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April 10 Appointees Meeting [1]

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RESTRICTION CODES

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- P1 National Security Classified Information [(a)(1) of the PRA]
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MEMORANDUM FROM THE WHITE HOUSE DOMESTIC POLICY COUNCIL

From: Carol H. Rasco

Subject: Agenda for April 10, 1995

As you know, the next meeting of the Appointees with Disabilities will be held on **Monday, April 10, 1995 from 2:00 - 3:30 p.m. in the Roosevelt Room at the White House.**

At that time, Assistant Secretary for Aging, Fernando Torres-Gil, will report on plans for the White House Conference on Aging scheduled for May 2-5, 1995. In addition, the Chair of the National Commission on Childhood Disability, former Representative Jim Slattery, will discuss current commission efforts and progress to date.

If you have any questions, please contact Diana Fortuna (202-456-5570). If you are planning to attend and have not already done so, please contact Elisabeth Cohen (202-456-5571) to provide clearance information. Thank you.

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OVERVIEW

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Congress established the National Commission on Childhood Disability in 1994 as part of the Social Security Independence and Program Improvements Act (Public Law 103-296). The task of the Commission is to examine the Supplemental Security Income (SSI) program for children with disabilities, assess the appropriateness of its eligibility criteria, and review the impact of the program on disabled children and their families. The 14 Commission members were appointed by the Secretary of Health and Human Services. The Commission is chaired by Jim Slattery, a former representative of the second congressional district of Kansas.

A major impetus for the creation of the Commission was a recent three-fold increase in the number of children receiving SSI. Between 1989 and 1994, SSI child beneficiaries increased from 290,000 to 890,000, raising program costs to nearly \$5 billion. This increase has been attributed primarily to three causes: a liberalization of eligibility criteria required by the 1990 *Sullivan v. Zebley* Supreme Court decision; the Social Security Administration's expansion of its listings of childhood mental impairments; and increased outreach efforts by SSA. The Commission will examine these causes along with others in an effort to address the seven issues in its statutory mandate:

- 1) the appropriateness of the present SSI definition of disability and the advantages and disadvantages of using an alternative definition;
- 2) whether the need by families for assistance in meeting high costs of medical care for children with serious physical or mental impairments might appropriately be met through expansion of federal health assistance programs, regardless of whether they are eligible for disability benefits under title XVI of the Social Security Act;
- 3) the feasibility of providing benefits to children through non-cash means, including but not limited to vouchers, debit cards, and electronic benefit transfer systems;

- 4) the extent to which the SSA can involve private organizations in an effort to increase the provision of social services, education, and vocational instruction with the aim of promoting independence and the ability to engage in substantial gainful activity;
- 5) alternative ways of providing retroactive supplemental security income benefits to disabled children, including the desirability and feasibility of conserving some portion of such benefits to promote the long-term well-being of such children;
- 6) the desirability and methods of increasing the extent to which benefits are used in the effort to assist disabled children in achieving independence and engaging in substantial gainful activity; and
- 7) the effects of the SSI program on disabled children and their families.

The Commission is mandated to report its findings and recommendations to the House Committee on Ways and Means and the Senate Committee on Finance by November 30, 1995. However, the Commission has accelerated its timetable and hopes to submit its report by late summer.



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The enactment of the Supplemental Security Income (SSI) program in 1972 marked a milestone in the development of federal policies for children with disabilities. Previously, disabled children, like those without disabilities, were eligible for cash benefits only if their families qualified under a state Aid to Families with Dependent Children (AFDC) program. SSI provides benefits to children in their own right, provided they meet both the medical and financial requirements.

SSI is a means tested program funded entirely from federal general revenues. In 1995, the maximum federal benefit is \$458 per month. All but seven states and one territory supplement the federal SSI payment.

A child is found disabled under SSI if he or she suffers from a physical or mental impairment comparable to one which would render an adult unable to work.¹ In calculating a child's financial eligibility for SSI, a portion of the income and resources from other family members is deemed to the child. Generally, a disabled child in a family of four can qualify for a full benefit when family income is under \$20,200 and can qualify for a partial benefit when income is under \$30,900.

Children undergo a sequential evaluation to determine their medical eligibility for SSI. Originally, the Social Security Administration (SSA) established different evaluation processes for adults and children. Both included a comparison of the claimant's impairments and those specified on the medical listings created by SSA. If a child's impairment(s) did not meet or equal the severity of those in the listings, he or she was denied benefits. Adults who did not meet or equal the listings, on the other hand, were given a functional assessment to determine the extent to which the impairment(s) affected their ability to be employed, given their age, education, and work experience.

¹ The statutory definition of a disabled person is one who is "unable to engage in any substantial gainful activity by reason of any medically determined physical or mental impairment which can be expected to last for a continuous period of not less than 12 months (or in the case of a child under the age of 18, if he suffers from any medically determinable physical or mental impairment of comparable severity)." P.L. 92-603.

In the 1990 *Zebley v. Sullivan* Supreme Court decision, the Court found that SSA's process did not satisfy the requirement in the Social Security Act that children's eligibility standards be comparable to those for adults. To provide comparability, SSA created an Individualized Functional Assessment (IFA) for those children who did not meet or equal the medical listings. Under the final court settlement, SSA agreed to readjudicate all claims that were denied from January 1, 1980, to February 11, 1991, using the new functional criteria. As a result of the readjudication, approximately 135,000 new beneficiaries entered the program.

A second factor which has contributed to SSI program growth is SSA's revision of its listings of childhood mental impairments. These listings were revised and expanded in compliance with the 1984 Disability Benefits Reform Act to reflect advances in evaluation, treatment, and technology. The new listings were finalized in 1990, the same year as the *Zebley* decision.

Third, in response to a 1989 Congressional mandate and a requirement in the *Zebley* decision, SSA has expanded its outreach activities. In an effort to identify eligible children, the agency has published and distributed pamphlets, conducted demonstration projects at children's hospitals, and contracted with local school districts and special education programs.

Increased outreach efforts, along with the revised listing of mental impairments and the Individualized Functional Assessment, have contributed to an unprecedented growth in the enrollment of children in the SSI program. The number of SSI beneficiaries under the age of 22 increased from 296,300 at the end of 1989 to 892,000 at the end of 1994, increasing program expenditures for children to nearly \$5 billion.

While 1994 witnessed a significant change in this trend,² the post-*Zebley* expansion has nevertheless raised questions about the appropriateness of the IFA and the mental impairments listings. Since SSI cash benefits are greater than those available through AFDC, critics argue that less stringent eligibility criteria and the subjectivity in the definitions of several mental impairments allow parents to "coach" children to appear disabled. Critics also point to cash payments as a disincentive for families to actively seek treatment.

Responding to these concerns, Congress passed legislation in 1994 creating the National Commission on Childhood Disability. The Commission is now examining the SSI childhood program, assessing the appropriateness of its eligibility criteria, and reviewing the impact of the program on beneficiaries and their families. The 14 member Commission must submit its report to Congress by November 30, 1995. Given the high level of Congressional interest in these issues, the Commission is working to complete its report in late summer.

² After rising from 38 percent to 55 percent in the wake of *Zebley* (1992-3), SSA's childhood benefit allowance rate for 1994 fell to 32 percent.

**Social Security Independence
and Program Improvements Act of 1994**

SEC. 202. COMMISSION ON CHILDHOOD DISABILITY.

(a) **ESTABLISHMENT OF COMMISSION.**—The Secretary of Health and Human Services (in this section referred to as the “Secretary”) shall appoint a Commission on the Evaluation of Disability in Children (in this section referred to as the “Commission”).

(b) **APPOINTMENT OF MEMBERS.**—(1) The Secretary shall appoint not less than 9 but not more than 15 members to the Commission, including—

(A) recognized experts in the field of medicine, whose work involves—

(i) the evaluation and treatment of disability in children;

(ii) the study of congenital, genetic, or perinatal disorders in children; or

(iii) the measurement of developmental milestones and developmental deficits in children; and

(B) recognized experts in the fields of—

(i) psychology;

(ii) education and rehabilitation;

(iii) law;

(iv) the administration of disability programs; and

(v) social insurance (including health insurance); and

(C) other fields of expertise that the Secretary determines to be appropriate.

(2) Members shall be appointed by January 1, 1995, without regard to the provisions of title 5, United States Code, governing appointments to competitive service.

(3) Members appointed under this subsection shall serve for a term equivalent to the duration of the Commission.

(4) The Secretary shall designate a member of the Commission to serve as Chair of the Commission for a term equivalent to the duration of the Commission.

(c) **ADMINISTRATIVE PROVISIONS.**—(1) Service as a member of the Commission by an individual who is not otherwise a Federal employee shall not be considered service in an appointive or elective position in the Federal Government for the purposes of title 5, United States Code.

(2) Each member of the Commission who is not a full-time Federal employee shall be paid compensation at a rate equal to the daily equivalent of the rate of basic pay in effect for Level IV of the Executive Schedule for each day (including travel time) the member attends meetings or otherwise performs the duties of the Commission.

(3) While away from their homes or regular places of business on the business of the Commission, each member who is not a full-time Federal employee may be allowed travel expenses, including per diem in lieu of subsistence, as authorized by section 5703 of title 5, United States Code, for persons employed intermittently in the Government service.

(d) **ASSISTANCE TO COMMISSION.**—The Commission may engage individuals skilled in medical and other aspects of childhood disability to provide such technical assistance as may be necessary to carry out the functions of the Commission. The Secretary shall make available to the Commission such secretarial, clerical, and other assistance as the Commission may require to carry out the functions of the Commission.

(e) **STUDY BY THE COMMISSION.**—(1) The Commission shall conduct a study, in consultation with the National Academy of Sciences, of the effects of the definition of "disability" under title XVI of the Social Security Act (42 U.S.C. 1382 et seq.) in effect on the date of enactment of this Act, as such definition applies to determining whether a child under the age of 18 is eligible to receive benefits under such title, the appropriateness of such definition, and the advantages and disadvantages of using any alternative definition of disability in determining whether a child under age 18 is eligible to receive benefits under such title.

(2) The study described in paragraph (1) shall include issues of—

(A) whether the need by families for assistance in meeting high costs of medical care for children with serious physical or mental impairments, whether or not they are eligible for disability benefits under title XVI of the Social Security Act, might appropriately be met through expansion of Federal health assistance programs;

(B) the feasibility of providing benefits to children through noncash means, including but not limited to vouchers, debit cards, and electronic benefit transfer systems;

(C) the extent to which the Social Security Administration can involve private organizations in an effort to increase the provision of social services, education, and vocational instruction with the aim of promoting independence and the ability to engage in substantial gainful activity;

(D) alternative ways and providing retroactive supplemental security income benefits to disabled children, including the desirability and feasibility of conserving some portion of such benefits to promote the long-term well-being of such children;

(E) the desirability and methods of increasing the extent to which benefits are used in the effort to assist disabled children in achieving independence and engaging in substantial gainful activity;

(F) the effects of the supplemental security income program on disabled children and their families; and

(G) such other issues that the Secretary determines to be appropriate.

(f) **REPORT.**—Not later than November 30, 1995, the Commission shall prepare a report and submit such report to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate which shall summarize the results of the study described in subsection (e) and include any recommendations that the Commission determines to be appropriate.

CHILDHOOD DISABILITY COMMISSION MEMBERS

Polly Arango National Director of Family Voices, a national coalition that speaks for children with special health needs. The mother of a child with multiple disabilities, Ms. Arango is active in national health reform for children with disabilities.

Adrienne Asch, Ph.D. Professor in Biology, Ethics and the Politics of Human Reproduction at Wellesley College, Wellesley, Massachusetts. A noted ethicist and social psychologist, Dr. Asch has researched legal and ethical problems in health care delivery and participated in the Project on Implications of Population Screening for Cystic Fibrosis. Dr. Asch has written extensively on disability, bioethics and health care, stigmatization of the disabled, home care, rehabilitation, imperiled newborns, and reproductive technology.

Dolores Berkovsky, M.S.N., L.M.S.W. Director of Children's Services for Catholic Charities of Fort Worth, Texas. Ms. Berkovsky is responsible for a large continuum of grassroots child and family services, including programs that promote family preservation, adoption of children with disabilities, and outpatient assessment and treatment services. Ms. Berkovsky is also involved with families and children at the state level, where she is instrumental in child and family advocacy committees such as the Children's Community Research Group.

Wade F. Horn, Ph.D. Director of the National Fatherhood Initiative, a group that promotes father restoration in American families. A clinical child psychologist, Dr. Horn is a nationally recognized expert on Attention Deficit Hyperactivity Disorder and served as the National Executive Director for the organization, Children and Adults with Attention Deficit Disorders, in 1993. Dr. Horn also served as the Commissioner for Children, Youth and Families in the Administration for Children and Families during the Bush Administration.

Jennifer Howse, Ph.D. President of the March of Dimes Birth Defects Foundation. Previously, Dr. Howse served as Associate Commissioner for the Office of Mental Retardation and Developmental Disabilities for the state of New York. She has also served as the Executive Director of the Greater New York March of Dimes, and the Pennsylvania State Commission for Mental Retardation.

Sharman Davis Jamison Speech therapist, member of the National Advisory Committee of the Howard University Research and Training Center, and the President's Committee on Employment of Persons With Disabilities. The parent of an adult daughter who is autistic and deaf, Ms. Jamison develops and implements parent training throughout the country, and provides advice to parent training and information centers regarding disability issues.

Dan Johnson Director of the Office for Persons With Physical Disabilities in Madison, Wisconsin. Mr. Johnson is responsible for the development and coordination of programs for persons with physical disabilities in Wisconsin. He provides planning and definitions of program policy, goals, and objectives to ensure the delivery and coordination of services essential for independent living and self-sufficiency.

Paul Marchand Director of the Association for Retarded Citizens (ARC). Mr. Marchand is a leading spokesperson for children with disabilities, especially those with mental disorders.

James M. Perrin, M.D. Associate Professor of Pediatrics at Massachusetts General Hospital in Boston, Massachusetts. Dr. Perrin has written extensively on the organization of services for children with chronic physical disorders, and co-authored Home and Community Care for Chronically Ill Children and Chronically Ill Children and Their Families.

M. Carmen S. Ramirez President and Founder of Schools Are For Everyone. Ms. Ramirez has extensive community volunteer experience in issues affecting children with disabilities, including minority and non-English speaking families. She was appointed by Governor Ann Richards to serve on the Texas Continuing Advisory Commission for Special Education. Ms. Ramirez also serves on the Governing Commission of the Texas Parent and Training Information Center for Latino Parents of Children With Disabilities.

Carol Rank Director of the Kansas Disability Determination and Referral Service. Ms. Rank works closely with Kansas' State Services for Children With Special Health Care needs and other agencies to further understanding of the requirements for the children's SSI program.

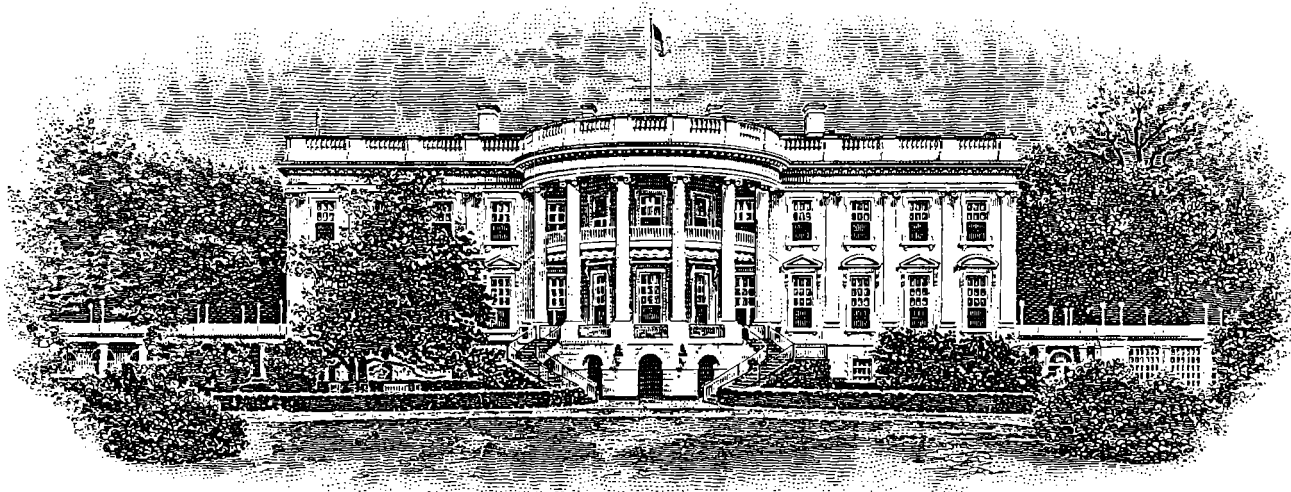
Jim Slattery Former United States Representative from Kansas and partner in the Wiley, Rein and Fielding law firm of Washington, D.C. Mr. Slattery was elected to the House of Representatives in 1982 and served six terms. He served 12 years on the Energy and Commerce Committee, where he was active on environmental, health care, railroad and telecommunications issues. Mr. Slattery also served for 6 years on the House Budget Committee and the House Veterans' Affairs Committee. His primary interests included deficit reduction, health care access in rural areas, and Medicaid coverage for children from low-income families.

Rud Turnbull Co-director of the Beach Center on Families and Disabilities at the University of Kansas. Mr. Turnbull is a nationally known expert and author in disability policy issues. He has served in national leadership positions in several organizations, including the Association for Retarded Citizens, the American Association on Mental Retardation, the Association for Persons With Severe Disabilities, and the American Bar Association Commission on Mental and Physical Disability Law.

Barbara Wolfe, Ph.D. Director of the Institute for Research on Poverty at the University of Wisconsin, where she is also a member of the faculty of the Department of Economics, the Department of Preventive Medicine, and the LaFollette Institute of Public Affairs. Since the 1970s, Dr. Wolfe has written a number of publications regarding health care issues including a 1994 article, "Reform of Health Care for the Nonelderly Poor." Dr. Wolfe also co-authored a recent book, Succeeding Generations: On the Effects of Investments in Children.

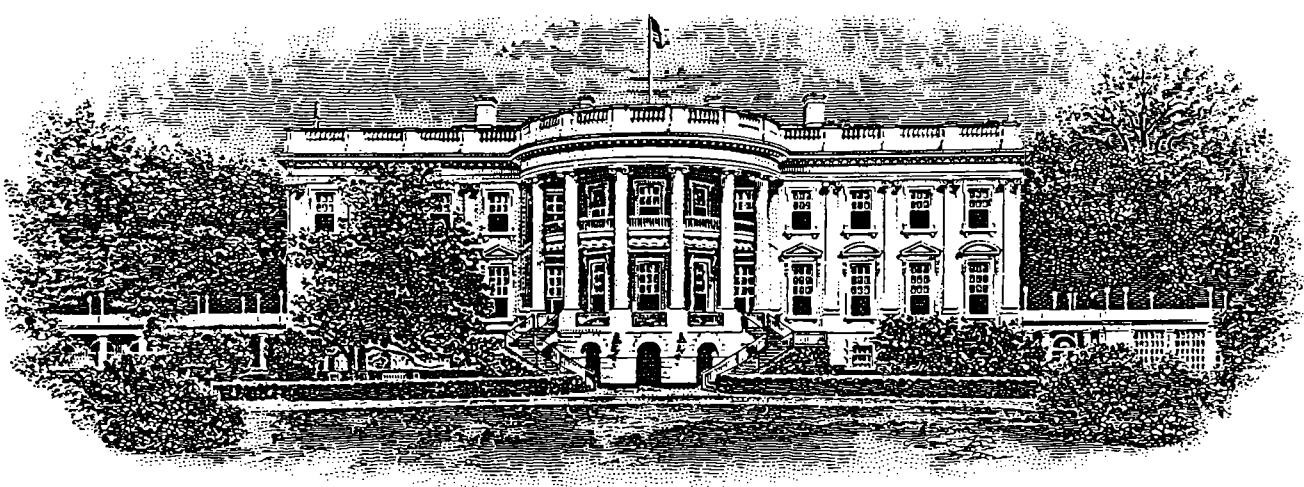
WHITE HOUSE CONFERENCE ON AGING

1995



501 School St., SW, 8th Floor, Washington, D.C. 20024

**PHOTOCOPY
PRESERVATION**



1995 WHITE HOUSE CONFERENCE ON AGING FACT SHEET

The fourth White House Conference on Aging (WHCoA) -- and the last of this century -- will be held May 2-5, 1995, in Washington, D.C. President Clinton called for the Conference on February 17, 1994. The WHCoA Policy Committee, a 25-member body appointed by the President and the Congress, set the dates and place at its first meeting on July 27, 1994. Senator David Pryor (D-AR) chairs the Policy Committee.

On January 25, 1995, the Policy Committee approved a theme and final Conference agenda. The theme is "America Now and Into the 21st Century: Generations Aging Together with Independence, Opportunity and Dignity." Four broad issues comprise the agenda: (1) Assuring Comprehensive Health Care Including Long Term Care, (2) Promoting Economic Security, (3) Maximizing Housing and Support Service Options, and (4) Maximizing Options for a Quality Life. In deciding on the theme and final agenda, the Policy Committee considered public comments on theme possibilities and a draft agenda published in the Federal Register October 12, 1994. In addition, reports and recommendations from hundreds of officially recognized WHCoA events throughout the country were considered in developing the final agenda, which was published in the Federal Register February 2, 1995.

Two cross-cutting concerns pervade the agenda and will influence discussions at the Conference. These are: (1) interdependence among generations and among members of extended families, and the responsibility of individuals to plan for changes that will occur throughout their lifespan; and (2) unique contributions and needs of special populations, especially veterans, caregivers (including grandparents), rural elderly, women, minorities and individuals with disabilities.

Purposes of the WHCoA are to shape resolutions that will influence national aging policy over the next decade and design a strategy for putting policy into action -- for implementing the resolutions the Conference produces.

-over-

The 1995 Conference, authorized by the 1992 Amendments to the Older Americans Act, will have 2,258 delegates. In addition, it will have up to 250 observers, individuals who may attend the Conference but not vote. Delegates are selected by governors, members of Congress, constituent organizations (including national aging organizations and veterans groups), the White House, the HHS Secretary and the WHCoA.

Since President Clinton officially called it on February 17, 1994, the WHCoA has developed a full national program of pre-Conference events and activities. More than 700 events have been held or scheduled, including local, state, regional and mini-conferences. In addition, the WHCoA, in partnership with other organizations, has conducted more than 15 focus groups in a variety of cities throughout the country to gain direct input from individuals, primarily seniors, on their attitudes about aging and their views on what the WHCoA should focus on and strive to accomplish.

President Clinton appointed Robert B. Blancato as executive director of the 1995 WHCoA. Members of the WHCoA Policy Committee are:

David Pryor, U.S. Senate (D-AR), Chair
William S. Cohen, U.S. Senate (R-ME)
Daniel P. Moynihan, U.S. Senate (D-NY)
Barbara A. Mikulski, U.S. Senate (D-MD)
Constance A. Morella, U.S. House of Representatives (R-MD)
Andrew Jacobs, Jr., U.S. House of Representatives (D-IN)
William J. Hughes, U.S. House of Representatives (D-NJ)
(retired)
Matthew G. Martinez, U.S. House of Representatives (D-CA)
Donna E. Shalala, Secretary of Health and Human Services
Henry G. Cisneros, Secretary of Housing and Urban Development
Jesse Brown, Secretary of Veterans Affairs
Norman Abramowitz, Mayor of Tamarac, FL
Bea G. Bacon, Central States Coalition on Aging, Olathe, KS
Horace B. Deets, Executive Director, American Association of Retired Persons
James T. DeLaCruz, Coordinator, Quinault Senior Citizens Program, Tahola, WA
Rose Dobrof, Executive Director, Brookdale Center on Aging of Hunter College, New York, NY
Madeleine R. Freeman, Orono, ME
Maralee Lindley, Director, Illinois Department on Aging, Springfield, IL
Thomas H.D. Mahoney, Cambridge, MA
Mary Rose Oakar, President, Healthright, Inc., Cleveland, OH
Herb A. Sanderson, Director, Division of Aging and Adult Services, Arkansas Department of Human Services, Little Rock, AR
Samuel J. Simmons, President and Chief Executive Officer, National Caucus and Center on Black Aged, Inc.
Lawrence T. Smedley, Executive Director, National Council of Senior Citizens
Marta Sotomayor, President, National Hispanic Council on the Aging
Daniel Thursz, President, National Council on the Aging

FEBRUARY 1995

Tuesday
February 28, 1995

Part VI

**Department of
Health and Human
Services**

Administration on Aging

Turning Resolutions Into Results;
Building the Legacy of the 1995 White
House Conference on Aging; Notice

DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS)

Administration on Aging

Turning Resolutions Into Results: Building the Legacy of the 1995 White House Conference on Aging

AGENCY: White House Conference on Aging, AoA, HHS.

ACTION: Notice; Request for Public Comments.

SUMMARY: The White House Conference on Aging (WHCoA), which will be held May 2-5, 1995 in Washington, D.C., will conclude with the passage of resolutions designed to influence aging policy into the next century. This notice announces two categories of post-conference activities devised to ensure implementation of these resolutions into policy: (1) Follow-up meetings recognized by WHCoA and held throughout the country; and (2) submission of public comments.

FOR FURTHER INFORMATION CONTACT: Karen Goldmeier, White House Conference on Aging, 501 School Street, SW, 8th Floor, Washington, DC 20024-2755, phone (202) 245-7116.

SUPPLEMENTARY INFORMATION: As specified in Title II of the Older Americans Act Amendments of 1987 (Pub. L. 100-175, as amended) the 1995 White House Conference on Aging is to work jointly with States, individuals, and public and private organizations to devise a series of resolutions to guide national aging policy into the 21st century. Consistent with this grassroots focus, the WHCoA has solicited information and encouraged participation from a wide range of sources since President Clinton announced the Conference on February 17, 1994. The WHCoA has received input from individuals and organizations across the country, including over 900 responses generated by a proposed WHCoA agenda for public comment published in the October 12, 1994 Federal Register. In addition, by the May Conference in Washington D.C., more than 700 activities affiliated with the WHCoA will have been held around the country.

In keeping with this grassroots emphasis, the WHCoA proposes to recognize two avenues for public participation after the close of the Washington Conference. First, the WHCoA is announcing a series of events to follow the May Conference. These events, described in more detail below, will narrowly focus on strategies to implement the resolutions adopted by the Conference. Second, individuals

may submit comments regarding implementation of resolutions independent of these post-Conference events.

These two avenues, along with a final Conference report prepared by the Policy Committee with input by the Advisory Committee and Governors' offices, will help define a blueprint for proposed post-WHCoA implementation activities. This blueprint will provide the framework for immediate and long term actions to implement the Conference's highest priority recommendations. It will also identify areas and tasks in which the public and private sectors, including governmental and nongovernmental organizations and agencies, can play a role in implementing the Conference recommendations. These may include private initiatives as well as the enactment of public policies and laws affecting aging Americans, their families and their communities now and into the 21st century.

I. Post-Conference Events

The 1995 White House Conference on Aging proposes to recognize a final series of events focused on implementing the priority recommendations created in the May Conference. Organizations interested in sponsoring an event under the auspices of the WHCoA must adhere to guidelines similar to those that presently govern pre-conference events. Thus, to qualify for recognition, the activity must: (1) Be a policy-oriented event focusing on one or more of the priority resolutions adopted by the 1995 White House Conference on Aging; (2) guarantee the participation of older persons; (3) produce a written report within 30 days or by October 13, 1995, whichever is earlier; (4) raise funds only to the extent necessary to cover the cost of the event; and (5) be approved by the Executive Director of the WHCoA.

Recognition signifies the WHCoA's acknowledgement of the relevancy of the event to the goals of the WHCoA. It allows the sponsoring organization to publicize that the event has been recognized by the WHCoA and that it will be listed in the final report of the Conference. Recognition does not, however, imply that the WHCoA agrees with or endorses the recommendations.

Sponsoring organizations will be required to file a report of the event. The reports shall be 3-5 pages in length, double spaced, and should summarize recommendations adopted regarding implementation of WHCoA resolutions. These recommendations may address any aspect of implementation, including, but not limited to:

- Issues related to responsibility (federal, state and local government, private and/or foundation sector, individuals/families, or a combination of the above);
- Issues related to cost (reallocation of existing resources, obtaining additional funding if necessary, offsetting costs); and
- Issues related to process (specific legislative or regulatory recommendations, immediate goals and long-term timetables, suggestions to guide interested private sector participants).

These reports will be collected for future dissemination to the most appropriate entity. Some targets for distribution include: (1) The Administration on Aging and other divisions within the U.S. Department of Health and Human Services; (2) U.S. Departments of Housing, Veterans Affairs, and other federal government entities; (3) state and local government entities; (4) Congressional offices; (5) national and state organizations (6) corporations and private sector entities; and (7) nonprofit and grassroots organizations.

Interested organizations should submit a letter of intent asking for WHCoA recognition of the event to the White House Conference on Aging; 501 School Street, SW, 8th floor; Washington, D.C. 20024-2755. The letter must include the name, address, telephone number and contact person of the organization, as well as a brief description of the proposed post-conference event including the theme and/or title. All submissions must be received by May 31, 1995.

II. Public Comments

After the close of conference on May 5, 1995, the White House Conference on Aging will accept public comments from individuals and organizations that address practical aspects of resolution implementation. Like the reports generated from the post WHCoA events, submissions must focus on one or more of the three aspects of resolution implementation listed above and are to be a maximum of five pages long. Comments should be sent to the address listed in section I to be forwarded to the most appropriate entity to oversee implementation. The deadline for WHCoA consideration of these comments is October 13, 1995.

Dated: February 22, 1995.

Fernando M. Torres-Gil,
Assistant Secretary for Aging.

IFR Doc. 95-4851 Filed 2-27-95; 3:45 pm

BILLING CODE 4130-02-M

The Legacy of Previous WHCoAs

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.

The main goal of a WHCoA is to develop recommendations on aging policy for the next decade. The 1995 Conference, last such one of this century, will have tremendous impact on aging concerns well beyond year 2000. WHCoA '95 will continue the legacy of legislation and programs, of public and private initiatives and just as importantly, of individuals, young and old, celebrating the contributions of seniors and working together to improve the quality of life for all of us.

The previous WHCoAs were convened first in 1961, then in 1971 and most recently in 1981. "The Nation and its Older People" was the theme of the 1961 WHCoA. More than 2500 delegates made a total of 947 recommendations.

Their work contributed to the later enactment of such landmark legislation as Medicare and Medicaid as well as the Older Americans Act of 1965.

The theme of the 1971 Conference was "Toward a National Policy on Aging" and to this end 3,574 delegates produced 710 recommendations. This work contributed to legislation enabling the Supplemental Security Income Program, the Older Americans Act Nutrition Program, Home Care, the National Institute of Aging as well as the House Select Committee on Aging.

In 1981, some 2200 delegates participated in the Conference and they developed 663 recommendations. Their work contributed to the comprehensive Social Security Reform amendments of 1983.

The process begins anew in 1995 when delegates confront the challenges of issues on aging in this time.



1995 WHITE HOUSE CONFERENCE ON AGING

CROSS-CUTTING CONCERNS FOR THE DELEGATES

CONTRIBUTIONS AND NEEDS OF SPECIAL POPULATIONS: INDIVIDUALS WITH DISABILITIES

Assuring Comprehensive Health Care Including Long-Term Care

- o Ineffective care often arises due to a lack of education and understanding of disability on the part of providers. Wages for Personal Assistant Service are inadequate.
- o There remains a bias toward institutional care in long-term care services due to rigid entitlements.
- o Health care is too often organized based upon age groups, instead of flowing across the continuum of care based need and activities of daily living.
- o There is a need for basic health coverage for an individual with a disability who wants to enter the work force and for long-term care services that offer enough support that an individual with a disability can live outside a facility.
- o There is a lack of rehabilitation services that assist an individual with a disability in returning to the workplace or returning to his/her home.

Promoting Economic Security

- o The financial safety net for persons with disabilities who have uncommon patterns of aging, such as Down's syndrome or cerebral palsy, is woefully inadequate.
- o Persons who are poor are more likely than the average American at every age to become disabled and persons who become disabled are more likely than the average American to become poor. The correlation between poverty and disability is accentuated with aging.
- o SSI regulations penalize families for providing in-kind support and maintenance, thereby discouraging greater self-sufficiency. SSI earned income regulations often serve as barriers to disabled persons transitioning to employment. SSI asset limits discourage saving for retirement.

- o The great majority of programs for people with disabilities, young and old, provide incentives to drop out of the workforce, out of school, out of the community (Social Security, SSI)—rather than provide opportunities for getting back into the mainstream of productivity or back to home.
- o Older Americans with disabilities and their families are burdened with disproportionate health and long-term care costs, particularly as they pertain to durable medical equipment and medication. Aging parents who establish trusts for their children with disabilities face significant Medicaid penalties.

Maximizing Housing and Support Service Options

- o Institutional bias segregates disabled elderly.
- o Disabled elders face financial burdens in paying for appropriate housing modifications and often lack of knowledge on how to make their environment more user friendly.
- o There is a general lack of accessible transportation services and a lack of community understanding of barrier free access.
- o There is a lack of longitudinal research on alternative living arrangements for disabled elders.
- o Innovative options for home ownership for persons on federally fixed incomes will not occur until incentives exist in the banking community.

Maximizing Options for a Quality Life

- o Identifying older people with disabilities as a separate group isolates them.
- o Programs and policies often discourage, rather than encourage and support, individual families in planning and making later life choices.
- o There is a lack of opportunities for employment of disabled persons in the community. Regulatory and statutory barriers exclude persons with lifelong disabilities from participating in generic aging services.
- o There is a need to recognize and support multigenerational families that may have an aging parent caring for an adult child with a disability and/or grandparents caring for a grandchild with a disability.
- o Loss of autonomy is one of the most frustrating facets of aging and having a disability. The additive effect can have devastating consequences by age 50.

Testimony of
Robert L. White
Director

Thursday
February 2, 1995

**Department of
Health and Human
Services**

Administration on Aging

Final Agenda for the 1995 White House
Conference on Aging; Notice

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration on Aging

Final Agenda for the 1995 White House Conference on Aging

AGENCY: White House Conference on Aging, AoA, HHS.

ACTION: Notice of final agenda.

SUMMARY: The Policy Committee on the White House Conference on Aging is publishing the final agenda for the May 1995 Conference. To formulate this final agenda, the Policy Committee used public comments received on the proposed agenda published October 12, 1994, in the *Federal Register* and recommendations emanating from several hundred pre-conference events held around the country. Part I of the final agenda is an overview of the comments received on the proposed agenda; Part II covers the Conference theme, Part III specifies the issues and subissues for which resolutions are to be developed and the structure of the Conference program; and the final section, Part IV, describes the process to be used to develop and pass resolutions at the Conference.

FOR FURTHER INFORMATION CONTACT: White House Conference on Aging, 501 School Street, SW., 8th Floor, Washington, DC 20024-2755. The main telephone number for the Conference is (202) 245-7116 and the FAX number is (202) 245-7857. The INTERNET address (CONFERENCE@BAN-GATE.AOA.DHHS.GOV) may also be used.

SUPPLEMENTARY INFORMATION: Immediately after President Clinton formally called for the 1995 White House Conference on Aging (WHCoA) in February 1994, solicitation from a wide range of sources—especially from the grassroots—of suggestions and ideas for the Conference agenda began. A main source of this input has been more than 600 recognized activities, events and programs that have been held or will be held around the country as a prelude to the May Conference in Washington, DC. Other major sources have been the public comments on the proposed agenda and the letters received from States, individuals, and public and private organizations.

From the recognized events that have been held, over 300 reports have been received detailing the policy recommendations generated from the events. Input received from this variety of local, state, regional and national events conducted on behalf of the WHCoA over the past ten months points

toward an agenda that goes beyond traditional boundaries and paints a broad picture of aging—an agenda that looks at the present and the future. This Conference should examine the needs and contributions of today's and tomorrow's older citizens. The specific issues addressed by the recommendations parallel the public comments received on the proposed agenda.

The Older Americans Act Amendments of 1992, Public Law 102-375, required that the Policy Committee (which oversees the 1995 White House Conference on Aging) formulate and approve a proposed agenda for the Conference and that this proposed agenda be published in the *Federal Register* for public comment. The proposed agenda was published on October 12 and the comment period closed approximately seven weeks later on December 1. More information on the comments is provided in Part I.

The main goal of the 1995 WHCoA is to provide resolutions to influence national aging policy and to develop a blueprint for action to have these resolutions implemented. This Conference, the last one of this century, will have a major impact on aging concerns into the 21st century. To focus the impact of the WHCoA on those issues of overwhelming concern, the number of resolutions presented to the Conference delegates for passage will be limited. The process for development and passage of resolutions is described in Part IV.

Part I Comments on the Proposed Agenda

This part of the final agenda provides information on the comments received on the proposed agenda published in the *Federal Register*. The proposed agenda included four proposed themes for the Conference from which a final theme would emerge based primarily on public comments and a listing of major issues and subissues.

Written comments on the proposed agenda formulated and approved by the Policy Committee were received from 915 individuals and organizations. Fifty-nine percent of the comments came from individuals, many of them older citizens.

Approximately one-half of the commenters responded to the request for comments on a theme for the Conference. They indicated their preferences among the four proposed themes, combined elements of the four proposed themes or proposed different themes. The responses tabulated as follows:

Themes	Re-sponses
"Aging into the 21st Century: Generations Working Together for a Better Community"	89
"Investing in an Aging Society into the 21st Century: Independence, Opportunity and Dignity for All Americans"	42
"Investing Now in America's Future: A Lifetime of Productivity and Opportunity"	52
"America Now and into the 21st Century: Growing Older with Independence, Opportunity and Dignity"	163
Other (combined elements or proposed new theme)	108

Comments focused on the need to look ahead to the future, the interdependence among generations, the importance of maintaining independence and dignity as one ages and the options and opportunities that need to be present throughout life.

In the proposed agenda published in the *Federal Register*, commenters were asked to indicate the relative importance of the issues and subissues and to provide on how they might be linked. The comments received provided information on the specific issue or issues which were of paramount concern to commenters or their organizations. The tabulation of responses on the 19 issues listed in the proposed agenda for the Conference resulted in the following rank order of the issues:

1. Health.
2. Income security and other benefits.
3. Housing/social and community services.
4. Crime/personal safety.
5. Interdependence of generations.
6. Quality of life/meaning in later years.
7. Special constituencies.
8. Productive older people.
9. Employment.
10. Older Americans Act and its role.
11. Transportation.
12. Rights/responsibility/advocacy Arts and humanities.
13. Image of older people.
14. Research and education/training.
15. Cultural diversity.
16. Family and family life.
17. Role of the private sector.
18. Technology.

"Health" was an overwhelming concern of the commenters. The "health" issue received more than twice as many comments as the second ranked issue, "Income security and other benefits." Another common concern of the commenters was combining housing and social and community services. Many commenters thought housing

issues should be considered separately from services.

Numerous commenters were concerned about the number of issues covered in the proposed agenda and the ability of delegates to deal with this vast array of issues. These commenters suggested limiting the number of issues to be addressed at the Conference to those considered most pressing and provided guidance on the issues they thought met this criterion. There were a number of very thoughtful letters suggesting how the issues and subissues could be linked both for discussion and for development of resolutions at the Conference.

Part II. Conference Theme

The Policy Committee decided on a theme that combined aspects of the two top-ranked proposed themes. The theme for the Conference is: "America Now and into the 21st Century: Generations Aging Together with Independence, Opportunity and Dignity."

Part III. Issues To Be Addressed at the Conference and the Structure of the Conference Program

This part of the notice addresses both the issues to be covered in the final agenda and the structure of the Conference program in which the issues are to be discussed and resolutions passed.

After considerable deliberation, the Policy Committee narrowed the focus of the Conference to four issues with several cross-cutting concerns which are to permeate both the discussion of the issues and the resolutions process. In the view of the members of the Policy Committee, these four issues are the ones considered most pressing and critical to aging policy based on the comments received on the proposed agenda and the recommendations generated by pre-conference events.

The attention to be focused on these four issues does not deny the importance of other issues and subissues included in the proposed agenda. However, the Policy Committee agreed with commenters that it would not be possible to cover adequately all these issues within the context of a three day conference and they made the decision to concentrate on core issues.

The list below specifies the four issues and the subissues to be covered under each issue. For each issue, cross-cutting concerns are repeated to emphasize their importance to the discussion of each issue. In addition, the relevant current Federal programs are named for each issue.

The four major issues and subissues determined by the Policy Committee are:

Assuring Comprehensive Health Care Including Long-Term Care

- Promotion and prevention.
- Access to quality care.
- Continuum of care integrating community and social services.
- Medicare/Medicaid/Older Americans Act.
- Research and education.

Cross-cutting concerns:

Interdependence among generations and among members of extended families, and the responsibility of individuals to plan for changes that will occur throughout their lifespan; Unique contributions and needs of special populations, especially veterans, caregivers (including grandparents), rural elderly, women, minorities and individuals with disabilities

Current Federal programs: Medicare (Title XVIII of the Social Security Act), Medicaid (Title XIX of the Social Security Act), Older Americans Act, Veterans Health Benefits (Chapter 17, Title 38), Social Services Block Grant, food stamps, NIH programs

Promoting Economic Security

- Employment.
- Social Security.
- Other retirement income and resources, including pension reform.
- Poverty and hunger.
- Tax policy.
- Discrimination.

Cross-cutting concerns:

Interdependence among generations and among members of extended families, and the responsibility of individuals to plan for changes that will occur throughout their lifespan; Unique contributions and needs of special populations, especially veterans, caregivers (including grandparents), rural elderly, women, minorities and individuals with disabilities

Current Federal programs: Social Security (Title II of the Social Security Act: Old-age, Survivors, and Disability Insurance Benefits), Supplemental Security Income (Title XVI of the Social Security Act: Supplemental Security Income for the Aged, Blind and Disabled), Older Americans Act, Veterans Compensation and Pensions (Chapter 11, Title 38), vocational rehabilitation, adult education, Job Training Partnership Act, Age Discrimination in Employment Act,

Employment Retirement Income Security Act

Maximizing Housing and Support Service Options

- Range of options/availability.
- Affordability/financing/tax policies.
- Linking support services to housing.
- Consumer choice/decision-making/promoting independence.

Cross-cutting concerns:

Interdependence among generations and among members of extended families, and the responsibility of individuals to plan for changes that will occur throughout their lifespan; Unique contributions and needs of special populations, especially veterans, caregivers (including grandparents), rural elderly, women, minorities and individuals with disabilities

Current Federal programs: Public and Indian housing; section 202, Capital Advances for Housing the Elderly and section 811, Housing for the Disabled; section 231, Mortgage Insurance for Housing the Elderly; section 221(d) (3) and (4), Mortgage Insurance for Nursing Homes, Intermediate Care Facilities, and Board and Care Homes; section 236, Mortgage Interest Reduction Payments; Congregate Housing Services Program; Flexible Subsidy and Loan Management Set-aside Funding; Manufactured Home Parks; Home Equity Conversion Mortgage Insurance Demonstration; section 8, Rental Certificates and Rental Vouchers; Home Investment Partnership; Emergency Shelter Grants Program; Supportive Housing Demonstration Program; Farmers Home Administration housing; low-income home energy assistance; Community Service Block Grant; Community Development Block Grant; VA home loan programs (Chapter 37, Title 38)

Maximizing Options for a Quality Life

- Resources for elders (community and social services/activities).
- Crime, personal safety and elder abuse.
- Spiritual well-being, ethics, values and roles.
- Image and roles of older people.
- Elders as resources and opportunities for volunteering.
- Isolation and loneliness.
- Legal issues.

Cross-cutting concerns:

Interdependence among generations and among members of extended

families, and the responsibility of individuals to plan for changes that will occur throughout their lifespan; Unique contributions and needs of special populations, especially veterans, caregivers (including grandparents), rural elderly, women, minorities and individuals with disabilities

Current Federal programs: Older Americans Act, Social Services Block Grant, National Senior Service Corps, Violent Crime Control and Law Enforcement Act of 1994

Background papers on these issues will be provided to delegates in advance of the Conference to allow them to prepare for and actively participate in the Conference.

To develop a structure for the Conference program, the Policy Committee was guided by the following principles:

- Each delegate shall have an opportunity to participate in discussion/resolution development of several issues so that he/she can see the interrelationships among the issues;
- These opportunities shall be provided in smaller group settings of delegates;
- At least three hours are needed for substantive discussion of an issue; and
- Time and space shall be provided for caucuses by special constituencies/populations.

Based on these principles, the following structure for the Conference evolved:

Date and time	Activity
Tuesday, May 2— 7:00 p.m.—?	Brief opening/speak out.
Wednesday, May 3:	
9:00 a.m.— 11:00 a.m.	Formal opening session.
11:30 a.m.—1:00 p.m.	Special constituency caucuses.
2:00 p.m.—5:00 p.m.	First issue resolution development session.
Evening	Delegates on their own.
Thursday, May 4:	
8:30 a.m.—11:30 a.m.	Second issue resolution development session.
Noon—1:00 p.m.	Special constituency caucuses.
1:30 p.m.—4:30 p.m.	Third issue resolution development session.
5:00 p.m.—7:00 p.m.	Special constituency caucuses.
Evening	Plenary session (tentative).
Friday, May 5: 7:00 a.m.—9:00 a.m.	Initial voting to determine the 40 priority resolutions.

Date and time	Activity
10:00 a.m.—11:30 a.m.	Plenary session to adopt the 40 priority resolutions and consider delegate resolutions.
11:30 a.m.—Noon	Closing session.

Each delegate will have the opportunity to participate in three issue resolution development sessions. All four issues and subissues are to be offered concurrently at each of the three issue resolution sessions. More specific information on the Conference program will be provided to delegates in March and April. Delegates will be asked to indicate preferences among the four issues for participation in three issue resolution development sessions. Every effort will be made to accommodate delegates' preferences.

Part IV. Conference Resolutions Process

This section of the final agenda for the Conference will discuss the process to be used for development and passage of resolutions. A major outcome of any White House Conference is a series of recommendations or resolutions for the development of future policy.

The Policy Committee decided to concentrate the attention of the delegates on a limited number of resolutions. This action was taken to avoid the experience of past White House Conferences from which large numbers of recommendations were produced. The Policy Committee recognizes that the importance of recommendations as guidance for setting policy is diminished when the Conference delegates pass hundreds of recommendations for action.

There will be two avenues for the introduction of resolutions to the Conference delegates. Described below is the first avenue, which begins with the pre-conference events and continues through the three issue resolution development sessions in which each delegate will participate. The Policy Committee has decided that this process will result in passage of no more than 40 resolutions by the Conference delegates.

The second avenue for the introduction of resolutions is by delegates at the Conference. To be voted on by the delegates on Friday morning, a resolution must have the signatures of at least 10% of the delegates by midnight Thursday. These resolutions will be in addition to the 40 resolutions generated by the issue resolution development sessions.

The recommendations generated by pre-conference events will provide the basis for development of Conference

resolutions in each of the four issue areas. An Issue Resolution Steering Committee for each issue, composed of recognized experts on the issue and several Policy and Advisory Committee members, will review the relevant pre-conference recommendations to produce a series of resolutions to be considered by the delegates.

The White House Conference on Aging is looking for resolutions which are substantive and can be translated into action at the various levels of government and/or in the private sector. The Policy Committee, therefore, encourages resolutions, to the extent possible, that are structured to include information which addresses:

- Availability (scope of services, level of providers, settings);
- Quality (processes and outcomes);
- Access (affordability, physical access and transportation);
- Responsibility (individual/government, public/private, Federal/State/local); and
- Cost (savings/financing, benefit).

Draft resolutions for each of the issues will be sent to delegates several weeks before the Conference for their review. Delegates will have the opportunity to review the resolutions and come to the Conference prepared to offer suggestions, modifications or new resolutions for consideration. The draft resolutions will serve to initiate discussion in the issue resolution development sessions on Wednesday and Thursday. The Issue Resolution Steering Committee for each issue will review and consolidate the resolutions from each of its issue resolution development sessions. There could be as many as 50 sessions on a single issue.

A revised set of resolutions will be presented to the delegates for review before voting on Friday morning. This revised set will include resolutions introduced through both avenues, pre-conference recommendations and delegates at the Conference.

The Policy Committee is investigating ways in which delegates may vote individually on resolutions Friday morning before the plenary session begins. This voting process would be used to allow delegates to determine resolutions to be brought to the plenary session. A simple majority will be required for passage of resolutions at the plenary session.

Dated: January 26, 1995.

Fernando M. Torres-Gil,

Assistant Secretary for Aging.

[FR Doc. 95-2431 Filed 2-1-95; 8:45 am]

BILLING CODE 4130-02-M

Activities Related to Disability Issues

White House Conference on Aging

1. Pre-conference Activities

Mini-conference: "National Summit on Disability and Aging"
National Coalition on Disability and Aging
March 1995
Washington, DC

Funded mini-conference: "Developmental Disabilities and Aging"
Eunice Kennedy Shriver Center
March 1995
Durham, NH

Funded mini-conferences: "Aging and Vision"
American Foundation for the Blind
March 1995
April and July 1994
Atlanta, GA; San Francisco, CA; and Alexandria, VA

Mini-conference: "Osteoporosis"
National Osteoporosis Foundation
March 1995
Chicago, IL

Mini-conference: "Alzheimer's Caregiving"
Alzheimer's Association
March 1995
Parsippany, NJ

Mini-conference: "Issues on Aging Relating to Persons with Mental Retardation"
Center for the Retarded, Inc.
March 1995
Houston, TX

Mini-conference: "Alzheimer's Disease"
California Association of Health Facilities
March 1995
San Gabriel Valley, CA

Mini-conference: "Empowering the Alzheimer's Community"
Alzheimer's Association
March 1995
San Francisco, CA

Mini-conference: "Mental Health and the Older Adult"
Los Angeles County Department of Mental Health
February 1995
Los Angeles, CA

Mini-conference: "Aging/DD"
Hawaii University Affiliated Program
January 1995
Honolulu, HI

Mini-conference: "Older Caregivers of Adults with Developmental Disabilities"
New York State Office of MR/DD and Young Adult Institute
January 1995
New York, NY

Mini-conference: "Meeting the Mental Health Needs of Older Adults"
Geriatrics Committee, Department of Mental Health, Mental Retardation and Alcoholism Services
January 1995
New York, NY

Mini-conference: "Mental Health and Aging"
Coalition on Mental Health
October 1994
Washington, DC

Mini-conference: "Hearing Impairment: Policy and Awareness for the Aging"
International Hearing Society
August 1994
Nashville, TN

Mini-conference: "Mental Retardation and Aging"
University of Illinois/Chicago
July 1994
Alexandria, VA

Mini-conference: "Age-related Vision Loss"
Lighthouse National Center for Vision and Aging
June 1994
Los Angeles, CA

2. Delegates to WHCoA (total of 89 delegates)

Delegates who indicate some disability (71 delegates)

National disability organizations asked to appoint a delegate (6 delegates)

- o Consortium Concerned with Disabilities
- o National Coalition on Disabilities and Aging
- o American Association of University Affiliated Programs
- o American Association on Mental Retardation
- o National Parent Network on Disabilities
- o ADAPT

National organizations sponsoring pre-conference events asked to appoint a delegate (4 delegates)

- o American Council of the Blind
- o Eunice Kennedy Shriver Center
- o Coalition on Mental Health and Aging
- o International Hearing Society

Veterans organizations (1 delegate)

- o Paralyzed Veterans Association

Leadership Council of Aging Organizations (6 delegates; two each member organization)

- o American Foundation for the Blind
- o National Osteoporosis Foundation
- o Alzheimer's Disease and Related Disorders Association, Inc.

Advisory Committee member Karyl Eckels from the World Institute on Disability (1 delegate)

3. WHCoA Advisory Committee Members

Karyl Eckels from the World Institute on Disability

4. Advisory Committee on Disabilities

- o 10 members to be appointed by Secretary Shalala
- o The purpose of the committee is to provide leadership and guidance for the Conference, particularly post-conference, with respect to disability issues as they relate to aging
- o Conference call meeting during the week of April 24 to obtain views
Meeting at the Conference
Final meeting after the Conference

5. Disability as a cross-cutting issue for the resolutions

Paper sent to delegates on 4/10 (copy included in packet)

April 11, 1995

MEMORANDUM TO CAROL H. RASCO AND ROSALYN MILLER

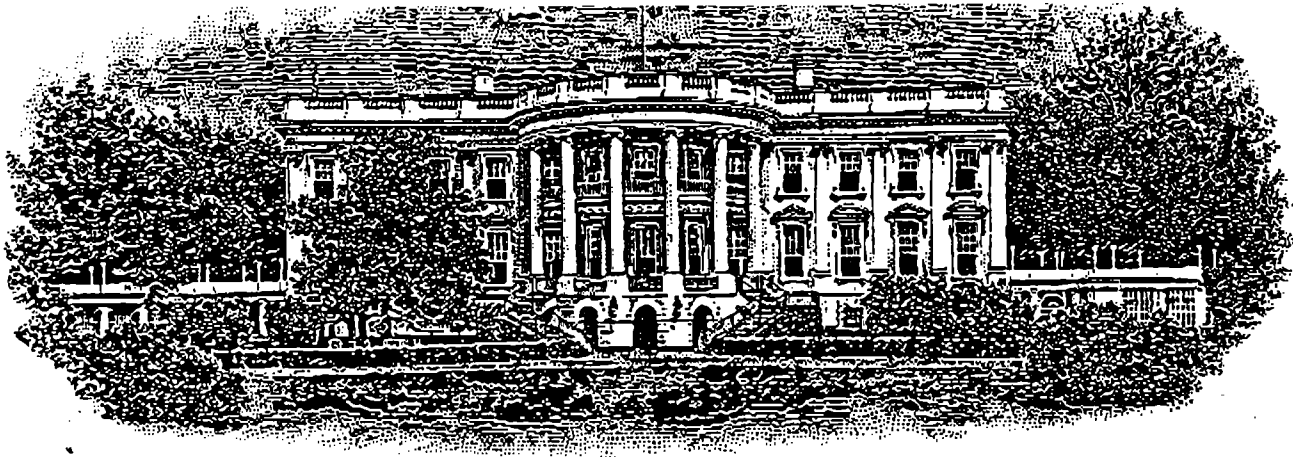
FROM: Elisabeth Cohen & Diana Fortuna
DATE: 4/11/95
RE: Appointees with Disabilities 4/10/95 meeting

Yesterday's meeting with the Appointees was informative and well attended. Both guests gave thorough, impressive presentations which sparked interesting discussion within the group.

Jim Slattery was new to many of the attendees and seemed to be well-received. Judy Heumann and others made some suggestions regarding other groups that Slattery might want to speak to in coming weeks. In response, we invited him to present during the April, 20 meeting of the Federal Interagency Coordinating Council (FICC) where I will be discussing the National Disability Policy Review, and he has agreed to do so.

The group did not offer any specific suggestions regarding future meetings and were not overly-enthusiastic regarding an update on the Kaleidoscope channel as a possible future meeting topic. Judy Heumann did mention (and others agreed) that the National Disability Policy Review should be included in the next meeting agenda.

Attached please find thank you notes to the speakers; please let us know if any additional follow-up is required.



1995 WHITE HOUSE CONFERENCE ON AGING FACT SHEET

The fourth White House Conference on Aging (WHCoA) -- and the last of this century -- will be held May 2-5, 1995, in Washington, D.C. President Clinton called for the Conference on February 17, 1994. The WHCoA Policy Committee, a 25-member body appointed by the President and the Congress, set the dates and place at its first meeting on July 27, 1994. Senator David Pryor (D-AR) chairs the Policy Committee.

On January 25, 1995, the Policy Committee approved a theme and final Conference agenda. The theme is "America Now and Into the 21st Century: Generations Aging Together with Independence, Opportunity and Dignity." Four broad issues comprise the agenda: (1) Assuring Comprehensive Health Care Including Long Term Care, (2) Promoting Economic Security, (3) Maximizing Housing and Support Service Options, and (4) Maximizing Options for a Quality Life. In deciding on the theme and final agenda, the Policy Committee considered public comments on theme possibilities and a draft agenda published in the Federal Register October 12, 1994. In addition, reports and recommendations from hundreds of officially recognized WHCoA events throughout the country were considered in developing the final agenda, which was published in the Federal Register February 2, 1995.

Two cross-cutting concerns pervade the agenda and will influence discussions at the Conference. These are: (1) interdependence among generations and among members of extended families, and the responsibility of individuals to plan for changes that will occur throughout their lifespan; and (2) unique contributions and needs of special populations, especially veterans, caregivers (including grandparents), rural elderly, women, minorities and individuals with disabilities.

Purposes of the WHCoA are to shape resolutions that will influence national aging policy over the next decade and design a strategy for putting policy into action -- for implementing the resolutions the Conference produces.

The 1995 Conference, authorized by the 1992 Amendments to the Older Americans Act, will have 2,258 delegates. In addition, it will have up to 250 observers, individuals who may attend the Conference but not vote. Delegates are selected by governors, members of Congress, constituent organizations (including national aging organizations and veterans groups), the White House, the HHS Secretary and the WHCoA.

Since President Clinton officially called it on February 17, 1994, the WHCoA has developed a full national program of pre-Conference events and activities. More than 700 events have been held or scheduled, including local, state, regional and mini-conferences. In addition, the WHCoA, in partnership with other organizations, has conducted more than 15 focus groups in a variety of cities throughout the country to gain direct input from individuals, primarily seniors, on their attitudes about aging and their views on what the WHCoA should focus on and strive to accomplish.

President Clinton appointed Robert B. Blancato as executive director of the 1995 WHCoA. Members of the WHCoA Policy Committee are:

David Pryor, U.S. Senate (D-AR), Chair
William S. Cohen, U.S. Senate (R-ME)
Daniel P. Moynihan, U.S. Senate (D-NY)
Barbara A. Mikulski, U.S. Senate (D-MD)
Constance A. Morella, U.S. House of Representatives (R-MD)
Andrew Jacobs, Jr., U.S. House of Representatives (D-IN)
William J. Hughes, U.S. House of Representatives (D-NJ)
(retired)
Matthew G. Martinez, U.S. House of Representatives (D-CA)
Donna E. Shalala, Secretary of Health and Human Services
Henry G. Cisneros, Secretary of Housing and Urban Development
Jesse Brown, Secretary of Veterans Affairs
Norman Abramowitz, Mayor of Tamarac, FL
Bea G. Bacon, Central States Coalition on Aging, Olathe, KS
Horace B. Deets, Executive Director, American Association of Retired Persons
James T. DeLaCruz, Coordinator, Quinault Senior Citizens Program, Tahola, WA
Rose Dobrof, Executive Director, Brookdale Center on Aging of Hunter College, New York, NY
Madeleine R. Freeman, Orono, ME
Maralee Lindley, Director, Illinois Department on Aging, Springfield, IL
Thomas H.D. Mahoney, Cambridge, MA
Mary Rose Oakar, President, Healthright, Inc., Cleveland, OH
Herb A. Sanderson, Director, Division of Aging and Adult Services, Arkansas Department of Human Services,
Little Rock, AR
Samuel J. Simmons, President and Chief Executive Officer, National Caucus and Center on Black Aged, Inc.
Lawrence T. Smedley, Executive Director, National Council of Senior Citizens
Marta Sotomayor, President, National Hispanic Council on the Aging
Daniel Thursz, President, National Council on the Aging

FEBRUARY 1995

Meeting of the Appointees with Disabilities

April 10, 1995, 2:00 - 3:30 p.m.
The Roosevelt Room

sign-in

name/agency	phone/fax
1. DON ITZKOFF FEDERAL RAILROAD ADMINISTRATION	366-0857
2. FERNANDO TORRES-Gil DHHS	401-4634
3. Fred Schroeder RSA	205-5482/205-9874
4. UZ Sawatz DOT	5144274 5740293
5. Michael GRANT OPM	606-2084 606-3557
6. Pat Parisi Dept of	312-2647005
7. SPEED DAVIS NED	202-277-2024 (fax)
8. Paul Skon Miller FEOL	663-4036/663-7101
9. Hughes HUD	708-2426/708-1558
10. Michael Witten Dept of TRANSPORTATION	366-578/366-7951
11. Deidre A. Davis Do State	647-9295/647-4969
12. Judy Heermann DOE/OSERS	
13. Kate Seelman DOE/OSERS/NIDRR	205-8434
14. Bob Williams ADD	690-6590
15. Bob Jones VA/WHOPC	573-4836
16. Kate Kane ADD	202 690-6120
17. Theda Zawdanya OSERS	205-8148
18. Gary Blumenthal PCMR/HHS	619-0634

	name/agency	phone/fax
19.	Elaine Fritz	272-2228, fax 272-2233
20.	Jim Senter	429-3372
21.	Diana Fortuna	456-5570
22.		
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April 10. 1995, Rooselelt Room
2:00 - 3:30 p.m.
Staff contact: Diana Fortuna

Donald Itzkoff

Fredric Schroeder

Susan Benbow

Elizabeth Savage

Fernando Torres-Gil

Richard Edward Espinosa

Patricia Parisi

Michael A. Grant

Andy Imparato

Paul S. Miller

Thea Spires

Katherine D. Seelman

Bob Williams

Kate Warren

Theda Zawaiza

Mike Winter

Speed Davis

Deidre Davis

Gary Blumenthal

Howard Moses

Judy Heumann

Nancy Eustis

Janet Allem

Jim Slattery

Petra Johnson

Joyce-Brown Moore

Ruth Katz

White House:

Bob Boorstin (may arrive late)

Bob Jones

Michela Alioto

Carol Rasco (called into a medicare meeting with the President,
will arrive late)

Diana Fortuna

Elisabeth Cohen

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001. list	Re: April 10, 1995, Roosevelt Room (partial, DOB) (1 page)	00/00/0000	b(6)

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Domestic Policy Council
Diana Fortuna
OA/Box Number: 12028

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April 10 Appointees Meeting [1]

2018-0525-S
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RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

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RR. Document will be reviewed upon request.

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b(1) National security classified information [(b)(1) of the FOIA]
b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

• = call in on Mon am

April 10. 1995, Roosevelt Room
2:00 - 3:30 p.m.
Staff contact: Diana Fortuna/ ext:65570

U# 47399

✓Donald Itzkoff
✓Fredric Schroeder
✓Susan Benbow
✓Elizabeth Savage
✓Fernando Torres-Gil
Richard Edward Espinosa
✓Patricia Parisi
✓Michael A. Grant
Andy Imperato
✓Paul S. Miller
✓Thea Spires
✓Katherine D. Seelman
✓Bob Williams
✓Kate Warren
✓Theda Zawaiza
✓Mike Winter
✓Speed Davis
✓Deidre Davis
✓Gary Blumenthal
Howard Moses
✓Judy Heumann
✓Nancy Eustis *come late*
Janet Allem
✓Jim Slattery
✓Petra Johnson

(b)(6)

[001]

Joyce-Brown Moore

(b)(6)

Elmer Clow

(b)(6)

Andrew Spurgeon

(b)(6)

in attendance and don't need to be cleared:

Bob Boorstin (may arrive late)

✓Bob Jones

Michela Alioto

THE WHITE HOUSE
WASHINGTON

Meeting of the Appointees with Disabilities

**April 10, 1995, 2:00 - 3:30 p.m.
The Roosevelt Room**

Agenda

Welcome and Introduction

**Carol H. Rasco
The White House**

National Commission on Childhood Disability

**Jim Slattery
Chair**

1995 White House Conference on Aging

**Fernando Torres-Gil
Assistant Secretary for
Aging**

Open Forum

Full Group

Closing

Carol H. Rasco

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002. list	Re: April 10, 1995, Roosevelt Room (partial, DOB) (1 page)	00/00/0000	b(6)

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car clearance:

x 62861

April 10. 1995, Roosevelt Room
2:00 - 3:30 p.m.
Staff contact: Diana Fortuna

Donald Itzkoff

Fredric Schroeder

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Elizabeth Savage

Fernando Torres-Gil

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Michael A. Grant

Andy Imperato

Paul S. Miller

Thea Spires.

Katherine D. Seelman

Bob Williams

Kate Warren

Theda Zawaiza

Mike Winter

✓ Speed Davis

Deidre Davis (grace)

Gary Blumenthal

Howard Moses

✓ Judy Heumann

Nancy Eustis

Janet Allen

Jim Slattery

Petra Johnson

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[002]

(b)(6)

in attendance and don't need to be cleared:

Bob Boorstin (may arrive late)

Bob Jones

Michela Alioto

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003. form	Request for Appointment Parking (partial, DOB) (1 page)	04/04/1995	#Error

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P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

b(1) National security classified information [(b)(1) of the FOIA]
b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

faxed - 4/4

REQUEST FOR APPOINTMENT PARKING

THIS FORM MUST BE COMPLETED AND SENT BY FAX
TO EXT. 61655 AT LEAST 2 HOURS IN ADVANCE
(or by 5:00 p.m. on Friday for weekend parking)

Date

4/4/95

Requestor's Name

Diana Fortuna

Requestor's Office

Domestic Policy Council

Phone Extension

65570

Room # 224

Date Parking Needed

4/10/95

Name of Driver

Elmer Clow

(b)(6)

- waves will
be contacted

Make of Car

Green Chevy Van

State and License #

D.C. 610 7983

Type Needed (check one):

Parking Space Needed

or Drop-off Only



Time of Arrival

1:45 pm

Time of Departure

3:30 pm

Reason for Request

passenger uses wheel chair

- It is your responsibility to contact WAVES to clear in the driver and all passengers arriving in the car.
- Management and Administration reserves the right to deny any request for appointment parking.

REQUEST FOR APPOINTMENT PARKING

THIS FORM MUST BE COMPLETED AND SENT BY FAX
TO EXT. 61655 AT LEAST 2 HOURS IN ADVANCE
(or by 5:00 p.m. on Friday for weekend parking)

Date		
Requestor's Name		
Requestor's Office		
Phone Extension	Room #	
Date Parking Needed		
Name of Driver		
Make of Car		
State and License #		
Type Needed (check one):	Parking Space Needed _____ or Drop-off Only _____	
Time of Arrival		
Time of Departure		
Reason for Request		

- It is your responsibility to contact WAVES to clear in the driver and all passengers arriving in the car.
- Management and Administration reserves the right to deny any request for appointment parking.

REQUEST FOR APPOINTMENT PARKING

THIS FORM MUST BE COMPLETED AND SENT BY FAX
TO EXT. 61655 AT LEAST 2 HOURS IN ADVANCE
(or by 5:00 p.m. on Friday for weekend parking)

Date		
Requestor's Name		
Requestor's Office		
Phone Extension	Room #	
Date Parking Needed		
Name of Driver		
Make of Car		
State and License #		
Type Needed (check one):	Parking Space Needed _____ or Drop-off Only _____	
Time of Arrival		
Time of Departure		
Reason for Request		

- It is your responsibility to contact WAVES to clear in the driver and all passengers arriving in the car.
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REQUEST FOR APPOINTMENT PARKING

THIS FORM MUST BE COMPLETED AND SENT BY FAX
TO EXT. 61655 AT LEAST 2 HOURS IN ADVANCE
(or by 5:00 p.m. on Friday for weekend parking)

Date	_____
Requestor's Name	_____
Requestor's Office	_____
Phone Extension	Room # _____
Date Parking Needed	_____
Name of Driver	_____
Make of Car	_____
State and License #	_____
Type Needed (check one):	Parking Space Needed _____ or Drop-off Only _____
Time of Arrival	_____
Time of Departure	_____
Reason for Request	_____ _____

- It is your responsibility to contact WAVES to clear in the driver and all passengers arriving in the car.
- Management and Administration reserves the right to deny any request for appointment parking.

THE WHITE HOUSE
WASHINGTON

February 13, 1995

MEMORANDUM FOR SENIOR WHITE HOUSE STAFF
EOP AGENCY HEADS

FROM: JODIE TORKELSON
DEPUTY ASSISTANT TO THE PRESIDENT FOR
MANAGEMENT AND ADMINISTRATION

RE: West Executive Avenue Appointment Parking Policy

I would like to reiterate that the four appointment parking spaces on West Executive Avenue are primarily reserved for individuals entering the complex for meetings with:

- the President
- the Vice President
- the First Lady
- the Chief of Staff or,
- the Deputy Chiefs of Staff

For other meetings, visitors should be encouraged to seek parking outside of the complex. If the visitors are being driven, we strongly recommend that their drivers drop them off outside the complex.

If you feel that a parking space is absolutely necessary, please fill out a copy of the "Request for Appointment Parking" form. **However, spaces are only available for a short period of time.** When filling out the form, all requested information must be provided at least two hours in advance. If the form is not fully completed, your request can not be considered.

On weekends, staff members who do not already hold West Executive Avenue parking privileges should continue to park outside the complex.

Please remember, our office reserves the right to deny any appointment parking request if other parking arrangements should be made or, if space is unavailable.

Thank you for helping us ensure that the West Executive Avenue appointment parking spaces are correctly utilized.

REQUEST FOR APPOINTMENT PARKING

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TO EXT. 61655 AT LEAST 2 HOURS IN ADVANCE
(or by 5:00 p.m. on Friday for weekend parking)

Date

Requestor's Name

Requestor's Office

Phone Extension

Room #

Date Parking Needed

Name of Driver

Make of Car

State and License #

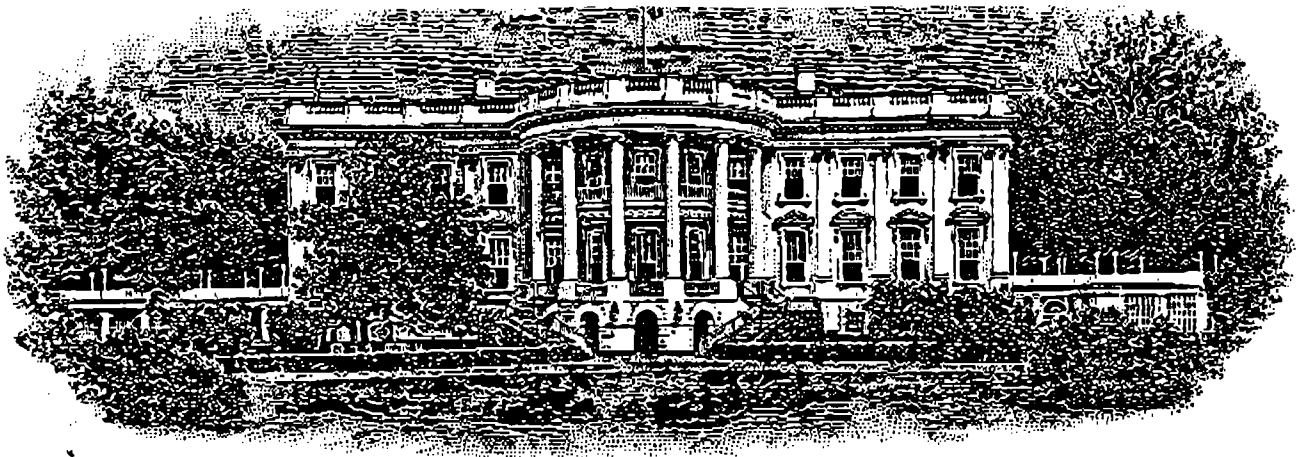
Type Needed (check one): Parking Space Needed _____ or Drop-off Only _____

Time of Arrival

Time of Departure

Reason for Request

- It is your responsibility to contact WAVES to clear in the driver and all passengers arriving in the car.
- Management and Administration reserves the right to deny any request for appointment parking.



1995 WHITE HOUSE CONFERENCE ON AGING FACT SHEET

The fourth White House Conference on Aging (WHCoA) -- and the last of this century -- will be held May 2-5, 1995, in Washington, D.C. President Clinton called for the Conference on February 17, 1994. The WHCoA Policy Committee, a 25-member body appointed by the President and the Congress, set the dates and place at its first meeting on July 27, 1994. Senator David Pryor (D-AR) chairs the Policy Committee.

On January 25, 1995, the Policy Committee approved a theme and final Conference agenda. The theme is "America Now and Into the 21st Century: Generations Aging Together with Independence, Opportunity and Dignity." Four broad issues comprise the agenda: (1) Assuring Comprehensive Health Care Including Long Term Care, (2) Promoting Economic Security, (3) Maximizing Housing and Support Service Options, and (4) Maximizing Options for a Quality Life. In deciding on the theme and final agenda, the Policy Committee considered public comments on theme possibilities and a draft agenda published in the Federal Register October 12, 1994. In addition, reports and recommendations from hundreds of officially recognized WHCoA events throughout the country were considered in developing the final agenda, which was published in the Federal Register February 2, 1995.

Two cross-cutting concerns pervade the agenda and will influence discussions at the Conference. These are: (1) interdependence among generations and among members of extended families, and the responsibility of individuals to plan for changes that will occur throughout their lifespan; and (2) unique contributions and needs of special populations, especially veterans, caregivers (including grandparents), rural elderly, women, minorities and individuals with disabilities.

Purposes of the WHCoA are to shape resolutions that will influence national aging policy over the next decade and design a strategy for putting policy into action -- for implementing the resolutions the Conference produces.

-over-

The 1995 Conference, authorized by the 1992 Amendments to the Older Americans Act, will have 2,258 delegates. In addition, it will have up to 250 observers, individuals who may attend the Conference but not vote. Delegates are selected by governors, members of Congress, constituent organizations (including national aging organizations and veterans groups), the White House, the HHS Secretary and the WHCoA.

Since President Clinton officially called it on February 17, 1994, the WHCoA has developed a full national program of pre-Conference events and activities. More than 700 events have been held or scheduled, including local, state, regional and mini-conferences. In addition, the WHCoA, in partnership with other organizations, has conducted more than 15 focus groups in a variety of cities throughout the country to gain direct input from individuals, primarily seniors, on their attitudes about aging and their views on what the WHCoA should focus on and strive to accomplish.

President Clinton appointed Robert B. Blancato as executive director of the 1995 WHCoA. Members of the WHCoA Policy Committee are:

David Pryor, U.S. Senate (D-AR), Chair
William S. Cohen, U.S. Senate (R-ME)
Daniel P. Moynihan, U.S. Senate (D-NY)
Barbara A. Mikulski, U.S. Senate (D-MD)
Constance A. Morella, U.S. House of Representatives (R-MD)
Andrew Jacobs, Jr., U.S. House of Representatives (D-IN)
William J. Hughes, U.S. House of Representatives (D-NJ)
(retired)
Matthew G. Martinez, U.S. House of Representatives (D-CA)
Donna E. Shalala, Secretary of Health and Human Services
Henry G. Cisneros, Secretary of Housing and Urban Development
Jesse Brown, Secretary of Veterans Affairs
Norman Abramowitz, Mayor of Tamarac, FL
Bea G. Bacon, Central States Coalition on Aging, Olathe, KS
Horace B. Deets, Executive Director, American Association of Retired Persons
James T. DeLaCruz, Coordinator, Quinault Senior Citizens Program, Tahola, WA
Rose Dobrof, Executive Director, Brookdale Center on Aging of Hunter College, New York, NY
Madeleine R. Freeman, Orono, ME
Maralee Lindley, Director, Illinois Department on Aging, Springfield, IL
Thomas H.D. Mahoney, Cambridge, MA
Mary Rose Oakar, President, Healthright, Inc., Cleveland, OH
Herb A. Sanderson, Director, Division of Aging and Adult Services, Arkansas Department of Human Services,
Little Rock, AR
Samuel J. Simmons, President and Chief Executive Officer, National Caucus and Center on Black Aged, Inc.
Lawrence T. Smedley, Executive Director, National Council of Senior Citizens
Marta Sotomayor, President, National Hispanic Council on the Aging
Daniel Thursz, President, National Council on the Aging

FEBRUARY 1995

THE WHITE HOUSE
WASHINGTON

Meeting of the Appointees with Disabilities

**April 10, 1995, 2:00 - 3:30 p.m.
The Roosevelt Room**

Agenda

Welcome and Introduction

**Carol H. Rasco
The White House**

1995 White House Conference on Aging

**Fernando Torres-Gil
Assistant Secretary for
Aging**

National Commission on Childhood Disability

**Jim Slattery
Chair**

Open Forum

Full Group

Closing

Carol H. Rasco

Executive Office of the President

OEOB Conference Rooms/White House Conference Center

Date of Meeting: April 10, 1995
 Time: 2:00pm To: 3:30pm

CONFIRMATION AND NOTIFICATION

Name of Individual Hosting Event: <u>Carol Rasco</u>		Office/Agency: <u>Domestic Policy Council</u>	
Staff Contact: <u>Diana Fortuna</u>		Extension No.: <u>x65570</u>	Room No.: <u>224-OEOB</u>
Type of Event: ☒ Meeting ☐ Reception ☐ Other _____			
Name/Description of Event: <u>Appointees with Disabilities Meeting</u>			
Number of Outside Guests: <u>30</u>		In Attendance:	
Total Number of Attendees: <u>38</u>		☐ President ☐ First Lady ☐ Vice President ☐ Mrs. Gore	
Room(s) Requested: ☒ Roosevelt Room ☐ Rm. 180 ☐ Rm. 472 ☐ Rm. 474 (Indian Treaty Room) ☐ Rm. 476 ☐ Rm. 450 ☐ Rm. 459 ☐ Other: _____			
White House Conference Rooms: ☐ Truman Room ☐ Wilson Room ☐ Eisenhower Room ☐ Jackson Room ☐ Lincoln Room			
General Services: ☐ Elevator Service ☐ #4 ☐ #6 ☐ #7 Time Reserved: _____ Floors Reserved: _____ ☐ Podium ☐ Flags			
Special Room Arrangements for the Indian Treaty/Truman Room: ☒ Conference Style ☐ Theatre Style ☐ Other: _____ Number of Chairs: _____ Number of Table(s): _____			
Entrance/Gate Preferred: ☐ 17th & G ☐ Pennsylvania Avenue ☐ Southwest Appointments Gate ☒ Northwest Appointments Gate ☐ East Appointments Gate ☐ East Visitors Gate			
Additional Requirements or Requests: <u>Ramp -- many attendees have wheelchairs</u>			

Forms Must be Returned to Room 1, OEOB, 48 Hours Prior to Event

1995 White House Conference on Aging

fact sheet

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Andrew Jacobs, Jr., U.S. House of Representatives (D-IN)
William J. Hughes, U.S. House of Representatives (D-NJ)(retired)
Matthew G. Martinez, U.S. House of Representatives (D-CA)
Donna E. Shalala, Secretary of Health and Human Services
Henry G. Cisneros, Secretary of Housing and Urban Development
Jesse Brown, Secretary of Veterans Affairs
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Lawrence T. Smedley, Executive Director, National Council of Senior Citizens
Marta Sotomayor, President, National Hispanic Council on the Aging
Daniel Thursz, President, National Council on the Aging



2nd hour on 4/10

*** MULTI TRANSACTION REPORT ***

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INCOMPLETE TX/RX

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