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COLUMBIA INSTITUTE

SOME UPCOMING COLUMBIA INSTITUTE HEALTH CARE FORUMS

MONTANA

Missoula, Montana: June 1, 1993

Billings, Montana: September 1, 1993

Great Falls, Montana: October 9, 1993

Chairs/Principals:

Senator Conrad Burns

Governor Marc Rascicot

MAINE

June 3, 1993

Portland, Maine

Chairs/Principals:

Senator Bill Cohen

C. Everett Koop

Sean Sullivan

John Goodman, Ph.D.

Bill Gradison

RHODE ISLAND

June 14, 1993

Providence, Rhode Island

Chairs/Principals:

Senator John Chafee

Congressman Ron Machtley

Uwe Reinhardt, Ph.D.

VIRGINIA

June 18, 1993

Richmond, Virginia

Chairs/Principals:

Congressman Thomas Bliley

MICHIGAN

July 8, 1993

Kalamazoo, Michigan

Chairs/Principals:

Congressman Fred Upton

CALIFORNIA

Three day event

Town meetings: July 8, 1993

Summit: July 9, 1993

Site visits: July 10, 1993

Sacramento, California

Chairs/Principals:

Congressman Vic Fazio

NEW JERSEY

July 12, 1993

Jersey City, New Jersey

Chairs/Principals:

Congressman Robert Menendez

CONNECTICUT

July 19, 1993

Hartford, Connecticut

Chairs/Principals:

Senator Joseph I. Lieberman



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COLUMBIA INSTITUTE

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policy group specializing in
conference management
and research services.*

SAMPLE PROGRAMS FROM HEALTH CARE CONFERENCES

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HEALTH CARE AND SMALL BUSINESS: Making Quality Health Care Accessible and Cost Effective

April 14, 1992
Four Seasons Hotel
Houston, Texas

Congressman Michael A. Andrews



A Columbia Institute Coordinated Event

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1992 INDIANA CONFERENCE ON HEALTH CARE:
Seeking a National Policy for the 21st Century

Saturday, January 25, 1992



Center for Continuing Education
University of Notre Dame
Notre Dame, Indiana



Congressman Tim Roemer
CHAIRMAN



A COLUMBIA INSTITUTE *Coordinated Event*

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1991 MINNESOTA CONFERENCES
ON HEALTH CARE:
Facing the Challenges of the 1990s and Beyond

December 2, 1991



Morning Session
Sunwood Inn
St. Cloud, Minnesota



Afternoon Session
Madison Inn Conference Center
Moorhead, Minnesota



Congressman Collin C. Peterson
CHAIRMAN



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1991 California Health Care Summit:
Analyzing National Policy Options for the '90s

November 11, 1991

The Claremont Hotel—Oakland, California



Congressman Pete Stark, Chairman



A COLUMBIA INSTITUTE Coordinated Event



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1991 FLORIDA CONFERENCE
ON HEALTH CARE:
Leading the Nation Toward a National Policy

November 8, 1991

Orlando Airport Marriott

Orlando, Florida



Congressman Jim Bacchus
CHAIRMAN



A COLUMBIA INSTITUTE *Coordinated Event*

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EXCELLENCE IN HEALTH CARE

Tennessee Examines Tomorrow's Policies

Loews Vanderbilt Plaza Hotel
Nashville, Tennessee

May 31, 1991

Congressman Bob Clement
CHAIRMAN



A COLUMBIA INSTITUTE *Coordinated Event*



COLUMBIA INSTITUTE

April 28, 1993

Ms. Doris Matsui
Deputy Assistant to the President and
Deputy Director of Public Liaison
Old Executive Office Bldg., Room 122
Washington, D.C. 20500

Dear Doris:

For more than 12 years the Columbia Institute has organized conferences on public policy issues throughout the United States. Over 300 conferences on a wide range of subjects have been chaired by several hundred members of the House and Senate from both political parties.

In recent years most of the conferences have been on the subject of health care. Many of these have been chaired by Democratic members of the Senate and House in all regions of the country. These forums have been particularly useful for Democrats because they enable the members to bring information and expert opinion and analysis to the people of their home states and districts and to hear the views of their constituents on the alternative approaches to health care reform. By taking a leadership role in informing the public and seeking workable solutions the members assist the Administration in developing an effective outreach tool for health care reform.

Conferences have been funded by a broad diversity of private sector companies who have an interest in educating the public on the issues. There is also interest on the part of some foundations in supporting events such as these that are not partisan in nature but will examine all the paths to health care reform.

We believe this creates an opportunity for the White House to join in an effort that is perceived to be a constructive attempt to present the answers to an urgent national need.

In planning such conferences one option is for the events to be co-chaired by members from both parties. In light of recent criticism of the Robert Wood Johnson Foundation, this is most likely to attract foundation support. Another option is for a series of conferences to be chaired by individuals with Democrats and Republicans chairing about the same number of conferences. Foundation support may be available but, in any case, we believe that funding could be arranged from other private sector sources. A third option

would be to proceed with the planning of events to be chaired by Democrats to be financed by broad sponsorship in the same way that past events have been funded.

We will welcome the opportunity to work with you in planning a program that will enable the White House to inform the public and to create a dialogue that will help to lay the foundation for workable health care reforms.

Sincerely yours,

A handwritten signature in blue ink, appearing to read "Jonathan Ortman", written in a cursive style.

Jonathan Ortman
Executive Director

Enclosures

SAMPLE PROGRAM, PRESS COVERAGE, SURVEY AND INVITATION
FROM A RECENT HEALTH CARE CONFERENCE IN NEBRASKA

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HEALTH CARE IN THE 21ST CENTURY: NATIONAL CHALLENGES, NEBRASKA SOLUTIONS

Friday, April 16, 1993
Saturday, April 17, 1993
University of Nebraska, Lincoln
Kimball Hall & Student Union

KEYNOTE PRESENTATION:
Hillary Rodham Clinton
First Lady of the United States of America

Senator J. Robert Kerrey, Chairman
Governor E. Benjamin Nelson, Co-Chair



A COLUMBIA INSTITUTE *Coordinated Event*

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Health-Care Conference

Health Conference: Different Points of View



Ellwood



Dean



Ms. Shikles



Brown



Mrs. Clinton

Dr. Paul Ellwood

Chief executive, Jackson Hole Group

"President Clinton is the first president we've ever had who has really cared about health care."

"If he wants to move the health-care system quickly, he ought to spell out the scope of benefits up front and what standards the system will be expected to measure up to."

If Clinton does that, he will find that many health-care reform measures will become reality even before Congress passes health-care legislation, Dr. Ellwood said.

Howard Dean, Vermont Governor

Co-chairman, National Governors' Association Health Care Task Force

"Medicare is a living, breathing example of why the federal government should not be allowed to run a national health-care system."

"You can't figure out the bills, and you can't find anyone on the telephone who can help you figure out the bills — even if you are a doctor."

"We have been rationing health care in the United States by cost. That's wrong. I think every American... has a right to adequate health care."

Bill Gradison

President, Health Insurance Association of America

On characteristics of the American people that should be considered in planning national health-care reform:

"We are impatient people. If you need a heart bypass operation, you want it as quick as picking up a Big Mac."

"We have a belief in high technology that borders on immortality."

"We have come to expect perfect outcomes. If that doesn't happen, we think the doctor or the drug company screwed up."

Gov. Nelson

Co-chairman, Nebraska health-care conference

"We cannot change the system simply by changing who pays... Putting a cap on costs without cutting costs will not work."

"States need a federal program that maximizes state involvement, provides flexibility that encourages innovation and creates an environment for states to develop solutions tailor-made to their particular needs."

Nelson said Nebraska solutions must recognize that:

—Health-related expenditures are increasing by 10 percent to 12 percent per year. Health-care expenditures in Nebraska are expected to increase from \$4 billion in 1990 to more than \$8.5 billion in 2000.

—About 155,000 Nebraskans under age 65, including 55,000 children, had no insurance coverage in 1990.

—Rural communities have fewer physicians and other health-care practitioners than cities. Seven rural hospitals closed between 1986 and 1991, and 15 to 20 will need large subsidies to remain open.

Janet Shikles

Director, health financing and policy, U.S. General Accounting Office

All Germans receive health care as a right of citizenship, and overuse of the system "is a major problem," she said.

Germans see their doctors a lot, use more drugs and receive more hospital care than do Americans.

"But the costs are less in Germany because prices are controlled. They say to a group of doctors, 'Here is a pool of money, and that is all the money there will be. You are on a budget.'"

E. Richard Brown

On leave as public health professor, UCLA, and consultant, Clinton health-care task force

National health-care reform will change the rules by which insurance companies operate, Brown said. It will prevent them from reducing their risks by cutting off insurance for high-risk individuals.

"The way we are putting incentives into the system will force out a lot of weak (health-care) plans. Plans that don't provide good care at reasonable prices will lose out. Health-care plans will have to be allowed to fail."

Hillary Rodham Clinton

Head of the President's Task Force for National Health Care Reform

"A lot is right about the health-care system. However, the security that many of us take for granted — that fundamental personal security — can no longer be taken for granted."

"Growing numbers of workers are uninsured. One hundred thousand move into the ranks of the uninsured each month."

"It's kind of like, 'There but for the grace of God go I.' Many of us are just one job layoff away from having no insurance."

Lincoln Journal

"Dedicated to the People of Nebraska, and to the Development of the Resources of the State"—Sept. 7, 1867.

Editorials: Opinions of the Journal

If we had five minutes with Hillary Clinton . . .

Of all the jokes about Hillary Rodham Clinton's power, the one about daughter Chelsea Clinton getting sick at school is more clever than most.

The principal wanted to call her mother but Chelsea objected. "Oh, please don't call my mother," she said. "She's very busy working on health care and all sorts of other important things. Call my father."

On Friday, this very busy First Spouse will be working on health care for a few hours here in Lincoln at a conference co-chaired by Sen. Bob Kerrey, D-Neb., and Gov. Ben Nelson.

The Journal sees no need to call Chelsea's father — yet. But if we had five minutes with Hillary Clinton, here's what we would say:

■ We like the idea of universal health coverage. All Americans should have equal access to health care.

Nebraska has a smaller share of people who lack health insurance coverage than other states. A report by the Employee Benefit Research Institute showed only five states have a smaller percentage of people under 65 without health insurance. Nebraska's percentage was 10.2 percent in 1991 and the national percentage was 16.6 percent.

Nevertheless, Nebraska has too many "working poor" who must worry about financial ruin if someone in the family gets sick or has an accident.

■ Whatever the national health care task force recommends, please make it easy to understand for those who will have to live with it, not just for those who speak the jargon of "providers" and "third-party payers" and "managed competition."

The task force seems to be going that way. It speaks of giving out "health security cards" and has switched from talking about "health purchasing cooperatives" to "health

alliances."

Key to whether citizens will accept massive changes in the nation's health care system is their understanding of what they will have to pay, what they will have to give up and what they will get, both for themselves and for the good of society as a whole. Please make that abundantly clear.

■ We're still struggling with the advantages and disadvantages of — pardon our jargon — a single-payer plan versus managed competition. Perhaps the Friday conference will illuminate this debate.

Canada has a single payer plan that replaced a lot of private insurers with one big one: the government. Everyone gets coverage under a plan administered by the government and financed by taxes.

Managed competition in essence arranges for everyone to get health insurance through large groups. Insurers and health maintenance organizations compete to offer the basic health coverage for those groups.

Whatever the task force decides, the plan should recognize the needs of rural areas. A health alliance would work in Lincoln or Omaha, but not in Broken Bow or Rushville.

■ Finally, it's not enough to combine Medicaid and private insurance into some sort of reform proposal and leave out the other huge purchasers of health care: Medicare and self-insured plans that are exempt from state regulation under federal law.

Leaving out those two chunks of the pie would keep the door too far open for the cost shifting that plagues the health care system today.

That's it, Hillary Clinton. We don't pretend to be experts or even to understand all the jargon, but you have our attention and we are watching with interest and hope.

Reformers hope health sessions give 'kick start'

BY MARTHA STODDARD
Lincoln Journal-Star

The next step on the way to reforming health care will be to gather ideas from the public and hear what residents want, Nebraska elected officials said Saturday after a two-day conference in Lincoln.

On Friday, participants at "Health Care in the 21st Century: National Challenges, Nebraska Solutions" heard from Hillary Rodham Clinton, who chairs the President's Task Force for National Health Care Reform.

"I'm hoping this conference will provide a kick-start of interest again in health care reform," said state Sen. Don Wesely, chairman of the Legislature's Health and Human Services Committee.

A flurry of legislation followed a 1985 conference on health care, Wesely said. He hopes this conference will have the same result by speeding passage of bills now in the hopper and by sparking other proposals for change.

The conference is part of an ongoing effort to engage Nebraskans in debate over health care reform and to inform policymakers, said Sen. Bob Kerrey, D-Neb., who chaired and started organizing the event.

"We're in the last 30 meters of a 200-meter race. I don't know if we will pass reform at the federal level this year but it is not an option (whether to do reform)," he said.

Gov. Ben Nelson, conference co-chairman, said Nebraska's reform efforts will go on the road later this year with a series of public hearings on the proposals of the Blue Ribbon Coalition and Inter-agency Task Force. Those two groups have laid the groundwork for a Nebraska solution to health care problems, he said. The hearings on their reports will seek to build consensus about state-level change.

"For this to move forward, it has to have a lot of steam," Nelson said.

■ Local group impressed with first lady's knowledge and warmth. Page 3E.

But some criticized the conference, held at the Lied Center for Performing Arts, for not offering more chance for public input. Conference sessions included little time for questions or comments from the audience, he said.

Susan Kelly, a disabled Lincoln nurse who is covered by Medicare but often has to choose between eating and paying her out-of-pocket medical bills, said she initially registered, then returned her ticket in frustration.

"I had in mind a meeting of minds of people trying to find out what people in this country need as far as health care. I think that the experts need to know what people need," she said.

But Kerrey defended the conference and said he gets public input all the time by way of letters and calls to his office.

"I believe the public needs to be given information as well as given a chance to say what they want," he said.

Those attending the conference got plenty of information. While the Friday morning sessions, including the keynote address by Clinton, focused on national issues, Friday afternoon and Saturday focused on state-level efforts.

Vermont Gov. Howard Dean said Friday that states must have a role in reform. He cited his experiences with Medicare as a practicing doctor as an example of why the federal government should not run health care.

Minnesota state Sen. Linda Berglin said her state is in the process of implementing a reform package that includes controls on costs, insurance reforms, programs to improve access to care in underserved rural areas and a plan to provide health coverage for all uninsured state residents.

Lawmaker surrenders

First lady's speech moved to Lied; tickets available

By Jeff Zeleny
Senior Reporter

Tickets still remain for First Lady Hillary Rodham Clinton's speech at the University of Nebraska-Lincoln Friday.

The speech, the highlight of the Nebraska health care conference, was originally thought to be sold out, but it moved to a bigger venue Wednesday.

Clinton's appearance was originally scheduled for the 850-seat Kimball Recital Hall, but the speech was moved to the Lied Center for Performing Arts, which holds 2,200 people.

Tickets for the 12:45 p.m. speech are available through Sen. Bob Kerrey's Lincoln office

Health care package announcement possible

on a first-come, first-serve basis.

The two-day conference, sponsored by the Columbia Institute in Washington D.C., will focus on national health care issues now being discussed by Congress, said Jonathan Ortman, executive director of the institute.

Clinton, head of the president's national health care task force, accepted the invitation Tuesday, Ortman said, and she will possibly make a policy announcement during her speech.

"She will clearly be giving an indication on how far they have gone (in) developing a package to Congress," Ortman said from Washington.

Clinton has not had a public schedule recently because of her father's death last week. The speech will be her first public health care announcement in weeks, Ortman said, and it comes at a critical time for the nation's health care situation.

"The Congress is very likely to consider a bill sent to them by the president suggesting how we perform health care in the United States," he said.

Nebraska was chosen as the conference site because of Kerrey's strong commitment to health care reform, Ortman said, and to give a variety of people an opportunity to participate

in the conference.

"We're a great believer that many in the U.S. have a great opportunity to contribute," he said. "We felt that it would be a suitable location."

Kerrey, sponsor of Health USA, a plan introduced in 1991 that would reform America's health care system, is actively engaged in health care issues, Ortman said.

"It seems sensible that he be speaking about it," he said.

Kerrey, co-chair of the conference, will introduce Clinton and participate in the conference Friday and Saturday.

"I am very pleased that Mrs. Clinton will be

See HILLARY on 3

Hillary

Continued from Page 1

able to speak at the conference," Kerrey said in a statement released from his Washington office Wednesday. "Her role in the health care reform debate is vitally important."

The conference is the first public health care forum since Clinton took the reins of the task force. About 30 conferences were sponsored by the Columbia Institute before Clinton's appointment.

The first lady's last-minute visit to

UNL has caused some officials to scramble and change plans, but J.B.

Milliken, executive assistant to the NU president, said the university is doing all it can to accommodate the conference.

"The university is trying to cooperate in any way possible," he said. "It's something Sen. Kerrey asked us early on."

Robert Chumbley, executive director of the Lied Center, said this was the first time a national political figure like Clinton had been to the Lied Center. He said he was working closely with a White House Advance Team to

The first lady's speech prompted Chumbley to rearrange plans for jazz saxophonist Sonny Rollins' Friday night performance.

Chumbley said he was happy Clinton was coming to UNL but secretly wished President Bill Clinton was also coming.

"We were kind of hoping the president would come and play some tunes with Sonny," he said, "but I don't think that's going to happen. Maybe next time."

Insurers' Stakes High In Health-Care Move

Continued from Page 1

America," said Barry Schweig, professor of finance at Creighton University. "But it could go either way."

If insurance companies become the arm for administering a national plan, they might have to hire more people, he said.

George Rejda, insurance professor at the University of Nebraska-Lincoln, said the Clinton administration will need the industry's expertise to make a national health-care plan successful.

The insurance companies that survive will be those that become more competitive and find ways to reduce administrative costs, he said. "Some smaller companies could go under," he said.

"The stakes are enormous," Rejda said.

As evidence that Mutual's executives and managers understand the implications of health-care reform, the company points to 850 of its middle and upper managers who have made donations to the company's political action committee this year, up 46 percent from three years ago.

The company's latest figures show that Mutual's managers contributed \$168,600 to the company's political war chest during the 1991-92 election cycle, more than double the \$76,106 in donations during 1989-90.

Mutual's PAC donated \$16,000 to the campaigns of eight members of the Senate Finance Committee and \$16,100 to the campaigns of 13 House Ways and Means Committee members during 1991 and 1992. Those are the two primary committees that will consider health-care reform legislation.

Weekly said Mutual supports the idea of making health care available to all Americans. Moreover, he said, the company has insight into problems that might develop under a national health-care plan.

For example, the State of New York



Ms. Huerter



Weekly

legally requires any company that sells health insurance to individuals to charge the same prices regardless of the age or medical condition of the insurance purchaser.

"A 79-year-old drug addict is charged the same as a healthy young person," Weekly said.

As a result, premiums for most New York individual policyholders have skyrocketed, he said. Only Mutual of Omaha and Blue Cross-Blue Shield remain as insurers of individuals in New York, he said.

Weekly cited some of the same reasons that Mrs. Clinton has for the rapid increase in health-care costs.

For example, Mrs. Clinton said this week that big malpractice court judgments have driven up medical costs.

Weekly said he agrees but is skeptical that the Clinton administration will seek meaningful reforms. "Trial lawyers were among the biggest contributors to the president's campaign," he said.

The task force will report to the president next month. Once the Clinton administration's plan reaches Congress, the insurance industry will have a better chance to be heard, the Mutual executives said.

For basic health-care reform to work, "we've got to take an evolutionary approach and avoid political revolution," Weekly said.

Fatal Stampede

Yaounde, Cameroon (AP) — A herd of about 360 elephants trampled two people to death and destroyed 12,800 acres of crops in northern Cameroon.

Ceramics Artist Dies

Miami (AP) — Katherine "Kay" Pancoast, an artist known for her ceramic tile murals and three-dimensional art, has died at age 92.

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Compassion

Mrs. Clinton Makes Case for Reforms Of Health System

BY ROBERT DORR
WORLD-HERALD BUREAU

Lincoln — Hillary Rodham Clinton said Friday that she finds it "very hard to look into the eyes of working Americans, the backbone of America" and hear them say they can't afford medical insurance and sometimes can't get needed medical care.

The first lady told a packed house of 2,000 people at the Lied Center for Performing Arts here that the nation must restore "compassion and caring" to its health-care system.

It won't be easy, she said. "There's no magic bullet out there."

But if nothing is done, annual health-care costs will double by the year 2000 to \$14,000 per family in taxes, insurance premiums and out-of-pocket costs, she said.

Moreover, many small businessmen will face agonizing decisions about whether to keep high-risk workers in their insurance plans, she said, and high medical costs will make America's large companies less competitive.

Mrs. Clinton was in Nebraska at the invitation of Sen. Bob Kerrey, D-Neb., to speak at a conference considering health-care issues facing the state and the nation. Kerrey and Gov. Nelson are chairmen of the two-day meeting, which is being sponsored by the Columbia Institute, an independent, bipartisan organization based in Washington.

Mrs. Clinton emotionally told of poignant talks with people around the country since she became head of the White House health-care reform task force.

Mrs. Clinton told of talking with a woman in New Orleans who had a lump in her breast. The woman told Mrs. Clinton that a surgeon had told her: "If you had insurance, we would biopsy it. But since you don't, we will just watch it."

The task force she heads will report next month to President Clinton, who will send to Congress the administration's recommendations for an overhaul of the nation's health-care system.

Mrs. Clinton received standing ovations at the start and finish of her 37-minute talk from a crowd that included insurance executives, hospital administrators, doctors, business people and consumer advocates, as well as members of the general public.

Some people were turned away when they didn't have free tickets that had been distributed in advance.

Health-Care Conference Inside

KERREY: Sen. Bob Kerrey proposes a trust fund to monitor how much health care costs the nation, and legislation on the issue is under discussion. Page 2.

SENATORS: Two state lawmakers evaluate the speech by Hillary Rodham Clinton. Page 2.

EXCERPTS: Highlights of the speeches at Friday's session of the health conference. Page 3.

WAITING: Health insurance official says it is too early to really judge the health-care reform plan because the American public hasn't received details yet. Page 3.

HILLARY: Few doubt that Hillary Rodham Clinton is tough enough for the health-care fight. Mike Kelly, Page 15.

Mrs. Clinton shook the hands of dozens of people in the Lied Center audience who came forward, joining Kerrey, Nelson and Vermont Gov. Howard Dean at the edge of the stage.

Outside the Lied Center, a small group of demonstrators carried signs protesting the possibility of a national sales tax, sometimes called a value-added tax, to finance health-care reform. President Clinton acknowledged this week that the tax is one financing method under study.

Jerry Klug, president of Free Flow Inc., an Omaha manufacturer of water flow meters, carried a sign reading: "No tax increase."

Klug said, "Bill Clinton lied to get elected. He's still lying. He said he wouldn't tax the middle class."

Mrs. Clinton arrived by plane Friday morning and met privately with Kerrey, Nelson and a group of eight people who explained a Lancaster County plan matching Medicaid patients with doctors.

She flew on to Montana at midafternoon for meetings with health-care officials and Indian leaders.

Mrs. Clinton mentioned the Lancaster County plan in her speech. "That is the kind of partnership and cooperation we have to have. ... I was told that one reason it works is that the faces of

Please turn to Page 2, Col. 1

First Lady: Health Care Must Revive Compassion

Continued from Page 1

Medicaid have been humanized."

The plan, involving the Lincoln-Lancaster County Health Department, the Nebraska Department of Social Services and the Lancaster County Medical Society, helps doctors and patients deal with Medicaid paperwork and ensures that Medicaid patients find a doctor.

She also referred to her meeting with several couples in a farm home near Ankeny, Iowa, last month.

She said that as they told of their insurance premiums, which cost several thousand dollars a year, she thought: "Why on earth would we want to drive out of business farm families who are among the most productive workers in America?"

In addition to 37 million to 40 million uninsured Americans, another 22 million have "only the barest bones insurance" that won't cover catastrophic illnesses, Mrs. Clinton said.

"All of us must recognize we are all part of the problem, and we will all have to be part of a solution if it is going to work for America. . . . We want a health-

care system that really works so Americans once again can be secure."

Mrs. Clinton disclosed only in broad terms what her task force's proposed national health-care plan would contain.

At a press conference afterward, she indicated the plan would deal with huge malpractice lawsuits that, she said, have "had a chilling effect" on the practice of medicine.

She indicated in her talk that the plan would:

- Distribute health-care cards that will entitle all Americans to basic health care.

- Deal with anti-trust laws that, she said, prevent hospitals from cooperating in purchasing expensive equipment.

- Make the health-care system simpler by developing uniform insurance forms and "by ridding the system of unnecessary paperwork and bureaucracy."

- Changing the mix of federal aid for educating doctors to encourage training more general practitioners and fewer specialists.

Statue Atop Capitol Will Be Repaired

Washington (AP) — After 130 years of standing guard on the Capitol dome, the statue of Armed Freedom is in need of a little R&R.

So, at a cost of \$750,000, the bronze statue, a sort of victory goddess with flowing robes, sword and shield, and a bizarre headdress topped with a screaming eagle, will be plucked from its perch via helicopter and lowered to the Capitol Plaza for five months of cleaning and repair.

The 19-foot-6-inch, 14,985-pound bronze statue will be hoisted from its iron moorings May 9.

The statue will be given a thorough cleaning with jets of water and, perhaps, crushed walnut shells. Pits will be

smoothed, corrosion removed and the surface restored to the greenish-brown patina it had in 1863, when it was installed.

Hasbro to Pay \$175,000 To Settle Dispute on Ad

Washington (AP) — The nation's largest toy manufacturer has agreed to pay the government \$175,000 to settle charges that it falsely claimed the GI Joe Battle Copter could fly.

But in so doing, Hasbro Inc. of Pawtucket, R.I., did not admit to any false claims in its 1991 ad on the toy.



Kerrey Pushes Fund to Monitor Costs

BY MARY MCGRATH
WORLD-HERALD BUREAU

Lincoln — Sen. Bob Kerrey, D-Neb., proposed Friday that a trust fund be created for all federal health-care expenditures to flow through in order to show how much health care costs the nation.

The new trust fund would replace Medicare trust funds.

Legislation to create such a trust fund is under discussion, said Sheila Nix, a legislative aide to Kerrey. Sen. Daniel Patrick Moynihan, D-N.Y., and Senate Majority Leader George Mitchell of Maine have encouraged Kerrey's efforts, she said.

Kerrey spoke at a two-day conference on health-care problems facing the nation and the state. First lady Hillary Rodham Clinton was the featured speaker at the conference.

The 850-seat Kimball Hall was nearly filled as the program featuring Kerrey began at 8:30 a.m. Kerrey and Gov. Nelson led the conference. In attendance were health-care professionals, civic leaders, corporate executives, representatives of health and social service agencies, and consumer advocates.

"I don't believe that health-care reform is an option," Kerrey said. "I believe it is a necessity."

Kerrey said the conference would "give us an idea of what others in the nation and in other states are thinking about health-care reform so that Nebraskans can make informed decisions about what should be done here."

He said he believes in high-quality health care and has benefited from it. He said he likewise believes that each American must help pay for health care as he is able and must be responsible in



NICE TO SEE YOU: Sen. Bob Kerrey, D-Neb., and first lady Hillary Rodham Clinton chat before speaking at the health-care forum.

PHIL JOHNSON/THE WORLD-HERALD

helping to contain costs.

Kerrey said the trust fund he proposes would help make the public aware of costs and of the choices that the nation must make to pay for care.

For example, he said, the federal

government will spend \$284 billion on health care this year and \$318 billion next year, an increase of \$34 billion.

Based on the percentage of government money devoted to health care in 1993, such a fund would fall \$10 billion

short of the necessary amount next year, Kerrey said. Janet L. Shikles, director of health financing and policy at the General Accounting Office, told the conference that for several years, GAO reports to Congress have described "the considerable and increasing problems in our system and have urged Congress to take some tough actions."

Total U.S. health-care expenditures for this year are estimated at \$939 billion, she said.

Medical costs have grown as the number of uninsured people has increased, she said. Unless significant changes are made, she said, the cost of the health-care delivery system could exceed \$2 trillion by the turn of the century.

"The problem of access to health care is very serious and getting worse," she said. "It is estimated that about 100,000 individuals are losing their health insurance each month."

Ms. Shikles said factors driving health-care costs are an aging population, increasing availability of expensive technology, consumer demand for services and a fee-for-service system that rewards more when more services are provided.

"What's interesting," she said, "is that every other industrialized nation is facing these same problems."

Yet all have a level of health-care spending significantly below the U.S. level, insure all their citizens and have health-care outcomes about the same as the United States', she said. The United States should look at what has worked in other countries, she said.

Nelson told the conference, "We've got a lot on our plates, a lot to do."

First lady impresses Lincolniters

Program to find doctors for Medicaid patients draws interest

BY MARTHA STODDARD
Lincoln Journal-Star

The Lincolniters who met Friday with first lady Hillary Rodham Clinton to explain a local program that matches Medicaid recipients with doctors came away impressed with her knowledge, attentiveness and warmth.

"She seemed very interested in a very genuine way. She's a very attentive person," said Natalie Clark, executive director of the Lancaster County Medical Society.

"She was a very gracious and warm person. She put everyone at ease," said Dr. Chris Wright, medical director for the state Department of Social Services.

Clark and Wright, along with Lincoln cardiologist Dr. Chris Caudill, public health nurse Pat Lopez, Lincoln-Lancaster County Health Department Director Jane Ford and Mary Dean Harvey, state director of Social Services, met with Clinton before her Friday speech at a health care conference here.

The six told Clinton and Phil Lee, assistant U.S. secretary of health and human services, about Lincoln's Medicaid Referral System, a grassroots effort that has found doctors for 6,300 Medicaid patients over the past two years.

The program began in 1991, when Medicaid patients in Lincoln were having increasing trouble getting

The large turnout prompted one local health official to compare the event to the recent visit of Barney, the purple dinosaur, to Omaha.

care because most doctors were refusing to take new Medicaid patients.

The Medical Society, the Health Department and the Social Services Department worked together to find a solution.

Through the Medicaid Referral System they created, Medicaid patients can call one number at the Health Department to be referred to a doctor and get help with transportation or other problems that might make it difficult to get medical care.

Referrals are made by rotation so doctors are assured they won't be overloaded with Medicaid patients. Doctors can refer patients to public health nurses for follow-up care and if problems crop up. Doctors also can get help dealing with the state Medicaid bureaucracy.

The program won a Beneficiary Services Certificate of Merit from the federal Health Care Financing Administration last fall.

Both Clinton and Lee seemed interested in the local program and asked questions about how it was developed and how it works, Lopez said. "Her (Clinton's) questions were very as-

tute," she said.

Clinton was a good listener as well, Clark said. Although she had heard about the program just before her speech, she mentioned it several times and was able to summarize it accurately.

"We were pleased that we were the people she got to meet with. I think it indicates her interest in local solutions," Clark said.

Other items of note in relation to Clinton's Lincoln visit:

- Security was tight, with many Secret Service agents evident both inside and outside the Lied Center for Performing Arts, where Clinton spoke to an overflow crowd.

One local police officer on hand noted that Clinton didn't rate as many Secret Service agents as had President Bush during his visit to Lincoln, but she rated more agents than Marilyn Quayle, wife of the former vice president.

- Several local law enforcement officials also were on hand to protect Clinton. Those who helped out had to go through several hours of training on how to deal with any contingency.

- The large turnout of people for Friday's session of the health care conference and for Clinton's visit prompted one local health official to compare the event to the recent visit of Barney, the purple dinosaur, to Omaha. Barney's visit ended up being cut short when the popular children's figure was mobbed by children.

Health Leader Foresees Good In Reform Plan

BY MARY MCGRATH
WORLD-HERALD BUREAU

Lincoln — Former Rep. Bill Gradison, R-Ohio, said he doesn't know when health-care reform will come or exactly what it will look like.

"But I'm confident it will be a system with two typically American characteristics," said the president of the Health Insurance Association of America.

"It will be very complex. And it will be very expensive," he told participants at Friday's health-care conference.

"Many say you find the devil in details" of the plans, he said. "But I think you can also find God in the details."

He said several details of health-care reform have not been discussed fully enough for the public to characterize them yet.

One of these areas is the question of what will be in the basic benefit package. The package reportedly would be as good as or better than 85 percent of the health plans now available.

Such a package would mean that some companies might have to provide more benefits for employees, he said.

What is more, the federal budget probably would be affected, he said.

The benefits package would be more generous than Medicare in such respects as coverage for outpatient prescription drugs.

Gradison said it is inconceivable that the nation's elderly and disabled would get fewer benefits under Medicare than the rest of the country would receive.

Other aspects of reform that have not been fully discussed, he said, are what it will cost, how long it will take to phase in and how it will be paid for.

Gradison said coming up with funding will not be "an easy slam-dunk."

It can be done, he said, but it will be a tough sell.

Gradison said people can be motivated to support health-care reform and its cost if they think it will benefit them or their families.

Gradison said health insurers have concerns about the proposed purchasing cooperatives, or local health alliances, which would look for the best price and quality of health care offered by combinations of providers and insurers.

This system could lead to a declining number of providers and insurers, he said.

Hillary Clinton invited to tour BSDC, but visit to institution called unlikely

By Lana Likens
Daily Sun staff writer

In conjunction with a possible visit to Lincoln for a health care conference, Hillary Rodham Clinton has also been invited to tour the Beatrice State Developmental Center.

Jennifer Belles, Columbia Institute project associate, said Mrs. Clinton has been invited to attend the conference, "National Health Care in the 21st Century: National Challenges, Nebraska Solutions," to be held Friday, April 16, and Saturday, April 17, in Lincoln. Mrs.

Clinton is scheduled to give the Friday luncheon address, "A View from Washington."

Belles said late last week that Mrs. Clinton had not declined the invitation to the Nebraska conference, but a visit had not been confirmed, either. She said no announcement could be made that Mrs. Clinton would attend until a confirmation was received.

WHEN PAT Crawford, a member of Voice of the Retarded and the BSDC Parents Association, found out there was a chance Mrs. Clinton would come to Nebraska

for the conference, she invited Mrs. Clinton or a member of the National Task Force on Health Care reform she chairs to visit BSDC.

Mrs. Crawford said she has sent information on BSDC to task force members. She said it's important that Mrs. Clinton and task force members realize there is a need for facilities such as BSDC.

"The people there at BSDC need special services — they need the experts," she said.

She said her letter said that to really understand the health care needs of people who live at BSDC, a task force member should visit the

center.

"It would be wonderful if somebody would come," Mrs. Crawford said.

BSDC Superintendent Dr. Hugh Sage said Monday he did not expect Mrs. Clinton to tour the center. He said he has received no word from her staff, and no arrangements have been made for a visit.

Sage is one of those invited to attend the health care conference this weekend in Lincoln, however, and said he will attend. Sen. Bob Kerrey is chairman of the event and Gov. Ben Nelson is co-chairman.

Doctor: Health-Care Cost Doesn't Decide Quality

BY ROBERT DORR
WORLD-HERALD BUREAU

Lincoln — Less medical care might mean that Americans would get better medical care, a doctor who helped craft what is expected to become a key concept of national health-care reform said Friday.

Many Americans wrongly believe that they can get the best health care by paying a lot, said Dr. Paul Ellwood, president and chief executive officer of the Jackson Hole Group of Teton Village, Wyo. The health-policy analysis group is given credit for developing the "managed competition" concept.

"Fear still pervades much of our thinking that if we change the incentives so that we pay less, that will result in a loss of quality," he told those attending Friday's health-care conference.

"We can get better quality by doing less," he said.

That contention was a common theme of speakers at the health-care meeting. Dr. Ellwood and others contended, for example, that the risk of medical malpractice suits forces doctors to give too much care.

By contrast, managed competition calls for networks of doctors, hospitals and insurance companies to compete for the health-care business of large pools of people on the basis of quality and price. A purchasing pool might consist of a single large company. In other cases, a pool would consist of groups of small companies and individuals.

"I think we ought to call them McPools, after the president's eating habits," he said, referring to President Clinton's occasional stops at McDonald's while jogging.

Dr. Ellwood said he realized something was wrong with the existing medical payment system when he headed a physical rehabilitation center.

"We didn't do well at first, but then we got better at it, people got well faster and the beds emptied," he said.

But the center became worse off financially because it was being paid only for patients still in beds, he said.

To some extent, he said, that has been reversed by health maintenance organization plans that charge flat fees in advance and emphasize keeping people well.

Americans must learn to take better care of themselves, he said. In Japan, the health-care system "is atrocious" and the average hospital stay is 53 days, much

Consultant: Plan Must Protect All

WORLD-HERALD BUREAU

Lincoln — The Clinton health-care reform plan will prohibit insurance companies from cutting off small companies that have high medical costs, a health-care task force consultant said Friday.

E. Richard Brown, on leave as professor of public health at the University of California at Los Angeles, said a more difficult task will be drafting ways to compensate health-care plans for taking high-cost patients in the future and also to encourage the plans to become more efficient.

Brown said he had talked with the father of a 13-year-old cerebral palsy victim in Lincoln.

"The parents had to fight long and hard to get the equipment their son needs" from their insurance company, he said.

The health-care reform plan being developed "must protect the needs of all people," he said.

Brown said the "managed competition" concept will be influential in the new health-care plan. But many other ideas also will be drawn on, he said.

He cautioned that the national task force must be careful not to change the system too much. "We don't want to throw out the baby with the bath water," he said.

longer than in the United States, he said.

Yet the Japanese spend half as much on average as Americans for health care, he said.

"If there ever was an argument that fish is more important than medical care, Japan is it," he said.

Dr. Ellwood said national health-care reform must make doctors, clinics and other health-care providers accountable for the results of their treatment of patients. One way would be to have patients fill out a questionnaire measuring their satisfaction with the care they received, he said.

Health Care in the 21st Century:
National Challenges, Nebraska Solutions

Senator J. Robert Kerrey, Chairman

1) Do you believe that health care for all Americans should be considered a right or a major goal of society?

35% Right
60% Major Goal
5% Other _____

2) Do you believe that it is the responsibility of the government to provide basic health care services to all persons who are not able to pay for them?

71% Yes
26% No
3% No Opinion

3) Do you believe that the responsibility for health care reform lies primarily with the federal government, the states or with both equally?

26% Primarily Federal
17% Primarily State
57% Both Equally

4) Do you believe that in reforming the health care system highest priority should be given to controlling costs, providing access to all citizens or to improve quality? Please rank the following in order of priority with 1 being the highest priority, 2 the second highest and 3 the third.

_____ Controlling Costs

1 - 40%
2 - 41%
3 - 19%

_____ Improving Quality

1 - 9%
2 - 26%
3 - 65%

_____ Access to All Citizens

1 - 51%
2 - 35%
3 - 14%

5) Which general approach to the reform of health care services do you support?

20% National (Single Payer)
4% Pay or Play
35% Managed Competition
28% Other Market-Based Reform
13% Other _____

6) Do you favor or oppose a requirement that all employers provide basic health care services to all employees and their families?

49% Favor
43% Oppose
8% No Opinion

7) Do you believe that budgets for health care services at either the state or national level (or both) should provide enough funds to provide all necessary health care services regardless of the cost?

25% Yes
71% No
4% No Opinion

8) a. In the event funds provided by state and federal governments are not sufficient to pay for all services to all persons, would you favor a system such as the Oregon plan that allocates resources according to a system of priorities?

65% Yes
24% No
11% No Opinion

9) Do you believe that (a) long term care or (b) catastrophic health coverage should be considered in a major health care package or should they be explored as separate issues in the future?

a. long term care:

51% As Part of Health Care Package
49% Separate Issue in Future

b. catastrophic health coverage:

76% As Part of Health Care Package
24% Separate Issue in Future

10) Following are a number of proposals that have been suggested for inclusion in a plan for comprehensive health care reform. Participants were asked to rank the options according to importance for a successful health care reform plan.

2 malpractice reform
5 eliminating unneeded procedures
6 market competition
10 co-payments by users
15 deductibility of insurance premiums

- _9_ higher premiums for those engaged in high risk behavior (i.e. smoking)
- _1_ preventative medicine
- _13_ reducing fraud and overbilling
- _18_ a cap on government payments
- _3_ administrative reform
- _14_ repeal state mandates and provide uniform basic coverage
- _11_ portability of benefits
- _17_ Prescriptions with co-payments
- _8_ special incentives to ensure adequate services in rural areas
- _16_ limits on annual insurance premium increases
- _4_ extend coverage to all persons
- _12_ require all employers to provide basic coverage to all employees
- _7_ other _____

HEALTH CARE IN THE 21ST CENTURY:

National Challenges, Nebraska Solutions

Senator J. Robert Kerrey, Chairman
Governor E. Benjamin Nelson, Co-Chair

March 19, 1993

DR D WILCH
PO Box Cc
Winnebago, NE 68071-0747

Dear Dr Wilch,

President Clinton called health reform "an essential part of national revitalization" and has made it one of the nation's top priorities. With this in mind, we have decided to convene and chair a conference, entitled "Health Care for the 21st Century: National Challenges, Nebraska Solutions," on Friday, April 16 and Saturday, April 17, 1993. The conference will be held in the Union on the campus of the University of Nebraska-Lincoln beginning at 8:30 a.m. Friday morning, and we are pleased to invite you to attend and participate in this event.

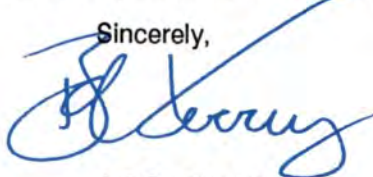
The goal of this forum is to inform Nebraskans about the central issues and reform proposals involved in the health care debate so they may make solid decisions about which plan they support, both nationally and locally. The conference will bring together experts in government, the health care professions and private industry to discuss the challenges of providing universal access to affordable, quality health care services. Featured speakers will include Dr. Paul Ellwood, Dr. Rick Brown and Governor Howard Dean.

During these two days, we hope you will join us in a thorough discussion of such important topics as managed competition, global budgeting, the President's proposal, and state initiatives for health care reform. Please see the enclosed agenda for more information.

The only expense to the participants will be the cost of the luncheon and refreshment breaks. To confirm your attendance, please complete and return the enclosed response form along with your check for \$17.00 made payable to the Columbia Institute, the coordinators of the event.

Your attendance and participation will help to assure the success of this important event. We look forward to seeing you on April 16 and 17.

Sincerely,



J. ROBERT KERRY
United States Senate



E. BENJAMIN NELSON
Governor, State of Nebraska



A COLUMBIA INSTITUTE Coordinated Event

REGISTRATION

Health Care in the 21st Century: National Challenges, Nebraska Solutions

- ☐ I will attend "Health Care in the 21st Century: National Challenges, Nebraska Solutions" at the University of Nebraska, Lincoln Union on April 16 and 17. My check for \$17.00 is enclosed to cover the cost of the luncheon and refreshment breaks. *(Please make checks payable to the Columbia Institute).*

NAME	ADDRESS	
TITLE	CITY/STATE/ZIP	
COMPANY	PHONE (OFFICE)	PHONE (HOME)

Mail to: **Health Care in the 21st Century:
National Challenges, Nebraska Solutions**
8 E Street, S.E.
Washington, D.C. 20003
Register early, as space is limited.

For more information, please contact
Senator Kerrey's office at
(402) 391-3411.

PREVIEW OF SPEAKERS

SENATOR J. ROBERT KERREY - Represents Nebraska in the United States Senate

After serving one four-year term as Governor of the State of Nebraska from 1983 to 1987, Senator Kerrey was elected to the United States Senate in 1988. Taking the initiative in health care reform, Senator Kerrey spent three years developing Health USA, a completely comprehensive health care package, and is now recognized as a leader in the Senate on this issue.

GOVERNOR E. BENJAMIN NELSON - State of Nebraska

Governor Nelson was elected in 1990 after serving as the state's director of insurance, executive vice president of the National Association of Insurance Commissioners, and attorney-of-counsel with Kennedy, Holland, DeLacy & Svoboda. Under Nelson's leadership, Nebraska has moved from 31st to 21st in *Financial World* magazine's "State of the States" financial health ranking.

LINDA BERGLIN - State Senator and Chair, Health Care Committee, Minnesota State Senate

First elected in 1980 and currently serving her fifth term, Ms. Berglin is the first woman full committee chair in the Minnesota State Senate as a result of her current position as Chair of the Health Care Committee. Immersed in the health care debate, she also holds the position of Co-chair on the Legislative Commission on Long Term Health Care and the Health Care Access Oversight Commission. Prior to the Senate, Ms. Berglin served four terms as a state representative.

HOWARD DEAN, M.D. - Governor, State of Vermont

Governor Dean was elected in November 1992 after serving as lieutenant governor and member of the Vermont House of Representatives. He is Co-chairman of the National Governors' Association Health Care Task Force and was recently named to President Clinton's health care task force headed by Hillary Rodham Clinton. Governor Dean earned his M.D. from Albert Einstein College of Medicine and completed his residency at the Medical Center Hospital of Vermont.

PAUL ELLWOOD, M.D. - President & Chief Executive Officer, Jackson Hole Group

Dr. Ellwood is currently concentrating his efforts on working with health care leaders to devise and implement "The 21st Century American Health System" to assure universal insurance coverage, managed competition, and health outcome accountability. He practiced medicine for 17 years and was coeditor of the *Handbook of Physical Medicine*. Dr. Ellwood is the first recipient of the U.S. Healthcare Quality Award for his outstanding contributions to the improvement of the quality of health care in the United States. He received his M.D. at Stanford University.

JANET SHIKLES - Director of Health Financing and Policy Issues, U.S. General Accounting Office

In her position, Ms. Shikles directs a staff of 140 people conducting audits, evaluations and policy analyses of Medicare, Medicaid and national health policy issues. Her recent studies have included analyses of lessons that can be learned from the Canadian health insurance system, cost containment strategies in the French, German and Japanese health systems, and current state initiatives. Previously, she was a senior analyst in health research with the U.S. Department of Health and Human Services.

Health Care in the 21st Century: National Challenges, Nebraska Solutions

Senator J. Robert Kerrey, Chairman
Governor E. Benjamin Nelson, Co-Chair

For more information, please contact
Senator Kerrey's office at (402) 391-3411.

Parking will be available at the state fairgrounds, one block north of Military Road on 14th.

DATE and TIME:

Friday, April 16, 1993
8:30 a.m. - 4:15 p.m.

Saturday, April 17, 1993
8:30 a.m. - 12:00 p.m.

LOCATION:

University of Nebraska, Lincoln
Student Union - Centennial Ballroom

PRELIMINARY AGENDA

8:30 a.m.	WELCOME AND INTRODUCTORY REMARKS Senator J. Robert Kerrey, Chairman Governor E. Benjamin Nelson, Co-Chair SESSION I: NATIONAL PERSPECTIVE	2:15 p.m.	PANEL DISCUSSION
		3:15 p.m.	QUESTIONS AND DISCUSSION
		4:15 p.m.	ADJOURNMENT
9:00 a.m.	SOCIAL VALUES VS. ECONOMIC NECESSITY ■ Janet Shikles, Director of Health Financing and Policy, U.S. General Accounting Office OPTIONS FOR REFORM	SATURDAY, APRIL 17, 1993	
		8:00 a.m.	COFFEE AND DANISH
9:30 a.m.	THE MARKET AND HEALTH REFORM	8:30 a.m.	WELCOME AND INTRODUCTORY REMARKS Governor E. Benjamin Nelson, Co-Chair
10:00 a.m.	MANAGED COMPETITION ■ Paul Ellwood, M.D., Jackson Hole Group	9:00 a.m.	KEYNOTE PRESENTATION ■ State Senator Linda Berglin, Minnesota State Senate
10:30 a.m.	COFFEE BREAK	9:40 a.m.	THE BLUE RIBBON COALITION ■ Frank Barrett, Chair
10:45 a.m.	ELEMENTS OF COST CONTROL IN THE CONTEXT OF A MARKET SYSTEM ■ E. Richard Brown, Ph.D., U.C.L.A. School of Public Health	10:00 a.m.	GOVERNOR'S INTERAGENCY COMMITTEE ■ Mark Horton, M.D., Chair
11:15 a.m.	QUESTIONS AND DISCUSSION Moderator: Senator J. Robert Kerrey, Chairman	10:20 a.m.	RESPONSE FROM LOCAL STAKEHOLDERS ■ Darroll Loschen, M.D., President, Nebraska Medical Association ■ Sister Norita Cooney, President, Mercy Midland Hos- pital ■ Neal Westphal, Personnel Director, Lincoln Telephone ■ Randy Horn, Executive Vice President, Mutual of Omaha Companies ■ Labor Representative*
12:00 p.m.	LUNCHEON		
12:45 p.m.	LUNCHEON ADDRESS: A View From Washington ■ Hillary Rodham Clinton, Chair, President's Task Force on National Health Care Reform*		
	SESSION II: STATE PERSPECTIVE		
1:30 p.m.	KEYNOTE PRESENTATION: A View From the State House ■ Governor Howard Dean, State of Vermont	11:30 a.m.	CONCLUDING REMARKS AND ADJOURNMENT Senator J. Robert Kerrey, Chairman Governor E. Benjamin Nelson, Co-Chair

**To Be Confirmed*

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Eastern Nebraska Office on Aging, Good Samaritan Hospital Hospice, Lincoln Area Agency on Aging, Nebraska Association of Home and Community Health Agencies, Nebraska Association of Homes for the Aging, Nebraska Association of Nurse Anesthetists, Nebraska Association of Public Employees - AFSCME Local 61, Nebraska Chiropractic Physicians Association, Nebraska Hospice Association, Nebraska Nurses Association, Nebraska Optometric Association, Nebraska Pharmacists Association, Nebraska State Physical Therapy Association, Northeast Nebraska Area Agency on Aging, South Central Nebraska Area Agency on Aging, Visiting Nurses Association

Health Care in the 21st Century: National Challenges, Nebraska Solutions

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