

MEMORANDUM TO TOM FREEDMAN AND MARY SMITH

FROM: HIMA VATTI

DATE: AUGUST 12, 1997

RE: FUTURE OF POISON CONTROL CENTERS

Elizabeth Drye gave me the memo you sent to Bruce Reed and Elena Kagan outlining the present precarious state of poison control centers in the nation. You mentioned that HHS has been studying the problem since 1993 and is supposed to issue a report on the future of poison control centers sometime this year.

I called HHS to ascertain their current knowledge of this issue and the predicted date of issue of the report. Mary Beth Donahue sent me a two-page fact sheet which I have attached. HHS convened the Poison Control Centers Leadership Group to produce a report identifying options for funding and establishing a new nation-wide poison control system. This report has been completed. The Poison Control Center Advisory Work Group is now reviewing this report and will make final recommendations to the Secretary. After the Secretary reviews the Advisory Work Group's report in late August, HHS will release it.

Included in the report will be excerpts from a study funded by the Robert Wood Johnson Foundation and facilitated by the Centers for Disease Control for the Advisory Work Group. The study evaluates economies of scale in poison control services in order to specify design options for a nation-wide system. The full study will be released in September, and CDC will make recommendations based on it.

Ms. Donahue could not speculate at present whether the Advisory Work Group report and Johnson study would rise to the level of a White House release. Such decisions will be made after the report has undergone the Secretary's review and is released. Ms. Donahue will return from vacation on August 19, and requested that we contact her at that time to find out the status of the Advisory Work Group report.

PREVENTION AND TREATMENT OF POISONINGS
Ensuring Poison Control Services for the Nation

Prepared by the Department of Health and Human Services
Centers for Disease Control and Prevention
and
Health Resources and Services Administration

BACKGROUND:

- Poisonings in the United States continue to cause deaths, disabilities, and major health care expenditures. The American Association of Poison Control Centers estimates that more than 4 million poisonings occur each year in the U.S. at estimated medical costs of \$3 billion.
- More than 90 percent of poisonings occur in the home; 60 percent of poisoning victims are children younger than 6 years of age.
- Every dollar spent on poison control services saves an estimated \$7 in medical costs. Costs would have been significantly higher if not for the services provided by the 75 poison control centers throughout the country. (In 1996, a cost-benefit analysis of Poison Control Center Services was conducted and an article published in the *Annals of Emergency Medicine*.)
- In 1994, the House Committee on Government Operations held hearings on the funding crisis of poison control centers. The primary issues included determining the most cost-effective means of making poison control services available to all U.S. residents and the optimum mechanism for funding such services. The Committee requested that the Department of Health and Human Services (HHS) submit a plan that ensures access to quality poison control services for all U.S. residents.

PROGRAM ACTIVITIES:

- Convened the Poison Control Centers Leadership Group (PCCLG) in response to the congressional request and produced a report identifying funding options and making recommendations for the establishment of a new nation-wide poison control system that combines universal access and cost-effectiveness.

Sequence
with release
lots of interest
clarify
reports
Tom & Mary

- Convened the Poison Control Center Advisory Work Group to review the PCCLG report and make specific recommendations to the Secretary, HHS, to ensure poison control center services for all U.S. residents. The report is in clearance for transmittal to the Secretary, HHS.
- Funds a study by the San Francisco Regional Poison Control Center that examines the cost-effectiveness of direct access to a regional poison control center in managing unintentional childhood poisonings, as compared to use of alternative sources of poison information.
- Supports extramural poison control center-based research projects that have resulted in guidelines for stocking antidotes at poison control centers and a protocol for following up ophthalmic exposures.
- Funds a training and demonstration grant in West Virginia that provides emergency medicine training to staff at two West Virginia poison control centers.
- Provides technical assistance to the American Association of Poison Control Centers on the development of information systems for poison control centers.
- In collaboration with the Robert Wood Johnson Foundation and through a contract with George Washington University, conducted a study on economies of scale in poison control services to specify redesign options for a nationwide poison control system. The study report is expected to be completed in September 1997. *CDC is making recs.*
- CDC will lead discussions at the annual meeting of the American Association of Poison Control Centers, September 19-20, 1997, and the Safe America: Fourth National Injury Control Conference, November 19-21, 1997, to encourage poison control centers to convert to a common 1-800 number (at a cost of approximately \$2 million annually). Currently, New Jersey, Louisiana, Texas, Florida, and Oklahoma use 1-800-POISON1.

*CDC
facilitates
this
study
for the
Advisory
group*

THE WHITE HOUSE
WASHINGTON

February 14, 1997

Dr. Steven M. Marcus
New Jersey Poison Information and Education System
201 Lyons Avenue
Newark, New Jersey 07112

Dear Dr. Marcus:

Thank you for your letter regarding poison center services. Your efforts to develop a nationwide model is commendable.

I have shared your letter with Bruce Reed, Assistant to the President for Domestic Policy, and Donna Shalala, Secretary of the Department of Health and Human Services, so that they may know of your initiative. You can be sure that they will give this matter the appropriate attention.

Thank you, again, for writing.

Sincerely,



~~Erskine B. Bowles~~
Chief of Staff

cc: The Honorable Donna Shalala
The Honorable Bruce Reed

Elizabeth
Chris J.
Tom F.
good
little
idea.
what can
we do?
-BR

410-222-2220

NEW JERSEY POISON INFORMATION AND EDUCATION SYSTEM

201 Lyons Avenue Newark, New Jersey 07112

Steven Marcus, M.D., Executive Director
Diplomate, American Board of Medical Toxicology

Emergency : 1-800-POISON-1
(1-800-764-7661)
Facsimile : 1-201-926-0013
Office : 1-201-926-7443
TTY: 1-201-926-8008

January 16, 1997

Erskine Bowles
Chief of Staff
Office of the President of the United States
White House
Pennsylvania Avenue
Washington, D.C.

*V - get some
hansen*

Dear Mr. Bowles:

I am the executive Director of the New Jersey Poison Information and Education System, the regionally designated poison control center for the state of New Jersey. More important, perhaps, is the fact that I am Leigh Marcus' father. Leigh and your daughter are sorority sisters at The University of North Carolina at Chapel Hill. I don't know if that makes us quasi "kin," or not, but, I hope it will break the ice for what I believe is a discussion about a very important subject.

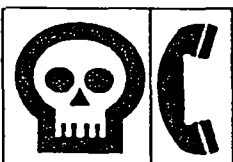
Poison centers have existed in this country since 1955. They serve as telephone consultants to the lay and professional public in times of emergencies, when a poison exposure is suspected, or when information about drug utilization is required. In New Jersey, we handled over 103,000 calls for help in 1996 alone. We are beginning our 15th year of activity in New Jersey as its regional poison control system.

Historically, poison centers have been funded in precarious ways. Many were established as departments in hospitals as public health programs whose cost was covered by that hospital and incorporated into the general overhead of those hospitals. As times have gotten "tight" for hospitals, many centers are in jeopardy, financially. This is particularly sad since, at this time, there are several initiatives calling for expansion of poison center services.

Congress has called upon the Department of Health and Human Services, to provide a report on the future of poison center services for the country. This report is due in 1997. The Robert Wood Johnson Foundation funded a research project by George Washington University to study the economies of scale for a poison center system and to try to develop a nationwide model for poison control services. I, personally, have been working to establish a single, toll free telephone number to allow citizens from any location in the United States to reach his/her regional poison control center. In the last 2 years, the states of New Jersey, Texas, Michigan and Oklahoma have agreed to use the same telephone number, 1-800-POISON-1 (1-800-764-7661) to access their poison centers. This system works! Florida, California and Louisiana are poised for this effort as well.

All we need to make everything "fall into place," is an igniter, a catalyst, someone or something to bring all the pieces together. I believe that the White House can be just such a force.

Preliminary results from George Washington appear to show enormous savings in health care costs by poison centers who prevent unnecessary visits to emergency rooms and stream-line the care of those who need hospital care. Poison centers save lives!



The Regional Drug and Poison Information Center for New Jersey, Designated as a Regional Poison Control Center and a Member, American Association Of Poison Control Centers

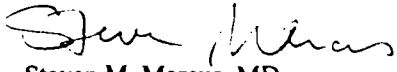
Support of our efforts is a winning situation. We have plans to finance poison centers into the next millenium, we have plans on expanding the penetration of services into every area of the country. All we need is the rallying efforts of a very visible, supportive individual.

I look forward to a dialog with your office. We will be celebrating fifteen years of service to the State of New Jersey in 1997. Your involvement, or the involvement of the White House, at any time during this year, would be most appreciated.

I look forward to speaking to you, to seeing you at the home of the tar heels or anywhere convenient to you.

Thank you for your anticipated help.

Sincerely yours,


Steven M. Marcus, MD

Funding now
state run?
1-800 number - states agree

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MEMORANDUM

Elizabeth -

TO: BRUCE REED, ELENA KAGAN

FROM: TOM FREEDMAN, MARY L. SMITH

RE: POISON CONTROL CENTERS

DATE: JUNE 30, 1997

Elizabeth -
could you look into
this? I'm not sure if a
toll-free number is the
answer, but it looks as
if there's something here.

SUMMARY

Elena
cc: Bruce + return

Each year there are approximately 2.4 million calls placed to poison control centers. Every dollar spent on poison control saves at least seven dollars in medical expenses because nearly 75% of all poisoning can be treated in the home rather than in the emergency room of a hospital. Poison control centers are struggling for funding because they piece together their funding sources with the result that no single source considers itself critical. Dr. Steven Marcus of the New Jersey poison control center is spearheading an effort to establish a single, toll-free number to allow citizens from any location in the United States reach the applicable regional poison-control center. Thus far, New Jersey, Texas, Michigan, and Oklahoma have agreed to use a single number, 1-800-POISON-1. We recommend discussing this initiative with HHS because HHS is working on a report on the future of poison control centers.

STATISTICS

- According to the American Association of Poison Control Centers, 2.4 million calls were placed to poison control centers in 1992.
- 60% of calls to poison control centers involved children under the age of 6.
- Only 53% of Americans have access to a regional poison control center.
- Approximately 75% of poisonings handled by the poison-control centers are manageable over the telephone without the need to see a physician.
- Every \$1 spent on poison control saves at least \$7 in medical expenses.
- According to a 1994 congressional report, *Poison Control Centers: On the Brink of Extinction*, over 90% of all poisonings occur at home.
- The most common profile of a patient reported to a poison control center is a child younger than 6 years old who is unintentionally exposed to an ordinary household products.
- The number of poison-control centers has plummeted from a high of 661 in 1978 to 76 today; only 47 are certified by the American Association of Poison Control Centers.

BACKGROUND

Poison centers have existed in this country since 1955, and steadily grew in number until the 1970s. In addition to providing assistance regarding toxicity assessments over the telephone, many centers provide lesser-known services such as poison-prevention programs for school and community groups and the monitoring of poisoning trends, product manufacturing, packaging, and recall.

As poison control centers' service areas grew and health care costs soared, financing the centers became increasingly precarious. Centers depend heavily on state and local funding and private and corporate donations to cover their estimated annual \$120 million operating costs.

By 1994, five centers covering major metropolitan areas were faced with imminent closure. One of these was the center in Washington, D.C. Local media coverage helped to save the center. This funding crisis involving the National Capital Poison Center brought the problem to the attention of Congress and the federal government. In October 1994, a study by the House Government Operations subcommittee on human resources and intergovernmental relations concluded that "Federal government intervention is necessary to stop poison centers from closing, eliminate the brinkmanship funding game that centers are forced to play, and ensure an essential public health service is equitably available to all U.S. residents."

HHS has been studying the problem since 1993. HHS is currently supposed to provide a report on the future of poison control centers sometime during 1997.]

Dr. Steven Marcus, the executive director of the New Jersey Poison Information and Education System, has been working to establish a single, toll-free telephone number that will permit persons from all areas in the country to reach their local poison control center. In the last 2 years, New Jersey, Texas, Michigan, and Oklahoma have agreed to use the same telephone number, 1-800-POISON-1 (1-800-764-7661) to access their poison centers. Florida, California, and Louisiana are also expected to join. Dr. Marcus believes that in order to make this effort work, a rallying effort is needed.