file:
WHGA
General

1995 WHITE HOUSE CONFERENCE ON AGING

BACKGROUND

- In the last half of this century, there have been three White House Conferences on Aging and each one has served as a catalyst for important new initiatives that address the needs of America's elderly - - their work contributed to the passage of Medicare and Medicaid, the Older Americans Act and Social Security Reform.

- The 1995 White House Conference on Aging is the first conference since 1981 and the last in the 20th Century. The Conference will be held in Washington on May 2-5. Its theme is: America Now and Into the 21st Century - - Generations aging together with independence, opportunity and dignity.

- More than 2000 delegates, appointed by governors, members of Congress, aging organizations, international organizations, veterans groups, the White House, the Department of Health and Human Services and the White House Conference on Aging will attend. Senior volunteers and caregivers are invited as delegates for the first time.

- For the first time, the Opening Plenary of the Conference will be broadcast to twelve satellite sites across the country, providing the opportunity to hundreds of thousands of Americans to view the President's opening address to the Conference.

- The purpose of the 1995 Conference is to produce resolutions that shape national aging policy over the next ten years - - and to work together to see these resolutions implemented.

A GRASS ROOTS PROCESS

For the first time ever, the planning process for the Conference involved grass-roots participation from every corner of our country.

- Over 800 events and conferences have been held in all 50 states and territories, involving more than 100,000 people.

- The public has had an opportunity to shape the Conference's agenda, ensuring that the issues covered are the issues seniors care most about: promoting economic security; assuring comprehensive health care and long-term care; maximizing housing and support service options; maximizing options for a quality life.

CHALLENGES AHEAD

- This Conference comes at a time of both fiscal and demographic change in our country - - diminishing resources on the federal/state/local levels; an entire population living longer, and staying healthier; changing family structures.

- This Conference is about meeting new challenges with new and creative solutions and forging new partnerships.

- It is about energizing society across all age groups to make aging an issue of universal interest and concern.

- It is about building new intergenerational partnerships and expanding existing ones.

- It is about educating younger Americans to plan for their older years by working hard, saving money and making smart decisions about their health.

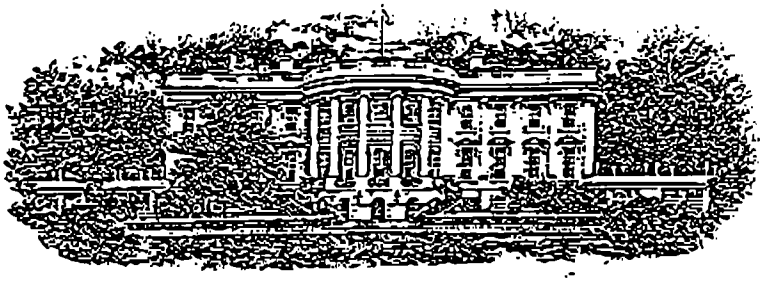
- And it is about educating all Americans about the extraordinary abilities and potential of our older Americans.

FAX TRANSMITTAL COVER SHEET

TO: Molley FROM: Hal Duncan

FAX: 456 - 7028

OF PAGES 2 + COVER



1995 WHITE HOUSE CONFERENCE ON AGING
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Washington, DC 20024
Phone # (202) 245-7116 • Fax # (202) 245-7857

COMMENTS: For our Conversation, Let me know if there are more questions. Thanks.

Report by seniors urges national policy on aging

By Warren Wolfe
Staff Writer

America's seniors proposed a national aging policy Thursday that says the top goal for Congress should be to protect core programs such as Social Security, Medicare and Medicaid that have been "the extraordinary successes" in helping older people.

And in trying to fix Medicaid's growing financial problems, Congress should avoid replacing it with block grants to states, as proposed by Republican leaders of Congress, the report says.

The report is an outgrowth of May's White House Conference on Aging, at which 2,217 delegates — including 37 from Minnesota — approved 51 resolutions designed to help direct aging policy for the next decade.

It was the fourth such conference; they have been held about once a decade since President Dwight Eisenhower called for the first one in 1961. Earlier conferences resulted in much of the impetus for Medicare, Medicaid and the Older Americans Act, which helps fund such programs as home-delivered meals and senior centers.

On Thursday, the 127-page report was sent to the nation's governors for comment before a final draft is prepared early next year. Governors appointed 47 percent of the conference delegates. Most others were named by members of Congress.

Governors have a strong interest in Medicaid because this fall, Congress will act on proposals to trim $182 billion from expected growth in the program over the next seven years. If approved, that would force states to cut recipients and services from the program, which provides medical and nursing home care to the poor. In Minnesota, about 70 percent of nursing home residents qualify for Medicaid coverage.

"What came out of this conference with such strong emphasis was that these basic programs — Social Security, Medicare, Medicaid — were fundamental, were bedrock to the well-being not only of these delegates, but also older people across the country," said Lou Glasse, former president of the Older Women's League and a member of the conference advisory committee.

Poverty among seniors dropped from more than 50 percent when Social Security was enacted 60 years ago to 20 percent when Medicare and Medicare were started 30 years ago, she said. The level now is about 11 percent.

"The key part [of the report] is its focus on the direction of legislation now before Congress," said Robert Blancato, director of the White House conference. Its immediate impact may be to add fuel to policy discussions this month as Congress prepares to act on government program funding.

"This is not a parochial or Pollyanna-ish type of report. Children, baby boomers, families, all are contained in here. . . . It is not unrealistic or radical." Proposed spending increases should be seen as investments that will result in cost savings, he said.

Many conference delegates continued to meet after they returned home. About 160 post-conference events have been scheduled around the country.

In Minnesota, several delegates have held informational meetings, and the Minnesota Board on Aging will sponsor a meeting in late September for delegates, members of Congress and state policymakers. That gathering will focus on the federal Medicare program and how a lower level of funding for Minnesota and some other states would result in higher premiums and fewer services.

"The window of opportunity for developing and implementing a comprehensive, cost-effective national aging policy is closing rapidly," the conference report says. "By the year 2000, there will be 26 times as many Americans over the age of 85 as there were in 1900. . . . Delays in planning for our aging population will likely result in greater demands upon our nation and its people."

Among its other proposals, the national aging policy would establish universal health care and a long-term care policy, would raise Supplemental Security Income benefits to 20 percent above the current poverty income level and would grant Social Security credit to those caring for small children or disabled relatives.

It also calls on employers and others in the private sector to work with government to enhance employment and volunteer opportunities for seniors and to make housing more accessible for people with disabilities.

"I think the delegates' main message was that our system was sound and we must keep the [core programs]," Glasse said. "We have to protect not only the current population of older people, but their children, who would take responsibility for the old should the system fail."

Conference yields aging proposal goals

Here are highlights of the proposed national aging policy statement from the White House Conference on Aging:

■ **To affirm support for successful programs and policies.** Maintain Social Security and ensure its long-term viability. Resolve financing problems facing Medicare and Medicaid as part of overall health care reform, and not by cutting essential services or substituting block-grant programs. Retain the Older Americans Act as a federal-state-local partnership and continue funding programs such as home-delivered meals and senior transportation.

■ **To strengthen independence.** Use support services to help frail people stay out of nursing homes. Encourage housing design and modifications to help people with disabilities remain in their homes.

■ **To promote personal security.**

Expand job opportunities for older people at fair wages. Strengt pension plans and make them tr ferable from job to job. Estab comprehensive, universal he care. Strengthen the family's abi to care for aged and disabled r tives at home, and establish affo able private and public long-t care insurance.

■ **To help people share responsi ity for their own aging.** Among f consumers, ensure choice of c that respects personal preferen and cultural differences. Encour responsibility and support fami to help achieve the greatest in pendence in the least restrictive most cost-effective setting.

■ **To recognize older people as sources.** Ensure that employers unions support workers in lifel job training. Develop governm and private partnerships that s port senior volunteers as a resou Encourage older people to w with and be advocates for childre

■ **To value the interdepende among generations.** Promote p cies and intergenerational progr that involve older adults as valu resources to teach skills and cult values. Encourage medical resea to prevent, delay and man chronic ailments to benefit middle-aged and young adults, well as children.

Minneapolis, MN
Star Tribune
Minneapolis Ed.
Minneapolis-St. Paul Met Area
Friday D 404,76
AUG 4, 1995

Devoting funds now to elderly could help later, official says

By GREG CLARK
Staff Writer

America might need to invest more money now in aging services to trim costs in the future, a White House official said Thursday.

Bob Blancato, executive director of the White House Conference on Aging, also predicted that the nation's governors, who received recommendations from conference delegates on Thursday, would feel grass-roots pressure to support Social Security, Medicare and Medicaid.

His comments came in a telephone conference from Washington with seven newspapers, including *The Kansas City Star*.

Despite an expense-slashing mood in Congress, many of the resolutions in the aging conference report pointed toward increased spending by federal, state and local governments, business and private foundations.

With an eye toward the nation's 76 million baby boomers, who will begin turning 65 in 16 years, Blancato said aging policies must consider all generations.

"Any time you talk about more money for aging research, about programs to keep people in their homes, you're talking about investment," Blancato said. "In long-term care, the idea is that savings can be had."

He suggested that increases could come in the areas of technology, health care and housing.

Some increases might be inevitable, said Lou Glasse, a member of the aging conference's advisory committee. "The federal government might be able to avoid it, but then the costs will be shifted. It becomes a matter of who pays, not a matter of whether (costs) increase."

At the aging conference in May, the 2,217 delegates passed 51 resolutions. Glasse noted that protecting Social Security, Medicaid and Medicare all ranked among the top six.

"The delegates' message," she said, "was that our systems are sound, and we must keep them."

Nonetheless, many lawmakers say cuts are needed to keep the systems solvent. They've proposed slicing more than $450 billion from projected health-care spending — $270 billion from Medicare and $182 billion from Medicaid — by 2002.

Over that period, Missouri would lose more than $5 billion in Medicare funding and $1 billion in Medicaid, according to a White House news release. In Kansas, the figures are $3 billion for Medicare and $663 million for Medicaid.

"The block-granting of Medicaid will be an issue that a lot of grass-roots activities around the country will focus on," Blancato said.

The conference on aging, May 2 through 5 in Washington, was the first of its kind since 1981. Governors will have 90 days to comment on the draft report. Officials will blend their remarks, reports from about 160 post-conference events and public comments into a final report.

President Clinton, Congress and the public will receive copies early next year.

Kansas City, MO
Star
Kansas City Met Area

Friday D 266,296

AUG 4, 1995

N3364

1995 White House Conference on Aging

Preliminary Print Media Analysis

June 20, 1995

The Conference has collected 1,328 news clips representing all fifty states, the District of Columbia and Puerto Rico. This coverage includes News Magazines; Daily Newspapers (both regional and national); Weekly Newspapers (both regional and national); Trade Press; and other.

Two hundred sixty-seven press were credentialed, most of whom stayed for the duration of the Conference. All major wire services were represented generating more than 20 wire stories between May 1 and May 6.

Stories mentioning the Conference have four major focuses:

1. Delegate profiles and comments (before, during and after the Conference)
2. Events in the Washington Hilton, May 2-5
3. Research/Findings presented to or in conjunction with the Conference
4. Medicare debate

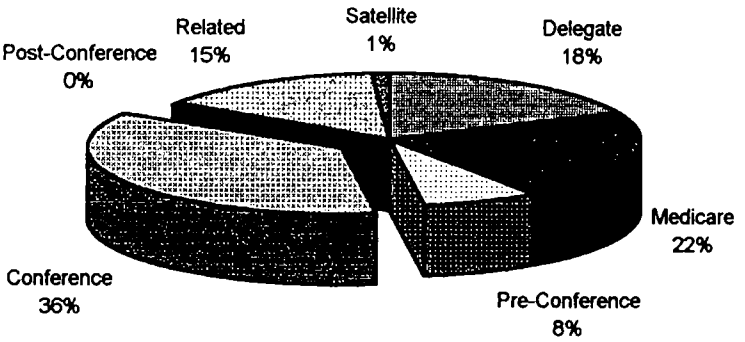
Also receiving attention were pre-Conference activities (official events and agenda development), the satellite broadcast of the opening plenary session, and post-Conference events.

Of the collected stories mentioning the Conference, 36% focused on events in the Washington Hilton (May 2-5); 22% focused on Medicare; 18% focused on delegates; 15% focused on research/findings related to aging; 8% focused on pre-Conference events and agenda development; and 1% focused on the satellite broadcast (see attached graphs).

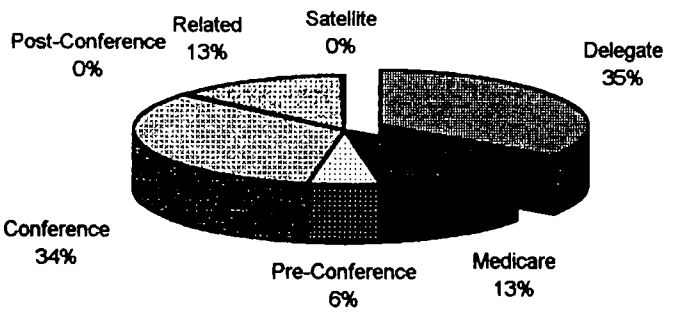
When periodical circulation is accounted for, delegate- focused stories increase to 35%; stories focusing on events in the Washington Hilton May 2-5 decrease to 34%; Medicare stories decrease to 13%; stories focussing on research/finding related to aging decrease to 13%; Pre-Conference stories decrease to 6%; and satellite coverage falls below 1% (see attached graphs).

Estimated circulation of stories concerning the 1995 White House Conference on Aging thus far is in excess of 180 billion. Continued coverage is expected around post-Conference events and the release of the proposed, initial and final reports.

Story Distribution (by # of stories written)



Story Distribution (by circulation)



Note: Graphs based upon a sample of 264 clips

Denver, CO
POST
Denver–Boulder–Longmont
Met Area

Thursday D 283,412

MAY 4, 1995

P1608

LUCE PRESS CLIPPINGS

Clinton vows elderly at talks

President vows Medicare shield

Denver Post Wire Services

WASHINGTON — President Clinton yesterday brought senior-citizen activists to their feet when he said government has a moral responsibility to protect Medicare and warned that Republicans were poised to slash the program to provide tax cuts to the rich.

"The status quo is not an option," Clinton said, admitting the financial pressures on the Medicare system. But he repeated his view savings must come in the context of overhauling the health-care system and insisted, "I will not support proposals to slash these programs, to undermine their integrity, to pay for tax cuts for people who are well off."

Unmoved by the request of House Speaker Newt Gingrich and Senate Majority Leader Bob Dole to draft a bipartisan solution, or by Gingrich's pledge to consider Medicare spending separately from the rest of the budget, Clinton sought to keep the Republicans on the run on an issue that the White House believes will damage whoever blinks first.

The administration says the trust fund, which pays nearly two-thirds of the cost of Medicare, will be insolvent by the year 2002 if nothing is done. But except for his broad requirements that any changes do no harm, the president declined to offer any details of his own. Instead, he called again on Republicans to spell out their budget proposals.

"I will not walk away from this issue," Clinton told elderly people and health-care experts at the White House Conference on Aging. "I watched from afar when I was a governor and a citizen for 12 years while people here walked away from problem after problem. And I sustained, as president, an agonizing experience when large numbers of people walked away from problems that I asked them to face for short-term political gain."

Precisely because the Clinton health-care plan went down to defeat last year, the White House refuses to give the Republicans a plan they could pick apart to meet their own vows to cut taxes and balance the budget by 2002.

Instead, it has moved fast to paint the Republicans as foes of the sick and the elderly, and this week's long-scheduled conference at the Washington Hilton — the fourth on the topic since 1961 — gave him a chance to politick with a powerful electoral constituency.

Clinton said any proposed change in Medicare or Medicaid shouldn't cut services or charge elderly people on fixed incomes "more than they can possibly be expected to pay," or force them to enter managed-care programs "whether they're good ones or not."

The New York Times and The Washington Post contributed to this report.

Clinton puts GOP on spot on Medicare

By John Aloysius Farrell
GLOBE STAFF

WASHINGTON – President Clinton refused to help Republican foes out of a political bind yesterday, dismissing their appeals for his leadership in a simmering Medicare funding crisis until they first define the politically painful cutbacks required both to balance the budget and cut taxes.

• Issues prevail at aging conference. Page 18.
• Gingrich to give up PAC position. Page 18.

Having failed to get Clinton to give them political cover, GOP congressional leaders prepared to leave town for an issues retreat without presenting the annual federal budget resolution that had been due by law to be passed on April 15. Republican legislators dislike the prospect of cutting Medicare and triggering an uproar among senior citizens.

Clinton, speaking at the opening of a White House Conference on Aging, did nothing to eliminate the Republican unease. "It is wrong simply to slash Medicare and Medicaid to pay for tax cuts for people who are well off," he said. "Reducing the deficit is terribly important, but it is also important that Congress protect programs for seniors like Medicare."

Using the coarsest political arithmetic to alarm the seniors, Clinton charged that the GOP budget-cutters might increase the out-of-pocket costs on Medicare by $500 per year for each recipient.

The Medicare debate marks a modest reversal of fortune here. GOP leaders appear stymied on their budget plan, and more confused than they have been by almost any issue since gaining control of Congress in last fall's elections.

And Clinton, who has been almost entirely absent from the Capitol Hill debate in recent months, has suddenly re-emerged on the domestic policy stage.

Republicans complained yesterday that Clinton has been ducking the long-term crisis in Medicare funding in order to score political points, and they responded with gloomy language of their own.

"In just seven years, Medicare will be bankrupt," said the House speaker, Newt Gingrich, and Senate Majority leader Bob Dole in a letter to Clinton yesterday, citing the most recent Medicare trustees' report. "If Medicare goes bankrupt, no payments, by law, can be made by Medicare to pay for hospital care or for any other services paid for by the trust fund."

Clinton's "political advisers have him exploiting senior citizens for the narrowest of political purposes," said Gingrich.

Even Clinton conceded yesterday that when it comes to Medicare's long-term health, "the status quo is not an option."

"I sustained as president an agonizing experience when large numbers of people walked away from problems that I asked them to face, for short-term political gain," said Clinton. "I will not do that."

But Clinton offered only his long-standing demand for comprehensive national health care reform as the vehicle for rescuing the Medicare trust fund, which covers 60 percent of costs. He rejected an appeal from Gingrich and Dole that he meet with them to arrive at a bipartisan solution.

Having ruled out cuts in defense and Social Security, Republicans would need to pare back Medicare and Medicaid by up to $300 billion to meet their promises of tax cuts and a balanced budget by the year 2002. But they are also correct in predicting that the Medicare trust fund is nearing bankruptcy. and

But Clinton's aides, unaccustomed since November to having the political upper hand, said that the Medicare shortfall would inevitably be worked out, and pounded back with glee at the Republican failure to present a budget plan.

The White House stand reflects the deep resentment among Clinton and his aides, from Chief of Staff Leon Panetta on down, for the way the GOP refused to deliver a single vote to Clinton's efforts to reduce the budget deficit in 1993, and then promised both tax cuts and a balanced budget in their campaign to capture control of Congress.

Clinton will not negotiate, said the White House press secretary, Michael McCurry, until the Republicans stop "squirming" and "confess."

To win Clinton's help, Gingrich and other Republican leaders need to "come back and say, 'Look, all right, we overpromised. We admit it. We can't simultaneously balance the budget by the year 2002 and provide over $350 billion worth of tax cuts,'" McCurry said.

REUTERS/BOLO

President Clinton calls for comprehensive national health care reform at the White House Conference on Aging yesterday.

"It is wrong simply to slash Medicare and Medicaid to pay for tax cuts.'
PRESIDENT CLINTON

Boston, MA
Globe
Boston Met Area
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Thursday
MAY 4, 1995

West Palm Beach, FL
Palm Beach Post
West Palm Beach Met Area

Thursday D 186,882

MAY 4, 1995

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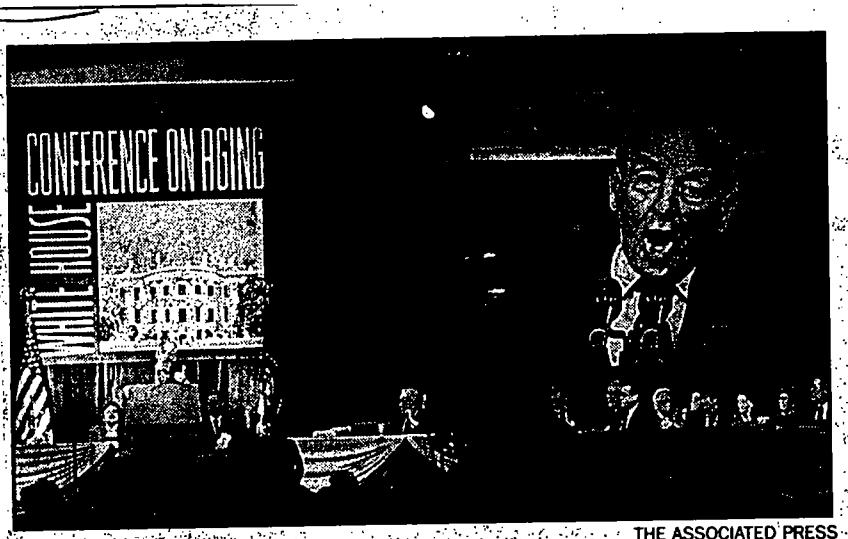
LUCE PRESS CLIPPINGS



THE ASSOCIATED PRESS

Arthur Flemming, former health secretary, is shown addressing the White House Conference on Aging on a big screen Wednesday.

Clinton, GOP swap challenges on solutions to Medicare cuts

The Associated Press

WASHINGTON — Maneuvering for political high ground, President Clinton went before thousands of senior citizens Wednesday and challenged Republicans to explain how they hope to wring upwards of $250 billion out of Medicare.

Republicans, eager to draw out Clinton's ideas on the sensitive matter of Medicare cuts, accused the president of shirking leadership by refusing to go first.

"You shouldn't run for reelection if you are not prepared to do the job," said House Speaker Newt Gingrich, R-Ga.

It is a sign of older Americans' political power that each side wants the other to make the first move to rein in spiraling Medicare costs. The popular health-insurance system for the elderly is expected to go broke by 2002 without corrective action.

Senate Majority Leader Bob Dole, R-Kan., joined Gingrich in renewing an invitation for Clinton to come to Capitol Hill to work toward a solution.

Instead, Clinton chose a friendly audience at the White House Conference on Aging to suggest that Republicans want to raid Medicare to finance tax cuts rather than improve the program's financial standing.

✓ The GOP joy ride is over. Now what? EDITORIAL, 22A

Lebanon, NH
Valley News

Saturday D 19,051

MAY 6, 1995

N5608

Conference On Aging Sounds New

Delegates Avoid Traditional Demands For More Benefits

By ROBERT A. ROSENBLATT and LINDA FELDMAN
Los Angeles Times

WASHINGTON — In a fiscally cautious mood, more than 2,000 delegates to the White House Conference on Aging called yesterday for a strong defense of Social Security and Medicare, but avoided the traditional demands for new government benefits for the elderly.

Sen. David Pryor, D-Ark., the conference chairman, called the meeting's tone "pragmatic," and said its legacy will be strengthened political support for the "sanctity" of the social contract between American workers and the elderly.

This year's White House conference, the first since 1981, ended with a markedly different tone from prior gatherings, which traditionally prepared the ground for liberal enterprises such as Medicare itself, and the Older Americans Act, which funds senior centers and meal programs.

"This was a pretty pragmatic group of delegates," Pryor said. "They did not support any new programs; they did not vote to create any new bureaucracies."

In the current political climate, the delegates, many of whom are liberal in their politics and activist in their approach to government, were highly restrained. Their actions reflected concern over the federal budget deficit, a deepening skepticism of government, and the political reality of a Republican Congress determined to restrain the growth of spending.

> **"This was a pretty pragmatic group of delegates."**
> **Sen. David Pryor**
> Conference chairman

The gathering passed 50 resolutions on subjects ranging from housing to legal aid, but the emphasis was on preserving the major social programs now benefitting the elderly.

Elected officials should "not use Social Security to reduce the budget deficit or balance the budget," and the program should be strengthened and preserved "without means testing, with universal coverage and with continued full protection against inflation," the delegates said in the most popular resolution, which drew support from 1,595 of the 2,002 delegates who cast ballots yesterday.

Among the delegates, "there was a militant determination that there can't be any tampering with Medicare and Social Security," said author Betty Friedan, one of the pioneers of the modern feminist movement and currently an advocate on issues involving the elderly. She was a delegate from New York.

There were two separate resolutions approved yesterday on Medicare, the first originally developed in mini-conferences around the country and refined in three days of discussion here. It declared that the 36 million Medicare beneficiaries should be protected "with respect to health care affordability and access, giving special consideration to the burdens imposed by co-payments, deductibles and premiums."

A second one, more partisan in tone and prepared by liberal and labor delegates, echoed the words the Clinton administration has been using in its fight with Congressional Republicans over Medicare. This resolution said the problems of Medicare should be considered in the context of broader health care reform backed by Clinton, and declared that Medicare and Medicaid savings should not be used to pay for "tax cuts for well-off citizens."

While the White House accuses Republicans of planning to trim future Medicare spending to help balance the budget, the GOP says Clinton has abdicated his responsibility to offer a solvency rescue plan for Medicare. The hospital trust fund is headed for bankruptcy in the year 2002. The GOP also contends that it would not cut Medicare but only slow the rate of growth from the current level of 10 percent a year to a level of 7 percent.

Jamestown, NY
Post-Journal
Jamestown Met Area

Thursday D 25,421

MAY 4, 1995

N4032

LUCE PRESS CLIPPINGS

President Clinton waves to participants of the White House Conference on Aging after a speech Wednesday.
AP photo

Seniors Call For Secure Programs

Group Assails Cuts In Republican Budget

WASHINGTON (AP) – Senior citizens nervous about Republican budget-cutting plans are demanding that the federal government renew its commitment to a healthy Social Security system.

"We need our Social Security," a California delegate said Wednesday at the White House Conference on Aging. "They made a commitment back in 1934 (when it was created) and they should stick by it."

More than 2,250 delegates have gathered in Washington to take part in the three-day conference, the fourth event of its kind since 1961.

During a speech delivered before a day of workshops, President Clinton maneuvered for the political high ground, challenging Republicans to explain how they plan to cut some $250 billion out of Medicare over seven years.

"I believe it is wrong simply to slash Medicare and Medicaid to pay for tax cuts for people who are well off," Clinton declared to loud applause. "We must have a sense of what our obligations are."

Recommendations that were approved in previous aging conferences led to major policy changes for the elderly, including the creation of Medicare, Medicaid and the Meals on Wheels program. After the 1971 conference, Congress increased Social Security benefits by 20 percent and began yearly cost-of-living increases to beneficiaries.

At Wednesday's workshops, delegates discussed 60 draft resolutions on such issues as Social Security, Medicare, medical research on aging, elder abuse, retirement, employment and discrimination.

They will take a final vote Friday on which recommendations will be sent to Congress and the administration. They also can propose new ones if they get support from at least 230, or 10 percent, of their fellow delegates.

Many delegates seemed less concerned with pushing for changes to Social Security than making sure it survives into the next century.

Delegate Frank Stella of Silver Spring, Md., proposed requiring the government to study how Social Security trust funds are invested, saying, "This should help restore the faith of the younger generations in Social Security."

Conference on Aging seeks assurances on Social Security

By Cassandra Burrell
ASSOCIATED PRESS WRITER

WASHINGTON — Hillary Rodham Clinton, calling Medicare and Medicaid "examples of government that works," exhorted delegates to the White House Conference on Aging today to help keep Congress from taking backwards steps on health reform.

The first lady joined a chorus of top Democrats accusing the Republicans of trying to cut the health lifeline for the elderly and poor to pay for tax cuts for the rich.

"We need to address the growth in federal health-care costs, but there is a right way and a wrong way to do that," said Mrs. Clinton, echoing points President Clinton himself made in kicking off the conference Wednesday.

The Republicans' still incomplete plans to seek savings of up to $400 billion from Medicare and Medicaid over seven years have reinvigorated the Clintons' voice about the need for health reforms, and they found a receptive audience at the Conference on Aging.

"Medicare and Medicaid are examples of government that works" and have lifted millions of seniors out of poverty, the first lady said. Any proposal must be judged on whether it goes "forwards or backwards" and makes care unaffordable for older Americans.

The delegates were preparing a raft of resolutions demanding the federal government renew its commitment to Social Security, Medicare and other programs.

"We need our Social Security," a California delegate said Wednesday. "They made a commitment back in 1934 (when it was created), and they should stick by it."

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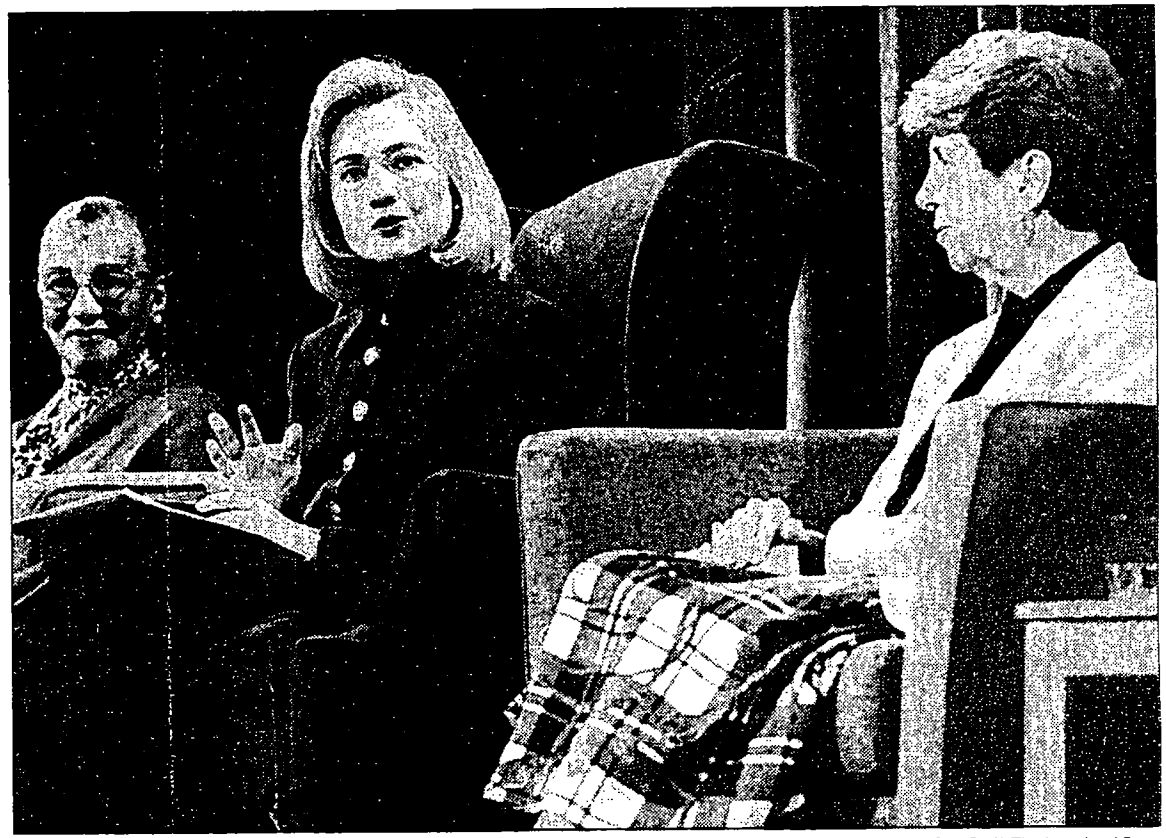
They will take a final vote Friday on which recommendations will be sent to Congress and the administration. They also can propose new ones if they get support from at least 260 delegates, or 10 percent.

Many delegates seemed less concerned with seeking changes than making sure Social Security survives into the next century.



DENIS PAQUIN/The Associated Press

Conference on Aging chat: *First lady Hillary Rodham Clinton, flanked by Cecilia Paulie of Manassas, Va., left, and Jane Burton of Midland Park, N.J., talks about the Medicare program at the White House Conference on Aging Thursday in Washington.*

Greenville, SC
NEWS
Greenville–Spartanburg
Met Area

Friday D 112,236

MAY 5, 1995

P4942

Conference on aging inspires delegates

Hoosiers visit White House to discuss range of issues

By PAUL GLADER
The Indianapolis News

Indianapolis delegates to the recent White House Conference on Aging are excited about progress made at the three-day meeting.

Eight Marion County representatives were among more than 2,200 delegates.

"A sea of humanity representing all ages, races and genders was there," said Sam Jones, president of the Indianapolis Urban League and a delegate. "There were teen-agers, veterans, disabled people and people from 13 foreign countries."

Delegates had plenty of work to do.

Previous White House conferences in 1961, 1971 and 1981 led to creation of senior legislation such as Medicare, Medicaid and the Older Americans Act of 1965.

Hoosier delegates agreed that maintaining these early social programs was the most important aspect of this session. They said the most important resolutions that will be submitted to the White House and Congress are:

- Social Security soundness.
- Integrity and reauthorization of the Older Americans Act.
- Preserving Medicaid.
- Dealing immediately with the future of Medicare.
- Preserving the advocacy functions under the Older Americans Act.

The resolutions came from brainstorming during meetings of senior groups across the nation.

"By the time the ideas and delegates reached Washington, they had been run through the mill very thoroughly," said Duane Etienne, president of the Central Indiana Council on Aging and a facilitator at the conference.

Grass-roots participation contributed to thousands of resolutions that will support the conference's theme, "America now and into the 21st century . . . Generations aging together with opportunity and dignity."

Sam Jones | Forest Handlon | David Wright

"There was some concern on how the elderly can help themselves by giving back to the younger generation," Etienne said.

"We tried to convey to young people that we are not trying to grab away from them, but we are all trying to work together," added Forest Handlon, president of United Senior Action for Central Indiana and a former state representative. "We tried to tell them that we are willing to make sacrifices."

While the conference focused on national-level policy, some delegates found ideas and encouragement for work in Indianapolis.

Jones cited Hillary Rodham Clinton's talk about the importance of mammograms for older women.

"She was adamant about taking action in our own communities. I believe women in my own community still feel they can't afford mammograms. I want to encourage breast cancer awareness," Jones said.

David Wright, a director at Acordia Senior Benefits, said the session also brought the Hoosiers closer together.

"The comradeship of the state delegation was very good," Wright said. "I got to know people that I worked with in the past but am just becoming close to."

Other Indianapolis delegates were Dr. Steve Rappaport, Earl Heath, Elmer Blankenship, Helen McCalment and Mary Jane Koch. Eleven other Hoosiers attended.

Indianapolis, IN
News
Indianapolis Met Area
D 93,188
Friday
MAY 19, 1995
N2528

Jamestown, NY
Post-Journal
Jamestown Met Area

Friday D 25,421

MAY 12, 1995

N4032

PRESS CLIPPINGS

'...It's a good year for that conference on aging...
I can't remember a year that's aged me more.'

Old and young are gathering to tackle issues facing seniors

Organizers: Fourth White House Conference on Aging 'critical'

By Debbie Cenziper and Jill Young Miller
Knight-Ridder News Service

FORT LAUDERDALE, Fla. — This will be no politician's junket, no hobnob gathering of the high-brow and elite.

The last few times a group of the nation's seniors got together, they devised recommendations that led to Medicare, Medicaid, the Older American's Act and increased Social Security benefits.

On Tuesday, for the first time in 14 years, delegates – more than 2,200 of them appointed by governors, legislators and the president – will once again converge in Washington, D.C., to find ways to improve the lives of older people.

And Florida, home to the country's highest percentage of senior residents, is expected to take on the role of national guinea pig.

"We're kind of the test-tube state," said Bentley Lipscomb, secretary of the state Department of Elder Affairs. "They'll be looking at us because Florida is 20 years ahead of the rest of the country in terms of our population of old people and the kinds of issues that we're facing. We'll serve as the testing ground."

Among the subjects on the Tuesday-through-Friday conference agenda: long-term care, Social Security reform, economic security, crime, housing and Alzheimer's disease. It will be the nation's fourth White House Conference on Aging, the last one of this century, attended this time around not only by seniors, but also by younger people.

"Today's child is tomorrow's elder," said Bob Blancato, conference executive director. "This is not a White House conference solely for the aged."

The delegates' recommendations will be used to influence national aging policy over the next decade. This year's conference is critical, organizers say, because a Republican-controlled Congress is considering cuts in social service programs while the number of seniors that rely on them soars.

Because of today's political climate, organizers say they do not expect major initiatives at this conference. Delegates instead will look at improving programs already in place, Blancato said.

About 6,000 people across the country turn 65 every day, according to national estimates, and by the year 2000, there will be 26 times as many people 85 and older as there were in 1990.

No matter what the government does, no matter how many new programs are created, delegate Carolyn Dorman worries about younger generations continuing to clash with senior citizens.

This problem often boils over in Florida, where the old and the young often feud about issues such as mandatory driving tests for seniors and the creation of a state income tax.

"We are a giving people, not a taking people," said Dorman, of Delray Beach. "I don't think the younger generations understand that."

Ontario, CA
INLAND VALLEY DAILY BULLETIN
Riverside – San Bernardino – Ont. Met Area
Monday
D 46,753
MAY 1, 1995
P1360

Message to aging: Take care of yourself

▶ The White House conference opens with the call that a healthy lifestyle can make the later years golden.

By Rachel L. Jones
Knight-Ridder Newspapers

WASHINGTON

Attention, American senior citizens: two strong messages are coming from Washington this week, aimed directly at you.

An ounce of prevention is worth billions in saved medical expenses. And people who commit to exercise and healthy living, even in old age, may avoid frailty and helplessness in their final years.

As the White House Conference on Aging began yesterday, legislators, delegates and researchers insisted that elderly Americans must take charge of their health earlier to avoid the decline and infirmity that are often part of aging.

In a report released yesterday, researchers estimated that, if American seniors committed to preventive health care and exercise over a five-year period, an estimated $260 billion in medical expenses could be saved.

Also, research in this week's Journal of the American Medical Association concludes that even short-term exercise can help reduce falls and fall-related injuries for seniors by building strength, mobility and confidence.

But most important, if dire predictions about the Medicare program's solvency hold true, conference delegates think a healthy lifestyle may be the only option for cash-strapped seniors — and the tidal wave of those who will turn 65 early next century.

The following therapies can help delay disease, Perry said:

- Hormone replacement therapy for post-menopausal women, which can bolster their resistance to heart disease and stroke, as well as help reduce bone-thinning osteoporosis.
- Strength training, even among frail people in their 90s and those who have never exercised before, has shown dramatic reversals in their loss of muscle, leading to improved balance, strength and mental outlook.

"Holding disease and disability at bay is our best hope for defusing this ticking time bomb of Medicare," said Sen. Tom Harkin, D-Iowa, at a joint news conference held by the American Federation for Aging Research and the Alliance for Aging Research. "It is a time bomb, and it will explode unless people decide to fight back and stay healthy."

In the report, "Putting Aging on Hold," researchers documented the importance of a healthy lifestyle, including regular exercise, preventive medicine and proper diet.

Health care numbers are staggering. According to the federal Health Care Financing Administration, by 2004 the cost of health care for people 65 and older will make up 50 percent of the total bill, which may exceed $2 trillion.

"It is indeed plausible, and in fact good public policy to pursue a 'strategy of delay' in combating the diseases of old age," said Daniel Perry, executive director of the Alliance for Aging Research, a private Washington-based group.

Those ailments include heart disease, diabetes, stroke, osteoporosis, hip fractures and arthritis. Perry said recent biomedical research shows these conditions can be delayed by up to five years.

- Behavioral modifications reversed bladder control problems in 60 percent of patients in one study without medications or surgery.

Researchers also say the elderly can lower another risk: the prospect of falling and fracturing a hip. It's estimated that 30 percent of people 65 and older have had falls, half of which resulted in serious injury, at a medical cost of about $4 billion annually.

Riverside, CA
PRESS-ENTERPRISE
Riverside-San Bernardino-Ont Met Area
Wednesday D 158,673
MAY 3, 1995
P1406

Conferees Defend Social Security, Medicare

At Meeting on Aging, Seniors Oppose Big Program Cuts, Suggest Ways to 'Give Something Back'

By Spencer Rich
Washington Post Staff Writer

The White House Conference on Aging yesterday overwhelmingly endorsed continuing and strengthening the Medicare and Social Security programs, opposing both a means test for Social Security and "arbitrary" and "massive" Medicare cuts of the scope being discussed by congressional Republican leaders.

"The message is very clear—unequivocal reaffirmation of support across the generations for Social Security and Medicare and against drastic one-sided cuts," said Bill Ritz, spokesman for the National Committee to Preserve Social Security and Medicare, after 2,202 delegates to the conference voted on dozens of policy resolutions.

In endorsing 50 of the resolutions as the conference ended, delegates, some of whom were appointed by the White House or White House-chosen conference organizers, generally backed positions in favor of preserving the chief programs of the New Deal and Great Society eras—not necessarily with no changes but without huge cuts and alterations.

"This is about preserving what we have," said Patrick Burns of the National Council of Senior Citizens.

The White House and congressional Republicans are now battling over Medicare, which program trustees say faces bankruptcy in seven years. The AFL-CIO said the conference resolutions endorse President Clinton's declaration to the conference Wednesday that "the right way to strengthen Medicare and Medicaid is by containing costs as part of a sensible, overall health care reform plan" for both the public and private sectors, not by huge cuts in Medicare and Medicaid that shift costs to the elderly and poor.

A small conservative group called United Seniors Association said "the president and his liberals succeeded in turning a potentially helpful conference on aging into a gathering of handpicked cronies."

Aside from the resolutions on Social Security (which received the most votes, 1,595) and Medicare (1,413 votes), other top vote-getting resolutions called for reauthorizing Older Americans Act provisions that provide millions of meals, home visits, transportation services, legal assistance and other benefits to the nation's elderly.

The conference also opposed Republican-backed proposals to cut federal spending growth on Medicaid, the health insurance program for the poor and the disabled, by ending its status as an entitlement program and converting it into a block grant program. Under block grants, Medicaid would be run totally by the states, which would then have power to exclude some people now eligible under federal rules.

While most public attention at the conference focused on politically charged issues such as the future of Medicare, much of the activity at this conference focused on something a bit more personal: how the elderly can help themselves and also, as Ann Fishman of New Orleans put it at a panel discussion on work, how the elderly can "give something back" to the nation and younger generations.

"Otherwise they're going to think of us as greedy geezers, and we're not," said Fishman, as the panel wrangled over the precise wording of a resolution to encourage training older workers to upgrade their skills, making flexible work arrangements and expanding community-service work programs for low-income elderly under the Older Americans Act. The resolution was endorsed by the conference.

Participants in the work panel and others were talking not only about employment of the elderly, but also about volunteering in the community, taking care of their bodies and not passively waiting for all physical problems to be solved by doctors, taking care of other people's children, addressing grandparenting problems for people who are raising their children's children but lack the legal rights to do it properly, and becoming mentors to youths in their communities.

"Check into your local McDonald's and see who's behind the counter" if you want to see lots of older people who are holding down everyday jobs and are happy to do it, declared Paul Wysocki at the work panel.

Studies prepared for the conference show that 5.4 million people age 55 or over who aren't employed "are willing and able" but can't find jobs for one reason or another.

"Good workers don't want to quit," said Wysocki, but are often forced to do so as they age or become disabled. Wysocki himself is a good example.

Born with a genetic condition called osteogenesis imperfecta—"it's called brittle bones," he said—Wysocki gets around in a motorized chair. But while he has trouble with his bones, there is nothing wrong with his brain. Now 57, he worked as a mechanical engineer for a giant aircraft company for many years, and then began a second career working half-time as executive director of the Washington State Rehabilitation Advisory Council.

He said a serious problem is that "a lot of older workers become disabled, and they are encouraged to take disability retirement instead of going for vocational rehabilitation."

Elsewhere, there was considerable discussion of a report issued by health research groups that said scientists believe that with an additional research investment of $200 million a year, it may soon be possible to retard for several years the onset and worsening of illnesses that strike the elderly. That may possibly save up to $260 billion a year in health outlays for Alzheimer's, cardiovascular disease, incontinence, hip fractures and the like. The conference endorsed resolutions to provide added research funds.

In a related development, the General Accounting Office, in a report to Sen. Tom Harkin (D-Iowa), said that for $20 million, Medicare could install high-tech computer technology that would catch $3.9 billion over five years in improper claims for payments.

Washington, DC
Post
Washington DC Metro Area
Saturday
D 852,262
MAY 6, 1995

White House to plot strategy for graying of America

Two reports paint vastly different portraits of the nation's fast-growing senior-citizen population.

By Rachel L. Jones
KNIGHT-RIDDER WASHINGTON BUREAU

WASHINGTON

The 2,500 delegates attending this week's White House Conference on Aging will be wrangling over more than traditional health-care and pension issues.

Those two items will be priorities for the meeting, billed as a strategy session to prepare elderly Americans for the year 2000 and beyond. But an emerging portrait of the successes and challenges of those over 65 defies any narrow, stereotypical focus.

Two reports released last week draw sharply contrasting views of America's senior citizens, pitting an image of the prosperous, active elderly against an image of those who are financially struggling.

For example, while statistics show that a record number of married couples with good pensions and savings have leisurely, enjoyable retirements, many single older women are ravaged by poverty and have no way out.

And though life expectancy for seniors is at an all-time high, soaring health-care costs can make those extra years a costly burden for many seniors.

Those contrasts illustrate the challenges that will be addressed at the conference. And they hint at changes for the next century, when the proportion of Americans who are 65 and older — now one in eight — is expected to rise to roughly one in five.

Fast-growing group enjoys affluence of life's success

No other age group is growing as fast as those over 65, one report said, or demanding as much from government and exerting as much political power.

That aging of America is one of "the most important demographic developments of the 20th century," the Population Reference Bureau, a private research company, said in its report, "Older Americans in the 1990s and Beyond."

"The story of American seniors is very much an American success story," said demographer Judith Treas, professor of sociology at the University of California, Irvine, who wrote the report. "By and large, they're better off, more educated and have more assets than any previous generation."

The study, based primarily on Census Bureau information but including a wide range of social trend and economic data, shows that for financially secure, healthy senior citizens, the end of the 20th century may be the best years of their lives.

Life expectancy has increased, for men as well as women, Census statistics show. A 65-year-old can look forward to, on average, another 17.3 more years of life.

Seniors also have substantial political clout. Seventy-eight percent of people 65 and older said they registered to vote in the 1992 presidential election, the highest registration rate for any age group. One in five voters in that election was 65 or older.

Many seniors today are clearly the beneficiary of the Social Security program, which marks its 60th anniversary this year, Treas said. It has given them a dependable cushion for their retirements, she said, and accounts for two of every five dollars older Americans receive.

But though poverty is not as rampant among seniors as it was 40 years ago, Treas says, it's still a problem.

Not all American seniors are living out golden years

Twelve percent of all seniors live in poverty, according to statistics, including 28 percent of black and 21 percent of Hispanic seniors.

Though much of Treas' study holds a positive outlook for seniors, she agreed with the findings of the Older Women's League study, also released last week, describing women as the ultimate symbol of senior poverty.

"The Path to Poverty: An Analysis of Women's Retirement Income," asserts that many elderly women are trapped by biases in retirement income programs, and the often sketchy job history they've had because of family obligations.

One in four senior women lives at or near the poverty level, the report found.

Referring to Social Security, pensions and savings as the "three-legged stool of U.S. retirement policy," the president of the Older Women's League, Johnetta Marshall, said its legs simply aren't strong enough.

"For too many women, the path to poverty begins the first day c work in low-wage, no-benefit jobs, Marshall said. "It constitutes a na tional disgrace and a compellin mandate for change."

The study found that 92 percen of older women receive Social Secu rity retirement benefits of som kind, with private pensions as th second major source of their in come. But about one-third of olde men get private pensions at an aver age of $7,486 a year, and only 1 percent of women receive them, a an average of $3,940.

Preventive health care to be topic of conversation

Because of such statistics, the White House conference will be dominated by the issues of retire ment and health care, said its direc tor, Robert Blancato.

Comprehensive health care will be the No. 1 issue, he said. But dele gates realize the tight economic re alities, he said, and will stress pre vention of health problems rather than call for new programs.

"We'll use our energies to look at what's working and then build on it," Blancato said. "We'll be trying to make programs stronger and more responsive."

Tallahassee, FL
Democrat
Tallahassee Met Area

Monday D 67,695

MAY 1, 1995

Clinton Presidential Records
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AMERICA NOW and INTO THE 21ST CENTURY:

GENERATIONS AGING TOGETHER

WITH INDEPENDENCE, OPPORTUNITY AND DIGNITY.

PROGRAM

1995 WHITE HOUSE CONFERENCE ON AGING

WASHINGTON, D.C.

MAY 2-5, 1995

NEWS FROM
THE WHITE HOUSE CONFERENCE ON AGING

FOR IMMEDIATE RELEASE
May 9, 1995

Contact: Bryan Preston
202-245-0105

DELEGATES OPPOSE ARBITRARY MEDICARE CUTS

Responding to the growing national debate, delegates to the 1995 White House Conference on Aging approved a resolution opposing arbitrary cuts in Medicare. Delegates also voted for a resolution which opposes block granting of the Medicaid program as well resolutions which preserve Social Security and the Older Americans Act.

Other resolutions adopted by delegates call for universal health care coverage and further development of home and community based long-term care services. Increased funding for medical research was also a priority. Responding to changes in family structures, the delegates adopted resolutions which call for greater assistance for grandparents who serve as primary caregivers for their grandchildren -- a first in White House Conference history. These items were among 50 resolutions adopted by delegates who were selected primarily by Governors and Members of Congress. The 1995 White House Conference on Aging was the fourth in U.S. history, the first since 1981 and the last of the 20th century. The Conference was held to develop resolutions which will influence our nation's aging policies over the next ten years.

Post-conference activities will focus on the implementation of adopted resolutions and will be held nationally throughout the coming year. A final conference report is due to Congress within 270 days.

The ten resolutions receiving the most votes:

- Keeping Social Security Sound for Now and for the Future
- Preserving the Integrity of the Older Americans Act
- Preserving the Nature of Medicaid
- Reauthorization of the Older Americans Act
- Ensuring the Future of the Medicare Program
- Increase Funding for Alzheimer Research
- Preserving Advocacy Functions under the Older Americans Act
- Ensuring the Availability of a Broad Spectrum of Services
- Financing and Providing Long-Term Care and Services
- Acknowledging the Contribution of Older Volunteers

-end-

1995 WHITE HOUSE CONFERENCE ON AGING
ADOPTED RESOLUTIONS INTRODUCED BY DELEGATES

# of Votes*	Resolution Title (Resolution #)
1414	Reauthorization of the Older Americans Act (121)
1413	Alzheimer Research (70)
1217	Meeting Mental Health Needs (65)
1212	Long-Term Care Financing (82)
1186	Social Security/Entitlements (78)
1181	Protecting Medicare and Medicaid (145)
1156	Comprehensive Health Care (77)
1106	Need to Preserve and Expand Elderly Housing (80)
1080	Legal Assistance (83)
1043	Income Security (79)

* - out of a possible 1907 votes

1995 WHITE HOUSE CONFERENCE ON AGING
ADOPTED RESOLUTIONS FROM PRE-CONFERENCE DRAFT RESOLUTIONS (IRDS RESOLUTIONS)

# of Votes*	Resolution Title (Resolution #)
1595	Keeping Social Security Sound for Now and for the Future (7.1)
1576	Preserving the Integrity of the Older Americans Act (4.7)
1438	Preserving the Nature of Medicaid (4.2)
1413	Ensuring the Future of the Medicare Program (4.1)
1388	Preserving Advocacy Functions under the Older Americans Act (4.8)
1385	Ensuring the Availability of a broad spectrum of services (3.1)
1374	Financing and Providing Long-Term Care and Services (3.2)
1360	Acknowledging the Contribution of Older Volunteers (20.1)
1323	Assuming Personal Responsibility for the State of One's Health (1.1)
1302	Strengthening the Federal Role in Building and Sustaining a Well-Trained Work Force Grounded in Geriatric and Gerontological Education (5.3)
1296	Reforming the Health Care System (2.4)
1291	Expanding, Coordinating, and Targeting Necessary Services (16.1)
1245	Expanding the Coverage of Existing Food Programs (9.1)
1204	Promoting Innovative Strategies to Encourage new Models of Supportive Housing, Particularly Housing Which Facilitates Long-term Care Services (14.2)
1200	Maintaining Personal Choice and Autonomy (2.1)
1199	Preventing Crimes Against Older Persons (17.1)
1197	Prevention/Wellness Throughout One's Lifespan (1.2)
1185	Preventing Elder Abuse, Exploitation and Neglect (17.2)
1177	Providing Services in a Full range of Locations that Encompasses: Institutional Care; Home Care/Foster Home Care; Community-Based Services (4.4)
1175	Expanding Training and Employment Opportunities for Older Workers (6.2)
1171	Increasing Federal Funding for Research in the Areas of the Mechanisms of Aging, Diseases of Older People, Long-Term Care, Systems and Services Research, and Special Populations (5.1)
1168	Developing Alternative Options for Funding Long-Term Care (4.6)
1157	Designing Housing to Maximize Independence (12.1)
1142	Providing Oversight and Ensuring Pension Solvency, Portability, and Earlier Vestment (8.1)
1136	Support for Caregivers (3.3)
1128	Setting Ground Rules for Guardianship (22.1)
1121	Enhancing Community Participation (21.1)
1116	Ensuring the Availability of Appropriate Care, Services, and Treatment (2.3)
1090	Providing Health Care Coverage that Addresses Basic Needs, Prevention, and Chronic Disease Concerns (4.3)
1059	Encouraging Policies that Support and Reward the Development of Suitable and Safe Communities (14.1)
1053	Ensuring Quality Care, Services and Treatment (2.2)
1043	Meeting Mental Health Needs (21.2)
1039	Expanding Programs to Assess and Address Malnutrition (9.3)
1038	Maximizing Transportation Choices (15.3)
1036	Promoting Positive Images of Aging by Sensitizing Society to the Value of Older Adults (19.1)
1030	Addressing Issues Related to Grandparents Raising Grandchildren (20.3)
1029	Targeting Social Security Benefits for Frail Elderly Women (7.3)
1019	Enforcing Laws Against Age Discrimination (11.1)
1008	Encouraging Development and Ensuring Implementation of Advance Directives (18.1)
997	Advocating for Children (20.2)

* - out of a possible 2002 votes

NEWS FROM
THE WHITE HOUSE CONFERENCE ON AGING

FOR IMMEDIATE RELEASE
May 9, 1995

Contact: Bryan Preston
202-245-0105

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AARP NEWS

For further inquiry, contact American Association of Retired Persons • Communications Division
601 E Street, N.W. • Washington, D.C. 20049 • (202) 434-2560

For Immediate Release
May 5, 1995

Contact: Tom Otwell/ Christine Kirby
202/ 434 -2560

AARP PRAISES 1995 WHITE HOUSE CONFERENCE ON AGING SAYS POLICY-MAKERS MUST FOCUS ON ISSUES AFFECTING AMERICANS AS THEY AGE

Washington, DC -- The American Association of Retired Persons (AARP) today applauded the White House Conference on Aging (WHCOA) for focusing the nation on issues that affect Americans as they age.

"Americans are living longer, healthier lives," AARP Executive Director Horace B. Deets said. "AARP recognizes the importance of participating in a conference that examines the diversity of issues facing Americans.

"The greatest concern of many Americans is having access to quality health care so that they can stay fit and healthy in their later years," Deets said. "That is why AARP remains firmly committed to maintaining the integrity and solvency of the Medicare program.

"Medicare is in critical condition," Deets said. "It is essential that those interested in reviving Medicare put aside partisanship and work towards finding true solutions to the out-of-control health care costs that are driving the growth of Medicare.

"The association is encouraged that many congressional leaders have already stated that Medicare needs to be fixed in order to preserve the system for older and disabled Americans, rather than as a tool to balance the budget," Deets said.

-more-

"Medicaid is also of great importance to disabled Americans of all ages," Deets said. "AARP is pledged to safeguarding this essential family protection program.

"We look forward to working with Congress as we try to find ways to ensure that the Medicare and Medicaid programs provide quality service to our children and grandchildren."

The White House Conference on Aging addressed a wide variety of issues, ranging from the urgent need for long-term care to seniors' only housing to nutritional needs of the elderly.

The AARP focused on seven key issues, representing its Policy Agenda for Aging in the 21st Century:

- Contain health-care costs system-wide and reform the health care system;
- Restore the long-term solvency of Social Security;
- Increase work options and national savings, both public and private;
- Develop a system to provide long-term care services for all who need them regardless of age, income or disability;
- Invest in human capital through lifelong learning and education;
- Strengthen our communities and ensure communities have the services and supports they need to meet their needs; and,
- Provide for the most vulnerable in our society.

"It is our hope that the recommendations made here will prevent future generations from having to face the problems many older Americans do today," said Deets.

Horace B. Deets served as a member of the Resolutions and Policy Committee at the WHCOA. The conference was held May 2 - 5 in Washington DC.

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The Seniors Coalition

Protecting the Future You Have Earned

NEWS

FOR IMMEDIATE RELEASE
May 3, 1995

CONTACT: Vicki Lovett
703-591-0663

THE SENIORS COALITION TELLS PRESIDENT CLINTON TO "FIX MEDICARE"

The Seniors Coalition, concerned that President Clinton will help destroy Medicare by not squarely and fairly addressing it, strongly challenged him to use the White House Conference on Aging to fix what House Speaker Newt Gingrich calls "the greatest challenge facing senior Americans in the future."

Says Jake Hansen, vice president for government affairs, "We challenge the WHCOA to address Medicare in a positive, constructive and balanced way. Medicare will be bankrupt in six years. Hearing only one side and ignoring the problem will jeopardize the health of the 32 million seniors and 4 million disabled currently enrolled in the program. These people will be affected by any inaction or wrong action that results from this conference."

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The Seniors Coalition is a non-profit organization with more than two million members and supporters which represents the interests of senior citizens on a wide range of public issues. It accepts no taxpayer money.

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Contact: Vicki Lovett
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Paul Bramell, CEO
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Bramell has a background in the financial industry, with over 25 years in retail banking, marketing and business development. He was asked by Gov. Allen to serve as a delegate at the White House Conference on Aging.

Ambassador Max L. Friedersdorf
Ambassador Friedersdorf is a former Legislative Liaison in the White House for Presidents Nixon, Ford and Reagan. His most recent government post was Ambassador to the Conference on Disarmament in Geneva, Switzerland. He is a member of The Seniors Coalition's Board of Advisories.

Tax Fairness for Seniors

60 PLUS

Eliminate Double Taxation! Repeal Unfair Inheritance Taxes! Protecting the Rights of Senior Citizens.

FOR RELEASE:
On or After May 2, 1995

CONTACT: Matt Waters
(703) 807-2070

WHCoA: TRUMPED UP DOG AND PONY SHOW

WASHINGTON, D.C. -- The White House Conference on Aging has become "so politicized," according to one seniors' organization, that it's nothing more than "a dog and pony show" designed to push the liberals' big spending agenda with "only vague connections to issues of interest primarily to the elderly."

That characterization came as the fourth Aging conference commenced here. Others were held in 1961, 1971 and 1982.

60 Plus Association Chairman Jim Martin, head of a two-year-old conservative group representing 250,000 seniors, said the "deck is stacked" in favor of tax and spend advocates.

He said the American Association of Retired Persons, National Council of Seniors Citizens, National Council on Aging, National Committee to Preserve and Protect Social Security and Medicare, and Families USA have enough representatives on the policy and advisory committees, coupled with delegates selected by the White House, Health and Human Services Department and dozens of other liberal groups, it's clear the outcome has been predetermined.

"What's so outrageous," Martin observed, is that most of these "groups haven't spoken for the elderly in a very long time. They were strangely silent just last month when the Senior Citizens Equity Act passed the House, 246-188," a bill Martin called so "senior friendly" that it lifts the earnings limit from $11,280 to $30,000, "a low threshold that even candidate Clinton acknowledged should be raised. It also struck down the huge tax increase on Social Security benefits contained in the Clinton budget. AARP and the others sat on their hands and didn't lift a finger to help pass this obviously 'senior friendly' legislation."

Martin branded AARP "an insurance conglomerate, a Fortune 500-sized corporation, making so much money that it recently paid $135 million in disputed taxes owed on its 'for-profit' operations to avoid losing its postal subsidies. Speaking of 'non-profit,' how does AARP justify keeping enough reserves in its bank accounts to gross $48 million on interest alone in 1993? If you're a true non-profit, wouldn't you spend those funds lobbying on behalf of the elderly?

Martin said the "tale of the NCSC is even worse." Started for Seniors in 1961 with help from labor unions and the Democratic National Committee, a short time later, NCSC claimed it now "represented all segments of society."

The NCOA, a 45-year-old group, keeps a lower political profile, but its annual report notes it is one of four co-chairs representing some 200 advocacy groups. "Seniors' groups, you wonder? Not quite. The other chairs are the AARP, the Children's Welfare League of America and the Children's Defense Fund, real cradle to the grave big government groups."

Martin predicts that "the only proposals coming out of this 3-day conference will call for more government, thus more taxes, on all Americans. I'll be pleasantly surprised if the sum total of these pre-cooked resolutions doesn't call for massive expansion of government goods and services, not exactly what the voters had in mind last November."

-30-

Sen. Simpson launches investigation, May 25th.

when will NCSC be looked at?, the most Partisan of all -- 134 D's received their help in last two election cycles -- No R's.

	Tax dollars	% Backed
AARP --	$5.9 million	25%
NCSC --	68.7 million	96%
NCOIL --	41.1 million	91%

1655 N. Fort Myer Dr., #700 • Arlington, VA 22209 • Ph.(703)351-5251 • Fax(703)525-8841

Stand UP
For America's Working Families
AFL-CIO Department of Information • 202/637-5010
NEWS RELEASE

FOR IMMEDIATE RELEASE
May 5, 1995

CONTACT: Colleen O'Neill
202/637-5010

Support for Medicare and Medicaid Overwhelming

The AFL-CIO issued the following statement today upon the completion of the fourth White House Conference on Aging:

Delegates at the White House Conference on Aging have taken a significant step with the unqualified endorsement of the resolution to protect Medicare and Medicaid.

That action provides a ringing endorsement of President Clinton's plenary address to the conference Wednesday, in which he told delegates the right way to strengthen Medicare and Medicaid is by containing costs as part of a sensible, overall health care reform proposal that works for everyone.

Resolution 145 is the strongest resolution approved by the delegates that addresses the current health care debate.

The delegates' vote soundly repudiated Republican proposals to raise Medicare rates by $3,500 over the next seven years to pay for a tax cut for the wealthy, and to cut Medicare by as much as $300 billion.

The delegate-initiated Resolution 145 calls for opposing proposed massive cuts to Medicare and Medicaid; applying any savings as a result of health care reform to strengthening the programs and expanding coverage; prohibiting additional costs being placed on beneficiaries; maintaining quality, preserving choice of provider and opposing coercion into managed care plans; and prohibiting the use of savings in Medicare and Medicaid for tax cuts for well-off citizens.

# # #

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House
REPUBLICAN
Conference

Issue Brief

May 2, 1995

John Boehner
Chairman
8th District, Ohio

AGING CONFERENCE GIVES CLINTON DEMOCRATS MORE OPPORTUNITIES TO SCARE SENIORS

Today marks the beginning of the White House Conference on Aging. Liberal advocacy groups such as the American Association of Retired Persons (AARP) and the National Council of Senior Citizens (NCSC) were actively involved in hand picking delegates to the Conference. In fact, the executive directors for these two liberal advocacy groups serve on the Conference's 25-member policy committee.

The policy committee is also top heavy with liberal congressional Democrats. While only 2 elected Republicans serve on the policy committee (Senator Bill Cohen and Congresswoman Connie Morella), 3 Democrat senators, 2 Democrat congressmen, 2 former Democrat representatives (one of whom is the discredited Mary Rose Oakar), and 3 Clinton cabinet secretaries were appointed to the policy committee.

With its apparent tilt to the left, few will be surprised by the recommendations made by the White House Conference on Aging. The Clinton Administration can be expected to seize upon the recommendations to score political points with senior citizens, as well as divide the country by scaring senior citizens into wrongly believing that Republicans are eager to slash Social Security and Medicare. They have used these scare tactics before and, now with President Clinton desperate to appear relevant, they will shamelessly use them again.

Clinton Policies Hurt Older Americans

The Clinton Administration has tried to position itself as a defender of senior citizen interests. The Administration's policies, however, have been anything but favorable to older Americans.

- **Higher Taxes** - When the Clinton tax bill first passed the House in May 1993 with no support from Republicans, it taxed 85 percent of the Social Security benefits of seniors earning as little as $25,000 and levied a $500 energy tax on

all families – young and old. While the final tax bill did not include the onerous energy tax, it did raise taxes for Social Security beneficiaries earning more than $34,000 – a 70 percent income tax increase on Social Security benefits.

- **Working Seniors Burdened by Earnings Limit** - Candidate Bill Clinton promised to repeal the Social Security earnings limit that requires seniors who work between the ages of 65 and 69 to give up $1 in Social Security benefits for every $3 they earn above $11,280 (when FICA and federal taxes are taken into account, low-income seniors are hit with an effective marginal tax rate of almost 58 percent). The Administration now, however, only supports raising the earnings limit by $1,000.

- **ClintonCare Bad for Seniors' Health** - The Clinton-Gephardt government-run health care bill included $480 billion in Medicare savings and ultimately limited Medicare spending to an unrealistic zero real growth. No real growth in Medicare spending would have resulted in rationing health care for seniors and massive cost shifting.

The GOP Helps America's Seniors

The tax relief bill (H.R. 1215) approved by House Republicans provides help to our nation's seniors and restores benefits for seniors taken away by the Clinton Democrats.

- **Lowering Seniors' Tax Burdens** - Repeals over a 5-year period the Clinton tax increases on Social Security retirees;

- **Eliminating Penalties for Working Seniors** - Raises the $11,280 Social Security earnings limit to $30,000 over 5 years;

- **Ensuring Access to Long-Term Care** - Eases the financial drain on seniors and their families by making private long-term care insurance more readily available and allowing accelerated death benefits to be paid tax-free from life insurance policies for terminally or chronically ill individuals;

- **Caring for Parents at Home** - Provides a $500 tax credit to families caring for a dependent elderly parent.

- **Minimizing Taxes After Death** - Increases the estate and gift tax exemption to $750,000, which will allow seniors to pass on the family business or farm to their children without leaving them burdened with taxes.

In addition, House Republicans will balance the budget in 2002 without touching Social Security. Finally, the House has approved the Housing for Older Persons Act (H.R. 660). This bill protects senior citizen housing complexes from discrimination lawsuits by eliminating confusion about what actually constitutes seniors-only housing. Specifically, the seniors-only housing test is met if at least 80 percent of the units are occupied by at least one person age 55 or older.

Medicare Bankruptcy Just Around the Corner

Democrats Ignore Medicare Funding Crisis

The facts are in -- President Clinton's Medicare Board of Trustees, which includes 3 Clinton Cabinet members, says that Medicare will start running out of money next year and the trust fund reserves will be fully depleted by 2002. Once the reserves are exhausted, Medicare is prohibited from making payments for hospital or other trust-paid health services.

President Clinton is content to let that happen. For a year now, the Administration has known about the impending Medicare bankruptcy. Last year's Clinton Trustee report warned of the fiscal crisis facing Medicare, and the Administration has done nothing to address it. Pretending that everything is just fine, the President acted irresponsibly in proposing no Medicare changes in his FY '96 budget. And when pressed by Speaker Gingrich to be a part of the solution, the White House essentially said it wasn't interested in saving Medicare.

Senior citizens ought to be alarmed that President Clinton is ignoring the Medicare funding crisis. By abdicating its responsibility to be part of the solution to save Medicare from bankruptcy, the Clinton Administration prefers to: 1) saddle low- and middle-income families and employers with significantly higher Medicare payroll taxes; 2) impose higher premiums on senior citizens; and 3) squeeze health providers by lowering benefit reimbursements, resulting in cost shifting and the rationing of health care services to seniors. According to the Cato Institute, the 2.9 percent Medicare payroll tax would have to be raised 125 percent (an additional $725 tax hike on a $40,000 salary), and seniors would face a 300 percent increase in annual premiums.

The GOP on Medicare: Preserve, Protect, Improve

House Republicans want to honor their contract with older Americans by saving Medicare from bankruptcy. With Medicare on the verge of insolvency, there is no way the program can sustain its projected spending growth. This year alone, Medicare will cost $178 billion. Under current projections, CBO estimates that Medicare spending will increase to $345 billion in 2002 and to $458 billion in 2005. Medicare will spend

$1.867 trillion during the next 7 years, and $3.1 trillion during the next 10 years. Saving Medicare from bankruptcy will require transforming the program and slowing its annual 10-plus percent annual growth to about 5-6 percent per year – a rate that exceeds private-sector health care spending increases and inflation rate increases.

But saving Medicare should not be accomplished as part of the budget. It ought to be handled as a free-standing issue free of partisan politics. The Clinton Democrats, however, are already playing politics with Medicare by saying the GOP is cutting the program to pay for tax cuts for the rich. Wrong. Our middle-class tax cuts are already paid for. While there can be no denying that proposals to save Medicare have budget implications, the primary objective is to ensure that senior citizens will continue to have health care coverage. If Medicare goes bankrupt, that health care coverage disappears.

House Republicans will propose saving Medicare for older Americans by giving seniors more health care options, while allowing those who choose to remain in the current fee-for-service system. House Republicans will also eliminate waste and abuse in the program to ensure greater efficiency. Under the GOP proposals, more will be spent on Medicare from one year to the next, and the program will continue to grow greater than inflation. The difference in 2002 will be that Medicare won't go bankrupt, and seniors won't have to worry about their health care needs.

The Emperor (AARP) Has No Clothes

The AARP and other liberal senior citizen advocacy groups are gearing up to launch shrill attacks against Republican efforts to save Medicare. Rather than put forth proposals to save Medicare for its members, these groups so far have joined the Clinton Administration on the sidelines. In a letter to the AARP on April 3, 1995, Congressman Dan Miller writes: "I hoped that as an organization that claims to represent 33 million older Americans, the AARP would have specific recommendations to save Medicare." Congressman Miller is still waiting for a reply and the AARP's specific recommendations. It would seem that the White House Conference on Aging would provide the AARP and other senior citizen groups, as well as President Clinton, the ideal forum for addressing the Medicare crisis.

Who Is the AARP?

The AARP claims to represent the interests of 33 million senior citizens. Many members who join the AARP, however, are probably more interested in the group's discount travel, discount retail, prescription drug, insurance, and mutual fund services than its positions on senior and health issues. And when it comes to issues, the AARP is often at loggerheads with the members it claims to represent. For example, in 1988 the AARP endorsed a catastrophic health insurance bill that levied huge taxes

on seniors.

In addition, last year the group endorsed the Clinton-Gephardt-Mitchell health care bills, although one survey showed that 62 percent of AARP members opposed ClintonCare. But the AARP's support was simple to explain: It financially benefited from a provision of the Mitchell bill that exempted mail-order pharmaceutical firms from the cost controls placed on prescription drug benefits for senior citizens. But the prescription drug provisions were a poison pill for most older Americans. Those provisions would have delayed access to innovative drugs, discouraged development of new drugs, and led to rationing of pharmaceuticals.

The AARP's support for bigger government can partly be attributed to its own dependence on Uncle Sam. The liberal advocacy group received about $86 million in taxpayer funds in 1993 -- nearly one-fourth of its total income (membership dues account for only 41 percent of the AARP's revenue). The major sources of the group's federal funding comes from 2 programs: $49 million for the Senior Community Service Employment Program and at least $20 million for EPA's Senior Environmental Employment Program.

Who is the NCSC?

The National Council of Senior Citizens makes no effort to disguise its liberal leanings. According to *The Activists Almanac*, it serves as the "lobbying arm of retired members of a dozen AFL-CIO unions." Its PAC contributed only to Democrats during the 1991-92 election cycle. And it counted votes against NAFTA and for the striker replacement ban as "pro-senior."

Although the AARP is the grand-daddy of senior lobbies, the NCSC receives 96 percent of its support from U.S. taxpayers. Of its $71 million in total revenues for the year ending June 30, 1993, $68.7 million came courtesy of the federal government.

The Seniors Coalition

ISSUE PAPER

WHITE HOUSE CONFERENCE ON AGING
ISSUE ANALYSIS AND PRIORITIES

The preamble of the WHCOA proposed resolutions comments on the appropriate role of the government, but makes the point that what it outlines is a minimal role of government, not a maximal role:

> "The Federal government has a distinct role to play in areas such as (but not limited to):
> - Providing a safety net for the neediest persons of all ages;
> - Assisting State and local government; and
> - Ensuring health and safety.
>
> The Federal government has a role in providing funding and setting an overall policy framework for areas that transcend the capacities of State and local governments , for antipoverty efforts, for social insurance programs and for costly investments. It was agreed that government at all levels often needs to act as the facilitator and catalyst for action."

For many of us, such a statement as this is a definition of what we would consider an appropriate or maximum role for the Federal government. But for the vast majority of the steering committee members, and delegates, this statement represents a retreat from their true position, which is an increased role for the Federal government in the lives of families.

Because the WHCOA will focus heavily on health care issues and will be formulating strong statements of principle for Congress and the President, we have evaluated the health care resolutions in respect to their effect on the role of the Federal government in the lives of individuals.

HEALTH CARE

Resolution 1.1 *Assuming personal responsibility for the state of one's health.*
Analysis: Taking responsibility for one's health is vital to the improvement of our health care system for all Americans. While the resolves do not specifically call for a new government program, they could easily be interpreted to call for one, especially if strengthened during the IRDS.

Resolution 1.2 *Prevention/wellness throughout one's lifespan.*
Analysis: Educating individuals to take responsibility for their health is a noble goal toward the improvement of our health care system for all Americans. While the resolves do not specifically call for a new government program, they could easily be interpreted to call for one, especially if strengthened during the IRDS.

Resolution 2.1 *Maintaining personal choice and autonomy.*
Analysis: As a statement of principle, this resolution articulates the importance of choice in health care. However, it stresses that a wider variety of choices should be made available through Medicare and Medicaid. Unfortunately, the current financing structure of these systems could not sustain increased benefits. To call for more benefits outside a reform of these systems could increase the rate at which these systems will become insolvent.

Resolution 2.2 *Ensuring quality care, services, and treatment.*
Analysis: This resolution makes a good case for improving communication in delivering better quality care to seniors. It would be a stronger resolution if it emphasized patient choice and control over that of the care manager.

Resolution 2.3 *Ensuring the availability of appropriate care, services and treatment.*
Analysis: This resolution calls for universal coverage, which is a euphemism for government-controlled health care. Increasing access for seniors means expanding the health care marketplace, breaking down the barriers structurally inherent in the Medicare system and decreasing the role of the government in this process. The goal of this resolution would be better achieved by calling for universal access, options for Medicare recipients and less government intervention in the medical marketplace.

Resolution 2.4 *Reforming the health care system.*
Analysis: The arguments calling for the resolves in this resolution are somewhat exaggerated, which jeopardizes the credibility of the resolution. Essentially, this measure calls for more government regulation and control over the health care delivery system. It is the government's interference that has led us to this point, and increasing that control will not alleviate the pressure, nor will it solve the health care problems. A perfect example of how government regulation has destroys health care is the price controls in Medicare. The system is not going bankrupt because seniors are abusing the privilege of quality health care. Instead, our crisis can be directly attributed to the government's attempt (and inability) to control.

Resolution 3.1 *Ensuring the availability of a broad spectrum of services.*
Analysis: This resolution does a good job of pointing out the direction we need to move in the long term care field. This resolution could be made stronger by adding a resolved to encourage free-market development of long term care insurance products.

Resolution 3.2 *Financing and providing long term care and services.*
Analysis: Currently, Medicaid (the government) is the primary source for long term care in this country. As the aging population grows, we must move away from this trend. This resolution seeks to expand Medicaid in a way that the

private sector could, and is, expanding long term care services. If legislation were to be developed from the clauses of this resolution, it would reflect a huge government bureaucracy. Most of these tenets can be achieved without a new government program. Additionally, what is meant by "culturally-sensitive" in Resolved #8?

Resolution 3.3 *Support for caregivers.*
Analysis: This resolution reads very much like an exercise in political correctness. While it is true the American family is changing, there is no way the government can possibly create a system that would replace the family unit as the best decision-maker in determining long term health care needs. The health care system should be encouraged to provide adequate education and training to long term care providers through a free-market, community network - not through a government training program. Once again, what is meant by culturally sensitive?

Resolution 4.1 *Ensuring the future of the Medicare program.*
Analysis: This resolution does an adequate job of describing the success of the Medicare program since 1965, and the priority of continuing access to high quality care as part of any reform to ensure the system's solvency. There is reason to be wary of Resolved #9 which calls for new revenues to sustain the program. This is a thinly veiled mask for tax increases as well as a passing reference to restructuring benefits. There is not enough emphasis placed on looking for the necessary structural changes, including opt-outs, to salvage the system.

Resolution 4.2 *Preserving the nature of Medicaid*
Analysis: Medicaid as a system pits the young poor against the elderly for limited resources. However, since Medicaid is practically the only source of nursing home care, it is vital that we take a close look at Medicaid in terms of seniors. Currently, a senior in a nursing home must divest themselves to qualify for financing. But there are many loopholes that provide a mechanism whereby wealthy seniors are taking Medicaid by hiding their assets. We should focus on reforming the long term care market and tightening up the regulations on the qualification process. This would leave Medicaid to be what it truly is - a welfare program.

Resolution 4.3 *Providing health care coverage that addresses basic needs, prevention,*
and *chronic disease concerns.*
Analysis: Preventive care is essential to improving our health care system. As seniors live longer, their health care needs tend to be more chronic in nature. Prevention will not only increase the quality of this longer life, but reduce health care costs as well. However, this resolution calls essentially for a repeat of last year's Clinton health care plan. Community rating will

eventually mean devastation for seniors. As healthier, younger people drop out of the community rated market, premiums will go up for everyone remaining. Elimination of pre-existing conditions should be limited to open enrollment periods, otherwise people will be "buying insurance in the ambulance." A way to open up the market to many hard-to-insure individuals is to create high risk pools. Exploring affordable options is commendable, however encouraging HMOs as a primary option should be avoided. To date, HMOs have actually cost the Medicare system more money and this is not a situation that will improve Medicare's financial status.

Resolution 4.4 *Providing services in a full range of locations that encompasses: institutional care; home care/foster home care; community-based services.*

Analysis: Great approach as long as the resolution is not amended to state that government programs are the appropriate vehicle to accomplish these goals.

Resolution 4.5 *Encouraging a consumer-centered approach that provides choices for appropriate care.*

Analysis: This resolution underscores not only the responsibility of the individual in making choices that effect their care, but also makes the point of recognizing that barriers to personal choice must be eliminated.

Resolution 4.6 *Developing alternative options for funding long term care.*

Analysis: The House of Representatives has started down this path by passing the long term care tax credits in the Tax Relief and Spending Reduction Act. It is vital that we encourage the development of free-market long term care insurance and financing options such as medical IRAs. Additionally, as the states reform the Medicaid qualification process to ensure that the program is available for the financially needy, there must be private options already in place to assist the middle class senior population.

Resolution 4.7 *Preserving the integrity of the Older Americans Act.*

Analysis: While the OAA has been a necessary safety net, it, like countless other federal programs, could probably better serve seniors if administered at the local level. Many think tanks estimate that the federal government eats up 30 cents of every dollar for a federal program just for administration. To put this in context, the Social Security Administration can operate on less than 2% of its entire budget. There is no reason that the services of the OAA could not be provided on a State or local level. In fact, services would probably improve as local jurisdictions are better able to respond to local needs. The groups that want to preserve or strengthen the OAA at the federal level generally have a vested interest in keeping the money in Washington, DC.

Resolution 4.8 *Preserving the advocacy functions of the OAA.*

Analysis: Expanding the lobbying aspects of the OAA benefits the lobbyists and taxpayer-subsidized lobbying groups. It does not benefit senior in a personal manner. To expand the role and scope of the ombudsman office is a direct request for more government spending.

Resolution 5.1 *Increasing funding for research in the areas of long-term care, systems research, diseases of older people and special populations.*

Analysis: There is a real need to focus on research and development related to aging and special populations. However, simply calling for increased federal funding ignores some significant reform needed within the agencies responsible for these developments. A stronger resolution would focus on FDA reforms including, technological innovations, allowing hospitals and pharmaceutical companies more participation in the trial process, shortening the trial process or allowing for concurrent trials, and insulating the FDA from as much political manipulation as possible. Additionally, creating a bureaucracy to hand out federally approved long-term care training is an unnecessary burden on long term care providers, government agencies and patients. Standards and guidelines are fine, but in an age of patient determination and self-responsibility, this type of directive from Washington may be invasive, expensive and subject to political manipulation.

Resolution 5.2 *Training providers in knowledge, sensitivity, and ethnic diversity.*

Analysis: These are all noble aspirations as our aging population expands, but what role should the federal government play in this issue? A government-written and mandated sensitivity-training program could be offensive to many, demeaning to others, and eclipses the rights and responsibilities of individuals and their families to seek out and take advantage of the type of care they want.

Resolution 5.3 *Promoting geriatric and gerontological education.*

Analysis: Yes, we should encourage our universities and medical schools to expand their focus into the aging population. However, the incentives to do so should come from reforming the private market, thus creating economic incentives for these institutions to compete to be the best in aging issues. Government handouts will be costly to taxpayers and can be utilized for services other than the programs for which they are intended.

Fix Medicare.

Medicare Part A, otherwise known as the hospital insurance (HI) program will soon face bankruptcy — unless action is taken quickly.

- Medicare Part A pays for inpatient hospital care and other related care for those age 65 and over, and for the long-term disabled.

- Simply ignoring the problem jeopardizes the health of the 32 million seniors and 4 million disabled currently enrolled in the program.

- Under the Trustee's intermediate assumptions in their 1995 report, the trust fund ratio is projected to be exhausted in 2002. Under the high cost and low cost assumptions, the fund would be exhausted in 2001 or 2006, respectively.

- Medicare does not have the ability to borrow more money. Once Medicare goes bankrupt, that's it. No more Medicare protection for America's seniors!

- Simple quick fixes won't work. The whole system must be reformed. According to an April 1995 report issued by the Social Security and Medicare Boards of Trustees, "The Medicare program is clearly unsustainable in its present form."

- The Trustees aren't just crying wolf to embarrass President Clinton. In fact, four out of the five Trustees are the President's own political appointees (Shirley Chater, Commissioner of Social Security, Robert B. Reich, Secretary of Labor, Robert E. Rubin, and Secretary of the Treasury, Donna E. Shalala, Secretary of Health and Human Services).

Produced by The Seniors Coalition
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