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ADMINISTRATIVE MARKING
INITIALS: AOB DATE: 12-9-13

PHOTOCOPY
PRESERVATION

THE WHITE HOUSE

July 2, 1993

The Johnson Family
834 Fifth Avenue
11-12 A
New York, New York 10021

Dear Sale, Casey and Woody:

Thank you for sending me a copy of your book, Managing Your Child's Diabetes. By sharing your experience and knowledge, you have made an important contribution to many other families coping with this disease.

I appreciate your kind words of support and hope I will have an opportunity to meet you all someday.

Sincerely yours,

Hillary

Hillary Rodham Clinton

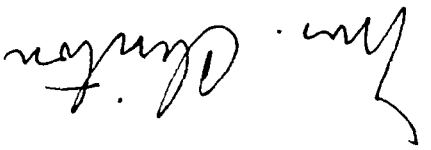
Sale Johnson

Dear Mrs. Clinton -

I am forwarding our Book - Managing Your Child's Diabetes - at the request of Ann Jordan - Our daughter, Casey, who is Chelsea's age - has diabetes and has been a spokesperson for Diabetes Research and The Juvenile Diabetes Foundation (JDF). We are very involved in the Search for a Cure - my husband - (Robert Wood Johnson) →

is on the Advisory of The N.I.H. + I am on the International Board of JDF headed by Mary Tyler Moore. If there is any possibility of our meeting with you - we have some very exciting ideas on major Health issues + Research. We both come from Medical - related families. Please consider a few moments of your time - for an excellent investment. Good Wishes in all your efforts on behalf of all of us. It is truly appreciated.

Most Sincerely Sale Johnson



Johnson
834 Fifth Avenue, 11-12A
New York, New York 10021

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Homedco

Corporate Office
17650 Newhope St.
Fountain Valley, CA 92708
(714) 755-5600

August 3, 1993

Mrs. Hillary Rodham Clinton, Chairperson
CLINTON TASK FORCE ON NATIONAL HEALTHCARE REFORM
Office of the First Lady
1600 Pennsylvania Avenue, NW
Washington, DC 20500

Dear Mrs. Clinton:

I very much appreciated the recent opportunity, at the Century Plaza Hotel in Los Angeles, to express my concerns regarding state fragmentation which would result with implementation of the plan recommended by the Healthcare Reform Task Force. As a homecare provider serving patients in 46 states, Homedco had hoped for a plan achieving greater consistency between the states and a reduction in the administrative burden borne by all healthcare providers.

Enclosed is a brief bullet-point summary of the homecare issues and concepts which we hope will be included in the Administration's final recommendations. Per your suggestion, I will continue to keep you advised of Homedco's concerns through Task Force member Lois Quam and Homedco's organizational mentor, Sandy Robertson.

Your assignment is difficult. If I could be helpful, or if any resource available within Homedco's 215 service locations could assist you or your associates with your task, we would be pleased to do so.

Sincerely,

Jeremy M. Jones
Chairman and CEO

JMJ:mjb

c: Lois Quam

HOME CARE

- Homedco, as the nation's largest provider of home medical equipment and services, is vitally interested in the future of home care in any comprehensive healthcare reform proposals.

- Representatives of Homedco or Lincare, with whom Homedco works closely on legislative issues, have met with the staff of the Health Care Reform Task Force and with numerous members of Congress on the health policy committees to make the following points:

  - The home care system provides an array of health services and supplies to a population with diverse needs. Home care is designed to:

    - Aid people with acute and chronic illnesses,
    - Render assistance to those with short-term incapacity facilitating recovery and return to healthy, active lifestyles,
    - Support those with long-term disabilities who are otherwise fit, and
    - Enable the elderly to maintain mobility and independence.

  - Although home care often is perceived as primarily a service for the elderly, according to a survey conducted by Washington-based National Research, 59 percent of those who had received home care were younger than 65 years of age.

  - A recent study by Aetna Life & Casualty Company looked at patients who had experienced catastrophic illnesses -- including infants with breathing and feeding problems and people with HIV/AIDS. This study found that home care resulted in a savings of about $20,000 per patient per month for AIDS patients, and around $40,000 per patient per month for infants with breathing problems.

- A study conducted in 1991 by Lewin/ICF compared the costs of home care versus hospital care for three medical conditions, including hip fractures, ALS (Lou Gehrig's disease with pneumonia), and chronic obstructive pulmonary disease (COPD). The study found that a combination of inpatient and home therapy with home medical equipment was preferred by patients and offered a potential savings of between $300 and $2,300 per patient episode.

- We understand a major budget reducing initiative of the Administration will be to propose cutbacks in Medicare. While some cuts may be merited, we urge the Administration not to discriminate against patient recipients of home care. Do not cut home medical equipment and services disproportionately to cuts that are made in the rest of Medicare. Moreover, do not single out one type of benefit, such as oxygen, where there is a specific blood-gas test that patients must meet that insures against abuse or overuse.

- Providers of home care services, such as Homedco, can be partners with the Administration in working to improve efficiency in the delivery of health care services. Our Company has led our associations' efforts to establish strict eligibility and certification standards for Medicare providers, to consolidate the number of Medicare insurance carriers, and to eliminate practices that have invited some aggressive businesses to take advantage of Medicare patients.