THE WHITE HOUSE

WASHINGTON

May 1, 1995

WHITE HOUSE CONFERENCE ON AGING
SPEECH PREP/BRIEFING

DATE: May 2, 1995
LOCATION: Oval Office
TIME: 12:45 - 1:30 pm
FROM: Jeremy Ben-Ami

I. PURPOSE

To review the speech you will be delivering to the White House Conference on Aging.

II. BACKGROUND

On Wednesday, May 3, 1995, you will be addressing the White House Conference on Aging. The Conference is a once-a-decade gathering of seniors from around the country to outline an agenda of concerns and policy proposals for older Americans. This is the first Conference convened by a Democratic President, and the last of this century.

In your speech, you will be reiterating your commitment to issues of importance to the senior community including the long-term stability of Social Security and taking a clear position on the current debate about cuts in Medicare.

III. PARTICIPANTS

The President
George Stephanopoulos
Gene Sperling
Don Baer
Terry Edmonds
Jeremy Ben-Ami

IV. PRESS PLAN

No press.

V. SEQUENCE OF EVENTS

Briefing.

VI. REMARKS

None required.

THE WHITE HOUSE

WASHINGTON

May 2, 1995

WHITE HOUSE CONFERENCE ON AGING

DATE:	May 3, 1995
LOCATION:	Washington Hilton Washington D.C.
TIME:	11:00 a.m. - 12:00 p.m.
FROM:	Jeremy Ben-Ami

I. PURPOSE

You are speaking at the opening plenary of the 1995 White House Conference on Aging. Your remarks are a charge to the delegates as they begin the 3-day Conference. Your remarks will focus on Republican proposals to cut Medicare and Medicaid in the context of their forthcoming budget.

II. BACKGROUND

The White House Conference on Aging is a once-a-decade gathering of seniors from around the country to outline an agenda of concerns and policy proposals for older Americans. This is the fourth Conference -- previous ones were held in 1961, 1971 and 1981. This will be the last Conference of this century.

The 1995 Conference began on Tuesday evening with a Senior Speak-out and will continue until noon Friday. Numerous administration and elected officials will be addressing the Conference during plenary sessions on Wednesday and Thursday. The 2,300 delegates will spend the remainder of their time in "issue groups" where they will be discussing resolutions in four broad areas: economic security, health care, housing, and other quality of life issues. Primary issues of concern to the delegates include the long term solvency of Social Security, potential cuts to Medicare and Medicaid, and issues such as housing and crime which affect their quality of life.

The Conference will result in resolutions that will be voted on during the Friday plenary. Following the Conference, there will be a series of events around the country designed to ensure follow-through on the resolutions and to monitor results. Just as the Conference agenda and resolutions were the result of over 800 local events in the year leading up to the Conference, there will be a full schedule of events around the resolutions for the year following the Conference.

III. PARTICIPANTS

The President
The Vice President
Senator David Pryor

IV. PRESS PLAN

Open Press.

V. SEQUENCE OF EVENTS

Pre-arrival Prior to your arrival, there will be several speakers including Secretaries Shalala and Brown; Senators Mikulski, Pryor, and Cohen; Representatives Martinez and Morella; Dr. Robert Butler (chair of the Advisory Committee), Dr. Arthur Fleming, and Hugh Downs.

There will be a video introduction and a chorus will provide entertainment.

Post-arrival

You and the Vice President are announced.

Senator Pryor introduces the Vice President.

The Vice President speaks.

Senator Pryor introduces you.

You speak.

Following your remarks, you will work the ropeline to greet delegates and you will depart.

VI. REMARKS

To be provided by Speechwriting.

President Clinton Addresses
White House Conference on Aging:
Vows to Reform Health Care "The Right Way."
Wednesday, May 3, 1995

Today, President Clinton will speak to the White House Conference on Aging where he will renew his commitment to fighting for America's seniors. The Clinton Administration is committed to addressing the concerns of older Americans, particularly making sure that they are economically secure. That is why President Clinton has taken steps to:

- Ensure the long-term integrity of the Social Security Trust Fund;
- Vowed to make sure that Social Security benefits are not used to balance the budget or pay for tax cuts for the wealthy;
- Signed the Retirement Protection Act to make the pension system more reliable;
- Proposed IRAs to allow Americans to save money and withdraw it tax-free for the cost of a major medical expense or the care of a sick parent;
- Invested in the Older Americans Act that provides benefits to millions of Americans; and, **most importantly,**
- Vowed to fight for real health care reform and against cuts in Medicare and Medicaid to fund tax cuts for the wealthy.

Medicare and Medicaid have provided a safety net for our nation's elderly for 30 years. Today, Medicare covers 37 million elderly and disabled Americans. And, while the myth is that Medicaid helps only low-income women and children, the reality is that about two-thirds of Medicaid funds are spent on services for older Americans and people with disabilities.

These programs are an example of government that works. This year, as we celebrate the 30th anniversary of their passage, we must remember that:

- Medicare and Medicaid have lifted millions of older Americans out of poverty. Before Medicare, almost 30 percent of our nation's elderly lived in poverty -- as compared with 12 percent today.

- Before Medicare, about 45 percent of the elderly had no health insurance and even more were underinsured. For 30 years, Medicare has guaranteed health security to older Americans --even as the number of uninsured in this country continues to rise.

- And Medicaid has helped middle class families who have exhausted their savings to manage the overwhelming costs of nursing home care. Without Medicaid, families with a parent or spouse who needs long-term care would face nursing home bills that average $38,000 a year.

We Must Address Health Care Spending. We cannot get hold of the deficit without addressing growing health care entitlement spending. This is a real problem that must be addressed. Federal health care costs are growing faster than the economy, faster than overall inflation, and faster than almost all other government spending. **We must contain costs in these programs, but there is a right way and a wrong way to do so.**

- **The Wrong Way to Address Health Care Spending.** The wrong way is to:
  - Simply slash Medicare and Medicaid;
  - Use these programs to pay for tax cuts for the wealthy and campaign promises;
  - Increase Medicare out-of-pocket expenses so much that medical care becomes unaffordable.
  - Go backward and reduce coverage; and
  - Make changes in Medicare that lead to coercion over choice.

- **The Right Way to Address Health Care Spending.** President Clinton has said that the right way to contain costs in Federal health programs and to deal with the deficit and the long-term problem of the Medicare Trust Fund is through health care reform. As we reform health care, we must ensure that changes to Medicare and Medicaid maintain coverage, choice, quality and affordability.

  President Clinton will have a simple test for every proposal. He will ask:

  (1) **Coverage.** Does it work toward our goal of expanding coverage or does it go backward and increase the number of uninsured Americans?

  (2) **Choice.** Does it expand choice in Medicare? Or does it financially coerce beneficiaries into managed care plans?

  (3) **Quality.** Will this proposal reform the Medicare and Medicaid programs to make them more efficient without harming the delivery system, threatening quality and increasing cost shifting to small businesses? Or are these simply arbitrary and excessive cuts used to pay for other priorities -- like tax cuts for the wealthy?

  (4) **Affordability.** Will this proposal increase costs for beneficiaries so much as to make quality medical care unaffordable for older Americans? Will it take responsible steps to contain costs?

Cracking Down on Fraud and Abuse. The Clinton Administration is taking steps now to reform our health care system and to improve our health care programs. Simply put, fraud jeopardizes the health of beneficiaries and rips off the government, and we must do all we can to stop it. Since the Clinton Administration began, we have vigorously cracked down on fraud and abuse in Medicare and Medicaid. In just another example of our consistent efforts to combat fraud and abuse -- as part of our "Reinventing Government" proposal -- we will create a partnership between government and private agencies to fight fraud in five states.

THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release May 3, 1995

REMARKS BY THE PRESIDENT
TO THE WHITE HOUSE CONFERENCE ON AGING

Washington Hilton
Washington, D.C.

11:52 A.M. EDT

THE PRESIDENT: Thank you so much. Thank you, Mr. Vice President. Thank you for your remarks, and thank you for doing such a good job for America. (Applause.) Thank you, Secretary Shalala, Secretary Brown, Mr. Fleming, Mr. Blancato, Fernando Torres-Gil. Hugh Downs, thank you for being master of ceremonies. I wish I could sit here and watch you work the whole time. I'm delighted to see you. (Applause.)

To Congressman Martinez and Congresswoman Morella, the former members of Congress who are here; the senators who have gone because they have to vote. I want to say a special word of thanks to the Conference chair and one of the best friends I ever had in my life, David Pryor. I think he is a wonderful man. (Applause.)

As all of you know, Senator Pryor is now retiring from the Senate. I can remember when, as a young congressman, he once volunteered as an orderly in Washington area nursing homes to document the conditions under which seniors were then living. And when he couldn't get the members of Congress to listen, he conducted hearings out of a trailer in a parking lot. The trailer led to the creation of Claude Pepper's House Aging Committee. And as chairman of the Senate's Special Committee on Aging, David Pryor has led fight after fight after fight for the interest of the seniors in this country, especially in his efforts to expand the availability and limit the cost of prescription drugs. We will miss him, and we should be grateful to him. (Applause.)

I'm glad to see all of you in such good spirits. I hope you will stay that way. (Laughter.) I hope you'll stay that way because I am identifying more and more with you and -- (laughter) --and I understand Secretary Shalala read the letter we got from the child that

said old people are smart and Bill Clinton is old. (Laughter.)

I remember very clearly about six or seven years ago when I had two events occur within two days, when I knew I was getting older. My hair had begun to gray, but I thought I was still in reasonably good shape. I felt fairly chipper. And I was making the rounds in my state and this beautiful young girl, whose parents were very close friends of mine and, therefore, I felt that I almost had a hand in her upbringing from the time she was born -- she was 18 or 19 years old and she was nearly six feet tall. And she was just beautiful. And she came up to me -- I was so please to see her -- she came up to me and threw her arm around me, looked me straight in the eye, and she said, "Governor, you look so good for a man your age." (Laughter.)

And then, the very next day I was in a different part of the state, and I saw this wonderful retired school teacher who was then 80 years old, who had worked in every single campaign I had ever run. And I was so happy to see her. And she said, "Governor, I'm so glad to see you. You're aging gracefully." (Laughter.)

But I think the right thing about this, you know, is to have a good attitude about it. All of you have a good attitude. (Applause.) And you -- that's a big part of this. (Applause.)

I just want to tell you one more story that illustrates the right attitude. It's a true story. We had a man in north Arkansas in a little rural county who ran a tiny phone company back when there were lots of these little phone companies. And he was about 92 years old. And they decided to give -- actually, he was 96. And the people in the town decided they'd give him a banquet. And everybody got up and said nice things about him, you know, and the time came for him to speak. And he said, "The very first thing I want to do is to thank my secretary." And he introduced her, and she was 72. (Laughter.) He introduced her and said, "I want to thank my secretary. She has been with me for 40 years. She has been wonderful. I don't know what I'm going to do when she passes on." (Laughter and applause.)

So you've got to have the right attitude. Now, if you're all in the right attitude, let's get after it.

I am proud to convene this 1995 White House Conference on Aging. This is the fourth of these conferences in the history of our country; the first to be held since 1981; the last of the 20th century. I thank the members of Congress and the citizens of this country from both parties who have supported this endeavor. These conferences have a productive history -- from the establishment of Medicare, Medicaid and the Older Americans Act, as a result of the 1961 conference, to the creation of the House Select Committee on Aging, coming out of the 1971 conference.

But this conference must be about looking forward, not looking back. All across our country we have seen a dramatic reversal in the way we think about older Americans. We have, after all, twice as many older Americans as we had 30 years ago. And 30 years from now, we'll have twice as many again. People over 55 are younger, healthier, better educated than ever before, and beginning entirely new careers and endeavors in life as they grow older.

Your job here, more than anything else, is to help determine how to use the accumulated experience and judgment of older Americans to make all of our country stronger in the future. That is the purpose of our National Senior Corps, which works with AmeriCorps, our national service initiative in which -- (applause.) Thank you. The AmeriCorps program is a national service program in which young people earn money for their education by doing community service. And not all of them are young. I've met retired naval officers in Texas doing work in Americorps and intending to go back to college.

But the Senior Corps, like the AmeriCorps volunteers, are a new source of energy for American social problems and challenges. And they make sure that as the poet said, "The best is yet to be." Your conference agenda confirms your concern with the future. Issues such as crime, ethics and ways to inspire a renewed sense of community affect all Americans, regardless of their age. To be honest, seniors are in a better position than ever before to help us address these concerns.

I want to mention just a couple of thing that have happened since 1981 that are very important with reference to your agenda. First, briefly, since 1981, you and your generation won the Cold War and the battle against communism. And you can be very proud of that. And we are now trying to finish that work so that for the first time since the dawn of the nuclear age there are no Russian missiles pointing at the American people. (Applause.)

But we know there are still threats to our security, and we were reminded of it very painfully in the last few days. So I ask all of you as you focus on crime to remember that we need to continue to fight to lower the crime rate. And with a strategy of punishment, police and prevention, we can do that.

But we must focus on the special problems of terrorism to which all open societies are vulnerable. I have sent legislation to the Congress to address this terrorism problem. It has broad bipartisan support. The leaders of the Congress are working with me on it. We must pass it and pass it this month. And I urge you to take a stand for that on behalf of all Americans. (Applause.)

The other truly remarkable thing that's happened since 1981

affects you particularly. Just one year after the last conference in 1982, for the first time in this history of the United States, older Americans were less likely to be poor than Americans under 65. In the full span of our country's history, that is a stunning change and remarkable achievement. We have seen it happening over the course of the past several decades. Since 1960,the poverty rate among elderly people has declined by 65 percent. It did not happen by accident. It happened because the American people kept faith with the social compact first forged 60 years ago when President Roosevelt signed the Social Security Act. (Applause.)

That compact has been strengthened over the last three decades with Medicare, with Medicaid, with the cost of living adjustments for Social Security, with community-based services under the Older Americans Act like Meals on Wheels, transportation, with efforts to prevent abuse of the elderly. This is a remarkable record, and you should be proud of it. (Applause.) It happened because people understood that their government could be made to work for them in a positive and strong way. (Applause.) And it is something our country should be very proud of.

Now, our administration is committed to continuing that work -- first, to the core principles that have made Social Security work. America has a solemn commitment to every person still working, no matter what their age, that Social Security will be there for them and their families when they need it. (Applause.)

We have also worked to strengthen retirement and to make it safer through strengthening private pensions. The Retirement Protection Act signed late last year reformed the Pension Benefit Guaranty Corporation and secured 8.5 million pensions that were at risk in this country, stabilizing 40 million others. It was a remarkable bipartisan achievement. (Applause.)

So every American should be proud that we have completely altered the way our people live their lives as they grow older, providing new hope for an entire lifetime of purpose and dignity. But we must remember that with this kind of opportunity in a democracy goes continued responsibility. Our job today is to preserve this progress not only for you during your lifetimes, but for all generations of Americans to come.

You are here to look ahead to the next 10 years and beyond, and not just to the past or to your personal concerns. We know that with regard to seniors our country has been moving in the right direction. (Applause.) But the truth is, we know that too many younger Americans are not. We have to think about this: How are we going to pass along the next century with the American Dream alive and well for our children and grandchildren?

From the year I was born, right after the war, well into the '70s, almost to the end of the decade, people at all levels of our country grew economically, and they grew together. Prosperity was unprecedented. Without regard to income groups, people's incomes rose. Today, we have to face the hard fact that 60 percent of working Americans today are working for the same or lower wages than they were making 15 years ago while working, on average, a longer work week.

We also have a new class of poor people -- mostly unmarried, uneducated young women and their little children. We must do more to discourage the things that create poverty, especially teen pregnancy, and to require more education and efforts to enter the work force for those who are dependent upon welfare.

But the real problem facing this country is the problem of the middle class and stagnant earnings, and the insecurity of the American Dream that so many people feel, and the gnawing worry so many working people have when they come home at night that they won't be able to give their children a better life than they enjoyed.

The new split in the middle class is caused by the global economy and the technology revolution. And it is rooted, more than anything else, in one word -- education. (Applause.) We know that those who have it, and continue to get it and learn from a lifetime, do well, and those who don't tend not to do very well.

So as we look ahead to the next 10 years the question is, how can we preserve the gains and enhance the quality of life further, and enhance opportunities to serve and to live and to grow and to thrive for seniors, while reversing the economic fortunes of those who are stuck and being drivin away from the American Dream, who are younger and dealing with the fundamental problems of this country which include the education deficit, and also the budget deficit?

It exploded in the 12 years before I became President. It, too, is undermining our ability to give your children a better future and to build opportunity.

For the past two years, our administration has made great strides in dealing with that deficit. (Applause.) We've passed two budgets -- (applause) -- we've passed two budget that cut it by $600 billion over five years. I want you to hear this very carefully. When you hear that we have not cut spending, that we have not reduced the deficit -- we have reduced the deficit by $600 billion over five years, and this is the more important fact -- if it were not for the interest we must pay this year on the debt run up between 1981 and the end of 1992, the budget would be in balance today. (Applause.)

We have also worked to strengthen the Medicare trust fund. It

still has problems, but it's stronger than it was on the day I became President. (Applause.) Despite all that, we know we have to do more. I have been consistently saying for three years, beginning with my first address to the Congress and, indeed, all during my campaign in 1992, that we will never fundamentally solve the deficit problem and have the funds we need to invest in education and the future growth in earning of our people until we are able to moderate the growth of health care spending. (Applause.)

Ask any member of Congress here present today -- all defense and domestic spending are either frozen or declining. Social Security and other retirement income is increasing, but only at the rate of inflation. We have to pay interest on the debt, and we're driving that down, but that changes as interest rates change. The only thing that is going up by more than the rate of inflation and the increased population growth in the programs are the health care programs. Over the next five years alone, almost 40 percent of the growth in federal spending will come from the rise in federal health care costs. More than our economy is growing, more than inflation is going up, faster than other items of government spending. So let us not pretend that there is not a challenge here for us to face. And let us face the challenge with good spirits.

You and I know that there is a right way to face this challenge and a wrong way to face the challenge. But not facing the challenge is not an option. I believe it is wrong simply to slash Medicare and Medicaid to pay for tax cuts for people who are well-off. (Applause.) Beyond that, reducing the deficit is terribly important. But it is also important that Congress programs for seniors like Medicare. We must have a sense of what our obligations are. Some proposals would increase the out-of-pocket costs on Medicare by up to $35,000 for our seniors.

I also think it's wrong to cut Medicaid over $150 billion in ways that threaten long-term care for seniors. (Applause.) You know -- let me just say in parentheses here, I hope that if nothing else comes out of this conference, the American people will come to understand that Medicaid is not simply a program for poor people. Yes, it provides health coverage to people on welfare and their children. But two-thirds of the Medicaid budget goes to care for the seniors and the disabled in this country -- two-thirds of the Medicaid budget. (Applause.)

To give you a stark example if Medicaid were not there, middle class people all across this country struggling to raise and educate their children would face nursing home bills for their parents that would average $38,000 a year. Medicaid is primarily a program for the elderly and the disabled.

It is wrong in my judgment to reduce coverage under the Medicare program, or to undermine health services in rural and urban areas that

are already underserved, or to make changes that just simply coerce beneficiaries in managed care. We can't save Medicare and Medicaid by using savings to fund tax cuts for people who are already well-off or other purposes. That is the wrong way to approach this problem. (Applause.) But we must approach the problem. The right way is to start from the perspective of the people the system is intended to serve; to ask, what does it take to preserve and strengthen it, and what is fair to expect of everyone to do that -- to preserve and strengthen it.

For three years I have said that the right way is to strengthen Medicare and Medicaid by containing costs as part of a sensible overall health care reform proposal that works for everyone. (Applause.)

If you want to hold down costs, expand coverage, and reduce the deficit, you must reform the health care system. You have to expand long-term care, for example, in terms of the options for seniors, not restricted. Look at the growth in the population. Look at what's going to happen in the next 30 years. If you don't provide for people to get more long-term care in their home and in other less expensive settings -- (applause) -- if you don't provide --(applause) -- if you don't provide for alternatives to more expensive hospital care, if you don't provide, in other words for the problem in the least costly way, given what you know is going to happen to our population, then we will have greater costs, not lower costs.

So let's look at this in the right way. I do want to work with the Congress. But we must do it in the right way. I have said all along that I will evaluate proposals to change Medicare and Medicaid based on the issues of coverage, choice, quality, affordability and costs.

We ought to have some simple tests. For example, does a proposed change reduce health care coverage by eliminating services or by charging seniors with modest incomes more than they can possibly be expected to pay? Does it deal with this long-term care problem in a way that will lower costs per person in long-term care, but recognize that we have to have more options? Does it restrict choice by forcing seniors to give up their doctors and enter into managed care programs whether they're good ones or not? Or does it, instead increase choice by giving people incentives and options to enter into managed care programs and other less costly options that might be made more attractive to them? Does it reform Medicare and Medicaid to lower the rate of cost increases without threatening the quality of care? Does it keep health care affordable for seniors and does it help to control costs for the government?

Many people say, well, all these things are mutually inconsistent. But that cannot be. We are spending over 14 percent of

our income as Americans on health care. No other country is over 10 percent. We know that there are changes that we can make that will improve coverage, broaden services, control costs, and help us with the deficit. But we can only do it if we start from the point of view of what it takes to have a health care system with integrity that can be fairly paid for in a way fair manner. (Applause.)

So, while I will not support proposals to slash these programs, to undermine their integrity, to pay for tax cuts for people who are well off, or to pay for them -- all by themselves, to pay for these kinds of arbitrary targets on the budget, I cannot support the status quo. And neither can you. (Applause.)

We must find a way to make this system work better that deals with the internal issues of the system, your health care issues and those that are coming behind you, and that deals with the genuine problems the Congress faces with our budgetary situation. That's why I have said repeatedly that when the Republicans present their budget as required by law, we will evaluate where they are in terms of their commitment and what they want to do, where we are, and then we will do our best to work through this. I will not walk away from this issue. (Applause.)

I watched from afar when I was a governor and a citizen for 12 years while people here walked away from problem after problem. And I sustained, as President, an agonizing experience when large numbers of people walked away from problems that I asked them to face for short-term political gain. I will not do that. The status quo is not an option. (Applause.)

But in order for us to have discussions we have to know where everyone stands. I have presented a budget. I have said for three years where I stand. As soon as we see the budget that is legally mandated from the members of Congress who are in the majority, we will then talk about where we go from there and what we can do so that I can make sure that your interests and the interests of people coming behind you are protected, but that no one pretends that the status quo is an option. We can pursue both those goals and do it in the right way. (Applause.)

Now, let me also say there are problems -- right ways to address this problem that we in the Executive Branch can be doing right now. You know, waste, fraud and abuse has become a tired phrase in politics. But the truth is there's a lot of it in the health care system. And you know it as well as I do. With all the problems we have today with income for citizens, and with the budget for the government, people who rip this system off jeopardize the health of beneficiaries and the stability of our government and our economy.

Since the beginning of this administration, Secretary Shalala and Attorney General Reno have worked hard to crack down on fraud and abuse. And I am pleased to announce today that, as a part of phase two of the Vice President's outstanding reinventing government initiative, we are taking an additional strong measure. We are forming a multistate effort to identify, prosecute and punish those who willingly defraud the government and who victimize the public. (Applause.)

In five states, with nearly 40 percent of all the Medicare and Medicaid beneficiaries -- New York, Florida, Illinois, Texas and California -- we will have an unprecedented partnership of federal, state and private agencies. For every dollar we spend, we will save you six to eight dollars in the government's health care programs to stabilize what we need to be doing. (Applause.)

This is a win-win situation for everybody, except the perpetrators of fraud. And it's about time they lost one. (Applause.)

Let me close with this thought. This should be an exciting time for you. You should welcome this challenge. You should know that I will be there with you and for you to protect the legitimate interests of the senior citizens of this country, and not to see us trade the long-term welfare and health of the American people for anybody's short-term gain. (Applause.)

But you should also know that we need you to be here for us. We need for you -- (applause) -- we need for you to say, these are changes that make sense; these are changes that don't; these are things that will make us all stronger; these are things that will help you guarantee higher incomes and better wages and a better future for our children and our grandchildren. These are things that will bring us together.

This country is always strongest when we are together. (Applause.) We are always stronger when we are together. (Applause.)

I'll bet you more than half of the people in this room wept in the aftermath of that terrible tragedy in Oklahoma City. (Applause.) We were for a moment, once again, one family, outraged and heartbroken. And you saw what happened when people gave up their lives and came from all over the country to go there to help with the rescue effort, to help to deal with the families who are grieving, to help with all the efforts that were going on. That's when we're strong.

The theme of this conference is "Generations Aging Together." You know when we're together we're strong. And so many forces in America today are trying to turn us all into consumers --of goods or politics or other things -- so that we're all divided up in little markets and segmented, and we fight with each other all the time. And the people that provoke the fights make a lot of money or votes, or

whatever, out of us when we do that. (Applause.)

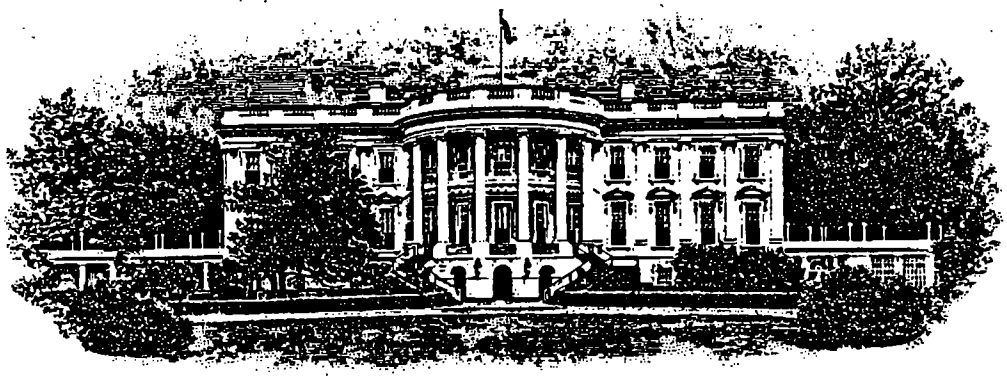
But that's not when we're strong. I saw the end of the film, when you quoted my speech at Normandy. I don't know that I have ever or ever will have a greater honor than to go and honor the generation of my parents for winning the second world war. We were one, because of what you did, because of your sacrifice.

And I just want to say to you today, we can win the challenges of today and tomorrow. We can make the 21st century an American century. We can continue the progress in expanding the quality of life for our seniors. We can solve the health care crisis. We can do it if we will do it together. Lead us there; help us there. And I will stay with you.

Thank you, and God bless you all. (Applause.)

END12:25 P.M. EDT

PRESIDENT CLINTON AND OLDER AMERICANS



1995 White House Conference on Aging

ADMINISTRATION RECORD AND ACCOMPLISHMENTS

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THE WHITE HOUSE

WASHINGTON

PRESIDENT CLINTON AND OLDER AMERICANS: ADMINISTRATION RECORD AND ACCOMPLISHMENTS

INTRODUCTION

Two years ago, President Clinton entered office with a vision for keeping the American dream alive as we prepare our nation for the challenges of a new century.

The end of the Cold War has changed the way we think about our national security. A new global economy has emerged, where goods, services, and information speed around the globe. And an aging society presents new opportunities and challenges for all of us.

When President Clinton took office, Americans were struggling in this new world. A harsh recession thwarted growth, holding unemployment up and wages down. Middle class American families, playing by the rules, were working harder and harder just to stay in place. Older Americans, after years of working hard and saving, found inflation and rising health care costs consuming more and more of their incomes and savings. Education costs were rising out of control, at a time when education was more important than ever to raise standards of living.

President Clinton believes that Americans who work hard and play by the rules deserve to be rewarded, and he has led a fight to restore the American dream. Americans of all ages are benefiting from this Administration's successes in restoring economic health, expanding educational opportunities, increasing homeownership, and fighting crime.

This document describes some of these successes and other Administration initiatives to employ the energy of older Americans and help us all lead productive, dignified lives well into the 21st century.

HIGHLIGHTS OF ADMINISTRATION SUCCESSES

Heightening the Importance of Seniors Issues. At the beginning of his Administration, President Clinton elevated the position of Commissioner on Aging to Assistant Secretary status to make certain the interests and concerns of older Americans are at the table when decisions are made. Recognizing the unfulfilled need to create a strategic plan for aging to guide us into the 21st century, President Clinton called for the 1995 White House Conference on Aging, after the 1991 Conference failed to take place.

Restoring Economic Security. After 12 years of trickle down economics which quadrupled the deficit and limited opportunity, the President fought to enact the largest deficit reduction package in history, reducing the deficit three years in a row, by over $600 billion. In just over two years, President Clinton's economic strategy has triggered the best combination of robust job creation and low inflation in 25 years.

President Clinton is committed to promoting economic security and opportunity across generations. He is working to strengthen and preserve the Social Security program, he signed the Retirement Protection Act to make the pension system more reliable, and he supports enhanced IRAs to help pay for long-term care. The Administration continues to support and expand the Home Equity Conversion Mortgage, which has allowed 11,000 seniors -- 60 percent of whom were women living alone -- to use the equity in their homes to meet their financial needs.

Fighting for Health Security. President Clinton will continue to fight for health security for all Americans and to contain health care costs for families, businesses, and government. As he has consistently stated, there are first steps that can be taken this year to reform the insurance market and help families provide long-term care for a sick parent or disabled child.

The President strongly opposes proposals to cut the Medicare and Medicaid programs to balance the budget or pay for tax cuts for the wealthy. At the same time, the Clinton Administration has worked to strengthen and improve the Medicare and Medicaid programs by combating fraud and abuse, and enhancing quality, and promoting preventive services. The First Lady has initiated a campaign to promote the use of mammography screening by older women to detect and prevent breast cancer.

Improving Long-Term Care. The Clinton Administration knows the critical importance of long term care to the elderly, people with disabilities of all ages, and their families. That is why the President has consistently supported expanding state administered home care services, tax clarifications and consumer standards for private long term care insurance, and penalty-free withdrawals from IRAs to pay for long term care services.

Strengthening Housing and Supportive Services. Existing-home sales totaled 3.97 million in 1994, the largest total since 1978. The Clinton Administration is increasing housing opportunity, creating stronger neighborhoods and cities, and fostering fair housing for all Americans, giving special attention to senior housing needs. The Administration has strengthened and streamlined the Non-Profit Elderly Housing Section 202 Program, and has funded 700 service coordinators to link elderly and disabled people with supportive services in their communities.

The Reauthorization of the Older Americans Act programs provides an opportunity to renew and strengthen critical services such as home delivered meals, transportation, elder abuse prevention, and legal and advocacy services. The Clinton Administration will fight to keep the Older American Act programs strong and intact.

Increasing Education and Service Opportunities. Because education is the key to preparing Americans for the new economy, President Clinton is expanding opportunities for lifelong education: From pre-school to youth apprenticeship to direct lending for college loans to National Service to training for a new job in mid-career. At a time when education is more important than ever to succeed and prosper in the new economy, cutting education or National Service is like cutting defense spending in the middle of the Cold War.

President Clinton sees older Americans as a reservoir of talent and experience. He forged a bipartisan effort to establish the Corporation for National and Community Service to provide an outlet for this talent and experience and to rekindle the ethic of service in America. He will fight to support and protect the Corporation's National Senior Service Corps programs -- Foster Grandparents, Senior Companions, and the Retired Senior Volunteer Program (RSVP).

Fighting Crime. To make Americans more secure at home, President Clinton fought the special interests to enact a tough Crime Bill. The 1994 Crime Bill places 100,000 police on the streets, bans deadly assault weapons, expands the death penalty, and supports smarter prevention efforts which offer young people a way out of the cycle of drugs and violence. The Crime Bill provides special protection to the elderly by taking tough measures against telemarketing fraud -- increasing penalties if people over age 55 are targeted, and requiring criminal background checks for professionals who care for elderly or disabled persons.

The Administration is bolstering these Crime Bill initiatives through aggressive health care fraud enforcement, a "Safe Return Program" to help locate and protect missing Alzheimer's Disease patients, and increased funding for Elder Abuse Prevention programs.

Expanding Research. Support for research initiatives that focus on the special needs and concerns of older Americans has been expanded in agencies across the Administration -- from Alzheimer's disease research at the National Institutes of Health, to aging research and geriatric training at the Department of Veterans Affairs, to research on dental adhesives at the Department of Commerce.

Protecting National Security. Finally, President Clinton believes that for America to be strong at home, it must be strong abroad. He has fought to preserve the great tradition of American leadership for which older Americans sacrificed so much.

President Clinton has dedicated his presidency to fighting for what's good for ordinary Americans of all ages every day. He is fighting to expand opportunity for all, to infuse a new sense of responsibility in the country, and to put the American community on a path of restored hope and opportunity.

SENIORS AND ECONOMIC SECURITY

The Clinton Administration is committed to promoting economic security and opportunity across generations. The President's top priority since taking office has been to restore America's economic health and to ensure that all Americans can reap opportunities in the changing economy.

Restored Economic Health

6.34 million jobs have been created during the Clinton Administration -- two-and-a-half times as many new jobs as during the previous Administration. And in 1994, more jobs were created in high-wage industries than in the previous five years combined.

The unemployment rate is at 5.5%, down from over 7% at the start of this Administration, resulting in 1.8 million fewer people unemployed.

The deficit is projected to decline for three years in a row for the first time since Harry Truman was President. The deficit will be $616 billion less over five years because of the Clinton deficit plan. It will also drop in half as a percentage of national income -- from 4.9% to 2.4%.

Core inflation under the Clinton Administration rose just 2.6% in 1994 -- this is the lowest year of core inflation since 1965.

Stable Social Security System

For decades, Social Security has provided economic security to older Americans and the President is committed to strengthening and preserving the program. The President will not support proposals that use Social Security benefits to balance the budget or pay for tax cuts for the wealthy. And the President will work with the bipartisan Advisory Council on Social Security to preserve the long-term integrity of the Social Security Trust Fund.

The Administration has already taken steps to bolster public confidence in Social Security by strengthening and streamlining the program. We worked with the Congress to make the Social Security Administration (SSA) an independent agency, and now SSA is working hard to improve customer service and satisfaction -- through its 800 number, by reducing the number of pending disability claims and by mailing Personal Earnings and Benefit Estimate Statements (PEBES) so Americans know the retirement benefits they can expect. In the year 2000, PEBES statements will be sent automatically to approximately 123 million younger workers (age 25 and over).

In 1994, the SSI program provided approximately $27.7 billion in assistance for needy aged, blind and disabled people.

Reliable Pension System

People deserve a pension system that they can rely on -- so President Clinton signed the Retirement Protection Act in December 1994. Now, workers and retirees will be able to count on receiving the pensions they have earned.

The Pension Benefit Guaranty Corporation has improved its service to retirees receiving benefits from terminated plans, identified 12,000 missing participants, and has initiated a "Know Your Pension" outreach campaign so workers can understand their retirement benefits and PBGC's guarantee.

The President believes in the importance of maintaining strong retirement systems for all Americans. He strongly opposes the House Republican Contract tax legislation, which would reduce retirement benefits for Federal employees and increase their contributions to help finance a tax cut primarily for wealthy individuals and corporations.

The Department of Labor's Pension and Welfare Benefits Administration (PWBA) helps to protect the economic future and retirement security of working Americans. In FY 1993, PWBA recovered approximately $183 million on behalf of plans. And, in conjunction with the Solicitor's office, PWBA is active in litigation protecting older Americans' pensions.

PWBA is initiating a campaign to promote public awareness of the need to save for retirement. With the Administration on Aging, PWBA provide information and materials on basic pension benefits issues to seniors and other constituencies.

Enhanced IRAs

The President's Middle Class Bill of Rights would expand the availability of deductible Individual Retirement Accounts (IRAs) to millions more middle income families, and allow them to withdraw contributions tax-free for long-term care expenses, the cost of education, first time home buying, or medical expenses.

Access to Home Equity

The Administration has continued to support and expand the Home Equity Conversion Mortgage, which allows seniors to use the equity in their homes to meet their financial needs, without having to sell their homes or move. This program has helped 11,000 seniors to date -- 60 percent of whom were women living alone, and the numbers are increasing. The Administration has joined with the AARP to urge Congress to renew the program when it expires at the end of September.

Health Reform

Even with Medicare and Medicaid, out-of-pocket health care costs for older Americans living on fixed incomes are more than three times higher than for the rest of the population. That is why the Administration continues to fight for first steps in health reform, expanded long term care, and a strengthened Medicare program.

SENIORS AND HEALTH CARE

The Clinton Administration remains firmly committed to guaranteeing health security to all Americans and to containing health care costs for families, businesses and federal, state and local governments. The Administration continues to strengthen and improve existing programs that address the health and long term care needs of older Americans.

Health Reform.

As the President has consistently stated, **this year we can take the first steps in health reform**. The Congress can, and should, reform the insurance market; make coverage affordable for working families; help workers who lose their jobs keep their health insurance; continue the start made already to level the playing field for the self-employed; and help families provide long-term care for a sick parent or a disabled child.

Protecting and Strengthening Medicare and Medicaid

The Medicare and Medicaid programs, administered by the Health Care Financing Administration (HCFA), provide access to health care for close to 70 million people, or one in four Americans. Both programs celebrate 30th anniversaries in 1995.

The Clinton Administration is fighting to protect these programs. Republicans want to cut Medicare by between $250 and $350 billion and federal Medicaid spending by between $160 and $190 billion between now and 2002. These cuts will mean shifting a staggering financial burden to elderly and disabled Medicare beneficiaries; dropping coverage or shrinking benefits for the elderly, disabled, or mothers and children on Medicaid; and significant cuts in payments to hospitals, physicians and other providers.

At the same time, the Administration is working to strengthen and improve Medicare and Medicaid. Since 1993, HCFA has made significant improvements in Medicare and Medicaid by combating fraud and abuse, simplifying program administration, enhancing quality, enhancing coordination and integration of health care, improving access to affordable and quality health care, strengthening managed care, improving beneficiary services, and empowering states.

On May 1, the First Lady kicked off a nationwide campaign to promote the use of mammography screening by older women to detect and prevent breast cancer, the second leading cause of death among American women, with the highest incidence among women over 65. Although Medicare covers screening, 60% of older women do not take advantage of this benefit.

HCFA has initiated a Consumer Information Strategy to help Medicare and Medicaid beneficiaries achieve better health through increased utilization of preventive services. This campaign promotes Medicare's new coverage of flu shots and mammography screening.

Improving Long-Term Care

President Clinton knows that long-term care is of critical importance to the elderly. That is why the Administration has consistently supported expanding state administered home care services. It's also why we support tax clarifications for private long-term care insurance and consumer standards for long-term care so that insurance policies are worth more than the paper they're written on. As part of the Middle Class Bill of Rights, the President supports penalty-free withdrawals from IRAs to pay for long-term care services.

In November 1994, as part of initiatives aimed at improving nursing home residents' rights and quality of life, HCFA expanded penalties used to enforce nursing home quality.

The President's 1996 budget includes $18.5 million to the Administration on Aging to provide grants for states for developing better in-home and community-based care for the elderly.

The Department of Labor's Women's Bureau maintains an extensive clearinghouse of employer sponsored elder care programs, and publishes five implementation guides on: Adult Day Care, Case Management, Information & Referral, Respite Care, and Transportation.

Disabilities Initiatives

The Clinton Administration is committed to supporting the 49 million Americans with disabilities in their efforts to exercise their full rights and responsibilities, to live as independently as possible, and to be productive throughout their lives. To reach those goals, the Administration has launched a full-scale review of disability programs and policies in order to ensure that Federal initiatives are guided by these goals.

Between 1992 and 1994, HHS' Administration for Developmental Disabilities awarded $3 million to university affiliated programs for the development of interdisciplinary training programs to prepare professional staff to provide services to older persons with developmental disabilities.

Health Professions Training

Within the U.S. Public Health Service, twenty Geriatric Education Centers in 17 states facilitate the training of health professionals and develop new curricula on geriatric education.

SENIORS AND HOUSING

The Clinton Administration is increasing housing opportunity, creating stronger neighborhoods and cities, and fostering fair housing for all Americans, giving special attention to senior housing needs.

Increased Housing Opportunity.

During the first two years of the Clinton Administration, the Department of Housing and Urban Development (HUD):

- Funded 7,665 units of elderly housing and 2,559 units of disabled housing;
- Insured more than 2.2 million loans for homeowners, with 788,000 of these for first-time homeowners;
- Initiated an innovative partnership with pension funds to help build 2,500 units of housing;
- Provided rental assistance to 102,000 low-income households; and
- Provided 100,000 new units of housing through the HOME program in FY 1994.

The Department of Housing and Urban Development continues to pursue initiatives designed to specifically address the needs of older Americans:

- This summer, HUD and the Administration on Aging will jointly announce examples of "best practices" in selected public and assisted housing developments that serve elderly and disabled residents. These awards will cite developments that excel in coordinating with community agencies to assure services to the residents and integration into the broader community.
- Strengthened and streamlined the Non-Profit Elderly Housing Section 202 Program by simplifying the application process, providing clearinghouse activities with an 800-number for program information; and establishing guidelines for uniform application of rating criteria. HUD continues to improve the program by linking elderly housing with supportive services.
- To provide older Americans housing options with which they are comfortable, HUD has established rules under which public housing agencies may designate public housing projects as "elderly only."
- Funded 700 service coordinators to link elderly and disabled persons with supportive services in the community; the Department expects to have service coordinators in every eligible assisted housing development.

- Insured 11,000 reverse annuity mortgages, enabling seniors who are house rich but cash poor to have the security of a steady income to pay for health care and other needs.

- Published an Assisted Living Facilities rule to develop or rehabilitate buildings that support increased independence for elderly individuals.

The Administration's Department of Agriculture (USDA) has financed 153,920 units of rental housing for elderly in rural areas. In addition, USDA's loan and grant housing programs, funded at $35 million and $25 million, help more than 8,000 senior households remove health or safety hazards in their homes.

USDA has funded projects to review housing needs of the rural elderly, conduct outreach conferences and forums, and to identify barriers to delivery of needed housing to seniors.

With the Elderly Housing Coalition, HUD sponsored a White House Conference on Aging "Mini Conference" in February 1995. The recommendations from this Mini Conference will be an integral part of debate at the national White House Conference on Aging.

Stronger Neighborhoods and Cities

The Administration's Empowerment Zones and Enterprise Communities initiative gives communities across America critical resources for economic and social development.

In the first two years of the Clinton Administration, the Section 108 program successfully infused $579 million into economic development projects.

Fair Housing for All Americans

Aggressive HUD action is reducing barriers to homeownership caused by unlawful discrimination.

As part of efforts to eliminate lending discrimination, HUD has signed best practice agreements with the Mortgage Bankers Association and individual lenders.

Reinventing HUD to Meet Housing and Community Development Needs.

The Clinton Administration and Secretary Cisneros have proposed dramatic restructuring of HUD to respond more fully to local needs and local efforts to help people improve their lives. These changes include: giving maximum flexibility to decisionmakers at the neighborhood, local and state levels; supporting initiatives that help lower-income families become self-sufficient; and creating an entrepreneurial FHA Corporation.

PROTECTING SENIORS AGAINST CRIME

The Clinton Administration passed the smartest, toughest, and most comprehensive Anti-Crime bill in this country's history... a bill that provides police, prisons, punishment and prevention so that the streets we live on are safer. The Administration's Department of Justice (DOJ) supports the Crime bill initiatives through a multi-front assault on crime, abuse and discrimination against the elderly.

1994 Crime Bill

The Clinton Crime bill attacks crime and protects seniors on multiple fronts:

- Puts 100,000 new police officers on the streets in our neighborhoods and cities. Deployed in community policing, these officers will work with neighborhood residents to prevent as well as solve crimes.
- Bans deadly assault weapons and helps keep guns out of the hands of criminals.
- Provides for mandatory life imprisonment of three-time, repeat violent offenders.
- Gives at-risk youth something to say "yes" to by providing them with afterschool activities and other positive alternatives to gangs, guns and drugs.
- Increases funding for proven prevention programs that bring together sheriffs, police chiefs, and councils of senior citizens in efforts to reduce crime against older citizens.
- Takes tough measures against telemarketing fraud -- increasing penalties even further if persons over age 55 are victimized or targeted.
- Protects the elderly by requiring criminal record background checks for persons employed in caring for the elderly or disabled.
- Ensures that the death penalty is an option in federal cases in which the murder victim is particularly vulnerable because of age or disability.

Anti-Fraud, Anti-Elder Abuse, and Anti-Discrimination Initiatives

The Administration's Department of Justice (DOJ) has taken **aggressive action against health care fraud**, recovering an unprecedented $411 million in fraudulent health care claims -- a large percentage of which was robbed from the Medicare program.

DOJ's **"Safe Return Program"** helps locate and protect missing Alzheimer's Disease patients. 12,000 patients are registered under this program and a nationwide hotline is available for people to help locate missing individuals. President Clinton requested nearly $1 million for the "Safe Return Program" in his 1996 budget.

A newly released report, funded by a $1 million grant from the Department of Health and Human Services, states that reports of domestic abuse against the elderly increased from 117,000 in 1986 to 241,000 in 1994 (National Center on Elder Abuse, 5/2/95). To counter this trend, President Clinton's 1996 budget includes **a $1.5 million increase for Elder Abuse Prevention programs** at the Administration on Aging that build on partnerships with local aging networks, adult protection services, law enforcement agencies, and domestic violence programs.

DOJ's Office for Victims of Crime helped organize the **National Conference on the Victimization of the Elderly**, participates in numerous state conferences on elder abuse, and helps train police officers in proper response to elder abuse.

A DOJ grant to the AARP will help educate providers of services to the elderly about their Americans with Disabilities Act responsibilities and the elderly about their rights under the law.

DOJ conducts studies and analysis to document the magnitude of crime perpetrated against the elderly, providing policy-makers with necessary information about the scope of this criminal activity.

SENIORS AND SERVICE

While others see the demographic changes as simply adding burdens to society, President Clinton sees older Americans as a reservoir of talent and experience. President Clinton has put a high priority on encouraging an ethic of service in America, and he knows that older Americans are ready and eager for this service.

Corporation for National Service

President Clinton forged a bipartisan effort to establish the Corporation for National and Community Service as a means for rekindling the ethic of service in America. The Corporation's National Senior Service Corps (NSSC) gives older Americans the opportunity to continue service to communities in need.

The NSSC is a network of federally-supported programs that helps people age 55 and older find service opportunities in their home communities. The Senior Corps programs -- Foster Grandparents, Senior Companions, and the Retired and Senior Volunteer Program (RSVP) -- are a vital part of the Administration's National Service focus. In FY 95, NSSC programs were funded at $136 million; for FY 96, President Clinton has requested $168.4 million for the programs, an almost $33 million increase.

- 80,000 children, teenagers and their families are supported by the services of Foster Grandparents every year. The nearly 24,000 Foster Grandparents provide more than a 4-fold financial return on the federal dollars invested in the program.

- Over 12,000 Senior Companions help more than 32,000 frail elderly live independently.

- Retired and Senior Volunteer Program (RSVP) participants provide over 80 million hours of service annually to communities across the country.

Nearly one-half million older people serve in the Senior Corps Programs, and yet waiting lists of both people wanting to serve and of individuals seeking the services exist at every site. That is why President Clinton continues to request additional support for Senior Corps programs, and will fight to protect them from budget cuts proposed by Republicans.

Service in Other Administration Agencies

In 1993, the Environmental Protection Agency joined forces with the Corporation for National Service to tap the skills of older volunteers in groundwater protection activities. The first sites were located in Anaheim, CA, Eugene, OR, and Tallahassee, FL, and eight or nine similar projects are expected in FY 95.

The EPA, along with the Departments of Agriculture and Interior, have launched the Environmental Alliance for Senior Involvement (EASI), a coalition of environmental, senior and volunteer organizations and agencies dedicated to providing opportunities for the elderly to protect the nation's environment.

The Small Business Administration's Service Corps of Retired Executives (SCORE), a volunteer association of retired business men and women, provide one-on-one management and business counseling and training to approximately 285,000 business owners per year and conduct 4,000 technical workshops.

SENIORS AND HUMAN SERVICES

In education, supportive services, and environmental protection, the Clinton Administration is working to expand opportunities and promote healthy lives and environments. In all of these areas, the Administration is working with older Americans to address important needs unique to our later years.

Social and Human Services

The Department of Health and Human Services' Administration on Aging (AoA) continues to administer the programs under the **Older Americans Act**, which for 30 years have provided critical daily social and human services to older Americans and their families. AoA distributes funds to states to provide support for services designed to help the elderly remain independent -- such as nutrition programs, social services for the frail elderly, transportation, elder abuse prevention, and legal and advocacy services.

- In 1993, through Older American Act programs, 820,583 persons received transportation services; 794,591 persons received home delivered meals; 2,368, 584 were served congregate meals; and 3,034,000 received information and referral services.

- The Clinton Administration will fight to keep the Older American Act programs -- a proven partnership between Federal, state, and local government -- strong and intact.

In FY 94, the Department of Agriculture (USDA) awarded more than $1 million to nonpro organizations for projects that help elderly individuals access the Food Stamp program. USDA's commodities and food surplus programs provide vital food assistance to the elderly.

The Administration on Aging assisted in expedient delivery of disaster relief assistance to elderly victims of the Midwest Floods, the Los Angeles earthquake, and other disasters and has continued to follow up through local area agencies on aging.

Education

President Clinton has demonstrated his belief that education is critical to building America's future through numerous achievements including: Increased Head Start by $760 million and proposes an additional $400 million in FY 96 for the program; Proposed a $347 million increase in funding to help states and communities proceed with their education reform agenda as part of Goals 2000; Signed the Student Loan Reform Act, allowing more students access to flexible repayment arrangements for financing education; and Signed the School to Work Act, to equip students with the skills necessary to pursue work or post-secondary training.

Elderly people who are illiterate are less likely to be working, less likely to be homeowners, and are sicker and less knowledgeable about preventive health care services, according to recent research. To counter these trends, the Department of Education works with states to expand adult education and literacy programs and services, serving 3.9 million adults in 1993.

The Department of Education's Independent Living Services for Older Individuals Who are Blind program provided $8.1 million in grants to states in FY 93. Through this program, seniors can access specialized equipment such as magnifiers for reading, telle-braille, and talking blood glucose meters.

The Department of Education's Projects with Industry program includes grants to the Administration on Aging for projects which target individuals with disabilities who are 40 years and older. And the Department's Office of Educational Research Statistics provides funds to support regional libraries for blind and physically disabled individuals.

Environmental Protection

Because older Americans face special health challenges that make them particularly susceptible to environmental threats, seniors benefit significantly from this Administration's work to improve the quality of our air, water and land, such as reduced toxic air emissions and improved drinking water safety.

Legislative initiatives sponsored by the Administration in 1994, such as the Safe Drinking Water Act Reauthorization, would have directed the Environmental Protection Agency to take measures to ensure the safety of sensitive populations, including the elderly and very young. EPA will continue to work to protect sensitive populations from environmental hazards.

Energy

Under the Department of Energy's Weatherization Assistance Program, the elderly and people with disabilities receive priority for assistance with the installation of energy saving building and heating and cooling system improvements in low-income homes. In 1994, the Weatherization Assistance Program awarded $202.9 million in grants; for 1995, awards are projected at $225.5 million.

Under the State Energy Conservation Program, the Department of Energy promotes energy efficiency and a reduction in the growth of energy demand. State projects have specifically targeted older Americans, including senior citizen weatherization and training projects, hands-on energy conservation workshops, low-interest loan programs, and senior energy savings months.

Parks and Recreation

Through the Administration's Department of Agriculture, senior citizens can purchase Golden Age Passports, giving them a lifetime entrance pass to National Parks and historic sites, for a one-time $10 fee. The USDA is improving mobility and accessibility for visitors to all recreation facilities. In addition, the standards for publications, audiovisual programs, and other media are changing to provide larger type size, hearing loops and open-captioning.

In response to increased interest in lifelong learning, the USDA Forest Service is working the national Elderhostel organization to conduct programs about National Forest resources. The USDA Forest Service annually hires almost 6,000 senior citizens, and provides training to help them transition back into the workforce.

EMPLOYMENT AND TRAINING FOR OLDER WORKERS

President Clinton is committed to improving employment opportunities for all Americans. As we move into the information age and our economy continues to change, the Administration is working with Americans of all ages to provide new employment opportunities and retraining when necessary.

The Department of Labor's (DOL) **Senior Community Service Employment Program** (SCSEP) employs low-income Americans age 55 or older in a variety of community service activities, such as health care, nutrition, home repair, childcare, conservation, and restoration programs. In FY 1993, 100,273 people were enrolled in authorized positions, and an additional 17,774 received unsubsidized placements.

DOL's **Job Training Partnership Act** (JTPA) provides job training and related assistance to economically disadvantaged individuals, dislocated workers, and others who face significant employment barriers, in order to help them gain permanent, self-sustaining employment. Since July, 1993, five percent of the funds for a new adult program must be targeted solely to older workers. Services provided through the program include vocational counseling, jobs skills training, literacy and basic skill training, and job search and placement assistance. 16,700 people have completed this program since July 1993.

Under DOL's **Dislocated Workers Program**, older workers who have lost their jobs due to a closing of a plan or facility or who are unable to return to their previous industry or occupation may receive services such as job search assistance, retraining, pre-layoff assistance and relocation assistance. Between July 1, 1992 and June 20, 1994, 13,700 workers 55 years of age and over received assistance through the Dislocated Workers program.

The Environmental Protection Agency's (EPA) legislation mandates the involvement of seniors in carrying out its mission. The Agency's Senior Environmental Employee (SEE) program puts to work the knowledge and experience of hundreds of seniors -- including scientists, educators, office service experts and communications specialists -- in a wide range of assignments that benefit participants and the environment.

The USDA Forest Service annually hires almost 6,000 senior citizens, and provides training to help them transition back into the workforce.

The Department of Labor's Division of Older Worker Programs participated actively in preparations for the White House Conference on Aging, including sponsoring three different focus groups targeted at rural elderly, urban elderly, and partners and experts in the field of aging.

OLDER VETERANS AND RETIRED MILITARY PERSONNEL

The Clinton Administration has been responsive to the needs and concerns of the veterans community, establishing an Interagency Veterans Policy Group to aggressively pursue action. The Administration's Department of Veterans Affairs is a leader in addressing the health care needs of older Americans.

The Department of Veterans Affairs (VA) has the largest and most extensive program and services in geriatrics and long-term care of any health care delivery system in the United States:

- The VA trains more health care professionals in geriatrics, gerontology and long-term care than any other academic institution or organization in the United States. In FY 1993, VA funded 84 physician traineeship positions and 501 associate health traineeship positions in geriatric related fields.

- Through its commitment and contribution to aging research as well as training and education, the VA is credited with pioneering the field of Academic Geriatrics. In FY 1994, the VA budget included $35 million for aging research.

President Clinton, recognizing VA's roles as a direct care giver to elderly veterans and as an early innovator in the field of geriatric medicine, nominated VA Secretary Jesse Brown to the White House Conference on Aging Policy Committee.

Approximately 40 delegates representing veterans service organizations, and 20 other delegates appointed by Secretary Brown, will attend the 1995 White House Conference on Aging. The VA hosted town forums across the country as part of the grassroots development of the WHCoA, and veterans issues are included in the WHCoA agenda.

The Department of Defense continues efforts to bring eldercare resources and assistance to the increasing numbers of military personnel and families who have eldercare responsibilities.

With the Veterans of Foreign Wars, the VA sponsors the annual National Veterans Golden Age Games, a multi-event recreational sports meet designed to enhance the mental, social, physical, and emotional well being of senior veterans. The 1995 Golden Age Games will be held from July 9-15 on the campus of Southern Methodist University in Dallas, Texas.

GOVERNMENT RESEARCH AND OLDER AMERICANS

Researchers throughout a wide variety of Administration agencies -- from the National Institutes on Health, to the Department of Veterans Affairs, to the Department of Commerce -- address issues of particular concern to older Americans.

In his FY 96 budget, President Clinton requested $11.8 billion for the National Institutes of Health, and proposed **increasing funding to the National Institute on Aging from $432.3 million to $445.8 million.**

The Clinton Administration has **consistently supported increases in funding for research on Alzheimer's disease.** The President's FY 96 budget includes $672.1 million for the National Institute on Neurological Disorders and Stroke (which funds Alzheimer's research), an increase from 1995 funding level of $652.2 million.

The Clinton Administration's Health Security Act would have significantly increased funding to the National Institutes on Health, and required specific attention to diseases affecting older Americans such as Alzheimer's.

Through its commitment and contribution to aging research as well as training and education, the VA is credited with pioneering the field of Academic Geriatrics. In FY 1994, **the VA budget included $35 million for aging research.**

The Department of Agriculture's Agriculture Research Service funds research examining: the nutrient requirements to ensure optimal function and well-being for a maturing population, and the role of nutrition in chronic, degenerative conditions associated with aging.

This summer, the Department of Education's Office of Educational Research and Improvement will release a report, "Literacy of Older Adults in America," to document the literacy capacities of adults at least 60 years of age. And the Department of Education's National Institute for Disability and Rehabilitation Research (NIDRR) conducts research and training on aging and disabilities at three different research centers across the country.

The National Institute of Standards and Technology (NIST), housed in the Administration's Department of Commerce, conducts several research projects that benefit senior citizens.

- NIST received an Emmy Award in 1980 for the development of closed captioned television.
- Most of the adhesives and materials used by dentists today are the result of NIST research.
- NIST research has enabled the orthopedic implant industry to develop more reliable implants so that people with damaged or deteriorating joints need not become "disabled."

- Today, NIST conducts computer technology research that enables architects, engineers and building owners to examine in a computer how the placement of alarms and emergency exit locations will affect people of differing abilities -- such as the elderly or disabled -- escape a building in an emergency.

- At the request of FEMA, NIST developed a manual that will facilitate the development of emergency evacuation plans for the evacuation of people with varying ability levels during an emergency.

- NIST sponsors the Information Infrastructure for Health Care Program, directed at improving the quality and reducing the cost of health care for all Americans. A microbiology project under the program has the potential to be used in the treatment of diabetes, Parkinson's disease, and Alzheimer's disease.

- NIST research is investigating better methods for restoring teeth and improving adhesion, and improving the orthopedic industry. NIST has been working with the Department of Veterans Affairs to develop better methods for testing and evaluating hearing aids. NIST is working on computer technology that will enable seniors with disabilities to use computers at the same level as those without disabilities.

In 1994, the Department of Energy initiated research to further an understanding of the human health effects of radiation, including studies on life span and aging.

MEDICARE TRUST FUND SOLVENCY PROBLEM

Unlike the Republicans, This is Not a Problem Democrats Just Discovered. The President, his Administration and the Democrats have been concerned about Medicare trust fund from the beginning. OBRA 1993 and economic improvements resulting from this legislation have strengthened the trust fund and pushed out the insolvency date by three years. Furthermore, in the context of broader reforms, the Administration's proposal would have extended the life of the trust fund another 5 years. **The Republicans rejected each and every initiative that would have strengthened the Medicare Trust Fund.**

The Medicare Trust Fund is a Long-Term Problem that Needs to be Addressed. Of course with the aging of our population, there is a long-term solvency problem for the Medicare trust fund. This is nothing new, but it needs to be addressed. It needs to be addressed thoughtfully, outside the budgetary process, and independent of partisan politics.

In Contrast to the Democrats, the Republicans Have Just Discovered this Issue. In the last two years, all the Republicans have done has been to oppose our efforts to improve the Trust Fund. As a matter of fact, the only proposal they have put forth (their tax cut for the highest income seniors -- the top 13 percent) actually exacerbates the problem.

The Republicans are Using the Trust Fund as a Smoke Screen for Cuts. Let's be clear: Their proposals have nothing to do with the long-term solvency issue; they do not address the underlying problems of an aging population. The Republicans want to use the Medicare program as a bank for their tax cuts for the wealthy and to fulfill their campaign promises.

When they Finally Put Forth a Detailed Budget and Commit to Dealing with Medicare in the Context of Serious Health Care Reform, the President Stands Ready to Work Toward a Real Solution: Currently, the issue of Medicare is only being addressed by Republicans as they face a political crisis to find funds to pay for large tax cuts for the well-off and fulfill their campaign budget promises. When Republicans finally put forth a budget that is detailed and makes clear they are not slashing Medicare to pay for tax cuts, the President stands ready to work with Republicans to address the real problems facing the Trust Fund and the American people in the health care system.

REPUBLICAN MEDICARE CUTS

Republicans are considering proposals that would cut Medicare funding by between $250 billion and $305 billion between now and 2002. Slashing Medicare at this level translates into 20% to 25% cuts in 2002 alone for this program serving our most vulnerable Americans -- the elderly and disabled.

COERCION INSTEAD OF CHOICE: Managed care simply cannot produce anywhere near the magnitude of Federal savings being suggested by the Republicans without turning Medicare into a fixed voucher program. That would put Medicare's 36 million beneficiaries, many of whom have pre-existing conditions, into the private insurance market to shop for what they can get. With a fixed and limited voucher, beneficiaries would have to pay far more to stay in the current Medicare program if large savings are to be realized. That's not choice, that is financial coercion.

ADDING TO ALREADY HIGH COSTS FOR SENIORS: Today, despite their Medicare benefits, health care consumes major amounts of older Americans' income. According to the Urban Institute, the typical Medicare beneficiaries already dedicate a staggering 21% (or $2,500) of their incomes to pay for out-of-pocket health care expenditures.

$3,100-$3,700 Out-of-Pocket Payments: If the Republican cuts ($250 billion to $305 over seven years) are evenly distributed between health care providers and beneficiaries, the cuts would add an additional $815 to $980 in out-of-pocket burdens to Medicare beneficiaries in 2002. Over the seven year period, the typical beneficiary would pay between $3,100 to $3,700 more.

Reduce Half of Social Security COLA: The Republicans say they aren't cutting Social Security, but these Medicare cuts are a back-door way of doing just that. By 2002, the typical Medicare beneficiary would see 40 to 50 percent of his or her cost-of-living adjustment eaten up by the increases in Medicare cost sharing and premiums. In fact, about 2 million Medicare beneficiaries will have all or more than all of their COLAs consumed by the Republican beneficiary cost increases.

$40-$50 Billion in Cost-Shifting: Assuming the other half of the Republicans' cuts go to providers, hospitals, physicians and other providers would be targeted with between a $125 billion to $150 billion cut over seven years. In 2002 alone, a $33 billion cut in providers would be needed. Even if only one-third of Medicare provider cuts overall are shifted onto other payers (an assumption consistent with a 1993 CBO analysis), businesses and families would be forced to pay a hidden tax of $40 billion to $50 billion in increased premiums and health care costs between now and 2002.

Rural and Inner City Hospitals At Risk: Cuts of this magnitude, combined with the growing uncompensated care burden (which would be further exacerbated by Medicaid cuts and increases in the number of uninsured), would place rural and inner-city providers in jeopardy because they have limited or no ability to shift costs to other payers. As a result, quality and access to needed health care would be threatened.

THE REALITY OF MEDICARE GROWTH

- Despite the current rhetoric, Medicare expenditure growth is comparable to the growth in private health insurance.
  - Under Administration estimates, Medicare spending per person is projected to grow over the next five years at about the same rate as private health insurance spending. Under CBO estimates, Medicare spending per person is projected to grow only about one percentage point faster than private health insurance.
  - So, unless Medicare can control costs substantially better than the private sector, beneficiaries and providers would be forced to shoulder the burden of the huge cuts being proposed by Republicans.

MAJOR BURDEN ON RURAL AMERICA

- Reducing Medicare payments would disproportionately harm rural hospitals.
  - Nearly 10 million Medicare beneficiaries (25% of the total) live in rural America where there is often only a single hospital in their county. These rural hospitals tend to be small and serve large numbers of Medicare patients.
  - Significant cuts in Medicare revenues has great potential to cause a good number of these hospitals, which already are in financial distress, to close or to turn to local taxpayers to increase what are already substantial local subsidies.
  - Rural residents are more likely than urban residents to be uninsured, so offsetting the effects of Medicare cuts by shifting costs to private payers is more difficult for small rural hospitals.
  - Rural hospitals are often the largest employer in their communities; closing these hospitals will result in job loss and physicians leaving these communities.

UNDERMINES URBAN SAFETY NET

- Large reductions in Medicare payments would have a devastating impact on a significant number of urban safety-net hospitals. These hospitals already are bearing a disproportionate share of the nation's growing burden of uncompensated care. **On average, Medicare accounted for a bigger share of net operating revenues for these hospitals than did private insurance payers.**

REPUBLICAN MEDICAID CUTS

Republicans are considering cutting federal Medicaid funding by $160 to more than $190 billion between 1996 and 2002. The Republicans claim that they are not cutting the program, but simply reducing the rate of growth. Yet, these technical number disputes avoid the real question: who will be hurt, who will lose coverage and who will lose benefits if $160 to $190 billion are cut from a program that provides critical health care services. It also ignores the fact that 3 to 4 percent of program growth is for the increasing number of people being covered, without which millions more Americans would be uninsured.

- **HEAVY BURDEN TO FAMILIES FACING LONGTERM CARE:** While most people think that Medicaid helps only low-income mothers and children, about two-thirds of Medicaid funds are spent on services for elderly and disabled Americans. Without Medicaid, working families with a parent or spouse who need long-term care would face nursing home bills that average $38,000 a year.

- **MANAGED CARE SAVINGS NOT NEARLY SUFFICIENT:** Savings from managed care cannot produce anywhere near the magnitude of cuts proposed by the Republicans. Two-thirds of Medicaid funds are spent on the elderly and disabled, and there is little to no evidence that putting them in managed care can produce savings. And because the baseline projections already assume that a growing number of mothers and children on Medicaid will be in managed care plans, there are little additional savings left in the remaining one-third of the program.

- **FLEXIBILITY CAN'T MASK DEEP CUTS:** Republicans defend these cuts by saying that what they are doing is giving added flexibility to states through block grants. Issues of flexibility can't mask the inevitable fact that states are being asked to absorb enormous federal cuts -- forcing them to cut spending for education, law enforcement or other priorities -- and that's unrealistic.

LIKELY IMPACTS: So let's look at what these cuts really mean. Even accounting for some managed care savings, they mean deep cuts in eligibility, benefits and payments to doctors, hospitals, nursing homes and other health care providers. If the Republicans were to cut $160 to $190 billion between 1996 and 2002 and those cuts were divided evenly between eliminating eligibility for elderly and disabled beneficiaries, eliminating eligibility for children, cutting services, and cutting provider payments, that would mean -- in the year 2002 alone -- that:

- **5 TO 7 MILLION KIDS WOULD LOSE COVERAGE**; and
- **800,000 TO 1 MILLION ELDERLY AND DISABLED BENEFICIARIES WOULD LOSE COVERAGE**; and
- **TENS OF MILLION LOSE BENEFITS:** All preventive and diagnostic screening services for children, home health care and hospice services would be eliminated -- as well as dental care if the $190 billion were cut; and
- **OVER TEN BILLION REDUCED TO HEALTH CARE PROVIDERS:** Already low payments to health care providers would be reduced by $10.7 to $12.8 billion.

MEDICARE/MEDICAID CUTS:
BUSINESS, PROVIDER AND ADVOCACY GROUPS' RESPONSES

The National Association of Manufacturers says:

"Across the board reductions in [Medicare and Medicaid] should be avoided, since they are likely to exacerbate cost-shifting to the private sector." (February 11, 1995)

Eastman Kodak says:

"My message to you as you wrestle with the growing costs of the Medicare program is that greater use of managed care and aggressive purchasing of care on the part of the government are more appropriate solutions than massive across-the-board cuts in payments to providers, which result in cost shifting or an invisible tax on companies providing coverage to employees in the private sector." (March 21, 1995)

American Hospital Association says:

"One of every four hospitals in the United States is in 'serious trouble,' and with deep reductions in Medicare growth will be forced to cut services or close its doors." (April 13, 1995)

"The wrong way [to reform Medicare] is to do business as usual, letting short-sighted political pressures squeeze Medicare spending and weaken a program that needs to remain strong for our nation's seniors." (February 6, 1995)

"Sixty-four percent of the electorate believes that if you ran for office saying that you would not cut social security, and if Congress votes this year to cut Medicare then that Member of Congress has broken their campaign promise." (April 1995 Polling Data Report)

American Association of Retired Persons says:

"Medicare was hardly discussed in the last election; and there was certainly no mandate from the electorate to change the system." (March 28, 1995)

Medicare cuts "would mean that over the next 5 years older Americans would pay at least $2000 more out of pocket than they would pay under current law. And over the next seven years they would pay $3489 more out of pocket." (March 6, 1995)

"...[T]he total number of Medicaid beneficiaries in need who would lose long-term care services...could reach 1.75 million in the year 2000." (March 6, 1995)

The National Council of Senior Citizens says:

"The facts do not warrant a panic approach or a fundamental recasting of Medicare. The trust fund is not about go belly-up; a seven-year window does not merit a panic button."

"The levels of the cuts in Medicare contemplated by the Senate and House Budget Committees will not just devastate the finances of millions of older citizens, but more importantly, they will devastate the hopes for a secure and healthy old age for all Americans." (April 1995)

Older Women's League says:

"We receive hundreds of letters from women who are already forced to chose between paying for food and rent and buying much needed medicine that is not covered by their Medicare. Substantial cuts in Medicare will literally take food out of the mouths of these older women." (January 10, 1995)

Children's Defense Fund says:

"States could make these cuts in several ways: by raising taxes substantially; by excluding groups of children from programs or putting them on waiting lists; by reducing benefits or the quality of services; or by making low-income families pick up more costs through co-payments and fees. Regardless of which method is chosen, the overall effect would be large." (April 19, 1995)

Catholic Health Association says:

"Budget cuts of such magnitude [in Medicare and Medicaid] would attack the very fiber of these programs and, in fact, decimate them. Consequently, the Catholic Health Association believes that Congress should put aside consideration of tax cuts for now and refocus the debate on how best to solve the deficit problem." (March 2, 1995)

PRESIDENTIAL ACKNOWLEDGMENTS

WHITE HOUSE CONFERENCE ON AGING

MAY 3, 1995

Attached is a list of individuals speaking at the opening plenary session. Below are some individuals that the President may want to personally acknowledge:

The Policy Committee of the WHCoA

Secretary Shalala -- Provided leadership, Pol. Comm. Member

Senator David Pryor -- Chairman, Policy Committee

The Advisory Committee of the WHCoA

Bob Blancato -- Executive Director, WHCoA

Entertainment

Olathe Intergenerational Choir — after video, before the President

Special Delegate Notes:

Oldest Delegate -- Ms. Genevieve Johnson
Washington, D.C. delegate
Age 95

Youngest Delegate -- Ms. Fiona McKinnon
Kalispell, Montana
Age 16

Veteran Observer in Audience:

Charles Lindberg -- an original flag raiser at Iwo Jima
(materials sent via Molly Brostrum, DPC)

Note: there are a large number of WWII Veterans serving as delegates to the Conference.

Other:

If you haven't had a chance to see the video, it might be helpful in preparing remarks. The first piece on Senior Olympics and the last piece which highlights "senior" achievers is helpful.

Satellite Sites

May 1, 1995

Draft Agenda for Opening Plenary Session of WHCOA
Wednesday, May 3, 1995

9:00-9:10	Navy Band, Washington, D.C.
9:10-9:30	Olathe Intergenerational Chorus, Olathe, Kansas
9:30	WHCOA Opens -- Robert Blancato gives greetings, introduces dais
9:40	**Senator David Pryor (D-AR) officially opens WHCoA; gives remarks and turns program over to Hugh Downs, Master of Ceremonies**
9:55	Secretary Donna E. Shalala, HHS, remarks (intro by Downs)
10:05	Secretary Jesse Brown, VA, remarks (intro by Downs)
10:10	Senator Barbara Mikulski (D-MD), remarks (intro by Downs)
10:15	Senator William S. Cohen (R-ME) remarks (intro by Downs)
10:20	Rep. Matthew G. Martinez (D-CA) (intro by Downs)
10:25	Rep. Connie Morella (R-MD) remarks (intro by Downs)
10:30	Dr. Robert Butler, Chair, Advisory Committee, remarks (intro by Downs)
10:35	Dr. Arthur Flemming
10:40	Video (introduced and narrated by Hugh Downs)
	Chorus sings Stand By Me (3 minutes)
10:55	Video and Chorus ends
10:55	Sec. Shalala, Fernando and Bob go to backstage door and greet the POTUS and Vice President
	Shalala and Fernando return to their seats

11:00 WHITE HOUSE VOG: Announces VP and POTUS

11:00 Bob Blancato escorts VP and POTUS to seats

11:03 Sen. Pryor introduces VP

11:05 Vice President speaks

11:15 Vice President Concludes remarks

11:15 Sen. Pryor introduces POTUS

11:18 POTUS SPEAKS

11:33 POTUS CONCLUDES REMARKS

11:35 POTUS AND VICE PRESIDENT GO INTO AUDIENCE TO SHAKE HANDS WITH INDIVIDUALS FOR 10 - 20 MINUTES

11:55 VP and POTUS RETURN TO STAGE

(Bob meets and escorts to backdoor)

11:55 DOWNS says:
Ladies and Gentlemen, please stay in your seats until the President and Vice President have departed

12:00 Bob (?) ends official program

*** All speakers get five minutes, with the exception of Sen. Pryor, Sec. Shalala and the President**

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1995 WHITE HOUSE CONFERENCE ON AGING
SCHEDULE

Tuesday May 2

2:00 pm - 10:00 pm	Registration
6:00 pm - 9:00 pm	Speakout session

Wednesday May 3

6:30 am - 6:30 pm	Registration
8:00 am - 9:00 am	Opening breakfast (delegates only)
8:30 am - 8:50 am	Observers, VIPs and staff seated for the Opening Plenary Session
9:30 am - noon	Opening Plenary Session *President Clinton, Vice-President Gore, Sen. David Pryor (D-AR), Sec. Donna Shalala, Sec. Jesse Brown, Arthur Flemming and Hugh Downs*
12:00 pm - 1:45 pm	Lunch
12:00 pm - 1:00 pm	Special State & Constituency Caucuses
2:00 pm - 5:00 pm	First Issue Resolution Development Session
7:30 pm - 8:30 pm	Entertainment - Robinson Jazz Ensemble

Thursday May 4

7:00 am - 8:15 am	Breakfast (delegates only)
8:30 am - 9:30 am	Official WHCoA Event *First Lady Hillary Rodham Clinton*
10:00 am - 1:00 pm	Second Issue Resolution Development Session
1:00 pm - 2:15 pm	Lunch
2:30 pm - 5:30 pm	Third Issue Resolution Development Session
5:30 pm - 6:15 pm	Special State and Constituency Caucuses
7:20 pm - 9:45 pm	Dinner and Plenary Session

Friday May 5

7:00 am - 9:00 am	Closing Breakfast and Resolution Vote
9:00 am - 10:15 am	Speakout
10:15 am - Noon	Closing Session

Note: All events noted will be held at the Washington Hilton & Towers Hotel

TELEPHONE NUMBERS

AT THE

WASHINGTON HILTON & TOWERS

Location	Room	Telephone No.
WHCoA Command Center	Convention Office I	797-4502
WHCoA/OMEGA/RAM Conf.Rm	C-340	483-3000 Ask for C-340
WHCoA Hospitality Room	8174	483-3000 Ask for 8174
WHCoA Computer Room	Adams	797-4816
Press Conference	Cabinet	797-4515
WHCoA Registration Press Room	State	797-4830
OMEGA Travel Desk	Concourse Level	797-4506
Hotel Security		
Carmen Kinsey	Sales Manager	Ext. 3782
Lori D'Alessio	Convention Rep.	Ext. 3774 Pager 64
Richard Andrekanic	Catering Mgr.	Ext. 3780 Pager 13
Elaine Dalpiaz	Beeper #	703 705 1852
Amy Mignone	Portable Phone	202 365-4863
Emily Ross	Portable Phone	202 445-5136
Moya Benoit- Thompson	Beeper #	_____

797-4838

24 April 1995

TO: Interested Parties

FROM: Jeremy Ben-Ami/Molly Brostrom
Domestic Policy Council

RE: Draft Outline for POTUS White House Conference on Aging Speech

The 1995 White House Conference on Aging provides an important opportunity for the President to present a message to older Americans -- more than 2,000 delegates will attend the Conference, and thousands more will listen at satellite conferences.

Attached is an outline of initial thinking on the President's remarks -- besides health care -- to the White House Conference on Aging (May 3). It is assumed that health care will be the central message of the speech, but the substance of that message is still to be determined. The attached document, therefore, addresses the three other categories we believe should be addressed in the speech: 1) general background on WHCoA; 2) Social Security; and 3) Administration accomplishments on behalf of seniors.

In addition, there appears to be growing consensus around the idea that the President should mention the Medicare/Medicaid REGO initiatives in his speech, but that those points will not be central to the speech. It looks likely/possible that the Vice President will address the Second Plenary (dinner on Thursday evening) -- the VP could flesh out the REGO initiatives in his speech. Alternatively, Secretary Shalala could follow up the President's speech with briefings for the press on the REGO initiatives; this could interfere, however, with the central message of the President's speech.

Please provide thoughts/ guidance on the above, as well as the attached.

-don't have who:
lifts elderly at
of poverty.

1995 WHITE HOUSE CONFERENCE ON AGING
Outline of Points for President's Speech

I. **General**. *The 1995 WHCoA is a historic event: last WHCoA held in 1981. 1995 Conference is unique in grassroots approach, and results orientation. Two primary themes of Conference: intergenerational linkages and diversity of older Americans.*

- I am proud to convene the 1995 White House Conference on Aging. This historic event is the first Conference to be held since 1981, the fourth formal White House Conference on Aging, and will be the last Conference of this century.

- Past White House Conferences on Aging have had a significant impact on aging policy, including initial conceptualizations of the Medicare program and the Older Americans Act. I am sure this Conference will continue in that tradition, and provide us important guidance in both meeting the needs of today's seniors and shaping aging policy for the 21st century.

- And this Conference could not come at a more critical time. [Elaborate on political climate, doubling of aging population...]

- I would also like to recognize the unique grassroots approach used by this Conference that has resulted in the involvement of tens of thousands of seniors across the country. The more than 800 local, State, and regional events in which many of you, as well as your friends and neighbors back home, participated helped formulate the ideas and agenda that will be addressed this week.

- I would also like to note that you set a tremendous example for the rest of us in the goals of this Conference. In the coming days, you have challenged yourselves to not only identify problems and concerns, but also to seek methods to effectively address these issues. And you will carry this challenge beyond Friday, to a series of post-Conference activities at the state and local level, that will focus on practical responses and implementation steps for the issues raised this week. I commend you for your responsible approach and pledge to work with you in addressing the issues identified.

- As you prepare to begin the nitty-gritty work of deliberations of this 1995 White House Conference on Aging, I wish that I could join you, to demonstrate the unity that I --as a "somewhat younger American"-- and your other "somewhat younger" and even "much younger" fellow citizens feel with you. The concerns and issues recognized by you as older Americans, are ones shared by the rest of the nation--not only because of the universal bond that ties each one of us to old age, but because you are the core threads in the fabric of our country.

- You are parents, grandparents, teachers and mentors to us. You have helped build this nation, defended the principles upon which our country was founded, nurtured children and grandchildren, and continue to give of yourselves -- through continued parenting and grandparenting, and through a host of volunteer activities -- I know X number of you are participating in the National Service Corps. I salute and thank all of you for the contributions you have made and continue to make to this nation.

- And finally, in these words of welcome, I want to say that, even as we address you as a bloc, a whole, as older Americans or seniors, I recognize that you are as diverse a group as we "somewhat younger" and those "much younger" fellow citizens are. It's a diversity that we celebrate as part of our distinct American nature. I am sure this diversity will be evident to all of you as you work to come to consensus around many of the issues you will address at this Conference.

II. **Social Security**. *Unions and many senior advocates have urged the President to re-emphasize his commitment to protecting and maintaining the universality of the Social Security program. The solvency of the Social Security Trust Fund, and what steps will be taken to secure it are high on lists of concerns. This year, the 60th Anniversary of the creation of Social Security program, provides a good backdrop to renew commitment to the program.*

- As your President, I want to reiterate my fundamental commitment to Social Security. This government has a solemn commitment to every working American, and to their families, that Social Security will be there for them when they need it.

- For decades, Social Security has provided economic security to the elderly, to Americans with disabilities, to families who have lost not just a loved one, but the family provider. It is a program that has made a difference in the millions of individual lives and in American society.

- Almost 60 years ago, President Franklin Roosevelt signed the legislation creating Social Security, saying that the program "will give some measure of protection to the average citizen and to his family against the loss of a job and against poverty-ridden old age."

- To ensure that our Social Security commitments to future generations will be honored, we need to look to the future. We need to make a bipartisan commitment to keep Social Security safe, sound and secure throughout the 21st century.

- We have the time to make the right decisions about Social Security's future -- according to recent estimates of the Trustees, Social Security will have sufficient funds to pay benefits for the next 35 years.

- The important groundwork is already being laid. An Advisory Council on Social Security -- a bipartisan panel with a great deal of expertise and experience -- has begun developing policy recommendations aimed at achieving long-term solvency for Social Security, and is expected to report this fall. No significant change in the Social Security program has ever taken place without the groundwork being laid by this kind of bipartisan commission. The 1930s changes adding coverage for survivors and dependents, the 1960s recommendation for the creation of the Medicare program, and the 1983 changes that addressed the insolvency crisis -- all of these changes were preceded by commissions like our Advisory Council that were instrumental in developing sensible, effective change to the program.

- Whatever the recommendations, as we begin to pursue changes that will keep Social Security solid throughout the 21st century, I believe very strongly that we must protect the core principles that make Social Security work as well as it has for nearly 60 years.

- First, Social Security has been so successful, so important to our society, because it is universal -- virtually every American participates in the program. The program works because we all participate in it, pooling our payroll contributions so that we share in the benefits the program provides -- whether as a senior citizen, a spouse or dependent who has lost a loved one who was still in his or her working years, or as one who has lost the ability to work because of a disability. Social Security is a vitally important package of economic protection that is there for us during our times of greatest vulnerability.

- Second, Social Security is effective because it promotes and rewards work by tying benefits to wage-earning labor, and we must protect that link between work and benefit eligibility, ensuring workers a fair return on their payroll tax dollars.

- And, finally, Social Security is so important to our society's well-being because it is the single most important instrument this nation has to keep our elderly out of poverty. We must protect the program so that it provides an adequate base for older Americans and continues to keep people from falling into poverty.

- I want to say a word to my fellow members of the baby boom generations as well as to citizens in their 20s and 30s who have doubts about Social Security's future, and who wonder whether they should still be a part of the program.

- Social Security has always been a model of intergenerational cooperation. The program works because current workers generate the revenues that provide retirement benefits for their eligible parents and grandparents. These benefits allow older Americans to live lives of dignity and independence, relying on their own resources, and not a burden to adult sones and daughters.

- For Social Security to stay strong in the future, we need people of all generations to work together. Younger people need to recognize the value Social Security plays in the lives of senior citizens. Older Americans must

understand that Social Security cannot be allowed to end with their generation, that we must share ideas and thoughts to ensure that the program lives on for decades to come.

- It has been almost 60 years since President Franklin Roosevelt's pen created a Social Security program that became one of the most successful and important initiatives this or any other government has ever created. The lives of tens of millions of Americans have been touched by Social Security during its existence. Our goal, our bipartisan goal, must be to ensure that Social Security will be around for another 60 years and beyond, providing economic security to generations of American workers and their families.

III. **Accomplishments/Other**. *The WHCoA provides an opportunity to highlight Administration accomplishments on behalf of seniors, and highlighted by the notable anniversaries of admired federal programs (Medicare, Social Security, Older Americans Act), the Conference provides the opportunity to discuss examples of government working.*

Could also recognize Oklahoma victims who worked on many of these programs.

- I think a universal belief about government is that one of its key roles is to protect society's most vulnerable. And the times when we are most vulnerable are at the beginning and end of life. I am proud that my Administration has fought hard to protect the youngest and the oldest in our nation. For older Americans, we have fought for programs that promote health and independence,... [Review select accomplishments, perhaps including:

    - Elevation of Commissioner of Aging to Assistant Secretary of Aging
    - Champion of long-term care, health security, strengthening Medicare (First Lady and Mommograms), containing spiralling health care costs
    - Establishment of independent Social Security Administration
    - Improving SSA customer service--e.g. Personal Earnings and Benefits Statement, reduction in pending disability claims.
    - Support for senior involvement in Americorps.
    - Laundry list of accomplishments being compiled.]

- I am proud that your country can offer you some assistance, protection after all you have given to your country. As we celebrate the 50th Anniversary of the end of World War II this year, I would particularly like to salute the contributions and protection given by our WWII veterans, many of whom are here today. You fought selflessly, to protect our community and our neighbors abroad; you and your generations have taught us the values of patriotism, community, selflessness, and self-reliance. This Administration is working to keep those values in our society...

- I pledge to work with you to continue fighting to protect our society's most vulnerable. I look forward to the guidance and recommendations that will come out of the 1995 White House Conference on Aging. I know that your desire to leave a legacy of hope for your children and grandchildren will be reflected in the outcomes of the Conference. I hope you will work with me, in a cooperative, bipartisan manner, to set a strong, hopeful course into the 21st century.

Outline for Health Care Portions of POTUS White House Conference on Aging Speech

1. Reiterate the historical importance of Medicare

2. Acknowledge last year's health care debate (i.e., what we fought for; what we admittedly did not achieve) and note that the problems in our health care system remain.

3. State that he is committed to working together

   a. Note that we won't get everything we want, but that shouldn't prevent us from looking for common ground.

   [b. Should he restate his vision for health care reform (i.e., State of the Union message)?]

4. But emphasize that he has criteria for evaluating any health care proposal -- from the Administration or the Congress -- and note that the Medicare and Medicaid proposals being considered by the Republicans do not pass his test.

   (1) **Coverage.** Does it work toward our goal of expanding coverage or does it go backward and increase the number of uninsured Americans?

   (2) **Choice.** Does it expand choice -- particularly managed care choices for all Americans -- or does it coerce Medicare beneficiaries into managed care plans?

   (3) **Reform.** Will this proposal reform the Medicare and Medicaid programs to make them more efficient without harming the delivery system, threatening quality and increasing cost shifting to small businesses? Or are these simply arbitrary and excessive cuts used to pay for other priorities?

   (4) **State Flexibility and Fairness.** Does this proposal give states greater flexibility to run their Medicaid programs in the way that works best for them? Or does it simply shift costs to states in the guise of greater flexibility?

   [(5) **Building for our Future.** This could address the longer-term issues like deficit reduction and the Trust Fund problem. It could also encompass some commitment to reinvest in Medicare beneficiaries (e.g., long-term care).]

5. Outline "some things we are doing right now" to expand choices, strengthen Medicare and Medicaid, educate beneficiaries, etc.

   (1) Fraud and abuse and other REGO II proposals

(2) Managed care (general description rather than specific proposal)

(3) Mammography

[(4) HHS developing list]

1995 WHITE HOUSE CONFERENCE ON AGING
SATELLITE LOCATIONS

Hundreds of thousands of individuals across the United States will have the opportunity to view the opening plenary session of the 1995 White House Conference on Aging (WHCoA) via satellite. Any facility equipped to receive a Ku-band signal may show this historic event. There is no charge to receive the signal. The satellite coordinates and other technical information can be obtained by calling Tibor Saddler at Advanced Engineering & Planning Corporation, Inc., in Alexandria, VA at (800) 800-2372 or at (703) 838-6885.

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- **Rhode Island Convention Center, Providence, RI** Contact: Philip Johnston (617) 565-1500
- **Hunter College, New York, NY** Contact: Alison E. Green (212) 264-4600
- **The Convention Center, Pittsburgh, PA** Contact: Lynn Yeakel (215) 596-6492
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