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The Editor of San Juan City Magazine would like to discuss the Clinton Administration's efforts to reform the health care system. The questions he would like to discuss are:

Question

When the Clinton Administration took office in 1993, universal health care was at the center of his crusade for social reform. The Clinton plan would have provided universal coverage for the medically indigent while controlling skyrocketing costs. IN your view, what were the primary factors leading to the derailment of the Administration's task force on health care reform?

Answer

The effort to reform the American health care system was a monumental task involving many changes at the same time. In retrospect, it is possible that we attempted to accomplish too much at one time. However, our guiding principle -- that every American should have access to affordable, high quality, health care -- remains the same. That is what is guiding our efforts in the current debate over health insurance reform and in our efforts to protect both the Medicare and Medicaid programs from the Republican attacks in Congress.

Question

Some insiders who participated in the task force mentioned that a process which had begun as an open dialogue shifted gradually to a closed door policy which hindered the progress of Mr. Clinton's plan. Is that true and if so, why did the shift occur?

Answer

Again, in retrospect there are always things that you would like to have done differently. However, it is important to note that this was a very open process that involved public hearings around the country, input from health care professionals and consumers. Once the President's plan was submitted to the Congress there were dozens of hearings in both houses of Congress. In contrast, I would note that the Republican Medicare plan was the subject of one hearing in each house of Congress. So, all of us need to learn from our mistakes.

Question

Given your experience with the reform process, what is your perspective on the best route to universal coverage?

Answer

We must do several things. First, we have to hold on to the coverage we have now.

That means protecting Medicare and Medicaid from the unreasonable reductions and policy changes being proposed by the Republicans in Congress. Second, it means incremental reforms in health insurance laws that will protect working Americans and their families who already have coverage. Too many people are locked into jobs because they are afraid they will lose their coverage if they change jobs. We also have to do away with discrimination in insurance based on pre-existing medical conditions. Finally, I want to continue our efforts to crack down on fraud and abuse in our health care system. Last year we began a program known as Operation Restore Trust in five states. The results have been remarkable and we are looking to expand it to the entire nation. Americans need to know that their government is serious about spending their health care dollars well and wisely.

Question

Initially, the Clinton Administration's focus had been preventive care, in keeping with concerns throughout the industry to keep costs down. The proliferation of HMOs seems to be the health care industry's response to that. Are HMOs the ideal model to accomplish health universal health care?

Answer

They may not be the entire answer but they certainly are a part of the answer. Managed care now represents nearly 50 percent of private health plan enrollment. And we have been very aggressive in increasing the number of choices available to those on Medicare and Medicaid. We have increased Medicare managed care enrollment by 30 percent and in Medicaid the increase is nearly 60 percent. But a lot of Americans are legitimately concerned about the influx of new plans into the system. We have to make sure that the new players are of as high a quality as the existing players. We have to make sure that people have a choice of plans and when they join managed care plans that they have choices as well.

Question

In an interview with San Juan Magazine, Ira Magaziner mentioned that competition is the linchpin for creating a system that keeps costs down. Do you agree with that view?

Answer

Competition is certainly a key element of cost containment. Greater competition among high-quality health plans can bring the cost of care down. We also have been working to increase the choice of plans in government programs like Medicare and Medicaid. The insurance reform legislation now making its way through Congress will help to remove some of the anomalies in the current system that may increase costs for many individuals.

(11] From: "aidsact@CritPath.Org" <aidsact@CritPath.Org> at -FABRIK/Internet 8/2
)/97 6:34AM (10494 bytes: 214 ln)
To: Jay Blotcher at AMFAR-NY,
"Multiple recipients of list" <aidsact@critpath.org> at -FABRIK/Internet
Subject: Request For Posting Alert on the Web & Crit Path List
---------- Message Contents ----------
From: aidsact@CritPath.Org
Date: Wed, Aug 20, 1997 6:34 AM
Subject: Request For Posting Alert on the Web & Crit Path List
To: Jay Blotcher; Multiple recipients of list
>August 06, 1997
>
>
> To: Members of the AIDS Community
>
> From: David Acosta, Executive Director
> The GALAEI Project
>
>
> Subject: Urgent Action Alert
>
>I hope your summer is going well. I am writing with both good and bad
>news. First the good news. As you may recall, a few months ago I sent
>you a bulletin regarding the government of Puerto Rico's intent to
>report the names of people with HIV/AIDS (PWA's) to both the government
>and other public health entities. This initiative known as proposition
>87 was defeated thanks to our efforts not only locally, but nationally.
>
>Now, another threat to the lives of PWA's in Puerto Rico has reared its
>ugly head. This is part of the ongoing AIDS crisis in Puerto Rico, and
>I am once again requesting your help in seeing to it that the proposed
>government objectives are defeated.
>
>The Puerto Rican Department of Health's office (DOH) is proposing
>several health care reform measures which will have a disastrous impact
>upon PWA's. The DOH wishes to replace existing HIV case managers with
>nurses, who are not trained in case management. This will reduce the
>amount of available services. The government has also made reductions in
>the personnel of the Ombudsman's office, which helped victims of AIDS
>discrimination. Furthermore, PWA's have had serious problems in
>obtaining their medications on a timely basis due to the government's
>failure to provide adequate drug supplies. This is unacceptable and a
>clear violation of existing protocol for HIV treatment and service
>provision.
>
>Therefore, I am once again asking for your support in an effort to
>raise consciousness and draw attention to this serious problem. Enclosed
>is a form letter to send to the Puerto Rican government. Please, mail it
>on your organization's letterhead and pass it along to other groups. We
>must put pressure on the Puerto Rican government and expose their
>atrocious actions. Their policies are not only a severe setback in HIV
>treatment, but will spell certain death for many suffering with HIV/AIDS
>in Puerto Rico. The success of the campaign against regulation 87 is a
>testament to how we can come together to fight against AIDSphobia. A
>possible press conference is being planned for late August/early
>September. You will be informed of the date. Only through this effort
>can we help save lives. Gracias. Recordemos que un pueblo unido, jamas
>ser´ vencido! Gracias.
>
>

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>
>August 6, 1997
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>To: Hon. Pedro Rosell´ Gonzalez, Governor
> Hon. Edison Misla Aldarondo, President of the House of Representatives
> Hon. Charlie Rodr´guez, President of the Senate
> Hon. Luis Arambur´ D´az, President of the Health & Welfare Commission
>
> C´mara de Representantes, Capitolio
> San Juan, PR 00901
>
>
>Dear Sirs:
>
>At the request of several organizations in Puerto Rico, we are writing
>to express our deep concern regarding some recent information we have
>received concerning health care for persons with HIV/AIDS in Puerto
>Rico. While the issues are diverse, taken together they point to a
>profound indifference by the government to the needs of people living
>with HIV. Our letter is motivated by a sense of partnership with our
>sister community based organizations, health professionals and the
>affected community of Puerto Rico. Although geographically separated, we
>are united in the same struggle to end the HIV/AIDS pandemic and to
>defend the rights and needs of people infected and affected by HIV/AIDS.
>
>Our concern began with two proposed regulations regarding testing for
>HIV and with burial protocols. The Department of Health and the
>Government of Puerto Rico began the current year by introducing two
>controversial regulations without consulting the affected community
>(numbers 136 and 87). These regulations would have forced a "suspicious"
>person to have and HIV test and to give all the names, addresses and
>phone numbers of all their sexual partners for the last 10 years. These
>regulations would have further ostracized and discriminated against
>people with HIV/AIDS. Following the recommendations of a review panel,
>the Health Department and the Government stated that these regulations
>are no longer being considered, yet we have not received the actual
>revised regulations.
>
>Recent actions taken by the Department of Health towards persons with
>HIV have reactivated our concern that the government of Puerto Rico is
>once again doing harm to people living with HIV/AIDS.
>
>* Currently the Department of Health is expediting a series of health
>care reforms without
> considering the possible repercussions that this reform may
have on
>the HIV/AIDS community. One of the most troublesome decisions made as
>part of this reform is the replacing of case managers trained to
>provide connections to social services with nurses who offer only
>medical case management. By terminating all the traditional social
>service case managers, the government is jeopardizing the health of
>countless persons with AIDS. Nurses are not suited to provide the range
>of critical social service referrals to housing, drug treatment, harm
>reduction and so much more.
>

The recent drastic reductions in personnel of the Ombudsman's Office cut off another venue for assistance for persons with HIV/AIDS. The Ombudsman"s Office came into existence as the result of the settlement of a complaint of HIV/AIDS discrimination by persons with AIDS against the government of Puerto Rico. By limiting the independence of the Office, the government of Puerto Rico is in probable violation of the agreement with the office of Civil Rights of the United States Department of Health and Human Services.

* Persons entering into Commonwealth prisons with HIV must be guaranteed a continuos supply of medications with no interruptions. We have received reports of constant interruptions in HIV combination therapy because of ignorance and neglect by prison officials. These prisoners run the risk of developing resistance to the medications that may save their lives.

* Patients in different parts of Puerto Rico (Juana Diaz and other cities) are having trouble obtaining basic HIV medications. In fact, some people outside the San Juan Area report long term interruptions in getting their protease inhibitor combinations. Health Resources and Services Administration (HRSA) guidelines emphasize "compliance" with the new combination therapies and the potential life threatening impact of interruptions in treatment. This failure to maintain access once treatment has begun is criminal.

For all these reasons stated above, we request that the following steps be taken:

1.- Secretary of Health, Dr. Carmen Feliciano de Melecio must restore social service case managers to their terminated positions, ensure people with AIDS in Puerto Rico that AIDS medications be maintained in adequate supply in all parts of the commonwealth, monitor prison health services to guarantee that persons entering prison are provided with whatever medications they need with no interruptions in service and hire personnel for the office of Ombudsman that are independent advocates for persons living with HIV infection.

2.- The Governor and the Senate of Puerto Rico must approve and implement House of Representatives Resolutions Number 1554 and order the health and Welfare Commission to conduct a thorough investigation of the use of Ryan White Program Title II funds and the status of the immunology clinic personnel that provide HIV services.

3.- The Governor and the Senate of Puerto Rico must approve and implement House of Representatives Law Number 799 that would establish a cause of action in damages against any person that denies treatment or services to any person with HIV.

4.- The Governor and the Senate of Puerto Rico must approve and implement House of Representatives Bill Number 649 which creates a Bill of Rights of People with HIV/AIDS in Puerto Rico.

Thank you for the attention rendered.

Sincerely,

(Name & Title)