PBOR Initiatives / Events

PHOTOCOPY
PRESERVATION

November 1, 1998

PATIENTS BILL OF RIGHTS CEREMONY

DATE:	November 2, 1998
LOCATION:	Rose Garden
BRIEFING TIME:	12:15 pm - 12:55 pm
EVENT:	1:00 pm - 2:00 pm
FROM:	Bruce Reed/Chris Jennings

I. PURPOSE

To urge voters to elect a Congress that supports increasing patient protections, and to release a report detailing actions the federal government has taken to implement a Patients Bill of Rights while the Republican Leadership stalled on this issue.

II. BACKGROUND

This is an opportunity for you to urge voters to elect a Congress that shares your commitment to passing a strong enforceable Patients' Bill of Rights next year. You should emphasize that while the Republican Leadership stalled on the patients' bill of rights, the Administration has been doing everything possible to implement these protections in Federal health plans. To that end, you will be releasing a new report from the Vice President documenting action that the Federal government is taking within its authority to implement the Patients' Bill of Rights in the health plans it administers or oversees. In your remarks, you should make the following points:

Criticize the Republican Leadership for allowing Congress to adjourn without passing a strong Patients' Bill of Rights. For a full year, you have been calling on the Congress to pass a strong enforceable patients' bill of rights. For months, the Republican Leadership used every possible stall tactic to thwart the patients' bill of rights. When the Republican Leadership finally did introduce a bill, their proposal contained more loopholes than patient protections. It did not contain critical protections, such as access to specialists, and offered false promises, such as an appeals process that left the decisions in the hands of HMO accountants. In fact, Senator Lott would not even allow an up or down vote to be held on this issue.

Urge Voters to Choose A Congress Committed to Passing A Strong Enforceable Patients' Bill of Rights. You should reiterate your strong commitment to passing a Patients' Bill of Rights in the next Congress and urge Americans to go to the polls

tomorrow to elect a Congress that shares this commitment. This legislation should include enforceable patient protections, such as access to specialists, coverage of emergency room services when and where the need arises, continuity of care protections, an internal and independent external appeals process to appeal decisions made by HMO accountants, and protections to assure that HMOs are held accountable when patients are harmed or injured due to a health plans' decisions.

Announce the Release of a New Report From the Vice President That Highlights the Administration Is Doing Everything Possible to Implement Patient Protections. In February, you directed Medicare, Medicaid, the Federal Employee Health Benefits Program, the Department of Defense Military Health Program, and the Veteran's Health Program -- which serve over 85 million Americans -- to, where possible, come into compliance with the Patients' Bill of Rights outlined by the President's Quality Commission. Today, the Vice President released a report highlighting that these agencies have taken all the action within their statutory authority to implement patient protections. As a result, the Federal health plans are now, or soon will be, in virtual compliance with the Patients' Bill of Rights. The report documents that:

- **The 285 participating health plans, covering nine million Federal employees and their dependents, have been directed to implement new patient protections this year.** OPM which oversees the Federal Health Employees Benefits Program (FEHBP) serving nine million Federal employees and dependents, has directed their 285 participating health plans to come into compliance with the Patients' Bill of Rights. Through their annual call letter, OPM has specifically requested that plans implement new protections including access to specialists, continuity of care, disclosure of financial incentives, and access to emergency room services. Finally, OPM has issue new regulations to prevent "gag clauses." OPM is also sending information to beneficiaries to assure they are fully aware of their new patient protections.

- **The 39 million Medicare beneficiaries are benefitting from critical patient protections.** Building on Medicare's commitment to providing essential patient protections, HHS published an Interim Final rule in June that includes a series of new patient protections for Medicare beneficiaries. When this rule is fully implemented, Medicare will be virtually in compliance with the Patients' Bill of Rights, including new protections such as access to emergency services when and where the need arises, patient participation in treatment decisions, and access to specialists.

- **The 38 million Medicaid beneficiaries are being assured essential protections in the Patients' Bill of Rights.** In September, HCFA published a Notice of Proposed Rulemaking (NPRM) adding new

patients protections for Medicaid beneficiaries, such as access to specialists and an expedited independent appeals process to bring the program in compliance with the Patients' Bill of Rights, where possible.

- **Over eight million Americans will receive the protections in the patients' bill of rights by the end of this year as a result of the new policy directive assured by the Defense Department's Military Health System (MHS).** In response to your directive, DoD issued "The Patients' Bill of Rights and Responsibilities in the Military Health System," a major policy directive to all participants in the MHS. This directive outlined new protections for the over 8 million beneficiaries served by MHS, including access to appropriate specialists for women's health needs and chronic illnesses and rights for the full discussion of treatment options and of financial incentives. With this directive, which will be fully implemented by the end of this year, DoD will now be in compliance with the Patients' Bill of Rights.

- **Over three million veterans are or will soon be assured virtually all patient protections.** In July, the Department of Veteran Affairs (DVA) issued an Information Memorandum to participating health providers announcing its intention to have an external appeals process in place by the end of the year. Similarly, DVA established a task force to make recommendations as to how best implement information disclosure requirements consistent with Commission's recommendations and has developed a new brochure to provide beneficiaries the necessary information. With the implementation of these new protections DVA is virtually in compliance with the Patients' Bill of Rights.

- **The 125 million Americans covered by ERISA still are not assured critical patient protections because the Department of Labor does not have the authority to implement them without legislation.** DoL oversees the Employee Retirement Income Security Act (ERISA), governing approximately 2.5 million private sector health plans, that cover about 125 million Americans, issued new regulation to implement an expedited internal appeals process and information disclosure requirements. However, DoL's report underscores unless Congress passes Federal legislation, they do not have the authority to implement most patient protections.

III. PARTICIPANTS

Briefing Participants:
Bruce Reed
Chris Jennings

Karen Tramantano

Program Participants:
YOU
Beverly Malone, President of the American Nurses Association
Dr. Robert Weinmann, advocate of HMO reform
Frances Jennings, victim of HMO abuse. Her husband was delayed two months for a referral to a specialist, and died of lung cancer before being able to see the specialist finally approved by the HMO.

To be greeted before event:
Secretary Alexis Herman, Department of Labor
Director Janice LaChance, Office of Personnel Management
Deputy Secretary Gober, Veterans Administration
Gerald McEntee, President of AFSCME
Bill Lucy, Secretary Treasurer of AFSCME
Linda Chavez-Thompson, Executive Vice-President of the AFL-CIO

IV. PRESS PLAN

Open Press.

V. SEQUENCE OF EVENTS

- **YOU** will be announced onto the stage accompanied by program participants.
- Beverly Malone will make remarks and introduce Dr. Robert Weinmann.
- Dr. Robert Weinmann will make remarks and introduce Frances Jennings.
- Frances Jennings will make remarks and introduce **YOU**.
- **YOU** will make remarks, work a ropeline, and then depart.

VI. REMARKS

Provided by Speechwriting.

PRESIDENT CLINTON RELEASES REPORT DOCUMENTING ACTIONS FEDERAL GOVERNMENT IS TAKING TO IMPLEMENT A PATIENTS' BILL OF RIGHTS AND URGES VOTERS TO SEND BACK A CONGRESS THAT SHARES HIS COMMITMENT TO PASS LEGISLATION TO ASSURE PROTECTIONS FOR ALL HEALTH PLANS
November 2, 1998

Today, President Clinton urged voters to send back a Congress that shares his commitment to passing a strong enforceable patients' bill of rights next year. The President also emphasized that while the Republican Leadership has stalled on the patients' bill of rights, the Administration has been doing everything possible to implement these protections in Federal health plans. To that end, he unveiled a report from the Vice President documenting action that the Federal government is taking within its authority to implement the patients' bill of rights in the health plans it administers or oversees. Today, the President:

Criticized Republican Leadership for allowing Congress to adjourn without passing a strong patients' bill of rights. For a full year, the President has been calling on the Congress to pass a strong enforceable patients' bill of rights. For months, the Republican Leadership used every possible stall tactic to thwart the patients' bill of rights. When the Republican Leadership finally did introduce a bill, their proposal contained more loopholes than patient protections. It did not contain critical protections such as access to specialists and offered false promises such as an appeals process that left the decisions in the hands of HMO accountants. In fact, Senator Lott would not even allow an up or down vote to be held on this issue.

Urged voters to choose a Congress committed to passing a meaningful patients' bill of rights. President Clinton committed to doing everything possible to pass a strong patients' bill of rights in the next Congress and urged Americans to go to the polls tomorrow to elect a Congress that shares this commitment. This legislation should include enforceable patient protections, such as access to specialists, coverage of emergency room services when and where the need arises, continuity of care protections, an internal and independent external appeals process to appeal decisions made by HMO accountants, and protections to assure that HMOs are held accountable when patients are harmed or injured due to a health plans' decisions.

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WHSO LAYOUT DRAFT 4
a/o 11/02/98; L. Schwartz 10:30 a.m.

PATIENTS BILL OF RIGHTS
Monday, November 2, 1998
East Room

Gates Open:	12:15 p.m.		
Invite Time:	12:30 p.m.		
Principal Time:	**12:45 p.m.**	**Brief**	**Oval Office**
	1:10 p.m.	**Meet**	**Blue Room**
	1:15 p.m.	**Event**	**East Room**

Approx. 165 guests/Open Press/Business Attire
8 Social Aides

12:00 p.m. IN PLACE TIME

12:30 p.m. AFSME busses arrive East Executive Avenue.

12:45 p.m. **THE PRESIDENT** receives briefing in the Oval Office.

12:15 p.m. EV Gate opens and guests proceed to the East Room.
Note: Andres Hernandez receives a red card at the gate

1:10 p.m. **THE PRESIDENT** meets event participants and special guests in the Blue Room.

Blue Room Participants:

Cabinet:
Secretary Herman
Deputy Secretary Gober
Director LaChance

Event Participants
Beverly Malone, President, American Nurses Association, Washington DC and guest Argene Carlswell
Dr. Robert Weinmann, President of the Union of American Physicians and Dentists
Frances Jennings, Andover, Massachusetts and son

Others
Linda Chavez - Thompson, Exec. Vice President of the AFL-CIO
Gerald McEntee, President of AFSME
William Lucy, Secretary Treasurer of AFSME

Member of Congress
Rep. Elliot Engel D-NY

1:15 p.m. **THE PRESIDENT** and event participants are announced into the East Room and take their place on stage.

PROGRAM

Secretary Herman makes welcoming remarks and introduces Beverly Malone, President, American Nurses Association.

Beverly Malone, makes brief remarks and introduces Dr. Robert Weinmann.

Dr. Robert Weinmann makes brief remarks and introduces Frances Jennings.

Frances Jennings makes brief remarks and introduces **THE PRESIDENT**.

THE PRESIDENT makes remarks.

2:00 p.m. **THE PRESIDENT** departs.

Guests exit East Gate.

SET UP NOTES: *130 chairs; 10x16 stage location at gold curtain; press risers on west wall both sides of cross hall doorway; water at podium; blue goose; strings and piano in Grand Foyer, Honors group in Foyer for announce; US and Presidential flags on stage.*

PATIENTS BILL OF RIGHTS
RESERVED SEATING

Name cards in Yellow
Stage:
The President
Secretary of Labor Alexis Herman
Deputy Secretary of Veteran's Affairs Hershel Gober
Director of the Office of Personnel Management Janice LaChance
Ms. Beverly Malone
Dr. Robert Weinmann
Ms. Frances Jennings

Front row:
Depty Dir. OPM - John Sepulveda (escorted by Lisa Levin)
Under Secretary for Defense, Rudy DeLeon (escorted by Lisa Levin)

General Blue Reserved
5 guests in meet

General Red Reserved
Andres Hernandez - red card

ROUTING SLIP

DATE: 10/28/98

FROM: Stephanie Streett
Assistant to the President and Director of Presidential Scheduling

SUBJECT: Patients Bill of Rights Event

Virginia Apuzzo	____	Capricia Marshall	____
Paul Begala	____	Thurgood Marshall, Jr.	____
Lisa Berg	____	Katie McGinty	____
Samuel Berger	____	Minyon Moore	____
Sidney Blumenthal	____	Bob Nash	____
Erskine Bowles	____	Jennifer Palmieri	____
Phil Caplan	____	John Podesta	____
Maria Echaveste	____	Redington/Davis	✓
Rahm Emanuel	____	Bruce Reed	✓
Tim Emrich	✓	Dan Rosenthal	____
Jeff Forbes	✓	Charles Ruff	____
Nancy Hernreich	____	Patti Solis-Doyle	____
Mickey Ibarra	____	Craig Smith	____
Ron Klain	____	Doug Sosnik	____
Neal Lane	____	Gene Sperling	____
Lisa Levin	____	Larry Stein	____
Ann Lewis	✓	Todd Stern	____
Bruce Lindsey	____	Melanne Verveer	____
Joe Lockhart	✓	Michael Waldman	✓
		Christa Robinson	✓

FILE: Accept 11/2/98

COMMENTS: _____

SCHEDULE REQUEST October 21, 1998

98 OCT 23 A10:04

✓ ACCEPT ___ REGRET ___ PENDING

TO: Stephanie Street, Director of Scheduling and Advance

FROM: Bruce Reed, Assistant to the President for Domestic Policy

REQUEST: Patients Bill of Rights Event.

PURPOSE: To release a report on the President's accomplishments in increasing patient protections for individuals in federal health plans and to contrast this with the inaction of the Republicans in Congress to act on Patient's Bill of Rights legislation.

BACKGROUND: This an opportunity for the President to highlight his commitment to the Patients Bill of Rights and to tally up all the work he has done at the federal level to provide greater patient protections to individuals enrolled in federal health plans while the Congress has taken no action in this area. The President will release a report showing how many people have been ensured important patient protections through his executive actions that effect DOD, Medicare, Medicaid, and OPM health plans.

There is a strong coalition of support for a Patients Bill of Rights from the AFL-CIO and Democratic Members of Congress, and this could be a good format for the President to talk about other issues that Congress failed to act on.

DATE & TIME: October 30 or October November 2, 1998.

LOCATION: The White House or on the road.

PARTICIPANTS: TBD

REMARKS REQUIRED: Yes.

MEDIA COVERAGE: OPEN.

RECOMMENDED BY: Bruce Reed

CONTACT: Christa Robinson x6-5165

Good afternoon, Mr. President, Members of the Cabinet, and distinguished guests.

My name is Frances Jennings, from Andover, Massachusetts, and I was married for almost 35 years. I am grateful and privileged to have this opportunity to describe my late husband's experiences with our health maintenance organization.

Jack was diagnosed in 1992 with emphysema. Since that time his breathing gradually became more difficult, and he came to rely on round-the-clock steroid inhalers with oxygen at night. In the spring of 1997 he was hospitalized with a collapsed lung. Recovery was slow and it was determined by CT scan and X-ray that his lungs were severely scarred. He was now dependent upon continuous oxygen.

We were advised by his primary care physician and a consulting thoracic surgeon that surgery could greatly improve his quality of life. Jack's case had already been discussed with one of the leading surgeons at Brigham and Women's Hospital in Boston who agreed to evaluate Jack for this procedure. We applied to our insurance company for the appropriate referral but were denied because the surgeon in question

was "out of network."

My husband's primary care physician immediately requested an evaluation by a surgeon within the network. After further delay on the part of the insurance company, an appointment was approved for a consult/evaluation by a surgeon at the Massachusetts General Hospital. Four weeks had passed since our original request.

Jack's condition continued to deteriorate and he was hospitalized again with an acute asthma attack. By this time he was wheelchair-bound outside our home, but we remained optimistic that he would soon receive surgical treatment to help him breathe without being dependent on supplemental oxygen and would once again be able to walk unassisted. Exactly one day before this long-awaited appointment, we were notified that the consult was canceled because this physician did not accept patients from our HMO. How could our HMO not have known when they approved the visit?

We were devastated. After several attempts to contact case managers at the insurance company, we were told that they were -- and I quote -- "waiting for a list of MD's we could use." One week later we

were told we would indeed be granted a referral - in another four weeks -- to the surgeon with whom we first requested a consultation so long before. Jack was hospitalized again, this time for respiratory failure. Another CT scan revealed a mass in his chest, and a biopsy confirmed a small cell cancer. Nothing further could be done. He died ten days later -- four days before that long-awaited appointment. He was 62 years old.

My purpose in telling Jack's story is to illustrate how health maintenance organizations make - and delay - decisions, and that as a result of such negligent delays people are dying. My family's profound sadness is compounded by outrage that he was denied the opportunity in a timely manner to see a specialist who might well have diagnosed and treated the fast-growing cancer that so quickly killed him. And what outrages me further is that health maintenance organizations cannot be held accountable for their actions. They are fully protected under the law as it is presently written.

The need for new legislation is urgent. People are dying because their access to medical specialists is being denied or delayed.

For the sake of other families who at this moment are sharing our experience, I ask you to please pass a Patients' Bill of Rights so that others like my husband -- indeed, all of us -- may be better served.

May I now introduce the person who has been fighting for a Patients' Bill of Rights, the President of the United States, Bill Clinton.

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PATIENTS' BILL OF RIGHTS

A strong enforceable patients' bill of rights includes some of the following critical protections:

- **Access to specialists**, assuring consumers with complex or serious medical conditions direct access to the specialists they need and assuring an adequate number of direct access visits, as necessary.

- **Access to specialists for women's health needs**, giving women access to qualified providers, including gynecologists, certified nurse midwife and other providers, to provide routine and preventative women's health care services.

- **Access to continuity of care**. Providing continuity of care for consumers who are undergoing a course of treatment for a chronic or disabling condition. For example, this would assure that patients do not have their treatment abruptly altered, in the middle of cancer therapy or a pregnancy, just because their employer changes health plans.

- **Access to emergency services when and where the need arises.** This requires health plans to cover emergency services in situations where a "prudent layperson" could reasonably expect that the absence of care could place their health in serious jeopardy.

- **Requiring disclosure of financial incentives.** This provision requires providers to disclose any incentives, financial or otherwise -- that might influence their decisions affecting patient care.

- **Access to accurate, easily understood information** about consumers' health plans, facilities and professionals to help them make informed health care decisions. This would include information, such as the accreditation status of the health care facilities and health plans and consumer satisfaction with health care professionals.

- **Prohibiting "gag clauses"** which restrict health care providers' ability to communicate with and advise patients about medically necessary options. This provision ensures consumers' right and ability to participate fully in decisions essential to their health care.

- **Internal and independent external grievance and appeals processes** for consumers to resolve their differences with their health plans. This includes expedited timely appeals when necessary.

- **Enforcement to make these rights real**, by requiring health plans to be held accountable when consumers' suffer serious injury or death because of wrongful action committed by the health plans.

- **Cover all health plans**. These protections should be extend to all health plans rather than leaving the tens of millions of Americans, including millions of Americans in small businesses, that are left vulnerable by the Republican Leadership bills.

PRESIDENT CLINTON HAS BEEN A LONGSTANDING LEADER IN PROVIDING PATIENTS THE PROTECTIONS THEY NEED

- **September 1996.** The President announced his intention to create a Quality Commission to advise him on the changes in the health care system and make recommendations on how best to assure patient protections and quality health care.

- **April 1997.** The President announced the Members of his Quality Commission, which included all of the representatives players in the health care industry, including businesses, insurers, consumers, labor, doctors, and nurses. At that time, he asked the Commission to develop a patients' bill of rights as its first order of business.

- **November 1997.** The President endorsed the Quality Commission patients' bill of rights and asked Congress to make it the law of the land.

- ***November 1997.*** *Senate Majority Leader Trent Lott reportedly told health-insurance lobbyists to "get off your butts, get off your wallets" to help defeat the patients' bill of rights.*

- **January 1998.** In his State of the Union address, the President focused the nation on this issue and reiterated his call on Congress to pass a patients' bill of rights before they adjourned this year.

- **February 1998.** The President issued an Executive Memorandum directing the Federal health plans (Medicare, Medicaid, DoD, FEHBP, and VA), which cover 85 million Americans to implement the patients' bill of rights.

- ***February 1998.*** *Speaker Gingrich appointed a task force that promised to move rapidly to produce a patients' bill of rights. After promising each month to release a patients' bill of rights, they finally issued a press release announcing their intention to unveil legislation that has yet to be seen.*

- **March 1998.** The President reiterated his call on Congress to pass a patients' bill of rights this year in a speech to the American Medical Association. Doctors, nurses, patients and other consumers strongly believe that the Congress should pass a strong, enforceable patients' bill of rights this year.

- **March 1998.** The President accepted the final recommendations of his Quality Commission. At that time he, yet again, called on Congress to pass a patients' bill of rights.

- **April through July 1998.** The President and the Vice President, at every opportunity, continued to urge Congress to pass a patients' bill of rights.

- ***June 1998.*** *In late June, eight months after the President called on Congress to pass a patients' bill of rights, the House Republicans finally issued a press release on principles for patient protections.*

- ***July 1998.*** *The Senate Republicans introduced a proposal that is more of an insurers' bill of rights than a patients' bill of rights.*

- ***July 1998.*** *The House Republicans pass their patients' bill of rights proposal that has more loopholes than patient protections.*

- ***August 1998.*** *Senate Republicans adjourn without taking up the patients' bill of rights.*

- **August 1998 - November 1998.** The President, Vice President, and First Lady all highlighted the need to pass a strong enforceable patients' bill of rights in their travels around the nation on behalf of Democratic candidates.

- **November 1998.** The Vice President delivers report to the President summarizing the status of the Federal governments efforts to implement the patients' bill of rights for the 85 million Americans in Federal health plans, including an Interim Final rule implementing these protections for Medicare beneficiaries, an NPRM implementing them for Medicaid beneficiaries, OPM's efforts to implement these protections for Federal employees.

- **November 1998 - January 1999.** The President and others in the Administration consistently stated publicly and in discussions with Democratic leaders that passing a strong patients' bill of rights will be one of the Administration's top priorities in the new Congress.

- ***January 1999.*** *The Republicans introduce patients' bill of rights that still leaves many holes with regard to patient protections.*

- **January 1999 -- State of the Union Address.** In his address, the President made clear again that passing a strong enforceable patients' bill of rights is one of his top priorities in the upcoming Congress.

PRESIDENT CLINTON RELEASES REPORT DOCUMENTING ACTIONS FEDERAL GOVERNMENT IS TAKING TO IMPLEMENT A PATIENTS' BILL OF RIGHTS AND URGES VOTERS TO SEND BACK A CONGRESS THAT SHARES HIS COMMITMENT TO PASS LEGISLATION TO ASSURE PROTECTIONS FOR ALL HEALTH PLANS
November 2, 1998

Today, President Clinton urged voters to send back a Congress that shares his commitment to passing a strong enforceable patients' bill of rights next year. The President also emphasized that while the Republican Leadership has stalled on the patients' bill of rights, the Administration has been doing everything possible to implement these protections in Federal health plans. To that end, he unveiled a report from the Vice President documenting action that the Federal government is taking within its authority to implement the patients' bill of rights in the health plans it administers or oversees. Today, the President:

Criticized Republican Leadership for allowing Congress to adjourn without passing a strong patients' bill of rights. For a full year, the President has been calling on the Congress to pass a strong enforceable patients' bill of rights. For months, the Republican Leadership used every possible stall tactic to thwart the patients' bill of rights. When the Republican Leadership finally did introduce a bill, their proposal contained more loopholes than patient protections. It did not contain critical protections such as access to specialists and offered false promises such as an appeals process that left the decisions in the hands of HMO accountants. In fact, Senator Lott would not even allow an up or down vote to be held on this issue.

Urged voters to choose a Congress committed to passing a meaningful patients' bill of rights. President Clinton committed to doing everything possible to pass a strong patients' bill of rights in the next Congress and urged Americans to go to the polls tomorrow to elect a Congress that shares this commitment. This legislation should include enforceable patient protections, such as access to specialists, coverage of emergency room services when and where the need arises, continuity of care protections, an internal and independent external appeals process to appeal decisions made by HMO accountants, and protections to assure that HMOs are held accountable when patients are harmed or injured due to a health plans' decisions.

Released report from the Vice President that highlighted that while the Republican Leadership delayed, the Administration is acting to implement patient protections in Federal health plans. In February, the President directed Medicare, Medicaid, the Federal Employee Health Benefits Program, the Department of Defense Military Health Program, and the Veteran's Health Program -- which serve over 85 million Americans -- to, where possible, come into compliance with the patients' bill of rights outlined by the President's Quality Commission. Today, the Vice President released a report highlighting that these agencies have taken all the action within their statutory authority to implement patient protections. As a result, the Federal health plans are now, or soon will be, in virtual compliance with the patients' bill of rights. The report documents that:

- **The 285 participating health plans, covering nine million Federal employees and their dependents, have been directed to implement new patient protections this year.** The Office of Personell Management (OPM), which oversees the Federal Health Employees Benefits Program (FEHBP) serving nine million Federal employees and dependents, has directed their 285 participating health plans to come into compliance with the patients' bill of rights. Through their annual call letter, OPM has specifically requested that plans implement new protections including access to specialists, continuity of care, disclosure of financial incentives, and access to emergency room services. Finally, OPM has issue new regulations to prevent "gag clauses." OPM is also sending information to beneficiaries to assure they are fully aware of their new patient protections.

- **The 39 million Medicare beneficiaries are benefitting from critical patient protections.** Building on Medicare's commitment to provide essential patient protections, HHS published an Interim Final rule, in June, that includes a series of new patient protections for Medicare beneficiaries. When this rule is fully implemented, Medicare will be virtually in compliance with the patients' bill of rights including new protections such as access to emergency services when and where the need arises, patient participation in treatment decisions, and access to specialists.

- **The 38 million Medicaid beneficiaries are being assured essential protections in the patients' bill of rights.** In September, the Health Care Financing Administration published a Notice of Proposed Rulemaking (NPRM) adding new patients protections for Medicaid beneficiaries, such as access to specialists and an expedited independent appeals process to bring the program in compliance with the patients' bill of rights, where possible.

- **Over eight million Americans will receive the protections in the patients' bill of rights by the end of this year as a result of the new policy directive assured by the Defense Department's Military Health System (MHS).** In response to the President's directive, DoD issued "The Patients' Bill of Rights and Responsibilities in the Military Health System," a major policy directive to all participants in the MHS. This directive outlined new protections for the over 8 million beneficiaries served by MHS, including access to appropriate specialists for women's health needs and chronic illnesses and rights for the full discussion of treatment options and of financial incentives. With this directive, which will be fully implemented by the end of this year, DoD will now be in compliance with the patients' bill of rights .

- **Over three million veterans are or will soon be assured virtually all patient protections.** In July, the Department of Veteran Affairs (DVA) issued an Information Memorandum to participating health providers announcing its intention to have an external appeals process in place by the end of the year. Similarly, DVA established a task force to make recommendations as to how best implement information disclosure requirements consistent with Commission's recommendations and has developed a new brochure to provide beneficiaries the necessary information. With the implementation of these new protections DVA is in virtual compliance with the patients' bill of rights

- **The 125 million Americans covered by ERISA still are not assured critical patient protections because the Department of Labor does not have the authority to implement them without legislation.** DoL oversees the Employee Retirement Income Security Act (ERISA), governing approximately 2.5 million private sector health plans, that cover about 125 million Americans, issued a new regulation to implement an expedited internal appeals process and information disclosure requirements. However, DoL's report underscores that unless Congress passes Federal legislation, they do not have the authority to implement most patient protections.

TO BE SIGNED BY THE PRESIDENT

THE WHITE HOUSE

WASHINGTON

February 20, 1998

MEMORANDUM FOR THE SECRETARY OF DEFENSE
THE SECRETARY OF LABOR
THE SECRETARY OF HEALTH AND HUMAN SERVICES
THE SECRETARY OF VETERANS AFFAIRS
THE DIRECTOR OF THE OFFICE OF PERSONNEL MANAGEMENT

SUBJECT: Federal Agency Compliance with the Patient Bill of Rights

Last November, I directed you to review the health care programs you administer and/or oversee and report to me on the level and adequacy of the patient protections they provide. Specifically, I asked you to advise me on the extent to which those programs are in compliance with the Health Care Consumer Bill of Rights (the "Patient Bill of Rights") recommended by the Advisory Commission on Consumer Protection and Quality in the Health Care Industry ("the Quality Commission").

Yesterday, you formally conveyed your reports to me through Vice President Gore. He advises me that each of your agencies is well on its way toward full compliance with the patient protections recommended by the Quality Commission. By doing so, your agencies will serve as strong models for health plans in the private sector.

Under your leadership, we are showing that it is possible and desirable to ensure that patients have the tools they need to navigate through an increasingly complex health care delivery system. We are showing that common sense solutions for all too common problems in our health systems are the right prescription not only for beneficiaries of Federally administered programs, but for our private sector colleagues as well. Your efforts illustrate that patient protections can be accomplished without excessive costs or regulations.

While the news is encouraging, your reports also indicate that we have not completed the job. Although Federal health programs are taking a leading role in providing protections to patients, your report indicates we have the regulatory and administrative authority to come into substantial compliance with the Patient Bill of Rights, and I believe that this should be one of my Administration's highest priorities.

Therefore, I hereby direct you to take the following actions consistent with the missions of your agencies to come into compliance with the Patient Bill of Rights.

The Secretary of Health and Human Services shall:

- take all appropriate administrative actions to ensure that the Medicare and Medicaid programs come into substantial compliance with the Patient Bill of Rights, including access to specialists and improved participation in treatment decisions, by no later than December 1999; and

- notify all State Medicaid directors that emergency room care protections should be consistent with the Patient Bill of Rights.

The Director of the Office of Personnel Management shall:

- ensure that all 350 Federal Employees Health Benefits Plan (FEHBP) participating carriers come into contractual compliance with the Patient Bill of Rights, particularly with regard to access to specialists, continuity of care, and access to emergency room services by no later than December 31, 1999; and

- with respect to participating carriers, propose regulations to prohibit, within 90 days, practices that restrict physician-patient communications about medically necessary treatment options.

The Secretary of Veterans Affairs shall:

- take the necessary administrative action to ensure that a sufficient appeals process is in place throughout the Veteran's Health System by September 30, 1998; and

- issue a policy directive to ensure that beneficiaries in the Veteran's Health System are provided information consistent with the Patient Bill of Rights by September 30, 1998.

The Secretary of Defense shall:

- establish a strong grievance and appeals process consistent with the Patient Bill of Rights throughout the military health system by September 30, 1998;

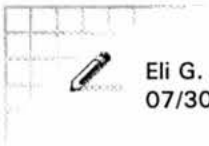
- issue a policy directive to promote greater use, within the military health system, of providers who have specialized training in women's health issues to serve as primary care managers for female beneficiaries and to ensure access to specialists for beneficiaries with chronic medical conditions by September 30, 1998; and

- issue a policy directive to ensure that all patients in the military health system can fully discuss all treatment options. This includes requiring disclosure of financial incentives to physicians and prohibiting "gag clauses" by September 30, 1998.

The Secretary of Labor shall:

- propose regulations to strengthen the internal appeals process for all Employee Retirement Income Security Act (ERISA) health plans to ensure that decisions regarding urgent care are resolved within 72 hours and generally resolved within 15 days for non-urgent care; and

- propose regulations that require ERISA health plans to ensure the information they provide to plan participants is consistent with the Patient Bill of Rights.



Eli G. Attie @ OVP
07/30/98 09:19:18 PM

Record Type: Record

To: Christopher C. Jennings/OPD/EOP, Sarah A. Bianchi/OPD/EOP

cc:
Subject: Revised

REMARKS BY VICE PRESIDENT AL GORE
PATIENTS' BILL OF RIGHTS EVENT
Friday, July 31, 1998

Thank you, Senator Daschle -- for your kind words, for your remarkable leadership of the Senate, and for fighting so hard on behalf of all Americans for quality health care.

As we approach the 21st Century, American health care is changing dramatically. A lot of that is because of managed care. 160 million Americans are now enrolled in managed care plans -- in part because of the savings they offer. Those savings are a good thing. But when you have a health problem, the doctor's first question should be "where does it hurt;" not "will your health plan pay."

Far too often, what we have seen is not managed care, but managed cost. Patients who are denied access to the specialists they need. Patients who are not told their full range of treatment options. And it is shameful. No one should have to fight with their HMO while they're trying to fight off sickness and disease.

Americans need the best care, not just the cheapest care. Crucial medical decisions should be made by doctors, not budgetary bean-counters.

We need a law that will give every American in an HMO the right to see a specialist when they need one. We need a law that will give every American to appeal if an HMO denies them the care they need. We need a Patients' Bill of Rights in this country. That is why we are here today -- and that is why we are fighting so hard to pass it into law.

This shouldn't be a partisan issue. Senator Daschle has been leading a bipartisan effort on this issue. In fact, many Republicans -- both in Congress, and state legislatures across the nation -- have recognized the crucial importance of these patient protections. Unfortunately, the Senate leadership has chosen partisanship over progress. We have seen their patchwork proposal:

Under their plan, if you need to see a heart specialist or an oncologist and your health

plan says no, then you're out of luck. If you have an emergency near a hospital that's not part of your health plan, there is no guarantee you won't get stuck with huge bills. If your doctor recommends a critical test for breast cancer and your health plan denies it, you have no right to appeal. And if you are one of the more than 100 million Americans in self-insured health plans, you aren't assured any protection at all.

Let's face it: the Republicans offer you not a Bill of Rights -- but a bill of goods.

We know that in the coming weeks, the lobbyists and special interests will be running big ad campaigns, urging Congress to protect the status quo. What we need to do is pass a strong bill that protects patients instead.

The clock is ticking. This Congress has precious few days to choose progress over partisanship -- to put health care quality first, and partisan parlor games last. Above all, I urge the Senate leadership: pass the Patients' Bill of Rights, and give Americans the quality health care they deserve.

Patients' Bill of Rights Event

Briefing prepared by Sarah Bianchi
Event Time: Thursday, July 15, 1999 3:25pm
Ohio Clock Room

EVENT

You are participating in a press conference event with Senator Democrats on the patients' bill of rights. This is a press conference designed for Democrats to comment on the status of the patients' bill of rights debate that has been before the Senate all week. **This event is open to the press.**

LOGISTICS

- Following your event in Gephardt's office with Colorado kids, you go to your office to meet Senator Daschle, Senator Kennedy and other Senators tbd;
- You and the Senators proceed to the Ohio Clock Room;
- You make a brief statement and take a few questions from the press *(See Q&As attached)*;
- Senator Daschle thanks you for your participating. You depart Capitol (Following your departure, the other Senators will continue the press conference).

YOUR ROLE AND CONTRIBUTION

This event provides an opportunity to comment on the patients' bill of rights currently being debated in the Senate.

NOTE ON THE STATUS OF THE DEBATE

As of this writing (Wednesday evening), the patients' bill of rights debate has fallen along partisan lines. The Republicans have resisted any efforts to strengthen their bill and Democratic amendments to improve the bill (such as assuring all patients in all health plans are covered and strong emergency room protections) have all been lost. The Republicans are offering some amendments of their own that attempt on the same protections the Democrats have offered as amendments (e.g. emergency room protections) While their new provisions are stronger in some cases than the provisions in their initial bill, they are generally still not acceptable.

The big question is what type of bill the Republicans will offer at the end of the day as a substitute amendment. This entire debate is generally being viewed as political. Clearly, it is perceived that the Democrats are in favor of a stronger bill, while the Republicans want a weakened bill.

There is some chance, although increasingly unlikely, that there will be a renewed bipartisan effort tomorrow through a potential bipartisan substitute bill introduced by Senators Chafee and Graham. It currently appears that they will not get an amendment slot from either the Republicans or the Democrats to offer their substitute. Their legislation is generally quite strong but they seem to have weakened their enforcement provision beyond what we could live with. (They appear to have dropped the civil monetary penalties that can be imposed by HHS, any punitive damage awards, and even non-economic damages in their enforcement provision). Moreover, they are currently short of 50 votes and Daschle has sent a quiet message that if they cannot get 50 votes on this, he will not likely give them a slot as there are many Democrats who still have amendments they want to bring up.

Senators Graham and Chafee are looking for more Republicans tonight and may modify their bill. We will know more on this tomorrow. If, in fact, there is some change and there is a chance for a bipartisan agreement, you clearly may want to change the tone of your remarks. We will keep you updated on the status of this.

ATTACHMENTS

- Q&As on patients' bill of rights
- Amendments that have been voted on (as of Wedsnesday at 7:30pm)
- Q&As on other topics provided by your press office

QUESTIONS AND ANSWERS ON THE PATIENTS' BILL OF RIGHTS

Q: As it seems highly unlikely to be any meaningful compromise legislation passed this week, won't the patients' bill of rights just will continue to be a political issue that divides the parties and will help your campaign for President? Isn't this the outcome you wanted?

A: Absolutely not. I have been around the country and heard story after story about patients who had care delayed or denied by HMOs and have suffered serious consequences. I believe Americans need and deserve a strong patients' bill of rights to assure them high quality care. The Congress should have passed a strong bill nearly two years ago when we first called for a patients' bill of rights. They should pass a strong bill today, and if they do not we will keep fighting until they do.

Q: Would the President really veto the Republican Leadership bill. Isn't something better than nothing?

A: We are simply not going to stand for legislation that is a false promise for America's patients. We are not going to stand for legislation that means that patients have to pass by two emergency rooms during a heart attack until they get to one covered by their HMO; allows health plans to define what is medically necessary; and does not even cover over 110 million Americans. We are going to continue to fight for a strong enforceable patients' bill of rights that gives Americans the protections they need.

Q: Senator Chafee, Senator Graham, and others have indicated their intention to offer a compromise amendment that provides many of the protections you seek, but severely limit the enforcement provisions you have advocated are necessary to hold health plans accountable. What is your position?

A: We have not seen the specifics of this legislation, but I am encouraged any time a bipartisan coalition of members come together to attempt to improve on the weakness of the Republican leadership bill. Having said this, I am very concerned about their enforcement provisions. They have dropped the civil monetary penalties that can be imposed by HHS; they have dropped any punitive damage awards that can be applied; and they are imposing caps on non-economic damages. Although better than current law, I believe this sets a dangerous precedent of preemption of state law, and it undermines the prospect of a viable enforcement provision.

Q: Won't the Patients' Bill of Rights raise health care costs and increase the number of the uninsured?

A: These are the "scare tactic" arguments from insurers and other special interests who oppose passing the patients' bill of rights. Every estimate produced by independent experts has concluded that the cost associated with the bill is quite modest. The Congressional Budget Office has estimated that the Democratic Leadership's Patients' Bill of Rights would increase premiums by less than $2 a month – an amount which most Americans would consider a small price to pay to assure the patient protections they need. Moreover, since many good plans already provide these protections, many workers won't see any increase at all.

Q: Isn't the only outstanding difference between you and the Republicans passing a Patients' Bill of Rights your insistence on providing for a right to sue?

A: No, there are numerous shortcomings in the Senate and House Republican Leadership bills. They leave out critical protections that would leave patients without the protections they need. They do not include access to specialists, do not assure patients won't lose their provider in the middle of treatment, and leave tens of millions of Americans without any guarantee of protections at all. These are serious shortcomings that need to be included in any patients' bill of rights.

Q: Would the President veto a Patients' Bill of Right s that did not allow Americans to sue their health care plans?

A: The President certainly is not going to sign a bill that does not have enforcement provisions that assure that patient protections are real. We are not interested in a bill of goods that leave patients without the protections they need and deserve. We are open to working with Republicans and Democrats to determine the best enforcement provision, but again – we are not interested in signing into law an empty promise.

LIST OF AMENDMENTS THAT HAVE BEEN VOTED ON

Senator Robb's amendment made series of improvements in women's health, including assuring mastectomies are covered and that women can designate an OB-GYN as their primary care provider. Lost 48-52.

Senator Nickles amendment to strike medical necessity in the Democratic Leadership Bill Adopted 52-48.

Senator Nickles amendment not to implement provisions in any bill if they are found to raise health insurance premiums by more than one percent. Adopted 52-48.

Senator Graham's amendment for strong emergency protections. Lost 47-53.

Senator Nickles amendment to strike a Kennedy-Daschle amendment to expand the scope of the Republican bill to cover all health plans. Senator Nickles amendment means that legislation would still leaves over 110 million Americans without any protections at all. It also speeds up the phase in of the self-employed tax deduction. Adopted 53-47.

Senator Snowe amendment that provides for increased hospital stays following a mastectomy and pay for a second opinion for cancer specialists. Passed 55-45. (Democrats opposed this because it struck a Dodd amendment on assuring coverage of clinical trials. They argued that they should not have to pick between these important protections).

POLITICAL
Q&A

Q: Joe Lockhart announced in his briefing that the President will travel with you to LittleRock next month to participate in Gore 2000 events and that this is the first in a series of trips and events the President will participate in on behalf of Gore 2000. Is this a conscience decision on your part to highlight your friendship amidst the stories of strained relations between the two of you?

A: Not at all. Our friendship is solid and we continue to enjoy a strong working relationship. These events reflect that.

Q: What's your response to GW's statement that you no more invented prosperity than you invented the Internet?

A: First of all, the American people -- the working men and women out there in America who are working for their children's education and for a better future for themselves -- they are the key to this country's economic success. And they know that if we're going to expand the prosperity and keep growing our economy, we've got to keep moving forward with the kinds of economic policies that our Administration has brought to the country.

We've got to continue to be fiscally responsible and balance the budget – or better – every year. We need to increase our investments in efforts that create economic growth, such as education, technology, and research; We need to continue to streamline government, reducing its size and eliminating red tape; and we need to work to open new markets by expanding free and fair trade.

That's how we've erased a record-high deficit and replaced it with a record-high surplus.

Americans remember what it was like before. They know the economic policies of the Republican Party were wrong for America. We don't want to go back to high unemployment, stagnant wages, and limited opportunity. I want America to keep moving forward.

Q: What's your reaction to the "whites-only" covenant signed by GW?

A: I think that's an issue you should talk to Governor about and see if you can get a straightforward answer.

Q: Why didn't you attend the DLC's "national conversation" yesterday? Was it because of tension between you and the President?

A: I can't begin to count the number of DLC conventions I have attended over the years. This year, I had to decline because of commitments I'd made to friends and supporters in Iowa.

Q: What's your FEC report going to show?

A: Our report will show that we're right on target and that we're doing what we need to do. My campaign will be releasing that information later this afternoon.

Q: Are you concerned at all about the massive amount of money GW has managed to raise?

A: Ultimately what decides elections isn't money but ideas. I will continue to focus on the issues the American people care about: the need to help and strengthen our families, the education of our children, and protecting our families from crime.

Q: Your campaign has experienced a lot of turmoil lately – are you concerned?

A: I'm having a great time going out and talking to Americans all across the country about issues that are important to their families, like keeping our families safe and keeping guns away from kids. That's why this week I've released my anti-crime agenda to keep families safe.

Q: Aren't you concerned that Mrs. Clinton senate campaign will damage your own Presidential campaign for 2000?

A: I think Mrs. Clinton is one of the most accomplished and committed people I have ever met in my entire life. I think she has much to contribute and I think she will galvanize Democratic voters and make a great Senator for the state of New York.

Q: You recently named Carter Eskew as one of you senior media advisers, the consultant hired by the tobacco industry to kill the Administration-backed anti-smoking bill. Given the remarks you've made on tobacco, and you sister's death due to cancer from smoking, isn't this hypocritical on your part?

A: My commitment to protecting our children from the dangers of smoking and doing everything I can to save the lives now lost to smoking is strong and unrelenting. That commitment would be an important part of my agenda as President.

Q: Why do you want to be President of the United States? What are the biggest challenges facing America at home?

A: Because I want to ensure that we do everything we can to strengthen America's families, help them face the challenges and pressures of today and seize the opportunities of tomorrow.

I want to ensure that our economy is strong and prosperity is expanding for all our families. I want to make sure America is a place of opportunity, where our children get a

great education and our families grow stronger because our policies are improving the quality of our lives. I want to make sure America connects the wisdom and values we learned from our parents and from our own experience to the extraordinary opportunities we want for all our children and grandchildren. We face new challenges in the news century and we need to be ready to meet those challenges.

As President, I will bring revolutionary change to our public schools so every child gets the education they need to succeed. I want every exhausted parent, fighting to balance work and family without enough hours in the day, to know we're on their side, working hard to help them strengthen their families and spend more time with their kids. I want to create an America where neighbors are looking out for each other in communities with clean air wand water, and parks and playgrounds for their children; an America where Social Security and Medicare are safe for every generation; and an America where our nation's justice system is tougher on criminal and better for our country's families. We are a great nation. We can build an America that make our country's families not just better off, but better, in every way. That's why I'm running for President.

Q: What will or can you do as President to keep the prosperity going?

A: I have an ambitious plan for the United States as we begin the 21st century. But as I've said before, I want to ensure that America in is a place where our economy is strong and prosperity is expanding. And that's why every one of my proposals will be paid for within a balanced budget. I feel we must spend in a fiscally responsible way. Ensuring that our country continues on the path we've laid out, one of fiscal discipline and targeted spending, is one of the highest priorities for me.

Q: Why do we need revolutionary change in public schools? What changes do you mean?

A: I want to help the families of America seize the opportunities of today and tomorrow. I want to make certain that we keep our prosperity going and keep our economy growing as we start this next century. I've been part of this Administration this past six years and I understand how to do that. I also want to bring about revolutionary change in our public schools. I want to reduce the class size not only in the early grades, but in every grade. I want to create an America where we create safer, stronger, more livable communities – with clean air and water, and parks and playgrounds for children. I want to help religious institutions -- that already do so much for the American people -- so that they can go further in helping everyone succeed.

Q: Are you ready to take on the gun lobby and require handgun registration? What about Hollywood? Will you refund money from Hollywood donors?

A: Too many political leaders who take their marching orders from the gun lobby. I call upon all Americans to join with me, to create a family lobby that is greater and more

powerful than the gun lobby – so we can get the guns away from children and criminals, once and for all.

As President, I will do whatever it takes to get the guns away from children and criminals, and close every loophole in our lawbooks. And here is how I want to start. I will fight for a national requirement that every state issue photo licenses for anyone who wants to buy a handgun. States would have broad discretion in how to administer and implement this program. But one thing would be clear: unless you obtain a license, pass a background check, and pass a gun safety test, you could not buy a handgun. Not in a gun shop, not at a gun show, not on a street corner, not anywhere in America.

As for Hollywood, I've said this before, and I will say it now, I've challenged Hollywood to do what it can to stem the toxic culture. But we need to recognize that this is only part of the larger problem. This is a complex issue, there are no easy answers, and we need to work on multiple fronts to make a difference.

Q: You called for revolutionary change in our nation's schools. What about in health care?

A: I think we need to focus on getting the job done we've started to do -- which is pass a patients bill of rights so that Americans know that doctors, not accountants are making decisions about their health care treatments.

I also think we need to invest more in prevention and research. That is why I recently called for a doubling of federal cancer research over five years -- which would double our current progress in preventing cancer and saving lives. This aggressive research effort will save as many as 200,000 lives in the year 2010 alone. It will also prevent as many as 700,000 cases of cancer; that is roughly half the number of people diagnosed with it today.

Q: What kind of changes should be made to save Medicare and Social Security?

A: As President, I would be a strong and vocal supporter of Medicare and Social Security. I've said this before and I'll say it again now: I don't support radical schemes nor radical changes to the benefit structure. I think we need to focus on real reform that doesn't jeopardize the quality of care and services Americans receive.

Q: Why have you focused less on environmental issues? Will you make global warming an issue in the campaign?

A: The environment will be an important issue in this campaign, including the issue of global warming. I continue to talk about why it's so important to our families and our future to have clean air and clean water, to protect open spaces and parks, to reduce pollution because that helps increase profits and strengthen our economy. .

Q: What are some of the biggest challenges facing America internationally?

A: First and foremost is the proliferation of arms around the globe. As more people have access to weapons of destruction the paradigms of yesterday are changing and we need to make sure our foreign policy reflects that. I also think that as we've seen in Kosovo, one of the challenges the international community will face is ethnic cleansing. We sent a very strong message in Kosovo and we need to be prepared to continue to face this challenge. And finally, I think we need to extend a foreign policy based on principle.

Q: Do you think the President is still worried about your campaign? What role does he play in your organization?

A: I know I have the full faith and confidence of my friend, the President. I feel great about where my campaign is. I've been out there talking about issues that are important to America's families, like creating revolutionary change in education, providing a role for our churches and synagogues and other religious organizations in helping solve some of our most difficult problems, and making fundamental changes to our nation's judicial system so that it is tougher on criminals and better for American families. I can see that people are responding positively from their reactions during these campaign stops and I'm going to continue talking about these issues throughout this campaign.

Q: How will the Gore administration be different from Clinton's

A: I think the 21st century will hold different challenges that we as a country need to address. Families now face different challenges and new pressures. In 1992, our focus was the economy -- unemployment was running high; welfare was becoming a way of life, not a way out; the thought of a balanced budget seemed like a dream, let alone talk of a surplus.

But now the focus is on the stress families face and what we can do to help them and make America stronger by doing so.

Q: Why hasn't the Clinton-Gore administration already focused on or fixed some of these issues?

A: Well, first of all, let me tell you what we have fixed. We not only balanced the budget, but we now expect to have a $79 billion surplus, the largest in America's history. We helped create 18 million new jobs. We now have the lowest unemployment in 29 years. Homeownership is at an all time high. Real wages are increasing. Crime is down, the welfare rolls are down, and America is strong again.

Now you have to remember where we first started. Unemployment was running high; welfare was becoming a way of life, not a way out; the thought of a balanced budget seemed like a dream, let alone talk of a surplus.

And now, we have unprecedented growth, prosperity and peace. But we also have new challenges facing our families, and new pressures.

Q: Senator Bradley says that after six years of Clinton Gore the country, and the Democratic party needs a fresh start. How do you respond?

A: America does need new approaches for the 21st century -- new ideas to meet new challenges. But you know, there are some things that should continue, like the prosperity and strong economy that are creating jobs, like the reforms that are reducing the size of government to the smallest in thirty years, like the environmental protections that are helping to keep our air and water clean. I've been a part of that success. My experiences and my leadership make me uniquely qualified to continue it in the future and to meet the new challenges we face.

Because we do face new challenges that require new solutions. For example, that's why I've proposed revolutionary change in our public schools, a national photo license for hand gun purchases, a new role for churches, synagogues, mosques and other religious organizations, and other ideas to meet these new challenges.

Q: What's your reaction to criticism you've received about advocating small ideas?

A: I'm concerned about the fundamental choices we will face as we enter the 21st century: Will we continue on the path of growth and prosperity – or will we take prosperity for granted, and return to the reckless policies of the past? Will we make revolutionary changes in our education system to prepare our kids for the future – or will we just tinker at the edges? Will we build a safer world, a more connected world, a world of more open markets and more democracy – or will we turn our back on the world, and the opportunities it offers for our children?

I want revolutionary change in our public schools, starting with making high-quality preschool available to every child, in every community in America and tax free savings accounts to help more families send their kids to college. I think you ought to need a license to buy a handgun and there ought to be a new constitutional amendment to protect victim's rights. These are important ideas to meet the important challenges we face.

Q: Bradley says you have no life outside of Washington, DC.

A: You know, it's when I look back on my life, I realize just how blessed I've been to have so many different experiences. When I was born my Dad was serving Tennessee in Congress and he and my mom thought it was important that we all live together -- like many Congressional families do today. I had a wonderful opportunity to see history and to witness my father's courage -- standing up for racial equality, for Medicare to provide health care for seniors, and for the Interstate Highway System. But, every summer, when congress went home, we did too, to our farm in Tennessee. And let me tell you, my father taught me a thing or two about hard work on that farm. After college, I volunteered and

served in the Army. When I came home, I worked as a newspaper reporter in Nashville. Then, as most of you know, the people of Tennessee elected me to represent them, first in the House and then in the Senate. I've been honored to serve them and honored to serve the American people. You know, when I was a congressman and a Senator, I held town meetings all over the state -- in every one of Tennessee's 95 counties, because that's what our democracy is all about, people coming together to express their opinions and voice their concerns and hopes for the future.

Q: How has the Presidential scandal affected you? Do you think it will hurt you in 2000?

A: What the President did was terrible and wrong. But I can tell you this, the American people want us to move on, they want us to focus on their future, on America's future, on the issues they care about, and the problems they face. That's what I'm doing, that what I've done for six years, and that's what I'll continue doing. We face serious challenges that demand attention and action, like modernizing our schools, improving our healthcare system, preserving our economic prosperity, maintaining our environment, and improving the quality of our lives. That's where I'm focused.

Patients' Bill of Rights Event

Briefing prepared by Sarah Bianchi
Event Time: Thursday, July 15, 1999 3:25pm
Ohio Clock Room

EVENT

You are participating in a press conference event with Senator Democrats on the patients' bill of rights. This is a press conference designed for Democrats to comment on the status of the patients' bill of rights debate that has been before the Senate all week. **This event is open to the press.**

LOGISTICS

- Following your event in Gephardt's office with Colorado kids, you go to your office to meet Senator Daschle, Senator Kennedy and other Senators tbd;
- You and the Senators proceed to the Ohio Clock Room;
- You make a brief statement and take a few questions from the press *(See Q&As attached)*;
- Senator Daschle thanks you for your participating. You depart Capitol (Following your departure, the other Senators will continue the press conference).

YOUR ROLE AND CONTRIBUTION

This event provides an opportunity to comment on the patients' bill of rights currently being debated in the Senate.

NOTE ON THE STATUS OF THE DEBATE

As of this writing (Wednesday evening), the patients' bill of rights debate has fallen along partisan lines. The Republicans have resisted any efforts to strengthen their bill and Democratic amendments to improve the bill (such as assuring all patients in all health plans are covered and strong emergency room protections) have all been lost. The Republicans are offering some amendments of their own that attempt on the same protections the Democrats have offered as amendments (e.g. emergency room protections) While their new provisions are stronger in some cases than the provisions in their initial bill, they are generally still not acceptable.

The big question is what type of bill the Republicans will offer at the end of the day as a substitute amendment. This entire debate is generally being viewed as political. Clearly, it is perceived that the Democrats are in favor of a stronger bill, while the Republicans want a weakened bill.

There is some chance, although increasingly unlikely, that there will be a renewed bipartisan effort tomorrow through a potential bipartisan substitute bill introduced by Senators Chafee and Graham. It currently appears that they will not get an amendment slot from either the Republicans or the Democrats to offer their substitute. Their legislation is generally quite strong but they seem to have weakened their enforcement provision beyond what we could live with. (They appear to have dropped the civil monetary penalties that can be imposed by HHS, any punitive damage awards, and even non-economic damages in their enforcement provision). Moreover, they are currently short of 50 votes and Daschle has sent a quiet message that if they cannot get 50 votes on this, he will not likely give them a slot as there are many Democrats who still have amendments they want to bring up.

Senators Graham and Chafee are looking for more Republicans tonight and may modify their bill. We will know more on this tomorrow. If, in fact, there is some change and there is a chance for a bipartisan agreement, you clearly may want to change the tone of your remarks. We will keep you updated on the status of this.

ATTACHMENTS

- Q&As on patients' bill of rights
- Amendments that have been voted on (as of Wedsnesday at 7:30pm)
- Q&As on other topics provided by your press office

QUESTIONS AND ANSWERS ON THE PATIENTS' BILL OF RIGHTS

Q: As it seems highly unlikely to be any meaningful compromise legislation passed this week, won't the patients' bill of rights just will continue to be a political issue that divides the parties and will help your campaign for President? Isn't this the outcome you wanted?

A: Absolutely not. I have been around the country and heard story after story about patients who had care delayed or denied by HMOs and have suffered serious consequences. I believe Americans need and deserve a strong patients' bill of rights to assure them high quality care. The Congress should have passed a strong bill nearly two years ago when we first called for a patients' bill of rights. They should pass a strong bill today, and if they do not we will keep fighting until they do.

Q: Would the President really veto the Republican Leadership bill. Isn't something better than nothing?

A: We are simply not going to stand for legislation that is a false promise for America's patients. We are not going to stand for legislation that means that patients have to pass by two emergency rooms during a heart attack until they get to one covered by their HMO; allows health plans to define what is medically necessary; and does not even cover over 110 million Americans. We are going to continue to fight for a strong enforceable patients' bill of rights that gives Americans the protections they need.

Q: Senator Chafee, Senator Graham, and others have indicated their intention to offer a compromise amendment that provides many of the protections you seek, but severely limit the enforcement provisions you have advocated are necessary to hold health plans accountable. What is your position?

A: We have not seen the specifics of this legislation, but I am encouraged any time a bipartisan coalition of members come together to attempt to improve on the weakness of the Republican leadership bill. Having said this, I am very concerned about their enforcement provisions. They have dropped the civil monetary penalties that can be imposed by HHS; they have dropped any punitive damage awards that can be applied; and they are imposing caps on non-economic damages. Although better than current law, I believe this sets a dangerous precedent of preemption of state law, and it undermines the prospect of a viable enforcement provision.

Q: Won't the Patients' Bill of Rights raise health care costs and increase the number of the uninsured?

A: These are the "scare tactic" arguments from insurers and other special interests who oppose passing the patients' bill of rights. Every estimate produced by independent experts has concluded that the cost associated with the bill is quite modest. The Congressional Budget Office has estimated that the Democratic Leadership's Patients' Bill of Rights would increase premiums by less than $2 a month – an amount which most Americans would consider a small price to pay to assure the patient protections they need. Moreover, since many good plans already provide these protections, many workers won't see any increase at all.

Q: Isn't the only outstanding difference between you and the Republicans passing a Patients' Bill of Rights your insistence on providing for a right to sue?

A: No, there are numerous shortcomings in the Senate and House Republican Leadership bills. They leave out critical protections that would leave patients without the protections they need. They do not include access to specialists, do not assure patients won't lose their provider in the middle of treatment, and leave tens of millions of Americans without any guarantee of protections at all. These are serious shortcomings that need to be included in any patients' bill of rights.

Q: Would the President veto a Patients' Bill of Right s that did not allow Americans to sue their health care plans?

A: The President certainly is not going to sign a bill that does not have enforcement provisions that assure that patient protections are real. We are not interested in a bill of goods that leave patients without the protections they need and deserve. We are open to working with Republicans and Democrats to determine the best enforcement provision, but again – we are not interested in signing into law an empty promise.

LIST OF AMENDMENTS THAT HAVE BEEN VOTED ON

Senator Robb's amendment made series of improvements in women's health, including assuring mastectomies are covered and that women can designate an OB-GYN as their primary care provider. Lost 48-52.

Senator Nickles amendment to strike medical necessity in the Democratic Leadership Bill Adopted 52-48.

Senator Nickles amendment not to implement provisions in any bill if they are found to raise health insurance premiums by more than one percent. Adopted 52-48.

Senator Graham's amendment for strong emergency protections. Lost 47-53.

Senator Nickles amendment to strike a Kennedy-Daschle amendment to expand the scope of the Republican bill to cover all health plans. Senator Nickles amendment means that legislation would still leaves over 110 million Americans without any protections at all. It also speeds up the phase in of the self-employed tax deduction. Adopted 53-47.

Senator Snowe amendment that provides for increased hospital stays following a mastectomy and pay for a second opinion for cancer specialists. Passed 55-45. (Democrats opposed this because it struck a Dodd amendment on assuring coverage of clinical trials. They argued that they should not have to pick between these important protections).

STATEMENT BY VICE PRESIDENT AL GORE
PATIENTS BILL OF RIGHTS
Thursday, July 15, 1999

Right now, the United States Senate still has a chance to pass a real, enforceable, meaningful Patients' Bill of Rights to protect the health of America's families. But the Senate is letting that chance slip through its hands.

The Senate can pass a bill that provides basic rights to all Americans covered by health care plans. The right to see a specialist. The right to go to the closest emergency room. The right to remain with your doctor throughout a medical treatment, whether it's pregnancy, chemotherapy, or some other course of treatment. The right to hold a health plan accountable for its decisions if they are harmful.

But instead of standing up for the health of America's families, it is increasingly likely that Senate Republicans will stand with the special interest lobbyists and apologists.

The Republican leadership bill gives a green light to every back-room HMO bureaucrat in America. It says that if they want to deny you coverage, they can;

If they want to prevent doctors from referring you to the specialist you need, they can;

If they want to make you drive past two or three emergency rooms before they'll cover your care -- no matter how badly you are hurt – they can;

If they want to force a woman with breast cancer to switch health coverage in the middle of chemotherapy treatments, they can;

If they want to play judge, jury, and executioner when it comes to your appeals for harmful decisions; they can.

Let's be honest: that isn't a Patients' Bill of Rights. It's an Insurance Company Protection Plan. To say that our plan and their plan are the same thing is like saying that the veterinarian and the taxidermist are in the same business because either way, you get your dog back.

The truth is, many on the other side know the Republican leadership's bill is a phony bill. And it saddens me to see them treat the health of our families as a political parlor game. Some leaders on the other side have even backed down from their original support for a real Patients' Bill of Rights, and now say they'd be comfortable running on the Republican bill.

But the American people know: they'd be running on empty.

It's time for the Senate to pass a real, enforceable Patients' Bill of Rights. And if the Republicans keep pushing their bill of goods, then President Clinton is going to veto it -- and send them right back to the drawing board.