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~~Alex~~

1 Extra Copies

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ADVISORY COMMISSION ON CONSUMER PROTECTION AND QUALITY IN THE HEALTH CARE INDUSTRY

I. ADVISORY COMMISSION

The President will sign an Executive Order creating an Advisory Commission on Consumer Protection and Quality in the Health Care Industry to review changes occurring in the health care system and, where appropriate, make recommendations on how best to promote and assure consumer protection and health care quality.

II. PURPOSE

The Advisory Commission will respond to concerns about the rapid changes in the health care financing and delivery system. It will provide a forum for developing a better understanding of the changes in the health system and for making recommendations on how to address the effects of those changes.

III. IMPACT

- The Advisory Commission will provide recommendations that will allow public and private policy makers to define appropriate consumer protection and quality standards.

IV. SPECIFIC PROVISIONS

- The Advisory Commission will be appointed by the President and co-chaired by the Secretaries of HHS and Labor will have a membership of no more than 20 representatives from: health care professions, institutional health care providers, other health care workers, health care insurers, health care purchasers, state government, consumers, and experts in health care quality, financing, and administration. The Vice President will review the final report prior to its being submitted to the President.

- The Advisory Commission will study and, where appropriate, develop recommendations for the President on: (1) consumer protection; (2) quality; and (3) availability of treatment and services in a rapidly changing health care system.

- The Advisory Commission will submit a preliminary report by September 30, 1997 and a final report 18 months from the date of its first meeting.

V. BACKGROUND

The Clinton Administration has a long history of strong support of consumer protection in all health care plans, including the Medicare program. Two such examples are his support of initiatives to assure new mothers and babies have access to necessary hospital care and to protect communications between health professionals and their patients.

QUALITY HEALTH CARE: A CLINTON ADMINISTRATION PRIORITY

- Today, the President is announcing that a renewed emphasis should be placed on assuring quality and consumer protection in the nation's health care system. At a time when unprecedented changes in the health care delivery system are taking place, consumers and their representatives are increasingly concerned about how these changes are affecting the quality of health care they are receiving.

- To assure that our health care system continues to provide the highest quality health care in the world and to strengthen consumer protection, the President is issuing a challenge to the Congress to pass two consumer protection initiatives that have already received broad, bipartisan support before they adjourn for the Fall election.

- The President believes that too many health plans "gag" their doctors from even telling patients all their treatment options. And too many health plans are telling mothers of newborn children that they won't pay for the cost of hospitalization beyond 8-24 hours after birth.

- The President strongly believes that these practices must stop. He is calling on the Congress to pass two bills that would direct health plans to give mothers the opportunity to stay in the hospital for 48 hours and would prohibit plans from restricting communication between health professionals and patients.

- In addition, the President is announcing the establishment of an advisory commission, co-chaired by HHS Secretary Donna Shalala and Labor Secretary Robert Reich, to study and, where appropriate, to develop recommendations for the President on (1) consumer protection; (2) quality; and (3) the availability of treatment and services in a rapidly changing health care system.

48 HOUR RULE

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This initiative would require health insurers to let all new mothers and their babies remain in the hospital for at least 48 hours following most normal deliveries.

II. PURPOSE

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IV. SPECIFIC PROVISIONS

- Requires health insurers to let mothers and newborns remain in the hospital for a minimum of 48 hours after a normal delivery and 96 hours after a Caesarean section.
- Shorter stays may be allowed if the attending health care provider, in consultation with the new mother, determines such a stay is appropriate.
- Requires follow-up care within 72 hours of discharge, if discharge occurs earlier than 48 hours after birth.
- The initiative would not pre-empt state legislation if states already require a minimum of 48 hour stays for normal deliveries (96 hours for Caesarean section) or meet guidelines established by the American College of Obstetricians or Gynecologists, the American Academy of Pediatrics, or certain other medical professional organizations.

V. BACKGROUND

In their speeches at the Democratic National Convention, both the President and the First Lady endorsed reforms that will guarantee mothers the quality of care they need when they have had a baby. Because they believe that beneficiaries should be guaranteed coverage for needed health services, President Clinton and the First Lady strongly support legislation such as the "Newborns' and Mothers' Health Protection Act" (introduced by Senators Bradley, Frist, and Kassebaum) to allow all new mothers a minimum of 48 hours of care following most normal deliveries. This legislation has 52 cosponsors.

This bill enjoyed bipartisan support and has been approved by the Senate Labor Committee last year. Further action on this legislation is expected this fall. There are 10 similar bills in the House. However, there has been no action on any of these bills.

ANTI-GAG RULE

I. ANTI-GAG RULE

This initiative would prohibit health plans from restricting or prohibiting any medical communications between health care providers and their patients. The President supports extending these same protections to Medicare beneficiaries.

II. PURPOSE

Currently, some health plans require doctors to sign contracts that may inappropriately limit their ability to give patients information about referrals and alternative treatment. This initiative would bar health plans from restricting doctor-patient communications.

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- This initiative would allow and encourage physicians to discuss a full range of treatment options with patients and increase consumers' confidence that medical providers give them full information.

IV. SPECIFIC PROVISIONS

- Health plans (including ERISA plans) may not restrict or prohibit any medical communications, oral or in writing, between health care providers and their patients.
- Violation of these provisions is punishable by civil money penalties of up to $25,000 for each violation.
- States may establish additional requirements that are more protective of medical communications.

V. BACKGROUND

The President opposes "gag orders" that have been used by some health plans to restrict medical communications between doctors and their patients. Because the President believes health care providers should not be restricted in what they say to their patients, he supports legislation such as the "Patient Right to Know Act" (introduced by Congressmen Ganske and Markey) which would bar health plans from restricting doctor-patient communications. The President also supports extending these same protections to Medicare beneficiaries. This legislation is supported by 45 health care organizations including: the American Medical Association, the American Nurses Association, the National Council of Senior Citizens, and the Consumers Union.

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I. WORKER TRANSITION INITIATIVE

This provision addresses affordability of health care coverage for workers in transition from job-to-job. Through a grant program with the states, it would provide premium assistance to temporarily unemployed workers and their families for up to six months of coverage.

II. PURPOSE

This provision would take the next logical step toward improving coverage to millions of working Americans are at risk of not being able to afford coverage. In so doing, it would assure that individuals retain the continuous health care coverage necessary to receive portability benefits under the Kennedy/Kassebaum health insurance reform bill.

III. IMPACT

- Approximately 3 million people, including at least 700,000 children, would benefit each year.
- The program would cost an estimated $2 billion/year.
- This program would be paid for in the context of the President's balanced budget proposal. It demonstrates that the nation can invest in important programs while still being fiscally responsible.

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- The program would give assistance to states to provide health care coverage to individuals who are between jobs.
- The program would give states substantial flexibility to administer the program. Under the program states could decide how to deliver benefits and whether to expand eligibility and benefits.
- Program information and applications would be made available through local unemployment offices.

V. ADMINISTRATION HISTORY ON ISSUE

Over the past few years, the President fought long and hard for health care reform. In passing the Kennedy/Kassebaum legislation, Congress took the first steps toward meaningful reform. The next logical step is to ensure affordability of health care and to guarantee that individuals do not lose the protections gained in the Kennedy/Kassebaum legislation.

This provision has been included in all of the President's balanced budget proposals and is paid for in this context.

FRAUD AND ABUSE

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A provision in the Kennedy/Kassebaum bill strengthens Federal efforts to combat health care fraud, waste, and abuse. It would increase resources to expand currently successful efforts at HHS, Justice, and Labor to root out fraud and abuse, such as Operation Restore Trust.

II. PURPOSE

This provision continues and intensifies Federal efforts to root out health care fraud and abuse through enhanced oversight and enforcement activities.

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- This provision will save about $3.5 billion in Federal funds over seven years.
- The provision will have a significant effect on private health plan savings by strengthening Federal efforts to detect and prosecute fraud and abuse.

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- Creates the Health Care Fraud and Abuse Control Program to combat health care fraud and abuse in both public and private health plans. This program will be coordinated by HHS and the Attorney General. In 1997, over $100 million is designated to fight fraud and abuse in the Medicare and Medicaid programs.
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V. ADMINISTRATION HISTORY ON ISSUE

The Clinton Administration has been aggressive in developing and implementing new strategies to combat managed care fraud and abuse. In 1995, the Clinton Administration launched "Operation Restore Trust" to combat Medicare fraud and abuse. The increased funding provided in the Kennedy/Kassebaum legislation will expand this program nationwide. Many more of the bill's provisions to enhance enforcement are similar to provisions in the President's proposed legislation.

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THE WHITE HOUSE

Office of the Press Secretary

For Immediate Release September 5, 1996

EXECUTIVE ORDER

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ADVISORY COMMISSION ON CONSUMER PROTECTION
AND QUALITY IN THE HEALTH CARE INDUSTRY

By the authority vested in me as President by the Constitution and the laws of the United States of America, including the Federal Advisory Committee Act, as amended (5 U.S.C. App.), it is hereby ordered as follows:

Section 1. Establishment. (a) There is established the Advisory Commission on Consumer Protection and Quality in the Health Care Industry (the "Commission"). The Commission shall be composed of not more than 20 members to be appointed by the President. The members will be consumers, institutional health care providers, health care professionals, other health care workers, health care insurers, health care purchasers, State and local government representatives, and experts in health care quality, financing, and administration.

(b) The Secretary of Health and Human Services and the Secretary of Labor shall serve as Co-Chairs of the Commission. The Co-Chairs shall report through the Vice President to the President.

Sec. 2. Functions. (a) The Commission shall advise the President on changes occurring in the health care system and recommend such measures as may be necessary to promote and assure health care quality and value, and protect consumers and workers in the health care system. In particular, the Commission shall:

(1) Review the available data in the area of consumer information and protections for those enrolled in health care plans and make such recommendations as may be necessary for improvements;

(2) Review existing and planned work that defines, measures, and promotes quality of health care, and help build further consensus on approaches to assure and promote quality of care in a changing delivery system; and

(3) Collect and evaluate data on changes in availability of treatment and services, and make such recommendations as may be necessary for improvements.

(b) For the purpose of carrying out its functions, the Commission may hold hearings, establish subcommittees, and convene and act at such times and places as the Commission may find advisable.

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Sec. 3. Reports. The Commission shall make a preliminary report to the President by September 30, 1997. A final report shall be submitted to the President 18 months after the Commission's first meeting.

Sec. 4. Administration. (a) To the extent permitted by law, the heads of executive departments and agencies, and independent agencies (collectively "agencies") shall provide the Commission, upon request, with such information as it may require for the purposes of carrying out its functions.

(b) Members of the Commission may receive compensation for their work on the Commission not to exceed the daily rate specified for Level IV of the Executive Schedule (5 U.S.C. 5315). While engaged in the work of the Commission, members appointed from among private citizens of the United States may be allowed travel expenses, including per diem in lieu of subsistence, as authorized by law for persons serving intermittently in the Government service (5 U.S.C. 5701-5707) to the extent funds are available for such purposes.

(c) To the extent permitted by law and subject to the availability of appropriations, the Department of Health and Human Services shall provide the Commission with administrative services, funds, facilities, staff, and other support services necessary for the performance of the Commission's functions. The Secretary of Health and Human Services shall perform the administrative functions of the President under the Federal Advisory Committee Act, as amended (5 U.S.C. App.), with respect to the Commission.

Sec. 5. General Provision. The Commission shall terminate 30 days after submitting its final report, but not later than 2 years from the date of this order, unless extended by the President.

WILLIAM J. CLINTON

THE WHITE HOUSE,
September 5, 1996.

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