

## Emerging Goal for Afghanistan: Weaken, Not Vanquish, Taliban

By SCOTT WILSON  
 Washington Post Staff Writer

As it reviews its Afghanistan policy for the second time this year, the Obama administration has concluded that the Taliban cannot be eliminated as a political or military movement, regardless of how many combat forces are sent into battle.

The Taliban and the question of how the administration should regard the Islamist movement have assumed a central place in the policy deliberations underway at the White House, according to administration officials participating in the meetings.

Based on a stark assessment by Gen. Stanley A. McChrystal, the

top U.S. commander in Afghanistan, and six hours of debate among the senior national security staff members so far, the administration has established guidelines on its strategy to confront the group.

The goal, senior administration officials said Thursday, is to weaken the Taliban to the degree that it cannot challenge the Afghan government or reestablish the haven it provided for al-Qaeda before the 2001 U.S. invasion. Those objectives appear largely consistent with McChrystal's strategy, which he says "cannot be focused on seizing terrain or destroying insurgent forces" but should center on persuading the population to support the government.

"The Taliban is a deeply rooted political movement in Afghanistan, so that requires a different approach than al-Qaeda," said a senior administration official who has participated in the meetings but has not advocated a particular strategy.

Some inside the White House have cited Hezbollah, the armed Lebanese political movement, as an example of what the Taliban could become. Hezbollah is considered a terrorist organization by the U.S. government, but the group has political support within Lebanon and participates, sometimes through intimidation, in the political process.

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BY ASSAFA WINDQUIST — REUTERS  
**Marines in Helmand province. About 68,000 American troops are set to be in Afghanistan by year's end.**

### McChrystal Asked To Delay Briefing

The top commander has postponed a Washington trip because strategy talks have taken longer than anticipated. **A4**

## McDonnell Wide Lead Over Deeds

### Poll Finds Voters Are Looking at State On Issues, Tone of Ads in Governor's

By ROSALIND S. HELDERMAN and JON COHEN  
 Washington Post Staff Writers

Republican Robert F. McDonnell has taken a commanding lead over R. Creigh Deeds in the race for governor of Virginia as momentum the Democrat had built with an attack on his opponent's conservative social views has dissipated, according to a new Washington Post poll.

McDonnell leads 53 to 44 percent among likely voters, expanding on the four-point lead he held in mid-September. Deeds's advantage with female voters has all but disappeared, and McDonnell has grown his already wide margin among independents. Deeds, a state senator from western Virginia, is widely seen by voters as running a negative campaign, a finding that might indicate that his aggressive efforts to exploit

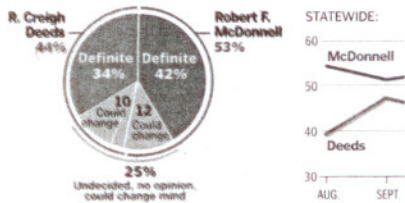
McDonnell's 20-year-old thesis are turning voters. Much of the movement month has come in Northern Virginia, where Deeds's 17 has been whittled slightly even in the area's left-leaning suburbs.



The poll indicates GOP is well-positioned to end Democratic win with Republicans I and Ken Cuccinelli identifying 49 to leads over Democrats Jon and Steve Shannon for governor and attorney general. The survey reflects the campaign over race after being on the defense his thesis was published. Deeds, McDonnell has been retake momentum by to

See POLL, Page A6

Q: If the election [for Virginia's governor] were being held today, for whom you vote?  
 (Among likely voters. Numbers might not add up because of round-off.)



SOURCE: Washington Post poll; margin of sampling error plus or minus three percentage points

Results a warning for Democrats running in 2011

## White House Faces Pressure on Jobs

### Despite Stimulus Successes, More Action So

By NEIL IRWIN, LORI MONTGOMERY and MICHAEL A. FLETCHER  
 Washington Post Staff Writers

Eight months after enacting a massive economic stimulus package, the Obama administration is facing rising pressure from some congressional Democrats to move more aggressively to jump-start the moribund job market and try to spur a housing recovery.

For the lawmakers, the imperative is clear: to get the job market back on track before midterm congressional elections in November 2010. While mainstream economists credit the \$787 billion stimulus package passed in February for helping stabilize the economy, the unemployment rate reached 9.8 percent in September and is widely forecast to keep rising in the coming months.

But the White House, which is juggling priorities — including a health-care overhaul, big changes to financial regulation and a proposal

to combat global warming reluctant to take on another big task. And in a time of budget deficits, administration are particularly eager not to do anything that would be character another stimulus act or wasteful spending.

Many Democrats — esp the House — favor moving to bolster the job market as pass health-care legislation. House has already voted to unemployment benefits, Senate may do so next week. port is already building a plan to extend an \$8,000 tax credit for first-time home buyers was included in the first package but is slated to expire 30. And lawmakers are discussing a wide range of other ideas, including a tax credit for businesses to create jobs, additional tax incentives for businesses to invest in energy and a large package of new transportation projects.

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## Health-Care Tug of War Puts Patients in the Middle

### Battle in New Jersey Illustrates Problems

By AMY GOLDSTEIN  
 Washington Post Staff Writer

BAYONNE, N.J. — One February morning, a courier arrived at the front desk of Bayonne Medical Center, trying to get to a patient's bedside. His mission: to deliver a letter from New Jersey's dominant health insurer warning that the patient would face a huge hospital bill if he did not leave right away.

Hospital security guards stopped the courier — and 13 others who came soon after — before they reached patients' rooms. But then came the faxes and, after that, the letters mailed to patients' doctors and homes. Told that her health plan would not pay for her to stay in the hospital, a 35-year-old social worker named Lisa with a severe lung infection was so unnerved that, tethered to an IV pole dripping antibiotics into her arm, she began to pack her gym bag before a staff member coaxed her back into bed.

The hardball tactics being used to pry patients from their sickbeds illustrate the colliding financial interests that pervade U.S. health care. It is a tug of war over where patients are treated, who decides how much care they receive and — fundamentally — which parts of the health-care industry gain or lose when people become ill.

The battle playing out in Bayonne has particular relevance as Congress tries to rewrite the rules that govern health care nationwide — with hospitals, insurers, doctors and other stakeholders descending on Capitol Hill to angle for advantage. The bills before the House and the Senate would shift the system's balance of power that has evolved over decades — a balance at the core of the dispute here.

Yet the fight over hospital patients in this working-class enclave also hints at the limits of what federal health-care changes would accomplish: none of the bills would legislate away the specific business practices that have escalated into a full-scale brawl between the city's

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## He Added Spice to Our Lives

### Chili Bowl Founder Satisfied Craving for Food, Friendship

By MATT SCHUDEL  
 Washington Post Staff Writer

If the rest of the world sees Washington as a place of large monuments and gleaming public buildings, many of the people who actually live in the city build their lives around smaller, more humble institutions. For them, one of the most important addresses in town is Ben's Chili Bowl, a simple diner famous for its down-home menu of chili, half-smokes and fries.



BY MICHAEL WILLIAMSON — THE WASHINGTON POST  
**Mr. Ali's chili has been ranked the best in America.**

of the most enduring institutions of Washington, a place where families meet after church and where night owls come to talk, flirt and, not least, eat.

The landmark eatery opened when U Street was the city's glittering "Black Broadway," a strip of nightclubs and theaters that catered to Washington's black middle class and helped define the city's pulse and taste. It became a steadfast symbol of Washington's perseverance through good times and bad, feeding the dignitaries who came to Washington as well as the ordinary folk.

# Battle in Bayonne Illustrates Competing Financial Interests in System

HEALTH CARE. From Page A1

only hospital and New Jersey's largest health insurer, Horizon Blue Cross Blue Shield. Lawsuits are flying in both directions, each side accusing the other of fraud, greed and underhanded behavior that harms consumers and increases medical costs. Bayonne accuses Horizon of harassing patients and not paying its bills. Horizon accuses Bayonne of price-gouging and interfering with its health plans.

Such a sharp clash of self-interests is evidence that President Obama may have been naive in suggesting early on that health care's stakeholders are now willing to set aside rivalries that have thwarted previous attempts at reform, said Uwe E. Reinhardt, a health economist at Princeton University who led a state commission on New Jersey's shaky hospital finances. "It's no different from Iraq with all the different tribes. . . . How does it affect the money flow to my interest group?" he said. "They are all sitting in the woods with their machine guns, waiting to shoot."

In such a tense climate, Bayonne has become virtually the only hospital in the country that has withdrawn in protest from the "provider networks" of every major insurer, abandoning a tradeoff that has become a staple of the health-care system: Hospitals agree to be paid lower rates in exchange for knowing that insurers will steer patients to their beds. Bayonne is not, however, the only hospital at odds with Horizon. Four others have pulled out Horizon's network or are close to leaving.

When Daniel A. Kane arrived as Bayonne Medical Center's chief executive the winter of 2007, it was losing \$1.5 million or more monthly and teetering on the edge of collapse. For more than a century, it had been a fixture in this blue-collar community at the tip of a peninsula in Newark Bay.

There was no choice, Kane concluded, but to file for bankruptcy protection and find new owners. Kane and a crew of consultants scoured the country and enlisted investors who wanted to convert Bayonne into a for-profit hospital, one of two in the state.

"This place was messed up every way," said Brent Martin, a consultant brought in to help turn it around. To buy equipment and improve care, the new owners said, they needed to cut costs and bring in more money. In seceding from all of its insurance networks,

ON WASHINGTONPOST.COM

1 For more reports on how health insurance companies will be affected by Congress's reform plans, go to [washingtonpost.com/healthcare](http://washingtonpost.com/healthcare).

Horizon officials said they could not discuss Lisa's case without her permission, which she declined to give. But in general, they said, networks' discounted rates help the insurance industry control medical spending. They have, they said, a

responsibility to encourage patients to avoid needless expenses at out-of-network institutions.

Bayonne administrators counter that Horizon is falsely telling patients they could be stuck with enormous bills; hospital officials

have promised they will not ask patients to pay more than their health plans cover.

Horizon sued the hospital in May, accusing it of "slick and fraudulent tactics" to submit "phony, inflated bills." Horizon contends the hospital has more than doubled its charges to rates far higher than those of nearby hospitals. Bayonne denies doing so. Horizon also alleges it is illegal for Bayonne to drop patients' co-payments, although Bayonne says that having rescind-

ed its contract with Horizon, it no longer needs to follow the rules between the insurer and its customers.

In July, Bayonne sued Horizon, accusing it of "illegal intimidation, harassment, threats and fraud" against patients and doctors, and of paying the hospital a fraction of what it owes. And it alleges that Horizon is trying to "illegitimately . . . enhance its Wall Street value" at a time when it has asked state regulators to let it convert to a for-

profit company — a claim that Bell calls "simply hogwash."

Amid the attacks and counterattacks, said Jon Glaudemans, senior vice president for consultants Avalere Health, who studied health care in New Jersey, is dysfunction in the medical marketplace that Congress's proposals would not fix.

"It's a game of chess that turned into a game of chicken," he said, "and the patients are in the middle."

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ruptcy—the hospital's administrators reasoned they could then charge insurers higher rates. They gambled that people in this rooted community would keep coming.

Even so, Kane said, dropping out of Horizon, which covers nearly half the state residents who are insured, was "very tough."

Christy W. Bell, Horizon's senior vice president for health-care management, said, "Typically, we try to avoid these disputes. It catches patients in the middle." Kane portrayed it differently: "When you are not in [Horizon's] network . . . they are going to teach you a lesson."

Horizon mailed letters to 215,000 members and warned employers that, if people went to Bayonne, they risked big hospital bills and higher premiums.

It was Feb. 6, the first day Bayonne was out of Horizon's network, that Neil Carroll, in charge of the hospital's security, received a call that the courier for Horizon was at the front desk. Horizon officials said they sent letters to all of their 115 members admitted to Bayonne from February to July, urging them to leave. They told some patients that Horizon had determined "your medical condition is no longer acute" so it would not pay for part of their stay. They told some that, because the hospital was outside the network, the patient must shoulder up to 30 percent of the bill. They told others that Horizon would not pay anything, because the patient did not need to be hospitalized in the first place.

Lisa, the social worker, had arrived at Bayonne Medical Center by ambulance, wheezing, with a 103-degree fever. She was wheeled upstairs to a hospital bed. A few days later, an elderly woman in the next bed mentioned that Horizon had stopped paying for patients to be there. Still coughing and weak, Lisa said, she called Horizon and a customer service representative gave her a choice: move to a hospital in Jersey City, several miles away, that was in Horizon's network or pay for the rest of her care on her own.

"They sent me into a furious panic," said Lisa, who spoke on the condition that her last name not be disclosed, saying she fears retaliation by Horizon. A pulmonologist told her to stay. Still, she had her gym bag packed when she buzzed for a nurse, who called a case manager, who told Lisa that Bayonne had no intention of charging her beyond what Horizon was willing to pay.

Lisa climbed back into bed.

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