

ADVISORY COMMISSION ON CONSUMER PROTECTION AND QUALITY IN THE HEALTH CARE INDUSTRY

I. ADVISORY COMMISSION

The President signed an Executive Order creating an Advisory Commission on Consumer Protection and Quality in the Health Care Industry to review changes occurring in the health care system and, where appropriate, make recommendations on how best to promote and assure consumer protection and health care quality.

II. PURPOSE

The Advisory Commission will respond to concerns about the rapid changes in the health care financing and delivery system. It will provide a forum for developing a better understanding of the changes in the health system and for making recommendations on how to address the effects of those changes.

III. IMPACT

- The Advisory Commission will provide recommendations that will allow public and private policy makers to define appropriate consumer protection and quality standards.

IV. SPECIFIC PROVISIONS

- The Advisory Commission will be appointed by the President and co-chaired by the Secretaries of HHS and Labor will have a membership with representatives from: health care professions, institutional health care providers, other health care workers, health care insurers, health care purchasers, state government, consumers, and experts in health care quality, financing, and administration. The Vice President will review the final report prior to its being submitted to the President.
- The Advisory Commission will study and, where appropriate, develop recommendations for the President on: (1) consumer protection; (2) quality; and (3) availability of treatment and services in a rapidly changing health care system.
- The Advisory Commission will submit a preliminary report by September 30, 1997 and a final report 18 months from the date of its first meeting.

V. BACKGROUND

The Clinton Administration has a long history of strong support of consumer protection in all health care plans, including the Medicare program. Two such examples are his support of initiatives to assure new mothers and babies have access to necessary hospital care and to protect communications between health professionals and their patients.

For Immediate Release

September 5, 1996

EXECUTIVE ORDER

ADVISORY COMMISSION ON CONSUMER PROTECTION
AND QUALITY IN THE HEALTH CARE INDUSTRY

By the authority vested in me as President by the Constitution and the laws of the United States of America, including the Federal Advisory Committee Act, as amended (5 U.S.C. App.), it is hereby ordered as follows:

Section 1. Establishment. (a) There is established the Advisory Commission on Consumer Protection and Quality in the Health Care Industry (the "Commission"). The Commission shall be composed of not more than 20 members to be appointed by the President. The members will be consumers, institutional health care providers, health care professionals, other health care workers, health care insurers, health care purchasers, State and local government representatives, and experts in health care quality, financing, and administration.

(b) The Secretary of Health and Human Services and the Secretary of Labor shall serve as Co-Chairs of the Commission. The Co-Chairs shall report through the Vice President to the President.

Sec. 2. Functions. (a) The Commission shall advise the President on changes occurring in the health care system and recommend such measures as may be necessary to promote and assure health care quality and value, and protect consumers and workers in the health care system. In particular, the Commission shall:

(1) Review the available data in the area of consumer information and protections for those enrolled in health care plans and make such recommendations as may be necessary for improvements;

(2) Review existing and planned work that defines, measures, and promotes quality of health care, and help build further consensus on approaches to assure and promote quality of care in a changing delivery system; and

(3) Collect and evaluate data on changes in availability of treatment and services, and make such recommendations as may be necessary for improvements.

(b) For the purpose of carrying out its functions, the Commission may hold hearings, establish subcommittees, and convene and act at such times and places as the Commission may find advisable.

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Sec. 3. Reports. The Commission shall make a preliminary report to the President by September 30, 1997. A final report shall be submitted to the President 18 months after the Commission's first meeting.

Sec. 4. Administration. (a) To the extent permitted by law, the heads of executive departments and agencies, and independent agencies (collectively "agencies") shall provide the Commission, upon request, with such information as it may require for the purposes of carrying out its functions.

(b) Members of the Commission may receive compensation for their work on the Commission not to exceed the daily rate specified for Level IV of the Executive Schedule (5 U.S.C. 5315). While engaged in the work of the Commission, members appointed from among private citizens of the United States may be allowed travel expenses, including per diem in lieu of subsistence, as authorized by law for persons serving intermittently in the Government service (5 U.S.C. 5701-5707) to the extent funds are available for such purposes.

(c) To the extent permitted by law and subject to the availability of appropriations, the Department of Health and Human Services shall provide the Commission with administrative services, funds, facilities, staff, and other support services necessary for the performance of the Commission's functions. The Secretary of Health and Human Services shall perform the administrative functions of the President under the Federal Advisory Committee Act, as amended (5 U.S.C. App.), with respect to the Commission.

Sec. 5. General Provision. The Commission shall terminate 30 days after submitting its final report, but not later than 2 years from the date of this order, unless extended by the President.

WILLIAM J. CLINTON

THE WHITE HOUSE,
September 5, 1996.

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THE WHITE HOUSE

Office of the Press Secretary

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September 5, 1996.

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E X E C U T I V E O F F I C E O F T H E P R E S I D E N T

12-Sep-1996 11:17am

TO: Carol H. Rasco

FROM: Elizabeth E. Drye
Domestic Policy Council

CC: Jill Pizzuto

SUBJECT: RE: call - Ned McWherter

FYI are standard response to people putting forward nominees is that they should send names to Betsy D'Jamoos at HHS, (Phone: 690-6625; fax: 401-1948), and cc Chris Jennings: fax: 456-7028. If people have questions, they can call Sandy Bublick-Max at 456-5560.

E X E C U T I V E O F F I C E O F T H E P R E S I D E N T

05-Sep-1996 02:58pm

TO: Carol H. Rasco

FROM: Christopher C. Jennings
Domestic Policy Council

CC: Jennifer L. Klein
CC: Diana M. Fortuna
CC: Elizabeth E. Drye
CC: Jeremy D. Benami

SUBJECT: commission update

After someone leaked that the President would be announcing a quality innitiative, Mike M. and Mary Ellen G. asked Me~~l~~issa S~~M~~offield (from HHS) and me to talk to reporters to attempt to address some damaging inaccuracies that were floating around about the commission. We were largely successful in getting the facts out, but Robert Pear was bound and determined to write a story to give the impression that the commission was a bigger deal than it really is. (The other stories by the Washington Times and the LA Times were fine.)

We are trying to ensure that any subsequent portrayal of the commission is written in a way that reflects the reality that it is an advisory panel that has an important, but narrow focus -- quality. Jen and I have been working on three one-pagers that we are ciculating within the White House and to the Departments: (1) a one page simple description of the commission and its functions, (which can and has been circulated to the press and beyond); (2) a brief set of our suggested talking points outlining the President's quality initiative -- which emphasizes the 48-hour and the anti-gag rule initiatives; and (3) a Q&A document that answers some of the most likely and difficult questions surrounding this commission.

We are sending this to you right away. If you have any questions, please give Jen or me a call.

p.s. The overall reaction to the commission concept by consumer groups, providers, insurers, and managed care reps has been quite favorable. We are trying to get their positive reviews on paper so that we have some solid validation.

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QUALITY HEALTH CARE: A CLINTON ADMINISTRATION PRIORITY

- Today, the President is announcing that a renewed emphasis should be placed on assuring quality and consumer protection in the nation's health care system. At a time when unprecedented changes in the health care delivery system are taking place, consumers and their representatives are increasingly concerned about how these changes are affecting the quality of health care they are receiving.
- To assure that our health care system continues to provide the highest quality health care in the world and to strengthen consumer protection, the President is issuing a challenge to the Congress to pass two consumer protection initiatives that have already received broad, bipartisan support before they adjourn for the Fall election.
- The President believes that too many health plans "gag" their doctors from even telling patients all their treatment options. And too many health plans are telling mothers of newborn children that they won't pay for the cost of hospitalization beyond 8-24 hours after birth.
- The President strongly believes that these practices must stop. He is calling on the Congress to pass two bills that would direct health plans to give mothers the opportunity to stay in the hospital for 48 hours and would prohibit plans from restricting communication between health professionals and patients.
- In addition, the President is announcing the establishment of an advisory commission, co-chaired by HHS Secretary Donna Shalala and Labor Secretary Robert Reich, to study and, where appropriate, to develop recommendations for the President on (1) consumer protection; (2) quality; and (3) the availability of treatment and services in a rapidly changing health care system.

**QUESTIONS AND ANSWERS ON
HEALTH CARE ANNOUNCEMENT IN FLORIDA**

QUESTION: How is this different from the Health Care Task Force chaired by the First Lady?

ANSWER: This advisory commission has a narrow but important task. It will be made up of no more than 20 insurers, employers, consumers, government representatives, health care professionals, and other health care workers. This commission will not be proposing comprehensive health care reform, but instead will build on work that is already being done and look at health care quality, consumer protection and availability of treatment and services in managed care and other health plans. In a rapidly changing health care market -- where there are increasing pressures to cut costs -- the President wants to be sure that quality is not sacrificed.

QUESTION: What do you mean by the "availability of treatment and services"? Isn't this your next attempt to guarantee universal coverage?

ANSWER: The President *is* committed to continuing to work to reform the health care system, but this advisory commission is not "health reform part two". It is a small panel of experts charged with looking at quality, consumer protection and the availability of treatment and services. The panel will look at availability because one of the current problems in the health care system is that some people who have insurance are being denied appropriate services. There are even some areas of the country where there is no place for people to get the care they need.

QUESTION: Is it a slight to the First Lady that she has not been asked to chair this commission?

ANSWER: As I said, this commission has a very specific task. The President has asked Secretaries Shalala and Reich to co-chair because these issues are directly relevant to their Departments.

QUESTION: Your Health Security Act was built around managed care. Why are you attacking managed care with this commission?

ANSWER: This commission is not an attack on managed care. It will bring together experts, insurers, businesses and consumers to make recommendations on quality, consumer protection, availability of treatment and services in managed care plans *as well as* other health plans. The health care market is changing quickly and this commission will allow some of the best minds in the field to analyze and make recommendations on how to ensure that people get the best quality care possible.

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