

Domestic Policy Council - Anna Richter

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State of the Union 2000 Press Papers

PRESIDENT CLINTON TAKES HISTORIC ACTION TO BAN GENETIC DISCRIMINATION IN THE FEDERAL WORKPLACE

February 8, 2000

Today, at an event at the American Academy of Sciences, President Clinton will sign an executive order that prohibits every federal department and agency from using genetic information in any hiring or promotion action. This historic action will ensure that critical health information from genetic tests is not used against federal employees. The President today will also endorse the Genetic Nondiscrimination in Health Insurance and Employment Act of 1999, introduced by Senator Daschle and Congresswoman Slaughter, which would extend these protections to the private sector and to individuals purchasing health insurance. Finally, the President will state his strong belief that efforts to find genetic cures for disease must not undermine vital patient protections, and he will ask the Secretary of Health and Human Services to expedite FDA and NIH reviews of gene therapy guidelines and regulations.

AMERICANS FEAR THAT THEIR GENETIC INFORMATION WILL BE MISUSED.

Progress in genetics has helped researchers and health care providers to detect and prevent health disorders; however, it can also be misused to discriminate against or stigmatize individuals. Some employers may try to use genetic tests to discriminate against workers -- even those who have not yet or who may never show signs of illness -- in order to avoid increased costs associated with workers who are genetically predisposed to particular ailments.

- **Genetic discrimination is real.** In a 1996 study published in *Science*, 15 percent of individuals at risk of developing a genetic condition said that they had been asked questions about genetic diseases on job applications. Thirteen percent of the respondents reported that they or another family member had been denied a job or fired from a job because of a genetic condition in the family.
- **Fear of discrimination is widespread.** Confidentiality of genetic test results is a major concern for the public. A 1997 study by the National Center for Genome Resources found that 63 percent of people would not take genetic tests if employers could access the results -- and that almost 50 percent of people believe that most employers will ask employees to take genetic tests in the future.

PREVENTING GENETIC DISCRIMINATION IN THE WORKPLACE. Today, the President will sign an executive order that prohibits every agency in the Federal government from using genetic testing in any hiring or promotion action. This executive order, endorsed by the American Medical Association, the American College of Medical Genetics, the National Society of Genetic Counselors, and the Genetic Alliance, will:

- **Prohibit federal employers from requiring or requesting genetic tests as a condition of being hired or receiving benefits.** Employers would not be able to request or require employees to undergo genetic tests in order to evaluate an employee's ability to perform his or her job.

- **Prohibit federal employers from using protected genetic information to classify employees in a manner that deprives them of advancement opportunities.** Employers would not be able to deny employees promotions or overseas posts because of a genetic predisposition for certain illnesses.
- **Provide strong privacy protections to any genetic information used for medical treatment and research.** Under the EO, obtaining or disclosing genetic information about employees or potential employees is prohibited, except when it is necessary to provide medical treatment to employees, ensure workplace health and safety, or provide occupational and health researchers access to data. In every case where genetic information about employees is obtained, it will be subject to all Federal and state privacy protections.

PRESIDENT CALLS ON CONGRESS TO PROTECT THE PRIVATE GENETIC INFORMATION OF ALL AMERICANS. Today, President Clinton will endorse the Genetic Nondiscrimination in Health Insurance & Employment Act of 1999, introduced by Senator Daschle and Congresswoman Slaughter. This bill would extend the protections for genetic information included in the President's executive order to the private sector. In 1996, the President signed the Health Insurance Portability and Accountability Act (HIPAA), which prevents group health insurers from using genetic information to deny individuals health insurance benefits. The Daschle-Slaughter legislation finishes the job begun by HIPAA by ensuring that genetic information used to help predict, prevent, and treat diseases will not also be used to discriminate against Americans seeking employment, promotion, or health insurance.

AT THE PRESIDENT'S REQUEST, HHS ACCELERATES THEIR REVIEW OF PATIENT PROTECTIONS IN GENE THERAPY. Today, President Clinton will also address recent reports on lapses in gene therapy clinical trials. Specifically, that researchers failed to comply with federal regulations requiring the reporting of any serious illness or death, and patients may have been misinformed about the risks associated with the trials. At the President's request, the Secretary of Health and Human Services will instruct FDA and NIH to expedite their review of gene therapy guidelines and regulations -- to determine whether the current informed consent requirements need to be strengthened, and to ensure that information about these trials is shared with the public.

BUILDING ON THE CLINTON-GORE ADMINISTRATION'S STRONG COMMITMENT TO PROTECTING PRIVATE GENETIC INFORMATION. Since 1997, the President and Vice President have called for legislation that will guarantee that Americans who are self-employed or otherwise buy health insurance themselves will not lose or be denied that health insurance because of genetic information. Under the Clinton-Gore Administration, the Human Genome Research Project has made swift progress, and is on schedule to finish a draft of the human genome by April of 2000. While these advances promise great benefits, they also carry potential perils. Today's actions are part of the Administration's longstanding effort to ensure that we harness scientific advances to our most cherished values.

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State of the Union 2000 Policy Press Papers

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1

Divider Title: _____

PRESIDENT CLINTON'S COMMITMENT TO REPAIR, RENOVATE, AND RENEW AMERICA'S SCHOOLS

January 5, 2000

"Today too many of our schools are so old they're falling apart, or so over-crowded students are learning in trailers. Last fall, Congress missed the opportunity to change that. This year, with 53 million children in our schools, Congress must not miss that opportunity again."

--President Clinton, State of the Union Address, 1999

President Clinton's FY2001 Budget demonstrates a strong commitment to investing in school construction and modernization. The FY2001 Budget:

Renews the President's strong commitment to his school modernization tax credit bond proposal:

- The President's School Modernization Bond proposal provides \$24.8 billion in tax credit bonds over two years to modernize up to 6,000 schools. This proposal costs \$3.7 billion over five years; expands the Qualified Zone Academy Bonds, a proven success; and is fully paid for in the budget.

Includes a new \$1.3 billion school urgent/emergency renovation loan and grant proposal:

- This \$1.3 billion initiative leverages nearly \$7 billion of (approximately 8,300) renovation projects in high-poverty, high-need school districts with little or no capacity to fund urgent repairs. Both loans and grants would be made available, with the smaller grant program directed toward the neediest districts.

Nationally, there is an urgent need for school modernization:

- **One-Third of All Schools Need Extensive Repairs.** One third of all public schools -- about 25,000 schools -- need extensive repair or replacement. *School Facilities: The Condition of America's Schools*, GAO Report Number HEHS-95-61, 1995-6.
- **Average School is 42 Years Old.** The average public school in America is 42 years old, and school buildings begin rapid deterioration after 40 years. *How Old are America's Schools*, NCES, 1999.
- **\$112 Billion Needed Just for Repairs.** \$112 billion is needed just to repair the existing schools across the nation. *School Facilities: The Condition of America's Schools*, GAO Report Number HEHS-95-61, 1995-6.
- **School Enrollment Higher than Ever.** A record 52.7 million children are enrolled in elementary and secondary school today, and this number will climb to 54.3 million by 2008. 2,400 new public schools will be needed by

2003 to accommodate rising enrollments. *The Baby Boom Echo: No End in Sight*, Department of Education, 1999.

School Modernization Tax Credit Bond Proposal:

- This new type of bond -- a tax credit bond -- would provide interest-free financing to help state and local governments pay for school construction and renovation to help address issues of aging facilities and overcrowding. Instead of paying the interest and principal on school construction bonds, the issuer would only be responsible for repaying the principal. The federal government would provide tax credits to the bondholders in lieu of interest payments.
- The Administration's proposal would support nearly \$25 billion in bonds over the next two years to help states and districts build and modernize up to 6,000 public schools. President Clinton's proposal has an estimated cost of \$3.7 billion over five years, and is fully paid for in his budget.

School Renovation Loan and Grant Program:

- The School Renovation program would provide interest free federal loans and grants to needy school districts to fund urgent renovations; approximately 8,300 renovation projects would receive funding over 5 years. The loan program would be targeted to those districts unable to finance the interest cost associated with facilities renovation.
- The smaller direct grant program would provide direct funding to the needy school districts unable to finance the capital expenditures associated with school renovation. Renovations funded through loans and grants could include repairs to roofs, climate control systems, or plumbing. Loans and grants could also fund school modernization to improve technology capability, if no other source of funds is available.

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Divider Title: _____

THE WHITE HOUSE
Office of the Vice President

For Immediate Release
Thursday, January 6, 2000

Contact:
(202) 456-7035

**VICE PRESIDENT GORE ANNOUNCES ADMINISTRATION WILL SEEK \$30
MILLION FOR HIGH-QUALITY EARLY CHILDHOOD EDUCATORS**

Washington, DC -- Vice President Gore announced today that the Administration will seek \$30 million in the FY 2001 budget to ensure that our young children are being taught by well-trained professionals.

"Although parents are the first and best teachers, it is essential that we provide high-quality teachers to support children's learning at this critical juncture" Vice President Gore said. "This funding will dramatically increase the number of highly-qualified teachers who are preparing our young children for success in school."

Research shows that quality pre-school can lead to higher IQ's, higher reading and achievement levels, higher graduation rates and greater success in the workplace. Well-prepared teachers are essential to creating the kind of high-quality preschool programs that enhance children's school-readiness and can have a lifelong positive impact on a child's learning.

The Early Childhood Educator Professional Development initiative outlined in the Administration's Elementary and Secondary Education Act reauthorization proposal would create professional development opportunities for early childhood educators who serve high concentrations of children living in poverty. The funding would provide competitive grants to local partnerships of entities that provide professional development for teachers such as universities, and early childhood education programs (such as local school districts or Head Start agencies). The initiative would focus on equipping early childhood educators with the tools they need to help children develop the language and literacy skills that are the foundations for academic success.

Currently, 40 percent of preschool teachers have only a high school diploma and another 10 percent have a two-year degree from a community or junior college. About half of all assistant teachers and aides have no more than a high school diploma. One of the most important factors behind a child's educational success is having a caring, competent, and committed educator. With more preparation, early childhood teachers would be better able to contribute to the language and literacy development of the children in the care.

Foundations of school success are laid in the early years and well-trained educators are crucial to improving the quality of early childhood education programs. This \$30 million dollar investment will establish a program that will reach half of the early childhood educators serving high-poverty areas in the next five years. The program will help early childhood educators to obtain high-quality professional development and improve their knowledge of, and skills at,



working with young children and their families, particularly in developing language and literacy skills.

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3

Divider Title: _____

THE WHITE HOUSE

Office of the Vice President

For Immediate Release
Wednesday, January 12, 2000

Contact:
(202) 456-7035

VICE PRESIDENT GORE ANNOUNCES OVER \$100 MILLION INCREASE FOR SAFE SCHOOLS/HEALTHY STUDENTS PROGRAM IN FISCAL YEAR 2001 BUDGET

Washington, D.C. – This morning Vice President Al Gore reaffirmed his commitment to our children's safety by announcing that the Administration's Fiscal Year 2001 budget will vastly expand the nation's investment in the Safe Schools/Healthy Students Initiative. The increase of more than \$100 million in the initiative will invest a total of \$247 million in FY 2001 to help communities throughout the country promote a coordinated, comprehensive response to school safety.

"In the aftermath of tragic violence in our schools, there can be no doubt that this investment in our children's safety is essential," Vice President Gore said. "It must be this nation's first priority to protect our children, and President Clinton and I will fight for bold action to ensure they have safe communities in which they can live and learn. Our children should be looking to the future with hope, not looking over their shoulders with fear."

Following the White House Conference on School Safety in 1998, the Administration launched the Safe Schools/Healthy Students Initiative to help communities develop and implement community-wide responses to school and youth violence. The program empowers parents, principals, police, health and mental health care providers, and others in the community to collaborate on local solutions to the problem of youth violence. In September 1999, the President announced over \$100 million in Safe Schools/Healthy Student grants for 54 school districts. With the expansion of this initiative, approximately 40 additional communities will be awarded grants in FY 2001 to provide safer learning environments for youth and help them avoid drugs, violence, and other destructive behaviors.

The Safe Schools/Healthy Students Initiative is a joint effort of the U.S. Department of Education, U.S. Department of Health and Human Services, U.S. Department of Justice and U.S. Department of Labor that provides each community funding for three years to link services and activities into a comprehensive, community-wide approach to violence prevention and healthy child development. Research suggests that such strategies are an effective way to promote healthy childhood development and address the problems of school violence and drug abuse.

Vice President Gore lauded the groundbreaking partnership among the federal agencies as an example of how communities can work together to protect our children.

"We cannot expect parents, schools, law enforcement or government alone to prevent youth violence, but when all of us work together we can build strong, caring, connected communities that offer all of our young people the safe and healthy environments they need to thrive," said Gore.

To be considered for Safe Schools/Healthy Students funding, communities must be working in partnership at the local level. The comprehensive safe school plans must be the product of a formal partnership between the school district, law enforcement and the local mental health authority, created in collaboration with family members, students, juvenile justice officials and relevant community-based organizations. Effective partnerships might also include the business community. To be considered comprehensive, safe school plans must address at least the following six elements: (1) a safe school environment, (2) prevention and early intervention programs that address violence, alcohol and other drugs, (3) school and community mental health preventative and treatment intervention services, (4) early childhood psycho-social and emotional development programs, (5) educational reform, and (6) safe school policies. Activities that may be funded as part of this initiative include, truancy prevention, after school activities, teen courts, alternative education, purchasing security equipment and services, mentoring, out-of-school youth programs such as conflict resolution, life skills, school-based anti-drug curricula, career development, nurse home visitation, family strengthening and staff professional development.

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THE WHITE HOUSE

Office of the Vice President

For Immediate Release
Wednesday, January 12, 2000

Contact:
(202) 456-7035

VICE PRESIDENT GORE ANNOUNCES NEW INVESTMENT TO CREATE SMALLER, SAFER AND MORE SUCCESSFUL HIGH SCHOOLS

Washington, D.C. – Vice President Gore today unveiled a \$120 million initiative to create smaller, safer and better high schools. The Administration's Small, Safe and Successful High Schools initiative -- which will be included in the Administration's budget for Fiscal Year 2001 -- exemplifies the Vice President's commitment to reforming the American high school, and ensuring a world-class education for all of America's students.

"The idea is simple: small schools give kids a big boost," said Vice President Gore. "Smaller schools mean more personal attention to the varied needs of all our children, helping both those who are struggling and those who are excelling to achieve their full potential."

The program would offer competitive grants to local school districts to create smaller schools or break up larger schools by funding innovative strategies such as autonomous schools-within-schools, career academies, restructured school days, and other innovations that allow schools to ensure that every student receives personal attention and academic support. Funds to create smaller schools could be used for planning and implementation costs, including costs to reorganize schools, train teachers, renovate facilities, and provide extended learning time and support services for students.

In addition to creating smaller, better high schools, the grants would help schools create a clear focus on student success: innovative, engaging and challenging curriculum integrated around a coherent focus; teachers working together to meet the needs of their students; strong leadership; the involvement of families and community; and technology to enhance achievement.

Research confirms what parents intuitively believe: that smaller schools are safer and more productive because students feel less alienated, more nurtured and more connected to caring adults, and teachers feel that they have more opportunity to get to know and support their students. Smaller schools also have better attendance records, lower dropout rates and fewer discipline problems. Research also shows that small schools can offer a strong core curriculum and, in most cases, a level of academically advanced courses comparable to large schools.

Recent incidents of school violence, like the tragedy in Littleton, Colorado, are causing serious alarm among parents and students who are unsure what has caused such tremendous alienation and aggression in some of our teenagers. In addition to the need for more parental involvement and stricter discipline policies, many educators are pointing to a systemic problem - the model of the American high school.

In response to these concerns, Representative David Obey (D-WI) included \$45 million in the Fiscal Year 2000 budget to create smaller high schools. The new Administration initiative announced today will build on Rep. Obey's down-payment and will help our children make the most of their education.

"Tragic incidents of school violence make it clear that many of our teenagers need more attention than larger high schools can give them," added the Vice President. "We must help working families struggling to give their children attention and direction, by ensuring that our public high schools offer connections to caring adults as well as high academic standards."

Since the end of World War II, the number of schools nationwide has declined seventy percent, while average enrollment has grown 500 percent, or fivefold. There are more than 12,400 three and four year high schools in the United States. More than seventy percent of students in these schools attend a school with more than 1,000 students, and enrollments of 2,000 and 3,000 are common.

"As our economy changes, so must our schools. It's time for the large, factory-like high schools of the 20th century to make way for the smaller, more flexible and innovative institutions that will mark the 21st century," Gore said.

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5

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A New Opportunity Agenda for Higher Education: Making Critical Investments in Education and Training

January 20, 2000

Today, the President will announce that his FY2001 budget will include new critical investments in higher education, training, and youth opportunities as part of his New Opportunity Agenda. These initiatives include:

- I. A \$30 Billion College Opportunity Tax Cut to provide Tax Relief for Millions of Families Struggling to Make College More Affordable.**
- II. Nearly \$1 Billion for College Completion Challenge Grants, Pell Grants, and Other Initiatives to Help Students Afford and Be Able to Stay in School.**
- III. Over \$400 Million in Increases in Initiatives to Keep Young People on the Track to Success.**

I. COLLEGE OPPORTUNITY TAX CUT TO MAKE COLLEGE MORE AFFORDABLE FOR MORE AMERICANS

- The President will propose a College Opportunity Tax Cut costing \$30 billion over 10 years to provide tax relief for millions of families struggling to make college more affordable. When fully phased in, the President's proposal would give families the option to claim a tax deduction or a tax credit on up to \$10,000 of tuition and fees for any post-secondary education including college, graduate study, or training courses. In general, the proposal would provide up to \$2,800 annually in tax relief per family. In order to expand this tax cut to more families, the College Opportunity Tax Cut would phase out for married filers with incomes between \$100,000 and \$120,000. The College Opportunity Tax Cut builds on the Lifetime Learning tax credit that the President signed into law in 1997. In addition, the President's FY2001 budget contains other education tax incentives that were originally proposed in the FY2000 budget, including \$1 billion over 10 years to provide tax-free treatment for employer-provided graduate education and increased deductibility of student loan interest.

II. NEARLY \$1 BILLION IN INCREASES TO PELL GRANTS, SEOG, WORK STUDY, AND THE NEW COLLEGE COMPLETION AND DUAL DEGREE INITIATIVES:

- **College Completion Challenge Grants.** The FY2001 budget creates a new initiative within the TRIO program called College Completion Challenge Grants (CCCCG). Although college enrollment rates have risen, 37 percent of students that go on to post-secondary school drop out before they get a certificate or a degree [Source: U.S. Department of Education, *The Condition of Education: 1999*]. The problem is especially acute for minorities: 29 percent of African Americans and 31 percent of Hispanics drop out of college after less than one year, compared to 18 percent of whites. The CCCCCG program is designed to address this problem with a comprehensive approach including pre-freshman summer programs, support services and increased grant aid to students. This \$35 million initiative will improve the chances of success for nearly 18,000 students.
- **Dual Degree Programs for Minority-Serving Institutions.** The FY 2001 budget proposes a new program to increase opportunities for students at minority-serving institutions that offer four-year degrees. Students would receive two degrees within five years: one from a minority-serving institution, and one from a partner institution in a field in which minorities are underrepresented. This new \$40 million program will serve an estimated 3,000 students.
- **Pell Grants.** The Pell Grant program provides grants to economically disadvantaged young people to help pay the cost of a postsecondary education. The maximum Pell Grant in FY2000 is \$3,300.

The President's FY2001 budget increases the maximum to \$3,500, more than 50 percent larger than the maximum grant in 1993, to make a college education more affordable for the nearly 4 million Pell Grant recipients. Funding for the Pell Grant program is increased by over \$716 million, bringing the total Pell Grant appropriation to \$8.356 billion.

- **SEOG.** SEOG, the Federal Supplemental Educational Opportunity Grant program, provides campus-based grant assistance to needy undergraduate students. Generally, this program supplements the aid students receive from other sources, and leverages institutional aid by at least one dollar for every three federal dollars. The FY2001 budget provides \$691 million for SEOG, a \$60 million increase, the largest increase in 10 years. An estimated 1.2 million students (over 60,000 more than in 2000) will receive awards in 2001.
- **Work Study.** Work Study provides students the opportunity to work their way through college. The FY 2000 budget achieved the goal of giving one million students the opportunity to participate in Work Study. The FY2001 budget includes \$1.011 billion for Work Study, an increase of \$77 million to continue this commitment to serve one million students.

III. OVER \$400 MILLION IN INCREASES TO KEEP YOUNG PEOPLE ON THE TRACK TO SUCCESS

- **GEAR UP.** GEAR UP is a nationwide initiative to encourage more disadvantaged young people to have high expectations, stay in school, study hard, and take the right courses to go to and succeed in college. GEAR UP is funded at \$200 million in FY 2000, enough to provide services to over 750,000 students. The FY 2001 budget provides a 62.5% increase to \$325 million, enough to provide services to 1.4 million students.
- **TRIO.** The TRIO programs seek to motivate and prepare students to go to and stay in college. The FY 2001 budget provides \$725 million for TRIO, an increase of \$80 million to help provide assistance to over 760,000 students, 37,000 more than in 2000.
- **Youth Opportunity Grants and Youth Training Formula Grants.** Youth Opportunity Grants are an initiative to provide comprehensive employment and training assistance to all out-of-school young people in high poverty areas. The program was passed as part of the bipartisan Workforce Investment Act and is a critical component of the New Markets Initiative. Funded at \$250 million in FY 2000, this program would serve up to 50,000 of the most disadvantaged young people in central cities and rural communities across America. The President's FY2001 budget provides a 50 percent increase in funding to \$375 million, enough to serve an additional 25,000 youth in high poverty areas. In addition, the FY2001 budget provides a \$25 million increase (from \$1.001 billion to \$1.022), to the Youth Training Formula Grants, enough to provide job training and summer job opportunities to nearly 600,000 disadvantaged young people.
- **Youthbuild.** The Youthbuild program, is targeted to 16-24 year old high school dropouts, and provides disadvantaged young adults with education and employment skills through rehabilitating and building housing for low-income and homeless people. The program also helps to expand the supply of housing in these categories. Funded at \$42.5 million, the Youthbuild programs will provides opportunities for approximately 2,000 trainees in 2000. The FY2001 increases funding by 76% to \$75 million, enough to serve approximately 3,330 trainees.
- **Job Corps.** Job Corps is the nation's largest and most comprehensive residential education and job training program targeted at impoverished young people. The FY2001 budget increases Job Corps funding by \$33 million, bringing the total Job Corps budget to \$1.392 billion.

COLLEGE OPPORTUNITY TAX CUT: PROVIDING TAX INCENTIVES TO MAKE HIGHER EDUCATION MORE AFFORDABLE

January 20, 2000

Investing \$30 Billion in a College Opportunity Tax Cut. Since 1993 the President has taken numerous steps to make college more affordable and accessible, including direct student loans, Pell Grant increases, and the Hope Scholarship and the Lifetime Learning tax credits producing the biggest expansion in college support since the GI bill. But tuition costs continue to rise and many students and their families are still struggling to make ends meet. That is why today the President will propose the College Opportunity Tax Cut that will, when fully phased in, provide up to \$2,800 in tax relief for students or their families. The President's proposal would cost \$30 billion over 10 years.

How the College Opportunity Tax Cut Works. The President's proposal would help make college, graduate school, and job training more affordable for millions of families – including expanding the tax cut and making it available to more families. In general, the proposal would provide up to \$2,800 annually in tax relief per family.

- **Providing a Deduction or 28 Percent Tax Credit for Higher Education.** The President's proposal would give families the option of taking a tax deduction or claiming a 28 percent credit for tuition and fees to pay for college and other higher education. The proposal would cover up to \$5,000 of educational expenses in 2001 and 2002 and rise to \$10,000 of educational expenses from 2003 forward. When fully phased in, this proposal would provide up to \$2,800 in tax relief annually to help American families pay for college.
- **The College Opportunity Tax Cut Would Cover College, Graduate Work, or Job Training.** Students or families could use the College Opportunity Tax Cut to help pay for college, graduate work, or courses taken to enhance job skills. There is no limit to the number of years that a taxpayer could take this credit, although when fully phased in it is limited to \$10,000 in educational expenses per family per year. A family could choose between the Hope Scholarship or the College Opportunity Tax Cut, but could not take both for the same student.
- **Expanding the Tax Cut to More Families.** The College Opportunity Tax Cut would phase out for individuals with incomes between \$50,000 and \$60,000 and married filers with incomes between \$100,000 and \$120,000. These are higher than the income thresholds for any of the education tax cuts currently available.

What the College Opportunity Tax Cut Would Mean for Typical Families

- **A Family Sends a Child to College.** A family sends a child to a four-year college. The tuition costs the family \$11,000 after financial aid. The College Opportunity Tax Cut would generally provide a tax break of \$2,800 annually to offset the cost of tuition. (This example is based on the fully phased in proposal.)
- **An Automobile Mechanic Takes Night Classes in Computers at a Local Technical College.** She will pay tuition of \$1,200. The College Opportunity Tax Cut would generally provide a tax break of \$336 to offset the cost of tuition.
- **A Homemaker Joins a Graduate Teacher Training Program.** After being out of college for 20 years, a homemaker enters a graduate teacher training program with tuition of \$4,000. The College Opportunity Tax Cut would generally provide a tax break of \$1,120 to offset the cost of tuition.

- **A Family Plans for Its Education.** The combination of the existing Hope Scholarship and the proposed College Opportunity Tax Cut provides a powerful way for a family to plan for its education. Each member of a family of four is pursuing higher education. The father is working on a masters degree part-time; the mother, a computer technician, is attending a two-year program at a local community college; the daughter is a senior in high school who eventually hopes to go on to medical school; and the son is a freshman at a small private college and plans to earn a master's degree to become a teacher. Based on typical tuition expenses incurred for these programs, a combination of Hope Scholarships and the new College Opportunity Tax Cut would generally reduce this family's Federal income taxes by \$28,000 over the nine years its members attend school, or an average of over \$3,000 per year.

The President's New Proposal Builds on His Previous Steps to Make College More Affordable.

Since 1993, President Clinton has been dedicated to expanding access to education and training beyond high school. New and expanded programs provide over \$50 billion in student aid annually – compared to \$22 billion when he took office.

- **Hope Scholarship and Lifetime Learning Tax Credit.** In 1997, the President signed the Hope Scholarship and Lifetime Learning Tax Credit into law. In 1999, these two measures provided an estimated \$3.5 billion in tax relief for 4.8 million families.
 - **Hope Scholarship.** The Hope Scholarship is part of the President's goal to make the first two years of college as universal as high school. It provides a tax credit worth up to \$1,500 *per student* against educational expenses for the first 2 years of college. (The credit provides a tax break of 100 percent of the first \$1,000 of tuition and 50 percent of the next \$1,000.) Both the Hope Scholarship and the Lifetime Learning tax credit phase out for individuals with incomes between \$40,000 and \$50,000 and married filers with incomes between \$80,000 and \$10,000.
 - **Lifetime Learning Tax Credit.** The President's proposed College Opportunity Tax Cut builds on the Lifetime Learning tax credit. Under current law, the Lifetime Learning tax credit provides a 20 percent credit on educational expenses for college, graduate study, or job training. The credit covers up to \$5,000 of expenses *per family* through 2002 and then up to \$10,000 thereafter.
- **More Affordable Student Loans.** The President's Direct Lending Program and improvements to the student loan program have saved students an estimated \$8.7 billion on their loans over the last five years while taxpayers have saved over \$5 billion through student loan reform.
 - **\$8.7 Billion in Savings for Students.** Students who borrowed student loans since 1993 will save \$100 annually for each \$10,000 in outstanding loans – and a total of \$5 billion – due to the lower interest rate formula. Also, in 1993, the Administration reduced loan origination fees, saving students nearly \$3.7 billion to date. In 1999, in recognition of widespread discounts available on guaranteed student loans, the Administration reduced direct loan fees even further.
 - **More Repayment Options.** Since 1993, borrowers have more flexibility in managing their student loan debt. The income-contingent repayment plan allows direct loan borrowers to repay their loans based upon their income; after 25 years, any remaining loan balance is discharged.
 - **Creating the Direct Loan Program.** Under the Direct Loan program, students receive loans directly from the Education Department rather than through government-guaranteed

lenders. Because the Direct Loan program is substantially less expensive for taxpayers than the guaranteed loan program, taxpayers have saved over \$4 billion over the past five years. The program has pioneered the use of new technology, streamlined loan processing and disbursement, and improved customer service in both programs through competition.

- **Strengthening the Guaranteed Loan Program.** Federal subsidies for banks and guaranty agencies have been pared down, saving taxpayers \$1.6 billion over the past five years.
- **Reducing Loan Defaults.** The national cohort default rate has been reduced from 22.4 percent seven years ago to a record-low 8.8 percent. At the same time, collections on defaulted loans have more than doubled, from \$1 billion in FY1993 to \$2.2 billion in FY1998.

- **Expanded Student Aid Opportunities.**

- **Larger Pell Grant Awards For Needy Students.** When President Clinton took office in 1993, the Pell Grant maximum award was \$2,300, the same as it was in 1989. The maximum award has since increased by 43 percent to \$3,300 in 2001. The FY 2001 budget proposes increase in the maximum to \$3,500, a 52 percent increase over the 1993 level.
- **Early Intervention to Help Low-income Students Prepare for College.** Based on an Administration proposal, the new GEAR UP program funds partnerships between colleges and high-poverty middle schools. It was funded at \$200 million in FY2000. The President's FY2001 budget proposes to increase GEAR UP funding by 62.5 percent, bringing the total to \$325 million to fund mentoring, tutoring, and college scholarships for an estimated 1.4 million low-income students.
- **College Outreach and Support for Disadvantaged Students.** The Department's TRIO programs helps low-income, first-generation students succeed in college. Since 1993, funding for the program has increased from \$388 million to \$645 million; it now serves 730,000 students. The President's FY2001 budget proposes to expand TRIO by \$80 million, to serve an additional 37,000 students.
- **More Work-study Opportunities.** Spending for Federal Work-Study increased by 41 percent from 1993 to 2000. The President has requested a \$77 million increase in FY2001 to continue to allow one million students to work their way through college.
- **AmeriCorps education awards.** Since 1994, over 150,000 AmeriCorps volunteers have earned up to \$4,725 for college while serving local communities.

- **Enrollment Rates Have Risen Under President Clinton.** The percentage of students who completed high school and went directly to college rose from 61.9 percent in 1992 to 67.0 percent in 1997 – an 8 percent increase in the enrollment rate. Proportionately, enrollment rates increased even more for African Americans and Hispanics over this period. For African Americans, enrollment rates increased from 48.2 percent to 58.5 percent – a 21 percent increase. Over this period Hispanics enrollment rates increased from 55.0 percent to 65.6 percent – a 19 percent increase. [Source: U.S. Department of Education, *The Condition of Education 1999*]

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Divider Title: _____

**PRESIDENT CLINTON ANNOUNCES UNPRECEDENTED NATIONAL EFFORT
TO IMPROVE OUR NATION'S SCHOOLS BY DRAMATICALLY
INCREASING ACCOUNTABILITY AND INVESTMENT**

January 27, 2000

In his State of the Union Address President Clinton will announce an unprecedented national effort to demand more from our schools and to invest more in them. The President will propose: 1) the largest-ever expansion of after-school and summer school programs, to ensure that every child in every failing school can get extra help to meet high standards; 2) the largest increase in Head Start in history, to build the foundation for our long-term goal of universal pre-school; 3) dramatically increasing accountability in public schools by doubling funding to turn around low-performing schools and rewarding states that improve academic achievement; 4) a new teacher quality initiative to help states and districts recruit, train, and reward good teachers; and 5) a substantial increase in class size funding to put us nearly half way to our goal of hiring 100,000 new high-quality teachers.

DOUBLING AFTER-SCHOOL TO HELP EVERY CHILD IN EVERY FAILING SCHOOL MEET HIGH STANDARDS. The President will call on Congress to invest \$1 billion to expand after-school and summer school for students across the nation – more than double the \$453 million enacted last year, and the largest expansion ever proposed. With this increase, we can enable every child in every failing school to participate in quality extended learning programs and work toward higher academic standards. Studies have shown that extended learning programs such as after-school and summer school help improve student achievement in reading and math, as well as increase student safety and reduce juvenile crime. Under the President's proposal, the number of children served will triple from 850,000 to 2.5 million children.

LARGEST HEAD START EXPANSION IN HISTORY. The President will call on Congress to increase funding for Head Start by \$1 billion – the largest funding increase ever proposed for the program -- to provide Head Start and Early Head Start to approximately 950,000 children. This funding will bring within reach the President's goal of serving one million children in 2002 and builds the foundation for the long-term goal of universal pre-school. Head Start prepares low-income children for a lifetime of learning and development by providing early, rigorous and comprehensive child development. Early Head Start, created by the Clinton-Gore Administration in 1994, brings these services to families with children ages zero to three and to pregnant women. Since 1993, this Administration has already increased funding for Head Start by 90 percent. The President will also propose a \$600 million Early Learning Fund to improve child care quality and early childhood education for children under five.

DOUBLING FUNDS TO TURN AROUND FAILING SCHOOLS AND GIVING STATES A NEW HIGH-PERFORMANCE BONUS. In last year's State of the Union the President proposed the first-ever national initiative to hold schools accountable for results by turning around or closing failing schools. In November, the Congress appropriated \$134 million for the President's accountability fund. The President will call on Congress to nearly double this fund to \$250 million to turn around failing schools. The President also will propose a \$50 million initiative to provide high-performance bonuses to states that make exemplary progress in improving student performance and closing the achievement gap between high and low performing groups of students. States would be eligible for bonuses based on substantial overall improvements in student performance and significant narrowing of the achievement gap as indicated by performance on the National Assessment of Educational Progress (NAEP).

A NEW TEACHER QUALITY PLAN TO RECRUIT, TRAIN, AND REWARD GOOD

TEACHERS. The President will propose a new \$1 billion initiative to improve teacher quality. The Teaching to High Standards Initiative will give grants to states and districts to fund high quality, standards-based professional development for teachers. It also includes several new proposals:

- **Higher Standards-Higher Pay for Teachers** – This \$50 million initiative will award grants to high-poverty school districts to help them attract and retain high-quality teachers through better pay and higher standards. Participating teachers would receive immediate pay increases and additional raises based on their demonstration of high-quality teaching through rigorous peer review.
- **Teacher Quality Rewards** – This \$50 million program will reward school districts that have made exceptional progress in reducing the number of uncertified teachers and teachers teaching outside their subject area. The President has proposed requiring states to ensure that 95 percent of teachers are certified and 95 percent of secondary teachers are teaching within field by 2004.
- **Hometown Teacher Recruitment** – This \$75 million program would empower high-poverty school districts to develop programs to recruit homegrown teachers to address the shortage of qualified teachers. Programs supported by this grant would make students aware, as early as middle school, of the opportunities available in the teaching profession; provide mentoring and teaching experiences as they progress through school; and provide financial assistance for students who enter college and pursue academic degrees with the goal of teaching in high-need communities after graduation.
- **Transition to Teaching** – This \$25 million initiative will build on the success of the Department of Defense's Troops to Teachers program by recruiting and preparing talented mid-career professionals from diverse fields to become teachers in high-need subject areas and high-need schools.
- **School Leaders Initiative** – This \$40 million program will fund non-profit partnerships designed to recruit, prepare and provide professional development for superintendents and principals, and other school leaders.

MORE HIGH-QUALITY TEACHERS FOR SMALLER CLASS SIZES IN THE EARLY

GRADES. The President will call on Congress to continue its commitment to reduce class size in the early grades by staying on a path to hiring 100,000 high quality teachers. The President will propose boosting class size funding to \$1.75 billion, an increase of \$450 million over current levels – enough to fund about 49,000 teachers, nearly half way to our long-term goal. Smaller classes allow teachers to spend more time on instruction and less time on discipline, and provide more individualized attention. Research shows that students attending small classes in the early grades make more rapid educational progress than students in larger classes. New teachers hired under this program must be qualified and know the subjects they are teaching.

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Divider Title: _____

THE CLINTON ADMINISTRATION UNVEILS NEW INITIATIVE TO PROTECT CONSUMERS BUYING PRESCRIPTION DRUG PRODUCTS OVER THE INTERNET

December 28, 1999

The White House today will announce that President Clinton is proposing a new initiative to protect consumers from the illegal sale of pharmaceuticals over the Internet. The initiative, which will be included in this year's budget, would: establish new Federal requirements for all Internet pharmacies to ensure that they comply with state and Federal laws; create new civil penalties for the illegal sale of pharmaceuticals; give Federal agencies new authority to swiftly gather the information needed to prosecute offenders; expand Federal enforcement efforts; and launch a new public education campaign about the potential dangers of buying prescription drugs online. The President's FY 2001 budget will include \$10 million to fund these and other activities.

UNSUSPECTING CONSUMERS MAY FALL PREY TO FLY-BY-NIGHT INTERNET PHARMACIES.

Use of the Internet to buy medical products is growing rapidly, and many consumers, including those in rural areas or those who cannot leave their homes, benefit from the convenience and privacy of this new option. Unfortunately, the safe use of the Internet by both consumers and businesses is now being threatened by fraudulent or disreputable Internet pharmacies that sell products illegally.

- **Internet Pharmacies Can Bypass Safeguards.** Traditionally there have been several safeguards to protect consumers against unsafe use of drugs, including the requirement that drugs be dispensed only for valid prescriptions and that new prescriptions be issued only after a physical exam. The Internet makes it easy to bypass these safeguards. Unethical doctors can illegally prescribe pills online to consumers they have never met in states where they are not authorized to work. Unscrupulous, unlicensed pharmacies can ship pills across state lines.
- **Fly-By-Night Internet Pharmacies Put Online Consumers at Increased Risk.** In cyberspace, consumers have no way of telling whether an online pharmacy is a legitimate operation. Consumers who buy prescription drugs online from illegitimate websites are at risk for adverse effects from inappropriately prescribed medications, dangerous drug interactions, or contaminated drugs. Some online pharmacies do not employ licensed pharmacists, removing an important safety check. And because patients can easily provide false information to obtain medications, the potential for serious abuse exists.
- **Federal Authority to Prosecute is Limited, Penalties are Inadequate.** Because of some limitations on Federal authority, it has been difficult for FDA to take action against certain offenders, such as online corporations that employ licensed physicians who prescribe drugs without taking a consumer's medical history or checking for potential drug interactions. And even where FDA has authority to prosecute, the penalties in most cases are not adequate and may not be enough to deter these fly-by-night operations.

CLINTON-GORE ADMINISTRATION TAKES NEW STEPS TO PROTECT CUSTOMERS OF ONLINE PHARMACIES.

Today, the Clinton-Gore Administration will unveil a new legislative proposal that addresses these problems. Specifically, the initiative:

- **Enables Consumers to Identify Legitimate Pharmacy Sites.** This proposal establishes a new Federal requirement to enable consumers to identify legitimate Internet pharmacy sites. Sites would have to demonstrate to FDA their compliance with Federal and state law on pharmaceutical sales before they received approval to operate. Sites operating without first demonstrating FDA compliance would be subject to sanctions. This system would allow for rapid, coordinated Federal-state investigations and prosecutions without disturbing state systems regulating the practice of medicine and pharmacy.
- **Strengthens the Current Penalty Structure For Illegal Pharmaceutical Sales Over The Internet.** This proposal creates new civil money penalties of \$500,000 per violation for the sale of prescription drug to an individual without a valid prescription.
- **Provides New Authority to FDA in Order to Ensure Rapid and Effective Investigation of On-Line Sites.** In order to streamline the investigative process, this proposal also provides FDA with administrative subpoena authority when investigating potentially illegal Internet drug sales. Administrative subpoenas would be issued in accordance with standards established by the Administration's draft privacy regulations.

In addition, the White House will also:

- **Unveil A New \$10 Million Investment to Target and Punish Those Who Engage in Illegal Drug Sales Over the Internet.** The FY 2001 budget will invest \$10 million to develop a rapid response team and upgrade FDA's computer technology to identify, investigate, and prosecute websites selling such items as: prescription drugs without a valid prescription, unapproved new drugs, counterfeit drugs, and expired or illegally diverted pharmaceuticals. This initiative will also help crack down on the marketing of products based on fraudulent health claims.
- **Announce Plans for a New Public Education Campaign on the Dangers of Buying Pharmaceuticals Online.** In the beginning of the new year, FDA will launch a new public education campaign about safe ways to purchase pharmaceutical products over the Internet. The campaign will include: placing advertisements on health related websites; taping public service announcements for distribution to television stations nationwide; and developing a "safety checklist" to be posted online and distributed through health care providers and consumer advocacy organizations.

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**PRESIDENT CLINTON UNVEILS MAJOR NEW INVESTMENT IN
SAFE, EFFECTIVE FAMILY PLANNING SERVICES FOR AMERICAN WOMEN
January 8, 2000**

Today, in his weekly radio address, President Clinton will unveil a new \$35 million budget initiative to ensure access to safe, high-quality family planning services for all Americans. This new investment represents a 15 percent increase over FY 2000 funding levels and will be used to: improve access to contraceptive counseling and services; provide affordable contraceptive services; and develop partnerships with community-based providers to conduct outreach to adolescents and other high-risk populations. Funds will also help improve the delivery of comprehensive reproductive health services and provide education and screenings for sexually transmitted diseases, HIV/AIDS, and cancer. The President today will also highlight a new investment of \$169 million, a 45 percent increase over last year's funding level, to assist family planning efforts overseas.

MILLIONS OF AMERICAN WOMEN NEED FAMILY PLANNING SERVICES. The Administration has made tremendous progress in reducing unwanted pregnancies and preventing unnecessary abortions. Teenage birth rates are down, teenage pregnancy rates have fallen to their lowest level in 20 years, and teenage sexual activity is also declining. But more must be done:

- **Over three million unintended pregnancies every year.** The United States has one of the highest rates of both unintended and teenage pregnancy among Western nations. Women who use no contraceptives account for almost half of these pregnancies. Eight in 10 teen pregnancies are not intended. Unintended pregnancies among women who do not use contraception result in 1.4 million abortions annually, as well as 1.1 million unwanted births.
- **Women who do not use birth control often face economic barriers to services.** Lack of access is a central reason why many women do not use birth control. Some cannot afford birth control methods on an ongoing basis; 15 percent of women of childbearing age (15 to 44) live in poverty, and one in six have no Medicaid or private insurance.

NEW STEPS WILL HELP PROVIDE SAFE, EFFECTIVE FAMILY PLANNING SERVICES FOR AMERICAN WOMEN. The initiative announced today reaffirms the Clinton-Gore Administration's commitment to expanding and enhancing the quality of reproductive health services for all Americans. In his radio address, President Clinton will:

- **Unveil the largest dollar increase in family planning services in over two decades.** The FY 2001 budget includes \$274 million for family planning, a \$35 million increase, and the largest dollar increase in over two decades. These grants fund family planning clinics that provide reproductive health services and care to nearly five million women. The funds will help prevent over a million unintended pregnancies each year by:

Improving the delivery of comprehensive reproductive health services. A nationwide network of over 4,600 clinics will use these new funds to provide the full range of reproductive health services, including routine gynecological care; STD and cancer screening and prevention; and HIV/AIDS prevention, education and counseling.

Providing a wide range of contraceptive methods. This initiative will provide a wide range of contraceptives to all clients desiring such services. Services are provided on a sliding fee scale or at no cost to persons below poverty in order to eliminate financial barriers to care.

Reaching high-risk and hard-to-reach populations. Funds will be used to provide safe and effective family planning services to individuals at risk or those who are hard to reach. For example, grantees will work with: HIV/AIDS organizations to discuss safe sexual practices; community-based organizations that serve men to provide reproductive health education and services; and substance abusers, homeless, and the incarcerated.

Preventing teenage pregnancy. Community-based education programs will encourage adolescents to postpone sexual activity and increase the accessibility of contraceptive counseling and services for teens who already may be sexually active.

- **Ensure that federal employees have access to comprehensive family planning services.**

The FY 2001 budget continues to ensure that the federal government leads the way as a model health plan by assuring that federal employees and their families participating in the 300 Federal Employees Health Benefit Program (FEHBP) have access to contraceptive coverage. This policy provides coverage to over 1.2 million women of childbearing age and reduces unwanted pregnancies by requiring most FEHB plans to offer the full range of contraceptive services. Before this requirement, only 19 percent of federal health plans covered prescription contraceptives; 10 percent offered no contraceptive coverage at all.

A NEW INVESTMENT FOR FAMILY PLANNING OVERSEAS. An estimated 34,000 children under age five die every day in developing countries, and over 580,000 women die each year of causes related to pregnancy and childbirth. By helping women bear their children during the healthiest times for both mother and baby, family planning helps prevent many deaths as well as unintended pregnancies and abortion. In his radio address, the President will highlight that his FY 2001 budget proposes \$541 million, an increase of 45 percent over FY 2000, to fund the provision of family planning services and related reproductive health services overseas.

CLINTON-GORE ADMINISTRATION'S LONGSTANDING COMMITMENT TO PROVIDING SAFE, EFFECTIVE FAMILY PLANNING SERVICES FOR WOMEN.

Since the Clinton-Gore Administration took office, funding for domestic family planning services has increased by 58 percent. President Clinton has taken a number of steps to provide safe and effective family planning services to women, including launching a National Task Force to coordinate the investigation of violence against women's health care clinics nationwide. The Administration has also given states flexibility through Medicaid waivers to provide family planning services to low-income women. President Clinton has also: reversed the ban on the importation of RU-486 and threatened to veto a provision that would prevent the FDA from using government funds to test, develop or approve drugs that may induce medical abortion; defeated Republican proposals that would restrict access by minors to Title X family planning services; and vetoed a bill banning certain late-term abortions without an appropriate exception to protect the life and health of women.

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WHITE HOUSE ANNOUNCES NEW MULTI-MILLION DOLLAR INVESTMENT TO COMBAT EMERGING INFECTIOUS DISEASES

January 10, 2000

Today, the White House is announcing that President Clinton will include a substantial increase in his FY 2001 budget to significantly improve the nation's ability to target, contain, control, and prevent outbreaks of infectious disease. The nearly 50 percent increase, \$20 million over last year's funding level, will help fund a nationwide electronic disease surveillance network. It will also help implement a new initiative to harness the power of private sector laboratories in increasing disease surveillance efforts.

EMERGING INFECTIOUS DISEASES THREATEN THE PUBLIC HEALTH. Over the past twenty years, America has made tremendous progress in its ability to identify and address outbreaks of infectious disease. In 1982, it took months to identify E.coli 0157:H7 as the cause of the first outbreaks of bloody diarrhea. Now, using modern disease monitoring and laboratory techniques, outbreaks can be identified early, causes can be identified, and interventions can be initiated. Identifying an outbreak early makes it easier to contain its spread, prevent illness, and save lives. Nevertheless, newly emerging or re-emerging infectious diseases have serious health consequences.

Once-conquered diseases continue to re-emerge in stronger, more virulent forms. A number of diseases once thought to be under control, such as dengue, have begun to increase and spread to new regions. The long-term use and misuse of antibiotics has allowed many microorganisms to adapt to these drugs, creating 'superbugs' that render current treatments ineffective. In recent years, multi-drug resistant tuberculosis and drug resistant pneumococcal infections (the most common cause of middle ear infections in children and pneumonia in the elderly) have become common. These infections result in longer hospital stays, rising health care costs, and increasing death rates.

The incidence of newly emerging infectious diseases continues to rise. Between 1973 and 1999, more than 35 newly emerging infectious diseases were identified, including AIDS, toxic shock syndrome, Legionnaires disease, Lyme disease, and hantavirus pulmonary syndrome. The emergence of West-Nile like virus along the East Coast this year, and the recent emergence of a novel strain of influenza pandemic in Hong Kong underscore the ongoing threat that infectious diseases pose to our health and the increasing impact they have on health care costs.

Infectious diseases contribute substantially to the escalating cost of health care.

Approximately one out of every six domestic health care dollars is spent on infectious diseases, which account for 25 percent of all physician visits and constitute the most common reason for outpatient visits in the country. In addition, antimicrobial agents are the second most frequently prescribed class of drugs in the United States. Infectious complications in hospital settings result in an estimated \$20 billion in excess health care costs.

PRESIDENT CLINTON ANNOUNCES NEW, \$20 MILLION INVESTMENT TO COMBAT EMERGING INFECTIOUS DISEASES. Today, The White House will announce that President Clinton's FY 2001 budget will include an increase of nearly 50 percent over last

year's funding level, to develop a national disease surveillance system that can rapidly detect the infectious disease cases that signal the beginning of an outbreak. The increased funding, which supplements the CDC's current budget of \$44.3 million for this initiative, will ensure that disease outbreak information is used for immediate public health action by:

Speeding the development of a national electronic disease surveillance network. New funds will be used to enhance the development of an electronic disease surveillance network in all 50 states. This new network will develop a two-way information highway that will ensure the timely transmission of information from physicians and health facilities on the front lines to state health departments and the CDC in order to rapidly assimilate information, pinpoint potential outbreaks, and alert health care providers if there is a potential infectious disease threat. Special emphasis will be placed on enhancing reporting systems in emergency rooms, often the first contact between health care providers and rare infectious diseases.

Getting critical information to doctors to ensure effective treatment for infectious diseases. Information collected through these new surveillance activities will also be compiled and sent to physicians through this electronic infrastructure. This will enable physicians to offer their patients more appropriate care. For example, physicians will know which types of bacteria are resistant to antibiotics, or which strain of influenza is circulating amongst their patients, and prescribe a more effective course of treatment.

Coordinating disease surveillance efforts with the private sector. New funds will be invested in developing public-private partnerships to ensure that commercial labs implement an electronic reporting system compatible with the one currently being developed for state and local public health departments. Under this system, private commercial labs, with appropriate privacy protections, will automatically send information on the incidence of infectious diseases to public health departments for analysis and integration into larger surveillance efforts. This will help make reporting of incidence of infectious disease become commonplace. Pilot projects implementing this type of system in seven states have indicated significant increases -- in some states, as high as a 230 percent increase -- in reporting of infectious disease. The increase in reported data provides a more complete picture of disease incidence to public health officials, allowing them to move quickly to address potential public health threats.

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Divider Title: _____

THE WHITE HOUSE

Office of the Vice President

For Immediate Release
Monday, January 10, 2000

Contact:
(202) 456-7035

VICE PRESIDENT AL GORE UNVEILS NEW \$150 MILLION INITIATIVE TO COMBAT THE SPREAD OF AIDS AND CONTRIBUTE TO INTERNATIONAL INFECTIOUS DISEASE PREVENTION EFFORTS

New York, NY -- Today, in a speech before the United Nations, Vice President Al Gore will announce that the Administration's FY 2001 budget include a new \$150 million investment to assist efforts to combat the international AIDS pandemic and contribute to international infectious disease prevention efforts. This new initiative provides \$100 million for preventing and treating HIV and AIDS in Africa, Asia, and other regions of the world -- double last year's increase.

It also dedicates \$50 million for purchasing vaccines against other diseases that ravage poor nations, including hepatitis B, certain forms of meningitis and yellow fever, helping to save millions of children. Purchasing existing vaccines is the first step toward accelerating the development and delivery of vaccines for AIDS, malaria, TB, and other diseases disproportionately affecting the developing world. This investment is part of a comprehensive plan for action that will meet the Administration's commitment in this area, as described in the President's September speech to the U.N. General Assembly.

"AIDS and other infectious diseases are the largest catastrophes in the history of modern medicine," Vice President Gore said. "We hope this initiative will provide relief and hope to the millions of children and families around the world."

THE AIDS PANDEMIC THREATENS THE ECONOMIC AND SOCIAL STABILITY OF SUB SAHARAN AFRICA AND ASIA. The United Nations calls the AIDS pandemic in sub-Saharan Africa "the worst infectious disease catastrophe since the bubonic plague." An estimated 5.7 million people were infected with HIV by the end of 1999, and India may have become the country with the largest number of new infections this year.

- **Sub-Saharan Africa and Asia disproportionately bear the impact of the AIDS epidemic.** While sub-Saharan Africa accounts for only one-tenth of the global population, over 70 percent of individuals infected with AIDS globally live there. Currently, 22.5 million people in sub-Saharan Africa are infected with HIV, and every day, an additional 11,000 become infected. In Asia, HIV and AIDS is already widespread. Because this region has 60 percent of the world's population and has the steepest infection curve, experts are predicting that Asia will soon become the epicenter of the epidemic. In addition, during the next decade, more than 40 million children in Africa will be orphaned by AIDS, making it difficult -- if not impossible -- for them to obtain adequate food, clothing, education, and health care services.

- **The AIDS epidemic is jeopardizing the economic stability of the sub-Saharan African and Asian regions.** The economic toll in HIV and AIDS are taking in Africa underscores the linkage between the spread of this disease and poverty in the region. Although Africa is making unprecedented economic gains, they are jeopardized by an infection which is killing skilled personnel -- and which demands increased investment in government spending.

- **The AIDS pandemic threatens Africa and Asia's regional and national security.** High levels of HIV infection among members of the armed forces weakens their ability to perform their national duties. In addition, studies have linked the growing number of children orphaned by AIDS to future increases in crime and civil unrest as these children raise themselves alone, often turning to crime, drugs, prostitution, and gangs to survive.

ONE THIRD OF ALL DEATHS EACH YEAR WORLDWIDE -- 17 MILLION PEOPLE - - RESULT FROM INFECTIOUS DISEASES. The developing world bears a disproportionate burden of these diseases, which not only destroy lives, but perpetuate the cycle of sickness and poverty. Vaccines have been critical and cost-effective weapons that have eradicated smallpox, reduced polio to the lowest levels in history, and drastically lowered measles rates. Building upon these extraordinary achievements, we must work to ensure that all children have access to effective vaccines.

- **Over eight million children die each year of centuries-old diseases -- and more than four million of these deaths could be prevented by existing vaccines.** The dramatic expansion of vaccine coverage in the past several decades now saves almost three million lives each year, and prevents hundreds of thousands of cases of paralysis and blindness. Yet, the wider use of existing vaccines against hepatitis B, certain forms of meningitis, yellow fever, and other diseases could prevent an additional four million deaths each year and reduce untold suffering.

- **Immunization is one of the most cost-effective health interventions.** It costs only \$15 to immunize a child, yet in developing countries, children remain 10 times more likely to die of a vaccine-preventable disease than those in the industrialized world.

- **Vaccines are one of the most cost-effective ways to improve the well-being and productivity of the poorest countries.** Investments in health are as central to economic progress in poor countries as investments in education and physical infrastructure. Yet, because these countries often cannot afford to buy vaccines, the market does not provide incentives for pharmaceutical companies to develop vaccines for diseases that disproportionately affect developing nations.

- **Effective vaccines do not yet exist for malaria, TB and AIDS, which kill nearly 6 million people each year.** Because developing countries often cannot afford to buy vaccines, the market does not provide incentives for pharmaceutical companies to develop vaccines for diseases that disproportionately affect those countries. Only 2 percent of all global biomedical research by the public and private sectors is devoted to the major killers in the developing world. Vaccines are the best solution for these diseases, but progress has stalled. The global community

must intensify both research and development, and make commitments to purchase new vaccines for these diseases when developed.

VICE PRESIDENT GORE UNVEILS NEW, \$150 MILLION INITIATIVE TO COMBAT AIDS AND OTHER INFECTIOUS DISEASES. Today, in a speech before the United Nations, Vice President Gore will announce that the President's FY 2001 budget will include a new, multi-million dollar investment in combating the spread of HIV, AIDS, and other infectious diseases in Africa, Asia and other developing countries. This initiative will:

- **Invest an additional \$100 million in HIV and AIDS prevention and treatment efforts in Africa and Asia.** The President's budget will invest a total of \$325 million in HIV prevention and AIDS treatment around the world, doubling last year's allocation. Funds will be targeted to the countries where the disease is most widespread and where our efforts will have the greatest impact. Activities include:

Increasing primary prevention efforts. To reduce the incidence of new HIV infections, this initiative will help to: implement mass education efforts and community based counseling and testing services, provide AZT short-course therapy to infected individuals to prevent further transmission, implement treatment protocols to reduce mother to child transmissions, and implement blood supply screening procedures.

Providing care and treatment for individuals infected with HIV. Currently, treatment options for HIV infected people in sub-Saharan Africa and India are limited; less than 5 percent of people know their HIV status, and health care providers are often without the tools necessary to diagnose and treat HIV and the associated opportunistic infections. This initiative will provide medical and social services to individuals with HIV, including treatment of sexually transmitted diseases, opportunistic infections associated with HIV, and tuberculosis.

Caring for children orphaned by AIDS. Together with host government and social service agencies, this initiative will invest \$10 million to provide school fees, food assistance, counseling, basic health care, and other services that orphaned children need through community mobilization programs.

Strengthening the public health infrastructure. This initiative will assist African and Asian institutions in effectively tracking the spread of HIV infections throughout the Sub-Saharan and Asian regions, in order to focus HIV and AIDS prevention and treatment resources and provide training and technical assistance to developing clinics and community based organizations delivering prevention and care.

Assisting armed forces in preventing the spread of HIV within military organizations. The DoD will work with its African counterparts to invest \$10 million to prevent the spread of HIV within military agencies throughout Africa.

Initiating HIV prevention programs in the workplace. This initiative will invest \$10 million to initiate workplace programs designed to reduce discrimination against employees infected with HIV and AIDS. Funds will also be used to develop partnerships with the business and

labor communities to launch HIV prevention activities for employees, their families and communities.

- **Invest \$50 million in purchasing vaccines for developing countries.** As part of a broad Administration vaccine initiative, the budget includes a new \$50 million investment in the Global Fund for Children's Vaccines. The fund, administered by the Global Alliance for Vaccines and Immunizations (GAVI), a new, collaborative effort of UNICEF, the World Bank, the World Health Organization, and other governments and private organizations around the world.

Initial contributions to this fund will be used to purchase existing vaccines for hepatitis B, haemophilus influenzae B, and yellow fever, along with related safe injection equipment. Vaccine purchases will be administered through UNICEF, which runs an efficient immunization program today.

This fund is one step toward encouraging the development and delivery of new vaccines. The developed nations have the scientific and technological capacity to make new vaccines possible, and a renewed international commitment to purchase vaccines will encourage private research and development. The Administration is now developing further proposals to accelerate the invention and production of new vaccines, and to increase investment by developing nations in building sound delivery systems for vaccines, medicines, and other basic health services.

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**WHITE HOUSE RELEASES NEW REPORT ANNOUNCING TWO MILLION CHILDREN
ENROLLED IN THE STATE CHILDREN'S HEALTH INSURANCE PROGRAM AND
UNVEILS NEW INITIATIVE TO FINISH THE JOB ENROLLING UNINSURED CHILDREN**
January 11, 2000

Today, the Clinton-Gore Administration will release a new report by the Department of Health and Human Services documenting that 2 million children have now been enrolled in the new State Children's Health Insurance Program (SCHIP), doubling the program's enrollment in less than a year. The White House will also unveil a new, multi-faceted proposal that will be included in the President's FY 2001 budget to accelerate enrollment of uninsured children in Medicaid and SCHIP. This initiative will invest \$2.7 billion over the next five years to: (1) provide new options to find and enroll uninsured children through schools; (2) allow additional sites such as child care referral centers to immediately enroll low-income, uninsured children while their applications are formally processed; (3) require states to make their Medicaid enrollment as simple as that of SCHIP; and (4) expand Medicaid to include an option to cover children through age 20 and extend the same option to SCHIP. Together, these steps will help states finish the job of enrolling uninsured children in Medicaid and SCHIP.

NEW REPORT SHOWS THAT 2 MILLION CHILDREN ARE NOW ENROLLED IN SCHIP.

Today, HHS is releasing a state-by-state report on SCHIP enrollment and implementation. Created in 1997, SCHIP enables states to cover children from working families whose incomes are too high to qualify for Medicaid but too low to afford private health insurance. This expanded coverage can be achieved through Medicaid expansions, a separate state program, or a combination of both strategies. As states continue to expand their programs, this report shows that great progress has already been made in enrolling children. Highlights include:

- **The number of children enrolled in SCHIP has doubled in less than a year.** Nearly 2 million children were served by SCHIP between October 1, 1998 and September 30, 1999, a doubling in enrollment from December 1998.
- **The number of states covering children up to 200 percent of poverty has increased by more than seven fold.** In March 1997, only 4 states covered children with family incomes up to at least 200 percent of the Federal poverty level (about \$33,000 for a family of 4). Today, 30 states have plans approved to cover children with incomes up to at least this level.

MORE NEEDS TO BE DONE TO FINISH THE JOB. Despite these positive enrollment trends, millions of children remain eligible for Medicaid or SCHIP. Reasons why children remain uninsured include:

- **Lack of awareness of eligibility.** Many parents believe that working or not receiving welfare disqualifies their children from Medicaid or SCHIP. Others do not know about SCHIP, which targets families that typically do not qualify for other public programs.
- **Lack of coordination between programs.** A recent study by the Urban Institute found that approximately 60 percent – almost 4 million – of the uninsured children nationwide are currently enrolled in school lunch programs. However, Federal law prohibits these programs from sharing enrollment information with Medicaid.

- **Difficult enrollment process.** While states, the Administration and Congress have made it significantly easier for parents to enroll their children, barriers remain. These include confusing applications with complicated paperwork requirements; some states' requirement for in-person interviews, often at inconvenient times and places; different processes within states for Medicaid and SCHIP applications; and Federal statutory limits on where Medicaid eligibility can be established on a "presumptive" basis (e.g., most schools are disqualified).

CLINTON ADMINISTRATION UNVEILS NEW INITIATIVE TO HELP STATES FINISH THE JOB OF ENROLLING UNINSURED CHILDREN IN MEDICAID AND SCHIP. Today, The White House will unveil a new, five year, \$2.7 billion investment in children's health outreach that will be included in the Administration's FY 2001 budget. This initiative will:

- **Provide new options to find and enroll uninsured children through schools.** This proposal, similar to bipartisan legislation proposed by Senator Lugar (S. 1570), would allow school lunch programs to share application information with Medicaid staff for the sole purpose of outreach and enrollment (this is already allowed for SCHIP). It would also allow states to use enrollment in school lunch programs as the basis for presumptive eligibility for Medicaid and/or SCHIP. This means that qualified entities, at the states' discretion, may immediately enroll potentially eligible children in Medicaid and SCHIP on a temporary basis while their applications are formally processed.
- **Allow additional sites, like child care referral centers, to help bring kids into SCHIP and Medicaid.** The President's proposal also gives states added flexibility to use additional sites, beyond schools, to determine presumptive eligibility: child care centers, homeless shelters, agencies that determine eligibility for Medicaid, TANF, and SCHIP, and other entities approved by the Secretary. This option can help states provide critical health care services to children pending official enrollment and increases the likelihood that families complete the application process.
- **Require states to make their Medicaid and SCHIP enrollment equally simple.** Complicated, long application processes for Medicaid and SCHIP discourage enrollment. While many states have recognized this and have simplified the process in SCHIP and Medicaid, not all states have carried over all of their simplification strategies to Medicaid. To ensure that children do not fall through the cracks in states that have different rules and procedures for Medicaid and SCHIP, this proposal would require that states conform certain Medicaid eligibility rules and procedures for children to the rules and procedures used in SCHIP. If a state, in SCHIP: (1) does not require an assets test; (2) uses simple eligibility requirements and a mail-in application; and (3) determines eligibility for SCHIP no more than once a year, it would need to apply these same rules and procedures for children in Medicaid.
- **Expand Medicaid to include an option to cover children through age 20 and extend the same options to SCHIP.** Currently, states have the option to extend Medicaid eligibility to some children through age 20. This proposal would allow states the same flexibility for SCHIP and for all other Medicaid children, helping them cover people in one of the most vulnerable age groups; the highest uninsured rate – 30 percent – is for people ages 18 to 24 years old.

BUILDS ON THE CLINTON-GORE ADMINISTRATION'S LONGSTANDING COMMITMENT TO CHILDREN'S HEALTH. President Clinton and Vice President Gore have a

long standing commitment to children's health – and to ensuring that children eligible for insurance know about it. In 1998, the Clinton-Gore Administration, together with the National Governors Association and private sector partners, launched a nationwide “Insure Kids Now” Outreach Campaign that established a national toll-free number for children's health insurance outreach (1-877-KIDS NOW or 1-877-543-7669) and a website (www.insurekidsnow.gov). In 1999, the Administration launched a major back-to-school children's health outreach campaign that enlisted over 1,500 schools to conduct local outreach activities. The Administration supported and, with bipartisan Congressional support, passed an extension of the TANF \$500 million fund for outreach, providing states with resources to conduct aggressive education campaigns. It has promoted the use of a single, simple joint application for Medicaid and SCHIP; encouraged states to make Medicaid and SCHIP easy to enroll in and user-friendly; and created an Interagency Task Force on Children's Health Insurance Outreach that coordinates outreach actions for over 10 Federal agencies. In addition, the Administration has targeted hard-to-reach populations like rural children and legal immigrant children, by clarifying regulations so that enrolling in Medicaid or SCHIP and the receipt of other critical benefits will not threaten their immigration status.

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**WHITE HOUSE ANNOUNCES MAJOR NEW INCREASE IN FUNDING TO
DETERMINE ENVIRONMENTAL CAUSES OF DISEASE FUNDING WILL PROVIDE
NEW INSIGHT INTO THE CAUSES OF BREAST AND PROSTATE CANCER**

January 13, 2000

Today, the White House will announce that the President's FY 2001 budget will include an unprecedented funding increase to explore the largely unknown environmental causes of diseases, like breast and prostate cancer. This major initiative, which is advocated by the American Cancer Society and the American Academy of Pediatrics, will provide \$27 million, 56 percent greater than last year's funding level, for the Centers for Disease Control and Prevention (CDC) Environmental Health Lab to: assist communities investigating unusual incidence of cancer or other diseases; identify regions of the country in which individuals are at increased risk of dangerous exposure to carcinogens and other toxic substances; and ensure rapid evaluation of the impact of public health emergencies. Because of the startling lack of evidence pinpointing the environmental cause of cancers and many other diseases, these studies should play a major role in determining new, more effective diagnostic tests and preventive techniques.

**ENVIRONMENTAL CONDITIONS ARE LINKED TO INCREASED INCIDENCE OF
CANCER AND OTHER DISEASES.** Studies tracking patterns of cancer development and birth defects suggest the influence of environmental factors.

- **Environmental contaminants are associated with a wide range of birth defects and other diseases.** Of the 120,000 U.S. babies born each year with a birth defect, 8,000 die during their first year of life, making birth defects the leading cause of infant mortality in the United States and contributing substantially to childhood morbidity and long-term disability. Hundreds of thousands of cases of asthma and lead poisoning are also associated with environmental contaminants.
- **Initial scientific evidence demonstrates that increased risk of breast cancer may be associated with unknown environmental factors.** According to the American Cancer Society, one out of nine American women will develop breast cancer in her lifetime, and breast cancer is now the leading cause of cancer for women between the ages of 35 and 54. Despite decades of research, over half of all breast cancer cases cannot be explained by known risk factors, such as genetic predisposition, reproductive history, and diet.
- **Initial scientific evidence demonstrates that increased risk of prostate cancer may be associated with unknown environmental factors.** Prostate cancer is the most common type of cancer found in American men other than skin cancer, and disproportionately impacts African-American men. Researchers estimate that there will be about 180,000 new cases of prostate cancer in the United States this year, 36 percent of all cancer cases, and that about 37,000 men will die of this disease. However, researchers estimate that only 10 percent of prostate cancers are due to genetic predisposition.
- **Lack of research on the association between environmental exposure and breast cancer prostate cancer, and other diseases represents a lost opportunity to improve**

public health. Research on the impact of environmental contaminants on individual health will promote the development of improved diagnostic techniques, prevention strategies, and treatments. If exposure to chemicals in the environment was shown to be associated with only 10 percent of breast and prostate cancer cases, and we reduced or eliminated the identified hazards were reduced and eliminated, the development of these diseases in 30,000 men and women could potentially have been prevented each year.

- **Biomonitoring provides the critical information necessary to link exposure and disease.** Biomonitoring is the measurement of toxic substances in the human body, providing information necessary to link exposure to a toxic substance and the development of diseases such as cancer and a wide range of birth defects. It identifies which groups of people are in the most danger from toxic substances, evaluates the success of preventive actions, and improves the response of public health officials to emergencies. This technique, combined with the application of new advances in determining the genetic causes of disease, will inevitably lead to striking developments in treating and preventing cancer and other diseases.

CLINTON-GORE ADMINISTRATION MAKES MAJOR NEW INVESTMENT TO INVESTIGATE THE ENVIRONMENTAL CAUSES OF CANCER AND OTHER DISEASES. Today, the White House will announce that the President's FY 2001 budget will include a \$27 million investment to:

- **Double the level of assistance provided to state and local public health officials investigating adverse health events potentially linked to environmental exposures.** This new investment will allow epidemiologists and toxicologists at the CDC's Environmental Health Lab to double the level of critical technical support to communities to investigate increased incidence of cancer or other diseases potentially linked to toxic environmental exposures. As part of these interventions, the CDC will test the exposure of thousands of individuals to toxic substances to determine the cause of their illness. Studies that evaluate increased risk of cancer or birth defects from exposure to potential carcinogens or toxic substances will be given funding priority. When dangerous exposures are identified, CDC will work with local public health officials to take all measures necessary to protect residents from further harm.
- **Identify regions of the country where individuals are exposed to toxic substances that cause cancer and other diseases.** Although the Environmental Health Lab has conducted studies that link exposure to the pesticide dieldrin to increased risk of breast cancer and polychlorinated biphenyls (PCBs) to increased risk non-Hodgkins lymphoma, there is currently no way to determine the national level of exposure to these dangerous substances. These new funds will allow for the routine conduct of nationwide monitoring of over 100 potentially toxic substances, including dieldrin, PCBs, and over 70 other potential carcinogens. This initiative will assess exposure to these dangerous substances among women of childbearing age, children, minorities, and the elderly and will develop a blueprint for action to prevent dangerous exposures in the future.

- **Ensure rapid evaluation of the impact of public health emergencies.** This new initiative will also ensure that the CDC's Environmental Health Lab, together with state and local public health officials, can immediately address public health emergencies, such as widespread exposure to a toxic substance through a chemical spill or contamination of a product through a manufacturing error. Together with epidemiologists, toxicologists, and other public health personnel, the lab will conduct a comprehensive investigation to identify all sources of contaminant and work with local officials to protect residents from further exposure. For example, when methyl parathion, a lethal pesticide, was illegally sprayed in thousands of homes during 1996 and 1997, the Environmental Health Lab created a new method to test for the presence of this dangerous substance and provided the laboratory support services and scientific expertise necessary to prioritize medical treatment and determine which homes should be evacuated. The funds announced today will enable the CDC to respond swiftly to future emergencies.

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THE WHITE HOUSE

Office of the Vice President

For Immediate Release
Friday, January 13, 2000

Contact:
(202) 456-7035

VICE PRESIDENT AL GORE ANNOUNCES ADMINISTRATION TO SEEK MULTI-MILLION DOLLAR INVESTMENT TO ASSURE QUALITY CARE IN NURSING HOMES

Washington, DC -- Vice President Al Gore announced today that the Administration's FY 2001 budget will include a major new increase to strengthen nursing home quality nationwide and outlined how recently enacted investments in nursing home reimbursement and consumer protections would be allocated. The Administration's budget will invest \$70.1 million, a 29 percent increase over last year's funding level to increase the Administration's continuing oversight of nursing homes.

The Vice President also announced that the implementation of provisions in the Balanced Budget Refinement Act, beginning this month, would invest over \$2.7 billion over 5 years, a \$500 million increase in reimbursement in 2000 alone. Finally, Gore announced that this year, the Department of Health and Human Services (HHS) will dedicate \$10 million to provide older Americans and their caregivers with critical information necessary to make important choices they face on long term care services.

"When the time comes when a family makes the choice to move a loved one into a nursing home, all of us need to know that all our parents will be well cared for," said Vice President Al Gore. "These new steps will give families a greater sense of security in knowing we are working to assure our nursing homes safe and secure."

PROTECTING NURSING HOME RESIDENTS FROM ABUSE AND NEGLECT. About 1.6 million older Americans and people with disabilities receive care in approximately 16,700 nursing homes. The Clinton-Gore Administration -- along with the help of consumer advocates and responsible leaders in the nursing home industry -- has made the health and safety of nursing home residents a top priority. However, there have been reports that have concluded that oversight of "bad apple" nursing homes have been inadequate, leaving too many residents at risk. To address this issue, the Administration is continuing and enhancing its commitment to adequate funding of those who oversee nursing homes as well as those who provide services to patients. Today, the Clinton-Gore Administration announced:

A 29 PERCENT INCREASE IN FUNDING TO ENSURE THE DELIVERY OF HIGH QUALITY CARE IN NURSING HOMES. The Administration's FY 2001 budget will include an additional \$15.9 million, a 29 percent increase over continuing quality monitoring activities in last year's budget to improve Federal and state oversight of nursing homes. With these new funds, HHS will be able to expand current activities, including:

- **Training surveyors in the effective inspection of nursing homes.** Additional funds will be invested to train state inspectors to use new tools that make it easier to identify

quality problems in nursing homes. This system integrates quality of care data statewide and automatically identifies areas of concern, such as bedsores, malnutrition, and abuse affecting nursing-home residents, for surveyors to focus on when they visit facilities. This data is continually integrated into the Health Care Financing Association's Nursing Home Compare website, which provides prospective consumers effective information about choosing a nursing home, including facility specific information to evaluate the quality of care and educate individuals about residents' rights, abuse, and issues related to proper nutrition and hydration.

- **Surveying nursing homes during evenings and weekends.** Because of limited resources, nursing homes are often surveyed at predictable intervals, making it easy for substandard homes to ensure they are in compliance at the time of the surveyor's visit. These new funds will be used to ensure that at least 10 percent of all survey visits will be conducted after traditional business hours or on weekends, makes it more difficult for low-quality nursing homes to pass inspections.
- **Surveying substandard facilities more frequently than other facilities.** Additional funds will be used to target at least 100 facilities with the worst records of compliance with quality standards, to ensure these nursing homes are inspected more often.
- **Ensure swift and effective enforcement of nursing home quality standards.** The FY 2001 budget provides a 42 percent increase in funding to ensure that almost 1000 additional cases on the will be heard by the Department's Appeals Board, over twice the amount projected to be resolved in 2000, will be closed in FY 2001. In addition, new funds will be used to ensure that resident complaints of abuse or neglect placing a loved one in danger are swiftly investigated.

ANNOUNCING A NEW \$2.7 BILLION INVESTMENT OVER FIVE YEARS IN SKILLED NURSING FACILITIES BEGINNING THIS MONTH. The passage of the Medicare, Medicaid and SCHIP Balanced Budget Refinement Act (BBRA) of 1999 enhances Medicare beneficiaries' access to high-quality health care by addressing many of the problems with the BBA raised by the Administration and Congress. This landmark legislation, which will invest a total of \$500 million in nursing homes in 2000 alone, will:

- **Increase payment rates.** Beginning this month, nursing homes have the option to be paid at the full Federal rate for the skilled nursing facility prospective payment system rather than their current payment rate, providing an additional \$700 million over five years for these facilities and an investment of \$100 million this year.
- **Provide immediate increases in payment for high-cost cases and raises reimbursement rates across the board beginning in 2001.** Beginning on April 1, 2000 and ending on September 30, 2000, nursing homes treating certain clinically complex cases, such as patients with multiple sclerosis, cerebral palsy, or AIDS, will receive a 20 percent increase in payment. In addition, beginning in 2001, payments for nursing homes will increase across-the-board by 4 percent for 2001 and 2002. Together, these two policies will invest \$1.4 billion over 5 years and \$200 million this year in nursing homes nationwide.

- **Impose two-year moratorium on payment caps.** Beginning in January 1, 2000, this bill puts a two-year moratorium on harmful limits on payments for occupational, physical, and speech therapy, steps up medical review to prevent fraud, and revises a BBA-mandated study to develop an alternative, more rational system for therapy services payment for a total investment of \$600 million over 5 years and a total investment of \$200 million this year.

In addition, this month, HCFA will send a letter to all the nursing homes trade associations informing them of this impact of the new choice to be paid at the full Federal rate and outlining the effective dates and implementation schedule of other components of the BBRA that affect nursing homes.

EDUCATING OLDER AMERICANS ABOUT LONG-TERM CARE OPTIONS. Last year, the President successfully worked with Congress to get \$10 million for a campaign to provide all 39 million Medicare beneficiaries with critical information about long-term care options, including: what long-term care Medicare covers; how to find out about Medicaid long-term care coverage; what to look for in a quality private long-term care policy; and how to access information about home-and community-based care services that best fit beneficiaries' needs. This year, information will be presented in an easy-to-understand format specifically targeted to caregivers and older Americans and will be distributed nationwide through venues such as the Medicare and You handbook, the Guide to Health Insurance, and state organizations devoted to health insurance as well as public service announcements for television and radio.

BUILDING ON THE CLINTON GORE ADMINISTRATION'S COMMITMENT TO ENSURING HIGH QUALITY OF CARE IN NURSING HOMES NATIONWIDE.

Protecting patients in nursing homes has been and will continue to be a priority of the Clinton-Gore Administration.

- In 1995, the President threatened to veto legislation pending before the Congress that would eliminate Federal enforcement of nursing home quality standards, and issued the toughest nursing home regulations in the history of the Medicare and Medicaid programs, leading to measurable improvements in quality of care for nursing home residents.
- In July of 1998, the Clinton-Gore Administration initiated a new nursing home quality initiative that ensures swift and strong penalties for nursing homes failing to comply with standards, strengthened oversight of state enforcement mechanisms, and implemented unprecedented efforts to improve nutrition and prevent bed sores.
- The Administration also established the Nursing Home Compare website, which provides prospective consumers effective information about choosing a nursing home, including facility specific information to evaluate the quality of care and educate individuals about residents' rights, abuse, and issues related to proper nutrition and hydration.

Finally, the Administration recently instructed states to impose immediate sanctions, such as fines, against nursing homes any time that a nursing home is found to have caused harm to a resident on consecutive surveys, in order to put additional pressure on nursing homes to meet all health and safety standards.

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CLINTON-GORE ADMINISTRATION PROPOSES A \$1 BILLION INCREASE IN INVESTMENT IN BIOMEDICAL RESEARCH

January 16, 2000

Today, the White House announced that the President's FY 2001 budget would include almost \$19 billion for biomedical research at the National Institutes of Health (NIH), an increase of \$1 billion over last year's funding level. In addition, the President will eliminate the delays in releasing \$4 billion in research funds as required in last year's appropriations bill.

Funding for biomedical research has led to groundbreaking advances in diagnosing, treating, and curing diseases. It has contributed to the eradication of smallpox and the disappearance of polio in the Western Hemisphere. If Congress approves the President's proposal, funding for NIH will increase by over 80 percent – nearly twice what the NIH budget was when President Clinton came into office.

Increased funding for NIH has achieved broad-based bipartisan support, and the major increase included in this year's budget was strongly advocated by Vice President Gore. The new funds will be used to support new and expanded research that provide the basis for disease breakthroughs and pharmacological advances preventing death and disability and improving the quality of life for millions of Americans.

CONTINUED COMMITMENT ENSURES IMPROVED HEALTH FOR THE 21ST CENTURY. The \$1 billion increase included in the President's FY 2001 budget will build on the Clinton-Gore Administration's commitment to enhance the nation's health by providing new funding for research on every major disease.

New funds help assure progress on diseases costing the nation billions of dollars. In just the past year, researchers supported by NIH have discovered a simple, affordable drug to prevent transmission of HIV in infants, which could potentially prevent the infection of up to 400,000 newborns. Researchers also developed a tissue engineering method to grow new arteries, key to the development of new therapies for heart disease. This year, research funds will be spent to study diseases affecting the health and lives of Americans, including diabetes, osteoporosis, heart disease, cancer, and neurological diseases like Alzheimer's and Parkinson's.

Using genetic discoveries to further medical treatment. The Human Genome Project, which is scheduled to complete a working draft of the genome sequence by the spring of 2000, considerably ahead of schedule. The Project continues to generate information that can be used to develop new medical treatments and disease prevention strategies. Over the past year, researchers supported by NIH have discovered a number of genes associated with hearing loss, Alzheimer's disease, and epilepsy. New funds will be used to continue this research and investigate the genetic causes of complex chronic diseases, including diabetes, heart disease, retinal disorders, and Parkinson's disease. These funds will also be used to research how genetic makeup determines the effectiveness of medications, as well as what side effects are likely to occur, in order to eventually help doctors prescribing medications to choose those best suited to individual patients.

Continuing research priorities. This new investment will also fund research to:

- Eliminate racial and ethnic health disparities. Racial and ethnic minorities face disproportionately high infant mortality, low rates of childhood vaccination, high prevalence of cardiovascular disease and diabetes, and shorter lifespans than the population as a whole. In FY 2001, NIH will invest \$20 million to establish a new Center for Research on Minority Health to coordinate new research on this issue and explore the relation of health status to differences in culture, diet, language, and occupational hazards. This research will be used to develop prevention strategies and other interventions for affected populations.
- Translate research into practice. In FY 2001, NIH will increase its investment in programs that use the latest scientific breakthroughs to develop diagnostic technologies, therapeutic interventions, and preventive therapies for a broad range of acute and chronic conditions. New funds will be used to develop new clinical trials evaluating therapies for cancer, stroke, diabetes, and mental illness and disseminate information on the clinical application of scientific breakthroughs to the public.
- Foster interdisciplinary research. Translating new genetic information and scientific breakthroughs into new medical treatments, diagnostics, and prevention strategies requires researchers from diverse disciplines to collaborate. New funds will be used to develop and expand competitive grant programs to encourage researchers in fields such as mathematics, physics, and computer science to contribute to medical research and develop new ways to effectively manage data to maximize the scientific discoveries that will spring from new biological information.

BUILDS ON THE CLINTON-GORE ADMINISTRATION'S LONGSTANDING COMMITMENT TO BIOMEDICAL RESEARCH. Two years ago, the President called for an increase of almost 50 percent over 5 years in the NIH budget as part of his Research for America Fund. Since that time, the NIH budget has increased by over \$4.3 billion and with the funding proposed by the President this year, the Administration will be one year ahead of schedule in reaching the 50 percent goal. As a result, NIH now supports the highest levels of research ever on nearly all types of disease and health conditions.

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**CLINTON GORE ADMINISTRATION ANNOUNCES NEW MULTIMILLION
DOLLAR INCREASE TO COMBAT HIV AND AIDS**
President's Budget Includes Largest Ever Increase for Prevention
January 18, 2000

Today, the White House announced that the President's FY 2001 budget will include a major increase in funding for programs that treat HIV and AIDS and prevent the spread of the disease. The President has proposed an additional \$50 million, the largest increase ever in funding for HIV activities to encourage individuals at risk to avoid behaviors that can result in the transmission of the disease. In addition, the budget will invest an additional \$125 million in the Ryan White Program, an increase of almost 8 percent over last year's funding level, to provide primary medical care, pharmaceuticals critical to treatment, and other critical support services for people living with HIV and AIDS.

ALTHOUGH MUCH PROGRESS HAS BEEN MADE, HIV REMAINS A SERIOUS PUBLIC HEALTH PROBLEM NATIONWIDE. In 1996, for the first time in the history of the AIDS epidemic, the number of Americans diagnosed with AIDS declined. Between 1996 and 1997, HIV/AIDS mortality declined 42 percent, falling from the leading cause of death among 25 to 44 year olds in 1995 to the fifth leading cause of death in that age group. There has also been a decline in the number of AIDS cases overall and a sharp decline in new AIDS cases in infants and children. However, more needs to be done.

- **The incidence of HIV infections continues at an unacceptable rate.** The number of new infections has remained stable with approximately 40,000 Americans infected with HIV in 1998. Approximately half of those infections occurred in those under 25 years of age, and half occurred as a direct or indirect result of injection drug use. Just last week, the CDC reported that the percentage of AIDS cases among gay men of color had gone beyond that of white gay and bisexual men for the first time since the epidemic began.
- **Minorities are disproportionately affected by HIV and AIDS.** Non-Hispanic blacks and Hispanics accounted for 47 percent and 20 percent, respectively, of persons diagnosed with AIDS in 1997, the highest proportions thus far in the epidemic. While racial and ethnic groups account only for about 25 percent of the U.S. population, they account for more than 50 percent of all AIDS cases. And although AIDS deaths are down, AIDS remains the leading killer of African-Americans aged 25 to 44.
- **Strong, targeted, community based HIV and AIDS prevention efforts provide a virtual vaccine against the spread of HIV and AIDS.** While the number of AIDS cases is declining, the number of people living with HIV and AIDS is growing. Currently, up to 900,000 Americans are believed to be living with HIV/AIDS, the virus that causes AIDS.

CLINTON-GORE ADMINISTRATION ANNOUNCES MAJOR NEW INVESTMENT IN HIV AND AIDS PREVENTION AND TREATMENT. Today, the Clinton-Gore Administration will announce a new initiative to prevent the spread of HIV and AIDS nationwide and provide critical treatment and social support services to those already infected.

- **New investment of \$125 million to provide treatment for individuals with HIV and AIDS.** The Ryan White program has worked effectively to dramatically improve the quality of life for people living with HIV and AIDS; reduce the use of costly inpatient care; and increase access to care for underserved populations, including people of color. Since the beginning of the program, CARE Act providers have experienced an increase of over 30 percent in the number of new patients they see. This new investment will these providers offer additional primary medical care, AIDS drugs, viral load testing, treatment information, assistance in adhering to complicated treatment regimens, and other essential support services for the tens of thousands of people with HIV and AIDS.
- **New investment of \$50 million in preventing the spread of HIV and AIDS.** This initiative will invest \$50 million in prevention efforts, the largest increase ever, to:

Educate thousands of Americans about the importance of learning their HIV status. Of the up to 900,000 people believed to be living with HIV in the United States, up to a third do not know that they are infected. These are individuals who are most likely to continue the behaviors that resulted in their own infection and will likely result in the infection of others. The initiative that the President is announcing today will continue the CDC's "Know Your Status" campaign; launch highly focused outreach campaigns targeted to individuals at high risk, including minorities, women, and young gay and bisexual men; and expand current systems of voluntary counseling, testing, and partner notification services.

Reach out to populations with the greatest risk of infection. Because each state has an AIDS epidemic that is unique in its impact and breadth, local programs are the most likely to reach at-risk persons in an effective manner. New funds will be given to state and local public health agencies to expand community prevention planning, with a special emphasis on racial and ethnic minorities, women, injection drug users and their partners, and young gay and bisexual men.

THE CLINTON-GORE ADMINISTRATION'S LONGSTANDING COMMITMENT TO PREVENTING AND TREATING HIV AND AIDS. President Clinton and Vice President Gore have worked hard to invigorate the response to HIV and AIDS, providing new national leadership, substantially greater resources and a closer working relationship with affected communities. During their Administration, funding for AIDS research has increased by 87 percent at the Department of Health and Human Services (HHS), while funding for HIV prevention has increased 47 percent. Funding for the Ryan White CARE Act has increased by over 338 percent.