's OK herself, as a retired teacher with insurance for life. But a decade living in the Democratic Republic of the Congo taught the Illinois native and grandmother something about neighbors in need. She remembers her whole village being awakened by the wailing of families who'd lost a child to malaria.
Kazadi figures that she can claim between 700 and 900 signatures of the 158,831 collected by more than 500 fellow volunteers, along with paid help, between April and October last year. Bernie Sanders (https://www.vice.com/tag/bernie%20sanders) rallies at the beginning and end of the process provided especially sympathetic crowds, as did Pride and Juneteenth (http://www.vice.com/read/why-juneteenth-needs-to-be-a-national-holiday-619). The campaign needed 98,492 signatures to get the issue on the ballot; 109,134 were deemed valid in the end. Thanks to people like Kazadi, medical coverage for all will be on the Colorado ballot this November (http://coloradocareyes.co/2015/11/officially-on-the-ballot/).

I would be lying if I said the idea behind ColoradoCare is simple, but compared to the hoarder's attic that passes for a medical system in the United States right now it really is. ColoradoCare would opt the state out of the Affordable Care Act and provide comprehensive coverage for every resident. This would be paid for by a 3.33 percent income tax and a 6.67 percent payroll tax for employers—or up to 10 percent for the self-employed. These are steep hikes, but for most Coloradans it would mean paying less than they currently pay for insurance premiums. (If people want extra insurance they can buy it on the private market; it would be a bit like public schools, which everyone pays for but some decide not to use.) Supporters believe the system will cost a total of $6 billion (http://www.coloradostatesman.com/content/995942-coloradocare-backers-say-title-boards-25-billion-cost-estimate-%3Fmisleading%3F-ponder-su) less than the current arrangement in a given year.

The most peculiar feature of ColoradoCare is that it is structured like a kind of statewide, obligatory cooperative. The legislature can't touch those tax revenues; they go straight to a fund overseen by trustees that residents—regardless of citizenship or immigration status—will elect directly. Residents have to approve tax increases as well. On the one hand, this design bypasses restrictions that prevent the legislature from raising taxes; on the other, it's a half-socialist, half-libertarian experiment in co-ownership and co-governance on the scale of more than 5 million people.

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—Owen Perkins

ColoradoCare's basic architecture is the invention of State Senator Irene Aguilar, a family doctor who entered politics several years ago to fix a system that she'd watched kill her under-insured patients for decades. She made a few earnest attempts to pass health-care reform in the state capitol, but to no avail. She meanwhile learned about the constraints of state law that she'd have to navigate. Eventually, Aguilar and a core band of allies—disproportionately psychologists, as it happens—decided to go for a ballot initiative, putting tens of thousands of dollars into the effort themselves. Owen Perkins, a baseball reporter and activist who serves as the campaign's political director, told me, "It's easier to get 100,000 signatures from Colorado voters than it is to get 67 legislators to agree on anything."

Using this same referendum process in 2012, Colorado voters made their state, along with Washington, the first to legalize recreational marijuana. Several other states have followed, with more likely on the way. In November, we'll see whether voters will try to set off a similar wave of change in health care.

Watch the VICE News documentary on the marijuana industry in Colorado:
It would be hard to cast a better antagonist for this movement than Jonathan Lockwood. He is executive director of Advancing Colorado, an outfit formed in 2014 to serve, says Lockwood, "as a voice for free-market believers and advocates." He's a slick dresser and a fast talker, slight in build and vociferous with opinions. A veteran of the Koch brothers' millennial-outreach arm, Generation Opportunity, he also looks young enough that, he told me, people sometimes won't believe that he's his own boss. On the morning of October 23, Lockwood was among the handful of those who came to witness the delivery of petitions to the back entrance of the Colorado secretary of state's office. He stuck close to a young woman from America Rising PAC—"a new generation of Republican research and rapid response"—who was recording the proceedings with a camcorder.

The petitions arrived, for the sake of political theater, on a gurney in a rented ambulance. ("I've done crazier things before for enough money," the driver informed me.) Aguilar, in her white lab coat, helped unload them and guided the gurney toward a service entrance. Afterward, she and several dozen supporters gathered at the Greek Theater, an outdoor colonnade in Denver's political district, for a press conference. Discerning me to be one of the few reporters present, Lockwood introduced himself and suggested that I interview him. I knew him by reputation already; together with the Kochs' Americans for Prosperity, Advancing Colorado was so far one of the few public opponents who'd bothered to confront ColoradoCare head on.

In response to my questions, Lockwood alleged that, if the referendum passed, ColoradoCare's trustees "can—will—raise taxes as high as they want, as often as they want, and nobody can do anything about it." (As noted above, tax hikes must pass via a referendum process.) He then warned that this quasi-cooperative would lead to a repeat of the recent collapse of Obamacare's quasi-cooperative nonprofit insurance companies. (ColoradoCare, an entirely different model, would be less vulnerable to the congressional Republicans who killed the funding those companies were depending on.) When I didn't seem too susceptible to those arguments, he told me about his organization's other swashbuckling campaigns against traffic cameras and the Environmental Protection Agency. "Anything Jonathan Lockwood says is bullshit," warns ColoradoCareYES executive director Ivan Miller, who that day wore a Gore-Tex brimmed hat with a feather in it. "The opponent I like best is the Koch Brothers," says T.R. Reid, a former Washington Post foreign bureau chief turned ColoradoCare spokesman. "If a couple of billionaires from Kansas who have big investments in the insurance industry want to oppose us"—by which he means the Kochs—"I can use that all day long."
Now that it has secured a place on the ballot, ColoradoCare will likely encounter more fearsome opponents. If passed, it could devastate the state's insurance industry—the $6 billion in promised savings would be sure to hurt someone's profits. The attention of Lockwood, the Kochs' man on the ground, suggests that a national political proxy war may be coming. As the campaign switches from petitions to the November election, Miller says, "We need to build a plan that cannot be defeated by big money."

In certain respects, ColoradoCare appears to be the kind of purple-state proposal that could appeal across party lines. It gets rid of Obamacare in the state thanks to an opt-out measure in Obamacare itself. It eschews the polarized politics of the legislature—by instituting a new bureaucracy paid for with tax dollars. It frees businesses from the burden of paying their employees' insurance by imposing taxes that will hit high-income earners hardest. It borrows features from a program in the conservative Colorado city of Grand Junction, as well from as the progressive single-payer movement.

"The fairest and most efficient health care systems are the government-run systems."
—T.R. Reid

The proposal's advocates are trying to appeal to the state's go-it-alone political culture. "This is not government health care," Aguilar said from the steps of the Greek Theater. "I've been in government, and we can't get health care done." Yet Kazadi and other volunteers came to the effort through liberal networks like MoveOn.org and Daily Kos, which mobilized for the Affordable Care Act.
Reid, like Aguilar, trades in the rhetoric of suspicion toward government, but the book and PBS film he produced about medical systems around the world suggest that railing against public medicine is a dead end. "The fairest and most efficient health care systems are the government-run systems," he told me. "Even though there are areas where the private sector can do things better than government, health care is not one of them."

The campaigners who got ColoradoCare on the ballot, like Aleta Kazadi, tend to be retired or close to it. During a meeting of volunteers at a Denver cafe they frequent, I met an elder physician named Nathan Pollack, who handed me a copy of his self-published, 490-page manifesto titled How to Survive the Health Care Chaos; he was wearing a Bernie Sanders T-shirt and was eager to debate with compatriots whether the candidate represents "revolution." Sanders himself told The Colorado Independent in October that the state could "lead the nation" if it passes ColoradoCare.

"The diversity that we're going to need needs total rethinking," says Ken Connell, a volunteer organizer with a gray ponytail. But you have to start somewhere. Aguilar can recite verbatim the familiar Margaret Mead line about "a small group of thoughtful, committed citizens" changing the world. Right now it is one such group, armed with Colorado's ballot-initiative process, that is uniquely poised to slay the hideous, deadly beast that passes in the United States for a health care system.

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