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HEADLINE: Gore: 'We Must and We Can Move Toward Access to Affordable, Quality
Health Care for Every American Family'

BYLINE: Lou Waters, William Schneider

HIGHLIGHT: Vice President Al Gore gives a major policy speech in Los Angeles on
managed care following George Bush's education policy speech of last Thursday,
talking about ensuring rights for patients, expanding access to prevention and
wellness programs, making progress in new research by protecting patients,
strengthening care for the nation's seniors and working towards the goal of
ensuring all Americans have access to quality health care coverage.

BODY:

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UPDATED.

LOU WATERS, CNN ANCHOR: And now the vice president of the United States in
Los Angeles about to offer a wide-ranging package of proposals aimed at bringing
millions of uninsured Americans into the health care system and improving
coverage for those already in it.

(JOINED IN PROGRESS)

ALBERT GORE, VICE PRESIDENT OF THE UNITED STATES OF AMERICA: ... Daniel (ph)
and Mary (ph) and Samuel (ph) a little bit earlier. Daniel's starting the ninth
grade tomorrow in a new school, and Mary is in the sixth grade, right? Sixth
grade and on a different school year schedule. She started back in July. And
Samuel just started the third grade, and we were hearing all about some of the
kids in his class.

And their dad, Evelyn's (ph) husband Jose (ph), is a shift manager at a local

LEADER -
TIME -
of Speech

business, and they just had some time off as a family. He had to be there on the job. And Evelyn is training to get a better job. This is the kind of working family that represents the future of the United States.

Is it back on now? Is that one on? Is that one on? There. That's why they have backups.

(LAUGHTER)

This family is the kind of working families, I was just saying, that represents the future of the United States of America. And the challenges that Evelyn told us about are the ones that I'm going to address in this speech here today.

I want to thank Bill Nost (ph), the CEO of Children's Hospital who leads such terrific work here. I'm honored to have with us today Congressman Xavier Bicerria in whose district we're located. And he's a champion of quality health care in the Congress. Also Congresswomen Grace Napolitano who works with me and others so closely on these issues.

I'm delighted that Yvonne Burke (ph) and Gloria Malena (ph) and -- right over here -- and Zeb Yurislavski (ph) from the board of supervisors are here; my friend Rob Reiner who's been a champion for children. A lot of people who've worked on these issues are present. And I'm very pleased to be here at Children's Hospital of Los Angeles which is one of the finest hospitals in this nation and a world resource for pediatric care. I've read a lot about the history of this place, and I know that you've come a long way since you were founded nearly a century ago with four beds in a converted private home, and the expansion continues. I was reminded you're in the middle of a capital campaign, and I wish you the best of luck on that.

On one other personal note, I want to acknowledge a doctor here who helped to treat one of my children, Evelyn, ten years ago back east at the Johns Hopkins Children's Center, Dr. Randall Wessel (ph). He made an enormous difference to my family, and you all are very lucky to have him here.

I'm here today to discuss one of America's most urgent and continuing challenges. For more than 50 years, we have been engaged in a battle to provide the kind of health care a great nation owes it's people. Now, after that long century of effort, conflict and concern, it is time to move past theoretical and philosophical divisions, beyond a sterile debate about labels and abstractions, to ask what we can do now to take concrete, specific, realistic steps to improve health coverage for all of the American people.

Today I'm proposing -- and with your help, as president, I will fight for -- a series of steps to do just that. We must and we can ensure a set of rights so that all Americans can have health coverage and actually get the care they are entitled -- all Americans who have health care coverage will get the care they are entitled too.

We must and we can secure access to affordable quality health care for every child in the entire country by the year 2005. Join with me and we will do that. We must and we can move toward access to affordable, quality health care for every American family.

(APPLAUSE)

This is a fundamentally different approach. We have all learned that we cannot overhaul the system in one fell swoop. Experience has taught us that there is a way to keep what is right while fixing what is wrong with American health care.

The focus of my proposal is health care for working families. It will put doctors and patients in charge, not HMOs and insurance companies.

(APPLAUSE)

The steps that I'm proposing here today will guarantee access to affordable health coverage for every child in America and will provide health care options for millions more adults. But let me be clear: We cannot rest until every single American has affordable health coverage.

The steps I am proposing represent the kind of change we need, the kind of change we can achieve, the kind of change that works for working families. It's the kind of change that I have fought for all of my public life. In the House and Senate, I fought for investments in medical research to unlock the deadly secrets of cancer, Alzheimer's, and AIDS.

In fact, earlier in this campaign, I laid out a comprehensive plan to help us win the war against cancer. In Congress, I led the fight to make infant formula safer, to require warnings label about the dangers of alcohol for pregnant women; I co-authored the National Organ Transplant Act and worked to strengthen America's rural hospitals because I wanted to make sure that a great health care system left no one behind.

From tougher cigarette warning labels and tough measure to combat teen smoking, to a crackdown on health care fraud against seniors, for me, improving health care for working families has been central to the changes that our country needs. As vice president, I'm proud of the advances we've been able to make, even in the face of a Congress that so often seems determined to hold back change.

Never forget when the Gingrich Republicans took over Congress in 1994, some believed that we should just fold our tent and cut and run. I believe we should stay and fight. And we did. Together, we beat back the most damaging Republican cuts and the most damaging changes ever proposed in Medicare and Medicaid. Together, we made sure that Americans do not have to go without a doctor just because they lose their jobs or change jobs.

Together, we passed the largest single investment in children's health in an entire generation to help states provide health coverage to millions of uninsured children. Together, we brought immunization rates to an all-time high and worked to give our children the cleanest, healthiest air and water in a generation. These successes have taught us that step-by-step change is the path to progress.

But as a nation, we cannot be satisfied with the progress we have made so far. I'm not satisfied when I meet people like 88-year-old Florence Sights (ph) of Manchester, New Hampshire, who I talked to recently. She is so hard-pressed

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to pay for her prescription drugs, she told me she sits up at night and worries, and then decides over and over again to cut her dosages in half, gambling with her health just to save precious pills and dollars.

I see some of the doctors shaking their heads because you have patients that do that. You know that people all over our country are forced by financial circumstances to do that.

I'm not satisfied when a child's ear infection goes untreated because the family can't afford a doctor. That has, in at least one case I know, led to hearing loss so grave that the child can barely hear her teacher's voice.

I'm not satisfied when Daniel didn't get the treatment right away that he needed for his broken leg. And I'm so glad that he does have coverage now. And I'm certainly not satisfied when life or death medical decisions are made by HMO bureaucrats at the other end of the telephone line. They are people...

(APPLAUSE)

They don't have a license to practice medicine, and they don't have a right to play God.

(APPLAUSE)

One health plan even tried recently to tell its patients they had to call the HMO before calling 911. What -- it shall remain nameless. What's next? Are you going to have to get prior approval for a heart attack? You know, it's clear, when you have a medical emergency, you need an ambulance and not an accountant.

All of us are too familiar with such false and dangerous answers on health care, and it's just plain wrong to let the insurance industry determine your health and wellbeing on a spreadsheet. It's wrong, also to raise the eligibility age for Medicare in an effort to save money at the expense of our seniors. That's changed all right, but it's the wrong kind of change.

Real step-by-step progress is the right kind of change, the only true course to achieve the ideal expressed by President Kennedy early in the fight for what later become Medicare when he said, whenever the miracles of modern medicine are beyond the reach of any group of Americans for whatever reason, economic, geographic, occupational or other, we must find a way to meet their needs and fulfill their hopes, for one true measure of a nation is its success in fulfilling the promise of a better life for each of its members.

Today, I want to propose ways to help all our working families reach that better life. First and fundamentally, we will write this principle into law: Americans have the right to have their medical decisions made by themselves and their doctors and not by those bureaucrats sitting behind a computer screen hundreds of miles away.

(APPLAUSE)

That's the first principle.

(APPLAUSE)

And we can achieve that principle.

I will lead the fight for HMO reform in this country by passing a real and enforceable patients' bill of rights. I will guarantee the right to see a specialist without pleading telephone calls and endless appeals. It will guarantee the access to an emergency room when you need it and where you need it. It will make sure doctors can tell patients all their options, not just the cheapest ones. It will ensure that pregnant women and cancer patients don't have to change their doctors in the middle of the treatment they're receiving. It will hold health plans accountable for unfairly depriving patients of coverage.

Our opponents claim, of course, that they have a patients' bill of right, too, but when you look closely at it, it's another one of those wonderfully-Republican ideas; it just happens to leave out 100 million Americans, and it doesn't even guarantee access to a specialist. That's not a bill of rights, it's a bill of goods.

It reminds me of an old story from Tennessee about the veterinarian and the taxidermist who went into business together and put a sign out in front of their joint establishment that said, either way you get your dog back.

(APPLAUSE)

It makes a difference.

We need a real patients' bill of rights, and I will not stop fighting for it until Congress stops giving into special interests and passes it into law.

Now, there -- there's some good HMO's, let's be candid, but there are also too many that are taking advantage by cutting corners. Often when I'm out talking to people about this problem today I tell the story that some of you may have heard about the three neighbors who died and went to heaven and they met St. Peter at the gate. St. Peter asked the first one, what did you do on Earth, and she said, I was a doctor, I cured the sick all my life, and St. Peter said, well, come on into heaven. And he asked the second one, what did you do on Earth, and he said, I was a teacher, I taught children all my life. St. Peter said, by all means, come on into heaven. And he asked the third one, what did you do on Earth, and the third one looked a little sheepish and hesitated and finally looked up and said, I ran an HMO. So St. Peter paused and after a while he finally said, well come on in, but you can only stay three days.

(LAUGHTER)

(APPLAUSE)

Now, there is a lot more that we have to do to reform health coverage for those who have it today. Tipper and I have worked toward the day when mental illness is treated just like any other illness by every health care plan in America. That ought to be guaranteed. I want to make sure that a patient with depression is given access to care on terms no different from a patient who has diabetes, and I'll begin by improving mental health services for those who

receive Medicaid.

Next, as we raise up the quality of health care, we have to make sure that every patient in America has clear and accurate measures of a health plan's quality, building on a public-private partnership that I announced last year and it's now well under way. It's going to produce some results that will be extremely valuable. And the reason they're needed is that too often we've seen cases where, for example, serious surgery is performed unnecessarily, cases when the right medical procedures are not followed, when the right outcomes aren't even close to being achieved. Right now, we have consumer reports for everything from bread makers to automobiles. We ought to work to provide measures of health care quality to every family and business in America so that competition can work to improve quality as well as reduce cost. We must also ensure that our newest medical breakthroughs do not compromise our oldest values, especially the right to privacy. Just over the horizon lies a future where we will know the location and makeup of every human gene. Some of these new advances are so startling I don't think that smart mouse is going to be smart enough to know where they are, but all of the medical professionals are soon going to know where all of the genes are located, and they'll be able to unlock the deepest secrets of human disease. We have to prepare for that day, but many Americans are rightfully concerned right now that this could bring threats as well as progress.

Already, for example, too many women right now are afraid to get tests that would show their vulnerability to breast cancer because they fear that an insurance company or potential employer would use the results to discriminate against them.

Genetic discrimination is wrong, and it should be illegal in the United States of America.

(APPLAUSE)

I will lead the fight to outlaw it once and for all.

(APPLAUSE)

At the same time, no one should decide not to see a doctor because they are afraid of who will see their medical records, and every time you fill a prescription you should -- your mailbox shouldn't fill up with junk mail about your medical condition. We must guarantee by law the right of every patient to keep his or her personal records private.

At a time when our senior population is expected to double in the next 30 years, we also need a new commitment to the quality of health care for our seniors. As president, I will fight to use the surplus to keep Medicare solvent and to make affordable prescription drugs available under Medicare.

We also need to pay attention to the need for improvements in geriatric care in the curriculum of our medical schools.

And where Medicare is concerned, I want to make sure that America's hospitals, academic health centers, nursing homes, and home health care centers have the resources they need for the vital care that they provide.

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And I will fight for new -- new help and new affordable targeted tax cuts to ease the burden of providing long-term care to a loved one. There are millions of Americans who carry a crushing burden. They're not represented here in this audience today because they're at home right now as the sole provider. Our nation needs to recognize their sacrifice and respond to their needs.

As we secure these patients' rights I've been discussing, we must also empower every patient and every patient's family to be partners in taking responsibility for assuring good health and high-quality care. We will establish new public-private partnerships to expand access to prevention and wellness programs which will save money and save lives, and we will work to promote prevention and wellness initiatives in the workplace.

(BABY CRYING)

Don't worry about that. This is a family -- this is a working family event. That's music.

(LAUGHTER)

Of course -- well, one example of working to prevent disease and promote wellness in the workplace are employer-sponsored health fairs and cancer screenings. There are many other examples that I'll be discussing in the future as well.

Of course, we can work to assure the highest quality health care in the world, but it still won't help working families if they can't afford the health care. The uninsured see doctors less often, fill prescriptions less often and are far less likely to have life-saving mammograms and screening tests, and this is not only wrong, we also pay a price for it. Because when people are forced to neglect their health and a sudden illness strikes, the care they finally get costs far more and often does far less to save their health in some cases to save their lives.

We know a lot about the more-than-43-million Americans who lack health care coverage today. They are children who are eligible for Medicaid or for coverage under the new children's health initiative but who are not enrolled in it today. They are children who do not qualify for these programs but who also can't get access to private insurance. They are the disabled or those with cancer, those who have what the insurance companies call "preexisting conditions," who switch jobs and then find that the premiums are way too high for them to afford insurance any more. They are legal immigrants who are not informed about their eligibility for coverage. They work for employers who either can't afford to provide coverage or who choose not to provide coverage.

And then, when the employees have to find coverage on their own, they find they're priced out of the market. They are men and women who have retired, or lost their jobs before they're old enough to be eligible for Medicare.

We know something else about the uninsured: Their numbers continue to grow, about the million people per year over the course this decade. So, we must redouble our commitment, as an American community, to bring the uninsured into our community of care.

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That is why, with your help, as president, I will lead the fight to move this nation toward quality, affordable health coverage for every family. We will begin with the earliest years, by extending access to affordable health coverage to every American child. And let me be crystal clear on this point: If you elect me president, I will ensure, that by the year 2005, every single child in our country has full access to fully affordable health care coverage. That is a commitment that I'll keep, that we all must keep.

If you want a president who will take the oath of office on January 20th, 2001 at high noon, committed heart and soul to moving heaven and earth to achieving that goal, then I ask for your support because I will make it happen.

Now, we can build on the progress that we have made by making sure that each and every child, who is already eligible under the historic expansion that's already been passed, is reached. There are still four million uninsured children eligible for Medicaid who are not yet enrolled. And there are millions more eligible under the children's health initiative that passed in 1997, who have not yet been signed up.

In some states, Texas springs to mind, one quarter of all children are still out in the cold, in spite of the fact that so many of them are eligible for it right now. That's unacceptable. We know that uninsured children are more likely to be sick as newborns, and less likely to be immunized as preschoolers. They're less likely to get treated for illnesses like asthma or tooth decay; less likely to get the proper treatment for a broken leg, because they don't have a regular relationship with a doctor who knows them and can communicate with them.

More than twice as many uninsured children go a full year, or more, without ever seeing a doctor. That's why I'll fight with new incentives for states to identify and enroll uninsured children, and new rewards for states that do a good job.

Fighting for working families means taking on those who are standing in the way of the best interests of those working families. States who are not doing the job need to be held accountable. As president, I will hold them accountable, and make sure that working families get the health care to which they're entitled.

And then I will propose that every school, in every school district, be the focus of an unprecedented outreach and enrollment campaign. I will propose to expand our current children's health initiative so that families earning up to \$41,000 per year, that's 250 percent of poverty, will be eligible for the benefits it provides.

Then, for children and families who still don't qualify for the children's health initiative, and whose parents work for companies that don't provide health coverage, I propose to let their families buy into this initiative and provide coverage for their children, whatever their income.

And as we reach out to every uninsured child, we cannot forget that there are seven million uninsured parents whose children are eligible for coverage. Parents like Evelyn and Jose Alvarado (ph), and all that wonderful talk that she gave about caring for her children. She didn't dwell on the fact that she and her husband still don't have health coverage.

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As president, I will offer another new proposal: To empower states to expand coverage to all parents whose children are eligible, either for Medicaid, or for our children's health initiative.

Next we will focus on the disabled who, too often, cannot return to the workplace because they cannot get affordable health care. And then they lose the health care they get if they do go into the workplace. That needs to

change. And we will focus on the fastest growing group of uninsured Americans, the near elderly.

First, we should let people with disabilities keep Medicare or Medicaid when they return to the workplace. This change will help people with disabilities participate to their full potential, and become a part of the working American community. And we should enable all those between the ages of 55 and 65 to buy into Medicare early.

If we want to break down the barriers to affordable health care, we must also address this fundamental fact: One of the fastest growing sectors of our economy, small business, which has accounted for the vast majority of new jobs over these last seven years, has become one of the hardest places for a working family to find health care. On average, small companies spend about three times as much of their total insurance costs on administrative overhead as large companies do. No wonder that workers in small firms make up almost half of the working uninsured, even though they represent only 30 percent of the work force.

My plan will help small businesses band together to negotiate for lower rates for their employees' coverage, and for businesses that join in this effort, my plan will provide special tax benefits and grants for the health insurance policies that they offer their employees. In this way, we can expand access to affordable health coverage without burdening small business.

But we can't afford to focus only on providing coverage through employers. And we can't pretend that mandating that all employers take a particular approach doesn't have costs. We also have to directly help individuals who do not presently get coverage in the workplace. And so, as president, I will propose a major reform to help them. A 25 percent refundable tax credit to cover their costs for health insurance.

Today, bear in mind, that companies that provide coverage get a tax break to subsidize the health insurance. But individuals, whose employers don't provide health coverage, don't get any help. They're at a disadvantage, and that's just not fair, and we have to change it. It's only equitable.

We made one important change a few years ago when we passed the Kennedy-Cassenbaum (ph) law. It helps provide -- it helps Americans keep coverage when they change jobs, and it limits restrictions based preexisting conditions. But, too often, people are still priced out of the market when they try to exercise these new rights. As president, I will work to reform the individual insurance markets so that it becomes truly affordable for those who need to buy into it.

Taken together, these steps will make health care affordable for millions of

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Americans who cannot afford it today. They will move us toward the day when every American has access to affordable, quality coverage. And, for those we have not yet reached, we need a strong safety net so nobody will be left without care when they need care.

My plan will strengthen America's community health centers and empower them to do this job. And, as we expand other efforts to cover children, we will free up community health centers to focus on challenges like prevention, immunization and outreach. My plan will also invest in public hospitals, academic medical centers and other providers in our most vulnerable communities.

Now, let me be clear what I'm proposing today. As president, I will commit our nation to the goals of universal rights for those who have health coverage, universal access for all American children, and real progress toward access to quality, affordable health care for every American family.

My plan will extend that access to millions of Americans who do not have it today, provide a strong safety net for others, and move us toward full access. And it will do so by building on the strengths of our existing health care system, and maintaining the strength of the American economy.

I believe that every step we take as Americans must be fiscally responsible and economically sound. Every step we take must be consistent with our commitment to save Social Security and Medicare. And as we expand access to the uninsured, we must not reduce coverage for those who already have it today. We must rely on the strength of markets to increase competition, restrain costs, and, at the same time, improve quality, while expanding choice for consumers. And we must squeeze out every last dime of fraud and abuse so that all that money goes into quality care for working families.

Some will argue that greater access to health care is a luxury we can't afford. Even as they covet our record surplus for the special interests and propose to blow it on a risky tax scheme that would drive us right back into spiraling federal deficits. For more than two decades, I have seen the struggle between working families and special interests: the tobacco lobby, the gun lobby, those who stood against the family leave bill I co-sponsored in the Senate. We've had to fight them all, and we're not about to stop now.

Others will argue against reforming our health care system carefully, realistically, and step by step. Some of them will tell you that the only acceptable answer is a one-size-fits-all solution.

But I believe Americans know better. They know, you and I know, we need visionary but practical change: change that can be enacted into law, change that works for working families, change that meets their cares and concerns, that respects the diversity of their health care needs. Our cause is working families. And in this campaign and in the years ahead, let's put their interests first, ahead of the special interests, ahead of anything.

This is a unique moment for our nation, for our people. Our economy is strong. Indeed, we are in the midst of the longest period of prosperity in our peacetime history. But we know that prosperity alone will not meet the challenges that we face in American health care. And as Harry Truman reminded us when he began this fight 50 years ago, in a time of prosperity, we can afford many things, but ill health which can be prevented or cured is one thing we

cannot afford.

We must use our prosperity now to bring new change to our health care system, to make our families healthier and more hopeful for the new century ahead. That's the kind of change that works for working families, and that's why I'm running for president of the United States.

Thank you very much. Thank you for being here.

WATERS: Vice president of the United States in Los Angeles: ensuring rights for patients, expanding access to prevention and wellness programs, making progress in new research by protecting patients, strengthening care for our nation's seniors and working towards the goal of ensuring all Americans have access to quality health care coverage. A major policy speech on managed care following George Bush's education policy speech of last Thursday.

Senior CNN political analyst Bill Schneider in Washington, is the Bush speech the reason why we're seeing the Gore speech today? We haven't seen Al Gore in quite some time.

WILLIAM SCHNEIDER, CNN SR. POLITICAL ANALYST: No, we haven't. Bush, I think, got specific on his education policy, so Gore felt it's time for him now to get specifics so they can start talking about issues and not just raising money all the time.

WATERS: About this issue: Are we about to see the Harry and Louise commercials again, the Bill Clinton health care experience with health care, and now the Gore proposals on health care? Is there some reason why managed care is a good issue for Gore?

SCHNEIDER: Well, it is an important issue to a lot of Americans who are fearful about what their being forced into managed care means. And we're already seeing an ad campaign: the Association of American Health Plans and lobbying campaign by the United States Chamber of Commerce against the bill -- that's a bipartisan bill being proposed in the House of Representatives, the so-called Norwood-Dingell bill -- that the administration and the American Medical Association support that guarantees patients in HMOs the right to sue.

Business groups and insurance groups claimed that this would increase costs and throw a lot of people out of health insurance plans because they've become too expensive.

There already is a massive campaign going on now in newspapers and on television -- I think \$5 million by the Association of American Health Plans -- to combat this bill. It's the same strategy they used back in 1993 against the Clinton health care plan.

WATERS: And Gore did not mention anything about the lawsuits against HMOs. Are we to make anything of that?

SCHNEIDER: Well, he did endorse the goals of universal rights for those who already have health care coverage. I think that was a coded way of saying that he supports the bill which the president has already endorsed, the bipartisan bill that's trying to get passed -- its sponsors are trying to get it passed by

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the House of Representatives. But he didn't go into any detail about lawsuits and those technicalities. Those are important.

WATERS: Now, the Los Angeles location for both of these major policy speeches: any significance there?

SCHNEIDER: Absolutely. California is a state that looks in play for the year 2000. It has the largest cache of electoral votes -- 54 electoral votes. Clinton carried it twice. Before that, it hadn't voted for a Democrat for president since 1964, and the Democrats have to keep it.

Gore cannot win without California, and the latest polls from several sources in California show a very close race with George Bush running just a few points ahead of Al Gore. If the Democrats can't carry California, they cannot -- Gore cannot win the presidency.

WATERS: And there is another issue for Al Gore: He's looking over his shoulder at Bill Bradley who's going to be announcing tomorrow his candidacy. How is that part of this race shaping up?

SCHNEIDER: Well, Bill Bradley is giving Gore a unexpectedly close race, particularly in New Hampshire, while Gore is running ahead among Democrats nationally. In New Hampshire, where it really matters, the two are virtually neck-in-neck, according to the latest poll by the "Boston Globe," and that's a real bit of trouble for Al Gore because Bradley is all set to spring an upset. By the time it happens five months from now, it might not be such an upset.

But he might have a very tight race for the Democratic nomination. And one of his problems is that a lot of Democrats wonder if Gore's a winner. He has been losing in every public opinion poll, among voters nationwide, to George Bush for the last year. And unless Gore can show that he can gain some speed and catch up with Vice President Bush, a lot of Democrats are going to say: Why should we vote for someone who looks like a loser?

WATER: All right, CNN senior political analyst William Schneider in Washington.

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