

# McCall's

## FAX COVER SHEET

TO: Karen Finney

FROM: Harriet Lyons

DATE: Oct. 6, 1993

PAGES TO FOLLOW INCLUDING COVER SHEET: 9


IF YOU HAVE ANY QUESTIONS, PLEASE CALL:

(212) 463- 1454

COMMENTS: A little reorganization and cutting needed for fit, and minor suggestions for your approval

McCALL'S FAX MACHINE # (212) 463-1403

110 Fifth Avenue New York, New York 10011 (212) 463-1000

 A Publication of The New York Times Company

By Hillary Rodham Clinton

Virtually from the dawn of time, women have been at the forefront of promoting good health. As mothers, midwives, nurses, doctors and scientists, women have blazed trails for centuries as caregivers in their communities.)

Courageous women have fought stereotypes and gender barriers to advance health care. (Clara Barton crossed battle lines to tend to the wounded during the Civil War and later founded the American Red Cross. England's Florence Nightingale launched the modern nursing profession. In 1849, Elizabeth Blackwell endured ridicule and hostility to become the first woman to graduate from an American medical school.

Yet despite their vital role as health providers, women historically have been treated as second-class citizens when it comes to getting good

No

No

Care. Diagnostic techniques, treatments, and research for the most common diseases traditionally have focused on men.

*no space*

**Women have unique perspectives on our health care system.**

*As*

During the past year, as I traveled around the country listening to Americans talk about health care, I was struck by the vast array of women who had tales to tell about our health care system.

I was reminded that in caring for children, aging parents, and relatives, women are routinely exposed to all facets of the system--from the doctor's office to the hospital, from the insurance company regulations to the medical bills.

~~Given these kinds of experiences,~~  
women have developed <sup>a special understanding</sup> ~~unique perspectives~~  
on what health care is all about. <sup>As the points</sup> Women appreciate the benefits of good health care--and they are painfully aware of what can go wrong when the system works unfairly.

*no*

*illustrate below,*

In general, little credence was

*typo*

given to the notion that women suffer from symptoms and illnesses different from men. And that ignorance too often resulted in improper and costly treatments for women, such as unnecessary hysterectomies and mastectomies.

*s No*

**Women can make a difference.** Thanks to a dedicated group of women doctors, scientists, and health care advocates, as well as women members of Congress, our nation has become more enlightened about the inadequacies of women's health care in the last few years. The National Breast Cancer Coalition has ~~heightened~~ ~~public awareness about breast cancer and~~ successfully pressed for more federal funding for research, diagnostic services, and treatments. The Society for the Advancement of Women's Health Research has been instrumental in the collection of data about women's health and in pushing for more research on women's health problems.

*No*

(6)

**Women still lack access to the health**

**care they deserve.** Today we have begun to recognize that women have unique health problems, unique symptoms, and unique reactions to treatments. But even so, women are too often excluded from major clinical studies. For example, the leading cause of death among women in our country is coronary disease, but until recently, women were routinely excluded from major coronary clinical trials.

Women are also too often denied access to preventive care.

OK

Last summer, a comprehensive survey of women's health showed that one third of all women did not receive basic preventive services, such as Pap smears, clinical breast exams or complete physicals in the previous year. Among women over 50, only 44 percent received a mammogram.

And too many women--about 16 million--don't have any health insurance.

These ~~depressing~~ facts offer compelling evidence that, even with the

OK

(3)

progress we have made, women continue to

be more vulnerable to serious illness than ~~necessary~~ <sup>they should be</sup> as they get older--

e. OK

largely because they lack preventive care or the ~~financially~~ <sup>3</sup> means to pay for health insurance.

NO

One of the most chilling stories I heard came from a woman I spoke to in New Orleans. She worked for a company that did not provide health coverage. But she appreciated the importance of good health and, even though she had to pay ~~totally~~ for her care, she went to her doctor for ~~regularly~~ check-ups.

NO

NO

Not long before I spoke with her, she had gotten a mammogram that revealed a lump in her breast. Her doctor said that normally he would recommend a biopsy, but since she didn't have insurance he would monitor the lump for the next few months.

What concerned me most about this woman's story was that she was doing everything right to take care of herself. She was behaving responsibly and was willing to pay what she could. Yet our system failed her terribly, and

she was left with the horrifying prospect that she might die because she couldn't afford a routine diagnostic procedure for a disease that now afflicts 2.6 million American women and kills 46,000 each year.

<sup>must continue</sup>  
Women ~~have had~~ to overcome faulty stereotypes ~~and outdated ideas about~~ No  
~~health~~. Even some of our nation's finest medical schools perpetuated faulty stereotypes about women's health that, until recently, were taken as gospel.

For too long women's health issues were viewed largely in the context of reproduction. Medical students (almost all of whom were male) were taught for years that women should only bear children between ages 18 and 25 and would contract endometriosis if they gave birth after 30. Problems associated with menopause were often viewed as psychosomatic or signs of emotional weakness. At the same time, diseases that primarily afflict women, such as osteoporosis, breast and ovarian cancer, and multiple sclerosis were consigned to the back burner of medical research.

⑤

**Women must help shape health care**

**reform.** As our nation wrestles with the health care crisis, women must help shape the agenda for change. Women must speak up so they are assured of the care and treatment they need and deserve.

If we use our knowledge and experience to speak out, we can help create a new philosophy about health care in America.

NO  
/

We can make sure that women are not excluded from research studies, that cures are found for diseases like breast cancer, and that women have the security of knowing their health needs will not be ignored.

**Responsibility is a key to better care**

OK

~~for women.~~ Given the magnitude of the health care crisis, real progress depends on a commitment from the government, private industry, and individual citizens.

While we must ask the public and private sectors to be more responsive to our needs, we as individuals also must do a better job of leading healthy lives.

(7)

I'm convinced that with a combination of health care reform, more funding for women's health research, and more responsibility on the part of individuals, we can achieve more for women's health in the next decade than we have in the last half-century.)

*OK*

But, like Clara Barton, Florence Nightingale, and Elizabeth Blackwell before us, we must have the courage to demand change.

In the coming months, I hope women across this country will join me as we try to build a new philosophy of health care in America that is grounded in the values of compassion, equality, and efficiency. As women, we can make a lasting difference if we take responsibility for our own health and work toward our common vision of a healthy society.

Hillary Rodham Clinton chaired the <sup>President's</sup> White  
House task force on <sup>National</sup> health care reform.

**What Health Care Reform Will Mean**

*no changes*

③

# McCall's

## FAX COVER SHEET

TO: Karen Finney

FROM: Lisel Eisenheimer

DATE: 10/14/93

PAGES TO FOLLOW INCLUDING COVER SHEET: 1 + 2

IF YOU HAVE ANY QUESTIONS, PLEASE CALL:

(212) 463- 1440

COMMENTS: Karen - Here is a rehypert copy of  
agreement you sent us. Please call me after  
you receive it. Thanks,  
Lisel

McCALL'S FAX MACHINE # (212) 463-1403

110 Fifth Avenue New York, New York 10011 (212) 463-1000  
A Publication of The New York Times Company

DRAFT

October\_\_\_\_, 1993

Ms. Hillary Rodham Clinton  
The White House  
Washington, D.C. 20007

Dear Ms. Clinton:

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2. You hereby grant us the exclusive, one-time right to publish the Material in the United States and Canada (first North American serial rights) in McCALL'S Magazine. The Material must be printed in its entirety and may not be abridged or edited by us. The Material may only be published by us one-time in McCALL'S Magazine and not separately, in any other place, in reprint form, or in conjunction with any other text, photographs, reprint form, or in conjunction with any other text, photographs, or materials.

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5. We will apply for the United States copyright registration in the Material in the name of Hillary Rodham Clinton. You will execute the enclosed Instrument for Recordation of Transfer of Exclusive Rights under Copyright and any other documents necessary to enable us to effect such registration.

6. In the exercise of your retained rights in the Material, you may publish it in any other periodical or any book or other print form at any time after three months from the date the Material has first been published in McCALL'S. In any reuse of the Material by you in substantially the same form as it appeared in McCALL'S Magazine, you shall use best efforts to state that the material was previously published in McCALL'S Magazine and to state the date of that publication.

We are enclosing this letter in duplicate. Please sign both copies and return one to us for our records.

Sincerely yours,  
McCALL'S Magazine

By \_\_\_\_\_  
Lisel Eisenheimer

ACCEPTED AND AGREED

\_\_\_\_\_  
Date: \_\_\_\_\_

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Deputy Editor

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lisel

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110 Fifth Avenue New York, New York 10011 (212) 463-1000  
A Division of The New York Times Company

Lee Riffaterre → <sup>212</sup> 556-3993  
Legal Counsel

DRAFT

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\* after approval  
by HACA  
designee

already  
gone to print  
oral approval  
from Lisa or  
Sue within

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*To Kern Jannay*

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REVISED DRAFT 8/12/93

**THE BETTER WAY GOOD HOUSEKEEPING MAGAZINE**

**Q and A on Health Care Reform Plan, based on an interview with  
Hillary Rodham Clinton (DRAFT AUG. 11, 1993)**

Introduction:

[ President Clinton is sending Congress legislation guaranteeing health insurance for all Americans. To better understand the President's proposal, The Better Way spoke in August with Hillary Rodham Clinton, who chaired the Task Force on National Health Care Reform. Here are her answers to questions Good Housekeeping readers are most likely to ask:

*take out* [ **1. Who will receive health insurance under President Clinton's reform proposal?**

The plan will guarantee all Americans a comprehensive package of health benefits.

**2. What will a typical health care policy cover?**

The President's health benefits package is modeled after the comprehensive packages offered by Fortune 500 companies. It will cover a full range of physician and hospital care, lab work, and x-rays. It will also include in-hospital and out-of-hospital mental health services, prescription drugs, and drug and alcohol abuse treatment.

**Question #2 continued:**

And the comprehensive benefits package will have one thing that's only covered in a handful of current plans: a full range of preventive services, such as periodic checkups, immunizations for children, and mammograms.

Finally, this comprehensive package of services will be guaranteed, so your employer or insurance company can't decrease your benefits when it's time to renew your policy or tell you to go read the fine print in your policy when you get sick.

**3. Will I be given any choice as to the type of health plan I'll be enrolled in?**

Yes. You will be able to choose the type of health plan that best fits your family's needs from the variety of plans offered in your local area. The plans will require differing employee contributions. If you want to continue receiving care from the doctors you now use through the traditional fee-for-service system--where doctors operate independently and charge a fee for each service they provide--you simply choose that kind of plan. You can also choose an HMO or P.P.O. (which combines features of HMO's and fee-for service plans).

You will be given detailed information about the different plans available--including a "report card" that grades the quality and patient satisfaction of each plan. You will also receive a Health Security card, which guarantees you health services wherever you live or travel.

① → (within the U.S.)

**4. Will I be able to remain under the care of my current physician?**

Yes. You will always be able to choose your doctor. You can follow him or her into any plan he or she joins or go to an independent doctor.

**5. I'm now insured by my employer. In what way, if any, will my contribution to my health insurance change?**

If you are employed and currently receive a standard benefit package similar to the one in the President's plan, you will continue to pay part of your health care premium each month, just the way you probably do today. However, under health care reform, your employer cannot make you pay more than 20% of the premium cost -- and people earning below certain income levels will pay less than 20%. (Editors note: Right now, according to Buck Consultants, a medical benefits consulting firm, in the typical Fortune 500 plan, where the employer pays 80% of the cost, the premium cost to a family of four is about \$1,250 - \$1,500 per year, with an additional \$200 for the deductible.) We anticipate that the President's plan will cost less than what people are currently paying.

If your employer now pays 100% of your insurance, as many union plans do, they can continue to do so.

**6. I don't have health insurance. How do I apply?**

If you are working, but have no insurance, you probably will receive information about health plans from your employer. If you're self employed or unemployed, you will receive information about the choice of health plans offered in your area.

**7. Will I still be covered by insurance if I change jobs, or if I'm out of work?**

You certainly will be. Health care reform will guarantee you and your family health security. Right now, some workers are locked into their jobs because they fear losing their benefits. If you do switch jobs or lose your job, you put your family's financial and health security at risk. This will change! It will be impossible to lose your insurance if you switch jobs or lose your job.

Americans who are between jobs or unable to work for health reasons, who <sup>perhaps now</sup> qualify for Medicaid, will have the security of good health coverage and, depending on their income level, will be responsible for making a modest contribution to their health insurance.

Do all these people qualify for Medicaid?

perhaps now

**8. If I or someone in my family has a preexisting condition, will we be eligible for health insurance?**

Absolutely. Right now, insurance companies can refuse to cover you if, for example, your daughter has asthma or if you're diagnosed with a heart condition. And they do it all the time. Under the President's plan, that will be illegal. Insurance companies will have to accept you -- whether you're healthy or sick.

**9. Can I buy private insurance to pay for services not covered under my plan?**

Yes -- however, it is unlikely you'll feel the need to purchase more insurance than the guaranteed, comprehensive package of benefits offered under each plan.

**10. I'm on Medicare. Will it still exist, become part of the new plan or change in some way?**

You'll continue to receive your Medicare benefits as you now do. New benefits for all Medicare recipients will include prescription drug reimbursements and some long-term care coverage.

The President's plan emphasizes home and community-based long term care, such as adult day care centers and visiting nurses, when feasible for both the patient and the family.

11. Will I have to pay taxes on the comprehensive benefits package I get from my employer?

No.

12. What if I'm self-employed?

*addition* You won't be taxed on your health insurance *benefits* either. In fact, self-employed individuals, who today can only deduct 25% of their health insurance cost, will be able to deduct 100% of these costs after reform.

13. Will there be treatment priorities or restrictions?

Treatment priorities will not arise as a result of health reform. Your treatment will be determined by sound medical judgement, not by arbitrary rules and regulations. What kind of care you get will be a decision made by you and your doctor.

14. Where will the money come from to pay for health insurance for Americans who are not employed?

The savings generated through health care reform will be used to offset these costs.

THE BETTER WAY  
GOOD HOUSEKEEPING  
MAGAZINE

Q and A on Health Care  
Reform Plan, based on  
an interview with  
Hillary Rodham Clinton  
(Draft- August 11, 1993)

Introduction

President Clinton is introducing legislation guaranteeing health insurance for all Americans. To become law, Congress will debate the President's proposals and could change some provisions. Health insurance for all could become law by the end of this year, but more likely will take longer.

To better understand the President's proposals, The Better Way spoke with Hillary Rodham Clinton, who chaired the Task Force on National Health Care Reform. Here are her answers to questions Good Housekeeping readers are most likely to ask:

1) Who will receive health insurance under President Clinton's reform proposals?

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The President's health benefits package is modeled after the generous packages offered by Fortune 500 companies. It will cover a full range of physician and hospital care, lab work, and x-rays. It will also include in-hospital and out-of hospital mental health services, prescription drugs, and drug and alcohol abuse treatment.

And the comprehensive benefits package will have one thing that's only covered in a handful of current plans: a full range of preventive services, such as periodic checkups, immunizations for children, and mammograms.

Finally, this comprehensive package of services will be guaranteed, so your boss or insurance company can't change the terms of your policy when it's time to renew it or tell you to go read the fine print in your policy when you get sick.

ok

3) Will I be given any choice as to the type of health plan I'll be enrolled in?

Yes. You will be able to choose the type of health plan that best fits your family's needs. Local health alliances will offer a variety of plans with differing

employee contributions. If you want to continue receiving care through the traditional fee-for-service system--where doctors operate independent of any plan and charge a fee for each service they provide--you simply choose that kind of plan. You can also choose an HMO or P.P.O (which combines features of HMOs and fee-for-service plans).

You will be given detailed information about the different plans available--including a "report card " that grades the quality and patient satisfaction of each plan. You will also receive a Health Security card, which guarantees you health services wherever you live or travel [in the U.S.].

4) Will I be able to remain under the care of my current physician?

Yes. You will always be able to choose your doctor. You can follow him or her into any plan he or she joins or go to an independent doctor.

5) I'm now insured by my employer. In what way, if any, will my contribution to my health insurance change?

If you are employed and currently receive a standard benefit package similar to the

one in the Clinton plan, you will continue to pay part of your health care premium each month, just the way you probably do today. However, under health care reform, your employer cannot make you pay more than 20% of the premium cost-- and people earning below certain income levels will pay less than 20%. [Editor's note: Right now, according to Buck Consultants, a medical benefits consulting firm, in the typical Fortune 500 plan, where the employer pays 80% of the cost, the premium cost to a family of four is about \$1250-\$1500 per year, with an additional \$200 for the deductible.]

If your employer now pays 100% of your insurance, as many union plans do, they can continue to do so.

6) I don't have health insurance. How do I apply?

If you are working, but have no insurance, you probably will receive information about health plans from your employer. If you're self-employed or unemployed, you will visit the office of your local health alliance to receive information about the choice of health plans offered in your area.

7) Will I still be covered by insurance if I change jobs, or if I'm out of work?

You certainly will be. Right now, some workers are locked into their jobs because they fear losing their benefits. If you do switch jobs or lose your job, you put your family's financial and health security at risk. This will change! It will be impossible to lose your insurance if you switch jobs or lose your job.

Americans who are between jobs or unable to work for health reasons, who perhaps now qualify for Medicaid, will have the security of good health coverage and, depending on their income level, will be responsible for making a modest contribution to their health insurance.

8) If I or someone in my family has a preexisting condition, will we be eligible for health insurance?

Absolutely. Right now, insurance companies can refuse to cover you if, for example, your daughter has asthma or if you're diagnosed with a heart condition. And they do it all the time. Under the Clinton plan, that will be illegal. Insurance companies will have to accept you--

whether you're healthy or sick.

9) Can I buy private insurance to pay for services not covered under my plan?

Yes--however, it is unlikely you'll feel the need to purchase more insurance than the guaranteed, comprehensive package of benefits offered under each plan.

10) I'm on Medicare. Will it still exist, become part of the new plan, or change in some way?

You'll continue to receive your Medicare benefits as you now do, with no new costs or penalties. New benefits for all Medicare recipients will include generous prescription drug reimbursements and some long-term care coverage.

The President's plan emphasizes home and community-based long term care, such as adult day care centers and visiting nurses, when feasible for both the patient and the family.

11) Will I have to pay taxes on the comprehensive benefits package I get from my employer?

No .

12) What if I'm self-employed?

You won't be taxed on your health insurance either. In fact, self-employed individuals, who today can only deduct 25% of their health insurance cost, will be able to deduct 100% of these costs after reform.

13) Will there be treatment priorities or restrictions?

Treatment priorities will not arise as a result of health reform. Your treatment will be determined by sound medical judgement, not by arbitrary rules and regulations. What kind of care you get will be a decision made by you and your doctor.

13) Where will the money come from to pay for health insurance for Americans who are not employed?

The savings generated through health care reform will be used to offset these costs. We are also considering a "sin" tax, perhaps tobacco. such as sin tax. [Editor's note: at press time this decision hadn't been made.]

# *Good Housekeeping*

**FAX NUMBER**

**212 265-3307**

TO: Karen Finney

FROM: Erika Mark

TELEPHONE NUMBER: 212-649-2231

NUMBER OF PAGES (TO FOLLOW): 2

## **MESSAGE:**



# McCall's

September 20, 1993

Ms. -----  
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New York, NY -----

Dear Ms. -----:

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Due Date: -----

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Sincerely,

MCCALL'S Magazine

By: Lisel Eisenheimer  
Deputy Editor

Agreed:

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**Exclusive GH Guide To  
Clinton's Health Plan**

GHK (Logo)

**October '93**



Linda Lalit

→ Pam  
HAC friend

**A HOLIDAY MESSAGE FROM OUR FAMILY TO YOURS  
PARADE MAGAZINE  
DECEMBER 1993**

Across our nation this holiday season, our family and other families are gathering together to take stock of another year passed. It is a time to reconnect with relatives, a time to reflect on good deeds and failings, a time to re-awaken ourselves to the spirit of giving.

Like most American families looking back on the year, our family will remember moments of joy and moments of grief. There were days when we revelled in the love we felt from relatives and friends; there were days when we ached with sadness over the passing of those dear to us.

No matter what highs and lows any year brings, the holiday season for us is always a time to celebrate family and faith. By coming together every December with our parents, brothers, sisters, aunts, uncles, nieces, nephews, and friends, we reaffirm the common bonds that make us family.

Today, as our nation struggles with new challenges, family and faith are more important than ever. That's why during this holiday season our family asks all Americans to join us in reaffirming America's spiritual richness and sense of community.

We are a nation of many faiths and beliefs united in a sense of common American purpose, and that is our greatest strength. Each of our faiths teaches that nobody survives alone, that

nobody exists in a vacuum. That simple idea is the core of the Judeo-Christian understanding of what it means to be a member of human society. We are not only our brothers and sisters' keepers, we are also each other's helpers and healers.

"If I am not for myself who will be for me?" Rabbi Hillel asked 2,000 years ago. "If I am only for myself, who am I?"

Whether we are Protestants, Catholics, Jews, Muslims, Buddhists, Hindus or atheists, we all are part of a larger national family that offers us individual dignity and freedom of conscience in matters of faith.

In America, more people believe in God, go to church or temple, and make faith a center of their lives than in any other advanced nation. And that is because our Constitution guarantees freedom of religion and allows people to choose their faith according to their consciences.

Our freedoms depend on mutual respect and tolerance. Yet too often those freedoms are imperiled by people whose hearts and minds are filled with fear and disdain. So today we must work harder to understand our differences and celebrate our diversity. We must remember that our own freedom depends on the respect and tolerance of others.

As the Bible says in Luke 6:37: "Judge not, and ye shall not be judged; condemn not, and ye shall not be condemned; forgive, and ye shall be forgiven."

At this time of year, particularly, we must contemplate the lessons of our history, the meaning of our faith and the

importance of our families. And we must think about our place in the larger community and the opportunities and responsibilities that go with living in a free society.

One way to show respect for each other is by passing on to our children a deep commitment to lead ethical and moral lives. By striving to make our children productive citizens who live up to their God-given potential, we all can make society better.

"No government can love a child, no policy can substitute for a family's care," the National Conference of Catholic Bishops wrote in a pastoral letter last year [ck date]. ". . . .The undeniable fact is that our children's future is shaped both by the values of their parents and the policies of our nation."

Every family, every parent has to assume the responsibility for the most sacred trust they are given: the nurturing and care of the next generation. Children must be given the opportunities of health care, education, safe streets, a sound economy and a clean environment. At the same time, parents must instill in their children a sense of community responsibility and collective purpose. And a spirit of caring.

None of these is a function of economic standing, ethnic origin, gender or race. Love and tolerance are not rooted in one's pocketbook, skin color or family tree. Rather, they are virtues that spring from the heart. And they depend on one's own respect for individual dignity.

Across our country, young people are rediscovering the rewards of serving others, the joy of giving. Through national

service, church work, charities, and volunteer groups, they are finding that love, generosity, and tolerance are mightier than greed and hatred.

They are discovering the wisdom of the prophet Micah's words: "He hath shewed thee, O man, what is good; and what doth the Lord require of thee, but to do justly, and to love mercy, and to walk humbly with thy God?"

That spirit of compassion and tolerance is a first step toward preserving our rich social fabric and deepening our sense of community.

During this holiday season, we can take another step. Let us urge Americans of every faith to join together to promote the common good. Let us celebrate as members of a national family committed to freedom and tolerance. Let us renew our belief that diversity strengthens us and makes our nation flourish. And let us remember that faith is not only a source of pride for each of us, but also a source of humility and hope.

May God bless America, and every one of us.

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