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THE WHITE HOUSE
WASHINGTON

THE CLINTON ADMINISTRATION
A RECORD OF FIGHTING THE AIDS EPIDEMIC

Our common goal must ultimately be a cure, a cure for all those who are living with HIV, and a vaccine to protect all the rest of us from the virus. A cure and a vaccine: that must be our first and top priority. – President Clinton, December 6, 1995

It has been more than 15 years since the epidemic of HIV/AIDS struck our nation. In that time, more than 600,000 Americans have been diagnosed with AIDS and more than 300,000 men, women, and children have died of AIDS. President Clinton has worked hard to reinvigorate the response to HIV and AIDS, providing new national leadership, substantially greater resources, and a closer working relationship with affected communities. Funding for AIDS research has increased by 50%, and funding for HIV prevention has increased 27%. Funding for the Ryan White CARE Act has tripled. The Food and Drug Administration has accelerated its drug approval process to record times, taken steps to increase access by women to clinical trials, and issued a new rule requiring better data collection on children. The President has preserved the Medicaid program, providing care to 50 percent of people with AIDS, including 92 percent of children with AIDS.

The Centers for Disease Control estimate that nearly one million Americans may currently be living with HIV, and up to 60,000 Americans are being infected with HIV every year. Women, communities of color, and adolescents are experiencing particularly high rates of infection. That is why President Clinton will continue to work to ensure that our nation responds aggressively and compassionately to the challenges created by HIV and AIDS. This fight will not be over until we have a cure and a vaccine to protect all Americans from this deadly epidemic.

PROVIDING NATIONAL LEADERSHIP

Creating the White House Office of National AIDS Policy. Acting as representative to the President, this office brings greater visibility and direction to the war on AIDS by coordinating and focusing federal AIDS policy and initiatives.

Appointing a National Advisory Council. The President created the Presidential Advisory Council on HIV/AIDS to provide him and his Administration with expert outside advice and clear recommendations on how the federal government should respond to the AIDS epidemic.

Providing Forums to Develop National Strategy. President Clinton convened the first White House Conference on HIV and AIDS as well as the first White House Native American AIDS Policy meeting to encourage multi-level cooperation and a continued dialogue between the various communities fighting this epidemic.

Fighting Discrimination. President Clinton supported the Kennedy-Kassebaum Health Insurance and Portability Act, which bans insurance discrimination against people with pre-existing medical conditions including HIV/AIDS; led the fight to repeal the discriminatory "Dornan Amendment," which would have discharged all HIV+ military personnel; and continues to enforce the Americans with Disabilities Act, which prohibits discrimination against people living with HIV/AIDS. Additionally, the Administration has resolved nearly 800 cases alleging employment discrimination, obtaining monetary benefits of over \$6.1 million.

Pushing for an AIDS Vaccine. On May 18, 1997, the President challenged the nation to develop an AIDS vaccine within the next ten years. He has supported that goal by dedicating an AIDS vaccine research center at the National Institutes of Health and encouraging domestic and international collaboration among governments, medical communities and service organizations.

INVESTING IN RESEARCH

Supporting the National Institutes of Health. The Administration has increased NIH AIDS research funds by 50% in five years. In 1993, President Clinton signed the NIH revitalization Act creating a permanent Office of AIDS Research at NIH and investing it with new authority to plan and carry out the AIDS research agenda. He appointed Nobel Prize winner Dr. Harold Varmus to head NIH and world renowned immunologist Dr. William Paul to head OAR.

Accelerating AIDS Drug Approval to Record Times. Since 1993, the Food and Drug Administration has approved 9 new AIDS drugs, 20 new drugs for AIDS-related conditions, and three new diagnostic tests. Included in the approvals are a class of drugs known as protease inhibitors, which, in combination with previous drugs, have shown tremendous promise in the treatment of HIV progression.

Reducing Perinatal Transmission of HIV. The President is working aggressively with states to eliminate perinatal transmission of HIV. As a result of Public Health Service guidelines recommending the use of AZT by HIV+ pregnant women, the number of infants with perinatally acquired HIV dropped 43 percent between 1992 and 1996.

Developing the Forum for Collaborative HIV Research. This new public-private group is designed to catalyze collaborations among government researchers, pharmaceutical companies, third-party payors and the community to capitalize on recent scientific advances and learn how to optimally use available treatment regimens.

INVESTING IN CARE

Supporting the Ryan White CARE Act. President Clinton in five years has tripled funding for the Ryan White CARE Act, the largest distributor of funds for medical and support services to people living with HIV and AIDS. In 1996, the Administration earmarked Ryan White funds for the AIDS Drug Assistance Program to help those without insurance obtain much needed prescription drugs; since then, ADAP funds have increased by 450%.

Providing Housing and Mental Health Assistance. Since coming to office, President Clinton has doubled funds for the Department of Housing and Urban Development's Housing Opportunities for People With AIDS program. He also awarded the first federal grants through the Substance Abuse and Mental Health Administration to develop comprehensive mental health services for persons living with HIV/AIDS as well as their families and partners.

Protecting Medicaid and Social Security coverage. The President fought to preserve Medicaid coverage for people living with AIDS. Nearly 50% of people with AIDS and 92% of children with AIDS rely on Medicaid for health coverage. He also revised eligibility rules for Social Security Disability Insurance to increase the number of HIV+ persons who qualify for benefits.

INVESTING IN PREVENTION

Supporting the Centers for Disease Control. The Administration has increased funds for HIV prevention at the CDC by 27% in five years. Under the leadership of the Clinton Administration, the CDC reorganized its AIDS prevention efforts to foster greater overall coordination and enhance efforts to reduce sexually transmitted diseases and tuberculosis. The President appointed Dr. David Satcher (recently nominated as U.S. Surgeon General) to head the CDC and Dr. Helene Gayle to head the CDC Center for HIV, STD & TB Prevention.

Reaching Out to Local Communities. President Clinton launched a nationwide HIV prevention community planning process to give local communities more authority over the shape and direction of AIDS prevention efforts. He also launched the Prevention Marketing Initiative, focusing on the risk to young adults with frank public service announcements recommending both sexual abstinence and the consistent use of latex condoms.

Keeping Water Clean. The President issued combined CDC and Environmental Protection Agency guidelines recommending steps to purify drinking water in vulnerable populations against *Cryptosporidium*, which can be fatal to those with compromised immune systems.

Increasing Access to HIV Prevention Services for Youth. In a directive issued on World AIDS Day 1997, President Clinton instructed each Federal agency to identify all programs under its control that offer opportunities to youth for preventing HIV infection and develop within 180 days a plan through which those programs can increase preventative education as well as support services for those already infected.

STRENGTHENING HEALTH CARE

Since the start of his Administration, President Clinton has made an extraordinary commitment to making health care more affordable, accessible, and effective for all Americans. In 1998, the Administration took significant steps towards this goal, despite the lack of action in Congress on major health issues. Medicare beneficiaries gained access to new preventive benefits, managed care choices, and low income protections. The no-tolerance approach towards Medicare fraud was stepped up, yielding hundreds of millions in savings.

Although Congress did not respond to the President's call to pass a strong, bipartisan, and enforceable Patients Bill of Rights, the President, by executive action, extended patient protections to all Medicare and Medicaid beneficiaries and Federal employees. He also took immediate action to improve the quality of care in nursing homes. Finally, the President worked with States to expand health insurance coverage to the 43 million uninsured Americans. All but three States have begun to enroll over 2.5 million uninsured children in the new Children's Health Insurance Program (CHIP); over 10 Federal agencies have joined with the private sector to help enroll the millions of uninsured children eligible for Medicaid as well as CHIP; and the President authorized a new regulation that provides States with the option to cover two parent families in Medicaid for the first time.

This year's budget builds on that effort, including over \$6 billion over five years for an initiative to help patients, families, and caregivers cope with the burdens of long-term care; \$2 billion over 5 years for an initiative that eliminates barriers to employment for individuals with disabilities; new proposals to improve access to health insurance; new proposals to safeguard and improve the public health and strengthen the safety net; and aggressive efforts to improve the management of Medicare and Medicaid.

LONG-TERM CARE

- **\$1000 Tax Credit.** This new tax credit compensates for a wide range of formal or informal long-term care for people of all ages with three or more limitations in activities of daily living (ADLs) or a comparable cognitive impairment. This proposal would benefit about 2 million Americans and costs \$5.5 billion over five years.
- **National Family Caregivers Program.** The budget provides \$625 million over 5 years for this program, which is designed to assist approximately 250,000 families caring for elderly relatives who are chronically ill or disabled. It will support a caregiver support system in all states that provides information, education, counseling, and respite services directly to care-giving families.
- **National campaign to educate Medicare beneficiaries about long-term care options.** This \$10 million campaign would provide Medicare beneficiaries with information about State administered home and community based care options including: what long-term care Medicare does and does not cover; Medicaid and Older Americans Act programs; and what to look for in a quality private long-term care policy.
- **Offering quality private long-term care insurance to Federal employees.** Proposal allows OPM to offer non-subsidized, private long-term care insurance to all federal employees, retirees, and their families at group rates. Roughly 300,000 Federal employees are expected to participate in this program.
- **Helping more older Americans remain in their communities through new broad-based assisted living initiative.** This proposal provides \$100 million in competitive grants to enable existing HUD elderly subsidized (Section 202) projects to convert some or all units into Assisted Living facilities that provide additional services many older Americans need to continue living as independently as possible.
- **New community based long-term care options.** This proposal would provide States with a new option to eliminate the institutional bias in Medicaid and provide Medicaid coverage to individuals of all ages with income up to 300 percent of SSI who have been determined to require an institutional level of care but continue to live in residential rather than settings.
- **Nursing home quality initiative.** This proposal will provide \$110 million to strengthen Federal oversight of nursing home quality and safety standards by working with States to improve their nursing home inspection

systems, crack down on nursing homes that repeatedly violate safety rules, establish a national registry of abusive nursing home workers, and publish nursing home quality ratings on the internet.

ELIMINATING BARRIERS TO EMPLOYMENT FOR INDIVIDUALS WITH DISABILITIES

•**Funding the Work Incentives Improvement Act in the President's budget.** The FY 2000 budget includes the full Work Incentives Improvement Act. This proposal, which costs \$1.2 billion over 5 years, would improve access to health care by providing new options for workers with disabilities to buy into Medicaid and Medicare; modernizing employment-related services for workers with disabilities; and creating a work incentives grant program to provide benefits planning and assistance and better integrate services to people with disabilities working or returning to work.

•**\$1,000 tax credit.** Under this proposal, workers with significant disabilities would receive an annual \$1,000 tax credit to help cover the formal and informal costs that are associated with and even prerequisites for employment, such as special transportation and technology needs. This tax credit, which will help 200,000 to 300,000 Americans costs \$700 million over 5 years.

•**Improving access to assistive technology.** This new \$35 million initiative would accelerate the development and adoption of information and communications technologies, which can improve the quality of life for people with disabilities and enhance their ability to participate in the workplace.

EXPANDED HEALTH INSURANCE OPTIONS

•**Health Options for Older Americans.** This new initiative expands the health options available for older Americans by: enabling Americans aged 62 to 65 to buy into Medicare, by paying a full premium; providing vulnerable displaced workers ages 55 and older access to Medicare by offering those who have involuntarily lost their jobs and their health care coverage a similar Medicare buy-in option; providing Americans ages 55 and older whose companies reneged on their commitment to provide retiree health benefits a new health option, by extending "COBRA" continuation coverage until age 65. The President's proposal is fully funded and does not burden the Medicare Program.

•**Encouraging Small Businesses to Offer Health Insurance:** This new initiative encourages small businesses to offer health insurance to their employees through: a new tax credit for small businesses who decide to offer coverage by joining coalitions; encouraging private foundations to support coalitions by allowing their contributions towards these organizations to be tax exempt; offering technical assistance to small business coalitions from the Office of Personnel Management.

•**Improving Access to Health Insurance through Medicaid and CHIP.** The budget increases access to health insurance by restoring Medicaid and CHIP eligibility for legal immigrants affected by welfare reform; extending Medicaid eligibility to foster children up to age 21; improving transitional Medicaid for people moving from welfare to work; and providing states with \$1.2 billion over 5 years for children's health outreach activities. The budget provides \$144 million over five years for increased CHIP funding for Puerto Rico and the territories.

COMMITMENT TO PUBLIC HEALTH

•**Tobacco.** The budget provides an increase of \$34 million (up 100% from 1999) for greater enforcement by the Food and Drug Administration and an increase of \$27 million (up 36%) for CDC state tobacco control activities. (See separate paper on tobacco).

•**Providing Access to Health Care Services for Uninsured Workers.** This initiative invests \$1 billion over 5 years in comprehensive health care delivery systems that traditionally provide services to the uninsured. The

proposal responds to the growing challenges the nation's health care infrastructure faces with the increasing number of uninsured and limits on public sector provider payments.

- Mental Health Block Grants.** The budget provides \$359 million, a 24 percent increase over 1999 and the largest increase ever.
- Ryan White HIV/AIDS Treatment Grants.** The budget provides \$1.5 billion, a 7 percent increase over 1999 funding levels.
- Childhood Asthma Initiative in Medicaid.** The budget provides \$50 million in demonstration grants for States to test innovative asthma disease management techniques for children enrolled in Medicaid.
- Family Planning Services Grants.** The budget provides \$240 million, an 11.6 percent increase over last year's funding level.
- Reducing Racial Disparities in Health Status.** The budget includes \$145 million for health education, prevention, and treatment services for minority populations. The budget also proposes an additional \$50 million to address HIV and AIDS issues in minority communities.
- Supporting Graduate Medical Education at Children's Hospitals.** The budget proposes \$40 million to support graduate medical education at freestanding children's hospitals, which play an essential role in the education of the nation's pediatricians.
- Biomedical Research.** The budget provides \$15.9 billion for the National Institutes of Health (NIH), a \$320 million increase over the \$2 billion increase in 1999. The NIH budget builds on the President's commitment to biomedical research as a foundation for combating disease and providing new technologies.
- Medicare Cancer Clinical Trials.** The budget provides \$750 million over four years for a demonstration to give more Americans access to cutting-edge cancer treatments.
- Controlling the Spread of Infectious Disease.** The budget will include \$25 million, a 31 percent increase over last year's funding level, for a new CDC initiative that funds disease surveillance and rapid response activities, a national educational campaign about the consequences of inappropriate antibiotic use, and research on disease risk factors.
- Bioterrorism.** The Budget provides \$230 million for HHS' bioterrorism programs, an increase of \$71 million (45 percent) over the last year's funding.
- Indian Health Service.** The Budget provides a substantial \$170 million increase over the 1999 funding level to: expand health care to 1.4 million Native American/Alaska Natives who use its services; support tribal self-determination by adding \$35 million for contract support costs; construct additional health facilities; and finance an additional 100 public health nurses for outreach.

IMPROVING THE FISCAL INTEGRITY AND EFFICIENCY OF MEDICAID AND MEDICARE

- Health Care Financing Administration (HCFA) Management Reform.** HCFA, HHS and the Office of Management and Budget have begun the development of a reform initiative that will increase HCFA's flexibility to operate as a prudent purchaser of health care while also increasing accountability. The initiative has five components: 1) management flexibilities; 2) increased accountability; 3) program flexibilities; 4) structural reforms; and 5) contractor reform.
- Medicare and Medicaid Program Integrity and Efficiency.** The budget includes a number of policies that would reduce fraud, waste, and overpayments in Medicare and strengthen fiscal accountability in Medicaid. These savings amount to \$1.26 billion for Medicare and \$74 million for Medicaid in FY 2000.

THE WHITE HOUSE
Office of the Press Secretary

For Immediate Release

December 1, 1997

WORLD AIDS DAY, 1997

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BY THE PRESIDENT OF THE UNITED STATES OF AMERICA
A PROCLAMATION

For more than 15 years, America and the world have faced the challenges posed by HIV and AIDS. This devastating disease respects no borders and does not discriminate. In every city, town, and community, we have lost sons and daughters, brothers and sisters, mothers and fathers, life partners and friends. HIV and AIDS have affected us all, regardless of income, region, gender, race, religion, sexual orientation, or age. Sadly, both the number of people living with AIDS and the number of new HIV infections is rising worldwide. This year, as we observe the tenth World AIDS Day, we recognize with particular concern the toll HIV and AIDS continue to take on our children and youth.

The statistics are heartbreaking. In America alone, more than 7,500 children under the age of 13 have been diagnosed with AIDS. Every hour of every day, two more Americans under the age of 21 become infected with HIV. Around the world, more than 1 million children are living with HIV and AIDS. Twelve hundred children die of AIDS each day, even as 1,600 more become infected with the HIV virus. Compounding this tragedy is the terrible reality that many of the world's young people who are living with HIV and AIDS do not have access to the life-extending drugs and medical protocols that our scientists and doctors have developed. There is also a critical shortage of prescription drugs suitable for children suffering from pediatric HIV and AIDS. Of the 14 approved drugs for adults and adolescents, only five are approved for children.

From the earliest days of my Administration, we have sought to meet the challenges posed by AIDS with increased resources and action. I am proud of our success, with the cooperation of the Congress, in dramatically increasing funding for AIDS prevention measures and research. Such programs and research have helped to slow the spread of HIV and AIDS and have made possible the production of new drugs that are extending the lives of people with HIV and AIDS here at home and around the world.

But our progress against the scourge of AIDS has not been the result of government action alone. We have been able to make these great strides in understanding and treating HIV and AIDS thanks in large part to the hard work and commitment of thousands of researchers, health care providers, and clinical trial participants. I am proud as well of the resounding response of courage, compassion, responsibility, and love that the AIDS crisis has brought forth from our people. The lesbian and gay community, particularly in the early years of this epidemic, energized existing organizations and created new institutions to respond to the unmet needs of those living with HIV and AIDS. Educators and activists, members of religious and civic groups, business and labor organizations,

more

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and tens of thousands of other men and women of goodwill have joined together to comfort the afflicted and bring an end to this disease.

We can rejoice in our progress, but we cannot rest. In May, I announced a new HIV vaccine initiative, and I am pleased that the global community has joined together in making the development of this vaccine a top international priority. Within 10 years, we hope to have the means to stop this deadly virus. But until we reach that day, I call on every American to remain with us on our crusade to eradicate this terrible epidemic and care for those living with AIDS along the way. As we mark World AIDS Day this year, we must continue to provide care for the sick and ensure that all have access to the treatment they need. And one of our most important tasks now is to strengthen our efforts to educate young people about HIV and AIDS and to make available to them and others at high risk effective prevention programs. By giving our children real hope for a future free from the shadows of HIV and AIDS, we can best commemorate the many loved ones we have already lost to the disease during its long and tragic course. May their enduring memory light our journey toward a vaccine for HIV and a final cure for AIDS.

NOW, THEREFORE, I, WILLIAM J. CLINTON, President of the United States of America, by virtue of the authority vested in me by the Constitution and laws of the United States, do hereby proclaim December 1, 1997, as World AIDS Day. I invite the Governors of the States, the Commonwealth of Puerto Rico, officials of the other territories subject to the jurisdiction of the United States, and the American people to join me in reaffirming our commitment to defeating HIV and AIDS and to helping those who live with the disease. I encourage every American to participate in appropriate commemorative programs and ceremonies in workplaces, houses of worship, and other community centers and to reach out to protect our children and to help all people who are living with AIDS.

IN WITNESS WHEREOF, I have hereunto set my hand this first day of December, in the year of our Lord nineteen hundred and ninety-seven, and of the Independence of the United States of America the two hundred and twenty-second.

WILLIAM J. CLINTON

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