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Commission language

drafted by

Chris Jennings

From M. Yager

domestic
violence

extreme
personal
issues

FAX TRANSMISSION

DEPARTMENT OF HEALTH & HUMAN SERVICES

ASSISTANT SECRETARY FOR PLANNING AND EVALUATION

OFFICE OF HUMAN SERVICES POLICY

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To: *Terry Edmunds*

Date: *6-17-96*

Fax #: *456-5709*

Pages: *2*

From: *Paul Legler*

Subject:

COMMENTS:

DRAFT**STATES THAT HAVE ADOPTED NEW HIRE REPORTING PROGRAMS**

Alaska

Arizona

California

Connecticut

Florida

Georgia

Hawaii

Iowa

Kentucky

Maine

Maryland

Massachusetts

Minnesota

Missouri

New York

Ohio

Oklahoma

Oregon

South Carolina

Tennessee

Texas

Vermont

Virginia

Washington

West Virginia

DRAFT

NEW HIRE REPORTING PROGRAMS SHOW SUCCESS

Twenty-five states currently have new hire programs in place. New hire programs enable states to locate delinquent parents very quickly through the receipt of employment information. These programs have lead to striking improvements in locating parents who owe support and to dramatic increases in collections. The following are examples of state programs that are operating across the country:

Florida started its new hire program in January, 1995. In 1995, Florida's new hire reporting program resulted in over 8,000 matches for outstanding child support cases; the annual amount of support owed under these cases is \$15.2 million. An additional 50,000 matches were made for other child support-related activities, such as paternity establishment.

Iowa implemented its new hire program in January, 1994. The state estimates that it has added \$5 million to its collections for 1995 as a result of new hire reporting.

Massachusetts began its program in March, 1993. Since March, 1993, the state has matched new hire information with 137,329 non-paying parents. The state estimates that in 1995, new hire information yielded \$15.4 million in increased child support, saving an estimated \$21.6 million from welfare case closures.

Missouri began its new hire program in August, 1994. Missouri estimates that the program collected \$12 million in 1995. Over 10 percent of the 721,000 new hires reported in 1995 owed child support or were wanted in paternity establishment cases.

New York implemented its new hire program in April 1996. Already, the state has processed 404,000 new hire reports (10,000-12,000 a day) with about a 7 percent match rate. New York estimates that it will collect \$14-\$15 million annually as a result of the program.

Virginia implemented its program in July, 1993. As of December 1995, the state had matched almost 200,000 child support cases through its new hire program and estimates that total collections from these cases are in excess of \$20 million. Of this, \$7.2 million was used for welfare payment savings. In fact, the state estimates that total savings to the AFDC, Medicaid and Food Stamp programs from the new hire program equal over \$1.2 million in monthly benefits.

Washington implemented its new hire program on July 1, 1990. New hire reporting is documented as the state's most cost effective child support enforcement tool. For every dollar the state spends on its new hire program, it gains approximately \$20 in child support collections. Washington collected \$7.8 million in the first 18 months of its program, half of which was used to decrease welfare payments and save taxpayers money.

**PRESIDENT WILLIAM J. CLINTON
AMERICAN NURSES ASSOCIATION
WASHINGTON, DC
JUNE 18, 1996**

Acknowledgments: Ginna Trotter Betts for her gracious introduction and for her four years as national president of ANA. She has been a great friend to both the Vice President and me. And hers has been a leading voice in our common struggle to enact meaningful health care reform. As she moves on to other ventures, I want to join all of you in thanking her for her brilliant leadership, and in wishing her well.

I am honored to join you in this 100th anniversary celebration. Today, I ask all Americans to join me in saluting you for a century of service, leadership and advocacy for quality health care. Building a healthy nation starts with building healthy people. That has always been your mission. It is generally recognized that, for all its shortcomings, America has the finest health care system in the world -- the best doctors, the best hospitals, the best technology. But none of this would matter without you, America's nurses -- the heart and soul of our nation's health care system.

I know the hard work and sacrifice that goes into being a good nurse. As most of you know, for more than 30 years, my mother worked as a nurse anesthetist. I want to thank you again for honoring her memory in 1994 with a special award in her name. I have vivid memories of her getting up in the middle of the night to be at work by 7 a.m. She was serious about the life and death nature of her work. She was the consummate professional. But she understood that healing is about more than medicine and technology. It is also about caring. So she always added a dose of compassion -- a kind word, a gentle touch, a smile -- to put her patients at ease and to reassure them that everything would be alright. That is what good nursing is all about. That is what all of you do everyday.

Excellence and compassion are also the hallmarks of this organization. Long before health care reform became the issue it is today, you stood with us to fight for better access and quality of care for millions of Americans. And you have also stood with us in other fights -- the nomination of Dr. Foster, our budget battles, and our struggles to protect Medicare and Medicaid.

You have also stood tall for the rights and dignity of nurses. You have led the fight for collective bargaining, better wages, better working conditions, better training -- not only for your members, but for the millions and millions of nurses in this country who benefit from your strong and principled leadership. We all owe you a great debt of gratitude.

But today, I want to talk to you about how all Americans can join you in the most important work you do -- strengthening families and communities. My administration is committed to expanding opportunity for every citizen who is willing to take responsibility for making the most of their lives. The key to doing that is strengthening the American family.

You see the need for this every day. A big part of your job is to impress upon your patients the need for them to take more personal responsibility for their health and for the health of their families. All the doctors and nurses in the world will not save a person who refuses to eat right, get the proper exercise, get regular check-ups or refrain from smoking or excessive drinking. But for those who do, the rewards are real.

But you cannot do this job alone. Government also has a role to play. As you know, for more than 30 years Medicaid has also played a critical role in strengthening families. In 1965, Americans reached common ground around the belief that quality medical care should be guaranteed to our most vulnerable citizens -- poor children, pregnant women, older Americans and the disabled. But last year, the Republican Congress sent me legislation that would have resulted in the denial of care for millions of these people. You said no. I said no. And the American people said no. Leave Medicaid alone. I vetoed that legislation. And, let me assure you, if they send it to me again in the same form, I will veto it again.

We also know that one of the most important things we can do right now to strengthen families and expand access to health care in this country is to pass the Kassebaum-Kennedy insurance reform bill. No worker in this country should have to worry that he or she will lose their health care if they lose their job or change jobs. And no one should be denied care simply because they have a pre-existing condition. When you go to a patient's bedside you ask, "Where does it hurt? How can I help?" You don't ask whether this is pre-existing condition you are looking at. So I ask you to join me in calling on the Congress to pass this important legislation now.

But, you and I know that, where children are concerned, the most important building block of strong families is parents who love their children and take responsibility for their care. Parents have the responsibility for pre-natal care, for making sure their newborns get the pediatric attention and immunizations they need. And for nourishing them with the love and financial support that is vital to their growth.

Parental responsibility has also been the driving principle behind our efforts to change our welfare system from one that fosters dependency to one that promotes work, family and independence. I am proud that, under my Administration, three out of four AFDC recipients -- more than 10 million people -- are now covered by state initiated reforms that we approved.

Just today, we approved a waiver for a welfare reform effort in New Hampshire, which combines strong work requirements with incentives to move people from welfare to work. This makes the 63rd waiver in 40 states since I took office. With our support, states are reforming welfare by requiring work, time-limits, making work pay, improving child support enforcement and encouraging parental responsibility. And I am doing everything I can to help this process. Last month, I took executive action to require minor mothers to stay in school and turn their lives around in order to receive assistance. Today, 1.3 million fewer people are on welfare than when I took office. In addition, the food stamp rolls are

collections have reached a record high.

But we must do more, especially in the area of child support enforcement. Already, we have proposed and the Congress has adopted, a requirement for states to establish hospital-based paternity programs as a way to establish paternities early in life. Early data from 31 states indicates that more than 200,000 paternities were established through in-hospital paternity identification programs last year. Altogether, in 1995, our federal and state efforts resulted in the collection of a record \$11 billion from non-custodial parents, an increase of nearly 40 percent since 1992. We also increased paternity establishment 40 percent from 1992 to 1995. But we have to do more.

How many times have you seen a frightened young girl give birth to a baby alone in the hospital, with the father of the child no where to be found? How many times has the hospital and the government been left to pay the costs, not only for the delivery but for the continuing care of that child? That is wrong. It takes two people to bring a child into this world, and it takes two people to raise that child. That is why today, I am taking executive action to strengthen child support enforcement and promote parental responsibility.

While we continue to wait for the Congress to pass comprehensive welfare reform that promotes work and protects children, I am directing the Department of Health and Human Services to issue new regulations which will require all mothers who apply for welfare to provide the name of the father and other identifying information at the time they apply for assistance, before they can get welfare benefits. Exceptions will be made to protect women from domestic violence, or for other extreme personal circumstances. Welfare applicants must also be referred to the state child support agency within two days so that the agency can initiate a legal paternity action.

I am also announcing a new ^{currently national} pilot program to help states track parents who owe child support across state lines. Twenty-five states ^{new} currently require that when a person is hired for a job, a check is made to see if he owes child support. This ~~pilot~~ program will allow states to send that information to the federal office of child support to help in our interstate collection efforts.

Our system ought to say to mothers: help us identify and locate the father, or you cannot get welfare. And it should say to fathers -- ~~you must support your children, and we are going to do everything in our power to see that you do.~~ As I have said many times, ~~parents have the primary responsibility for raising children, not the government.~~

Our goal in all of this is to strengthen families, protect children, and demand more responsibility from both parents. These are the goals that you and most Americans are working hard every day to make real. I believe the federal government has a responsibility to support those efforts. Good health means not only what nurses and doctors can do for us, but what we can do together to raise healthy children and strong families. One of the best things we can do is to demand that fathers and mothers take an active role in nurturing and

Under this new program we will check that info against our national database to catch deadbeats who have crossed state lines

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involve interstate cases a parent who has moved across state lines many Parents who owe child supp.

too many ben pay for out the way to Today the best way to weasel out of paying child support is to move from job to job and from state to state. That must stop.

**PRESIDENT WILLIAM J. CLINTON
AMERICAN NURSES ASSOCIATION
WASHINGTON, DC
JUNE 18, 1996**

Acknowledgments: Ginna Trotter Betts for introduction -- she is leaving after four years as national president of ANA. She was a leading voice for health care reform.

I am honored to join you in this 100th anniversary celebration. Today, I ask all Americans to join me in saluting you for a century of service, leadership and advocacy for quality health care. Building a healthy nation starts with building healthy people. That has always been your mission. It is generally recognized that, for all its shortcomings, America has the finest health care system in the world -- the best doctors, the best hospitals, the best technology. But none of this would matter without you, America's nurses -- the heart and soul of our nation's health care system.

I know the hard work and sacrifice that goes into being a good nurse. As most of you know, for more than 30 years, my mother worked as a nurse anesthetist. I want to thank you again for honoring her memory in 1994 with a special award in her name. I have vivid memories of her getting up in the middle of the night to be at work by 7 a.m. She was serious about the life and death nature of her work. She was the consummate professional. But she understood that healing is about more than medicine and technology. It is also about caring. So she always added a dose of compassion -- a kind word, a gentle touch, a smile -- to put her patients at ease and to reassure them that everything would be alright. That is what good nursing is all about. That is what all of you do everyday.

What I learned from my mother and what America is learning from you are the basic values that make us strong. We know that the mission of this country must be to offer every American an opportunity and demand that every American take responsibility -- that is the basic bargain of our democracy. I think if we do that we can create a strong America that is rooted in strong communities and strong families. This is so important. Without strong families our children will not get the support and the guidance they need to take advantage of the vast opportunities of the 21st century. Without strong families, our communities will not produce the leadership needed to face the challenges of this new era.

For the past three-and-a-half years, we have worked hard to give people the tools they need to raise strong and healthy families. That is why we passed the Family and Medical Leave Act. That is why we have fought so hard to preserve the guarantee of health care for millions of Americans who depend on Medicaid. And that is why we are doing everything we can to enact the vital health insurance reforms that are at the heart of the Kassebaum-Kennedy bill. We have also been working to demand responsibility from every citizen. That means making sure every American does what it takes to make the most of his or her God given abilities. And it means making sure that every parent lives up to the obligation they owe to their children.

Today, I want to talk with you about how we can work together to build strong families and to guarantee that every child in this country has not only the health care they need, but also the parental support, from both mothers and fathers, that is critical to their well-being.

There is much that we can do as citizens, but government also has a role to play. As you know, for three decades, through the Medicaid program, we have had a national commitment that poor children, pregnant women, people with disabilities and older Americans will not be denied health care simply because they can't afford it. Now, under the Republican congressional plan, hundreds of thousands of our children with disabilities could lose their home care. Children that are seriously ill could lose some of their coverage from what is now available. This could amount to child neglect for a whole generation. That is why I vetoed this plan last year when the Republican Congress sent it to me. And let me assure you, if they send it to me again, I will veto it again.

We also know that one of the most important things we can do right now to strengthen families and expand access to health care in this country is to pass the Kassebaum-Kennedy insurance reform bill. No worker in this country should have to worry that he or she will lose their health care if they lose their job or change jobs. And no one should be denied care simply because they have a pre-existing condition. When you go to a patient's bedside you ask, "Where does it hurt? How can I help?" You don't ask whether this is pre-existing condition you are looking at. So I ask you to join me in calling on the Congress to pass this important legislation now.

But, you and I know that, where children are concerned, the most important building block of strong families is not government. It is not nurses and doctors. It is parents, mothers and fathers who love their children and take active responsibility for their care. It is parents who have the responsibility for pre-natal care, for making sure their newborns get the pediatric attention and immunizations they need. And for nourishing them with the love and financial support that is vital to their growth.

Parental responsibility has been the driving principle behind our efforts to fix our broken welfare system. I want welfare reform because our present system perpetuates a cycle of dependency and irresponsible behavior. Quite simply, the system is broken and we need to replace it with a one that promotes work, family and independence -- one that makes welfare a way up, not a way of life. I believe we have to require work, set strict time-limits, make work pay, improve child support enforcement, and demand parental responsibility while making sure children have the health care and child care they need. That is real welfare reform.

I have worked with Congress to make these important changes, but they have sent me bills that have been tough on kids and soft on work. But, we have not let this stop us. While Congress has not done its job, we are acting to support real welfare reform. I am proud that, under my Administration, three out of four AFDC recipients -- more than 10

million people -- are now covered by state initiated reforms that we approved.

Just today, we approved a waiver for a welfare reform effort in New Hampshire, which combines strong work requirements with incentives to move people from welfare to work. This makes the 63rd waiver in 40 states since I took office. With our support, states are getting the job done. And I am doing everything I can to help this process. Last month, I took executive action to require minor mothers to stay in school and turn their lives around in order to receive assistance. Today, 1.3 million fewer people are on welfare than when I took office. In addition, the food stamp rolls are down, the poverty rate is down, teen pregnancy rates are down, while work and training among welfare recipients are up and child support collections have reached a record high.

But we must do more to insist on parental responsibility. Our welfare reform proposals are about giving people opportunity and demanding responsibility in return. I reject the idea that this applies only to women. Every child has both a mother and a father. And for too long, we have let men off the hook. We must insist that they do their part to support the children they helped bring into this world.

How many times have you seen a frightened young girl give birth to a baby alone in the hospital, with the father of the child no where to be found? How many times has the hospital and the government been left to pay the costs, not only for the delivery but for the continuing care of that child? That is wrong. It takes two people to bring a child into this world, and it takes two people to raise that child.

That is why three years ago, we proposed and the Congress adopted, a requirement for states to establish hospital-based paternity programs as a way to establish paternities early in life. Based on our first reports, more than 200,000 fathers have been identified through these hospital paternity identification programs last year. That's 200,000 children whose fathers can't just up and walk away without a trace. Altogether, in 1995, our federal and state efforts resulted in the collection of a record \$11 billion in child support from non-custodial parents, an increase of nearly 40 percent since 1992. We also increased paternity establishment 40 percent from 1992 to 1995. But we have to do more. That is why today, I am taking executive action to strengthen child support enforcement and promote parental responsibility.

First, I am announcing a new national program to help states track parents who owe child support across state lines. Today, too many men have figured out that the way to weasel out of paying child support is to move from job to job and state to state. This must stop. Currently, twenty-five states require that when a person is hired for a job, a check is made to see if he owes child support. Under this new program, we will check that information against our national database to catch deadbeats who have crossed state lines.

Secondly, today I am directing the Department of Health and Human Services to issue new regulations which will require all mothers who apply for welfare to provide the

name of the father and other identifying information at the time they apply for assistance, before they can get welfare benefits. Exceptions will be made to protect women from domestic violence. These new regulations will also require the welfare office to contact child support authorities within two days so that the agency can initiate a legal paternity action against the father.

Our system ought to say to mothers: help us identify and locate the father, or you cannot get welfare. And it should say to fathers -- we are not going to let you walk away from your children and stick the taxpayers with the tab. As I have said many times, government does not raise children, parents do.

Our goal in all of this is to strengthen families, protect children, and demand more responsibility from both parents. These are the goals that you and most Americans are working hard every day to make real. I believe the federal government has a responsibility to support those efforts. Good health means not only what nurses and doctors can do for us, but what we can do together to raise healthy children and strong families. One of the best things we can do is to demand that fathers and mothers take an active role in nurturing and providing for the children they bring into this world.

Thank you and God bless you all.

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Give personal from my mother - daily work - basic values -
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And you have stood up for the rights and dignity of nurses. You have led the fight for collective bargaining, better wages, better working conditions, better training -- not only for your members, but for the millions and millions of nurses in this country who benefit from your strong and principled leadership. We all owe you a great debt of gratitude.

But today, I want to talk to you about how all Americans can join you in the most important work you do -- strengthening families and communities. My administration is committed to expanding opportunity for every citizen who is willing to take responsibility for making the most of their lives. The key to doing that is strengthening the American family.

And that is why, as we reform welfare, must help children & families - (vision for reform) veto -

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Our mission as a nation
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You see the need for this every day. A big part of your job is to impress upon your patients the need for them to take more personal responsibility for their health and for the health of their families. All the doctors and nurses in the world will not save a person who refuses to eat right, get the proper exercise, get regular check-ups or refrain from smoking or excessive drinking. But for those who do, the rewards are real.

(Glendale speech) - We know a lot more can do to help them.

But you cannot do this job alone. Government also has a role to play. As you know, for more than 30 years Medicaid has also played a critical role in strengthening families. In 1965, Americans reached common ground around the belief that quality medical care should be guaranteed to our most vulnerable citizens -- poor children, pregnant women, older Americans and the disabled. But last year, the Republican Congress sent me legislation that would have resulted in the denial of care for millions of these people. You said no. I said no. And the American people said no. ~~Leave Medicaid alone.~~ I vetoed that legislation. And, let me assure you, if they send it to me again in the same form, I will veto it again.

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(Radio
address
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*What you It's not just - It is
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*I want welfare reform - because every - well, decent + help
we need to fix - I've said - require work, time limits,*

Just today, we approved a waiver for a welfare reform effort in New Hampshire, which combines strong work requirements with incentives to move people from welfare to work. This makes the 63rd waiver in 40 states since I took office. With our support, states are reforming welfare by requiring work, time-limits, making work pay, improving child support enforcement and encouraging parental responsibility. Due in large part to these policies, 1.3 million fewer people are on welfare today than when I took office. In addition, the food stamp rolls are down, the poverty rate is down, teen pregnancy rates are down, while work and training activities among welfare recipients are up and child support

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While we continue to wait for the Congress to pass comprehensive welfare reform that promotes work and protects children, I am directing the Department of Health and Human Services to issue new regulations which will require all mothers who apply for welfare to cooperate with paternity establishment as a condition of receiving assistance.

before they can get welfare benefits.

Our system ought to say to mothers: help us identify and locate the father, or you cannot get welfare. And it should say to fathers -- you must support your children, and we are going to do everything in our power to see that you do. As I have said many times, parents have the primary responsibility for raising children, not the government. Under these new regulations, mothers will be required to provide the name of the father and other identifying information at the time they apply for assistance, before they begin to receive benefits. Exceptions will be made to protect women from domestic violence or for other extreme personal ^{circumstances} reasons. Welfare applicants must also be referred to the state child support agency within two days so that the agency can initiate a legal paternity action. ~~And states will have greater flexibility to have child support agencies determine compliance with paternity establishment requirements.~~

Our goal in all of this is to strengthen families, protect children, and demand more responsibility from both parents. These are the goals that you and most Americans are working hard every day to make real. I believe the federal government has a responsibility to support those efforts. Good health means not only what nurses and doctors can do for us, but what we can do together to raise healthy children and strong families. One of the best things we can do is to demand that fathers and mothers take an active role in nurturing and providing for the children they bring into this world.

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TOO MUCH
Excellence and compassion are also the hallmarks of this organization. Long before health care reform became the issue it is today, you stood with us to fight for better access and quality of care for millions of Americans. And you have also stood with us in other fights -- the nomination of Dr. Foster, our budget battles, and our struggles to protect Medicare and Medicaid.

You have also stood tall for the rights and dignity of nurses. You have led the fight for collective bargaining, better wages, better working conditions, better training -- not only for your members, but for the millions and millions of nurses in this country who benefit from your strong and principled leadership. We all owe you a great debt of gratitude.

But today, I want to talk to you about how all Americans can join you in the most important work you do -- strengthening families and communities. My administration is committed to expanding opportunity for every citizen who is willing to take responsibility for making the most of their lives. The key to doing that is strengthening the American family.

72-100

You see the need for this every day. A big part of your job is to impress upon your patients the need for them to take more personal responsibility for their health and for the health of their families. All the doctors and nurses in the world will not save a person who refuses to eat right, get the proper exercise, get regular check-ups or refrain from smoking or excessive drinking. But for those who do, the rewards are real.

But you cannot do this job alone. Government also has a role to play. As you know, for more than 30 years Medicaid has also played a critical role in strengthening families. In 1965, Americans reached common ground around the belief that quality medical care should be guaranteed to our most vulnerable citizens -- poor children, pregnant women, older Americans and the disabled. But last year, the Republican Congress sent me legislation that would have resulted in the denial of care for millions of these people. You said no. I said no. And the American people said no. Leave Medicaid alone. I vetoed that legislation. And, let me assure you, if they send it to me again in the same form, I will veto it again.

We also know that one of the most important things we can do right now to strengthen families and expand access to health care in this country is to pass the Kassebaum-Kennedy insurance reform bill. No worker in this country should have to worry that he or she will lose their health care if they lose their job or change jobs. And no one should be denied care simply because they have a pre-existing condition. When you go to a patient's bedside you ask, "Where does it hurt? How can I help?" You don't ask whether this is pre-existing condition you are looking at. So I ask you to join me in calling on the Congress to pass this important legislation now.

But, you and I know that, where children are concerned, the most important building block of strong families is parents who love their children and take responsibility for their care. Parents have the responsibility for pre-natal care, for making sure their newborns get the pediatric attention and immunizations they need. And for nourishing them with the love and financial support that is vital to their growth.

Parental responsibility has also been the driving principle behind our efforts to change our welfare system from one that fosters dependency to one that promotes work, family and independence. I am proud that, under my Administration, three out of four AFDC recipients -- more than 10 million people -- are now covered by state initiated reforms that we approved.

Just today, we approved a waiver for a welfare reform effort in New Hampshire, which combines strong work requirements with incentives to move people from welfare to work. This makes the 63rd waiver in 40 states since I took office. With our support, states are reforming welfare by requiring work, time-limits, making work pay, improving child support enforcement and encouraging parental responsibility. And I am doing everything I can to help this process. Last month, I took executive action to require minor mothers to stay in school and turn their lives around in order to receive assistance. Today, 1.3 million fewer people are on welfare than when I took office. In addition, the food stamp rolls are

down, the poverty rate is down, teen pregnancy rates are down, while work and training among welfare recipients are up and child support collections have reached a record high.

But we must do more to insist on parental responsibility. Three years ago, we proposed and the Congress adopted, a requirement for states to establish hospital-based paternity programs as a way to establish paternities early in life. Early data from 31 states indicates that more than 200,000 paternities were established through in-hospital paternity identification programs last year. That's 200,000 children whose fathers can't just up and walk away without a trace. Altogether, in 1995, our federal and state efforts resulted in the collection of a record \$11 billion from non-custodial parents, an increase of nearly 40 percent since 1992. We also increased paternity establishment 40 percent from 1992 to 1995. But we have to do more.

Based on our first reports

How many times have you seen a frightened young girl give birth to a baby alone in the hospital, with the father of the child no where to be found? How many times has the hospital and the government been left to pay the costs, not only for the delivery but for the continuing care of that child? That is wrong. It takes two people to bring a child into this world, and it takes two people to raise that child. That is why today, I am taking executive action to strengthen child support enforcement and promote parental responsibility.

While we continue to wait for the Congress to pass comprehensive welfare reform that promotes work and protects children, I am today directing the Department of Health and Human Services to issue new regulations which will require all mothers who apply for welfare to provide the name of the father and other identifying information at the time they apply for assistance, before they can get welfare benefits. Exceptions will be made to protect women from domestic violence. Welfare applicants must also be referred to the state child support agency within two days so that the agency can initiate a legal paternity action.

I am also announcing a new national program to help states track parents who owe child support across state lines. Today, too many men have figured out that the way to weasel out of paying child support is to move from job to job and state to state. This must stop. Currently, twenty-five states require that when a person is hired for a job, a check is made to see if he owes child support. Under this new program, we will check that information against our national database to catch deadbeats who have crossed state lines.

Our system ought to say to mothers: help us identify and locate the father, or you cannot get welfare. And it should say to fathers -- we are not going to let you walk away from your children and stick the taxpayers with the tab. As I have said many times, government does not raise children, parents do.

Our goal in all of this is to strengthen families, protect children, and demand more responsibility from both parents. These are the goals that you and most Americans are working hard every day to make real. I believe the federal government has a responsibility to support those efforts. Good health means not only what nurses and doctors can do for us,

but what we can do together to raise healthy children and strong families. One of the best things we can do is to demand that fathers and mothers take an active role in nurturing and providing for the children they bring into this world.

Thank you and God bless you all.

**PRESIDENT WILLIAM J. CLINTON
AMERICAN NURSES ASSOCIATION
WASHINGTON, DC
JUNE 18, 1996**

Acknowledgments: Ginna Trotter Betts for introduction -- she is leaving after four years as national president of ANA. She was a leading voice for health care reform.

I am honored to join you in this 100th anniversary celebration. Today, I ask all Americans to join me in saluting you for a century of service, leadership and advocacy for quality health care. Building a healthy nation starts with building healthy people. That has always been your mission. It is generally recognized that, for all its shortcomings, America has the finest health care system in the world -- the best doctors, the best hospitals, the best technology. But none of this would matter without you, America's nurses -- the heart and soul of our nation's health care system.

I know the hard work and sacrifice that goes into being a good nurse. As most of you know, for more than 30 years, my mother worked as a nurse anesthetist. I want to thank you again for honoring her memory in 1994 with a special award in her name. I have vivid memories of her getting up in the middle of the night to be at work by 7 a.m. She was serious about the life and death nature of her work. She was the consummate professional. But she understood that healing is about more than medicine and technology. It is also about caring. So she always added a dose of compassion -- a kind word, a gentle touch, a smile -- to put her patients at ease and to reassure them that everything would be alright. That is what good nursing is all about. That is what all of you do everyday.

What I learned from my mother and what America is learning from you are the basic values that make us strong. We know that the mission of this country must be to offer every American an opportunity and demand that every American take responsibility -- that is the basic bargain of our democracy. I think if we do that we can create a strong America that is rooted in strong communities and strong families. This is so important. Without strong families our children will not get the support and the guidance they need to take advantage of the vast opportunities of the 21st century. Without strong families, our communities will not produce the leadership needed to face the challenges of this new era.

For the past three-and-a-half years, we have worked hard to give people the tools they need to raise strong and healthy families. We passed the Family and Medical Leave Act to say that if you take a little time off to take care of a sick child you will not lose your job. We have been fighting with all of you to preserve the guarantee of health care for millions of Americans who depend on Medicaid. And we are doing everything we can to enact the vital health insurance reforms that are at the heart of the Kassebaum-Kennedy bill. Through our efforts to reform welfare, we have also been working to demand responsibility from every citizen. That means making sure every American does what it takes to make the most of his or her God given abilities. And it means making sure that every parent lives up

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BODY:

Thank you so much. Thank you for your warm welcome. And thank you, Ginna, for that award.

I arrived a few moments ago, and I remember the first time I ever heard your president speak. I knew that she had worked for Vice President Gore, and I thought it was so interesting to hear the head of a national association who was speaking without an accent. [Laughter]

I want to say a special word of appreciation to your first vice president, Ellen Sanders, who's participated in White House and congressional meetings on health reform, and to Diane Weaver, the president of the Association of Nurse Executives, who cosponsored this breakfast.

I am very proud to share the stage today with all the fine nurses in the executive and the legislative branches whom you have honored. And I thank you for doing that. And I thank them for their service. I also want to say a special word of thanks to all of you and to the ANA for the courage and the vision you have demonstrated by fighting for health care reform, and the right kind of health care reform, long before it was a hot issue. As you know, the position paper you put out on national health reform probably more closely parallels the recommendations that our administration has made than that of any other professional health care group in the country. And I thank you for that very much.

I want to thank you, too, for recognizing my mother, who worked for 30 years and then some as a nurse and was deeply proud of what she did. I remember when I was little boy watching her get up in the middle of the night always starting work by 7 a.m. or 7:30 a.m. in the morning, always telling me stories that indicated that there was literally nothing in the world more important to her than dealing with a person frightened, in pain, with a caring and effective manner. This award will help to expand the frontiers of nursing in the areas of women's health, something that she would have been very proud to be a part of.

My mother, as all of you now know, completed her memoirs, which became her autobiography shortly before she died. She went over about half of it and was able to do the final editing. And it was my privilege after she passed away to work with the author and just try to make sure all the facts were right. I got very stern instructions from her. She said, "Now if you have to do this do not change one word I said about you" -- [laughter] -- "especially the part about your manners not always being great." [Laughter] "And make sure you get the facts straight. Otherwise leave it alone."

But I was very pleased with the two book reviews that her book got yesterday. One by the great American author, Joyce Carol Oates in the New York Times, and then another one here in the Washington Post. But it tickled me, the one in the Washington Post said that if you read this book, you would understand why I perplexed people in Washington. I was actually brought up by real people, and occasionally I still acted like one. [Laughter] I didn't know what that -- [laughter] -- I'm trying to get over it, but it's hard even here.

Anyway, here's something my mother said about her work, which would apply to all of you and those whom you represent. But it meant a lot to me. It was just her words. "Nurse anesthetist work is all-consuming. You don't do it halfway. You don't daydream. You don't let your emotions wander. You're the person responsible for putting another human being into a state of unconsciousness, somewhere between life and death. For 30 years, from the minute that I would walk into the operating room and start talking to the patient and begin putting him to sleep, until I got him safely back to the recovery room, nothing in the world could have crossed my mind. I don't care what problems were on the outside. I don't care what problems I might have been having at home. I never thought of my life beyond the moment."

I remember when I was also a child, things were somewhat more informal. My mother used to take me to the hospital and let me meet the other nurses and the doctors and watch the emergency room and watch people go into the operating room. It was utterly fascinating. And the work you do has always sort of captured my imagination.

My own wife had never been in a hospital before in her entire life until our daughter was born, never been in a hospital for any kind of sickness. And learned only a few moments before the happy event that she was going to have to have a C-section. And we had gone through Lamaze, and we had done all this stuff, and I was supposed to be in the operating room. And our hospital at that time had never before let a father into the delivery room if it wasn't a natural birth. It was a big deal. So I said, "Look, I've been watching people get cut on and bleed since I was a little boy. I'll do fine." [Laughter] "But she had never been here before, and she may not -- you better let me come in." [Laughter] So they did and actually changed the policy so that if fathers had been through the Lamaze course and then the mothers eventually had to have a C-section, they got to go. So I felt -- that's my one contribution to medical advances. [Laughter]

But I owe all that to my mother, who was a remarkably determined woman in the face of often excruciating adversity. I think one of the reasons that the Nurses Association has been so forthright about this health care reform issue is that you see it from the grassroots up in human terms and you don't get so hung up as some people do on all the political rhetoric and the positioning and the characterizations that have, frankly, put a lot of Members of Congress at a severe disadvantage because they haven't had the chance to spend the time and make the effort to deal with this issue that you have. It is, after all, a mind-bendingly complex problem. It's 14.5 percent of our income, and for people who don't live in it every day, it can be a very difficult thing.

But I just wanted to thank you because I believe that the personal

experiences you have shared, so many of you common to the ones that my own mother shared, really animated the Nurses Association to take the position that you have taken.

I want to emphasize today that what I seek, contrary to the attacks, and what you have sought, is not a Government-run health system, it's a private insurance health system that covers everybody, where the health care professionals run it and not the insurance companies. That's what we seek.

We seek private insurance that can never be taken away. It's wrong to treat seriously ill children in an emergency room who could have been treated more easily and more inexpensively if their parents had just had the coverage. With our reforms, every family will have that kind of quality insurance. We ought to reform the insurance system that today often only covers the healthiest people and even then will deny them coverage for anything they've been sick with before.

When you go to a patient's bedside, you ask, "Why does it hurt? Where does it hurt? How can I help?" You don't ask whether this is a preexisting condition you're looking at. [Laughter] It's a very important issue.

If you think about all this preexisting condition business, there are 81 million Americans who live in families where there's been a child with diabetes or a mother that had cancer prematurely or a father that had an early heart attack or some other problem. I see these people everywhere. This is no small number. Now, we get action lickety-split up here all the time when a million people or 2 million people are adversely affected by something if they are well organized. But these 81 million people, they're professionals and blue-collar workers; they're old folks and young folks; they're all different kinds of people; and they are by definition disorganized. There is no national association of people with preexisting conditions. [Laughter] You think about it; if there were, and 10 million of them showed up here, we'd have health care reform so fast you couldn't blink.

You must be their voice in an organized way. And you can be. So we ought to cover everybody with private insurance, and we ought to have insurance reforms that deal with preexisting conditions and don't discriminate people based on age. This is somewhat controversial. I know that. But I believe if we went back to health insurance the way it originally was when Blue Cross first started writing it, where everybody was put in a large group, risk was broadly spread, and people paid a fee against the day when they would be sick, it would be fairer for all Americans. And our economy would work better, our society would have a stronger sense of community, our families would function better. People would be free of a lot of the anxiety that comes --

Hillary and I have received about a million letters. And whenever I go somewhere now, they arrange for some of the letter writers to come see me. And it's just gripping to see people just over and over and over and stunning to see how they do come from all walks of life and how they have been broken by the things which have happened.

The third thing I think we should do is to preserve the Medicare program. It's interesting, the people who criticize our program say this is Government-run health care which, of course, it isn't. And if you tried to take

away Medicare, which is a Government-funded health care, well, they would be up in a tree somewhere screaming about it.

But we don't want to do anything to the Medicare program, except to make it better. I do believe we should add a prescription drug benefit and phase in long-term care that is community-based or home-based for two simple reasons. One is, there are an awful lot of elderly people who aren't poor enough to be on Medicaid but aren't well off, who have significant medical bills. We know the elderly use 4 times the prescription drugs that the nonelderly do. And we know from study after study after study that a proper medication regime can keep people out of the hospital and can save money and that we now have -- any number of elderly people every month -- I was in a grocery store in New York yesterday called Pathmark, which also operates, as many do now, a drugstore. And it was gripping; the CEO was saying, "My workers tell me that every day they watch older people come in this store and go from the drugstore, down the food aisle, and try to make up their mind what food they're going to give up to get their medicine, or whether they're going to give up their medicine to buy their food" -- gripping. So I do believe we should do that. But the Medicare program works. It has low administrative overhead. We think it should be secured.

The fourth thing we want to do is to bring greater choice to our people. I guess the thing that has made me the maddest in the relentless campaign against this plan are all those bogus ads where they say, "You're going to have to call some Government office to figure out where you go to the doctor."

There are two realities of modern life that you have to drive home to every Member of Congress, without regard to party or philosophy. Number one, Americans are rapidly losing their choices today. Already, of people who are insured at work, fewer than half have more than one choice of a health plan. That's a fact today. And they're rapidly losing their choices. Number two, medical professionals are increasingly losing their right to decide unilaterally, may have to have somebody get on the phone to an insurance company executive a long way away to ask for permission to do what anybody knows ought to be done under the circumstances.

Now, most Americans, believe it or not, don't know either one of those things, even though they may be caught up in it, and I think it's very important. Our plan is designed, number one, to increase the choices that consumers have. We're moving to more managed care. There can be a lot of good things in it, but under our plan, every year, every person would have a choice between at least three plans, or among at least three plans but in all probability many more. And number two, under our plan, medical professionals would also be given more choices and would have to do less checking in with the insurance company in advance. Now, being treated by doctors and nurses, you know, is an American tradition. Every time I do one of these town meetings, like I did in Rhode Island last night, I talk to somebody that's just been forced to give up their doctor and just move away from the choices they made.

We believe when all Americans can choose among several health plans, many Americans, many more Americans, will choose to stay with their own providers. And many more of these plans will be organized in such a way that all providers can participate if they'll do it for the agreed-upon fee. That's what we believe will happen. And if we don't do this, if we don't have some legal action to reorganize this, you're going to have less choice by consumers, less

choice by providers.

Time and again, we've also seen that the quality of care is directly related to the quality and the quantity of the nursing staff. One of the things that amazes me is how many nurses have been laid off in recent months and been told, well, this is because health care reform is coming. I'll tell you what, one of Clinton's unbending laws of politics is, whenever somebody who's got a tough decision to make can shift the heat from themselves to you, they'll do it every time. They will do it every time. That law never varies.

Now, what is really going on? What's really going on is, a lot of these health care providers are under the gun. Right? More managed care; people bargaining tougher for prices; more and more people who are uncovered where there's uncompensated care that has to be provided; less and less ability to pass on the cost of uncompensated care to other people because they're in these managed care networks they're in: all this stuff is going to happen if we don't do anything. All of us could go on vacation for a year, and this same thing would go on. You know that. And don't let your Members fall for it.

What's going to happen is we'll continue to see these trends occur unless we find a way to give health care providers reimbursement for all the people for whom they care, at an appropriate level in an appropriate way. More than a decade of research now shows that more and better trained nurses result in shorter hospital stays, better survival rates, fewer complications, whether you're dealing with low birthweight babies or older people.

You do not have to work for the Congressional Budget Office to understand that healthier patients and shorter stays means lower health care costs. Sometimes I think if you do work for the Congressional Budget Office you will never get that, but -- [laughter] -- we're working pretty well on the whole. This is a big deal. This choice issue and maintaining an array of qualified people doing the things for which they are best qualified is terribly important.

Finally, let me say -- and this, I guess, is, except for this whole issue of whether this is a Government program, which it isn't, is the most controversial part of it -- our reform is based on providing guaranteed benefits at work. Now the reason for that is simple, for the people in this country that have health insurance, 9 out of 10 of them have it at work where there is some shared responsibility between the employer and the employee. For the people who don't have insurance, 8 out of 10 of them have someone in their family who is working.

It seems to me that the fairest and simplest, and if you will, the most conservative way to achieve universal coverage, to have health care security for everybody, is to ask employers and employees who aren't doing anything or barely doing anything to do more so that they can fulfill their own responsibilities and then use tax funds to cover the unemployed, uninsured people for whom you could say, "Well, there's a general responsibility just like Medicare and Medicaid" and then organize the market so that smaller businesses and self-employed people, (a) get discounts if they need it and (b) are able to buy good insurance on the same terms that those of us who are insured by Government or larger businesses can.

Now it seems to me that is a fair and simple and obvious way to do this. I think that any other way will sooner or later involve either a radical change,

that is, getting rid of the whole health insurance market and substituting taxes for it, or involve people who are already paying too much for their own health care, having to pay something for people who won't do anything for themselves because they say they should be exempt.

Now I think that this is a very important issue. You know, again, we lose sight of the fact that most small businesses are making an effort to cover their employees. We have brought hundreds and hundreds of small businesses to Washington to talk to the Congress, but they are not organized. There is no association called: small businesses who cover their employees and are mad their competitors don't and mad they can't get better insurance rates -- [laughter] -- and wish somebody would help them. So an association that may have a lot of folks in the insurance industry, along with other small businesses, says, "Don't do this; the whole small business economy will break," says this, and there's no association on the other side. You have to be their voice.

Had a car dealer from a town of 7,000 people in Arkansas up staying with me the other night, he and his wife, long-time friends of mine. She's a college teacher. He's a car dealer. He said to me the other night -- it was funny -- he said, "You know, for 20 years I have been feeling sorry for myself because I've provided a good health plan for my employees, and none of my competitors did." So he said, "I was so happy when you proposed this just because I thought I was going to get even." [Laughter] And then he said, "But you know, then I remembered that in the last 20 years I put three of my competitors out of business. And I'm making more money than I ever have. And the reason is I still got the same folks working for me I had 20 years ago because I gave them health benefits."

And yesterday I went to New York and I visited this Pathmark store. They have 175 stores, 28,000 employees, the 10th biggest supermarket chain in the country. We're all told, "Oh, if you do this, the retailing business will go to pieces." These people have put new stores in inner-city areas that other chains would not touch, fine new stores. They are making money, and they have always provided comprehensive health benefits to their employees. And they are now sacking their groceries in a bag that says they favor health care benefits to all Americans, guaranteed through the workplace.

I say this to you because, as you know, there are a lot of nurses that don't have any health care coverage and a lot of nurses who are single parents who don't have health care coverage. And this is the other point I want to make that I did to all those young people working in that grocery store yesterday: Everybody now in Washington is for welfare reform, and I guess it means different things to different people. But I have basically a 3-point strategy to achieve what I think would end the welfare system as we know it: One was embodied in last year's economic plan, lower income taxes for working people who are hovering just above the poverty line with children. This year one in six American working families will be eligible for lower income taxes so they can succeed at work and can succeed as parents.

Strategy number two, give people education and training and then give them a certain amount of time to find a job. And if they don't, require them to take it. And if they can't, provide some public subsidy in the private sector or some publicly funded job so that work is preferable to welfare.

Strategy number three has got to be cover the people with health insurance. Consider this: All these people on welfare in this country who are dying to get off -- and by the way, that's most of them -- who are dying to get off, most of them have limited education. Suppose they go through a little training program and they get a job that pays a modest wage but is still more than the welfare benefits. But they go to work for an employer who does not provide for health care.

Think about this: You are a mother with two children. You give up being on welfare to take a job that pays more than the welfare check, but you lose health care coverage for your kids. What are you going to do if your kid has to go to the dentist? What are you going to do if your child is desperately ill? How are you going to feel every week, every 2 weeks or every month when you get your paycheck and you see what's taken out of it in taxes and you realize those taxes are going to pay for the health care benefits of people who decided to stay on welfare instead of going to work? You don't have to be as bright as a tree full of owls to figure out that this doesn't make a lot of sense. [Laughter]

Now a lot of American nurses are in this situation today, getting up every day, slaving away, trying to take care of people who have children without insurance, caring for people who come into their office who are on public assistance who have children with insurance because of the Medicaid program. It is not fair. It is not right. It is not smart.

And you could say, "Well, all this inability to cover everybody, if this were fueling some enormous American economic expansion, because we were saving so much money on health care, maybe you could deal with that." But the truth is we're spending over 40 percent more of our income on health care than any other country in the world. Oh yes, some of it because we're more violent, and that's something we pay for. Some of it because we have better medical research and technology, and that's worth paying for. But a whole lot of it, as you well know, is because of the way we have financed health care, which has employed hundreds of thousands of people in doctors' offices, in clinics, in hospitals, and in insurance companies to read the fine print on thousands and thousands of policies to see who and what is not covered. And it has rifled inefficiencies through this system that we are all paying for.

We can fix this. We can fix it by having a law which fixes what's wrong, keeps what's right, provides health care security to everybody through a private system, increases the choices consumers have, and increases the decisions that doctors and nurses and other qualified providers make without oversight by others. We can do it.

In order to do it, we have to recognize we have to go through a fog of misinformation, a torrent of labels which aren't right, and recognize, too, that you have to lobby and stand up for, in an organized and very personal way, that great association that doesn't exist, the association of 81 million Americans and families with preexisting conditions, the association of hundreds of thousands of small businesses who are doing the fight thing and being punished for it, the association of all the poor women in this country who are out there working their hearts out and their fingers to the bone to do right by their kids without health insurance and paying taxes for people on public assistance who have it for their children. All of those associations are disorganized.

You have devoted your lives to providing health care to all Americans. You have honored my favorite nurse today. You have given me a chance to hope that my mother and my grandmother are looking down on me thinking I was the first generation in three that didn't produce anybody that was caring for other people in health care. So they think at least I walked off with the award today. [Laughter] It means more to me than I can say.

But the determination that my mother showed in getting up off the pavement many times in her life is the same sort of determination you have to show for us to get health care reform this year. And remember, most of these Members of Congress want to do the right thing. But they don't know what you know; they haven't spent the time that you've spent; they haven't had the experiences you have had. You have to help them. And the people in their districts that really need their help are not in those great national associations.

You keep them in your mind and keep that example in your mind. Don't let this year go by. We can do this this year with your help and your leadership.

Thank you, and God bless you all.

NOTE: The President spoke at 9:56 a.m. in the Regency A Ballroom at the Hyatt Regency. In his remarks, he referred to Virginia Trotter Betts, president, American Nurses Association. A tape was not available for verification of the content of these remarks.

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LOAD-DATE: June 08, 1994

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THE PRESIDENT HAS SEEN
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PRESIDENT WILLIAM J. CLINTON
AMERICAN NURSES ASSOCIATION

WASHINGTON, DC

JUNE 18, 1996

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REVISED

[Acknowledgments: Ginna Trotter Betts -- she is
leaving after four years as national president of ANA.
She was a leading voice for health care reform.]

I am honored to join you in this 100th anniversary
celebration. Today, I ask all Americans to join me in
saluting you for a century of service and leadership.

America has the finest health care system in the world.

And nurses are the heart ~~and soul~~ of that system.

Rec. of my mother,

^ I know the hard work and sacrifice that goes into

being a good nurse. ~~As most of you know, for more~~

~~than 30 years, my mother worked as a nurse~~

~~anesthetist.~~ I want to thank you again for honoring her

memory in 1994 with a special award in her name, and

for all you do everyday.

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~~And that is how we will create an America that is rooted in strong communities and strong families.~~

- ① Econ:
② Crime:
③ Q&A:

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Heau → HRC
→ Tobacco
→ Drugs
→ Alcohol

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f. Wisc. → trust, ^{anxious} ~~good~~ work, ~~clear~~ → expect to
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E X E C U T I V E O F F I C E O F T H E P R E S I D E

17-Jun-1996 .08:18pm

TO: James T. Edmonds
TO: Rahm Emanuel

FROM: Mary A. Dixon
 Office of Public Liaison

SUBJECT: From Betsy Myers

Proposed Language for ANA

We will have exceptions for mothers with "good cause," which would include protecting their health and safety in cases of rape and incest and when women are escaping domestic violence. Our action will strengthen child support enforcement but not at the risk of placing women in danger.

health + safety

such as
being

*There will be good cause
exceptions, especially such
as being in danger of domestic
to protect a woman violence*

*No
punitive*
67936

*Holly
Carner*

*so hold
6-2983*

CHURCH FIRES MEETING
JUNE 17, 1996

- Governors' Meeting
 - likely attendees
 - draft agenda
 - briefing materials
 - agency rehearsal
- Private sector efforts
- Legislation
 - Treasury supplemental
 - HUD piece