HEALTH – Overview

TO: Bruce R., Gene S., Eric L., Joel J.
FROM: Chris J.
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Attached is the current draft of our press backup paper, which illustrates our longstanding commitment to our high priority health care issues and the bipartisan support that exists for these initiatives. This should help validate our position that the time for change is now.

I thought that this might be helpful for your discussions on tomorrow's speech. We are working on similar charts for Medicare and CHIP. These will probably be a little bit shorter, since there has been less Congressional activity on these issues.

One last point – we really need to make sure that the President's speech emphasizes that the Patients Bill of Rights shouldn't be weighed down with superfluous and potentially harmful provisions that will reduce its chances of passage. A statement by the President to this effect will help our Democrats and Republican allies make their case to the Republican leadership.

Please call with questions or comments.

DRAFT: PRESIDENT CLINTON'S HEALTH CARE CHECKLIST

POLICY	ISSUE	ADMINISTRATION ACTION	LEGISLATIVE STATUS
PATIENTS BILL OF RIGHTS	Tens of millions of Americans in managed care have wholly inadequate patient protections that cannot be addressed at the state level because of limited jurisdiction. These Americans do not have the right to see a specialist, to receive emergency room care when necessary, to appeal the decisions of managed care plans, and to hold health plans accountable for decisions that harm patients.	**1996** President announced intention to establish a Health Care Quality Commission. **1997** President accepted the Quality Commission's recommendations and called on the Congress to pass a Patients Bill of Rights. **1998** President directed Federal health plans, covering 85 million Americans, to implement the patients' bill of rights and called upon Congress to act in the State of the Union. **1999** President reiterated his call for the Congress to act on the Patients Bill of Rights in the State of the Union and endorsed the Norwood-Dingell bill, which provides real, enforceable protections to all Americans in all health plans.	**1997 and 1998** Congress held hearings on managed care reform in both the Senate and the House. The House passed a bill introduced by Representative Gingrich (R-GA) which included inadequate patient protections that passed 216 to 210. The Senate leadership would not allow a vote on the bill. **1999** The Senate passed a substandard bill that the New York Times derided as "wrongheaded...the Republicans chose to protect insurers, health maintenance organizations, and businesses at the expense of patients." Senator Chafee (R-RI) called the Senate bill deficient and stated that "The American people deserve better." The Norwood-Dingell bill was introduced and endorsed by the AMA, over 200 health care provider organizations, and a bipartisan coalition of House members assuring a majority if brought to a vote. Representative Barr (R-GA) stated that the Norwood-Dingell bill "truly puts the rights of patients first...[and] ensures the bottom line does not receive more attention than the health and welfare of individual patients."

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MEDICAL RECORDS PRIVACY	Rapid changes in the way that health care is provided, documented, and paid for has raised new issues about the privacy and confidentiality of medical information. There are inadequate protections for the use and disclosure of health information, creating potential breaches of confidentiality. It has been reported that fearing such breaches of confidentiality, 20 percent of patients sometimes withhold critical information from their health care providers because they are worried about the unauthorized use of their private medical records.	**1996** President signed the Health Insurance Portability and Accountability Act into law, establishing a statutory deadline of 8/21/99 for the Congress to pass medical records privacy legislation. **1997** HHS submitted recommendations to Congress for strong medical records privacy legislation that include: preventing the disclosure of personally identifiable health care information for non-health purposes only; prohibiting the use of information without either patient authorization or a clear legal basis; ensuring that individuals how their records are used; and balancing protections with public health, research, and efforts to eliminate health care fraud and other unlawful activities. **1998** HHS released proposed regulations establishing new standards for the security of electronic medical records. However, further regulation is necessary to protect the privacy of medical records. **1999** President urged the Congress to pass strong medical records privacy legislation in the State of the Union. Today, the President announced that the Administration will release a regulation on medical privacy in October.	**1997 and 1998** Bills introduced by Jeffords (R-VT), Dodd (D-CT), Kennedy (D-MA), Leahy (D-VT) and Bennett (R-UT). **1999** Hearings held in the Health, Education, Labor, and Pension Committee. Bills from 1998 re-introduced. Representatives Markey (D-MA), Cardin (D-MD), and Thomas (R-CA) have pledged to work together to develop a proposal that can receive bipartisan support. Senator Jeffords (R-VT) stated that it was critically important to "establish strong and effective mechanisms to protect against the unauthorized and inappropriate use of protected health information." He announced his intention to bring legislation to a markup this fall. Representative Roukema (R-NJ) stated "The issue of privacy, more comprehensive [protections], will have to be addressed by this Congress across the board. I want to be part of that project." Senator Bennett (R-UT) stated "Clearly, the time has come to enact comprehensive, strong, Federal standards that mandate the protection of individual health information."

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THE WORK INCENTIVES IMPROVEMENT ACT **(Jeffords-Kennedy-Roth-Moynihan)**	During the Clinton-Gore Administration, unemployment has dropped to a 29-year low. However, among working-age adults with disabilities, the unemployment rate is nearly 75 percent. People with disabilities can bring tremendous energy and talent to the American workforce; yet outdated, institutional barriers often limit their ability to work. Under current law, people with disabilities often become ineligible for Medicaid or Medicare if they work. This means that many people with disabilities are put in the untenable position of choosing between health care coverage and work.	1998 President established a National Task Force on Employment of Adults with Disabilities to create a coordinated national policy to increase employment of adults with disabilities. President accepted the Task Force's final report, which included the recommendation that the Administration promote proposals allowing people with disabilities to retain their public health insurance when they return to work. He also endorsed the Work Incentives Improvement Act introduced by Senators Jeffords and Kennedy. 1999 President announced in early January that he included Work Incentives Improvement Act in his FY 2000 budget urged the Congress to pass it in his 1999 State of the Union address.	1998 Senator Jeffords (R-VT) and Kennedy (D-MA) introduced the Work Incentives Improvement Act. Hearings were held by the Finance Committee. 1999 In response to the President's statement of support, Senators Jeffords (R-VT), Kennedy (D-MA), Roth (R-DE), and Moynihan (D-NY) reintroduced the Work Incentives Improvement Act in early January. Senator Jeffords stated "We have a simple goal with this legislation: helping Americans with disabilities go to work." Senator Roth stated that "...this combination of health care and job assistance will help disabled Americans succeed in the workplace... our society will be enriched by... people with disabilities eager to go to work." The Work Incentives Improvement Act was voted out of the Finance Committee by a 16 to 2 vote on 3/4/99 and was voted out of the Senate (99 to 0) on 6/16/99. Representatives Lazio (R-NY), Waxman (D-CA), Bliley (R-VA), and Dingell (D-MA), and 231 cosponsors introduced the companion bill, which passed out of the Commerce Committee by a unanimous voice vote on 5/19/99. Representative Lazio stated "Millions of Americans are waiting eagerly to...pursue the American Dream. The Work Incentives Improvement Act will enable them to do just that."

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LONG TERM CARE	Over five million Americans have significant limitations due to illness or disability and thus require long-term care. However, the cost of long term care is often untenable for some families. Recent studies have found that services like respite care can relieve caregiver stress and delay nursing home entry, and that support for families of Alzheimer's disease patients can delay institutionalization for as long as a year. The aging of Americans will only increase the need for quality long-term care options. The number of people 85 years or older, nearly half of whom need assistance with everyday activities, will grow from 4.0 to 8.4 million by 2030. The number of Americans age 65 years or older will double by that time, from 34.3 to 69.4 million.	1999 President announced in early January that the following proposals will be in the FY 2000 budget: TAX CREDIT FOR CAREGIVERS. Invests $5.5 billion over 5 years to provide a $100 tax credit to over 2 million of Americans with long-term care needs or the family members who care for them. NATIONAL FAMILY CAREGIVER PROGRAM. Invests $625 million over 5 years in programs that support families who care for elderly relatives with chronic illnesses or disabilities. PRIVATE INSURANCE FOR FEDERAL EMPLOYEES. Allows OPM to offer non-subsidized, quality private long-term care insurance to all federal employees, retirees, and their families at group rates for an investment of $15 million over 5 years. He also challenged Congress to pass these proposals in the State of the Union.	1999 Representative English (R-PA) introduced a long term care tax credit. Representative Johnson did the same as part of a larger bill on long term care. Senator Roth (R-DE) stated that "The Administration's long term care tax credit proposal is a good first step in helping families... care for elderly or disabled parents." Representative Thomas (R-CA) added that "This...initiative the President has adopted can make a difference." Senator Grassley (R-IA) introduced the National Family Caregiver Program. Grassley stated that "The vast majority of family caregivers...pay a toll with their financial resources, at work, physically, and emotionally. The program...gives family caregivers some well-deserved help." Versions of the President's proposal to provide long term care insurance to Federal employees were introduced by Representatives Cummings (D-MD), Scarborough (R-FL), and Morella (R-MD), and Senators Mikulski (D-MD) and Warner (R-VA) throughout the year. Congresswoman Morella said "The profound need for long-term care insurance is clear."

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IMPROVING ACCESS TO HEALTH CARE	NIH research acquires new knowledge to help prevent, detect, diagnose, and treat disease and disability, from the rarest genetic disorder to the common cold. NIH grantees are located in every State in the country.	**1998** President committed to increasing the NIH budget by 50 percent over the next 5 years and signed into law a $2 billion down payment towards meeting that goal for the 1999 budget. **1999** The President's budget invests $345 million above last year's funding levels in National Institutes of Health research funds.	**1999** Although the Labor-HHS Appropriations bills are currently stalled in Congress, there is bipartisan recognition of the importance of biomedical research. Representative Porter (R-IL) stated that "biomedical research must be one of Congress's highest priorities in allocating scarce federal funding."
	More than 22 percent of adults experience a mental disorder. Among them, 5.5 million Americans experience severe mental illnesses, such as schizophrenia, bipolar disorder, and severe depression, which can be as debilitating as chronic heart disease or diabetes.	**1999** The President's budget invests an additional $70 million, for a total of $359 million, in the Mental Health Block Grant program in order to increase access to prevention and treatment services.	**1999** Although the Labor-HHS Appropriations bills are currently stalled in Congress, there is bipartisan recognition of the importance of expanding mental health services. Senator Frist (R-TN) stated "By improving mental health and drug abuse services for children and families and helping our communities respond to emergencies, we can better treat, and hopefully prevent, addiction, mental illness and violence before these problems result in tragedy."
	The IHS currently provides health services to approximately 1.5 million American Indians and Alaska Natives who belong to more than 557 Federally recognized tribes in 34 states.	**1999** The President's budget increases the current funding level by $170 million to: expand health care to 1.4 million people; construct additional health facilities; and finance an additional 100 public health nurses for outreach.	**1999** Although the Labor-HHS Appropriations bills are currently stalled in Congress, there is bipartisan recognition of the importance of expanding services to Native Americans. [still searching for quote]