Withdrawal/Redaction Sheet
Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. memo	Bruce Reed and Bruce Jennings to President Clinton re: Long-Term Care Initiative (partial) (1 page)	01/03/1999	P6/b(6)
002. memo	Bruce Reed and Bruce Jennings to President Clinton re: Long-Term Care Initiative (partial) (1 page)	01/03/1999	P6/b(6)

COLLECTION:
Clinton Presidential Records
Domestic Policy Council
Eric Morse (Events)
OA/Box Number: 21192

FOLDER TITLE:
Long Term Event 1/4/1999

2011-0619-S
rc299

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.
PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).
RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

b(1) National security classified information [(b)(1) of the FOIA]
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b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

Elisa Millsap
01/04/99 10:13:33 AM

Record Type: Record

To: See the distribution list at the bottom of this message

cc:

Subject: Revised List of Members Attending Health Care Event

EVENT:	Health Care Event
DATE:	Monday, January 4, 1999
TIME:	11:15am-12:05pm
LOCATION:	The Grand Foyer, The White House

CONFIRMED TO ATTEND (8):
Sen. John Breaux (D-LA)
Sen. Harry Reid (D-NV)
Sen. Arlen Specter (R-PA)
Rep. Sherrod Brown (D-OH)
Rep. Ben Cardin (D-MD)
Rep. Elijah Cummings (D-MD)
Rep. Steny Hoyer (D-MD)
Rep. Jim Moran (D-VA)

Message Sent To:

Draft 1/3/99 5:30pm
Jeff Shesol

PRESIDENT WILLIAM J. CLINTON

REMARKS ON LONG-TERM CARE

THE WHITE HOUSE

January 4, 1999

Acknowledgments: the First Lady; the VP and Mrs. Gore (via satellite from California); Secs. Rubin and Shalala; Janice LaChance, OPM; Sen. Chafee; Reps. Moran and Cummings; Patricia Darlak

Another new year is upon us --a time for celebration, and, perhaps, a time to feel a little bit older. If we do, we are not alone. America may be young in spirit; our nation may have all the energy and intensity and ambition of youth; but our people are aging. On the verge of the new century, we are undergoing a profound, seismic demographic shift.

Today I want to talk about the ways we are going to meet the challenges of this new America.

Simply put: The baby boom will soon become the senior boom. And, like the baby boom did in decades past, the senior boom will change the face of America. During the next 30 years, 76 million baby boomers will join --and greatly expand --the ranks of the retired. The number of elderly Americans will double by 2030. By the middle of the next century, the average American will live to 82, six years longer than today.

These changes are underway. Already, longer lives are also stronger, healthier lives, thanks to medical science. Already, older Americans are redefining retirement.

They are proving that, rather than an ending, it can be a new beginning: a time to learn new ideas, start a new business, travel to new and distant lands.

Still, aging is inevitable; and so today are the infirmities of age. Nearly half the people over 85 --one of the fastest-growing segments of the American population --need help with everyday tasks. Eating. Dressing. Going to the doctor.

We cannot expect all or even most older Americans to fend for themselves. We cannot expect it and we would never wish it. The real question is what sort of care is best in each individual case.

Millions require the kind of care only a nursing home can provide, but millions more choose to remain at home, close to family and friends.

Indeed, the elderly and people with disabilities are remaining at home in record numbers, cared for by those who care the very most. Today, millions of households are caring for elderly relatives and even neighbors.

They represent the best of America --fulfilling, each and every day, the pledge to our parents' generation that is not often spoken, but resonates deeply in the American character.

Providing long-term care at home is, more and more often, a common choice, but it is rarely an easy one. Since this kind of care is rarely covered by private insurance or Medicare, out-of-pocket expenses can be high. So, too, are the professional costs. Caregivers who hold jobs outside the home --and that is a vast majority --may have to take unpaid leave or work fewer hours to fulfill all their responsibilities.

Caregiving is, in countless ways, vital, meaningful work; but it can also be stressful work.

The First Lady just told you what we've been doing to ease the burdens on these families: by improving nursing homes, strengthening Medicare, and making Medicaid more flexible. But in 21st-Century America, more will be asked of us, and so there is more work to be done.

Today, I am announcing a critical new initiative to give care to the caregivers --to help Americans provide long-term care for aging and ailing loved ones. The size of the senior boom demands it. The length of our lives makes it more important than ever.

And so does the sacrifice of American families --millions of households putting the well-being of relatives or neighbors above their own.

This is a complicated challenge; it requires a range of responses. Therefore, to improve long-term care in America, to give it the priority and support these families deserve, there are four things we must do. First, I am proposing a long-term care tax credit --$1,000 for people with long-term care needs or for the families that shelter them. It is far better to devote this money to help keep the elderly and disabled at home than to spend the same amount to have them live away from home.

And if this makes it possible for more people to stay at home, it may be cheaper, too. Our parents worked and saved and sacrificed to care for us in our youth.

Adult children are working and saving and sacrificing to care for their parents in old age. It is the cycle of life --a vital and sacred compact among generations --and one we should recognize and reward as a nation.

This targeted tax cut of $1,000, paid for in our balanced budget, would help meet the individual needs of individual families --supplementing the care they already provide, empowering them to decide and to do what is best.

It would help offset the direct costs of long-term care, like home health visits and adult day care, as well as the indirect costs, like the unpaid leave some caregivers take from work. The care they provide is invaluable; but we can show we value it very much indeed.

Second, we should create a Family Caregiver Support Program --a new national network to support people caring for older Americans. In decades past, families could do little for ailing relatives but give them shelter and love. Today, due to advances in science, caregivers tend to everything from dialysis to depression, preparing intravenous meals and insulin injections.

This initiative enables states to create "one-stop shops" --places caregivers can access the resources of the community, find technical guidance, and obtain respite and adult day care services. This is especially important for those families who are thousands of miles away from their loved ones but still want to help. These families want to provide the best possible care; we want do everything in our power to help them.

That is why, third, we must educate Medicare beneficiaries about long-term care options. Medicare does not cover most kinds of long-term care, so it is important that beneficiaries understand their alternatives.

This initiative helps answer essential questions efficiently: What are my choices? What should I look for in a private long-term care insurance policy? By launching a national educational campaign, we can help ensure that people in need get the answers --and the quality care --they deserve.

Fourth, I am proposing that the federal government use its power as the nation's largest employer, use its market leverage, to set a national example --offering private long-term care insurance to federal employees.

By promoting high-quality, affordable care, we can encourage more people and more companies to invest in long-term care coverage. We can help more employees --in every part of our economy --prepare for the future.

There is no single solution to the challenges of caregiving. But together, these initiatives represent a powerful force for positive change. To fulfill our fundamental obligation to older Americans and people with disabilities, we, too, must act together --members of both parties, of two branches of government, putting progress above partisanship for the sake of our people.

That means taking these important steps, and I call on Congress to do so. It also means strengthening Medicare; and, as I have said many times in the past year, it means saving Social Security for the 21st Century --for Social Security, too, is a sacred trust between generations. We now have a remarkable opportunity to strengthen it for the future; we must make the most of it.

The senior boom is one of the central challenges of the coming century. If we face these challenges together and make them our top priorities, if we make the efforts I have described today, then we can prove what no generation in history has had the opportunity to prove --that the infirmities of age need not be the indignities of age.

I have asked the Vice President, who will speak to us shortly, to conduct a series of forums around the nation in coming months on this initiative. We will hear from the people of this nation about how we can help them meet the long-term care needs of their loved ones.

[*You will introduce the Vice President and Mrs. Gore, who will be speaking via satellite from California. They will be accompanied by Sen. Feinstein and Rep. Harmon. After the Vice President speaks, you will ask him a question, to be provided. Then, after he concludes, you conclude the event.*]

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Elisa Millsap
01/04/99 10:22:13 AM

Record Type: Record

To: See the distribution list at the bottom of this message

cc:
Subject: Final Revised List of Members Attending Health Care Event

EVENT: Health Care Event
DATE: Monday, January 4, 1999
TIME: 11:15am-12:05pm
LOCATION: The Grand Foyer, The White House

CONFIRMED TO ATTEND (9):
Sen. John Breaux (D-LA)
Sen. Harry Reid (D-NV)
Sen. Arlen Specter (R-PA)
Sen. Ron Wyden (D-OR)
Rep. Sherrod Brown (D-OH)
Rep. Ben Cardin (D-MD)
Rep. Elijah Cummings (D-MD)
Rep. Steny Hoyer (D-MD)***Represents Patricia Darlak
Rep. Jim Moran (D-VA)

Message Sent To:

PRESIDENT CLINTON AND VICE PRESIDENT GORE UNVEIL HISTORIC LONG-TERM CARE INITIATIVE TO SUPPORT FAMILY CAREGIVERS AND HELP ADDRESS GROWING LONG-TERM CARE NEEDS

January 4, 1999

Today, President Clinton is unveiling an historic new initiative to support Americans with long-term care needs and the millions of family members who care for them. This four-part, $6.2 billion (over five years) initiative takes important steps to address complex long-term care needs through: (1) an unprecedented $1,000 tax credit that compensates for formal or informal costs Americans of all ages with long-term care needs or the family caregivers who support them; (2) a new National Family Caregivers Support Program that provides a range of critical services for caregivers such as respite, home care services, and information and referral; (3) a national campaign to educate Medicare beneficiaries about the programs' limited coverage and how best to evaluate long-term care options; and (4) a proposal to have the Federal government serve as a model employer by offering quality private long-term care insurance to Federal employees at group rates.

The President is being joined by the First Lady, Secretary Rubin, Secretary Shalala, and OPM Director LaChance to unveil this initiative at the White House and the Vice President and Mrs. Gore are participating from an adult day care center in California, one of four States with model statewide family caregiving resource programs.

MILLIONS OF AMERICANS HAVE LONG-TERM CARE NEEDS

- **More and more Americans have a range of long-term care needs.** Over five million Americans have significant limitations due to illness or disability and thus require long-term care. Approximately, two-thirds are older Americans. Also, millions of adults and a growing number of children have long-term care needs because of health condition from birth or a chronic illness developed later in life.

- **The aging of Americans will only increase the need for quality long-term care options.** The number of Americans age 65 years or older will double by 2030 (from 34.3 to 69.4 million), so that one in five Americans will be elderly. The number of people 85 years or older, nearly half of whom need assistance with everyday activities, will grow even faster (from 4.0 to 8.4 million).

MULTI-FACETED INITIATIVE TO SUPPORT FAMILY CAREGIVERS AND ADDRESS GROWING LONG TERM CARE NEEDS. The President is unveiling a four-part initiative that is designed to address the broad-based and varied long-term care

needs. It will: provide immediate support and assistance for the millions of Americans who care for family members with major long-term care needs; educate the elderly and people with disabilities about long-term care issues and options; and promote new promising strategies directions for long-term care policy for the twenty-first century. The President also called on the Vice President to host a series of forums around the nation to raise awareness about the need to support family caregivers and address the growing need for long-term care options.

The long-term care proposal being unveiled today by the President and Vice President includes:

- **Supporting families with long-term care needs through an historic $1,000 tax credit.** This initiative, for the first time, acknowledges and supports millions of Americans with long-term care needs or the family members who care for and house their ill or disabled relatives through a $1,000 tax credit. This new tax credit supports the diverse needs of families by compensating a wide range of formal or informal long-term care for people of all ages with three or more limitations in activities of daily living (ADLs) or a comparable cognitive impairment. This proposal, which supports rather than supplants family caregiving, would provide needed financial support to about 2 million Americans, including 1.2 million older Americans, over 500,000 non-elderly adults, and approximately 250,000 children. It costs $5.5 billion over five years and phases out beginning at $110,000 for couples and $75,000 for unmarried taxpayers.

- **Creating an unprecedented National Family Caregiver Support Program.** Recent studies have found that services like respite care can relieve caregiver stress and delay nursing home entry, and that support for families of Alzheimer's disease patients can delay institionalization for as long as a year. This new nationwide program, strongly advocated by the Vice President, would support families who care for elderly relatives with chronic illnesses or disabilities by enabling states to create "one-stop-shops" that provide: quality respite care and other support services; critical information about community-based long-term services that best meet a families' needs; and counseling and support, such as teaching model approaches for caregivers that are coping with new responsibilities and offering training for complex care needs, such as feeding tubes. This program, which costs $625 million over five years, would assist approximately 250,000 families nationwide.

- **Launching a national campaign to educate Medicare beneficiaries about the programs' limited coverage of long-term care and how best to evaluate their options.** Nearly 60 percent of Medicare beneficiaries are unaware that Medicare does not cover most long-term care, and many do not know what long-term care services would best meet their needs. This $10 million nationwide campaign would provide all 39 million Medicare beneficiaries with critical information about long-term care options including: what long-term care Medicare does and does not cover; how to find out about Medicaid long-term care coverage; what to look for in a quality private long-term care policy; and how to access information about home-and community-based care services that best fit beneficiaries' needs.

- **Having the Federal government serve as a model employer by offering quality private long-term care insurance to Federal employees.** The President also called on Congress to pass a new proposal that allows OPM to use its market leverage and set a national example by offering non-subsidized, quality private long-term care insurance to all federal employees, retirees, and their families at group rates. This proposal, that costs $15 million over five years, will provide employers a nationwide model for offering quality long-term care insurance. OPM anticipates that approximately 300,000 Federal employees would participate in this program.

Final Draft
10:00 am
1/4/99

FIRST LADY HILLARY RODHAM CLINTON

LONG TERM CARE EVENT

THE WHITE HOUSE

JANUARY 4, 1999

GOOD MORNING. IT'S A GREAT PLEASURE TO JOIN THE PRESIDENT IN WELCOMING ALL OF YOU TO THE WHITE HOUSE.

FIRST, I WANT TO WISH EVERYONE HERE A VERY HAPPY NEW YEAR. IN FACT — I FIND IT PARTICULARLY FITTING THAT FOR OUR FIRST OFFICIAL WHITE HOUSE EVENT IN 1999 — WE'VE COME TOGETHER TO TALK ABOUT AN ISSUE THAT AFFECTS EVERY AMERICAN FAMILY -- IN EVERY COMMUNITY. AND THAT'S THE CHALLENGE OF PROVIDING QUALITY, LONG TERM CARE FOR OUR PARENTS, GRANDPARENTS, AND OTHER FAMILY MEMBERS.

TODAY, AS WE THINK ABOUT ALL THAT WE ARE THANKFUL FOR, IN OUR OWN LIVES AND IN THE PEACE AND PROSPERITY OF OUR NATION, WE THINK AS WELL ABOUT OUR SACRED RESPONSIBILITIES TO EACH OTHER.

I'M PLEASED THAT TREASURY SECRETARY RUBIN, HHS SECRETARY SHALALA, DIRECTOR OF THE OFFICE OF PERSONNEL JANICE LA CHANCE; AND MEMBERS OF CONGRESS ARE HERE WITH US TODAY FOR THESE IMPORTANT ANNOUNCEMENTS -- AND THAT THE VICE PRESIDENT AND TIPPER WILL BE JOINING US BY SATELLITE FROM AN ADULT DAY CARE CENTER IN SACRAMENTO, CALIFORNIA. LATER, THEY WILL TALK TO US ABOUT PEOPLE THEY HAVE MET WHO COULD BENEFIT FROM SOME HELP IN CARING FOR THEIR DISABLED AND CHRONICALLY ILL FAMILY MEMBERS.

EVERY FAMILY HAS ITS OWN OWN STORIES ABOUT HOW DIFFICULT IT IS TO SEE THOSE WE LOVE GROW INFIRM OR BECOME DISABLED, AND THE CHALLENGES WE ALL FACE IN GIVING THEM THE CARE AND MEDICAL ATTENTION THEY NEED AND DESERVE. I KNOW HOW HARD IT WAS TO WATCH MY OWN FATHER WEAKEN, NOT ALWAYS KNOWING WHAT MORE I OR ANYONE ELSE COULD DO.

TODAY, MILLIONS OF AMERICANS VOLUNTARILY PROVIDE UNPAID, INFORMAL LONG TERM CARE TO FAMILY MEMBERS OR FRIENDS. IN FACT, ALMOST 40% OF ALL INFORMAL CAREGIVING TO AGING AMERICANS IS PROVIDED BY THEIR CHILDREN, AND MOST OF THEM ARE THEIR DAUGHTERS WOMEN. AND TODAY, MORE AND MORE WORKING FAMILIES ARE CAUGHT IN THE MIDDLE BETWEEN NURTURING THEIR GROWING CHILDREN AND NURSING THEIR AGING PARENTS.

WE'VE COME TO CALL THIS THE "SANDWICHED" LIFE — BUT THAT PHRASE DOESN'T COME CLOSE TO DESCRIBING THE SMALL, DAILY ACTS OF LOVE AND FRUSTRATION; TRIUMPH AND WORRY; HOPE AND EXHAUSTION, THAT ARE SO FAMILIAR TO THOSE STRUGGLING TO MEET THE MANY DIFFERENT NEEDS OF THEIR LOVED ONES.

I'M PROUD OF MY HUSBAND'S AND THIS ADMINISTRATION'S ACCOMPLISHMENTS IN HELPING AMERICA'S PARENTS MEET THE DEMANDS OF WORK AND FAMILY -- INCLUDING CARING FOR THEIR PARENTS AND OTHER RELATIVES.

FROM SUPPORT FOR QUALITY, AFFORDABLE CHILD CARE -- WHICH HELPS AMERICANS FULFILL THEIR OBLIGATIONS AS WORKERS AND PARENTS -- TO EXPANDED AFTER SCHOOL PROGRAMS -- WHICH ENABLE PARENTS TO BREATHE EASIER DURING THE AFTERNOON HOURS — TO BETTER HOME AND COMMUNITY-BASED LONG TERM CARE FOR THE ELDERLY -- THE PRESIDENT'S AGENDA IS HELPING MILLIONS OF FAMILIES TO MEET THEIR MOST IMPORTANT OBLIGATIONS -- CARING FOR THEIR LOVED ONES. THE PROGRESS WE'VE MADE REFLECTS THE TIRELESS EFFORTS NOT ONLY OF THIS PRESIDENT -- BUT OF EVERYONE HERE IN THIS ROOM THIS MORNING.

CAREGIVERS

TODAY, THE PRESIDENT WILL ANNOUNCE NEW PROPOSALS TO FURTHER EASE THE LIVES OF BOTH CARE GIVERS AND THOSE WHO NEED THEIR CARE -- NOT ONLY THE ELDERLY -- BUT PEOPLE OF ALL AGES WHO HAVE DISABILITIES, INCLUDING CHILDREN. THIS IS TRULY A MULTI-GENERATIONAL PROPOSAL.

THESE INITIATIVES WILL BUILD ON THE PRESIDENT'S ALREADY DEEP COMMITMENT TO THE WELL BEING OF OLDER AMERICANS AND THE DISABLED — WHICH INCLUDES EFFORTS TO PROMOTE HIGHER QUALITY NURSING HOMES, A FAR STRONGER MEDICARE PROGRAM, AND MAKING MEDICAID MORE FLEXIBLE.

AND NOW — IT IS MY PLEASURE TO INTRODUCE PATRICIA DARLAK [DAR-LICK] -- WHO KNOWS FIRSTHAND THE CHALLENGES OF TRYING TO BE A GOOD MOTHER TO HER CHILDREN -- A GREAT TEACHER TO HER STUDENTS -- AND A LOVING AND RESPONSIBLE DAUGHTER TO HER OWN AILING MOTHER. THE INITIATIVES ANNOUNCED BY THE PRESIDENT TODAY ARE DESIGNED TO SUPPORT PEOPLE LIKE PATRICIA -- WHO ARE PROVIDING CARE TO AGING LOVED ONES -- OFTEN IN THE MIDST OF AN ALREADY DEMANDING LIFE.

THE WHITE HOUSE

WASHINGTON

January 3, 1999

NEW INITIATIVE TO ADDRESS GROWING LONG-TERM CARE NEEDS AND SUPPORT FAMILY CAREGIVERS

DATE:	January 4, 1999
TIME:	10:30 am to 11:00 am (Pre-brief)
	11:00 am to 11:15 am (Meet and Greet)
	11:15 am to 12:10 pm (Event)
LOCATION:	Oval Office (Pre-brief)
	Blue Room (Meet and Greet)
	Grand Foyer (Event)
FROM:	Bruce Reed / Chris Jennings

I. PURPOSE

You are unveiling a new long-term care initiative to support Americans with long-term care needs and the millions of family members who care for them.

II. BACKGROUND

You will unveil a new, four-pronged, $6.2 billion (over five years) initiative that takes important steps to address the complex needs of Americans with long-term care needs and their family members through:

- **Supporting families with long-term care needs through a $1,000 tax credit.** This initiative, for the first time, acknowledges and supports millions of Americans with long-term care needs or the family members who care for and house their ill or disabled relatives through a $1,000 tax credit. This new tax credit supports the diverse needs of families by compensating for a wide range of formal or informal long-term care services for people of all ages with three or more limitations in activities of daily living (ADLs) or a comparable cognitive impairment. This proposal, which supports rather than supplants family caregiving, would provide needed financial assistance to about 2 million Americans, including 1.2 million older Americans, over 500,000 non-elderly adults, and approximately 250,000 children. It costs $5.5 billion over five years and the credit phases out beginning at $110,000 for couples and $75,000 for unmarried taxpayers.

- **Creating a new National Family Caregiver Support Program.** Recent studies have found that services like respite care can relieve caregiver stress and delay nursing home entry, and that support for families of Alzheimer's disease patients can delay institutionalization for as long as a year. This new nationwide program, strongly advocated by the Vice President, would support families who care for elderly relatives with chronic illnesses or disabilities by enabling states to create "one-stop-shops" that provide: quality respite care and other support services; critical information about community-based long-term services that best meet a family's needs; and counseling and support, such as teaching model approaches for caregivers that are coping with new responsibilities and offering training for complex care needs, such as feeding tubes. This program, which costs $625 million over five years, would serve approximately 250,000 families nationwide.

- **Launching a national campaign to educate Medicare beneficiaries about the program's limited coverage of long-term care and how best to evaluate their options.** Nearly 60 percent of Medicare beneficiaries are unaware that Medicare does not cover most long-term care, and many do not know what long-term care services would best meet their needs. This $10 million nationwide campaign would provide all 39 million Medicare beneficiaries with critical information about long-term care options including: what long-term care Medicare does and does not cover; how to find out about Medicaid long-term care coverage; what to look for in a quality private long-term care policy; and how to access information about home and community-based care services that best fit beneficiaries' needs.

- **Having the Federal government serve as a model employer by offering quality private long-term care insurance to Federal employees.** You will also call on the Congress to pass a new proposal that authorizes OPM, representing the nation's largest employer, to use its market leverage and set a national example by offering non-subsidized quality private long-term care insurance to all federal employees, retirees, and their families. This proposal, which costs $15 million over five years, will provide employers a nationwide model for offering quality long-term care insurance. OPM anticipates that approximately 300,000 Federal employees would participate in this program.

Expected Response From Validators. We expect aging advocacy organizations, like AARP and the Alzheimer's Association to be very supportive of your policy. The advocates appear to be impressed that your proposal recognizes the multi-faceted nature of the problems facing the nation's chronically ill and are pleased that you are focusing the initiative on all age groups rather than just the elderly. They will caution, though, that however positive this proposal is, it does not address all of the long-term care challenges facing the nation. We have assured them that we will not make such a claim; indeed, it would hurt us among independent validators as well as the Republican Congress if we were proposing a much more expansive approach.

Withdrawal/Redaction Marker
Clinton Library

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Domestic Policy Council
Eric Morse (Events)
OA/Box Number: 21192

FOLDER TITLE:
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2011-0619-S
rc299

RESTRICTION CODES

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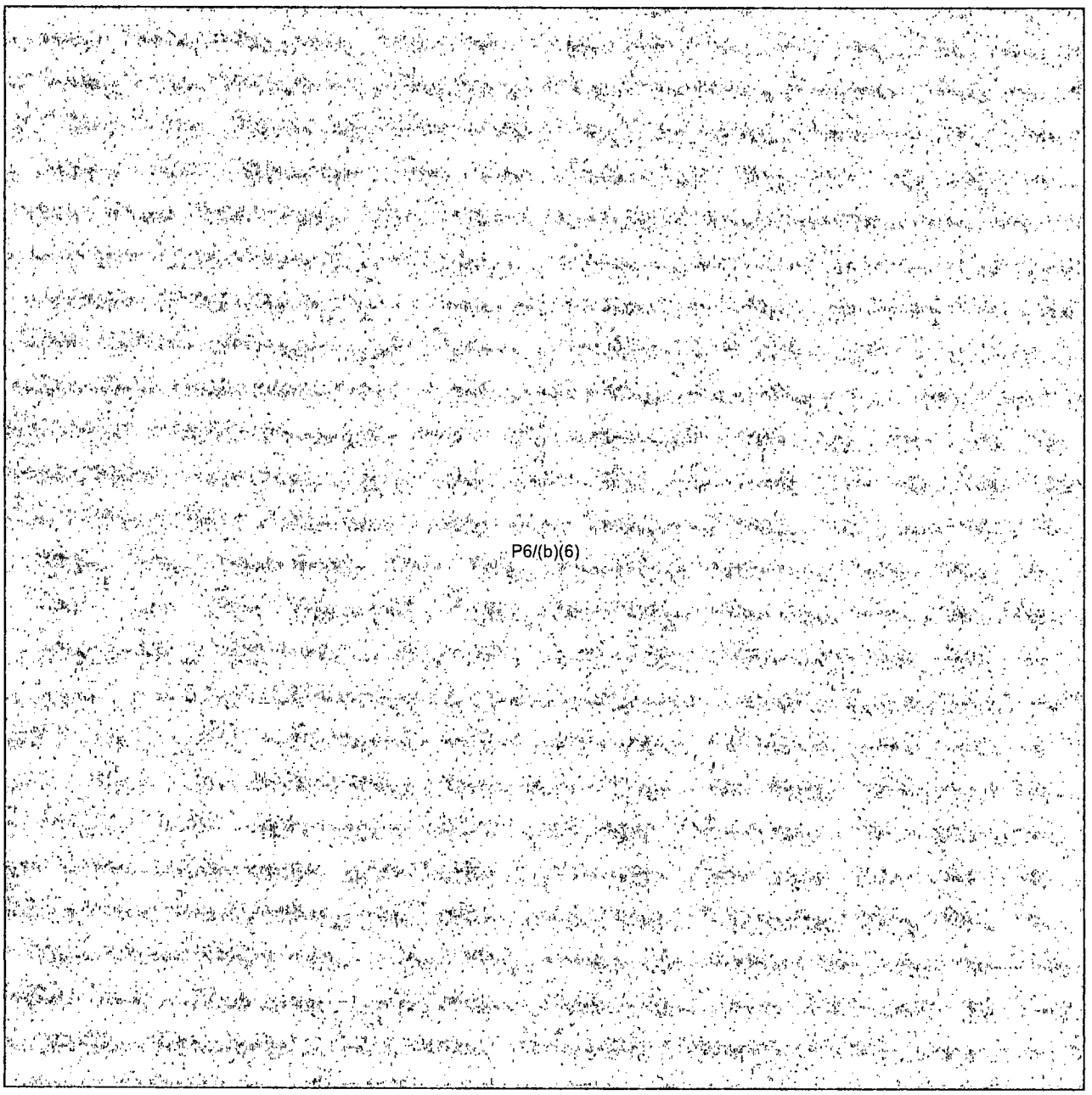
Role of the Vice President and Mrs. Gore. The Vice President and Mrs. Gore are participating in this event from the Triple "R", an adult day care program that is part of a successful California statewide caregiving program and that serves approximately 30 families in the Sacramento area. The California program, one of the four model caregiver support programs that currently exist, is similar to the National Family Caregiver Support Program that the Administration is launching nationwide on January 4. The Vice President and Mrs. Gore, who will meet with a number of families with long-term care needs during your remarks, will join you via satellite at 11:40 am to discuss the experiences of these families and to validate the need for your long-term care initiative.

Program Participants



[001]

III. PARTICIPANTS

Briefing Participants
You
The First Lady
Secretary Shalala
Secretary Rubin
Janice LaChance
Bruce Reed
Gene Sperling
Chris Jennings

Program Participants (Washington, DC)
You
The First Lady
Secretary Shalala
Secretary Rubin
Janice LaChance
Patricia Darlak

Program Participants (Sacramento, CA)
The Vice President
Mrs. Gore

IV. PRESS PLAN

Information about the new initiative has been advanced to all major national papers for Monday. In addition, Secretaries Rubin and Shalala, together with Director LaChance, will brief members of the press at the beginning of Joe Lockhart's daily briefing.

V. SEQUENCE OF EVENTS

-- **You** and the First Lady, together with Secretary Rubin, Secretary Shalala, and Director LaChance, will spend 15 minutes meeting with Patricia Darlak in the Blue Room.

-- **You** and the First Lady, together with Secretary Rubin, Secretary Shalala, Director LaChance and Patricia Darlak, are announced into the Grand Foyer.

-- The First Lady delivers remarks and introduces Patricia Darlak.

-- Patricia Darlak delivers brief remarks and introduces **you**.

-- **You** deliver remarks.

-- The First Lady introduces the Vice President and Mrs. Gore via satellite.

-- **You** proceed to your seat.

-- The Vice President and Mrs. Gore deliver remarks. (**You** will ask follow-up questions to be provided by speechwriting).

-- Upon conclusion of the discussion, the Vice President makes concluding remarks and bids farewell.

-- **You** deliver concluding remarks and depart.

VI. REMARKS

Your remarks have been prepared by speechwriting.

VII. ATTACHMENTS

-- Rationale for the long term care initiative
-- Background on the California program

BACKGROUND AND RATIONALE: THE LONG-TERM CARE INITIATIVE

Americans of all ages, particularly the elderly and their families, fear developing a need for intense, ongoing long-term care. Unlike acute care, long-term care is rarely paid for by private insurance and Medicare, and is more likely to require out-of-pocket expenditures. It also takes a huge financial and emotional toll on family and friends who provide most of this care. Because of its complexity, however, no single policy can "solve" this problem. Thus, your proposed initiative is multi-faceted, providing immediate assistance with long-term care & helping to prepare for what will surely be one of the great challenges as the baby boom generation ages.

GROWING NEED FOR LONG-TERM CARE

- **Who needs long-term care.** People with chronic illness or disability not only need doctor, hospital and other acute care services --they also need a wide range of services to manage their health conditions and perform basic activities of daily living. For example, people with strokes may be bed-bound due to paralysis and need help with eating, moving and changing their feeding tubes. Diabetics or people with congestive heart failure may require frequent injections, medication and doctor visits. People with Alzheimer's disease often need constant monitoring and changes to their physical environment to allow them to live at home safely. Long-term care encompasses these and other services. It is probably the most complicated area of health care, since it varies based on a person's specific condition and limitations as well as access to care from institutions, health providers, families and friends.

  About 5 million Americans of all ages have significant limitations (cannot perform 3 or more activities of daily living without assistance) because of illness or disability and thus require long-term care. Nearly 2 million of these people live in nursing homes; the remainder live in the community and benefit from irreplaceable and uncompensated caregiving from countless relatives and friends. In addition, millions more Americans have chronic illnesses or disabilities that are less limiting but still require long-term care.

  More than two-thirds of people with long-term care needs are elderly --nearly half of all people age 85 and older need assistance with everyday activities. Older women are more likely to need long-term care than men; three-fourths of nursing home residents are women.

- **The aging of America will create a greater need for long-term care.** The sheer increase in number of elderly in the next century means more chronic illnesses. The number of people age 65 years or older will double by 2030 (from 34.3 to 69.4 million), so that one in five Americans will be elderly. The number of people 85 years or older will grow even faster (from 4.0 to 8.4 million). By 2050, the number of older, disabled people could double.

- **Not just a challenge for the elderly**. About 2 million people with substantial long-term care needs are younger than age 65. The rate of disability has been rising among children. In part, this reflects a little-noticed effect of the success in helping premature, sick, or disabled newborns. Their increased survival through infancy has led to a need for long-term care as they grow up. Also, many adults have long-term care needs due to lifelong health conditions (e.g., cerebral palsy) or conditions developed as adults (e.g., multiple sclerosis).

LONG-TERM CARE SYSTEM

- **Medicare was not designed to cover long-term care.** Long-term care costs account for nearly half (44 percent) of all uncovered, out-of-pocket health expenditures for Medicare beneficiaries. When it was created in 1965, Medicare was modeled after a typical private insurance policy and thus did not include long-term care coverage.

  Unfortunately, nearly 60 percent of all Medicare beneficiaries --and two-thirds of people under age 65 --do not realize that Medicare does not pay for long-term nursing home care. This means that the majority of Americans are unprepared for the financial and emotional challenges of paying for and/or providing long-term care.

- **Medicaid is already the major payer of long-term care, but historically has focused on nursing homes.** Medicaid is the largest payer of long-term care in the nation. It covers two-thirds of nursing home residents --many of whom become eligible for this income-related program because long-term care costs impoverish them. Nursing home costs average almost $50,000 per year. About 80 percent of Medicaid long-term care costs are for nursing homes.

  The remaining 20 percent of costs are for home and community-base long-term care services. The share of Medicaid long-term care spending going toward home and community-based services has more than doubled in the last 10 years. Ten years from now, Medicaid spending on these services is projected to equal spending on nursing homes. The President has encouraged the shift away from Medicaid's "institutional bias" by approving over 300 waivers for local home and community-based care programs and proposing to repeal the need for such waivers. Notwithstanding these advances, not all Medicaid beneficiaries with long-term care needs have community-based options, and many people with long-term care needs don't qualify for Medicaid at all.

- **Private insurance is relatively new, untested, and covers very few people.** Only about 4 million Americans --1.5 percent of all Americans --have private long-term care insurance. In part, this reflects the newness of the coverage, the inconsistency of benefits across policies, variable regulation, and low demand. Given their cost, even if every baby boomer who could afford private insurance purchased it, less than one-third of long-term care costs would be paid for by private insurance in 2030.

- **Families and friends provide most long-term care.** Informal caregiving is a part of family life for many Americans. About 70 percent of caregivers report it being a positive experience. Only about one-third of the 5 million people with substantial long-term care needs lives in a nursing home --virtually all of the 3 million community-based people with similar needs rely on one or more relatives or friends for help. The millions of caregivers that provide nearly full-time assistance for these people with severe needs are part of a larger group of Americans that help people with less intense long-term care needs.

However, the costs of such caregiving --in time, money, and physical and emotional strain --can be large. Two-thirds of working caregivers report experiencing conflicts that cause them to rearrange their work schedules, work fewer hours, or take an unpaid leave of absence from work. Most of the primary caregivers for the elderly are elderly themselves. Their average age is 60 years old, and half are older than 65. About one third describe their own health as "fair to poor." This presents problems since informal caregiving often requires physical work like heavy lifting, frequent bedding changes, dressing and bathing. These stresses tend to be more severe for families of people with Alzheimer's disease. Such caregivers tend to experience greater time demands, family conflict, strain, mental and physical problems, and financial hardship.

CALIFORNIA'S STATEWIDE CAREGIVING RESOURCE PROGRAM

California is one of four states in the nation which provide model statewide family caregiving resource programs similar to the one that the Administration is launching nationwide today.

California's Department of Mental Health developed a program in 1984 to provide caregiver support services through eleven agencies statewide to provide support services for families caring for persons with Alzheimer's disease, Parkinson's disease, stroke, and traumatic brain injury. In 1996, California's Caregiver Resource Centers served over 10,000 family members and friends who care for loved ones suffering from Alzheimer's disease, stroke, Parkinson's disease, multiple sclerosis, traumatic brain injury, and other adult-onset, brain impairing diseases. The Centers' primary functions include the provision of respite care (e.g. in-home respite care, adult day services, or weekend respite camps), information, education, long-term planning, legal/financial consultations, training, and support groups.

Recent statewide assessments of this program have shown that the typical caregiver in California is 60 years old and most (76 percent) are women, and they typically provide about 10.5 hours per day of care. Depression continues to be a pervasive problem for caregivers; approximately six out of 10 caregivers in California's program have been diagnosed with depression.

January 3, 1999

NEW INITIATIVE TO ADDRESS GROWING LONG-TERM CARE NEEDS AND SUPPORT FAMILY CAREGIVERS

DATE:	January 4, 1999
TIME:	10:30 am to 11:00 am (Pre-brief)
	11:00 am to 11:15 am (Meet and Greet)
	+11:15 am to 12:10 pm (Event)
LOCATION:	Oval Office (Pre-brief)
	Blue Room (Meet and Greet)
	Grand Foyer (Event)
FROM:	Bruce Reed / Chris Jennings

I. PURPOSE

You are unveiling a new long-term care initiative to support Americans with long-term care needs and the millions of family members who care for them.

II. BACKGROUND

You will unveil a new, four-pronged $6.2 billion (over five years) initiative that takes important steps to address the complex needs of Americans with long-term care needs and their family members through:

- **Supporting families with long-term care needs through a $1,000 tax credit.** This initiative, for the first time, acknowledges and supports millions of Americans with long-term care needs or the family members who care for and house their ill or disabled relatives through a $1,000 tax credit. This new tax credit supports the diverse needs of families by compensating a wide range of formal or informal long-term care services for people of all ages with three or more limitations in activities of daily living (ADLs) or a comparable cognitive impairment. This proposal, which supports rather than supplants family caregiving, would provide needed financial assistance to about 2 million Americans, including 1.2 million older Americans, over 500,000 non-elderly adults, and approximately 250,000 children. It costs $5.5 billion over five years and the credit phases out beginning at $110,000 for couples and $75,000 for unmarried taxpayers.

- **Creating a new National Family Caregiver Support Program.** Recent studies have found that services like respite care can relieve caregiver stress and delay nursing home entry, and that support for families of Alzheimer's disease patients can delay institionalization for as long as a year. This new nationwide program, strongly advocated by the Vice President, would support families who care for elderly relatives with chronic illnesses or disabilities by enabling states to create "one-stop-shops" that provide: quality respite care and other support services; critical information about community-based long-term services that best meet a families' needs; and counseling and support, such as teaching model approaches for caregivers that are coping with new responsibilities and offering training for complex care needs, such as feeding tubes. This program, which costs $625 million over five years, would serve approximately 250,000 families nationwide.

- **Launching a national campaign to educate Medicare beneficiaries about the programs' limited coverage of long-term care and how best to evaluate their options.** Nearly 60 percent of Medicare beneficiaries are unaware that Medicare does not cover most long-term care, and many do not know what long-term care services would best meet their needs. This $10 million nationwide campaign would provide all 39 million Medicare beneficiaries with critical information about long-term care options including: what long-term care Medicare does and does not cover; how to find out about Medicaid long-term care coverage; what to look for in a quality private long-term care policy; and how to access information about home-and community-based care services that best fit beneficiaries' needs.

- **Having the Federal government serve as a model employer by offering quality private long-term care insurance to Federal employees.** You will also call on the Congress to pass a new proposal that authorizes OPM, representing the nation's largest employer, to use its market leverage and set a national example by offering non-subsidized quality private long-term care insurance to all federal employees, retirees, and their families. This proposal, which costs $15 million over five years, will provide employers a nationwide model for offering quality long-term care insurance. OPM anticipates that approximately 300,000 Federal employees would participate in this program.

Expected Response From Validators. We expect aging advocacy organizations, like AARP and the Alzheimer's Association to be very supportive of your policy. The advocates appear to be impressed that your proposal recognizes the multi-faceted nature of the problems facing the nation's chronically ill and are pleased that you are focusing the initiative on all age groups rather than just the elderly. They will caution, though, that however positive this proposal is, it does not address all of the long-term care challenges facing the nation. We have assured them that we will not make such a claim; indeed, it would hurt us among independent validators as well as the Republican Congress, if we were proposing a much more expansive approach.

Withdrawal/Redaction Marker
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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
002. memo	Bruce Reed and Bruce Jennings to President Clinton re: Long-Term Care Initiative (partial) (1 page)	01/03/1999	P6/b(6)

COLLECTION:
Clinton Presidential Records
Domestic Policy Council
Eric Morse (Events)
OA/Box Number: 21192

FOLDER TITLE:
Long Term Event 1/4/1999

2011-0619-S
rc299

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

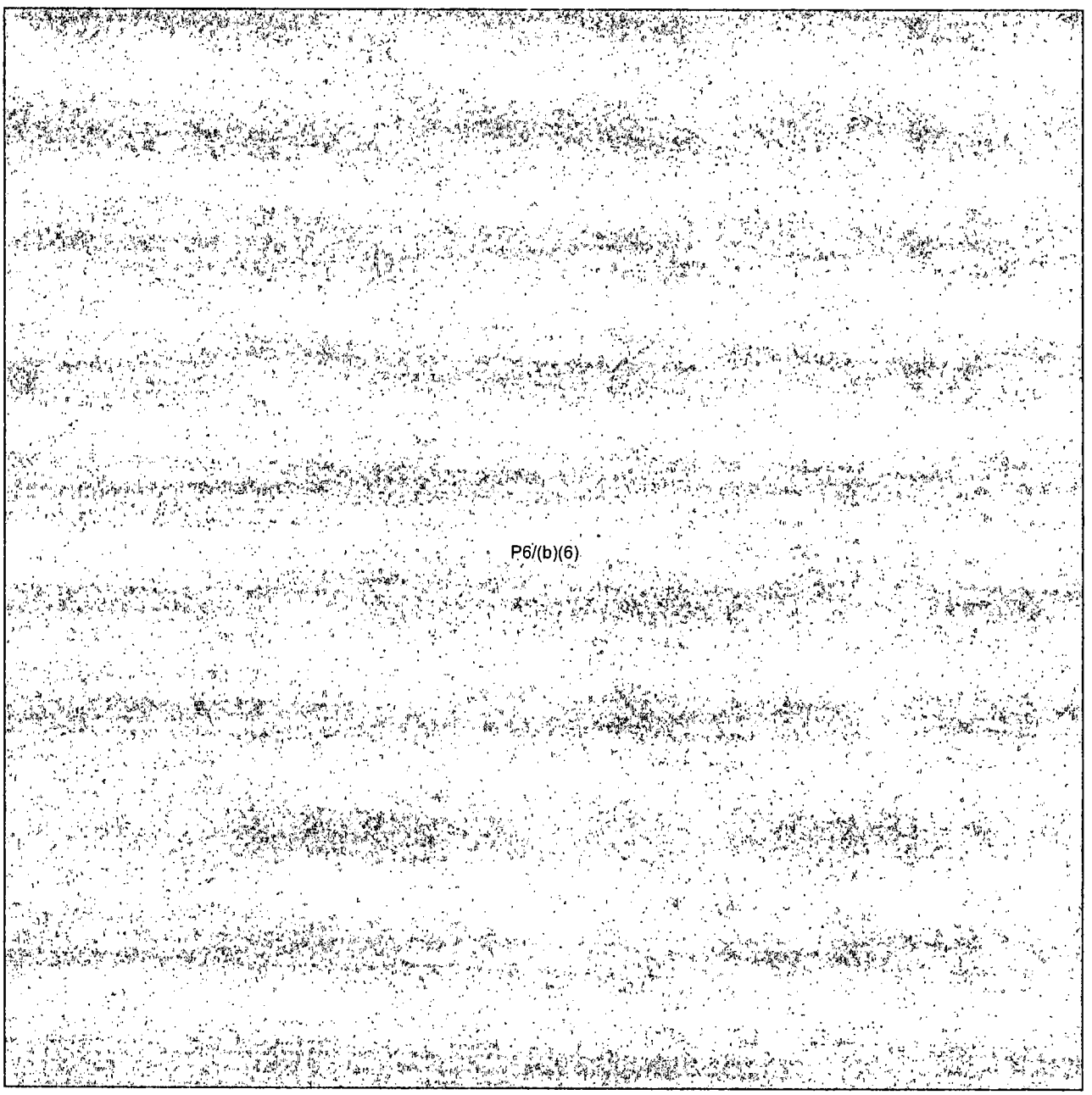
C. Closed in accordance with restrictions contained in donor's deed of gift.
PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).
RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

b(1) National security classified information [(b)(1) of the FOIA]
b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

Role of the Vice President and Mrs. Gore. The Vice President and Mrs. Gore are participating in this event from the Triple "R", an adult day care program that is part of a successful California statewide caregiving program and that serves approximately 30 families in the Sacramento area. The California program, one of the four model caregiver support programs that currently exist, is similar to the National Family Caregiver Support Program that the Administration is launching nationwide on January 4. The Vice President and Mrs. Gore, who will meet with a number of families with long-term care needs during your remarks, will join you via satellite at 11:40 am to discuss the experiences of these families and to validate the need for your long-term care initiative.

Program Participants



[002]

III. PARTICIPANTS

Briefing Participants
You
The First Lady
Secretary Shalala
Secretary Rubin
Janice LaChance
Bruce Reed
Gene Sperling
Chris Jennings

Program Participants (Washington, DC)
You
The First Lady
Secretary Shalala
Secretary Rubin
Janice LaChance
Patricia Darlak

Program Participants (Sacramento, CA)
The Vice President
Mrs. Gore

IV. PRESS PLAN

Information about the new initiative has been advanced to all major national papers for Monday. In addition, Secretaries Rubin and Shalala, together with Director LaChance, will brief members of the press at the beginning of Joe Lockhart's daily briefing.

V. SEQUENCE OF EVENTS

-- **You** and the First Lady, together with Secretary Rubin, Secretary Shalala, and Director LaChance, will spend 15 minutes meeting with Patricia Darlak in the Blue Room.

-- **You** and the First Lady, together with Secretary Rubin, Secretary Shalala, Director LaChance and Patricia Darlak, are announced into the Grand Foyer.

-- The First Lady delivers remarks and introduces Patricia Darlak.

-- Patricia Darlak delivers brief remarks and introduces **you**.

-- **You** deliver remarks.

-- **You** introduce the Vice President and Mrs. Gore via satellite, and take the open seat near the First Lady.

-- **You** proceed to your seat.

-- The Vice President and Mrs. Gore deliver remarks. (**You** will ask follow-up questions to be provided by speechwriting).

-- Upon conclusion of the discussion, the Vice President makes concluding remarks and bids farewell.

-- **You** deliver concluding remarks and depart.

VI. REMARKS

Your remarks have been prepared by speechwriting.

VII. ATTACHMENTS

-- Background on the California program

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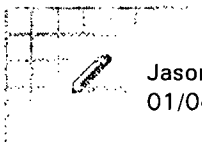

Jason H. Schechter
01/04/99 10:05:23 AM

Record Type: Record

To: See the distribution list at the bottom of this message

cc:

Subject: Fact Sheet: Long-Term Care Initiative to Support Family Caregivers and Help Address Growing Long-Term Care Needs

PRESIDENT CLINTON AND VICE PRESIDENT GORE UNVEIL HISTORIC LONG-TERM CARE INITIATIVE TO SUPPORT FAMILY CAREGIVERS AND HELP ADDRESS GROWING LONG-TERM CARE NEEDS
January 4, 1999

Today, President Clinton is unveiling an historic new initiative to support Americans with long-term care needs and the millions of family members who care for them. This four-part, $6.2 billion (over five years) initiative takes important steps to address complex long-term care needs through: (1) an unprecedented $1,000 tax credit that compensates, for formal or informal costs, Americans of all ages with long-term care needs or the family caregivers who support them; (2) a new National Family Caregivers Support Program that provides a range of critical services for caregivers such as respite, home care services, and information and referral; (3) a national campaign to educate Medicare beneficiaries about the programs' limited coverage and how best to evaluate long-term care options; and (4) a proposal to have the Federal government serve as a model employer by offering quality private long-term care insurance to Federal employees at group rates.

The President will be joined by First Lady Hillary Rodham Clinton, Secretary Rubin, Secretary Shalala, and OPM Director LaChance to unveil this initiative at the White House. The Vice President and Mrs. Gore are participating from an adult day care center in California, one of four states with model statewide family caregiving resource programs.

MILLIONS OF AMERICANS HAVE LONG-TERM CARE NEEDS

More and more Americans have a range of long-term care needs. Over five million Americans have significant limitations due to illness or disability and thus require long-term care. Approximately two-thirds are older Americans. Also, millions of adults and a growing number of children have long-term care needs because of health conditions from birth or a chronic illness developed later in life.

The aging of Americans will only increase the need for quality long-term care options. The number of Americans age 65 years or older will double by 2030 (from 34.3 to 69.4 million), so that one in five Americans will be elderly. The number of people 85 years or older, nearly half of whom need assistance with everyday activities, will grow even faster (from 4.0 to 8.4

million).

MULTI-FACETED INITIATIVE TO SUPPORT FAMILY CAREGIVERS AND ADDRESS GROWING LONG TERM CARE NEEDS. The President is unveiling a four-part initiative that is designed to address the broad-based and varied long-term care needs. It will: (1) provide immediate support and assistance for the millions of Americans who care for family members with major long-term care needs; (2) educate the elderly and people with disabilities about long-term care issues and options; and (3) promote new promising strategy directions for long-term care policy for the twenty-first century. The President is also asking the Vice President to host a series of forums around the nation to raise awareness about the need to support family caregivers and address the growing need for long-term care options.

-more-

The long-term care proposal being unveiled today by the President and Vice President includes:

Supporting families with long-term care needs through an historic $1,000 tax credit. This initiative, for the first time, acknowledges and supports millions of Americans with long-term care needs or the family members who care for and house their ill or disabled relatives through a $1,000 tax credit. This new tax credit supports the diverse needs of families by compensating a wide range of formal or informal long-term care for people of all ages with three or more limitations in activities of daily living (ADLs) or a comparable cognitive impairment. This proposal, which supports rather than supplants family caregiving, would provide needed financial support to about 2 million Americans, including 1.2 million older Americans, over 500,000 non-elderly adults, and approximately 250,000 children. It costs $5.5 billion over five years and phases out beginning at $110,000 for couples and $75,000 for unmarried taxpayers.

Creating an unprecedented National Family Caregiver Support Program. Recent studies have found that services like respite care can relieve caregiver stress and delay nursing home entry, and that support for families of Alzheimer's disease patients can delay institionalization for as long as a year. This new nationwide program, strongly advocated by the Vice President, would support families who care for elderly relatives with chronic illnesses or disabilities by enabling states to create "one-stop-shops" that provide: quality respite care and other support services; critical information about community-based long-term services that best meet a families' needs; and counseling and support, such as teaching model approaches for caregivers that are coping with new responsibilities and offering training for complex care needs, such as feeding tubes. This program, which costs $625 million over five years, would assist approximately 250,000 families nationwide.

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Having the Federal government serve as a model employer by offering quality private long-term care insurance to Federal employees. The President will also call on Congress to pass a new proposal that allows OPM to use its market leverage and set a national example by offering non-subsidized, quality private long-term care insurance to all federal employees, retirees, and their families at group rates. This proposal, that costs $15 million over five years, will provide employers a nationwide model for offering

quality long-term care insurance. OPM anticipates that approximately 300,000 Federal employees would participate in this program.

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