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NBC Nightly News Dec 2, 1993
6:30-7:00 PM NBC

Segment: Profile: America close up; families in crisis; US businesses help working parents cope with stresses of work and family
Cost: $012.00
Nielsen: 12231500

TOM BROKAW, anchor:

AMERICA CLOSE UP now--continuing our special series, FAMILIES IN CRISIS in this country. When both parents work, of course, it can create real pressure at home, especially when young children are involved. And these days, almost two thirds of all two-parent homes include a working mother. So some employers now are coming up with ways to help. NBC's Larry Carroll, tonight, on what one approach that is working.

BROKAW: And tomorrow night, some tough questions--new answers on FAMILIES IN CRISIS. I'll have an exclusive interview with **President Clinton** on this issue.

And when we come back, one of the hottest teams on ice playing in Dixie?

INDEX: United States
Business
Labor
Parents

DOCUMENT: 2 of 5

NBC Nightly News Dec 3, 1993
6:30-7:00 PM NBC

Segment: Profile: President **Clinton** on impact of out-of-wedlock births on cycle of poverty
Cost: $013.00
Nielsen: 12231500

TOM BROKAW, anchor:

AMERICA CLOSE UP tonight**--FAMILIES** IN CRISIS. And tonight, the view from the White House. All week here, we have been reporting on the consequences of dysfunctional **families** and some possible solutions. Conservative scholar Charles Murray proposes more orphanages and the elimination of aid to **families** with dependant children as a way of breaking the runaway cycle of unwed mothers. In a White House interview, I asked President **Clinton** what he thinks.

President BILL **CLINTON**: Well, let me say, I read Charles Murray's latest

article on this, and I think he did the country a great service. I mean, he and I have often disagreed, but I think his analysis is essentially right. Now whether his prescription is right, I--I question. And let me--let me--and let me say why. There is no question that we need to re--that if we need to reduce the aid to **families** with dependant children, it would be some incentive for people not to have dependant children out of wedlock.

I once polled a hundred children in an alternative school in Atlanta, many of whom had had babies out of wedlock. And I said if we didn't give any AFDC to people out of--after they had their first child, how many of you think it would reduce the number of out-of-wedlock births? Over 80 percent of the kids raised their hands. There's no question that that would work. But the question is...

BROKAW: Is it politically possible?

Pres. **CLINTON**: Well, it may--I think we ought to ask ourselves whether it is right? Is it morally right? Is it right in terms of the public interest? Those little children that are being born, they deserve a life too, the best we can give them. If it is right, we ought to do it. Let's start with a tough welfare reform program that moves people off

welfare; with a tough program to identify paternity at birth; and with a tough program of child-support enforcement. Let's start with a tough effort to make our streets safer again, and--and--and to give real opportunity back to these folks. Keep in mind, work and **family** are the two things that organize any society. It--it's hard to preserve one if the other goes away.

BROKAW: We have been witnessing the breakdown of the black **family** for some time now, but it's beginning to happen within the white community, as well, at an alarming degree. Do you think that that will get us then beyond the racial stereotypes that have characterized so much of this?

Pres. **CLINTON**: Boy, I hope so. I hope so. I hope it will get us beyond

that, back to values. I think that and the fact that there is the kind of aggressive black leadership for doing something about it. You've seen in the way Jesse Jackson's been speaking out, you saw in the reaction that the--the African American ministers gave to my speech in Memphis; you see it in--in all other minority communities too. But let me emphasize one other thing; this is overwhelmingly a problem of the economic underclass, and it feeds it, so that once a really poor woman has a child out of wedlock, it almost locks her and that child into the cycle of poverty, which then spins out of control further.

But if you look at the figures, the--the--for black **families** where there are two-parent **families** with children, their incomes are almost three times as high as single white mothers who had their children out of wedlock. So it's not, primarily, 'it's a racial problem.' It's a problem of income, **family** structure, and educational level.

BROKAW: But if it is the crisis that you describe, and it does affect so much of the fabric of our society, to solve that problem and to solve the continuing problem of 40-percent black unemployment among teen-agers, isn't it going to take really a heroic effort on the part of this country and billions of dollars?

Pres. **CLINTON**: It's going to take a heroic effort and billions of dollars, but a lot of money is going to have to come from the private sector. What the government is going to have to do is build a jobs program into its welfare program, because you have to do that. You have to--you can't cut people off welfare if they don't have a job. Government's going to have to train everybody. The government's going to have to--to continue on the anti-crime crusade.

And the government's going to have to adopt some very firm pro**-family**

policies to encourage the preservation and the development of strong **families**. And we're going to have to do that. And the rest of it's going to have to be done at the state and local level, and by the private sector, and by religious leaders and others rebuilding the fabric from the grass roots up. But we have to set an example, and we have to lead here in Washington. And I'm determined to see that we do it.

BROKAW: What is it that you can do as President of the United States? Is it mostly as a role model, or is it policy?

Pres. **CLINTON**: Well, I think both and more. I think that, first, it's important for me to speak out about the--the rising wave of crime and violence, how it's tied to the breakdown of the **family,** the rise in out-of-wedlock births, and the collapse of economic opportunity.

BROKAW: A lot of it's about role modeling? Was Dan Quayle right?

Pres. **CLINTON**: Well, as I have said many times, I read his whole speech--you know, his "Murphy Brown" speech. I thought there was a lot of very good things in that speech. He made--I think he made a mistake to--I think he got too cute with "Murphy Brown", but it is certainly true that this country would be much better off if our babies were born into

two-parent **families**.

BROKAW: The president said today that the runaway teen-age pregnancy rate in this country is undermining our ability to recover as a people.

When we come back, a political transformation in Germany--a new image for a neo-Nazi candidate.

INDEX: United States
Government
Welfare
Pregnancy
Youth

DOCUMENT: 3 of 5 Promotion of the interview.

Today Dec 3, 1993
7:00-9:00 AM NBC

Segment: Leads: Brokaw interviews President **Clinton** on NBC **Nightly News**
Cost: $010.00
Nielsen: 4795760

STONE PHILLIPS, co-host:

We're going to--we're going to go now to a tape with Tom Brokaw, previewing--tonight on **Nightly News,** Tom Brokaw is going to conclude our weeklong series on American **families** in crisis. He has an exclusive interview with President **Clinton** about the problems facing American **families** and possible solutions. Here's the tape.

President BILL **CLINTON**: The rise of violence is related to the decline of traditional **families** and upbringing, and the decline of the economy, all sort of converging on huge numbers of Americans.

TOM BROKAW reporting:

What is it that you can do as president of the United States? Is it mostly as a role model or is it policy?

Pres. **CLINTON**: I think both and more. I think that, first, it's important for me to speak out about the--the rising wave of crime and violence, how it's tied to the breakdown of the **family,** the rise in out-of-wedlock births and the collapse of economic opportunity. I think it's important for me to set an agenda that our national government can follow, but I also think it's important for me to challenge people in the private sector and at the community level to do their part. This is not just a government problem and it's not just a--a question of programs. There have to--we have to literally go about the business of reversing--a--a generation of decline in a lot of these areas.

BROKAW: A lot of it's about role modeling. Was Dan Quayle right?

Pres. **CLINTON**: Well, as I have said many times, I read his whole speech you know, his "Murphy Brown" speech. I thought there were a lot of very good things in that speech. He made--I think he made a mistake t--I think he got too cute with "Murphy Brown," but it is certainly true that

this country would be much better off if our babies were born into

two-parent **families**.

PHILLIPS: More of Tom Brokaw's repor--interview with President **Clinton** tonight on "NBC **Nightly News.**"

And we're back in a moment with more on TODAY right after this.

DOCUMENT: 4 of 5

Today Promotion of the interview Dec 3, 1993
7:00-9:00 AM NBC

Segment: Newscast: President begins two-day tour of New Mexico and California; promotes health care reforms
Cost: $004.50
Nielsen: 4795760

MATT LAUER, anchor:

President **Clinton** begins a two-day trip to New Mexico and California today to sell his health-care plan. The president will visit a private clinic today to talk with **families** about his plans for reform.

And by the way, tonight on "NBC **Nightly News,**" Tom Brokaw has an exclusive interview with the president as part of the **Families** in Crisis series. They'll be talking about problems facing **families** and some possible solutions. That's tonight on NBC **Nightly News**.

THE WHITE HOUSE

Office of the Press Secretary
(Kansas City, Missouri)

For Immediate Release June 14, 1994

REMARKS BY THE PRESIDENT
TO OFFICIALS OF MISSOURI AND
PARTICIPANTS OF THE FUTURE NOW PROGRAM

Commerce Bank
Kansas City, Missouri

1:12 P.M. CDT

THE PRESIDENT: Thank you very much. Thank you, ladies and gentlemen, for that warm introduction and welcome. And thank you, Yolanda Magee, for presenting me today, and far more importantly, for presenting such a good example of a young American determined to be a good parent and a good worker and a successful citizen.

Thank you, Mr. Kemper, for giving her a chance to be all that. Thank you, Congressman Wheat, for your leadership on welfare reform. And thank you, Mayor Cleaver, for your leadership on this issue.

Thank you, Governor Carnahan, for proving once again that the states, just as James Madison and Thomas Jefferson intended, are still the laboratories of democracy, still capable of leading the way to change things that don't work in this country, and to unleash the potential of our citizens. This is a remarkable welfare reform plan that you have put together.

I'd like to thank also Secretary Shalala for her work here. Many people in the White House and in the Department of Health and Human Services worked with people all over America in putting this welfare reform plan together today. I thank them all.

Ladies and gentlemen, this is an important day for me because I have worked on this issue for about 14 years and I care a great deal about it. I came out here to the heart of America, to a bank where Harry Truman had his first job, to talk about the values that sustain us all as citizens and as Americans: faith and family, work and responsibility, community and opportunity.

Last week, on behalf of all Americans, I took a journey of remembrance -- many of you at least took it, too, through the television -- to honor the sacrifices of the people who led our invasions at D-Day and on the Italian peninsula. I came home from Normandy with a renewed sense, which I hope all of you share, of the work that we have to do in this time to be worthy of the sacrifices of that generation and to preserve this country for generations still to come.

The people who won World War II and rebuilt our country afterward were driven by certain bedrock values that have made our country the strongest in history. Facing the dawn of a new century, it is up to us to take those same values to meet a new set of challenges.

Our challenge is different. Today we have to restore faith in the beginning in certain basic principles that our forebears took for granted -- the bond of family, the virtue of community, the dignity of work. That is really what I ran for

president to try to do -- to restore our economy, to empower individuals and strengthen our communities, to make our government work for ordinary citizens again.

I think we've made a good beginning. In the last year and a half, we have reversed an economic trend that was leading us into deeper and deeper debt, less investment and a weaker economy. The Congress, as Congresswoman Danner and Congressman Wheat will attest, is about to put the finishing touches on a new budget which will give us three years of declining deficits in the federal accounts for the first time since Harry Truman was president. (Applause.)

We worked to expand trade and the frontiers of technology, to have tax incentives for small businesses and for working families on modest wages to keep them moving ahead. And the results are pretty clear. Our economy has produced about 3.4 million jobs in the first 17 months of this administration. So we're moving ahead.

We're trying to empower people with new systems for job training and community service and other options for young people to rebuild their communities and go to college. We're trying to make this government work again for ordinary citizens by reforming the way it works with our Reinventing Government Program that will lead us within five years to the smallest federal bureaucracy since John Kennedy was president -- doing more work than ever done before by the federal government that will lead the Congress, I hope, in just a couple of weeks to pass the most comprehensive anticrime bill in the history of the country; that is helping all of us to restore that bond that has to exist between a government and its people.

But I have to tell you that the challenge of the welfare system poses these issues, all of them in stark terms -- how to make the economy work, how to make the government work for ordinary citizens, how to empower individuals and strengthen communities. These difficulties are all present in the challenges presented by the current welfare system. There's no greater gap between our good intentions and our misguided consequences than you see in the welfare system.

It started for the right common purpose of helping people who fall by the wayside. And believe it or not, it still works that way for some -- people who just hit a rough spot in their lives and have to go on public assistance for awhile, and then they get themselves off and they do just fine. But for many the system has worked to undermine the very values that people need to put themselves and their lives back on track.

We have to repair the damaged bond between our people and their government, manifested in the way the welfare system works. We have to end welfare as we know it.

In a few days, as has already been said, I will send to Congress my plan to change the welfare system -- to change it from a system based on dependence to a system that works toward independence -- (applause) -- thank you -- to change it so that the focus is clearly on work.

I also want to say that I developed a phrase over the last few years that would end welfare as we know it by saying welfare ought to be a second chance, not a way of life. One young woman I met a few moments ago said it ought to be a stepping stone, not a way of life. Maybe that's even better. But you have the idea.

Long before I became President, as I said, I worked with other governors and members of Congress of both parties. I worked on it with people who were on welfare, a lot of them. And let me say first of all to all those whom I invite to join this great national debate, if you really want to know what's wrong

with the welfare system, talk to the people who are stuck in it or who have been on it. They want to change it more than most people you know. And if you give them half a chance, they will. (Applause.)

Before I came down to see you, I met with Yolanda Magee, and she told me her story. I also met with several other people who are now working in this area, who used to be on welfare -- people who get up every morning and go to work in factories or small businesses or banks, who do their best to take care of their children and to advance their capacity to succeed in our complex, modern society.

And I want to introduce them all to you and ask them to stand, so that when you look at them you'll know what this whole deal is about. And let me just -- they're over here -- Cathy Romero, who works at Lutheran Trinity Hospital. Stand up. (Applause.) Arlenda Moffitt, who works at Pitney Bowes Management Services. (Applause.) Vicki Phelps who works at Continuum Vantage Research. (Applause.) Birdella Smith at HOK Sports Facilities. (Applause.) Christine McDonald who works for Pepsi Cola. (Applause.) Mimi Fluker who works at Payless Cashways. (Applause.) Audrey Williams who works at Allied Security. (Applause.) Judy Sutton, a teacher in the Kansas City School District. (Applause.) And Tracy Varron, a home health registered nurse at Excelsior Spring City Hospital. (Applause.)

Now, every one of those American citizens at one point in her life was on welfare. Everyone now, thanks to programs and incentives and help with medical coverage and child care and training, and just helping people put their lives back together through the initiatives that have already been discussed here, is now a working American. And I say to you, if these American citizens can do this here in Kansas City, we ought to be able to do this in every community in the country. And we ought to be able to change the system -- (applause.)

How shall we change this system? Let me say first, I think we have to begin with responsibility -- with the elemental proposition that governments do not raise children; people do. (Applause.) And among other things, an awful lot of people are trapped in welfare because they are raising children on their own when the other parent of the child has refused to pay child support that is due, payable and -- (applause.)

This plan includes the toughest child support enforcement measures in the history of this country -- (applause) -- that go after the $34 -- listen to this -- the $34-billion gap in this country. That is, it is estimated that there are $34 billion worth of ordered but uncollected child support today in America -- $34 billion.

How are we going to do that? First, by requiring both parents to be identified at a hospital when a baby's born. Second, by saying, if you don't provide for your children, you should have your wages garnished, your license suspended, you should be tracked across state lines. (Applause.) If necessary, you should have to work off what you owe. This is a very serious thing. We can no longer say that the business of bringing a child into the world carries no responsibility with it and that someone can walk away from it.

The second thing that responsibility means is not just going after people who aren't fulfilling it, but rewarding those who are being responsible. The system now does just the opposite. Just for example -- the welfare system will pay teen parents more to move out of their home than to stay there. In my opinion, that is wrong. We should encourage teen parents to live at home, stay in school, take responsibility for their own futures and their children's futures. And the financial incentives of the welfare system ought to do that instead of just

the reverse. We have to change the signals we are sending here.

We also have to face the fact that we have a big welfare problem because the rate of children born out of wedlock, where there was no marriage, is going up dramatically. The rate of illegitimacy has literally quadrupled since Daniel Patrick Moynihan, now a Senator from New York, first called it to our attention 30 years ago. At the rate we're going, unless we reverse it, within 10 years more than half of our children will be born in homes where there has never been a marriage.

We must keep people from the need to go on welfare in the first place by emphasizing a national campaign against teen pregnancy, to send a powerful message that it is wrong to continue this trend, that children should not be born until parents are married and fully capable of taking care of them. (Applause.) And this trend did not develop overnight. THere are many reasons for it. It will not be turned around overnight. But be sure of this: no government edict can do it.

This is a free country with hundreds of millions of people making their decisions, billions of them every day. To change a country on a profound issue like this requires the efforts of millions and millions and millions of you talking openly and honestly and freely about these things; talking to people who have lived through these experiences, and many of them doing the very best they can to be honorable and good parents; talking about what we can do to involve churches and civic clubs and groups of all kinds in this endeavor -- not to point the finger at people to drive them down or embarrass them, but to lift them up so that they can make the most of their lives, and so they can be good parents when the time comes to do that. (Applause.)

But let us be clear on this: No nation has ever found a substitute for the family. And over the course of human history, several have tried. No country has ever devised any sort of program that would substitute for the consistent, loving devotion and dedication and role-modeling of caring parents. We must do this work. This is not a government mission, this is an American mission. But we must do it if we want to succeed over the long run.

And let me say finally that if you strengthen the families, we still can't change the welfare system unless it is rooted in getting people back to work. You can lecture people, you can encourage people, you can do whatever you want, but there has to be something at the end of the road for people who work hard and play by the rules. Work is the best social program this country ever devised. It gives hope and structure and meaning to our lives. All of us here who have our jobs would be lost without them.

Just stop for a moment sometime today and think about how much of your life is organized around your work -- how much of your family life, how much of your social life, not to mention your work life. Think about the extent to which you are defined by the friends you have at work, by the sense that you do a good job, by the regularity of the paycheck.

One of these fine women who's agreed to come here today said that one of the best things about being off welfare was getting the check and being able to go buy her own groceries every two weeks. That's a big deal. (Applause.)

So I say to you, we propose to offer people on welfare a simple contract. We will help you get the skills you need, but after two years, anyone who can go to work must go to work -- in the private sector, if possible; in a subsidized job, if necessary. But work is preferable to welfare. And it must be enforced.

Now, this plan will let communities do what's best for them. States can design their own programs, communities can design their own programs. This will support initiatives like the WEN program here, not take things away from them and substitute government programs.

We want to give communities a chance to put their people to work in child care, home care and other fields that are desperately needed. We want every community to do what you've done here in Kansas City -- to bring together business and civic and church leaders together to find out how you can make lasting jobs and lasting independence.

Let me say just a couple of other things. If you wish people to go to work, you also have to reward them for doing so. Now, a popular misconception is that a lot of people stay on welfare because the welfare check is so big. In fact, when you adjust it for inflation -- (laughter) -- right? When you adjust it for inflation, welfare checks are smaller than they were 20 years ago.

But there are things that do keep people on welfare. One is the tax burden of low wage work; another is the cost of child care; another is the cost of medical care. Now, a few years ago, I was active as a governor in helping to rewrite the welfare laws so that states were given the opportunity to offer some people the chance to get child care and medical care continued when they got off welfare and went to work for a period of transition. Several of these women have taken advantage of that. And they talked about it. (Applause.)

But we must do more. Last year when the Congress passed our economic program, they expanded the earned income tax credit dramatically, which lowered taxes on one in six working Americans working for modest wages so that there would never again be an incentive to stay on welfare instead of going to work. Instead of using the tax system to hold people in poverty, we want to use the tax system to lift workers out of poverty.

That was one of the least known aspects of the economic program last year, but more than 10 times as many Missourians, for example, got an income tax cut as the 1.2 percent of the wealthiest people got an income tax increase. Why? Because you want to reward people who are out there working who are hovering just above the poverty line.

What's the next issue? In our bill, we provide some more transitional funds for child support to help people deal with that. That's important.

But thirdly, one of the most important reasons we should pass a health care reform bill that makes America join the ranks of every other advanced county in the world that provides health insurance to all its people is that today you have this bizarre situation where people on welfare, if they take a job in a place which doesn't offer health insurance, are asked to give up their children's health care, and go to work, earning money, paying taxes to pay for the health care of the children of people who didn't make the decision to go to work and stayed on welfare while they made the decision to go to work and gave up their children's health care coverage. That does not make any sense. And until we fix that, we will never close the circle and have a truly work-based system. (Applause.)

If we do the things we propose in this welfare reform program, even by the most conservative estimates, these changes together will move one million adults who would otherwise be on welfare into work or off welfare altogether by the year 2000.

And if we can change the whole value system, which has got us into the fix we're in today, the full savings over the

long haul are more than we will ever be able to imagine, because the true issue on welfare, as Senator Moynihan said so many years ago, is not what it cost the taxpayers, it's what it cost the recipients. We should be worried about that.

And let me say, one of the most rewarding things that happened today in our little meeting before I came down was I asked all these fine ladies who are here, I said, now, if we were able to provide these services, do you believe that it should be mandatory to participate in this program? Every one of them said, absolutely. Absolutely. (Applause.)

So I ask you all here -- let us be honest. None of this will be easy to accomplish. We know what the problems are. And we know they did not develop overnight. But we have to make a beginning. We owe it to the next generation. We cannot permit millions and millions and millions of American children to be trapped in a cycle of dependency with people who are not responsible for bringing them into the world, with parents who are trapped in a system that doesn't develop their human capacity to live up to the fullest of their God-given abilities and to succeed as both workers and parents. We must break this cycle.

For this reason, this ought to be a bipartisan issue. Over the last 30 years, poor folks in this country have seen about all the political posturing they can stand -- one way or the other. (Applause.) Now, there are serious people in both political parties in Congress who have advanced proposals to change the welfare system. And I really believe that we have a chance finally to replace dependence with independence, welfare with work.

I don't care who gets the credit for this if we can rebuild the American family; if we can strengthen our communities; if we can give every person on welfare the dignity, the pride, the direction, the strength, the sheer person power I felt coming out of these ladies that I spoke with today; if we can give people the pride that I sense from Yolanda's coworkers when she stood up here to introduce me today. This is not a partisan issue, this an American issue.

Let me tell you, several years ago when I was a governor of my state, I brought in governors from all over the country to a meeting in Washington, and then I brought in people from all over America who had been on welfare to talk to them. We had most of the governors there, and they were shocked. Most of them had never met anybody who'd been on welfare before. And there was a woman from my state who was asked a question. I had no idea what she was going to answer. She was asked about her job, and she talked about her job and how she got on the job. And she said -- and then she was asked by a governor, well, do you think enrollment in these programs ought to be mandatory? She said, I sure do.

And then a governor said, well, can you tell us what the best thing about being in a full-time job is? She said, yes, sir; when my boy goes to school, and they ask him, what does your mama do for a living, he can give an answer. (Applause.)

Ladies and gentlemen, I thank you for proving today that we can give every child in America a chance to give an answer. Let's go do it. Thank you. (Applause.)

END 1:39 P.M. CDT

THE WHITE HOUSE

Office of the Press Secretary
(Kansas City, Missouri)

For Immediate Release June 14, 1994

BACKGROUND BRIEFING
BY
SENIOR ADMINISTRATION OFFICIALS

Commerce Bank
Kansas City, Missouri

2:00 P.M. CDT

SENIOR ADMINISTRATION OFFICIAL: Good afternoon. We're going to do a BACKGROUND BRIEFING here. The ground rules are, we're senior administration officials. I'm going to make a few comments about the general issue, and then we'll be happy to take any questions you may have.

First of all, as you can see from the President's speech, welfare reform is an issue that has been important to him for a long time. He worked on this issue as governor of Arkansas. He was head of the NGA's task force on welfare reform, which helped lead to the Family Support Act, which he helped author with Senator Moynihan and others in 1988.

And in the campaign, he said, first at Georgetown and then throughout the rest of the campaign, that it was time to end welfare as we know it. He took steps early in the administration to begin to do that, which he alluded to today. The first was the dramatic expansion of the earned income tax credit, which is a tax cut for working families which will help lift 15 million families out of poverty, turns a minimum wage job into a $6.00 an hour job. And it will enable us to make good on the President's pledge that no one who works full-time with a child at home should be poor.

Welfare reform is also closely tied to another core element of the President's agenda -- health care. As he said, we can't have serious welfare reform without serious health care reform. We need to make work more attractive than welfare, and

health reform is essential to doing that. And then, finally, it's part of his larger economic plan -- and the figures, as he gave you in his speech, 3.4 million jobs created in the last 17 months, 3.1 million of those in the private sector.

This is a very dramatic departure for the welfare system. These are the first time limits and serious work requirements in the history of welfare, the toughest child support enforcement measures ever proposed by any administration, and a focus on the next generation with the first true national campaign against teen pregnancy and out-of-wedlock births -- an issue that was first raised to the national scene in 1965 when Senator Moynihan published the Moynihan Report.

We also think that it will have very dramatic impacts; that these reforms taken together -- EITC, health reform and welfare reform -- will move one million people who would otherwise be on welfare off of welfare or into work by the year 2000; that we'll be able to double the amount of federal child support collection from $9 billion to $20 billion over that period; and that we'll also be able to achieve significant savings from reduced caseloads and welfare fraud.

Let me just say one word about the political climate that this package comes out in. The President wants very much for welfare reform to be a bipartisan issue. It has always been a bipartisan issue across the country for governors. He wants to work hand in hand with Democrats and Republicans. We tried to reach out to Democrats and Republicans in developing this plan, and we've gotten a very positive response.

Yesterday the House Minority Whip, Newt Gingrich, said that our welfare reform plan was, "a step in the right direction." We've also gotten positive signs from other Republicans in the House, and you should have a copy of a bipartisan letter that was signed by the National Governors Association with the signature of Carroll Campbell, John Engler, as well as the leading Democrats on this issue -- Howard Dean and Tom Carper. And we hope that it remains a bipartisan debate. Work and responsibility aren't Republican values or Democratic values, they're American values. And we ought to work on them together.

There will undoubtedly be in the days to come reactions from the far extremes, but the vast majority of the American people are with us on this. And when as many Americans want something as badly as the people want welfare reform, sooner or later it's going to happen.

MORE

I'm sure you've got specific questions about the plan, and why don't we turn to them.

Q I wonder, on WORK -- first of all, is that an acronym or is that -- it's not. It's called the WORK -- all caps -- program.

SENIOR ADMINISTRATION OFFICIAL: It's a value.

Q Okay. On something about that, is that a registry of jobs? Is it a referral service? How is it going to work?

SENIOR ADMINISTRATION OFFICIAL: The way the system works is that people on welfare will be subject to a two-year time limit during which time they can get training, child care, and so on. At the end of the two years at the most, people will be required to move into work. Every effort will be made throughout the program to try to move them into the private sector, including up-front job search when they first come on the welfare rolls, and training that is connected to the job as much as possible. But if after two years they're still on welfare, then they'll be required to take a subsidized job either in the public sector or in community service.

SENIOR ADMINISTRATION OFFICIAL: Essentially after the two years, the money you would have spent on the welfare check plus some additional money for job development will be used to find jobs for people in a subsidized job when they've been unable to find an unsubsidized job. It may be subsidized private sector jobs. It may be working with local nonprofits, where you say, we'll pay the wages if you'll provide the supervision. It may be a job, say, with local government. So the idea is you take the money and you redirect it towards getting people work that they would --

Q At that point, there's no more AFDC, there's no more food stamps or the card or any of that? The benefits are gone at that point?

SENIOR ADMINISTRATION OFFICIAL: This is only affecting the AFDC check. The food stamp program, Medicaid coverage and so forth are still continuing.

Q What's the mechanism for verifying the different facets of this program, for verifying that people are indeed seeking jobs and not turning jobs down haphazardly, the

verification for the child support elements? Aren't you getting into a whole new bureaucracy or department here?

SENIOR ADMINISTRATION OFFICIAL: This program puts new challenges to local welfare agencies which are already in the business of making sure that people are eligible for the benefits that they receive. What we want to do, though, is change the culture of the welfare office from one which simply focuses on filling out forms and making sure you have documentation to one which helps you get into work.

Q Well, isn't that going to put a heck of a burden on the local welfare offices?

SENIOR ADMINISTRATION OFFICIAL: It's going to be a real challenge. And that's one of the reasons that we think a responsible phase-in of this program is so important, because local welfare offices are going to have a big job to do in getting ready to do this new program.

SENIOR ADMINISTRATION OFFICIAL: One other point is we are investing heavily in some new technology so that we'll be able to trace people as they move across states and make sure they pay their child support, so we'll be able to link quickly information about who's on welfare with information about who's taken jobs and what other benefits they're getting. So we're investing the technology that will make a lot of this more easy.

Q What assumptions have you made in order to produce your figures about what's going to happen in the year 2000? For example, how do you know in the year 2000 that so many will have found work and so many people will be in government-subsidized jobs, et cetera?

SENIOR ADMINISTRATION OFFICIAL: The question, for those of you here and back in Washington who couldn't hear it -- what assumptions have we made about impacts by the year 2000. Fortunately, there have been a variety of states that have been experimenting so far with a variety of work-welfare demonstrations. We have very reliable information about the impact of those programs, and what we've tried to do is be very conservative in terms of determining what the impact has been of past programs and use that in extrapolating what will happen in the future.

We also have very detailed information about how long people stay on welfare, how many move off quickly. Seventy percent, for example, move off within the first two years. Some

of them come back. So we've used that information about the current case load, about current programs, to project, again, as carefully and conservatively as we can about what will happen in the year 2000.

Q But you must have used some economic assumptions, too?

SENIOR ADMINISTRATION OFFICIAL: We basically have stayed with the current set of economic assumptions. We're assuming it, we're acknowledging the case load will continue to grow, other kinds of things. I think when CBO scores this, you'll discover that we've been fairly conservative.

Q Is there a point when that curve goes down?

SENIOR ADMINISTRATION OFFICIAL: I think that for purposes of our impacts numbers, we have, as my colleague said, used very conservative estimates and not tried to posit the kind of behavioral changes that we cannot demonstrate to CBO. So that we think that the reforms in our plan will actually have greater impact than what we've told you here today. But this is the most that we can take credit for under the scoring rules.

Q Let me repeat the question. Is there a point at which the curve will go down? Have you said that, or have you predicted that, or are you not predicting there will ever be any drop in --

SENIOR ADMINISTRATION OFFICIAL: Well, I think that depends on our success in addressing the factors that are making the caseload go up, including reducing the number of births outside marriage, which is the number-one factor that's driving the increase in the caseload.

Q I'm asking you to go beyond what the conditions are that would affect that, and tell me what your predicted outcome is. I think this lady's indicating -- she's nodding. Do you have an answer? You were nodding.

SENIOR ADMINISTRATION OFFICIAL: You have the numbers, don't you?

SENIOR ADMINISTRATION OFFICIAL: Again, we'll have to -- I'll have to look at the numbers. We have not -- we don't have a specific turning point or something like that.

Q -- that should do anything but level it off?

SENIOR ADMINISTRATION OFFICIAL: That's what we're looking for.

SENIOR ADMINISTRATION OFFICIAL: Enough said.

Q -- you're proposing to spend $1.2 billion over the five years on jobs. What happens if it turns out to be harder for people to get nonsubsidized jobs than you expect? Do you spend more? Do people not work? What happens with that?

SENIOR ADMINISTRATION OFFICIAL: The amount of money available for the jobs and work program will go up if unemployment is unexpectedly high either at the national level or in local labor markets.

SENIOR ADMINISTRATION OFFICIAL: But, so you understand, it's a capped entitlement. The amount of money available for the work program will be set at cap levels similar to the current jobs program, which we think will be plenty to meet the need.

Q I don't think I followed that entirely.

Q What if it's not plenty? What if people cannot find jobs, and you're up to the cap on your subsidy for jobs? Do they continue to receive cash benefits, or do you raise the amount you're spending on subsidized jobs?

SENIOR ADMINISTRATION OFFICIAL: We've tried to be very conservative. We really do think the money will be there. But the protection is clearly this: If you have played by the rules, if you've done everything we've asked of you, our expectation is that you can still support your family.

Q Can you answer our question, because we don't know what that means?

SENIOR ADMINISTRATION OFFICIAL: That means is, if you come to the end of the line and there isn't a job there for you, you can continue to receive benefits. But the key is, we're going to focus those work slots on the people as they hit the time limit. So we believe those work slots will be there.

Q Can I ask one other financing question? You have $1.5 billion that you project you're going to save from cutting rolls and reducing fraud. People have been trying to get fraud out of the welfare program for a number of years. What's the basis for that assumption?

SENIOR ADMINISTRATION OFFICIAL: The basis for our estimates on fraud, which are actually a small portion of that -- most of it comes from reduced caseloads -- have to do with the investments in automation that we are making. And again, we have experience from many states which have done computer matching, computer matching across state lines and so on. We have made very, very conservative estimates on this side, as well as on the caseload side.

Q Why do you think caseloads are going to go down?

SENIOR ADMINISTRATION OFFICIAL: Because, again, we have evidence from existing work-welfare programs that when you invest in people, when you give them an alternative, they actually go to work. And in addition, if we also do things like health reform, we've done the earned income tax credit -- you've seen the people upstairs -- there's just clear evidence that people want to leave welfare for work. And I think if we give them the opportunity, that will happen.

Q The presumption is that probably we're not going to have a bill passed this year. I think it's shared by certainly some folks in the administration and a lot of people in Congress. If that's the case, what are you planning for next year? And might you get a more richly funded program actually put in the budget for the coming second chance?

SENIOR ADMINISTRATION OFFICIAL: I think, as the President said, we believe that this issue could catch fire. There's strong bipartisan support for this concept. The kind of things that are left to argue about are relatively small -- the Mainstream Forum bill, which is the moderate Democratic bill; the House Republican bill, our bill are all substantially similar. We've got some differences over the financing. But the truth is that this -- this could catch fire, and if that happens that will be great.

Q And if it doesn't, will you come back with --

SENIOR ADMINISTRATION OFFICIAL: And if it doesn't, we will come back and come forward with a bill next year as well.

Q Are we going to see him increasingly talk about this teen pregnancy issue? Is this the start of some kind of a --

SENIOR ADMINISTRATION OFFICIAL: Yes, I think this issue is something that he feels very strongly about. It's not the first time he's talked about it. One of the most moving speeches he's given in the administration was when he went to Kramer High School in Washington. And it really is driving a lot of the other problems that we find ourselves having to deal with. And I think, again, it's an issue that hasn't gotten a lot of attention over the last 30 years. And it's something on which the two parties don't have to disagree.

THE PRESS: Thank you.

END **3:16 P.M. CDT**

THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release February 2, 1995

REMARKS BY THE PRESIDENT
AND DR. HENRY FOSTER, NOMINEE FOR U.S. SURGEON GENERAL

The Oval Office

2:10 P.M. EST

THE PRESIDENT: Thank you very much, Madam Secretary, and let me say it's a pleasure to have Mrs. Foster and Senator Frist, Congressman Clement here.

The Surgeon General of the United States has enormous responsibilities. As the public face of our public health service, he or she really is the people's doctor, the person responsible for promoting good health practices and alerting the nation when health threats exist.

To fill this post, I wanted someone who is both a top-flight medical professional and a strong leader and effective communicator. Dr. Henry Foster is such a person. And I am pleased today to announce my intention to nominate him as the Surgeon General of the United States.

He is widely respected in the world of medicine and science. After serving his country for two years as an Air Force medical officer, he became Chief of Obstetrics and Gynecology at Andrew Memorial Hospital at Tuskegee University.

For the past 21 years, he has worked at Meharry Medical College in Nashville, Tennessee. As the Dean of the School of Medicine and its acting president, he helped Meharry to lead the way to meeting the health needs of the poor and the underserved. At the moment, he is a visiting senior scholar at the Association of Academic Health Centers here in Washington.

In the communities he's served, Dr. Foster has won hearts and minds for his innovation and his dedication to saving the lives of young people and vulnerable people. He's received numerous honors for his work in obstetrics and dealing with sickle cell anemia and, very notably, in the prevention of teen pregnancy.

He has shown us how one person can make a difference. Eight years ago he developed and directed the "I Have a Future" program at Meharry to help stop teen pregnancy. It has been an unqualified success. Working with young people that others might think beyond help, he built up their self-esteem. He taught them job skills. He encouraged them to stay in school. Most important, he told them to be responsible for themselves. Thanks to Dr. Foster, these young people have a chance to live a good, full life.

I want Dr. Foster to use what he's learned to help America attack the epidemic of teen pregnancies and unmarried pregnancies. We know government can only do so much. So large a part of Dr. Foster's job obviously will be to use his enormous skills of persuasion to reach out to people in the private sector -- in the religious, education, entertainment, sports and other communities in this country.

MORE

As I said in the State of the Union, when I challenged all sectors of our society to help us deal with these problems that must be dealt with one by one, we have to have help everywhere. I am convinced Dr. Foster is the person to galvanize this help and lead this charge. We want everyone to do their part to find the solution to this problem.

I want Dr. Foster now to say a few words, but as I introduce him, I want to thank him for taking on a task in public service at a time when public service sometimes has prices that are clearer than rewards. I thank him for his willingness to serve, to try to make a difference in the health care of the people of this country, and especially to try to make a difference in the future of the people of this country.

I thank his friends and colleagues for supporting him, the marvelous letter we received from Donna Shalala's predecessor, Dr. Lou Sullivan, the letter we received from the head of the American Medical Association; and, of course, the support you have from your congressman, Bob Clement, and from Senator Frist who just told me that he was the first doctor elected to the United States Senate since before the Depression.

So I would say it is time. Now, I'm going to try to keep for feeling so poorly. I need his help in any way other than a legislative sense.

Dr. Foster, the podium is yours.

Dr. FOSTER: Thank you, Mr. President. Thank you very kindly.

First, I wish to express my appreciation to you, Mr. President, for the opportunity to work on behalf of the American people. In many ways, health care in America is a paradox. We hold some of the world's greatest expertise in health and health interventions. People come from around the globe to be the beneficiaries of this care. Yet, in terms of health care outcomes, we don't do nearly as well as we should as a nation.

In my view, you can judge the character of a nation by the manner in which it deals with its children and the elderly. There is nothing more stifling than a compromised beginning. We must assure healthier starts for our children.

Another of my special concerns is the epidemic of adolescent pregnancies. We have the highest teen pregnancy rate in the Western world; that is twice that of the next highest nation. Moreover, be assured, this is a problem that cuts across all socioeconomic strata. There are, however, demonstrated ways that this problem can be mitigated. It takes commitment and lots of hard work, but it can be done.

As you have heard, the "I Have a Future" program is making a difference in Nashville, because it has brought together a concerned community that's willing to put into the time and effort that it takes to treat the multiple problems and antecedents of teenage pregnancy.

As your Surgeon General, this will be among my highest priorities. I will also put tremendous emphasis on other pressing health issues for which prevention can be very effective -- such issues as AIDS and tobacco consumption, especially by our children.

In closing, let me say to you, President Clinton, Secretary Shalala, Assistant Secretary for Health Lee and all of those with whom I will be working, I know, that together we can demystify and confront the root causes of teen pregnancy, low

birthweight, illicit drug use and the myriad of other issues which we will grapple with in the coming years.

Lastly, I wish to say again, thanks to my wife, St. Clair, my daughter, Myrna and my son Wendell, who have supported me so stoutly in all of my professional and personal endeavors.

Thank you very much. (Applause.)

THE PRESIDENT: You just hit the high point. Now you have to answer questions. (Laughter.)

Q Dr. Foster, do you think that at the -- your programs about teen pregnancy in Nashville can be applied on a national scale?

DR. FOSTER: I certainly do, and there have been efforts already to replicate the program; there is no doubt about it. It can be --

Q I hear a lot about personal commitment, but I don't hear anything about official commitment.

Mr. President, does your plan to combat teen pregnancy carry any new money with it? How do you intend to do that, or is it going to be primarily by the private sector?

THE PRESIDENT: We have a whole plan we've been working on for months, and Dr. Foster and I are going to get together and go over the outlines that we had worked on before he agreed to come on, and we will finalize that. I expect we'll be announcing it sometime in the very near future, and we'll talk about then how we intend to do it.

Q Will it take more federal money?

THE PRESIDENT: Well, I think the main thing we have to do is to galvanize the resources that are there now, spend the money that's there now better, and get -- I have been led to believe by many people all across this country that there will be an enormous amount of support for this effort in the private sector if they have confidence that it's a serious, disciplined, organized effort that is likely to work.

I might let Dr. Foster say more about that.

DR. FOSTER: No, the only thing I would add that didn't come out -- we are going to also utilize greatly the volunteer efforts. There is an emerging middle and upper black class that's doing everything now to give back. This has only developed among African Americans since World War II. And I'm surely certain that the same sort of emergence is occurring with Hispanics and other ethnic groups in this country.

Q Mr. President, does he have same license to be as outspoken and blunt as Dr. Elders did, or some areas -- did you caution him that there are some areas that he shouldn't be talking about?

DR. FOSTER: No comment. (Laughter.)

THE PRESIDENT: I can't do better than that. (Laughter.)

Q Mr. President, some conservatives have already said that they plan to oppose your nomination because of Dr. Foster's support for distribution of contraceptive devices in public schools

and his stand on abortion. Do you anticipate a problem -- this confirmation?

THE PRESIDENT: No. I'll tell you, the policy of the administration is that we should have appropriate education policies in schools, that we should encourage abstinence among our young people, that the question of contraception is one that should be resolved at the local level involving all sectors of the local community. There is no national policy on that, and there will not be.

In terms of the other issues that could be raised, I am confident that thoughtful conservatives will have the same view of Dr. Foster as Senator Frist does when they have the same opportunity to review his whole record. I think that we got an endorsement from the head of the American Medical Association already and from President Bush's HHS Director, Dr. Sullivan, who went to medical school from Dr. Foster, and I think there will be many others coming forward. So I feel good about it.

Q Mr. President, the budget that is going to be released on Monday, are you calling for a smaller deficit decrease than you had originally hoped for?

THE PRESIDENT: A smaller deficit --

Q Are you efforts to decrease the deficit --

THE PRESIDENT: Our efforts to decrease the deficit -- let me say this -- I'm calling for twice as much in budget cuts as I am for the cost of the Middle Class Bill of Rights, the tax relief for the middle class. So my tax cuts are paid for, and there is further deficit reduction in our budget. And we will keep a tight rein on the budget deficit.

The one thing that we have no control over in the budget deficit is the impact of higher interest rates on the deficit. The American people should know that whenever interest rates are raised by the Fed, among other things the cost of carrying the nation's debt goes up. So we can't do anything about that. And in that sense, the deficit will not go down as much as I had hoped, because the interest rates have gone up. You can't overcompensate for that; there's nothing to be done about it.

But we're doing a better job in controlling inflation and health care than I thought we would a year or so ago -- the whole country is. I don't mean just the government; the people in health care and the people in business are working harder on it. We have a lot of budget cuts that are very important and significant in this budget, and I'm looking forward to working with Congress to see how we can do even better. And I think that I'm encouraged by what they said, that they want to pay for their tax cuts. So I think that this -- when I submit the budget, I think it'll be the beginning of a very positive thing; I don't have bad feelings about it.

Q What's your reaction to China saying that your human rights report is indiscreet and meddling in their own affairs?

THE PRESIDENT: Well, that's always been their view, and we disagree. I mean, we believe there are international standards for human rights. The Human Rights Assistant Secretary is charged by law with submitting a report every year. All he did was fulfill his legal responsibility to tell the truth as he saw it, and I support what he did. I think Mr. Shattuck's done a good job, and I think it's a very -- it's by far, by the way, the most comprehensive report ever filed by the State Department on human rights, and it covers far more than China. China was not singled out; we evaluated every country in every part of the globe with any issue in this regard.

THE WHITE HOUSE

WASHINGTON

May 20, 1993

MEMORANDUM FOR THE PRESIDENT

FROM: BILL GALSTON

SUBJ: ABORTION-RELATED ISSUES

Action-forcing Events

During the next few months, you will face a long list of decisions concerning abortion and abortion-related issues. Many of these decisions relate to federal funding, an issue that arises in at least half a dozen appropriations bills (see Tab A). Chairman Natcher has requested guidance from the White House concerning these bills by early next week. Other key decisions involve the Freedom of Choice Act, the content of the health care basic benefits package, and the Supreme Court nomination.

Many of the appropriations issues are likely to be narrowed, or eliminated altogether, when health care reform is enacted. Nonetheless, they must be addressed as freestanding issues this year in the context of the annual appropriations process.

In recent weeks, pressures to clarify our substantive positions and strategic intentions concerning abortion-related questions have been steadily intensifying. In response, the Domestic Policy Council has brought together an informal working group representing numerous departments within the White House as well as HHS and OMB. The members of this group include Ricki Seidman (Communications), Melanne Verveer (Office of the First Lady), Charlotte Hayes (Office of the Vice President), Doris Matsui (Public Liaison), Christine Varney (Cabinet Affairs), Susan Brophy (Legislative Affairs), Joan Baggett (Political Affairs), Carol Rasco (Domestic Policy Council), Steve Neuwirth (Counsel's Office), Jerry Klepner (HHS), Harriet Rabb (HHS), and Nancy-Ann Min (OMB). This memorandum--the first of a series--contains background information on key issues as well as recommendations and options for your consideration.

Political Context

Within your administration, there is a broad consensus that while we should deal with choice issues in a principled and consistent manner, we must make every reasonable effort to lower their public profile for the remainder of this year. There are two principal justifications for this view.

First, it is essential, so far as possible, to keep focused on the economic plan until it has made it through the Congress. The last thing we need is an ongoing heated controversy that divides our energies and diverts the public's attention while reinforcing their view that we're not spending enough time on the economy.

Second, it is essential to regain our balance on cultural matters. During your campaign, you reassured the American people that you identified with mainstream/heartland values, but the first four months of the administration have sown some doubts on that score. There may be worse to come. We face the possibility of a summer in which the political dialogue is largely framed by issues such as gays in the military, political correctness on campus, quotas, and reproductive services contained within a health care proposal. For this reason, while the administration should remain true to its principles, we should not go out of our way to emphasize issues that reinforce the impression that we are somehow outside the cultural mainstream.

In this connection, it is worth noting that the people now distinguish fairly sharply between choice, which they support within broad limits, and public funding, which they are much less likely to support. Even when our position on public funding is carefully framed, we are sure to encounter substantial difficulties in forging sustainable majorities in the Congress and in the court of public opinion.

An Easy Case: Federal Employee Health Benefit (FEHB) Plans

Under current law, FEHB plans (affecting federal employees and dependents) may not cover abortions unless the life of the mother is in danger. The DPC working group recommends that this restriction be eliminated. The result would be that FEHB plans would be <u>allowed</u> but not <u>required</u> to cover a wider range of abortion services. In most circumstances, federal employees would be able to choose among several plans with varying levels of coverage.

Decision on FEHB Recommendation

_____ Accept _____ Reject _____ Discuss

A Harder Case: The Hyde Amendment

A. Substantive Issues

Your campaign made a determined effort to subsume federal funding issues under the rubric of national health care reform. You recognized, however, that they would persist as free-standing issues until the enactment of that reform. You now face the question of how to deal with the Hyde amendment.

During the campaign you opposed laws that prohibit federal funding for abortion. At the same time, you favored substantial leeway for the states to chart their own course. That is why your proposed budget simultaneously deletes the Hyde amendment and declares that "the Administration will work with the Congress to facilitate an approach that is compatible with both Federal and State law."

The difficulty is that these two bodies of law are frequently incompatible. For example, Medicaid requires states to provide all "medically necessary" services to eligible beneficiaries. Simply removing the Hyde amendment from federal legislation would almost certainly compel many states to fund abortions that they now exclude through either statutory or (as in the case of Arkansas) constitutional provisions. There is no way of fully harmonizing federal and state law as now written. The question, rather, is how they can be adjusted to reach mutual consistency.

Your DPC working group recommends that all states be required to fund Medicaid abortions in cases of rape, incest, and when the mother's life is endangered. Beyond these cases, each state should be left free to make its own determination.

The rationale is as follows: Even the Hyde amendment permitted abortions to relieve threats to mothers' lives, while rape and incest represent conditions for publicly funded abortion that enjoy substantial public support. A move to restore the original Hyde amendment would probably succeed in Congress if the alternative is simple deletion; substitute language that includes rape and incest would offer a better chance of defeating Hyde. Our proposal would establish that language as a federal baseline while not tying the hands of the states (now numbering 15) that want to go farther.

Decision on Hyde Language

_____ Accept _____ Reject _____ Discuss

B. Strategic Issues

There are two options for reaching this language as a legislative result. The first is to take the lead--to announce our legislative objective promptly and forthrightly, starting with Chairman Natcher, and to deploy our resources on the Hill to reach that objective during the next two months. The second is simply to restate our commitment to deleting Hyde and to working with the Congress to craft more satisfactory language. Under the second option, we would in effect be asking the Congress to make the opening bid, and we would be prepared to intervene later with our language as an alternative to reinstating Hyde.

The advantage of the first option is that it allows you to demonstrate leadership by acting clearly and decisively in a hotly contested arena. The disadvantage is that it could offend nearly everyone, at least initially. In particular, it would dismay many of your pro-choice supporters by putting you in the position of sponsoring abortion coverage that is arguably narrower than the criterion of "medical necessity" built into the Medicaid statute.

An advantage of the second option is that it preserves your freedom of action to forge consensus over time. Another advantage is when you offer your substantive recommendation during the course of the Hyde debate, it might well be seen, not as selling out our pro-choice supporters, but rather as rescuing them from a straightforward reinstatement of the Hyde amendment. A disadvantage of this option is that it could be seen, and represented, as evasive and lacking in principled leadership.

The DPC working group recommends option two, with two conditions. First, we cannot say that we are working with the Congress unless we are actually doing so. To implement option two, we would have to enter substantive discussions on this matter with key congressional leaders--promptly.

Second, you would need a public articulation of your position that takes account of the undeniable difficulties and that you could sustain until the actual legislative resolution. We recommend the following as a response to questions:

"As I made clear in my budget proposal, I don't think the Hyde amendment should be reinstated. I've also stated that my administration is committed to working with the Congress to find an approach that respects both federal and state law. I'm well aware of the fact that these bodies of law aren't fully consistent, but I'm confident that we can work out a solution that both protects the principle of choice and respects the deep and legitimate differences that exist among the states as well as among individual citizens. Discussions to achieve this result are now underway."

Decision on Hyde Strategy

Option 1 _____ Option 2 _____ Discuss _____

Other Appropriations Issues

The remaining appropriation bills differ from Medicaid in that they do not raise federal-state issues. (Some, such as DC appropriations, now restrict the use of local as well as federal funds.) Otherwise, the substantive and strategic issues are very similar.

Our recommendation concerning these bills is that we declare our willingness to work with the Congress and that we adopt as our practical objective (1) the relaxation of restrictions on federal funding to include rape and incest as well as the life of the mother, and (2) where appropriate, local choice in determining the use of local funds.

Two forthcoming bills raise special issues. We have just been informed that the Department of Defense is prepared to include a repeal of the Hyde amendment in its Authorization Bill. We will work with them to ensure, so far as possible, that the language respects the particular circumstances and sensibilities of the military.

Funding for abortion in foreign aid programs also raises a distinctive issue. As you know, the People's Republic of China has come under persistent criticism for alleged use of involuntary sterilization and forced abortion as part of a population control strategy. Your budget proposal deletes language that forbids U.S. funding for overseas programs that provide abortions as an element of voluntary family planning. But the remaining language is unequivocal in its rejection of coercive measures. Public testimony by AID officials and others should be crystal-clear on this point. And if, as some have suggested, the U.N Population Fund is sufficiently disturbed by Chinese practices to consider withdrawing from that country altogether, we should be supportive of their decision to do so.

Freedom of Choice Act

As you know, the Freedom of Choice Act represents a major effort to codify the holding of Roe as interpreted prior to the Webster and Casey decisions. The Senate version of the bill has already been marked up by the full Labor and Human Resources Committee. It allows states to require parental involvement with minors' decisions and to decline to pay for the performance of abortions. It also includes a so-called "conscience clause" preventing states from imposing an obligation to perform abortions on individual doctors and institutions (such as Catholic hospitals) with principled objections to this practice. The House version of the bill, which was marked up and passed out this Wednesday, incorporates the conscience and parental involvement clauses but not the provision allowing states to decline to pay for the performance of abortions.

While these points are opposed by some advocacy groups, they are consistent with Roe and are supported by mainstream advocacy groups such as NARAL. (For additional details, see Tab B.)

During the campaign, you pledged to sign a Freedom of Choice Act along the lines of the bills reported out of the Senate and House committees. While there is a significant difference between the two versions, at this point the principal issue before us is one of timing and legislative strategy, not substance. Advocacy

groups who are longstanding supporters take the position that they refrained from bringing the bill to the floor last fall in deference to the campaign's request for delay. Now, they say, we owe it to them to intervene with the House and Senate leadership to move the bill quickly; the leadership is looking for a signal from the White House and is unlikely to move forward without one.

The counterargument runs as follows:

(1) We are already being criticized for an overly crowded agenda, and we don't need another big, controversial item that further diverts attention from the economic plan.

(2) You have already acted aggressively to further the pro-choice agenda, and you face a large number of abortion-related appropriations votes in the next few months. If you encourage a postponable abortion debate to surface during this period, it will rivet public attention on this issue and reinforce your emerging cultural disconnect with ethnic and other swing voters.

(3) We should focus our attention this summer on the unavoidable battle over the inclusion of reproductive services in the basic health benefits package.

(4) The principal reason why FOCA didn't come to the floor last year was that its backers didn't have the votes, and it's still not clear that they do. Speaker Foley has said that he will not bring the bill to the floor unless he is confident that it can pass without killer amendments. The number of close votes in the Judiciary Committee this Wednesday suggests that this is not yet the case and that more work needs to be done.

On balance, we believe that the arguments for delay are stronger than the arguments for moving forward at this time, and we so recommend. You should be aware, however, that many of your pro-choice supporters are likely to regard a decision not to proceed at this time as a deep disappointment--if not an outright betrayal. Should you choose to delay the bill significantly, they may go public with very vocal objections.

Decision on FOCA Strategy

Delay _____ Go Forward _____ Discuss _____

Attachment A

ABORTION-RELATED GENERAL PROVISIONS

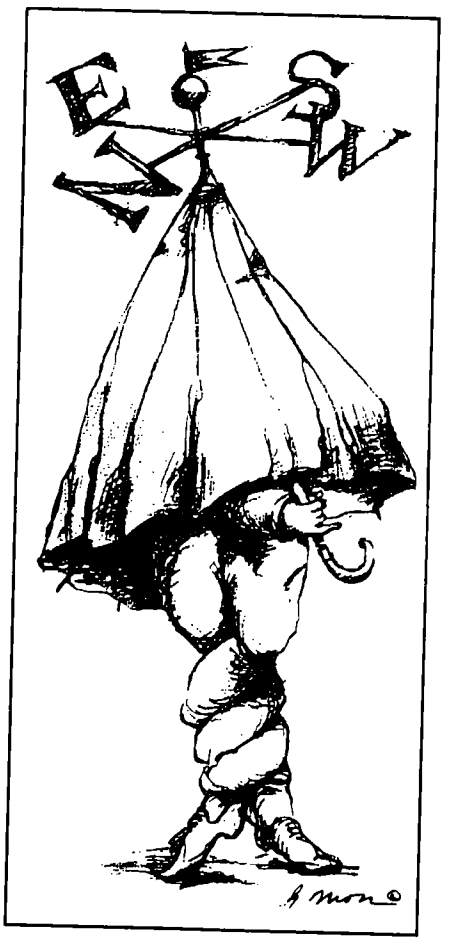
Appropriation Bill	Current Status	Affected Population
Labor-HHS General Provisions Sec. 103	Federal funding allowed only when the life of the mother is endangered if the fetus is carried to term.	Medicaid, Indian Health Service, and PHS grantee clients
D.C. Appropriation Bill	Funding allowed only when the life of the mother in endangered if the fetus is carried to term. (Includes local tax funds).	D.C. residents who would otherwise receive non-Medicaid funding for abortions
State-Commerce-Justice General Provisions Sec. 103, 104, 105	Federal funding allowed only when the life of the mother is endangered if the fetus is carried to term. Also provides that "no funds shall be used to require any person to perform or facilitate an abortion; " but permits funds for escorting to abortion services outside the Bureau of Prisons.	INS detainees, sentenced and pre-sentenced prisoners, transitionally housed asylees, special witnesses and families protected by DOJ, and inmates
Treasury-Post Office appropriation bill, Sec. 513, 514 of Title 5	FEHB plans may not cover abortions unless the mother is endangered if the fetus is carried to term.	Federal employees and dependents
DOD-United States Code, Sec. 1093 of Title 10,	Federal funding allowed only when the life of the mother is endangered if the fetus is carried to term.	Military personnel and dependents
Foreign Aid--H.R. 5368 Foreign Operations, PL 102-391, Sec 524 and 534 (Kemp-Kasten Amendment)	No funds shall be used for : 1) abortions, 2) to lobby for abortion, or 3) involuntary sterilization as a method of family planning or as incentive to undergo sterilization.	Peace Corps workers and countries receiving U.S. foreign assistance

WASHINGTON UPDATE

Policy and Politics in Brief

THOSE WINDS OF CHANGE ARE TRICKY

BY ELIZA NEWLIN CARNEY



Just as abortion-rights groups should be relishing the fact that there is at last a President who supports their agenda, they're threatened with the loss of one of their most prized goals: a law ensuring women's right to abortion.

The so-called Freedom of Choice Act, which essentially would codify the Supreme Court's 1973 *Roe v. Wade* ruling that legalized abortion, may never reach the floor this year, House Speaker Thomas S. Foley, D-Wash., said at an April 22 press conference. Foley cited lack of support for a rule that would limit amendments likely to weaken the bill.

ABORTION

The uncertain fate of the bill—which is scheduled to be taken up by the House Judiciary Committee later this month—points up deep divisions in Congress over how far the government should go in restricting abortion rights. It also signals a bitter struggle ahead over pending questions such as whether Congress should allow federal spending on abortions and whether abortion services should be included in a national health care plan.

"This is a very difficult issue still," said Rep. Don Edwards, D-Calif., chairman of the Judiciary Subcommittee on Civil and Constitutional Rights and the Freedom of Choice Act's primary sponsor in the House. "The general public is in favor of choice for women, but to some extent they are ambivalent about certain limitations that the states want to put on it."

In theory, the 103rd Congress is a golden opportunity for abortion-rights advocates who've been frustrated for 12 years by an anti-abortion White House. On his second day in office, President Clinton signed five executive orders rolling back a slew of federal abortion restrictions, including the "gag rule" banning abortion counseling in government-financed clinics.

Clinton's also promised to work with Congress to repeal a law that bars medicaid-financed abortions for poor women; appoint a *Roe v. Wade* supporter to the Supreme Court; and include abortion financing in his national health care program. Congress and the Administration have also proposed measures to improve clinic access and safety, spurred in part by the March murder of David Gunn, a physician who performed abortions at a Pensacola (Fla.) clinic.

But instead of gaining momentum, abortion-rights advocates find themselves suddenly on the defensive, losing money, membership and support on Capitol Hill. In part, their struggle reflects the pitfalls of being on the winning side. "With the victor goes the spoils," Kathryn Colbert, vice president of the Center for Reproductive Law and Policy in New York City, said wryly.

In part, groups like the National Abortion Rights Action League (NARAL) and the Planned Parenthood Federation of America Inc. are hurt by public sentiment that the abortion battle is over. "The greatest threat to choice is complacency," said Kate Michelman, president of NARAL, where donations from direct-mail fund raising are down a third from this time last year.

The abortion debate has also shifted ground from simple questions of legality to such thorny areas as whether taxpayers should foot the bill for abortions or whether parents must be notified before their underage daughters can obtain an abortion. Polls show that many voters who support abortion rights in general also favor some restrictions. A July CBS News-*New York Times* poll found that 56 per cent of respondents supported state laws limiting abortion's availability, and 52 per cent opposed using tax dollars to finance poor women's abortions.

On the Freedom of Choice Act, abortion-rights groups have been undermined by internal bickering. NARAL and Planned Parenthood lead a coalition that strongly backs both the House and Senate versions of the bill; the National Organization for Women (NOW), allied with several other women's and public-interest groups, opposes Senate provisions that would allow states to pass laws that require parental involvement and bar the use of state funds for abortions.

"Our position has always been that we wanted a bill that would not encourage the states to treat young women and poor women differently," said Ginny Montes, national secretary of NOW, which is joined by the American Civil Liberties Union and the Fund for the Feminist Majority in opposing the Senate bill.

But the legislation's supporters say it won't pass if language that allow states to restrict abortions is ruled out entirely. Edwards said he plans to introduce a measure clarifying that states may continue to require parental involvement, when the House Judiciary Committee marks up the bill. "All of our polls and whip checks indicate that the *Roe* provision on parental involvement must be in the bill, or we lose literally scores of votes," Edwards said.

And while abortion-rights advocates are fighting among themselves, the anti-abortion lobby is more organized than ever, presenting a unified front and flooding both chambers with mail. A well-organized postcard campaign by the Committee for a Human Life Amendment, a Washington lobby group backed by

Catholic dioceses nationwide, contributed to a serious Capitol Hill mail backlog, House post office director Michael Shinay said. The campaign generated about 1.5 million postcards on the Freedom of Choice Act, he estimated.

"All the pro-life forces are united on at least three priorities: defeating the Freedom of Choice Act, preserving the Hyde Amendment [a proviso named for its sponsor, Rep. Henry J. Hyde, R-Ill., that bans medicaid financing for poor women's abortions] and preventing Clinton from imposing abortion coverage through the national health plan," said Douglas Johnson, legislative director of the National Right to Life Committee. "We're guardedly optimistic that the President may fail on all three of those fronts."

Freedom of Choice Act backers counter that Clinton's support, along with that of a new generation of women in Congress, bodes well for the measure. Many of the freshman women made abortion rights a central campaign theme, Rep. Nita M. Lowey, D-N.Y., said.

"The increase in women Members automatically brings a new perspective and urgency to the issue," said Lowey, who heads the Pro-Choice Task Force of the Congressional Women's Caucus.

But some Members of Congress admitted that sharp disagreements over strategy persist. Some bill backers want a closed rule that would allow no amendments once the bill reaches the floor. (The purpose would be to prevent anti-abortion lawmakers from weakening the bill beyond recognition.) Others say that limited amendments should be allowed. With no agreement, the legislation may die quietly.

Abortion-rights advocates admit that the bill faces an uphill fight and are pushing for quick action by House and Senate leaders. Some fear that debate over the legislation and over the Hyde amendment will be heated, possibly weakening the Administration's resolve to include controversial abortion provisions in its health care package.

"In my view, we have a challenge ahead of us," said the Center for Reproductive Law and Policy's Colbert. "We need to convince legislators that these restrictions are very pernicious and that they ought not to be enacted at the state level. The problem is that, that's not a 30-second soundbite." ■

Galston-file

NEW MEXICO
RIGHT TO CHOOSE/
NARAL

Affiliate
National
Abortion Rights
Action League

P.O Box 14126
Albuquerque
NM 87191
505-294-0171

April 29, 1993

President Bill Clinton
White House
1600 Pennsylvania Ave., NW
Washington, DC 20500

Dear President Clinton,

On behalf of New Mexico Right to Choose/NARAL and its 2500 members across the state, we applaud your efforts to eliminate the discriminatory abortion funding provisions in the FY 1994 budget and urge your strong support and commitment to including abortion in the benefit package for national health care reform.

For more than a decade, a two-tiered system of reproductive health services has existed. We will work with you to ensure that the U.S. Congress does not add restrictions that will deny women an equal opportunity to exercise their constitutional right to choose whether or not to terminate a pregnancy. The past discriminatory abortion restrictions undermine the goals of the federal programs intended to provide assistance to poor women and their families. Together, these restrictions affect programs on which an estimated 50 million Americans rely for their health care or health insurance.

Over 32 million Americans are eligible for government-supported health care under the Medicaid program. Poor women have been the subject of discrimination under the Hyde Amendment. Prior to the Hyde Amendment, which cut off virtually all federal funds for abortion, state and federal funds paid for medically necessary abortions. Once the Hyde Amendment is removed, this equitable and just policy should be reinstated. It is crucial that the resumption of funding not be predicated on the state in which the Medicaid recipient lives.

In addition, we urge you to include abortion coverage in the benefits package for national health care reform. Excluding abortion from the benefits package under national health care reform would eliminate coverage for millions of women whose current health plans include coverage for abortion services. Excluding abortion would further stigmatize doctors who perform the procedure, intensify the current shortage of providers, and make it significantly more difficult -- and often impossible -- for women to find doctors to perform even privately funded abortions.

We pledge to work with you to ensure that funding for all reproductive health services is restored to women who rely on the federal government programs or federal health insurance for their medical care and to fight for the inclusion of abortion in the national health care reform package.

Sincerely,

Nancy Ellefson

Nancy Ellefson
Executive Director, New Mexico Right to Choose/NARAL

cc: Hillary Rodham Clinton
Ira Magaziner
Rahm Emanuel
Alexis Herman
Carol Rosco
Howard Pastor
Joycelyn Elders

NEW MEXICO
RIGHT TO CHOOSE/
NARAL

P.O. Box 14126
Albuquerque
NM 87191
505-294-0171

ALBUQUERQUE, NM 87101
1 PM
30 APR
1993

Carol Rosco
White House
1600 Pennsylvania Ave. NW
Washingtin, DC 20500

THE WHITE HOUSE

WASHINGTON

TO: Ricki Seidman
Melanne Verveer

FROM: Carol H. Rasco CHR

SUBJ: Abortion

DATE: April 14, 1993

I understand the two of you are co-chairing a subcommittee to examine the abortion/reproductive rights issue within the context of health care reform. I want to suggest that the scope be expanded somewhat or perhaps you are already including the issues I will outline here or at least we explore how to handle the matters outlined below. This all began to crystalize for me when I met last Friday with Marcia Greenberger and Judy Lichtman along with Bill Galston and Walter Dellinger.

Marcia and Judy basically brought up six issues on which they feel their organizations need guidance from this office: Hyde amendment; the effect of Hyde on federal employees health plan which comes up for a vote in the Post Office and Government Operations Committee at the end of May; health care reform; DC appropriation; Supreme Court nominee; and the Freedom of Choice Act which they would like to see underway very quickly. I believe Walter said he is preparing a memo to President on Freedom of Choice?

As part of the meeting they agreed to send to Bill Galston any information they can get on timelines of the various issues, analysis of funding with Freedom of Choice interactions; and the relationships between Medicaid law and state statutes, legislation, constitutions, etc. Additionally they have agreed to send a copy of a recent CQ article pertinent to these issues. Bill will share with all of us this information as it arrives.

It seems to me we need to look at all this comprehensively; do we need a meeting? have you already begun to cover this? suggestions? I do feel I need to get back to them with guidance from here...

Thanks.

cc: Bill Galston
Walter Dellinger
Bob Boorstein

- Hyde - coming up in May w/ HHS funds — Marcia Greenberger
- health care package — Judy Lichtman
- FOCA
- Supreme Court nomination
- federal employees
- overseas family planning

Option 1: cover reproductive health coverage with no restrictions / explicit statement

Option 2: medical necessity restriction / explicit coverage

Option 3: implicit coverage, e.g.
- * "non-discrimination clause"
- ▲ medically necessary medical services
- having interpreted to the statute

Option 4: exclude abortion from the comprehensive health package

Hyde amendment/draft 3
3/31/93 6:30PM

The Administration's Position

What Has the Administration Done?

The Toner article represents the Administration as seeking the "repeal" of the Hyde amendment, and our briefers have used this language in talking with the press. Unfortunately, it is not wholly accurate. The Hyde amendment dies at the end of each Congress and must be reintroduced and passed by the new Congress. Rather, the administration's 1994 budget does not affirmatively include the Hyde amendment as part of its submission.

This may seem like a small point, but it's important. It's one thing for the President to deliberately pick a fight with existing law, but that's not what he did. Instead, this committed pro-choice president refrained from putting his seal of approval on the Hyde amendment by resubmitting it to the Congress in his own name.

At the same time, the administration has committed itself to work with the Congress to facilitate an approach that respects both Federal and State law. [NB: The actual language of the budget talks about an approach that is "consistent with" both bodies of law--a logical impossibility, unfortunately. I'm told that the budget has already been printed and that this language cannot be changed.]

The legal consequences of simply not passing the Hyde amendment are not entirely clear. Some states would certainly enjoy increased flexibility to fund procedures that they are now prohibited from supporting through the Medicaid program.

Other states, however, would probably be required to fund some procedures defined as medically necessary by Medicare law and/or the courts that these states now refrain from funding. Because the President, who is strongly pro-choice, believes that state flexibility is an important goal, the administration will work with the Congress to find an approach that is consistent with that goal.

Some likely questions with proposed answers

What does the budget language mean substantively?

We are committed to working with the Congress and the states on this matter. That process hasn't even begun, and at this point there's no way of saying what it will produce.

Your budget document talks about an approach that is "consistent with both federal and state law." But don't they contradict one another? Isn't that the problem?

The answer is, we don't know yet. The existing case law on the scope of Medicaid requirements is not clear and definitive. That's one of the things we'll have to study. But the thrust of the budget language is clear: we're working for an approach that balances the legitimate interests and concerns reflected in both bodies of law.

Didn't you say yesterday that a straight repeal was all that is required and that there would be no need for further federal legislation?

The answer is, we don't know yet, but some additional language may be required. If so, we're committed to working with the Congress to draft it.

Your budget document doesn't include funding for the increased number of Medicaid abortions that just about everybody thinks would result without the Hyde amendment. Do you plan to request additional funds for this purpose?

It's by no means clear what the net funding implications of this change will be. The budget will stand as the President has presented it.

Will abortion or reproductive services be part of the minimum benefit package required under health care reform?

As we've said time and time again, we're not going to comment on the President's package until it's announced.

But doesn't this create a precedent for that package?

Look, right now we have laws--including Medicaid--on the books, and we have to work within that context. The overall health reform package will create a new context, and we'll face new issues.

Let me give you an example of what I mean. Last week HHS granted the state of Oregon a waiver for an experimental design of its Medicaid program, but the Oregon package doesn't set a binding precedent for our general health care program.

Does the President's budget proposal mean that he will accept the District of Columbia using its own funds for abortion?

We have no decision or announcement on that yet. But let me repeat, the President believes that local flexibility is an important objective.

TALKING POINTS ON REPEAL OF BAN ON FEHB COVERAGE OF ABORTION

I. CURRENT LAW

The Treasury/Postal Appropriations bill for the current fiscal year provides that "no funds appropriated by this Act shall be available for an abortion, or the administrative expenses in connection with any health plan under the Federal employees health benefit program which provides any benefits or coverage for abortions... [except] where the life of the mother would be endangered if the fetus were carried to term."

This provision has prevented federally employed women, and dependents of federal employees, from obtaining abortions under their Federal health insurance plans.

II. HISTORY

The restriction was established in 1982 after a court battle over Reagan Administration attempts to do this administratively. Previously, most FEHB plans (not all) covered abortion.

III. BUDGET PROPOSAL

As with the Hyde amendment, the FY 1994 President's budget does not propose continuation of this restriction. It indicates that the Administration will work with the Congress to facilitate an approach that is consistent with both Federal and state law.

IV. FAIRNESS

Many private health care plans cover abortion services as part of their coverage of reproductive health services generally. Coverage varies widely, and we don't have enough information at this time to be able to characterize the proportion of those which do. We hope to get more information on this.

V. PROCESS

The Office of Personnel Management sent out its annual call letter on 3/31/93 to health insurance plans asking them to submit proposals for 1994 coverage, rates, etc. The letter neither requires plans to provide abortion benefits nor precludes them from doing so. Those who wish to provide abortion benefits will probably submit proposals with and without abortion. If the restriction is not continued, OPM would permit but not require plans to offer these benefits beginning with the 1994 contract (calendar) year. Federal employees will thus have the option of choosing (and paying for) a health benefits plan which covers abortion.

VI. COST

There are no reliable cost figures. Employees currently contribute about 28% of premium costs, while the Federal government contributes the remainder, but it's difficult to determine how insurance carriers would price it.

VII. HEALTH CARE REFORM

No decisions have been made regarding the services to be included in the President's health care reform proposal.

HHS
Section 203

(R)

General and special funds—Continued

POLICY RESEARCH—Continued

This activity supports research to develop policy initiatives and improve existing HHS programs.

Object Classification (in thousands of dollars)

Identification code 75-0122-0-1-609		1992 actual	1993 est.	1994 est.
	Direct obligations:			
	Personnel compensation:			
11.1	Full-time permanent	497	584	625
11.3	Other than full-time permanent	7	.....	1,000
11.5	Other personnel compensation	8	.....	25
11.8	Special personal services payments	.....	.....	324
11.9	Total personnel compensation	512	584	1,974
12.1	Civilian personnel benefits	142	147	445
21.0	Travel and transportation of persons	34	80	115
22.0	Transportation of things	.....	1	3
24.0	Printing and reproduction	44	50	80
25.2	Other services	445	750	5,113
26.0	Supplies and materials	37	30	50
31.0	Equipment	32	30	110
41.0	Grants, subsidies, and contributions	3,762	6,375	7,978
99.0	Subtotal, direct obligations	5,008	8,047	15,868
99.0	Reimbursable obligations	5,395	4,550	4,550
99.9	Total obligations	10,403	12,597	20,418

Personnel Summary

Identification code 75-0122-0-1-609		1992 actual	1993 est.	1994 est.
1001	Total compensable workyears: Full-time equivalent employment	9	13	13

Intragovernmental funds:

WORKING CAPITAL FUND

Program and Financing (in thousands of dollars)

Identification code 75-4503-0-4-506		1992 actual	1993 est.	1994 est.
	Program by activities:			
00.01	Operating expenses	88,463	110,676	109,731
00.02	Capital investment	1,704	3,447	5,136
10.00	Total obligations	90,167	114,123	114,867
	Financing:			
21.90	Unobligated balance available, start of year: Fund balance	−17,025	−24,165	−17,999
24.90	Unobligated balance available, end of year: Fund balance	24,165	17,999	15,142
68.00	**Budget authority (gross): Spending authority from offsetting collections**	**97,307**	**107,957**	**112,010**
	Relation of obligations to outlays:			
71.00	Total obligations	90,167	114,123	114,867
72.90	Obligated balance, start of year: Fund balance	5,748	5,340	5,340
74.90	Obligated balance, end of year: Fund balance	−5,340	−5,340	−5,340
87.00	Outlays (gross)	90,575	114,123	114,867
	Adjustments to budget authority and outlays:			
88.00	Deductions for offsetting collections: Federal funds	−97,307	−107,957	−112,010
89.00	Budget authority (net)	.....	.....	.....
90.00	Outlays (net)	−6,732	6,166	2,857

The Working Capital Fund (WCF) provides common centralized services to components of HHS.

As depreciation is an expense, not an obligation, the schedules for the WCF exclude expenses for depreciation. Annual WCF depreciation amounts are: FY 1992, $2,311,000; FY 1993, $2,081,000; FY 1994, $2,279,000.

Object Classification (in thousands of dollars)

Identification code 75-4503-0-4-506		1992 actual	1993 est.	1994 est.
	Personnel compensation:			
11.1	Full-time permanent	46,104	51,960	51,818
11.3	Other than full-time permanent	2,047	2,307	2,287
11.5	Other personnel compensation	1,022	1,152	1,141
11.8	Special personal services payments	273	308	326
11.9	Total personnel compensation	49,446	55,727	55,572
12.1	Civilian personnel benefits	8,446	9,054	9,773
13.0	Benefits for former personnel	184	177	170
21.0	Travel and transportation of persons	700	984	1,051
22.0	Transportation of things	187	211	173
23.1	Rental payments to GSA	8,753	10,408	10,754
23.3	Communications, utilities, and miscellaneous charges	3,115	6,736	9,234
24.0	Printing and reproduction	446	1,883	1,835
25.1	Consulting services	1,271	1,343	1
25.2	Other services	13,769	20,611	17,292
26.0	Supplies and materials	932	1,020	1,131
31.0	Equipment	2,918	5,969	5
99.9	Total obligations	90,167	114,123	114,867

Personnel Summary

Identification code 75-4503-0-4-506		1992 actual	1993 est.	1994 est.
5001	Total compensable workyears: Full-time equivalent employment	1,254	1,172	1,112

GENERAL PROVISIONS

The following sections are proposed for deletion and do not appear below:

Sec. 202. ..... Provision made permanent through prior-year Appropriations Act.

Sec. 203. ..... Provision relating to use of funds for abortions.[1]

Sec. 204. ..... Provision made permanent through prior-year Appropriations Act.

Sec. 206. ..... Provision made permanent through prior-year Appropriations Act.

Sec. 207. ..... Provision made permanent through prior-year Appropriations Act.

Sec. 208. ..... Provision made permanent through prior-year Appropriations Act.

Sec. 210. ..... Provision made permanent through prior-year Appropriations Act.

Sec. 211. ..... Provision made permanent through prior-year Appropriations Act.

Sec. 213. ..... Provision made permanent through prior-year Appropriations Act.

Sec. 214. ..... Provision made permanent through prior-year Appropriations Act.

Sec. 215. ..... A one-time provision limiting funding for Peer Review Organizations.

Sec. 216. ..... A one-time provision limiting funding for the Department's salaries and expenses.

SEC. 201. None of the funds made available by this Act for the National Institutes of Health, except for those appropriated to the "Office of the Director", may be used to provide forward funding or multiyear funding of research project grants except in those where the Director of the National Institutes of Health has determined that such funding is specifically required because of the scientific requirements of a particular research project grant[.]: *Provided, That this provision does not apply to $200,000,000 for breast cancer research activities.*

SEC. [205.] *202.* Funds appropriated in this title shall be available for not to exceed $37,000 for official reception and representation expenses when specifically approved by the Secretary.

SEC. [209.] *203.* The Secretary shall make available through assignment not more than 60 employees of the Public Health Service to assist in child survival activities and to work in AIDS programs through and with funds provided by the Agency for International

[1] The Administration will work with the Congress to facilitate an approach that is consistent with both Federal and State law.

CLINTON WOULD END BAN ON AID TO POOR SEEKING ABORTIONS

CONGRESS TO GET REQUEST

Proposal to Lift Restrictions Under Medicaid Will Open New Season of Struggle

By ROBIN TONER
Special to The New York Times

A-1

WASHINGTON, March 29 — Opening a new season of struggle over Federal abortion policy, the Clinton Administration plans to ask Congress to lift the nearly total ban on Federal financing of abortions for poor women, White House officials say.

The move will come in President Clinton's detailed Federal budget request, expected to be made public the week of April 4, said George Stephanopoulos, the chief White House spokesman. How Congress will respond and how hard Mr. Clinton will push the issue are still unclear, say lawmakers and legislative analysts on Capitol Hill. Opponents of abortion say they believe they have a good chance of blocking the President.

For all the uncertainties, Mr. Clinton's decision to seek the repeal of the 16-year-old Federal prohibition, which is known as the Hyde Amendment and applies to the Medicaid program for poor people, is a sign of the sea change in abortion politics. Both sides of the abortion issue predict that the next six months will test old positions, long-standing alliances and the power of the abortion-rights movement under a friendly Administration.

Readying for a Fight

This struggle will play out not only in the spending and budget bills that make their way through Congress this spring and summer but also in the renewed effort to win passage of the Freedom of Choice Act, which is intended to limit the restrictions that states can impose on abortion.

Perhaps most important, both sides of the abortion issue are preparing for a fight over the huge health-care program now being drafted by the White House task force headed by Hillary Rodham Clinton. Among the proposals being considered by the task force is one that, over the long term, would dismantle the Medicaid program entirely and integrate the poor into the same network of doctors, hospitals and private insurance companies that would serve the more affluent.

Whether or not such a proposal is adopted, abortion-rights supporters say, reproductive-health and abortion services must be included in the basic benefits package expected to be guaranteed all Americans under the final plan. "For too long, women's reproductive health has been left to the vagaries of politics," said Kate Michelman, president of the National Abortion Rights Action League, who met with

Continued on Page A21, Column 5

On U.S. Aid to Poor for Abortions

Continued From Page A1

top White House officials on the issue last week.

The primary goal in all these struggles, Ms. Michelman added, is "to have government return to a position of neutrality in the reproductive decisions of women."

Opponents of abortion are just as adamant about preventing abortion from becoming a routine medical service in the eyes of the law. Douglas Johnson, legislative director for the National Right to Life Committee, said of the abortion-rights forces, "They want to obliterate any distinction between abortion and contraception."

A Campaign Promise

Mr. Clinton's decision to seek repeal of the Hyde Amendment is the fulfillment of a campaign promise that highlighted the gulf between him and President George Bush on abortion. The amendment, named for its sponsor, Representative Henry J. Hyde of Illinois, was approved by Congress in 1976 and endured, in one version or another, with the backing of Presidents Jimmy Carter, Ronald Reagan and Bush. It applies to the Medicaid program, the basic health-care program for poor people, which is financed jointly by the Federal Government and the states.

At present, the Hyde Amendment prohibits the use of any Federal money for abortions for poor women unless a woman's life is endangered from continued pregnancy. According to the abortion-rights league, eight states use their own money to provide abortions to poor women in additional circumstances, like cases of rape and incest or fetal deformity. Twelve other states pay for most or all abortions, the league says.

The Hyde Amendment has been the subject of repeated skirmishes over the years, with abortion-rights supporters in Congress trying several times to allow Federal financing of abortions in cases of rape and incest. But Mr. Bush consistently vetoed such efforts; his staunch opposition to abortion meant that abortion-rights supporters needed a veto-proof majority of two-thirds in each house of Congress, exceedingly hard to get.

Mr. Stephanopoulos provided no details of Mr. Clinton's strategy on repealing the Hyde Amendment. The spokesman simply said, "The President called for the repeal of the Hyde Amendment during the campaign, and that will be his position." The amendment "will not be part of his budget submission," he said.

Trying for Flexibility

Mr. Stephanopoulos cast the decision as an effort to give states greater flexibility. "The Republicans have shown consistently in their platform that they weren't prepared to allow for abortions even in cases of rape and incest," he said. "This proposal simply tries to preserve the flexibility of the states to make the tough decisions they must make."

An Administration official, speaking on condition that he not be identified, said the legal implications of lifting the Hyde Amendment were unclear. Specifically, he said, there is much disagreement over how this move will affect states that have banned the use of their money for abortions and therefore do not include them in their Medicaid programs. The budget submission will "include language that says the Administration will work with Congress to facilitate an approach that is consistent with both Federal and state law," the official said.

But opponents of abortion asserted that repealing the Hyde Amendment would, sooner or later, force states to finance virtually all abortions for poor women. "I'd welcome the debate," said Mr. Johnson, of the National Right to Life Committee. "The American public is strongly against the Federal funding of abortion on demand."

The political support for taxpayer financing of abortions is not, in fact, so great as the support for the constitutional right to choose abortion. The last time a New York Times/CBS News Poll asked about this issue, in July 1992, 52 percent said they opposed "using tax dollars to pay for abortions for women who cannot afford to pay for them," while 42 percent favored it. In the same poll, 41 percent said abortion should be available to those who want it; another 39 percent said it should be available, but with stricter limits than now exist, and 18 percent said it should not be permitted at all.

Ambivalence in Congress

That translates into a similar ambivalence in Congress. Mr. Hyde, a Republican, said in an interview last week, "There's an initial impulse to say the pro-abortion sentiment seems to be on a roll right now, but there are a lot of members who are, in their words, pro-choice but nonetheless oppose the use of taxpayer-funded abortions."

Mr. Stephanopoulos said it was too soon to assess the chances of a repeal.

Representative Vic Fazio, a California Democrat who has long been active on abortion rights, said Congress would be "charting new territory" on the Hyde Amendment and other abortion issues. A friendly White House, and new members who are increasingly sympathetic to abortion rights, make past political calculations obsolete, Mr. Fazio and others say.

The most important test, Mr. Fazio said, could be over the inclusion of abortion services in the national health-care plan. Mr. Stephanopoulos, in an interview on Friday, refused to discuss what services might or might not be in the basic benefits plan.

"We've had a consistent position of not commenting on the health-care package until it's announced, and we will abide by it," the spokesman said. But Mr. Clinton explicitly promised during the campaign, as did his party's platform, to cover abortion in any national health plan.

What Kind of Priority?

Abortion-rights supporters say they fully expect Mr. Clinton to live up to his promise and cover abortion services.

But some, speaking on condition that they not be identified, also say they worry about what kind of priority Mr. Clinton will put on the issue. While abortion-rights supporters consider Mrs. Clinton an important ally, they fear that the White House will ultimately be unwilling to have health-care reform held hostage to the abortion issue.

Moreover, Mr. Clinton will be asking much from this current Congress, including the more conservative members who might have the most difficulty with votes on abortion.

States Financing Abortions

With restrictions on the use of Federal money to pay for abortions, the following 12 states use state funds to finance abortion for the poor in all or most cases.

Alaska	New York
California	North Carolina
Connecticut	Oregon
Hawaii	Vermont
Massachusetts	Washington
New Jersey	West Virginia

Source: National Abortion Rights Action League

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And The Winners Are...Senate To Debate Spending Plan Cuts Again

(Los Angeles) -- After seven nominations, Al Pacino has broken his winless streak with a best actor Oscar for ''Scent of a Woman.'' Other award winners include Clint Eastwood's ''Unforgiven'' for best picture and director; Emma Thompson for best actress in ''Howards End;'' Marisa Tomei (toh-may') for supporting actress in ''My Cousin Vinny'' and Gene Hackman for supporting actor in ''Unforgiven.''

(Washington) -- The Senate plans to vote again on a Republican amendment that cuts more than 100 (M) million dollars from President Clinton's jobs bill. Democratic leaders are hoping that seven lawmakers, who didn't vote last night, will oppose the plan today.

(Washington) -- President Clinton says he'll do his best to try to convince people that more aid to Russia is in the best interests of Americans. The administration makes its case to a Senate subcommittee this morning.

(Jerusalem) -- More violence in Israel is prompting the government to close off the Occupied West Bank, keeping Palestinians out of Israel. The action follows the shooting deaths of two Israeli police officers, which authorities blame on Palestinians.

(Sarajevo, Bosnia-Herzegovina) -- In the first war crimes trial for the Bosnian war, two Serb soldiers have been convicted and are being sentenced to death. One of the soldiers confessed to killing 30 war prisoners and civilians, including a dozen young women whom he had first raped.

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