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Legislative Drafting [1]

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RESTRICTION CODES

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

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

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

SENATOR ROBERT BENNETT:

Senator Robert Bennett of Utah is the oldest member of the freshman class, and enters the Senate having made a fortune from the Franklin Day Planner. He currently serves on the Committee on Energy and Natural Resources, Committee on Banking, Housing, and Urban Affairs, the Committee on Small Business, and the Joint Economic Committee. In the two months he has been in the Senate, Bennett has co-sponsored no legislation with significant health policy implications.

SENATOR CHRISTOPHER 'KIT' BOND:

Senator Kit Bond of Missouri is known for his spirited partisanship and willingness to oppose popular initiatives -- such as the Americans With Disabilities Act and the 1990 Civil Rights Act. He co-sponsored a Republican health care initiative in the 102nd Congress that sought a \$150 billion solution to the lack of universal coverage, and when asked whether he was submitting the bill over Bush Administration objection said, "[Sununu] is not driving our bus." [NYT, 11/8/91]

Senator Bond recently introduced an administrative reform bill addressing the high cost of health care administration -- and excluding the increased costs or cancellation for sickness -- saying: "the loss of insurance coverage when a child becomes very ill is not risk-sharing, it's risk-avoidance. The broad health care reform is vital. It is a very, very complex problem, but there are certain, I think, readily agreed upon steps that we ought to take. I don't expect that we're going to get health care reform solved within the first 100 days. I think we can take some very significant steps, and I hope we will." [FNS, 1/4/93] Senator Bond was one of eight Republican co-sponsors on the Family and Medical Leave Act, and also co-sponsored Senator Dole's recent bill on Medicare (S. 176).

SENATOR THAD COCHRAN:

Mississippi Senator Thad Cochran conservative stand on almost all issues and chairmanship of the Senate Republican Conference reflects his Republican leadership role in the Senate. On health care. Senator Cochran recently said, "...it needs to be understood that the Republican contribution on the health care issue discussion indicated a willingness to work together, and an acknowledgement that this is one of the most serious problems we face in the country today, and that it ought to be given a very high priority. So I don't think we ought to misunderstand what the commitment is. And the commitment is to try to work in a bipartisan way to solve these problems that exist in the health care area, acknowledging that they're complicated, multifaceted." [Reuter Transcript Report, 1/26/93]

*Bureas - managed compet'n in new releases
not work. Care then back
on state - Risk management has to*

*nd to
avoid
Cst shifting.*

*the
in
prior
set*

reval areas -
Antitrust Reg a job -
Re: MBI, etc.

SENATOR WILLIAM "BILL" COHEN

managed Careg't'n -

Senator Bill Cohen from Maine is considered to be an unpredictable and liberal Republican, whose home state priorities often override partisan votes. Last session, Senator Cohen worked on a health care package which included a refundable tax credit for health insurance premiums and a nationwide low-cost basic benefits package. On January 27, 1993, Senator Cohen submitted S. 223, the Access to Affordable Health Care Act, a bill to contain health care costs and increase access to affordable health care, and for other purposes. Senator Cohen also co-sponsored Senator Mitchell's Freedom of Choice Act.

SENATOR LARRY CRAIG:

Idaho's junior senator Larry Craig emphasizes economic development and is opposed to any government regulations that might hamper this development. Senator Craig co-sponsored Senator McCain's Medicare Provider Payment Equity Act of 1993, which is designed to amend the Social Security Act to repeal the reduced medicare payment provision for new providers. He also co-sponsored Senator Dole's recent bill on Medicare (S. 176).

SENATOR JOHN DANFORTH:

Senator John Danforth of Missouri is one of two co-sponsors of Senator Kassebaum's BasiCare Health Access and Cost Control Act, which focuses on cost control through reform and simplification of private health care insurance. At the press conference on the submission of the legislation, Senator Danforth emphasized that, "the easiest thing to do is to introduce a bill that provides for universal coverage. The hardest thing to do is to provide for cost control." [FNS, 2/4/93] On January 21, Senator Danforth submitted S. 151 amending the Social Security Act, to permit payments under a State plan to certain vaccine manufacturers. He also co-sponsored Senator Dole's recent bill on Medicare (S. 176). The Senator has been vocal lately opposing the possibility of new taxes for health care reform, saying, according to The New York Times, "it would be 'extremely difficult' for Congress to pass new taxes for health care on top of those sought for deficit reduction." He is also quoted as saying, "How many big tax bills is Congress going to pass in a year? ... How much is the country going to swallow in a year?" [NYT, 2/21/93]

Landowner for whatever plan.

And GOP to help sell.

Unen'l - must agree on

managed Careg't'n - must agree

Real quest'n? will cost cost

Containment work.!

controlling
fees won't
work

why can
support
tax cuts

CRITIQUE OF SENATE REPUBLICAN TASK FORCE HEALTH CARE PROPOSAL

Two years ago -- before Senator Wofford's election propelled health care reform to the forefront of the public consciousness -- this might have been an innovative attempt to address some real issues in America's health care system. In 1993, however, amidst a public outcry for comprehensive reform of the entire health care system, it is an attempt to preserve the *status quo* -- offering a piecemeal approach that exacerbates the weaknesses of the current system. It is not a serious attempt to address America's crisis in health care as it neither controls costs nor guarantees the quality, affordable health care that will give Americans peace of mind. Furthermore, the Republicans offer no details of how they will finance this proposal.

REPUBLICAN PLAN HAS NO REAL COST CONTROL:

- The Republicans' proposals for reining in national health care spending are minimal. This proposal does not include the two most important aspects of a serious cost containment strategy -- controlling overall health care spending and limiting increases in payments to providers. It will throw more money into a system that doesn't work now.

TAX SUBSIDIES ONLY PAY FOR THREE MONTHS OF HEALTH INSURANCE:

- The credits and deductions offered by this proposal are too small to make a difference in the purchase of an insurance policy. Families USA estimates that it would cost a family of four, living in Washington, D.C., \$6,000 a year for a "bare bones" insurance plan with a \$300 deductible. In this case, the proposed tax credit (\$1,200) won't even pay for three months of health insurance. In addition, tax credits do nothing to control the escalating costs of health care and insurance premiums. These costs will therefore continue to rise -- further reducing the value of these credits to working families.

INCOMPLETE INSURANCE "REFORM":

- The Republican proposal offers no comprehensive insurance reform and does nothing to address the underlying causes of health inflation -- such as the overuse of technology, excessive increases in provider charges, and unnecessary procedures. Although improvements in small group insurance is an important component of any reform effort, this proposal does not include any cost containment measures. Successful reform of the small group insurance market can only be done in the context of comprehensive national effort.

MANAGED CARE INCENTIVES DON'T GO FAR ENOUGH:

- Many of large businesses with sophisticated managed care plans for their employees lead the charge for health reform, recognizing that their programs alone cannot stem the rising tide of health care inflation. No system-wide savings can be achieved in the absence of system-wide reforms.

MALPRACTICE LIABILITY REFORM -- BIG SOLUTION FOR SMALL PROBLEM:

- While the issue of medical malpractice needs to be addressed, malpractice reform is not meaningful cost containment as premiums for malpractice insurance represent less than 1 percent of our national health care spending.

REPUBLICAN TASK FORCE ON HEALTH CARE

SENATOR JOHN CHAFEE, CHAIR:

Senator John Chafee of Rhode Island is considered one of the more liberal Republicans in the Senate. He co-sponsored this year's Family and Medical Leave Act. Senator Chafee has been very active in the health care reform forum, working on legislation in the 102d Congress to expand Medicaid to help the mentally retarded, and to allow federally funded family planning agencies to advise women of the availability of abortion. He co-sponsored Senator Mitchell's Freedom of Choice Act of 1993 (S. 25). He also co-sponsored Senator Lautenberg's PRO-KIDS Act of 1993 (S. 261), a bill to protect children from exposure to environmental tobacco smoke in the provision of children's services.

SENATOR ROBERT DOLE, REPUBLICAN LEADER:

A Washington Post article recently commented: "Well versed and experienced in health care matters, [Senator Dole of Kansas] is poised to be the stalking horse for the conservatives. He has been an advocate of market based incremental reform similar to that proposed by President Bush during the campaign. Dole is expected to oppose most forms of government regulation, most especially mandates on businesses, but has not entirely closed the door on some type of price controls to control costs. He wants to make sure that rural areas fare well under any plan." [Washington Post, 1/26/93]

Most recently, on January 21, Dole introduced S. 176, a bill to amend Medicare -- focusing on rural health issues, such as essential access community hospitals, regional referral centers, medicare-dependent small rural hospitals, prohibitions on carrier forum shopping, and demonstrations. In the 102d Congress, Dole sponsored a bill to make the tax deduction for health insurance costs of self-employed individuals permanent, and to provide for a phased-in increase in the deductible amount of health insurance costs from 25 to 100 percent. He also submitted a bill that included an insurance pooling mechanism.

Senator Dole recently said: "...if we're going to have health care reform, it's got to be bipartisan. Nobody has the votes for health care reform. We don't have the votes. We're the minority. Democrats don't have the votes because they have different ideas. But it seems to me this issue is so important that it shouldn't be politicized. Now, politics -- there's a place for it, and there's a place not for it, and I think health care reform is one of those areas." [Reuter Transcript Report, 2/16/93]

Supports a large mandate - Society has to subsidize

Blue - one of shortcomings in health system - electronic system

Capitation or managed care? Blue bed way to work + save \$

SENATOR PETER DOMENICI:

Senator Pete Domenici of New Mexico has been reluctant to diverge publicly from the Republican party lines. Addressing the issue of health care in December, the Senator said, "you can't get the federal budget under control without dramatically reducing the increasing costs of health care." [Reuter Transcript Report, 12/10/92] Senator Domenici released a report last October with Senator Nunn that suggested that to control escalating federal health care costs, Congress should enact legislation by December 1993 to cap spending on entitlement programs such as Medicare and Medicaid.

SENATOR DAVID DURENBERGER:

Minnesota Senator David Durenberger's committee responsibilities (Labor, Environment, Aging) reflect the issues -- particularly health care -- with which he is most concerned. Senator Durenberger tried to salvage the Catastrophic Health Care Act when Congress repealed it in 1989. He authored the Small Employer Health Benefit Reform Act of 1990 and is opposed to some paths towards universal health care -- maintaining that the financial burden could fall too heavily on the business community. In the 103rd Congress, Senator Durenberger is a co-sponsor of Senator Kennedy's NIH Reauthorization bill and has also co-sponsored, along with Senator Hatch, Senator Kennedy's Long-Term Care Insurance and Improvement Accountability Act -- which seeks to amend the Public Health Service Act to improve the quality of long-term care insurance through the establishment of Federal standards. He also co-sponsored Senator Dole's Medicare reform bill (S.176).

According to a recent AP story, Durenberger stated that "Nobody can ever say we can get to 100 percent (health insurance) coverage without a tax... It's hard to imagine covering 36 million ... (who now have no insurance) without additional public subsidies." He has repeatedly urged caution in working towards universal coverage, opting for managed competition yielding savings to generate expanded coverage over a long period of time. [BNA Pension Reporter, 1/25/93]

SENATOR SLADE GORTON:

Senator Slade Gorton of Washington has recently returned to the Senate. In the 103rd Congress, he is a co-sponsor of Senator Dole's Medicare reform bill.

*role hoped
Dregg. state flexibility
core benefit per individual*

SENATOR ORRIN G. HATCH:

In the early 1980's, Senator Hatch of Utah chaired the Labor Committee and is still active on issues on the committee's agenda, such as child care legislation (on which he broke with his leadership) and civil rights legislation. Senator Hatch led the opposition on the Labor Committee to mandated health insurance in 1988 and 1989. Like Senator Durenberger, Senator Hatch co-sponsored Senator Kennedy's NIH Reauthorization bill and Senator Kennedy's Long-Term Care Insurance and Improvement Accountability Act. In the 102d Congress, Senator Hatch sponsored the "Health Care Access and Affordability Act of 1992" (S. 3348), which was a consumer-choice based health reform plan.

SENATOR MARK HATFIELD:

Senator Mark Hatfield of Oregon was a Republican co-sponsor on the Family and Medical Leave Act, and co-sponsored Senator Harkin's Contraceptive and Infertility Research Centers Act (S. 95) -- which provides for the development and operation of centers to conduct research with respect to contraception and centers to conduct research with respect to infertility. Although he is pro-life, he did back amendments to allow family planning at Title X clinics. Recently, Senator Hatfield sponsored a bill to establish a National Center for Sleep Disorders Research within the National Heart, Lung and Blood Institute (S. 104).

SENATOR JAMES M. JEFFORDS:

Senator James Jeffords of Vermont is considered one of the most liberal Republicans in the Senate and has frequently broken with the Republican leadership -- notably in his efforts to repeal the "gag rule". Last October, Senator Jeffords sponsored legislation to create a single-payer, Canadian style "MediCore" health insurance, designed to pay the cost of prescription drugs and long-term care for the elderly, split costs between federal and state governments (with the federal government paying 70 percent), and replace insurance premiums with a federal tax of 6 percent on payrolls - 4 percent paid by the employer and 2 percent by the employee. [Gannett, 10/6/92] In the current Congress, Senator Jeffords has co-sponsored the Family and Medical Leave Act and the Freedom of Choice Act.

SENATOR NANCY KASSEBAUM:

*Some support
for tax cap -*

Senator Nancy Kassebaum of Kansas co-sponsored the NIH Reauthorization Act and Senator Dole's Medicare reform bill, but perhaps most significantly, sponsored the BasiCare Health Access and Cost Control Act (S. 325). Her initiative is designed to provide for comprehensive health care access expansion and cost control through reform and simplification of private health care insurance and other means.

*This is a recommendation / give autonomy back to
care providers*
X SENATOR JOHN MCCAIN:

*Kentucky
who
pay for
care
benefit
what's
in
core?*
Senator John McCain of Arizona, a traditional conservative, has submitted, without co-sponsors, the Children's Health Care Improvement Act of 1993 (S. 28), which seeks to improve the health of America's children. He also sponsored, and Senator Craig co-sponsored, the Medicare Provider Payment Equity Act of 1993 (S. 31), which would repeal the reduced Medicare payment provision for new providers. The Senator also co-sponsored Senator Dole's Medicare reform bill.

SENATOR MITCH MCCONNELL:

Kentucky's junior Senator, Mitch McConnell, co-sponsored Senator Dole's Medicare reform bill. The Senator was recently named head of the Better America Foundation, which was developed to form Republican positions on issues like health care reform.

SENATOR FRANK MURKOWSKI:

VA - 195 Healthcare budget

Alaska Senator Frank Murkowski is generally a free-market oriented conservative. In the 102d Congress, Senator Murkowski co-sponsored Senator Hatch's Health Care Access and Affordability Act.

SENATOR DON NICKLES:

*employment mandate - some
can't afford it. will lead to
unemployment.*

Senator Don Nickles of Oklahoma has been very active in setting the overall tone of Republican policy as Chair of the Senate Republican Policy Committee. Senator Nickles co-sponsored Senator Dole's Medicare reform bill. When asked for a point of agreement between Republicans and Democrats, Senator Nickles said, "Streamlining and coordinating administrative costs in health care." [Gannett, 12/18/92] During his campaign this fall, Senator Nickles emphasized medical malpractice reform and vouchers for people unable to afford health insurance.

*Connie Maehr If apply a cap, something's
going to have to be given up. Focus on
Cancer - Prevention screening / early
protection.*

No tax cap - ~~tax~~ - on the table.
Not tax core benefits pkg

SENATOR ROBERT W. PACKWOOD:

Senator Bob Packwood of Oregon was an important co-sponsor on the Family and Medical Leave Act, and attended the Rose Garden signing ceremony. He also co-sponsored Senator Mitchell's Freedom of Choice Act, Senator Harkin's Contraceptive and Infertility Research Centers Act of 1993, Senator Pryor's Rural Primary Care Act of 1993 and the State Health Service Corps Demonstration Act (S. 241). On the Republican side, Senator Packwood co-sponsored Senator Dole's Medicare bill. During his campaign last fall, Senator Packwood singled out health care as an issue on which he was closer to then-Governor Clinton than his opponent, Representative Les AuCoin.

— both - for a federal plan & cover many ins.

SENATOR ALAN SIMPSON:

Senator Alan Simpson of Wyoming enjoys a position in the Senate Republican leadership as Minority Whip. He has taken partisan positions on issues like the Clean Air Act and other environmental issues, but breaks with many Republicans in his pro-choice stance. Senator Simpson sponsored no health care legislation in the 102nd Congress and has neither sponsored nor co-sponsored health care legislation in the 103rd Congress.

Deal / sell is how to get control Senate groups.
AARP has their own system.

SENATOR ARLEN SPECTER:

Pennsylvania's Senator Arlen Specter has long staked out his territory on traditionally Democratic issues, like support for labor and women's rights. During last fall's campaign against Lynn Yeakel, Senator Specter proposed a health care reform package focussed on preventative care, while increasing federal funding for health care from his position on the Labor, Health and Human Services, and Education Subcommittee of the Appropriations Committee. He also touted his co-sponsorship of the "Health Care Access and Affordability Act of 1992," a consumer choice based health care reform proposal.

SENATOR TED STEVENS:

Senator Ted Stevens of Alaska has recently co-sponsored Senator Wellstone's Antiprogestin Testing Act of 1993 (S. 222), which requires the Commissioner of Food and Drugs to collect information regarding the drug RU-486 and review the information to determine whether to approve RU-486 for marketing as a new drug. He also co-sponsored Senator Lautenberg's Preventing Our Kids From Inhaling Deadly Smoke (PRO-KIDS) Act of 1993 (S. 261).

Make sure universal access means
universal access / Alaska example.

HAC
① drug
costs

② Long
term
care

SENATOR JOHN W. WARNER:

Senator John Warner of Virginia has generally taken conservative positions although he is pro-choice and favors repeal of the Hatch Act. Senator Warner sponsored no health care legislation in the 102nd Congress and has neither sponsored nor co-sponsored health care legislation in the 103rd Congress.

Shurmond - Malpractice

*Chaffee - bear in mind raising
minimum wage will have
a peak for bus. mandate.*

Mtg with Sec. from

 Dr. Raymond

Wyden - mammoth education jobs

- 82 impressions are everything
- > people panic w/out. least sight of a prob.
don't say "evolving".
- > every group has to put something
on ~~the~~ table: 1) providers, insurers, drug.
- > trial lawyers - everyone knows
you won't cut off people's rights.
- * > where get ^{short term} savings: insurance
premium regulation as opposed
to price controls where we look
like big gov't.
- > CBO - before gov't starts buying
new tech, why not have
drug co, ~~etc.~~ & device guys
prove to gov't the we're getting
something.
- > Oregon waiver - ^{go back if -} benefit pkg not
in line with core benefits
not essential.

M E M O R A N D U M

TO: Hillary Rodham Clinton
FR: Chris Jennings
RE: Visit With Senator Moynihan
cc: Melanne, Steve R., Kim

March 10, 1993

Tomorrow at 4:45, you are scheduled to meet with Finance Chairman Daniel Patrick Moynihan. Likely attendees at the meeting will be Lawrence O'Donnell (Staff Director), Faye Drummond (long-time health policy assistant), and Paul Offner (Faye's staff counterpart and former Ohio Medicaid Director).

BACKGROUND

The Chairman has been one of our best friends on Capitol Hill on a wide range of issues. He has basically stated that he will support virtually any health care proposal the President proposes. At the same time, he has expressed some reservations that the issue is so complicated that it may take more time than the President may think for the Administration to develop and the Congress to digest a comprehensive health reform proposal.

Despite his reservations, the Finance Committee Chairman has supported the Majority Leader's contention that health care reform has its best chance for passage if it can be incorporated into the reconciliation bill. Irregardless of what happens in the budget process, Senator Moynihan -- if treated with the respect that he deserves -- can be counted on to be helpful to "set the stage" in terms of desirable hearings and statements.

On health care, Senator Moynihan is not a detail person. He generally asks broad questions with broad implications, rather than focusing on the many complexities of the health care issue. The primary health oriented issues that he has previously indicated some interest in include: (1) the inadequacy of mental health and substance abuse coverage benefits, and its impact on the homeless population, (2) state-based reform and need for flexibility (he was the lead sponsor of a state-based managed care initiative that was adamantly opposed by Henry Waxman), and (3) the impact of any reform effort on New York's powerful, influential and vulnerable hospital providers.

LIKELY DISCUSSION

The Chairman had to miss the last scheduled meeting with you because he was sick. You may want to acknowledge this and ask him how he is feeling. With Senator Moynihan, even more than most Members, one cannot predict the topic of conversation. He probably will want to make sure you are still on track with your bill and to get a sense as to what direction you are headed. More than anything, I believe, he will be more process oriented and "big picture" oriented than most of your recent meetings.

✓ Long term care to start could be cheaper than long term care - get 2 for 1 - get nursing home to not rip off old people.

gov't plan in long term care - ^{could buy} there some kind of organization (like a HIPIC) ^{< bargaining unit >}

* Don't have individ'l spend fortune on nursing home coverage.

✓ Start ^{*} home care benefit - already good foundation in some states

✓ some kind of prev. insurer

Pepper had recommended voluntary pool c for nursing care

prob with catastrophe -

reason: don't pay up front + not pay for this.

Drugs: payors - drug bill to keep costs down
(drug price init rates to danger escalation)

If do drugs - how do you maintain control?

If gov't pay for medicine, drug co show new incremental value.

Senator Rockefeller's staff has expressed some frustration that he has not been informed of the policy pronouncements that Secretary Brown has been making before he has made them. Although this is not a major problem and can likely be solved with a meeting between the new Chairman and the new Secretary (which is now being scheduled), it is something the Secretary may be well advised to be more sensitive to.

Vick Raymond reports that he thinks that the Secretary is open to even more innovative approaches to health reform than he has been discussing with the press. Like Senator Rockefeller in many ways, Vick believes that upside of the Secretary's statements is that they serve the useful purpose of building up credibility with these sometimes difficult groups. As Vick said, Richard Nixon could go to China; perhaps Secretary Brown will be able to later raise some difficult issues.

Vick prepared a short one page background on the Secretary's position on reform, as well as a three page summary of the Department. This information is attached for your review.

Chairman Montgomery, I believe, will be somewhat deferential to Senator Rockefeller. He will want to hear how important you feel that the VA and their advocates are part of the process. Since Vick used to work for the Chairman, he is very comfortable with who is at the table. As one of the few physicians in the Congress, Congressman Rowland probably can be counted on to raise the importance of having doctors in the process. Although you addressed this at your meeting with him at Energy and Commerce, he may well raise it again.

This meeting is very important, but I would guess that it will not be difficult at all. Senator Rockefeller will make sure it goes very smoothly.

M E M O R A N D U M

TO: Hillary Rodham Clinton
FR: Chris Jennings
RE: Rockefeller, Montgomery, Rowland Veterans Meeting
cc: Melanne, Steve R., Lorraine M., Kim Tilley

March 10, 1993

After your meeting with the Women Senators, you are scheduled to meet with the Senate and House Chairmen of the Veterans' Affairs Committees, Senator Jay Rockefeller and Congressman Sonny Montgomery. Also in attendance at the request of Congressman Montgomery will be Congressman J. Roy Rowland, who is on the House VA Committee and is a physician.

Attending this meeting with you will be Vick Raymond, Secretary Brown's right-hand policy guy. Vick is Secretary's staff designate to the Health Task Force and is participating in the Work Groups.

BACKGROUND

One extraordinarily important political goal of any health reform proposal is to design it in such a way that a vote against the Clinton health reform initiative is a vote against veterans. The veterans represent one of the strongest lobbying forces in Washington and we need them on our side.

In the past, having the veterans on your side in health reform meant that they had to be treated separate and apart from the rest of the system. Now, there is growing recognition within the VA advocates community that the very survival of special services for veterans depends on the ability of the VA system to play an important role within the context of entire system.

Having said the above, there is great nervousness that this means that the VA and its providers will have to be totally "integrated" into the system and that veterans may not receive the type of special care to which they have become accustomed. Moreover, there are still many interest groups within the veterans community who are viscerally opposed to any significant changes from the days of old.

Senator Rockefeller shares your belief that we must the veterans' groups forward on this issue. However, since he just became Chairman this year, he wants to make certain he has the time to build enough credibility with the groups BEFORE he pushes too hard publicly. He is working on building those relationships now. One that he apparently has been very successful with is the friendship he now has with Chairman Montgomery. They are very close.

AntiTrust - politics is good -
put ball in providers' ct.

(drug co just hope they can do a few
things voluntarily)

decided not to-- the President decided not to ask Congress to repeal the law. He
thought it was a good idea to have the law and not
get--

HUNT: Bob--

NOVAK: No, wait a minute. The new thing is, he's got a task force, where there
is a federal law which says that you cannot have closed-door meetings if you
have private citizens sitting in. That's because they don't want insiders to
come in. They are breaking the law on that.

HUNT: Can we let the Senator in for a second?

Sen. FEINSTEIN: Do you really believe that Mrs. Clinton is a private citizen?

NOVAK: Yes, because--

Sen. FEINSTEIN: You don't believe that the historic role of first lady is one
of-- you've had first ladies that have sat in Cabinet meetings, that have met
with security advisers, that know as much, that are the main advisers to their
husbands. I think this argument of Hillary Clinton being a private citizen is
ridiculous. She's a bright, knowledgeable woman. I think she's--

NOVAK: You can't have it both ways.

Sen. FEINSTEIN: --performing a public service, and I think it's great for you
guys just to sit back and carp and criticize.

NOVAK: Well, that's what I make a living at, but. Dianne--

SHIELDS: You, Bob?

NOVAK: You can't have it both ways. If she is a private citizen, you cannot have
these meetings closed. If she is a government official, she is breaking the law.
It's one or the other, and we are a government of laws, not feelings.

HUNT: Dianne, I am much closer to your view on this, as I am on most issues
between you and Bob, but there is one difference than other people, and that is,
the President can't fire her. I mean, that does make it a bit different.

Sen. FEINSTEIN: Yes, and then you ask the question, why should he? I mean, you
wouldn't fire somebody who's the head of a task force anyway.

HUNT: Well, it depends on what kind of a job they did.

Sen. FEINSTEIN: They'd complete their work. You'd accept the report.

NOVAK: She hasn't testified before Congress either.

Sen. FEINSTEIN: And you may act on it or not act on it.

CHAREN: If she were a Republican, there would be a special prosecutor appointed
to look into this entire matter.

SHIELDS: The whole thing, just like everything else in Bill Clinton's economic
plan, has got to be performance tested. If it works, it's great--

NOVAK: No.

SHIELDS: --and if it doesn't, it's a bomb.

NOVAK: That's Stalinist.

SHIELDS: It isn't Stalinist.

Women - women's coverage - often or

Mukulshi: Grafted on

variety of settings
variety of health policy's.

Kanebner - women - N/14

Byper - can't make the benefits
pkg. political

if you can separate the benefits
pkg from people make pol. pts.

abortion / midwives, etc.
→ set up by proposals.

public health education.

Boards need to be representative of
people.

Carol Brown - Robert Wood Johnson Foundation
Des Moines "Innocence"

file legis'n re: Open Mts.

Murray - obgyn - had to be prev. ^{care} ~~say~~ gives
reproductive health
preexist'g.
"healthy women" "healthy babies"

is right in the sense that they do want to keep them as a potential victim if they do experience political and political and that works.

HUNT: Bob, you kind of hate the practice of villains, assigning blame, don't you?

NOVAK: No, Mark's exactly right on that. The interesting thing is that Mrs. Clinton is running around the country making these speeches about it being nuts. She's saying there's a problem with health care. You know, that is not the scoop of the year. The problem is, what are you going to do about it? And somebody named Ira Magaziner, [sp?] according to The Wall Street Journal and other newspapers, is really making the decisions, not Mrs. Clinton on that score, and he's got enormously big problems. One thing that was overlooked by a lot of people is that Robert Reischauer, head of the Congressional Budget Office, said in effect that if you put on these price controls on development, you are going to have less effective health care. This is a tremendously difficult problem they haven't begun to solve, and they're already selling the non-solution.

HUNT: Dianne, I don't think that these meetings all ought to be open. You can't conduct any, you can't put together a piece of legislation that way, but I'm offended. There are 400 people that are working for the Magaziner-Hillary Clinton group. They won't even tell us who they are. Now, don't the people have a right to know that?

Sen. FEINSTEIN: Oh, I think the people have a right to know who's working on it. First of all, the task force hasn't met yet. Second of all, I think they're right to say that they're not going to have a table that is a mile long and negotiate the thing down to nothingness, which is what I believe would happen. I believe that if you talk to the AMA today you'd find out that they've written a letter which indicates that they're going to be making some changes of their own viewpoints, with respect to some of the proposals, and I also believe that the Clinton people are very receptive to hearing from the AMA. I think, again, it gets down to how do you shape the table with the hundreds of interests that are related to health-care reform, to take them all around the table and come out with something that means anything?

HUNT: Mona, don't you agree, though, that doctors are going to have to take some kind of a whack? I mean, doctors' salaries have soared in the last-

CHAREN: But doctors' salaries are a very tiny percentage of overall health-care costs.

HUNT: No, that's true, that is true.

CHAREN: And, you know, there are dangers here-

NOVAK: They're the scapegoat, though.

CHAREN: They can be the scapegoat, if this political. Look, the health industry is one-seventh of our economy. If they screw this up, if they make the wrong decisions and depress that part of the economy, it could send our whole country into a recession.

SHIELDS: Al, just one point, I mean, Bob loves to take these pokes at Mrs. Clinton, and I just want to remind Bob of his very favorite British prime minister and most cherished conservative, Margaret Thatcher, said, 'If you want anything said in politics, ask a man. If you want anything done, ask a woman.' Now, Bob, Bill Clinton obviously heeded Margaret Thatcher, why don't you?

HUNT: I thought you were a feminist, Bob.

NOVAK: Oh, that is so silly, Mark, that I'm embarrassed for your saying it. Let me tell you, there's a very serious problem involved with this that has nothing to do with health care. There is an anti-nepotism law, which I think is a stupid law, passed because of the Kennedys, that says she can't hold public office. He

Heinstein -

hospital - ratios staff to patient skewed
aim benefits pkg to excellence &
prevention
Choice

Lows - inequities -

Crock addicted women can't
use medicaid to get off
Crock -

"Hong Kong exception"

NIH - must be ~~gov~~ covered in NIH
clinical tests

& How will capitation control costs over
the long haul.

> malpractice reform must be
accompanied by ins. reform (preexisting
conditions)

Wage & price controls not good idea.

Parliamentary Leadership - can't
allow benefit pkg to be
opened up!

have an Indep. Comm. set the parameters

M E M O R A N D U M

TO: Hillary Rodham Clinton
FR: Chris Jennings
RE: Visit With Senator Moynihan
cc: Melanne, Steve R., Kim

March 10, 1993

Tomorrow at 4:45, you are scheduled to meet with Finance Chairman Daniel Patrick Moynihan. Likely attendees at the meeting will be Lawrence O'Donnell (Staff Director), Faye Drummond (long-time health policy assistant), and Paul Offner (Faye's staff counterpart and former Ohio Medicaid Director).

BACKGROUND

The Chairman has been one of our best friends on Capitol Hill on a wide range of issues. He has basically stated that he will support virtually any health care proposal the President proposes. At the same time, he has expressed some reservations that the issue is so complicated that it may take more time than the President may think for the Administration to develop and the Congress to digest a comprehensive health reform proposal.

Despite his reservations, the Finance Committee Chairman has supported the Majority Leader's contention that health care reform has its best chance for passage if it can be incorporated into the reconciliation bill. Irregardless of what happens in the budget process, Senator Moynihan -- if treated with the respect that he deserves -- can be counted on to be helpful to "set the stage" in terms of desirable hearings and statements.

On health care, Senator Moynihan is not a detail person. He generally asks broad questions with broad implications, rather than focusing on the many complexities of the health care issue. The primary health oriented issues that he has previously indicated some interest in include: (1) the inadequacy of mental health and substance abuse coverage benefits, and its impact on the homeless population, (2) state-based reform and need for flexibility (he was the lead sponsor of a state-based managed care initiative that was adamantly opposed by Henry Waxman), and (3) the impact of any reform effort on New York's powerful, influential and vulnerable hospital providers.

LIKELY DISCUSSION

The Chairman had to miss the last scheduled meeting with you because he was sick. You may want to acknowledge this and ask him how he is feeling. With Senator Moynihan, even more than most Members, one cannot predict the topic of conversation. He probably will want to make sure you are still on track with your bill and to get a sense as to what direction you are headed. More than anything, I believe, he will be more process oriented and "big picture" oriented than most of your recent meetings.

Mich - Engagement Conversation

Rocheffeller et al

R: Vets service agencies falling in new ways

fewer Vets; aging at 2x the rate

scared: vivid memories of Canada -

eliminated the VA system

* Mtg of vets service organizations *

Strong Montgomery & I gd relationship

M: nd to protect the system - 3.4 m vets

Rowland: Cost effectiveness of system - more cost effective
gd care
Then medicare
or medicaid

* Albuquerque - showing arrangement

R: Change needs to be viewed as an opportunity

Rowland: hearings on how VA system
might get integrated &
demonstrate how in its best
interests

A Profile of Veterans Served by DVA's Health Care System

Hospitalized Patients:

- Two thirds report their health status as poor or only fair and two thirds report disabilities which keep them from working.
- Half have family incomes below \$10,000 a year
- Forty percent have a military-related disorder
- Only one third have private insurance and fewer than 16% are employed full time

Outpatients:

- Only 40% work full time
- Forty percent report their health status as poor or only fair
- Over 30% report disabilities which keep them from working at all
- One quarter have no private health insurance
- Nearly 30% have family incomes less than \$10,000 yearly

Nursing Home Residents:

- 90% are dependent on others in at least one of the activities of daily living

Overview of How Veterans Use DVA Health Care

- A group of about 1.5 million veterans receive health care solely from DVA during the course of any particular year.
- At least another 1.1 million veterans have more than one source of care but use DVA for a significant percentage of their care during any particular year.
- A number of veterans appear to use DVA care as a "safety net" when they need expensive or specific care that would be otherwise difficult for them to obtain.

Evidence of this type of behavior comes from the following:

- * Approximately one third of veterans who are hospitalized in DVA facilities in any one year had never before received care from DVA.
- * Approximately one fifth of veterans who receive DVA outpatient care in any one year had never before received care from DVA.
- * Of all of the episodes of hospitalization for acute nonsurgical care provided to veterans throughout the U.S. in any one year, 14% of the episodes are provided in VA facilities. This same figure is 8% for all hospitalizations for surgery. It is hypothesized that the figure is lower for surgery because there is no incentive to perform unnecessary surgery in DVA as there is in the private sector.

Larry Reverso - VFW -

SM - get the groups together.

R - prob with VA hospitals not
user friendly.

Rowland - go to Dublin, Ga

no real pres 'til you talk about

AMA - Global budgets

Bob K - R to Clinton

~~Galeforce~~
Leadership to not
go on health side
Use your power

analysis

Special Expertise in VA Health Care

Provides direct health care to approximately one in ten veterans in any given year. There are nearly 27 million veterans today.

Backup support to the Armed Services in the event of war or national emergency

- ☐ More than 150 VA medical centers and clinics treat over 75,000 substance abuse patients
- ☐ Treatment of the homeless, chronically mentally ill
- ☐ Specialized treatment programs for women veterans
- ☐ Palliative and hospice care
- ☐ Non-institutional, long-term care including Adult Day Health Care, Hospital Based Home Care and Community Residential Care and Respite Care programs
- ☐ The largest hospital-based dental care system in the U.S.
- ☐ Specialized care for spinal cord and brain injured persons
- ☐ Unparalleled experience in treating Post Traumatic Stress Disorders and readjustment counseling

- ☐ Hospitalized patients are sicker, underemployed and have few alternatives outside VA:
 - Two-thirds report their health status as poor or only fair and two-thirds report disabilities which keep them from working
 - Half have family incomes below \$10,000 a year;
 - Forty percent have a military-related disorder;
 - Only one-third have private health insurance and fewer than 16% are employed full time.
- ☐ Outpatients are sicker with little community support:
 - Only 40% work full time;
 - Forty percent report their health status as poor or only fair;
 - Over 30% report disabilities which keep them from working;
 - One quarter have no private health insurance;
 - Nearly 30% have family incomes less than \$10,000 yearly.
- ☐ Nursing home users: 90% are dependent on others in at least one of the activities of daily living.

- ☐ During an emergency, up to 30% of the 67,000 VA beds would be made available.
- ☐ Principal national backup during Desert Storm

magicians

① Welfare - King is medicare

I'll raise any tax for a system
that gets rid of medicare &
offers everyone a card.

(67% black children ^{now} are of welfare)
we're getting used to it

HRC/ "we're thinking about asking everyone
paying something" for the card. - M: yes

② Mental Health -

③ Inherent limits of productivity
growth in a system that's
individualized

Bushman's Disease - Cost disease

some sectors proportionately
more costly.

Rochester - need to limit capacity

Melanne

THURSDAY / MARCH 4, 1993

WASHINGTON, DC / NEW ORLEANS, LA / LITTLE ROCK, AR / WASHINGTON, D.C.

Louisiana

9:45 a.m. Meet and Greet with Local Dignitaries

11:00 a.m. Glazer Steel and Aluminum Company

12:30 p.m. Working Lunch at Mulate's

Arkansas

6:55 p.m. March of Dimes - Awards Dinner and Ceremony

Contents

Meet and Greet with Local Dignitaries Briefing

Glazer Steel and Aluminum Company Briefing

- Discussion Group List

Working Lunch at Mulate's Briefing

Political Briefings - LA

- Louisiana Health Care Overview
- Congressional Briefing
- LA Political Briefing
- Economic Package's Impact on LA

March of Dimes Awards Dinner Briefing

- HRC's Table List
- Distinguished Guest List
- March of Dimes' Clintons Accomplishments List
- Beverly Sills bio
- Beverly Sills introductory remarks
- Information on Allison Kosik, March of Dimes Good Will Ambassador
- Remarks

Political Briefing - AR

- Economic Package's Impact on AR
- AR Political Briefing

NEW ORLEANS RECEPTION

LOUISIANA CONGRESSIONAL DELEGATION

★ **Senator J. Bennett Johnston (D)**
Louisiana's Senior Senator. Has served as Senator since 1972. Is up for re-election in 1996.

★ **Senator John Breaux (D)**
Recently elected. Currently serving as Chairman of the DLC.

★ **Congressman William Jefferson (D)**
Serving his second term as Representative of Louisiana's 2nd district, which encompasses New Orleans. The 2nd District is of primarily African-American make up; Jefferson is the first African-American to represent this District in the U.S. House of Representatives.

★ **Congressman Billy Tauzin (D)**

★ **Congressman Jimmy Hayes (D)**

★ **Congressman Cleo Fields (D)**

STATEWIDE ELECTED OFFICIALS

★ **Governor Edwin Edwards (D)**
Serving his fourth term. Controversial.

★ **Lt. Governor Malinda Schwegmann (D)**

★ **Treasurer Mary Landrieu**

★ **Attorney General Richard Ieyoub**

★ **Insurance Commissioner Jim Brown**

★ **Commissioner of Elections Jerry Fowler**

STATE LEGISLATURE

★ **Senator Sammy Nunez**

★ **Senator Dennis Bagneris (D)**
President Pro-tem of the Senate.

★ **Senator Diana Bajoie (D)**
First Female in the State Senate. Advocate of children's and women's issues.

★ **Senator Mark Morial (D)**

Ran against William Jefferson for Congress. Is respected as an advocate for New Orleans in the Senate.

★ **Senator Jon Johnson (D)**

Considered a candidate for mayor in 1994. Well respected in the Senate.

★ **Senator Marty Chabert**

★ **Senator Chris Ullo**

★ **Rep. John Alario**

★ **Rep. Sherman Copelin (D)**

In New Orleans politics for over 20 years. Very influential and controversial in the Senate.

★ **Rep. Avery Alexander (D)**

Pioneer civil rights leader. 80+ years old.

★ **Rep. Arthur Morrell (D)**

Has been in the State Legislature for almost a decade.

★ **Rep. Paulette Irons (D)**

Recently elected to the Legislature. Has not served yet.

★ **Rep. Renee Pratt (D)**

Replaced Bill Jefferson when he moved from the House to the Senate. Well respected. Strong on women and children's issues.

★ **Rep. Ed Murray (D)**

Serving first term in the House.

★ **Rep. Mitch Landrieu (D)**

Strong legislator. Well-respected. Anti-casino stand. Preservationist. Father is Moon Landrieu, former mayor of New Orleans and former HUD secretary in the Carter Administration.

★ **Rep. Naomi White Warren (D)**

Represents one of the poorest areas in the city. The Desire Housing Development is in her district.

★ **Rep. Troy Carter (D)**

Worked as an aide to Mayor Barthelemy before successfully running for a seat in the State Legislature.

★ **Rep. Joseph Accardo**

CITY of NEW ORLEANS/JEFFERSON OFFICIALS

*** Mayor Sidney J. Barthelemy (D)**

Serving his last year in his second four-year term. Pushed for one land-based casino for New Orleans to create jobs and spur economic development.

*** Councilman Lambert Boissiere**

Has been a Councilman for almost eight years. Considered a leading candidate for Mayor in next year's election.

*** Councilman Jim Singleton**

Planning to run for Council-at-Large next year. Represents an area commonly called Central City. Distressed area. Serves on Council Budget Committee.

*** Councilman Johnny Jackson**

Represents the eastern part of the city.

*** Councilman Joseph Giarrusso**

Is a Councilman-at-Large. Has been a councilman for almost 16 years.

*** Councilwoman Dorothy Mae Taylor**

Councilmember-at-Large. Serving last year of two year term. Sponsored the controversial anti-discrimination Mardi Gras ordinance last year that led to the integration of some carnival organizations.

*** Councilman Jackie Clarkson**

*** Civil Sheriff Paul Valteau**

*** Criminal Sheriff Charles Foti**

*** District Attorney Harry Connick**

*** District Attorney John Mamoulidas**

*** Sheriff Harry Lee**

*** Parish President Mike Yenni**

*** Public Service Commissioner Irma Muse Dixon**

*** Public Service Commissioner John Schwegmann**

*** Assessor Errol Williams**

*** Assessor Ken Carter**

*** Assessor Janyce Dagan**

*** Assessor Ronald Burke**

* **Coroner Frank Minyard**

* **Attorney Donna Fraiche**

Chair of Downtown Health Complex Group. Very much involved in the community. Active in various civic and business organizations.

* **Shelia Webb**

Deputy Director of the Health Department. Has been instrumental in obtaining grant monies from the federal government and the private sector to fund much needed health care programs in the city.

* **Jinx C. Broussard**

Press Secretary to the Mayor and State Press Secretary for Clinton/Gore '92.

March 3, 1993

GLAZER STEEL AND ALUMINUM

DATE: March 4, 1993
LOCATION: New Orleans, LA
TIME: 11:00 a.m.
FROM: Kim Tilley

I. PURPOSE

To meet with full-time workers who are either paying or can't afford to pay their own health insurance premiums because their employer was forced to drop this expenditure due to skyrocketing premiums.

II. BACKGROUND

Glazer Steel and Aluminum is a family owned steel and aluminum service center (i.e., they buy directly from the steel mills and sell to boat builders and contractors.) The company was founded in 1945 by Jerome Glazer; upon his death two years ago, his son-in-law, Arnold Goldberg, assumed control of the company. There are approximately 69-75 employees in the New Orleans facility. (FYI, there is a branch located in Knoxville, TN and the Gore family, evidently, knows the Goldberg-Glazers quite well.) In total, the company employs approximately 100 people and is not unionized. (A while back, the employees evidently voted not to unionize. We notified the Steelworkers that we were making this visit and they were fine.)

Health Care Benefits

Glazer provided their employees health benefits until about eight years ago when skyrocketing premiums forced them to drop this coverage. Glazer has used the same health insurance company, Liberty Mutual based in Boston, for the past 30-40 years. While the company was unable to continue paying the premiums, an employee can opt to continue coverage through the company, thereby allowing for lower premiums (comparably) and having the premium deducted directly from his/her paycheck. Only eleven employees currently have opted to continue coverage through the company.

Costs

The average premium as provided through Glazer and Liberty Mutual is:

Family of Four

\$ 332 - biweekly

\$ 664 - monthly

\$8637 - yearly

Single

\$ 145 - weekly

\$ 289 - monthly

\$ - yearly

NOTE: Mr. Goldberg expressed concern about his company being harmed by this visit. He seems to be worried that negative comments will be made because 1) the company executives are well-paid, and 2) the employees are not unionized.

III. PARTICIPANTS

Arnold Goldberg, Vice President - Glazer Steel and Aluminum

Brad Glazer, Son of Jerome Glazer, company founder

Discussion group list follows.

IV. PRESS PLAN

Open.

V. SEQUENCE OF EVENTS

- o Meet & greet curbside;
- o Proceed to informal discussion.

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. report	Re: Glazer Steel & Aluminum [employees] (2 pages)	03/04/1993	b(6)

COLLECTION:

Clinton Presidential Records
First Lady's Office
Melanne Verveer
OA/Box Number: 20036

FOLDER TITLE:

Legislative Drafting [1]

2013-0534-S
ry1572

RESTRICTION CODES

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

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

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

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

RR. Document will be reviewed upon request.

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

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

March 3, 1993

WORKING LUNCH AT MULATE'S

DATE: March 4, 1993
LOCATION: Mulate's
TIME: 12:30 p.m.
FROM: Kim Tilley

I. PURPOSE

To discuss health care reform with a diverse local group of health care professionals or somehow involved in health care.

II. BACKGROUND

Each of the three members had a hand in inviting the lunch participants. As noted below, the group represents diverse views and many times not necessarily that of the Member's who invited them.

III. PARTICIPANTS

Senator John Breaux
Senator Bennett Johnston
Representative Jefferson

Marcus Carson - (B) AFL-CIO's LA Health Care Campaign (Considered to be more in line with the Administration's position than Senator Breaux's.)

Donna Fraiche (fresh) - (B) - Attorney, Locke, Purnell, Raine, Harrell and the Chamber of Commerce's designee to the Medical Industries Council. Their goal is to make New Orleans into a major referral center like Houston.

Elliot Roberts - (B) - Administrator of Charity Hospital in New Orleans. He is also a former administrator of Harlem Hospital in NY and Cook County Hospital in Chicago.

Jack Finn - (B) - New Orleans Hospital Council

Joan Savoy - (B) - Co-Chair of LA Health Care Commission, Great Expectations (Maternal and Child Health) - public health representative

Frank Riddick - (J) - M.D., Alton Ochsner Medical Foundation; Chairman, American Group Practices Association (e.g. Mayo Clinic)

Dr. William Mohan - (J) - Louisiana Health Care Authority

Dr. Janet Ramey - (J) - Dean, School of Nursing at Southern University

The Honorable Chris Pilley - (J) - Secretary, Health and Hospitals, State of Louisiana

Virginia Sheehy - (J) - Pennington Biomedical Research Center

Water Leger - (B**) - Senior partner, Leger and Mestayer

Gene Lambert - (B**) - small businessman, owner of Lambert Prosthetics

Albert Flucki - (B**) - business, Asher Cleaners

Mrs. Andrea Jefferson - (WJ) - Director of Post Graduate, Off Campus Studies
Grambling University

Fran Bussie - (WJ) - Vice Chair, Louisiana Health Care Authority

Vic Bussie - (WJ) - President, LA AFL-CIO

Dr. Johnny Gibson - (WJ) - President, New Orleans Medical Association

Dr. Sandra Robinson, former Secretary of Health and Human Resources, LA

Trevor Bryan - (WJ) - attorney

Clare Jupiter - (WJ) - attorney

Dr. Keith Ferdinand - (WJ) - President, Physicians Association of Louisiana

(B) - invited by Senator Breaux

(J) - invited by Senator Johnson

(WJ) - invited by Representative Jefferson

**These people had already been invited to participate in Glazer event, when a decision was made to made the event consist solely of Glazer employees. Senator Breaux invited them so that they could still share their stories.

IV. PRESS PLAN

Closed.

V. SEQUENCE OF EVENTS

- o Senator Breaux makes introductions and acts as the moderator;
- o After lunch, proceed to Riverwalk for meet & greet w/ area residents. (Riverwalk is, evidently, similar to Faneuil (spelling?) Hall in Boston. James Rouse designed both complexes.)

March 3, 1993

MEMORANDUM

TO: Kim Tilly, Research
FROM: Laird Burnett
SUBJECT: Louisiana-specific health information

IN GENERAL:

Louisiana is 48th out of 51 states (& D.C.) in the percentage of people who have health insurance. In 1991, 800,000 non-elderly Louisiana residents (22.5%) had no health insurance. The number of non-elderly residents without insurance rose by more than 70,000 from 1990-1991.

Statewide, the problems related to health care faced by Louisiana are very similar to those in Arkansas. Louisiana is largely a rural state and as such faces tremendous shortages of health care professionals in rural areas (as well as in inner city areas).

Louisiana's economy is largely natural resource-based. As such, there are a large number of small businesses in the state which service the oil and gas, petrochemical, fishing and agricultural industries. There are also a lot of small business employees and self-employed persons who are, of course least likely to have insurance.

In general, premium increases in the state have risen at about the same rate as the rest of the country. Total health care expenses for a typical family have risen from \$1,671 in 198 to over \$3,800 in 1991. During the last decade (1982-92) a typical Louisiana family's health payments rose 341% faster than wages.

The infant mortality rate for the state was approximately 12% from 1987-89. However, the rate among blacks (approx. 17%) was much higher than among whites (approx. 8%).

The state was 49th out of 51 states in the percentage of teen out-of-wedlock births and percentage of babies born with low birth weights. It is 50 out of 51 in the number of children living in poverty and 26% of children have no health insurance coverage.

NEW ORLEANS' HEALTH CARE INDUSTRY:

A recent study by the Chamber of Commerce in the New Orleans area found that the health care industry is one of the five largest sectors of the regional economy. From 1987 to 1991, medical services accounted for 7,000 new jobs in the New Orleans metropolitan area or 24% of total employment growth. As such, a conscious goal of the city's economic development plans has become to further develop the health care industry to compete with other regional centers such as Houston and Birmingham.

CHARITY HOSPITAL SYSTEM:

Louisiana has a unique Charity Hospital system which has been in existence for over 100 years. Its mission is two-fold: (1) to provide free care to the poor and indigent and (2) to serve as a center for medical residency programs for Tulane University's and Louisiana State University's medical schools.

Until recently, the Charity system used to be financed largely by state revenue. This has changed in the last three years or so as the state has taken advantage of the Medicaid disproportionate share program. More patients are enrolled in Medicaid and virtually all of the indigent care provided at Charity is paid for by disproportionate share payments.

The Charity system is composed of 9 hospitals around the state, the largest of which is the Charity Hospital of New Orleans. The State of LA has recently reorganized the Charity Hospital system under an independent Board (LA Health Care Authority). The LHCA issued a strategic plan in 1991 recommending that a number of the Charity Hospitals around the state be replaced with new facilities. As a first step, the State recently purchased an existing facility from the Sisters of Mercy and over the next 3-4 years will be moving departments from the old Charity Hospital to the new facility. Tulane and LSU Medical Schools have already begun to fight over who will have control of the new hospital, just as they have fought over Charity's resources as a center of medical education for decades and the battle continues.

◆ SENATOR JOHN BREAU

Health Care

Senator Breau's interest in health care seems to have surfaced in this Congressional session. Breau was a chief sponsor of the Conservative Democratic Forum proposal in the Senate. The combination of his service on the Finance Committee, his CDF backing and his Southern constituency make his vote critical on the Senate floor. We expect that Breau may also have a significant influence over Senator Johnston, who does not have as extensive an involvement in the health care legislative process. Breau's staff is involved with the working groups and are very impressed with the Task Force thus far. They have indicated that he is willing to look beyond the CDF proposal at other options. Breau is particularly concerned with the impact of health care on small businesses and rural areas.

Senator Breau last October introduced, with Senator Boren, the Managed Competition Act of 1992 (S. 3299), the Senate companion bill to managed competition legislation introduced by Congressmen Jim Cooper, Michael Andrews and Charles Stenholm (H.R. 5936). In a Congressional Record statement on February 24, Senator Breau laid out his support for managed competition in the absence of price controls, stating, "I do not believe that a successful long-term solution to health care inflation and access can be achieved using a top-down regulatory approach that depends on a Federal process of budgeting and price controls to contain the cost of health care services."

Economic Package

Despite some initial hesitancy, Senator Breau has been generally supportive of the President's economic program, but has focussed his public comments on the need for spending cuts beyond those currently proposed. Senator Breau has expressed his opposition to the President's proposed energy tax. Further, in the February 24 Budget Committee hearing on the President's plan, Senator Breau questioned the Administration's choice of targeted capital gains exclusions over a broad cut in the capital gains tax rate.

Senator Breau currently serves on the Commerce Committee, on which he Chairs the Subcommittee on the Merchant Marine; the Finance Committee, on which he Chairs the Social Security and Family Policy Subcommittee; and on the Special Committee on Aging.

◆ SENATOR BENNETT JOHNSTON

Health Care

Senator Johnston has not sponsored any major health care legislation in the Senate. It is unlikely that he will do so until after the President introduces the Administration's proposal. Johnston may defer to Breau on health care, as he has similar concerns on its impact on small business and rural areas. Johnston is also concerned with the financing of the health care package. He is a strong advocate of the VAT and may try to tie this to health care funding to win support for the idea.

Economic Package

Senator Johnston has spoken out against the President's BTU tax, which he has argued falls heavily on Louisiana's struggling oil and gas industry. In fact, Senator Johnston

introduced a bill on January 28 (S. 254) to amend the Internal Revenue Code to impose a fee on the importation of crude oil or refined petroleum products. The bill has been referred to the Senate Finance Committee, where it has not taken further action. Johnston has also been a supporter in the past of the 936 tax credit, which is being reduced significantly in the Clinton Economic plan.

Despite these reservations, Senator Johnston has publicly stated his intention to back the President.

Senator Johnston currently Chairs the Energy Committee. He also serves on the Appropriations Committee, on which he Chairs the Energy and Water Development Subcommittee; the Budget Committee; the Select Committee on Intelligence; and the Special Committee on Aging. Senator Johnston will not be facing reelection again until 1996.

◆ REPRESENTATIVE WILLIAM JEFFERSON

Health Care

Congressman Jefferson has not sponsored any legislation regarding health care and has had no significant involvement with the Health Care Task Force. Jefferson, however, is a co-sponsor to Representative Byrne's (D-VA) Immunization Now Act.

In the 102nd Congress, Congressman Jefferson sponsored a bill (H.R. 2691) concerning the licensing of Health Care Professionals. The bill was never brought to the floor for a vote. Jefferson also sponsored a bill (H.R. 3034) to amend and expand the Child Abuse Prevention and Treatment Act. The bill was signed into law by President Bush in May of last year.

Economic Package

Congressman Jefferson is in support of the President's economic plan. Jefferson has even expressed his approval for the energy tax, despite pressure from his constituency to oppose the measure. You should be aware, however, that the Congressman introduced a bill (H.R. 838) on February 4 that calls for the same import tax as in the above mentioned Johnston bill. The bill has been referred to the Ways and Means Committee, and no further action has been scheduled at this time.

Congressman Jefferson currently serves on the House Ways and Means Committee and its Social Security Subcommittee as well as the Committee on the District of Columbia and its Fiscal Affairs and Health Subcommittee. As you know, Congressman Jefferson is serving his second term in the House, representing New Orleans in Louisiana's second district.

many business and community leaders in the City. He is up for re-election in 1995 and many speculate that he will not seek a second term. However, Edwards has yet to say that he will not run.

Given the uncertainty over Edwards' gubernatorial intentions, others are eyeing the Governor's seat. Thus far, State Treasurer Mary Landrieu, (the Clinton Co-Chair for Louisiana) and Lt. Governor, Melinda Schwegmann are mentioned as possible contenders.

Mayor Sidney Barthelemy is completing his second term in office. However, he is receiving mixed reviews. Barthelemy strongly supports the idea of having a casino in the state and has been unable to solve the City's fiscal woes, which are hampering his future political prospects. Barthelemy will be up for re-election in 1994.

NEW ORLEANS' REACTION TO PRESIDENT CLINTON'S ECONOMIC PLAN

Energy Tax. The state's Congressional Democrats must choose between helping the President pass his economic package or going against influential state business groups who oppose the energy tax portion of Clinton's proposal. Dan Borne, President of the Louisiana Chemical Association, contends that, "The BTU-based energy levy proposed by President Clinton will make domestic chemical products more costly than foreign competitors and further stated that, energy to the petro-chemical industry is what flour is to a bakery." Borne's group plans to lobby the Congressional Delegation against the tax. Additionally, similar opposition is being expressed by the Mid-Continent Oil and Gas Association in Baton Rouge because the organization fears that the tax will disproportionately affect the natural gas industry.

Additionally, the New Orleans Times-Picayune reported on February 19, 1993, that the President's reform package received a less-than warm welcome from the New Orleans' business community, who feared that the proposal will increase their operating costs. Small businesses expressed mixed concerns, some worrying that the economic plan does not provide incentives to hire more workers or increase pay levels, while others indicated that the President's investment tax credit proposals will assist small businesses in modernizing operations.

Still others, such as George Groetsh, Jr., General Manager of Groetsch Wholesale Grocers, were worried about the President's economic proposal to tax fuel, which is a large expense for distribution firms. Moreover, according to distributor John W. Stone, Jr., whose firm's barges supply fuel to ocean ships state in a recent news story that, "If the government under the President's economic plan, were to impose the fuel tax on vessels engaged in international trade, that it would stifle the fuel business in Louisiana ports." Stone further commented that, "At the present time, ships in international commerce are exempt from tax on fuel products and supplies and business owners were unsure whether the exemption would extend to Clinton's proposed oil tax." Overall,

the populous expressed a deep concern that spending cuts should be implemented before taxes are increased.

However, Congressman Billy Tauzin indicated that the President's proposed energy tax will benefit Louisiana. Tauzin believes that natural gas - the dominant fuel produced in Louisiana - will receive more favorable treatment under a BTU tax than other forms of energy, like oil or coal. "If we must have an energy tax, the BTU tax on all energy forms - not just oil and gas - is a better choice," says Tauzin.

CONGRESSIONAL DELEGATION

Louisiana has seven members in the U.S. House of Representatives, four Democrats and three Republicans. Both U.S. Senators are Democratic.

Senator Breaux has served since 1987 and easily won re-election last fall. Breaux was Campaign Co-Chair for President Clinton and worked tirelessly on his election bid.

Senator J. Bennett Johnston has served since 1973 and was re-elected in 1990. He is Chairman of the Senate Energy and Natural Resources Committee. Senator Johnston has indicated that he would prefer a national sales tax to the President's energy tax. Given the Senator's Chairmanship, his stand on the energy tax could prove crucial in the President's attempts to pass his economic plan. Johnston noted that, "speaking only for myself and very tentatively so - it is my preliminary view that a VAT is a much better way of raising needed revenue because it is broader-based, has no regional or sectoral disparities and does not adversely affect our international competitiveness, because exports are exempt." Johnston is known as "Mr. Oil and Gas" for his support of the state's dominant industry and has refused to take a firm stand on the President's economic proposal until his Committee holds hearings. However, in a February 28, 1993, story in The New York Times, Johnston indicated that he opposed higher energy taxes but said that he would ultimately back the President. Johnston defeated challenger David Duke in 1990 and will be up for re-election in 1996.

The members of the Louisiana Congressional Delegation are:

Rep. W.J. (Billy) Tauzin (D)	Rep. Bob Livingston (R)
Rep. William Jefferson (D)*	Rep. Jim McCrery (R)
Rep. Cleo Fields (D)	Rep. Richard H. Baker (R)
Rep. James A. Hayes (D)	

Congressman Jefferson* represents the New Orleans area. Jefferson was Co-Chair of Clinton's Louisiana campaign and was handily re-elected last fall to a second term. The Congressman's political organization did, however, suffer major defeats within the City of New Orleans.

THE STATE LEGISLATURE

There are 30 Democrats and six Republicans in the State Senate. The State House is comprised of 87 Democrats, 16 Republicans and one Independent. Samuel B. Nunez, Jr. is President of the Senate. John A. Alario, Jr. is Speaker of the House.

Governor Edwards has called a special legislative session for March 7, 1993 to decide how to deal with the state's \$618 million deficit. Edwards has proposed a plan which relies largely on tax increases, including \$454 million in projected casino revenues and only \$180 million in budget cuts.

ISSUES OF INTEREST

Economy. Louisiana has been in a recession since the collapse of the oil industry in the early 1980's. Through the expansion of the health-care industry and tourism, the state's economy has improved. However, according to the Louisiana Department of Labor, the unemployment rate is 8% statewide and 7.2% for New Orleans, compared to the 7.1% national average.

The February 26, 1993 New Orleans Times-Picayune story announcing the Department's unemployment figures indicated that employment levels increased from January 1993 to January 1992 in the following areas: retailing is up by 3,300 jobs; the hotel industry is up by 1,000 positions; and health services jobs are up by 1,700. Also, those areas showing decreased employment rates are: oil and gas jobs, down by 700 and the shipbuilding and repair segment, down by 1,000 positions. Moreover, in the same article, Timothy Ryan, Director of the Business and Economic Research at the University of New Orleans said that the economic figures represent slow but steady growth which the region can anticipate to continue. Ryan further indicates that, "Overall, it's not a great picture, but it is a positive picture. We think most of the decline is finished for oil and gas."

State Budget. Currently, Louisiana is experiencing a \$600 million shortfall and Governor Edwards has called a special session of the legislature to raise taxes, specifically property taxes. Many legislators are calling for more spending cuts before raising revenue. However, it is speculated that the President's economic package will hurt the efforts of two Louisiana State Senators to pass a broad-based oil and gas processing tax.

Casino. Last summer the Legislature approved Governor Edward's plan to license the world's largest land-based casino in downtown New Orleans. The plans, the financing, the developer, the Governor and the Mayor are all being criticized by the media and local interest groups. The state hopes to use the revenue generated by the casino to assist financially strapped Louisiana. The specific criticisms of the casino are: retaining the historic buildings in New Orleans' French Quarter and the casino's design, which is expected to contrast with the City's architecture.

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
002. report	Re: Louisiana (partial) (1 page)	03/03/993	b(6)

COLLECTION:

Clinton Presidential Records
First Lady's Office
Melanne Verveer
OA/Box Number: 20036

FOLDER TITLE:

Legislative Drafting [1]

2013-0534-S

ry1572

RESTRICTION CODES

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

- P1 National Security Classified Information [(a)(1) of the PRA]
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RR. Document will be reviewed upon request.

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

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- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
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Note: The Louisiana State Democratic Party said that the casino idea is very controversial and you should not address it in any form.

Health Care. The New Orleans Times-Picayune reported that during Espy's February 19, 1993, visit to New Orleans, he and Congressman Jefferson concurred that the City's medical community is not likely to feel many adverse effects of the President's economic proposal. However, given that health care is the largest growth industry in the New Orleans region -- between December 1991 and December 1992, almost 3,000 health-related jobs were created -- and that the President's plan calls for new limits on Medicare reimbursements made to hospitals, doctors, medical equipment companies and medical labs, the ultimate effect upon the state is uncertain.

Crime and Punishment. Robert Wayne Sawyer is set to become the first man to die in Louisiana by lethal inject on Friday, March 5, 1993. May activists opposed to the death penalty say Sawyer should not be executed because he is mentally retarded. Sawyer, age 42 was convicted in the 1979 torture slaying of his girlfriend's baby sitter.

New Orleans Campaigns to Host the 2004 Summer Olympics. According to the Los Angeles Times and the U.S. Olympic Committee, New Orleans along with Boston, Miami and St. Louis have begun campaigns to host the 2004 Summer Olympics.

Arena Project. Governor Edwards and New Orleans Mayor Barthelemy unveiled plans for a 20,000-seat sports arena in the city. The arena will be the centerpiece of the Union Passenger Terminal Multi-Modal Transportation Center Project and will be built between the Superdome and the Pontchartrain Expressway. It is expected that an Embassy Suites Hotel will accompany the project. Barthelemy supports the arena concept and hopes that it will revitalize the City's central business district and ultimately attract a professional basketball franchise. The project is expected to cost between \$80 million and \$90 million, with projections that it could bring more than \$200 million into the area's economy. Governor Edwards cited a study by Tulane economist William Oakland that predicts the creation of between 4,500 and 8,500 new jobs, and nearly \$20 million in annual tax revenue with the new arena.

AN ARKANSAS FYI: In a conversation with Skip Rutherford, he indicated that if you were travelling to Little Rock you should be aware of the following two items: (1) The Legislature is currently in session and (2) Thursday, March 4, 1993 is Election Day. The voters will be voting on a measure to change the form of government in the City of Little Rock from a city manager form of government to a muted/mayor-council form of government. Rutherford believes that the measure will fail.

NOTE: The information contained in this summary document reflects the status of the President's February 17 economic plan as of February 26, 1993. Estimates are based on allocation formulas in current law, as modified by the President's proposals, and assume that the plan is enacted as proposed.

02/27/93

03:35 PM

Impact of President's Economic Plan on Localities

Louisiana

Stimulus

- o Increase CDBG funding for LA by \$50 million in 1993
- o Increase federal aid to highways by \$45 million
- o Increase transit urban formula grants for Baton Rouge (\$0.5 million), Shreveport (\$0.4 million), New Orleans (\$2.5 million) and Other (\$0.7 million)
- o Increase rural formula capital grants by \$0.6 million
- o Increase transit elderly and disabled grants by \$0.3 million
- o Increase Head Start meals program by \$1 million
- o Increase Wastewater State Revolving Fund funding by \$9 million
- o Increase Watershed Resource Restoration Grants by \$1 million
- o Fund Education grants for the disadvantaged summer program by \$18 million
- o Increase Education grants for the disadvantaged by \$0.8 million
- o Increase funding for childhood immunization initiative
- o Increase funding for SBA Section 7(a) program by \$28 million
- o Increase water and wastewater loan funding by \$16 million
- o Increase water and wastewater grant funding by \$6 million
- o Increase very-low income housing loan funding
- o Increase very-low income housing grant funding
- o Increase funding for single-family housing guarantees
- o Increase Research Protection funding
- o Fund Ready-to-go Historic Preservation Project by \$0.2 million
- o Increase funding for repair and maintenance and construction of the following Army Corp Engineer Water Projects:
 - New Orleans to Venice construction acceleration
 - Atchafalaya Basin culvert repair
 - Channel Improvement bank stabilization
 - Mississippi River Levees flood control structure repair
- o Increase TEFAP by \$0.6 million

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02/27/93

03:35 PM

Impact of President's Economic Plan on Localities

- o Increase VA maintenance and minor construction (\$3.3 million)

Investment

- o Double 1994 HOME funding for LA to \$42 million
- o Increase federal aid to highways by \$40 million
- o Increase transit urban formula grants for Baton Rouge (\$0.6 million), Shreveport (\$0.5 million), New Orleans (\$3.2 million) and Other (\$0.9 million)
- o Increase rural formula capital grants by \$0.7 million
- o Increase transit elderly and disabled grants by \$0.1 million
- o Increase Head Start meals program funding in 1994 by \$3 million
- o Increase Drinking Water State Revolving Fund funding in 1994 by \$7 million
- o Increase Clean Water State Revolving Fund funding in 1994 by \$13 million
- o Increase funding for single-family housing direct loans by \$9 million
- o Increase funding for rental assistance grants and vouchers
- o Increase funding for business and industry loan guarantees
- o Increase funding for community facility direct loans
- o Increase funding for rural development grants
- o Increase funding for intermediary relending program
- o Increase Child Care Development Block Grant funding
- o Provide Permanent Extension of Low-Income Housing Tax Credits with \$5 million in 1994
- o Increase funding for natural gas utilization Research and Development
- o Increase Watershed Resource Restoration Grants in 1994 by \$0.4 million

Entitlements

- o Assess examination fees for FDIC-insured state-chartered banks
- o Reduce Medicaid match to 50%

March 3, 1993

MARCH OF DIMES DINNER AND AWARDS CEREMONY

DATE: March 4, 1993
LOCATION: Excelsior Hotel, Little Rock
TIME: 6:55 p.m.
FROM: Kim Tilley

I. PURPOSE

To receive an award for significant contributions to the health and well-being of the citizens of Arkansas.

II. BACKGROUND

For 16 years, the Arkansas Chapter of the March of Dimes Birth Defects Foundation has honored outstanding Arkansans with its "Arkansas Citizen of the Year" Award. This event is a major fundraising event for the Arkansas March of Dimes; this year's goal is to raise \$150,000. This year is the first time that the award will be presented to co-recipients.

III. PARTICIPANTS

Head Table List (follows)

IV. PRESS PLAN

Open.

V. SEQUENCE OF EVENTS

- o Proceed to Gov. George Izard Room for group photo w/ past laureates;
- o Drop-by cocktail reception already in progress;
- o Proceed to dinner;
- o Steve Stephens begins program with welcome of Past Laureates;

- o Introduction of Clinton/Rodham family members present;
- o Introduction of Allison Kosik, March of Dimes Good Will Ambassador;
- o Video;
- o Introduction of Beverly Sills - Chairman of Board, March of Dimes
- o Beverly Sills introduces HRC and presents award (NOTE: The award consists of a gold statuette and neck medallion. The medallion will be presented in an open box -- not placed around your neck);
- o HRC remarks;
- o Steve Stephens adjourns ceremony

IV. REMARKS

Follow.

CITIZEN OF THE YEAR DINNER
March 4, 1993
Guests at Mrs. Clinton's Table

- 1. Mrs. Hillary Rodham Clinton**
- 2. Steve Stephens, Little Rock, Arkansas**
Trustee, March of Dimes Birth Defects Foundation
Assistant to the Chairman, Stephens Inc.
Director of Corporate Communications, Stephens Inc.
- 3. Mr. and Mrs. Mack McLarty, Washington, D.C.**
White House Chief of Staff
- 4. Mrs. Beverly Sills, New York City, New York**
Chairman, Board of Trustees, March of Dimes Birth Defects Foundation
- 5. Dr. Jennifer Howse, White Plains, New York**
President, March of Dimes Birth Defects Foundation
- 6. Ms. Marion Kahn, Little Rock, Arkansas**
Liaison to the White House for Citizen of the Year Dinner, 1993
President, Marion Kahn Communications, Inc.
- 7. Mr. and Mrs. Mochtar Riady, Jakarta, Indonesia and Hong Kong**
Chairman of the Board, The Lippo Group, Jakarta, Indonesia
- 8. Mr. Alan Rosenthal, Miami, Florida**
Trustee, March of Dimes Birth Defects Foundation
Rosenthal & Yarchin (Law Firm)

PAST LAUREATES TO BE INTRODUCED

Dr. Bessie Moore
Father George Tribou
Hershal Friday
Finley Vinson
Terry Renaud
Larry Wallace
Sister Margaret Vincent Blanford
David Jones
Jerry Maulden
John Phillips
Mary Anne Stephens
John Paul Mamererschmidt
Jerry Hamara

DISTINGUISHED GUESTS

Dr. Jennifer Howe - President, March of Dimes Birth Defects Foundation

Alan Rosenthal - Attorney, Rosenthal & Yarchin in Miami, FL and member of the Board of Trustees, March of Dimes Birth Defects Foundation

Mr. & Mrs. Mohtar Riady - Indonesian businessman

Mac and Donna Kay McClarty

Governor Jim Guy Tucker and Mrs. Betty Tucker

CLINTON FAMILY MEMBERS

Virginia Kelley and Dick Kelley

Liz Burke

Marie Clinton-Bruno

Gilbert Cornwell

Brett Cornwell

March of Dimes
Birth Defects Foundation
National Headquarters
1275 Massachusetts Avenue
White Plains, New York 10605
Telephone SM 428 7100



SOME HIGHLIGHTS OF PRESIDENT CLINTON'S AND MRS. CLINTON'S ACCOMPLISHMENTS IN IMPROVING INFANT AND CHILD HEALTH IN ARKANSAS AND THROUGHOUT THE NATION

President Bill Clinton and First Lady Hillary Rodham Clinton have a distinguished history of working individually and together on programs to improve the health of babies in Arkansas and throughout America. Among these are:

- o Governor Clinton convened and gave the keynote address at "Our Children, Our Future," the first Governor's Conference on Infant Mortality, which was held at the University of Arkansas in Little Rock in January 1988. Mrs. Clinton was the moderator of the conference.

- o In 1991, the Clintons lent their leadership to the Arkansas Campaign for Healthier Babies, a coalition of state agencies, community groups including the March of Dimes, hospitals, and news organizations working together to reduce infant mortality and low birthweight by getting more Arkansas women into early prenatal care. Mrs. Clinton served as honorary co-chairperson of the Campaign.

- o The Arkansas Department of Health produced a special report called "Babies and Your Business," to alert businesses throughout the state to the importance of having their employees seek early prenatal care. Governor Clinton held a news conference in September 1992 to introduce the report, and actively encouraged the cooperation and support of Arkansas businesses in the Campaign for Healthier Babies.

- o In the 1970s and 80s, Mrs. Clinton became a nationally recognized advocate for programs to improve the health of pregnant women, infants and children, from prenatal care to immunization to Head Start. She has been a board member of numerous nonprofit educational and social service institutions, including the Arkansas Children's Hospital, where she helped establish the state's first neonatal intensive care unit.

- o Shortly after being sworn in as President, Mr. Clinton appointed a national task force on health care reform as part of his effort to improve the nation's system of health care. To chair this vitally important committee, he named Mrs. Clinton.

- o The President signed the Family and Medical Leave Act into law on February 5, 1993.

- o The President has proposed a plan to immunize the nation's children as part of his economic stimulus package. He has also called for legislation to create a long-range solution to the problem of timely infant and child immunization.

BEVERLY SILLS
Chairman, Board of Trustees
March of Dimes Birth Defects Foundation

Currently chairman of the Board of Trustees of the March of Dimes Birth Defects Foundation, Beverly Sills has played a number of roles since she first became a March of Dimes volunteer in 1971. From 1971 to 1986, Sills was national chairman of the March of Dimes annual Mothers March. In 1988, Sills served as national chairman of the March of Dimes 50th anniversary, commemorating the effort that led to victory over polio and the advances made since then in preventing and treating birth defects. She has been honored at the White House by five presidents, and was presented with the Medal of Freedom in 1980 by Jimmy Carter. The medal is awarded for distinguished contributions in cultural or other fields of national interest.

All of her volunteer work was done while she was enjoying critical acclaim as a brilliant operatic performer and, after 1979, serving as general director of the New York City Opera and currently as managing director of the Metropolitan Opera.

She has described her "job" with the March of Dimes as "one of the most rewarding of my life...It has been as satisfying as anything I have done in my opera career."

Sills and her husband, Peter Greenough, have a daughter who was born with a profound hearing impairment and a son born mentally retarded and autistic. By publicly sharing their own experiences and insights, they have given encouragement and strength to other parents who are raising children with birth defects.

"Birth defects are very democratic," Sills once wrote. "They strike everyone alike, irrespective of race, color, religion and social or financial status. But having children with birth defects is a unique experience...I happen to be very proud of my children, and I felt that if by talking about them, I could help other parents in similar situations, then speaking out for the March of Dimes would be worthwhile."

Bill Clinton has brought hope to the pregnant crack addict. Hope that one day, she will have a place to go and get help. He has brought the hope of treatment.

Bill Clinton has brought hope to the pregnant woman without insurance -- who's not sure she can afford prenatal care. Hope that one day, prenatal care will be a right for every pregnant woman.

Bill Clinton has brought hope to our children by declaring that every child should be immunized. Hope that one day, no child will suffer from polio or measles because they couldn't afford to get vaccinated.

Bill Clinton has brought hope to the four million babies born every year. Hope that the world they grow up in will be a healthier place than the one we are living in today.

Bill Clinton has also brought us Hillary Rodham Clinton. And not since Eleanor Roosevelt has the nation been blessed with such visible, active, personal and committed leadership.

Hillary Clinton brings us not only hope, but hands. She is a practical force pushing forward the policies that are bringing hope to millions of America's mothers and infants.

I think Bill Clinton said it best when he appointed Hillary to head his top presidential priority -- the national health care reform task force. He said he gave her the job for one reason: "She's better at organizing and leading people from a complex beginning to a certain end than anybody I've ever worked with in my life."

You all have seen it in Arkansas and now the entire nation will see it anew in Washington: In Hillary, hope takes a form. Hope becomes a policy. Hope is translated into legislation. Through the leadership of Hillary Rodham Clinton, hope is enabled to leave our hearts and enter people's lives.

Tonight, we honor Bill and Hillary Rodham Clinton for all that they have done for mothers and babies here in this great State of Arkansas. And we thank them for bringing us hope -- new hope -- that together as a people and with their leadership, we can improve the health of mothers and babies throughout America.

As Chairman of the March of Dimes, and on behalf of millions of volunteers across the country, it gives me great pleasure to present the Arkansas Citizen of the Year Award to William Jefferson Clinton and Hillary Rodham Clinton.

Withdrawal/Redaction Marker

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
003. profile	re: personal medical and DOB [Personally Identifiable Information] (1 page)	00/00/0000	b(6)

COLLECTION:

Clinton Presidential Records
First Lady's Office
Melanne Verveer
OA/Box Number: 20036

FOLDER TITLE:

Legislative Drafting [1]

2013-0534-S
ry1572

RESTRICTION CODES

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- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

MARCH OF DIMES REMARKS

- Proud and honored to accept the award on your own behalf and on behalf of the President;
- Came tonight to express the support of the Administration for the March of Dimes' goals on immunization and health care reform.
- You all know the statistics:
 - Only about half or less of 2-year-olds are fully vaccinated;
 - For every \$1 spent on vaccinations for measles, mumps and rubella saves \$10 to \$14 in long term costs;
- And you all know the stories:
 - About the 20-month-old child who lives in Miami named Rodney Miller. Rodney is being treated for meningitis because his family could not afford the \$21.48 that a meningitis vaccine costs. The bill for his stay in the hospital has already topped \$46,500.
- The March of Dimes is way out ahead in changing this.
- Applaud the March of Dimes work nationwide:
 - They're working to develop a better immunization system and they're a strong voice in health care reform;
- Here in Arkansas, we're lucky to have one of the strongest and most active state chapters.
- Working together with other groups, the Arkansas State Chapter of the March of Dimes helped launch the Arkansas Campaign for Healthier Babies.
 - By providing education and services to high-risk pregnant teenagers through Stork's Nest;
 - By providing free educational audiovisual materials to pregnant women and their partners in Jonesboro;
 - By providing worksite wellness services through the March of Dimes Babies and You program;
 - And by supporting professional education programs that advance the understanding of the urgent medical needs of at-risk mothers and newborns, the Arkansas March of Dimes is helping to give the people of Arkansas the chance to have healthy kids and happy lives.

To: Mrs. Clinton
Fr: Susie Whitacre, Arkansas Office
Re: Trip to Arkansas--March 3
Arkansas Briefing

THE ARKANSAS OFFICE

The "Arkansas Office" is up and running. We are located in the Stephens Building, Suite 1500. The Stephens have been very accommodating to us and are thrilled to have the President's Office here. Steve Stephens was very instrumental in helping us find office space at a reasonable price.

I have turned down numerous requests for interviews about this office. Vince Foster and David Watkins have indicated that they would like us to remain low key until it is decided "what we are." It is believed that we may be funded by the 1992 Presidential campaign. David said he hopes to have an answer in the next week to ten days.

If asked, we are still part of transition. We are helping to wind down the transition portion of the campaign, and we are providing constituent services to Arkansans. We hope to have a formal announcement about the office in the near future.

Lynda Dixon, Mary Ann Salmon, Valencia Young, Becky Vinson and myself are employed by the office.

ARKANSAS

Bill Clark's mother died. Her funeral was held last week.

* * *

Gov. Tucker will not be at the March of Dimes event. He will be attending a school program for one of his daughters. However, Mrs. Tucker will be at the dinner.

* * *

Special Prosecutor Lawrence Walsh informed the Arkansas AG's office that he has closed his investigation into allegations of drug trafficking and a government cover-up at the Mena airport. Word of the decision came in a letter to Winston Bryant dated Feb. 3.

* * *

Incineration was resumed in Jacksonville on Tuesday. I don't anticipate any protestors at the airport but it is a possibility.

* * *

Gov. Tucker is embattled with the soda pop industry. The soda pop tax, which was passed in the December Special Session, is expected to generate \$4 million through the fiscal year ending June 3 and \$15 million for the year ending July 1. The money is earmarked for Medicaid. The collection of the tax began this week.

In a twist of events the soft drink industry asked the state to suspend the collection of the tax because petitions have been filed to put the tax to a vote by the people.

* * *

Gov. Tucker is working to reform the state workers' compensation system. He has not endorsed any of the bills proposed so far.

LITTLE ROCK

Little Rock voters will decide on Tuesday whether or not to vote in the aldermanic form of government.

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02/27/93

03:35 PM

Impact of President's Economic Plan on Localities

Arkansas

Stimulus

- o Increase CDBG funding for AR by \$20 million in 1993
- o Increase federal aid to highways by \$30 million
- o Increase transit urban formula grants for Little Rock-North Little Rock (\$0.4 million) and Other (\$0.3 million)
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- o Increase Head Start meals program by \$0.5 million
- o Increase Wastewater State Revolving Fund funding by \$6 million
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- o Fund Education grants for the disadvantaged summer program by \$6 million
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- o Increase funding for childhood immunization initiative
- o Increase funding for SBA Section 7(a) program by \$21 million
- o Increase water and wastewater loan funding by \$24 million
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- o Increase Army Corps of Engineers funding for the following projects:
 - Beaver Lake hydropower
 - Bull Shoals Lake hydropower
 - Channel Improvement on Mississippi River
 - McClellan-Kerr Arkansas River Navigation System
 - White River Backwater flood control repairs
- o Increase TEFAP by \$0.3 million
- o Increase VA maintenance and minor construction (\$4.5 million)

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02/27/93

03:35 PM

Impact of President's Economic Plan on Localities
Non-Defense Discretionary Savings

- o Phase out Wastewater State Revolving Fund funding
- o Phase-out funding for small business development centers by 1997
- o Reduce grant to University of Arkansas for technology assistance program for small firms

HOSPITALIZED AGENTS

John William "Bill" Buford, Jr., age 48, is hospitalized at Hillcrest Baptist Hospital of Waco, telephone (817) 756-8841.

He and his wife Mary have five children, ages 20 to 27. They currently reside in North Little Rock. Bill is a 21-year ATF veteran and is a supervisory special agent. He was in charge of the special response teams (SRT) raiding the compound. Bill is stationed in Little Rock and chairs the Law Enforcement Torch Run for the Arkansas Special Olympics.

Bill, in assorted civic capacities, has introduced President Clinton before various organizations.

W. Glen Jordan, age 30, is also hospitalized at Hillcrest Baptist Hospital in Waco.

Glen is married to Ronnie Jordan. They have no children. Glen has been with ATF for five years. He too is stationed in Little Rock, and resides there as well.

WHITE HOUSE ACTION

No action yet taken.

To: Mrs. Clinton
Fr: Susie Whitacre, Arkansas Office
Re: Trip to Arkansas--March 3
Arkansas Briefing

THE ARKANSAS OFFICE

The "Arkansas Office" is up and running. We are located in the Stephens Building, Suite 1500. The Stephens have been very accommodating to us and are thrilled to have the President's Office here. Steve Stephens was very instrumental in helping us find office space at a reasonable price.

I have turned down numerous requests for interviews about this office. Vince Foster and David Watkins have indicated that they would like us to remain low key until it is decided "what we are." It is believed that we may be funded by the 1992 Presidential campaign. David said he hopes to have an answer in the next week to ten days.

If asked, we are still part of transition. We are helping to wind down the transition portion of the campaign, and we are providing constituent services to Arkansans. We hope to have a formal announcement about the office in the near future.

Lynda Dixon, Mary Ann Salmon, Valencia Young, Becky Vinson and myself are employed by the office.

ARKANSAS

Bill Clark's mother died. Her funeral was held last week.

* * *

Gov. Tucker will not be at the March of Dimes event. He will be attending a school program for one of his daughters. However, Mrs. Tucker will be at the dinner.

* * *

Special Prosecutor Lawrence Walsh informed the Arkansas AG's office that he has closed his investigation into allegations of drug trafficking and a government cover-up at the Mena airport. Word of the decision came in a letter to Winston Bryant dated Feb. 3.

* * *

Incineration was resumed in Jacksonville on Tuesday. I don't anticipate any protestors at the airport but it is a possibility.

* * *

Gov. Tucker is embattled with the soda pop industry. The soda pop tax, which was passed in the December Special Session, is expected to generate \$4 million through the fiscal year ending June 3 and \$15 million for the year ending July 1. The money is earmarked for Medicaid. The collection of the tax began this week.

In a twist of events the soft drink industry asked the state to suspend the collection of the tax because petitions have been filed to put the tax to a vote by the people.

* * *

Gov. Tucker is working to reform the state workers' compensation system. He has not endorsed any of the bills proposed so far.

LITTLE ROCK

Little Rock voters will decide on Tuesday whether or not to vote in the aldermanic form of government.

March of Dimes
Birth Defects Foundation
National Headquarters
1275 Mamaroneck Avenue
White Plains New York 10625
Telephone: 914 428-7100



Remarks of Beverly Sills Greenough, Chairman of the Board
March of Dimes Birth Defects Foundation

Arkansas Citizen of the Year Dinner
Little Rock, Arkansas, March 4, 1993

Thank you, Steve, for that kind introduction. And thank you as well for bringing us all together here tonight. For without Steve Stephens, this night would not be possible.

It was Steve who created the Arkansas Citizen of the Year Award some 17 years ago. And it was Steve who recruited a distinguished United States Senator from Arkansas to be the first award winner -- the late John L. McClellan.

Through Steve's leadership, this event has grown every year. And it has raised thousands of dollars to improve the health of mothers and babies. Please join me in honoring Steve Stephens for his deep and personal commitment to this event, to the March of Dimes, and to the people of this state.

This year, the Arkansas Citizen of the Year Award has reached a new high. Our co-honorees have held the highest office in this state. And now, they hold the highest office in the land.

But more important than that, they have an unmatched track record of improving maternal and infant health. And they have given both personal commitment and public leadership to the March of Dimes cause of preventing birth defects and infant mortality.

The brief film you are about to see shows clearly how William Jefferson Clinton and Hillary Rodham Clinton have become the "Faces of Hope" for mothers and babies in Arkansas and across this nation.

In nominating Bill Clinton to be the President of the United States, Governor Mario Cuomo called him "The Man from Hope." But with all due respect to the Governor of my home state of New York, I believe we should call Bill Clinton "The Man Who Brings Hope." For that is what he has done. Through his presidency, through his campaign, and through his life Bill Clinton has brought hope to millions of Americans.

Bill Clinton has brought hope to the pregnant crack addict. Hope that one day, she will have a place to go and get help. He has brought the hope of treatment.

Bill Clinton has brought hope to the pregnant woman without insurance -- who's not sure she can afford prenatal care. Hope that one day, prenatal care will be a right for every pregnant woman.

Bill Clinton has brought hope to our children by declaring that every child should be immunized. Hope that one day, no child will suffer from polio or measles because they couldn't afford to get vaccinated.

Bill Clinton has brought hope to the four million babies born every year. Hope that the world they grow up in will be a healthier place than the one we are living in today.

Bill Clinton has also brought us Hillary Rodham Clinton. And not since Eleanor Roosevelt has the nation been blessed with such visible, active, personal and committed leadership.

Hillary Clinton brings us not only hope, but hands. She is a practical force pushing forward the policies that are bringing hope to millions of America's mothers and infants.

I think Bill Clinton said it best when he appointed Hillary to head his top presidential priority -- the national health care reform task force. He said he gave her the job for one reason: "She's better at organizing and leading people from a complex beginning to a certain end than anybody I've ever worked with in my life."

You all have seen it in Arkansas and now the entire nation will see it anew in Washington: In Hillary, hope takes a form. Hope becomes a policy. Hope is translated into legislation. Through the leadership of Hillary Rodham Clinton, hope is enabled to leave our hearts and enter people's lives.

Tonight, we honor Bill and Hillary Rodham Clinton for all that they have done for mothers and babies here in this great State of Arkansas. And we thank them for bringing us hope -- new hope -- that together as a people and with their leadership, we can improve the health of mothers and babies throughout America.

As Chairman of the March of Dimes, and on behalf of millions of volunteers across the country, it gives me great pleasure to present the Arkansas Citizen of the Year Award to William Jefferson Clinton and Hillary Rodham Clinton.

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
004. profile	re: personal medical and DOB [Personally Identifiable Information] (1 page)	00/00/0000	b(6)

COLLECTION:

Clinton Presidential Records
First Lady's Office
Melanne Verveer
OA/Box Number: 20036

FOLDER TITLE:

Legislative Drafting [1]

2013-0534-S

ry1572

RESTRICTION CODES

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

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

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

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

RR. Document will be reviewed upon request.

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

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

MARCH OF DIMES REMARKS

- Proud and honored to accept the award on your own behalf and on behalf of the President;
- Came tonight to express the support of the Administration for the March of Dimes' goals on immunization and health care reform.
- You all know the statistics:
 - Only about half or less of 2-year-olds are fully vaccinated;
 - For every \$1 spent on vaccinations for measles, mumps and rubella saves \$10 to \$14 in long term costs;
- And you all know the stories:
 - About the 20-month-old child who lives in Miami named Rodney Miller. Rodney is being treated for meningitis because his family could not afford the \$21.48 that a meningitis vaccine costs. The bill for his stay in the hospital has already topped \$46,500.
- The March of Dimes is way out ahead in changing this.
- Applaud the March of Dimes work nationwide:
 - They're working to develop a better immunization system and they're a strong voice in health care reform;
- Here in Arkansas, we're lucky to have one of the strongest and most active state chapters.
- Working together with other groups, the Arkansas State Chapter of the March of Dimes helped launch the Arkansas Campaign for Healthier Babies.
 - By providing education and services to high-risk pregnant teenagers through Stork's Nest;
 - By providing free educational audiovisual materials to pregnant women and their partners in Jonesboro;
 - By providing worksite wellness services through the March of Dimes Babies and You program;
 - And by supporting professional education programs that advance the understanding of the urgent medical needs of at-risk mothers and newborns, the Arkansas March of Dimes is helping to give the people of Arkansas the chance to have healthy kids and happy lives.

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Hillary -
This needs to be updated as we hear the
hospitalized agents are evidently being transferred
to Little Rock. We'll confirm & let you know before
you arrive.
Jim

March 3, 1993

MEMORANDUM FOR THE FIRST LADY

FROM: Mark Bernkopf

CC: Kim Tilley

SUBJECT: Little Rock ATF Agents Killed or Wounded
in Waco, Texas Incident.

DECEASED AGENT

Special Agent Robert J. Williams of the New Orleans Field Division worked out of the Little Rock, Arkansas Post of Duty. Born March 1, 1966, he worked for ATF for four years, entering duty in October 1968. Special Agent Williams, a graduate of Florida State University, was from Jackson, Mississippi, and is survived by his wife Cynthia. Cindy Williams is temporarily staying with her parents, Bill and Linda Patton, at:

2114 Shadowlawn
Brandon, MS 39043
Tel. (601) 932-2763

The Williams family address is:

1113 North Oaks Lane
North Little Rock, AR 72118
Tel. (501) 758-3689

Burial services for Special Agent Williams will be held at the Baldwin & Lee Funeral Home. A graveside service will follow.

Expressions of sympathy should be sent to Cindy Williams at her parents' home.

HOSPITALIZED AGENTS

John William "Bill" Buford, Jr., age 48, is hospitalized at Hillcrest Baptist Hospital of Waco, telephone (817) 756-8841.

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Glen is married to Ronnie Jordan. They have no children. Glen has been with ATF for five years. He too is stationed in Little Rock, and resides there as well.

WHITE HOUSE ACTION

No action yet taken.

Chair, La. Health Care Commission



State of Louisiana

ANN REILEY JONES

SPECIAL ASSISTANT FOR HEALTH & HOSPITALS
OFFICE OF THE GOVERNOR

POST OFFICE BOX 94004
BATON ROUGE, LA 70804

(504) 342-9500
FAX 342-9508

PAL

Profile

PAL is a manifestation of the concern of the members of the New Orleans chapter of the National Medical Association to maintain and expand their patient base in an era when increasing numbers of patients are serviced through managed care organizations. The resulting Independent Physicians Association (IPA), PAL, has been formulated to respond to the changing health care environment of New Orleans and the state of Louisiana.

Funding for the IPA was generated by thirty-two physicians. No outside funding was sought or received.

PAL

Officers & Directors

Keith C. Ferdinand, M.D.

PRESIDENT

Jean-Philippe Austin, M.D.

SECRETARY

Janet D. Barnes, M.D.

TREASURER

Shelton Barnes, M.D.

Washington Bryan, M.D.

Johnny Gibson, M.D.

Edward Helm, M.D.

Sarah Lain, M.D.

Stephen McKenna, M.D.

PAL

P.O. Box 3443

New Orleans, LA 70177-3443

Phone: (504) 945-7009

Fax: (504) 943-1298

PAL

Consultant

Stephanie Kong, M.D.

Physicians Association of Louisiana

**A LOUISIANA BASED
HEALTH CORPORATION**



**QUALITY CARE
FOR THE PEOPLE
OF LOUISIANA**

PAL

Definition

Physicians Association of Louisiana (PAL), Inc. is an Independent Physicians Association dedicated to the optimal health and well being of the citizenry of the Greater New Orleans Metropolitan Area and Louisiana. It is organized as an IPA model for managed contracts with New Orleans HMO's, PPO's, with the State of Louisiana Medicaid Program and with Health Care Financing Administration (HCFA) to provide prepaid medical and health care services.

PAL obtains provider agreements with both primary care physicians who are paid on a capitated basis and consultant physicians who are paid a fair and equitable rate of reimbursement to provide all required services.

PAL

Background

Over the past ten years, the health care system in the United States has undergone a fundamental revolution. Over the next decade, changes will be even more rapid and far reaching. The traditional fee-for-service system is rapidly becoming obsolete.

What drives this emerging system of managed access is the primary care physician. With increasing competition, specialists recognize that they too must participate in managed care networks or risk being excluded as referrals.

A computer system, Management Information System (MIS), was specially developed for the IPA and will handle most of the communications between the primary care providers, the specialists, the IPA administrative office and pharmacies. Authorizations for referrals to specialists, diagnostic procedures and hospitals will be facilitated through this computer network with the algorithms agreed to by a committee composed of PAL providers and consultants.

PAL

Benefits

Participating physicians will benefit from:

- ◆ an increase in new patients who are assigned to their practices;
- ◆ the IPA payments which will not include a withhold; and
- ◆ profit sharing from HMO's as a result of judicious use of hospital and consultant services.

As opposed to traditional medicine, the incentive of each IPA physician is to keep patients healthy and out of hospitals. This can be achieved by emphasizing preventive health care and teaching patients to better utilize and interface with the health care system. Patients will be managed by primary care physicians (PCPs) with expeditious use of medical specialists (consultants), diagnostic services and hospitals.

**A LOUISIANA BASED
HEALTH CORPORATION**

PAL



A MANAGED CARE MONOGRAPH



PHYSICIANS ASSOCIATION OF LOUISIANA

PAL

A MANAGED CARE MONOGRAPH



- **PAL was created out of a concern of local physicians to ensure that the citizens of Louisiana have access to a group of local physicians who are dedicated to providing culturally sensitive, quality, cost effective health services.**
- **The PAL panel of physicians recognize that they must be at the forefront of aiding Louisiana in managing its health care resources through an organized system of health care delivery.**
- **This will be achieved through the managed care infrastructure developed by PAL and is described in the pages to follow.**



MISSION STATEMENT

Physicians Association of Louisiana, Inc. is a managed care organization representing New Orleans physicians who have formed an Independent Physicians Association. This Independent Physicians Association is dedicated to ensuring the optimal health and well being of the citizens of New Orleans. At the present time, PAL is negotiating prepaid health delivery contracts with local HMO's and the State of Louisiana.

The primary Mission of PAL is to successfully operate an IPA that:

- (1) provides quality primary medical care services to its enrolled members.**
- (2) provides quality consultant medical care services to enrolled members.**
- (3) sensitive physician - patient relationships.**
- (4) promotes preventive care and health education.**
- (5) promotes the integrity of the physician network in Louisiana dedicated to providing primary and consultant medical services to the citizenry of New Orleans.**
- (6) promotes, develops and encourages continuing medical education of its participating physicians providers and health plan members.**
- (7) provides a physician network that enhances effective access in New Orleans.**
- (8) promotes the delivery of cost effective primary, consultant, and Institutional services through intensive training of the PAL primary care gate keeper.**

PHYSICIANS ASSOCIATION OF LOUISIANA, INC.



GETTING DOWN TO BASICS

PAL's major emphasis to ensure it's success has been to:

- **secure a wide base of Primary Care Physicians who deliver comprehensive inpatient and outpatient services.**
- **purchase a medical management information system that will train Primary Physicians to be effective Case Managers.**
- **keep the ratio of Primary Care to Consultant physicians at 2:1.**
- **create a managed care infrastructure that promotes financial stability.**

PHYSICIANS ASSOCIATION OF LOUISIANA, INC.



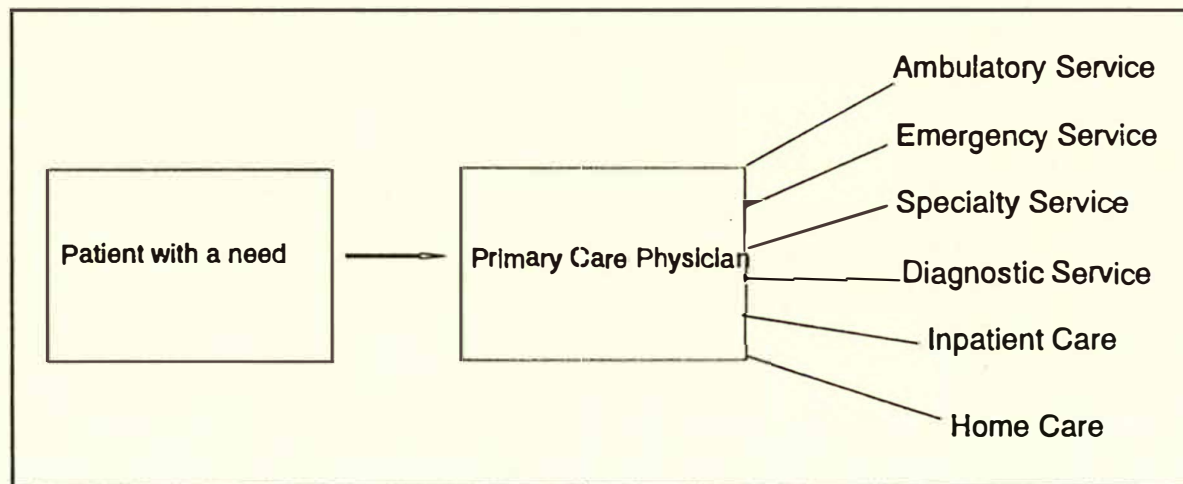
XPECTATIONS OF PAL

PHYSICIANS ASSOCIATION OF LOUISIANA, INC.

WHO MANAGES THIS SYSTEM?

The Primary Care Physician is the chief manager of:

- The patient
- The primary ambulatory service
- The specialty services
- The inpatient care
- Convalescent care





REQUIREMENTS FOR PAL PRIMARY CARE PHYSICIAN

- Twenty-four (24) hour physician on-call service
- Response by physician within one (1) hour of call
- Decision by PAL PCP to authorize or not authorize an emergency hospital visit
- Furnish all utilization data to the HMO's Utilization Control Department

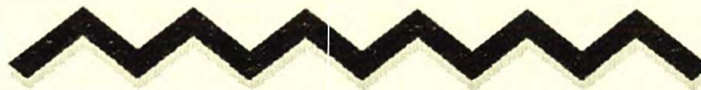
BASIC AMBULATORY SERVICES

The Contracted PAL Primary Care Physician shall either provide, coordinate or authorize all of the following basic ambulatory health care services:

- (1) Pediatrics
- (2) Adult medicine
- (3) OB/GYN Services.
- (4) All Outpatient Diagnostic Services including, but not limited to, laboratory
- (5) Emergency room hospital services
- (6) Inpatient primary care physician services
- (7) Prescription drugs
- (8) All outreach
- (9) Follow-up of medical problems and abnormal lab
- (10) Health education
- (11) Nutrition counseling
- (12) Medical social services

* All outpatient obstetrical and gynecological services and inpatient obstetrical services for deliveries and inpatient gynecological services.

PHYSICIANS ASSOCIATION OF LOUISIANA, INC.



BASIC COMPONENTS OF PAL'S UTILIZATION MANAGEMENT PROGRAM

- **Outpatient care plan management of chronic diseases**
- **Preventive health maintenance according to an age specific periodicity schedule**
- **Coordination of inpatient management when necessary**
- **Information exchange**
 - (1) **On-call activity disposition to Utilization Management Department on a daily basis**
 - (a) **ER authorizations given**
 - (b) **Inpatient admissions**
 - (2) **Assignment of LOS for hospitalized members**
 - (3) **Upgrades of LOS of patients who exceed their initial LOS**
 - (4) **Documentation and acquisition of an authorization number for all consultant services**



ASIC COMPONENTS OF PAL'S UTILIZATION MANAGEMENT PROGRAM

- **Daily Case Management**
 - **Report all emergency room utilization from previous night**
 - **Report all emergent hospitalizations that occurred during the night or previous work day**
- **Prior Authorization**
 - **Elective admissions**
 - **Specialty services**
 - **Hospital-based procedures**
 - **Any other off-site referrals**

PHYSICIANS ASSOCIATION OF LOUISIANA, INC.



AL ADMINISTRATIVE RESPONSIBILITIES

- **Procurement of Managed Care Contract**
- **Administration of Contracted Agreement**
- **Determination of Medical Necessity**
- **Coordination of Hospital services**
- **Authorization of hospital admissions, out-of-service-area emergency room hospital services and specialty health care services**
- **Payment of claims to contracted physicians**
- **Marketing**
- **Quality Assurance**

PHYSICIANS ASSOCIATION OF LOUISIANA, INC.



AL AUTHORIZATION RESPONSIBILITIES

- (1) To authorize all Consultant services before they are delivered.**
- (2) To authorize all in-service-area emergency room visits before they take place.**
- (3) To authorize all out-of-service-area emergency room visits before they take place.**
- (4) To authorize all hospital admissions.**
- (5) To track and report all authorized services.**

Darshaney - Healthy Start prog.

Vicki - Health care research re women

Jan Bailey - Nursing - health care agenda for Pa.
on community level totally diff in view of what's
needed

Incentives for nursing
plan should be consumer friendly
providers should be culturally sensitive.

Bonnie - "profess' - cancer patient
tho at health care thru the patients' eyes

Dr. Withers pres. Amer. Oropharynx Assoc
create integrated system in a complex system
false incentives

Ferdinand - give docs amt. of authority is reasonable.
capitate on primary side + all docs manage

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Stephen McKenna, M.D.

Office

P.O. Box 3443
New Orleans, LA
70177-3443
Phone: (504) 945-7009
Fax: (504) 943-1298

Consultant

Stephanie Kong, M.D.

Caroline Maggio - encouraging + saving

better organizing into
deal with 1

medicaid
flexibility
expert on
grad ed'n

Chancellor
Tulane med
Center

specialist
emphasis is
all wrong

* education +
paperwork on
prev.

phys'ns
& life environ-
ment

Teaching
Hospitals

VA
Charities
Tulane

From Burey - APH-CO - quality of care - why competition system

Dr. Lupin

Dr. Robinson - substance abuse / pediatric

Donna Frasier atty
former Pres health care
cancer
* TA / not lobbyists

Key Provisions of Legislation

I. Containing Health Care Costs

AHA	NAM	AARP	GHAA
HIAA	AFL-CIO	FAMILIES	NAPH
ADA	AFSME	NGA	
AMA	SEIU	NCSL	
AAP			

II. Coverage through the Workplace

F-USA	AFL-CIO
NAM	SEIU
NFIB	AFSME
Chamber of Commerce	

III. Financially Vulnerable Populations and Services

NACHRI	NASW	March of Dimes	MCH Coalition
F-USA	CWL	Disability	
Chamber	NAPH	NGA	
CDF	NACHC	NCSL	
Catholic Conference			

IV. Benefits

All Groups

V. System Reform (HIPCs and AHPs)

GHAA	NGA	CDF
Health Industry	NCSL	Disability
Consumer Groups	NACO	Families-USA
	Conference of Mayors	

VI. Quality Assurance

GHAA	AHA
NGA	AMA

VII. Health Care Delivery

NACHC	NCSL
NAPH	APWA
ASTHO	CDF
NGA	

VIII. Financing

AFL-CIO

IX. Integration

APWA
NGA
NCSL
VA

LABOR**AFL-CIO**

****Karen Ignagni 202-637-5000**

AFSCME

Gerald McEntee, Rob McGarrah 202-429-1000

American Federation of Teachers

John Abraham, Katherine Kany 202-879-4400

Building Trades Department, AFL-CIO

Bob Georgine 202-347-1461

Communications Workers of America

Louise Novotny 202-434-1100

International Ladies Garment Workers Union

Evy Dubrow 202-347-7417

Retail, Wholesale and Department Store Union

Lenore Miller 212-684-5300

Service Employees International Union

****John Sweeney, Gerry Shea 202-898-3380**

Teamsters

Angie Hunter 202-624-8741

United Auto Workers

Owen Bieber, Alan Reuther 202-828-8500

United Mine Workers of America

Bill Samuel 202-842-7280

United Steel Workers of America

John Sheehan 202-638-6929

DISABILITY GROUPS**AIDS Action Council**

Karen Ringem 202-986-1300

Dan Bross 202-986-1300

American Congress of Rehabilitation Medicine

Peter Thomas 202-659-2900

American Speech-Language-Hearing Association

Steve White, Mary Fox-Grimm 301-897-5700

American Psychological Association

Janet O'Keefe 202-955-7618

The Arc

Kathy McGinley 202-785-3388

Epilepsy Foundation of America

Bill Schmidt 301-459-3700

National Association of Developmental Disabilities Councils

Christine Metzler 202-347-1234

United Cerebral Palsy Association

Bob Griss 202-842-1266

HEALTH CARE ADVOCATES

****Families USA**

Ron Pollack 202-737-6340

Health Care for America

Harvey Sloane, Phil Johnson 202-546-3507

Healthcare Leadership Council

Jeff Trummell, Pam Bailey 202-333-7400

National Health Law Program

Gregg Haifley 202-887-5310

****National Leadership Coalition for Health Care Reform**

Henry Simmons, Peggy Rhodes 202-647-6830

National Senior Citizens Law Center

Patricia Nemore, Burt Fretz 202-887-5280

SINGLE-PAYOR ADVOCATES

American Public Health Association

Katherine McCarter 202-789-5645

Church Women United

Nancy Chupp 202-544-8747

Citizen Action

Bob Brandon, Cathy Hurwit 202-775-1580

Consumers Union

Gail Shearer 202-462-6262

Graphic Artists Union

Tim Williams 202-775-1796

International Brotherhood of Teamsters

Angela Hunter 202-624-6890

National Association of Social Workers

Madeline Golde 202-336-8237

National Council of Senior Citizens

Larry Smedley, Dan Schulder 202-347-8800

National Farmers Union

Nancy Danielson 202-554-1600

National Hispanic Council on Aging

Marta Sotomayor 202-265-1288

Neighbor to Neighbor

Glen Schneider 415-824-3355

NETWORK:A National Catholic Social Justice Lobby

Katherine Pinkerton 202-526-4070

Oil, Chemical, and Atomic Worker Union

Nolan Hancock 703-876-9300

Physicians for a National Health Program

Carolyn Clancy 301-227-8357

Public Citizen

Sara Nichols 202-546-4996

United Cerebral Palsy Associations

Bob Griss 202-842-1266

United Church of Christ, Office of Church in Society

Patrick Conover 202-543-1517

United Electrical Workers

Bob Kingsley 703-684-3123

RELIGIOUS

Church Women United

Nancy Chupp 202-544-8747

Evangelical Lutheran Church in America

Sarah Naylor 202-783-7501

Interreligious Health Care Access Campaign

Donna Mandel 202-543-5878

National Council of Churches

Mary Cooper 202-544-2350

United Church of Christ

Patrick Conover 202-543-1517

United Methodist Church

Jane Hull Harvey 202-488-5600

US Catholic Conference

John Carr, Nancy Wisdo, Patricia King 202-541-3140

CHILDREN'S HEALTH ADVOCATES

The Alan Guttmacher Institute

Rachel Gold 202-296-4012

American Academy of Pediatrics

Jackie Noyes, Graham Newsome 202-662-7460

American Association of University Affiliated Programs

Katie Neas 202-588-8252

American College of Obstetricians and Gynecologists

Susan Lightfoot 202-863-2510

American Nurses Association

Daniel O'Neal 202-544-4444

American Public Health Association

Katherine McCarter, Rich Gilbert 202-789-5650

American Speech-Language-Hearing Association

Steve White, Mary Fox-Grimm 301-897-5700

Association for Retarded Citizens

Kathy McGinley 202-785-3388

Association for Care of Children's Health

William Sciarillo 301-654-6549

Association of Maternal and Child Health Programs

Susan Campbell 202-775-0436

Children's Defense Fund

Carol Regan 202-628-8787

Child Welfare League

David Liederman, Mary Bourdette 202-638-2952

Health and Medicine Council of Washington

Dale Dirks 202-544-7499

March of Dimes Birth Defects Foundation

Kay Johnson 202-659-1800

National Association of Children's Hospitals and Related Institutions

Peter Wilson 703-684-1355

National Association of Community Health Centers

Freda Mitchem 202-659-8008

National Center for Clinical Infant Programs

Beverly Jackson 703-528-4300

National Commission to Prevent Infant Mortality

Mary Carpenter 202-205-8364

National Council of Community Hospitals
Marty McGeein 202-728-0830
U. S. Catholic Conference -- Department of Social Development
Patricia King 202-541-3188
Virginia Perinatal Association
Carola Bruflat 703-255-9820
Women's Legal Defense Fund
Joanne Mustead 202-986-2600

MINORITIES

Cherokee Nation
Pamela Iron 918-456-0671, x202
NAACP
Ed Mailes 202-638-2269
Urban League
Robert McAlpine, Lisa Bland Malone 202-898-1604
National Council of La Raza
Christina Lopez 202-289-1380
National Congress of American Indians
Michael Anderson 202-546-9404
National Indian Health Board
Gordon Belcourt, Julia Davis 303-759-3075

RURAL INTERESTS

Communicating for Agriculture
Jeffrey Smedsrud 612-854-9005
National Association of Rural Electric Cooperatives
Bob Bergland, Carolyn Watts 202-857-9559
National Rural Health Association
Bruce Behringer 615-929-6423

MENTAL HEALTH INTERESTS

American Academy of Pediatrics
Jackie Noyes 202-662-7460
American Psychiatric Association
Melvin Sabshin 202-682-6000
American Psychological Association
Bryant Welch, Donna Daley, Daniel Zingale 202-955-7618
Child Welfare League of America
Mary Bourdette 202-638-2952
Mental Health Law Project
Joe Manes 202-467-5730
Mental Health Policy Resource Center
Leslie Scallet 202-775-8826
National Alliance for the Mentally Ill
Laurie Flynn 703-524-7600
National Association of Community Health Centers
Dan Hawkins 202-659-8008
National Association Psychiatric Treatment Centers for Children
Joy Midman 202-638-1604
National Association Social Workers
Sue Hoechstetter 202-408-8600

National Council of Community Mental Health Centers
James Finley 202-624-5835 or 301-984-6200
National Mental Health Association
Chris Koyanagi, John Ambrose 703-838-7502

ALCOHOL AND DRUG ABUSE

American Academy of Family Physicians
Susan Hildebrandt 202-232-9033
Center for Science in the Public Interest
Patricia Taylor 202-332-9110
Coalition for the Prevention of Alcohol Problems
Patricia Taylor 202-332-9110
National Ass. of Alcoholism and Drug Abuse Counselors
Patrice O'Toole 703-920-4644
National Coalition to Prevent Impaired Driving
George Macker 202-639-0054

EMPLOYERS

1. Large

Acme Steel
Richard Stefan 708-841-6010
American Iron and Steel Institute
Peter Hernandez 202-452-7212
Association of Private Pension and Welfare Plans
Ellen Goldstein, John Blount 202-289-4582
Bethlehem Steel
Benjamin Boylston 215-694-4044
Erisa Industry Committee
Mark Ugoretz 202-789-1400
General Motors
Freddie Lucas 202-775-5027
IBM
Gerri Colombaro 202-515-5000
Inland Steel
William P. Boehler 219-399-5513
Johnson & Johnson
Ralph Larson, Jack Hall, Shannon Salmon 202-408-9482
LTV
Barbara Kostuk 202-625-3373
National Association of Manufacturers
Sharon Canner 202-637-6000
National Retail Federation (both large & small employers)
Tracy Mullin, Steven Pfister 202-783-7971
National Steel
Richard Coffee 219-273-7857
Pepsico
David Wright 914-243-3600
Washington Business Group on Health
Mary Jane England 202-408-9320
Wheeling-Pittsburg Steel
Dan Keaton 304-234-2474

2. Small

National Association of Life Underwriters (Insurance Agents)

Dave Hebert 202-331-6023

Jeff Trinca 202-638-1950

National Federation of Independent Businesses

John Motley 202-554-9000

National Small Business Legislative Council

John Satagaj 202-639-8888

National Small Business United

Tom Cantor 202-887-5599

John Galles 202-293-8830

U.S. Chamber of Commerce

Kristin Bass 202-463-5514

INSURERS

1. Large Insurers

Aetna

Laurie Sullivan 202-223-2821

Cigna

Michael Shiffer 202-296-7174

Metropolitan Life Insurance Company

Carol Kelly 202-659-3575

Prudential

Tom O'Hara 202-463-0060

Travelers

Roger Levy 202-789-1380

2. Mid Range Insurers

General American Life

Michael Hogan 314-525-3662

Massachusetts Mutual

Barry Gottehrer 202-737-0440

Mutual of Omaha

Cecil Bykerk 402-978-2534

New York Life

Jessie Colgate 202-783-4484

Phoenix Home Life

Donna Davis, Maura Melley 203-275-5025

3. Insurance Interest Groups

American Family Life Assurance Company (AFLAC)--Supplemental Insurers

David Pringle, Joey Laudermilk 202-887-1423

BlueCross BlueShield Association

Barney Tresnowski, Mary Nell Leonard 202-626-4780

Delta Dental Plans (Dental Insurers)

Don Ruscio 202-546-4732

Health Insurance Association of America

Willis Gradison 202-223-7780

Independent Insurance Agents of America

Paul Equale 202-863-7000

Self Insurance Institute

Jim Kinder 202-828-5015

PROVIDERS

1. Physicians

****American Academy of Family Physicians**
Charles Huntington 202-232-9033
American Academy of Opthomology
Cynthia Moran 202-737-6662
American Academy of Pediatrics
Jackie Noyes, Graham Newsome 202-662-7460
American College of Obstetricians and Gynecologists
Kathy Bryant 202-863-2511
****American College of Physicians**
John Ball, Peter Bouxsein, Elizabeth Prewitt 202-783-9033
American College of Preventive Medicine
Donna Grossman 202-789-0003
American College of Surgeons
Paul Ebert 312-664-4050
****American Medical Association**
Jim Todd, John Zapp, Dorothy Moss 202-789-7400
American Psychiatric Association
Jay Cutler, ~~Phyllis Greenberger~~, Mel Subshin 202-682-6000
American Society for Internal Medicine
Alan Nelson, Susan Short 202-289-1700
College of American Pathologists
Jane Hart 202-371-6617
National Medical Association
Rich Butcher 619-263-6101
Physicians Who Care
Ron Bronnow 202-547-7177
Society on General Internal Medicine
Valerie Fedio 202-857-1107
Society of Thoracic Surgeons
Robert Wilbur 202-857-1100

2. Non- MD Professionals

American Academy of Physician Assistants
Nicole Gara 703-836-2272
American Association of Nurse Anethetists
Sue Ellen Hopkinson 202-682-1267
American Association for Marriage and Family Therapy
Kathryn Pontzer 202-452-0109
American Chiropractic Association
Michael Hogan 202-276-8800
American College of Nurse Midwives
Karen Fennell 202-289-0171
American Dental Association
Skip Wheat 202-898-2400
****American Nurses Association**
Virginia Betts, Donna Richardson 202-544-4444
American Occupational Therapy Association
Fred Somers 301-948-9626
American Optometric Association
Nancy Garland 301-718-6514
American Podiatric Medical Association
John Carson 301-571-9200

American Physical Therapy Association
Bob Asztalos 703-706-3165
American Psychological Association
Janet O'Keefe 202-336-5934
American Speech-Language-Hearing Association
Steve White 301-897-5700
Employee Assistance Professionals Association
Maureen Kerrigan 703-522-6272

3. Hospitals

American Association of Osteopathic Hospitals
Brian Hypes 202-686-1700
American Healthcare Systems Institute
Jim Scott 202-393-0860
**American Hospital Association
Dick Davidson, Rick Pollack, Jim Bentley 202-638-1100
American Protestant Health Association
Jerry Dykman 202-783-7507
Catholic Health Association
Bill Cox, Jack Bresch 202-296-3993
Columbia Hospital Corporation
Richard Scott 817-870-5900
Federation of American Health Systems (for-profit hospitals)
Michael Bromberg 202-833-3090
InterHealth
Ben Aune 612-646-5574
Lutheran General Health Systems
Leighton Smith, Kevin Wardell, Michael McCarthy 708-823-3548
Methodist Health Systems
Nancy Schlichting 614-566-5099
Miami Baptist Hospital
Brian Keeley 305-596-6503
National Association of Children's Hospitals and Related Institutions
Anne Langley 202-452-8811
Riverside Methodist Hospitals
Nancy Schlichting 614-566-5099
St. Joseph's Hospital (on Ethics)
Joe DeSilva 602-285-3101
Voluntary Hospitals of America
Daniel Bourque 202-822-9750

4. Managed Care Providers

American Association of Preferred Provider Organizations
Tom Gilligan 312-245-1555
American Managed Care and Review Association
Charles Stellar 202-728-0506
FHP, Inc.
Janet Newport 202-223-5718
Foundation Health
Chris Drake 916-631-5281
Group Health Association of American
Jim Dougherty, Erling Hanson, Linda Rose 202-778-3210
Healthcare Compare
Dan Bruener 916-925-7800

Kaiser Permanente
Jim Lane 501-271-6306
Managed Health Care Association
Carol Cronin 202-371-8232
United Healthcare
Ted Mondale 612-936-1620
US Health Care
Jim Stocker 215-628-4800

5. Others Providers

Ad Hoc Hispanic Health Care Providers and Policy Experts
Elena Rios 916-646-3770
COSSMHO-- Coalition of Hispanic Health and Human Services Provider
Jane Delgado 202-387-5000
Wellness Councils of America
Harold S. Kahler 402-572-3590

LONG TERM CARE

1. Consumer Groups

Alzheimer's Association
Steve McConnell 202-393-7737
**American Association of Retired Persons
John Rother 202-343-3700
Consumers Union
Gail Shearer 202-462-6262
Families USA
Ron Pollack 202-737-6340
National Association of Area Agencies on Aging
John Linkous 202-296-8130
National Committee to Preserve Social Security and Medicare
Martha McSteen 202-822-9459
National Council of Senior Citizens
Lawrence Smedley 202-347-8800
National Council on the Aging
Daniel Thurz 202-479-1200
The Leadership Council of Aging Organizations (32 national aging organizations)
Horace Deets, AARP 202-343-2300
The Long Term Care Campaign (representing 137 cooperating Organizations)
Deborah Briceland-Betts 202-393-2092
Save Our Security (representing over 100 organizations)
Arthur Flemming 202-822-7708
Generations United (representing numerous aging and children's advocates)
Tess Scannell 202-638-2952

2. Provider Groups

National Association for Home Care
Dayle Berke 202-547-7424
American Health Care Association (Nursing Homes)
Paul Willging 202-842-4444

American Association of Homes for the Aging
Mike Rodgers 202-782-2242
National Institute on Adult Daycare
Betty Ransom 202-479-6682
Tori Wagman 202-479-6613
American Association for Respiratory Care
Cheryl Brown 703-351-5282
American Federation of Home Health Agencies
Ann Howard 301-588-1454
Health Industry Distributors Association
Craig Jeffries 703-549-4432
The Oley Foundation
Bruce Grefrath 202-546-2545

PHARMACEUTICAL INTERESTS

1. Drug Manufacturers

Merck

Teel Oliver 202-833-8205

Johnson and Johnson

Shannon Salmon 202-408-9482

Pfizer

Ken Bowler 202-783-7070

Schering Plough

Rob Lively 202-463-7372

SmithKlineBeecham

Dave Jenkins 202-452-8490

Syntex

Richard Schwartz 415-855-5601

Eli Lilly

Bill Tureene 202-955-5350

Searle

Kurt Furst 202-842-0706

Marion Merrel Dow

Ronald Docksai 202-429-3423

2. Generics

Generic Pharmaceutical Industry Association

Dee Fensterer, Bill Haddad 212-683-1881

National Association of Pharmaceutical Manufacturers

Robert Milangese, George Barrett 212-838-3720

National Pharmaceutical Alliance

Chris Sizemore, Cerie McDonald 703-836-8816

3. Biotech Interests

Industrial Biotechnology Association

Richard Godown, Lisa Raines 202-857-0244

Roche Pharmaceuticals

Herbert Conrad 201-235-2421

T Cell Sciences, Inc.

James Grant 212-734-7490

Novo Nordisk

Harry Penner 212-867-0123

Genetech, Inc.
Kirk Raab 415-266-1210
Synergen, Inc.
John Saxe 303-938-6200

4. Pharmacists

American Pharmaceutical Association
John Gans, Bill Hermelin 202-628-4410
American Society of Consultant Pharmacists
Timothy Webster 703-920-8492
National Association of Chain Drug Stores
Ronald Ziegler, Dave Lambert 703-549-3001
National Association of Retail Druggists
Charles West, John Rector 703-683-8200

5. Purchasers

Group Health Association of America
Jim Dougherty, Earling Hanson, Linda Rhodes 202-778-3210
American Society of Hospital Pharmacists
Joseph Oddis, Tom Bruderle 301-652-8278

REHABILITATION

National Association of Rehabilitation Facilities
Carolyn Zollar 703-648-9300
National Rehabilitation Coalition
Alan Parver 202-624-7225

LABORATORIES

MetPath
Kim McCarthy 202-347-2270

SUPPLIERS

Health Industry Manufacturers Association
Alan Magazine 202-783-8700
National Association for Infusion Therapy
Alan Parver 202-624-7225
National Association of Medical Equipment Suppliers
Corrine Parver 703-836-6263

RESEARCH/ACADEMIA

(Research meeting coordinated by Terry Lehrman--202-544-1880)
AIDS Action Council
Derek Hodel 202-986-1300
Alliance for Aging
Dan Perry 202-293-2856
American Society of Microbiology
Janet Shumker 202-737-3600
American Society of Tropical Medicine and Hygiene
George Mill 615-327-6212
Arthritis Foundation
Arthur Grayzel 703-276-7555
Association of Independent Research Institutes
April Burke 202-393-5250

Association of American Medical Colleges
Dick Knapp 202-828-0400
American Federation for Clinical Research
Lynn Morrison 202-628-3954
Association of Minority Health Professions Schools
Dale Dirks 202-544-7499
Association of Academic Health Centers
Roger Bulger 202-265-9600
Association of Schools of Allied Health Professions
Jarrett Wise 202-994-3725
Cystic Fibrosis
Bob Dresing 301-951-4422
Federation of American Societies for Experimental Biology
Shu Chien 301-530-7000
Hereditary Disease Foundation
Nancy Wexler 212-960-5650
Howard University
Claude Cowan 202-806-6100
Johns Hopkins University
Bill Richardson 301-516-8068
Merck
Teel Oliver 202-833-8205
National Coalition for Cancer Research
Marguerite Donoghue 202-544-1880

Miscellaneous

American Heart Association
Sarah Kayson 202-822-9380

ADMINISTRATION/ELECTRONIC DATA PROCESSING/FINANCING

American Health Information Management Association
Kathleen Frawley 202-736-2155
GMIS, Inc.
Thomas Owen, Robert Dolan, James Walsh 215-296-3838
Health Care Financial Management Association
Tom Gray 202-296-2920
Joint Commission for the Accreditation of Healthcare Organizations
Dennis O'Leary 708-916-5600