In addition, other surveys produced similar results. For example, 61% of California pediatricians responding to a 1975 survey said they would not object to a parental decision not to correct a life-threatening intestinal obstruction of an infant with Down's Syndrome. Another study found that 51% of Massachusetts pediatricians responding to a survey would not recommend surgery for such infants. Only 18.5% of the total sample of pediatricians would get a court order to treat intestinal atresia in a Down's Syndrome infant whose parents refused consent. See, "Treating the Defective Newborn: A Survey of Pediatricians' Attitudes," 6 Hastings Ctr. Rep. 2 (April 1976) and Todres, et al., "Pediatricians Attitudes Affecting Decision-Making in Defective Newborns," 60 Pediatrics 197 (1977).

The Department recognizes that parents retain the fundamental right, coupled with the high duty, to nurture and direct the destiny of their children (Pierce v. Society of Sisters, 268 U. S. 510). Yet, parental rights over their children are not absolute (Prince v. Massachusetts, 321 U. S. 158). The Department has determined that under every state law, failure of parents to provide necessary, medically indicated care to a child is either explicitly cited as grounds for action by the state to compel treatment or is implicitly covered by the

state statute. These state statutes also provide for appropriate administrative and judicial enforcement authorities to prevent such instances of medical neglect, including requirements that medical personnel report suspected cases to the state child protective service agency, agency access to medical files, immediate investigations and authority to compel treatment.

For example, in Application of Cicero, 421 N.Y.S. 2d 965 (1970), the child was born with spina bifida. Without an operation, it was unlikely that the child would live to the age of six months. The parents elected not to have the surgery and the court reversed this decision stating:

> This is not a case where the court is asked to preserve an existence which cannot be a life. What is asked is that a child born with handicaps be given a reasonable opportunity to live, to grow, and hopefully to surmount those handicaps. Id. at 937.

The court further noted the argument that this would interfere with the parents' rights to control the upbringing of their child but found that such parental rights are not absolute "where, as here, a child has a reasonable chance to live a useful, fulfilled life." Id. at 968.

The requirement imposed by state law that health care providers report instances of improper denial of medical care is no less a part of their program than is the provision of care itself. Both arise from the recipient's program of administering to the medical interests of its patients. Section 504 prohibits discrimination on the basis of handicap in the operation of federally-assisted programs and activities. Thus, a recipient which as a matter of practice or law reports to state authorities the withholding of needed medical treatment from an infant may not deny the same service or benefit to a qualified handicapped infant because the infant is handicapped. 45 C.F.R. 84.4(b)(1), 84.52(a).

Accordingly, while recipients may be restricted in their provision of treatment by the lack of parental consent, it is no less their obligation to operate their program without discrimination. This includes the obligation to report to appropriate officials instances of parental refusal to consent to the provision of necessary medically indicated treatment and to cooperate with those officials while continuing to provide all care not disallowed by the parents.

For quick and effective response to complaints, the Secretary counts on not only the enforcement resources of the Federal Government, but also on the assistance of state child protective agencies, which can respond quickly and effectively to referrals from the Federal Government, and which are often closest to the scene for speedy investigation of life-threatening child abuse and neglect. The Secretary intends to contact state child protective agencies whenever a complaint is received that falls within the definition of child abuse or neglect, in order to give States an opportunity to make their own investigation and to take appropriate action.

The Secretary expects that States will follow all necessary procedures for investigating allegations of child abuse and neglect that involve an imminent danger to life. State child protective agencies that receive federal financial assistance are under the same obligation as other recipients not to provide a qualified handicapped person with benefits or services that are less effective than those provided to others.

For those complaints that are expeditiously and effectively investigated and pursued by State agencies, the Secretary anticipates that additional federal efforts will often be unnecessary. The Secretary will closely monitor all investigation and enforcement activity taken pursuant to complaints. The

Secretary will make available to State agencies any information and assistance that is helpful and appropriate. For those cases where direct federal action appears helpful, the Secretary will have at her disposal the usual means of federal civil rights enforcement.

In order to conduct immediate investigations and to make immediate referrals to the Department of Justice for such legal action as may be necessary to save the life of a handicapped child who is subjected to discrimination by a recipient, the Department proposes to amend 45 C.F.R. 80.8 as referenced by 45 C.F.R. 84.61 which sets forth procedures for the Secretary to effect compliance with Section 504, including referrals to the Department of Justice for the initiation of appropriate legal proceedings. The existing regulations require a 10-day waiting period from the time the Secretary notifies a recipient of its failure to comply to the time the Secretary makes a referral to the Department of Justice or takes other legal action to effect compliance. When a handicapped infant is being denied food or other necessary medical care, however, more expeditious action is required. The proposed regulation creates a narrow exception to the 10-day waiting period when in the judgement of the responsible Department

official, immediate remedial action is necessary to protect the life of a handicapped individual.

A recipient of federal financial assistance must not only comply with the requirements established by the federal statute, but must also provide access to information pertinent to ascertain compliance with Section 504.

45 C.F.R. 80.6(c) as incorporated by 45 C.F.R. 84.61, clearly states that, "asserted considerations of ... confidentiality may not operate to bar" the Department from seeking access to sources of information. Thus, a reading of the existing Section 504 regulations discloses a clear intent that records kept by recipients be subject to disclosure to ascertain compliance. The disclosure of records to ascertain compliance is one of the requirements a recipient must comply with to obtain and then continue to receive federal funding. 45 C.F.R. 80.8(a) as incorporated by 45 C.F.R. 84.61. The Supreme Court has observed:

> Disclosures of private medical information ... to public health agencies are often an essential part of modern medical practice ... Requiring such disclosures to representatives of the State having responsibility for the health of the community does not automatically amount to an impermissable invasion of privacy." (Whalen v. Roe 429 U.S. 589, 602.

The Department has for over a decade balanced its need to gain access to medical information under the various civil rights statutes it administers, including Section 504 with the need to perserve confidentiality and it continues to be sensitive to such concerns.

> Information of a confidential nature obtained in connection with compliance evaluation or enforcement shall not be disclosed except where necessary in formal enforcement proceedings or where otherwise required by law." (45 C.F.R. 80.6(c)).

In addition, the confidentiality of medical records obtained in the course of a Section 504 investigation will be protected through nondisclosure under the Freedom of Information Act; the deletion of patient's and parents' names and other identifying information to the extent such deletion does not impede the Department's ability to ascertain compliance; and a special and separate filing system maintained in locked files.

In regard to access to medical records, the Department proposes only a limited modification of its existing ability to gain access to such records to assure compliance with Section 504.

45 C.F.R. 80.6(c), as referenced by 45 C.F.R. 84.61 requires each recipient to permit access by Department officials to facilities and information pertinent to ascertaining compliance with Section 504, during normal business hours. Allegations of denial of food or other necessary medical care to handicapped infants may require an immediate effort to ascertain compliance. The Department's proposed change provides that access to records and facilities of recipients shall not be limited to normal business hours when, in the judgement of the responsible Department official, immediate access is necessary to protect the life or health of a handicapped individual.

The May 4, 1977, regulations of the Department regarding Section 504 incorporate by reference the procedural provisions applicable to Title VI of the Civil Rights Act of 1964. These procedures provide in part:

> "information to beneficiaries and participants. Each recipient shall make available to participants, beneficiaries, and other interested persons such information regarding the provisions of this regulation and its applicability to the program for which the recipient receives Federal financial assistance, and make such information available to them in such manner, as the responsible Department official finds necessary to apprise such persons of the protections against discrimination assured them by the Act and this regultation." (45 C.F.R. 80.6(d)).

45 C.F.R. 80.6(d), as referenced by 45 C.F.R. 84.61, which requires recipients to make available such information, in such a manner, as the Department finds necessary to apprise appropriate persons of the protections afforded under Section 504. The proposed regulation specifies the type of information and manner of posting that is necessary to bring the protections of Section 504 for handicapped infants to the attention of those persons within the recipient program or activity who are most likely to have knowledge of possible violations as they occur. The requirement with regard to the posting of notices is a time-honored and reasonable method for providing notice to concerned individuals with respect to civil rights protections now utilized under a variety of programs (Cf., the Contract Compliance Program administered by the Department of Labor pursuant to E.O. 11246; Title VII of the Civil Rights Act of 1967).

In addition, the purpose of the proposed posting requirement is to acquire timely information concerning violations of Section 504 that are directed against handicapped infants, and to save the life of the infant. The Secretary believes that those having knowledge of violations of Section 504 against handicapped infants do not now have adequate opportunity to give immediate notice to federal authorities. A telephone complaint procedure can provide information to federal authorities in time to save the life of a handicapped infant who is being discriminatorily denied nutrition in a federally assisted program or activity.

Federal enforcement action can also be taken against any recipient that intimidates or retaliates against any person who provides information concerning possible violations of Section 504 45 C.F.R. 80.7(e), as referenced by 45 C.F.R. 84.61, prohibits intimidatory or retaliatory acts by recipients against individuals who make complaints or assist in investigations concerning possible violations of Section 504. This provision fully protects individuals who make compliants or assist in investigations concerning possible withholding of food or other necessary medical care from handicapped infants.

This proposed regulation does not in any way change the substantive obligations of health care providers previously set forth in the statutory language of Section 504, in the implementing regulations, and in the Notice to Health Care Providers. The proposed regulation sets forth procedural specifications designed (1) to specify a notice and complaint procedure, within the context of the existing regulations, and (2) to modify existing regulations to recognize the exigent circumstances that may exist when a handicapped infant is denied food or other necessary medical care.

Comments solicited. The Secretary seeks public comment on all aspects of the proposed regulation and on the appendix to the proposed regulations, especially on those categories cited in the appendix as clear violations of Section 504 and on additional situations that may represent clear violations of Section 504. Comments will be considered and modifications made, as appropriate, following the comment period.

The Secretary also solicits comments on the following questions:

1. Should recipients providing health care services to infants be required to perform a self-evaluation, pursuant to 45 C.F.R. 84.6(c)(1), with respect to their policies and practices concerning health services to handicapped infants?

2. Should such recipients be required to identify for parents of handicapped children born in their facilities those public and private agencies in the geographical vicinity that provide services to handicapped infants?

3. Should recipients be required to institute internal review boards, such as were suggested by the report of the President's Commission for the Study of Ethical Problems in Medicine and Biomedical and Behavioral Research, to review cases where the parents and/or physician have decided to withhold life-sustaining treatment? If so, should this be an alternative or an addition to the requirements of the proposed rule? If it is proposed to be an alternative, what procedures should the Department follow to meet its responsibilities under existing law and regulations to investigate complaints and effect compliance with Section 504?

4. Should existing procedures requiring prompt investigations of complaints of violations of Section 504 relating to health care for handicapped infants be revised? If so, how should these investigations be conducted so as to assure timely and effective investigations while minimizing any disruptive impact on the hospital?

5. As indicated above, Section 504 requires that medically beneficial treatment not be withheld on the basis of handicap. Are there further explanations which would assist health care providers and the public in understanding the requirements of Section 504 in connection with health care for handicapped infants?

6. Are there implications concerning cost and the allocation of medical resources in requiring that medically indicated treatment not be withheld from infants solely on the basis of handicap which are different from the implications inherent in all cases of determining the appropriate course of treatment for patients? If so, what are examples of cases where medically indicated treatment would, but for the legal requirements of Section 504, be withheld? In such cases, is cost or resource allocation the reason medically indicated treatment would be withheld?

7. In balancing the interests of parents in deciding matters relating to their children with the interests of the government in protecting the lives of all of its citizens, if the appropriate dividing line is not the deprivation of life-sustaining, medically indicated treatment, what should the dividing line be? Is there disagreement with the Department's position that the fact that a handicapped infant may

be unwanted by parents due to perceived economic, emotional and marital effects does not justify the deprivation of life-sustaining, medically indicated treatment?

8. In addition to the existing safeguards, explained above, regarding the confidentiality of information obtained by HHS in connection with civil rights investigations, are there other safeguards which should be implemented?

9. Are there other alternative means for the Department to meet its responsibilities to implement and enforce Section 504 in connection with health care for handicapped infants?

Part 84--(Amended)

45 C.F.R. 84.61 is proposed to be amended by designating the existing provision as paragraph (a) and by adding paragraphs (b), (c), and (d) to read as follows:

S. 84.61(Amended)

(b) Pursuant to 45 C.F.R. 80.6(d), each recipient that provides covered health care services to infants shall post and keep posted in a conspicuous place in each nurses' station with responsibility for each delivery ward, each maternity ward, each pediatric ward, and each nursery, including each intensive

care nursery, which shall be no smaller than 8-1/2 by 11 inches, the following notice:

DISCRIMINATORY FAILURE TO FEED AND CARE FOR HANDICAPPED INFANTS

IN THIS FACILITY IS PROHIBITED BY FEDERAL LAW

Section 504 of the Rehabilitation Act of 1973 states that no otherwise qualified handicapped individual shall, solely by reason of handicap, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance.

Any person having knowledge that a handicapped infant is being discriminatorily denied food or customary medical care should immediately contact:

Handicapped Infant Hotline
U. S. Department of Health and Human Services
Washington, D. C. 20201
Phone: 800---368-1019 (Available 24 hours a day)

or

Your State Child Protective Agency

Federal law prohibits retaliation or intimidation against any person who provides information about possible violations of the Rehabilitation Act of 1973.

Identity of callers will be held confidential.

Failure to feed and care for infants may also violate the criminal and civil laws of your State.

(1) Recipients shall add to the notice, in type face or handwriting, under the words "Your State Child Protective Agency," the identification of an appropriate State agency, with address and telephone number. No other alterations shall be made to such notice.

(2) Copies of such notice may be obtained on request from the Department of Health and Human Services.

(c) Notwithstanding the provisions of paragraph (a), the requirement of 45 C.F.R. 80.8(d)(3) shall not apply when, in the judgement of the responsible Department official, immediate remedial action is necessary to protect the life or health of a handicapped individual.

(d) Notwithstanding the provisions of paragraph (a), access to pertinent records and facilities of a recipient pursuant to 45 C.F.R. 80.6(c) shall not be limited to normal business hours when, in the judgement of the responsible Department official, immediate access is necessary to protect the life or health of a handicapped individual.

APPENDIX

Applicability of Section 504 to the Provision of Health Care to Handicapped Infants

By a notice to Health Care Providers dated May 18, 1982, the Department reminded hospitals that Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. Section 794) applies to the provision of health care services to handicapped infants. Regulations in effect since 1977 have applied Section 504 to providers of health services. (45 C.F.R. Sections 84.51-52). The protections of Section 504 apply to all handicapped persons without regard to age.

The following comments are intended to explain the manner in which Section 504 applies to the provision of health care services to handicapped infants.

The Notice to Health Care Providers of May 18, 1982, explained that under Section 504 "it is unlawful for a recipient of federal financial assistance to withhold from a handicapped infant nutritional sustenance or medical or surgical treatment required to correct a life-threatening condition, if:

(1) the withholding is based on the fact that the infant is handicapped; and

(2) the handicap does not render the treatment or nutritional sustenance medically contraindicated."

The Secretary's experience in enforcing this standard, along with comments received by the Department, suggest a need to clarify in what situations Section 504 does and does not apply.

Section 504 is in essence an equal protection, nondiscrimination standard. Congress expressly intended Section 504 to prohibit discrimination based on handicap in the same way that Title VI of the Civil Rights Act prohibits discrimination based on race. Programs or activities receiving federal financial assistance may not deny a benefit or service on grounds of a person's handicap, just as they may not deny a benefit or service on grounds of a person's race.

Regulations governing federally assisted health care providers implement the nondiscrimination approach of Section 504 by stating that "a recipient may not, on the basis of handicap ... (d)eny a qualified handicapped person these benefits or services ...." 45 C.F.R. Section 84.52(a).

Section 504 applies when (1) a handicapped person is qualified to receive benefits or services from a federally assisted program or activity and (2) these benefits or services are denied because of the person's handicap.

In the context of health care services provided to handicapped infants, a handicapped infant is qualified to receive those benefits and services that are (1) generally provided by the program or activity, and (2) are appropriate, in the exercise of reasonable medical judgement, to the circumstances of the particular handicapped infant.

Section 504 does not intrude upon legitimate medical judgement. A handicapped infant is not "qualified" to receive medical care or treatment that is contrary to reasonable medical judgement -- i.e., "medically contraindicated."

Not all judgements made by a health care provider, however, are medical judgements. For example, a judgement not to treat a black infant because of the infant's race is not a medical judgement. A judgement not to treat a physical complication in a Down's Syndrome infant because the infant suffers the handicap of Down's Syndrome is likewise not a medical judgement.

The Secretary does not interpret Section 504 to apply to any case in which care or treatment is withheld on the basis of legitimate medical judgement. If a particular form of treatment is of dubious medical benefit to the patient or if the patient could not long survive even with the treatment, reasonable medical judgement could withhold the treatment, and Section 504

does not require that the treatment be given. Section 504 does not compel medical personnel to attempt to perform impossible or futile acts or therapies. Thus, Section 504 does not require the imposition of futile therapies which merely temporarily prolong the process of dying of an infant born terminally ill.

For example, a child born with anencephaly will inevitably die within a short span of time; therefore, treatment to correct life-threatening complications may be withheld. Such withholding is on the basis of the legitimate medical judgement that the child would die imminently even with the treatment. The decision to withhold treatment is therefore not based on handicap, and is not prohibited by Section 504.

Also, a decision to withhold extraordinary care from an extremely low-birthweight infant does not implicate Section 504 if the decision is based on a reasonable medical judgement concerning improbability of success in a course of treatment, or risks and potential harm in the course of treatment.

At the same time, the basic provision of nourishment, fluids, and routine nursing care is a fundamental matter of human dignity, not an option for medical judgement. Even if a handicapped infant faces imminent and unavoidable death, no

health care provider should take upon itself to cause death by starvation or dehydration. Routine nursing care to provide comfort and cleanliness is required to respect the dignity of such an infant. To deny these forms of basic care to handicapped individuals would constitute discrimination contrary to Section 504.

For those handicapped infants, on the other hand, who could live if given treatment for a life-threatening congenital anomaly, any decision to withhold treatment which is based on the infant's handicap rather than on a medical judgement, constitutes discrimination contrary to Section 504. Sector 504 prohibits any denial of benefits or services because of a handicap such as mental retardation, blindness, paralysis, deafness, or lack of limbs. Any judgement that a person is not worthy of treatment due to such handicap is not, of course, a medical judgement, even if made by doctors within a medical facility.

A clear violation of Section 504 occurs if a federally assisted program or activity denies a benefit or service to a handicapped infant that would be provided but for the individual's handicap. The Secretary deems the following to be examples -- not a comprehensive list -- of denials of treatment that constitute a violation of Section 504:

1. Down's Syndrome with intestinal obstruction, denial of surgery to correct obstruction. Current medical practice in the United States is to correct intestinal atresia in infants with no other congenital anomaly. See 60 Pediatrics 588, 591 (1977). Any decision not to correct intestinal atresia in a Down's Syndrome child, unless an additional complication medically warrants such decision, must be deemed a denial of services based on the handicap of Down's Syndrome. The same reasoning applies to a case of Down's Syndrome with esophogeal atresia, denial of surgery to correct atresia. Any refusal to give treatment to a Down's Syndrome infant for other physical complications, such as operable heart defects, if such complications would be treated for children without Down's Syndrome, similarly constitutes a violation of Section 504.
2. Denial of care or treatment that would be given to a non-handicapped infant, on grounds that a particular infant is potentially mentally impaired, or blind, or deaf, or paralyzed, or lacking limbs, or impaired in any other major life activity.
3. Denial of treatment for medically correctable physical anomalies in children born with Spina Bifida, when such denial is based on anticipated mental impairment, paralysis,

or incontinence of such child, rather than on reasonable medical judgements that treatment would be futile or too unlikely of success given complications in the particular case.

4. Denial of food or fluids to any handicapped infant, except in cases where such care would be harmful to the infant.

TAB C

INFANTICIDE WORKING GROUP MEMBERS

DEPARTMENT OF HEALTH & HUMAN SERVICES

John A. Svahn
Carl Anderson
Juan del Real
John Casciotti
Betty Lou Dotson
George Siguler
C. Everett Koop

DEPARTMENT OF JUSTICE

Bradford Reynolds
Richard Willard
Neil Koslowe
Mark Disler

EXECUTIVE OFFICE OF THE PRESIDENT

Becky Norton Dunlop
Stephen Galebach
Peter Rusthoven
William Barr
John Cogan
Ken Clarkson

LIST OF ATTENDEES
FOR APRIL 29, 1983 MEETING

AMERICAN ACADEMY OF PEDIATRICS

James Strain, M.D. - President
George Little, M.D. - Chairman, Fetus & Newborn Committee

AMERICAN MEDICAL ASSOCIATION

Dorothy Moss - Assistant Director, Dept. of Federal Affairs
Randy Fenninger - Counsel

NATIONAL ASSOCIATION OF CHILDRENS HOSPITALS

Robert Sweeney - President
Robert Grett, M.D. - Past Chmn. & Chmn. of Task Force on Medical Ethics

AMERICAN HOSPITAL ASSOCIATION

Richard Epstein - Senior Vice President
James Marrinan - Director, Federal Agency Affairs

FEDERATION OF AMERICAN HOSPITALS

Mary Grealy - Legislative Counsel

CHILDREN'S HOSPITAL NATIONAL MEDICAL CENTER

Robert H. Parrott, M.D. - Director
Anne Fletcher - Director of the Nursery

NATIONAL PERINATAL ASSOCIATION

George K. Degnon - Executive Director

AMERICAN COLLEGE OF OBSTETRICIANS AND GYNECOLOGISTS

Ervin E. Nichols, M.D. - Director, Practice Activities

LIST OF ATTENDEES
FOR MAY 3, 1983 MEETING

ASSOCIATION FOR RETARDED CITIZENS

Paul Marchard - Director of Governmental Affairs Office
Martin Gerry

DISABILITY RIGHTS CENTER

Tom Neerney - Fellow at the Kennedy Foundation

DISABILITY RIGHTS EDUCATION AND DEFENSE FUND

Craig Coble - Research Consultant

AMERICANS UNITED FOR LIFE

Burke Balch

AMERICAN LIFE LOBBY

Gary Curran

CHRISTIAN ACTION COUNCIL

Doug Badger

NATIONAL RIGHT TO LIFE COMMITTEE

Janet Carroll - Associate Legislative Director
William Olson

SPINABIFIDA ASSOCIATION

Martin Holtz

DOWN SYNDROME CONGRESS

Greg Weigle - Board of Directors

AD HOC COMMITTEE IN DEFENSE OF LIFE

Robert Tobin

Document No. 139448 PL

WHITE HOUSE STAFFING MEMORANDUM
OFFICE OF PUBLIC LIAISON

DATE: 83/05/20 ACTION/CONCURRENCE/COMMENT DUE BY: 83/05/25

SUBJECT: Scheduling recommendation - National Rifle Assoc. to present Pres with honorary life membership.

	ACTION	FYI		ACTION	FYI
WHITTLESEY	☐	☐	TILLER	☐	☐
VIPOND	☐	☐	VILA	☐	☐
ROUSSELOT	☐	☐	GRAF	☐	☐
✓ BLACKWELL	☑	☐	SUNDSETH	☐	☐
BUCKALEW	☐	☐	MORECI	☐	☐
GALE	☐	☐	_____	☐	☐
JACOBI	☐	☐	_____	☐	☐
JEPSEN	☐	☐	_____	☐	☐

REMARKS:

RESPONSE: Strongly endorse. This is a follow-up to the President's recent speech to this group in Phoenix.
M. Blackwell

Faith Ryan Whittlesey
Assistant to the President
Ext. 2270

MAY 20 1983

THE WHITE HOUSE

WASHINGTON

MAY 20, 1983

MEMORANDUM

TO: FAITH WHITTLESEY

FROM: FREDERICK J. RYAN, JR., DIRECTOR
PRESIDENTIAL APPOINTMENTS AND SCHEDULING

SUBJ: REQUEST FOR SCHEDULING RECOMMENDATION

PLEASE PROVIDE YOUR RECOMMENDATION ON THE FOLLOWING SCHEDULING REQUEST UNDER CONSIDERATION:

EVENT: Honorary Life Member of National Rifle Association of America

DATE: ---

LOCATION: ---

BACKGROUND: See attached

YOUR RECOMMENDATION:

Accept___ Regret___ Surrogate Message___ Other___
Priority___
Routine ___

IF RECOMMENDATION IS TO ACCEPT, PLEASE CITE REASONS:

RESPONSE DUE 5-26-83 TO Sarah Long

Scheduling... attn Fred Ryan

NATIONAL RIFLE ASSOCIATION OF AMERICA
INCORPORATED 1871
1600 RHODE ISLAND AVENUE, N.W.
WASHINGTON, D.C. 20036

OFFICE OF THE PRESIDENT

May 14, 1983

#139448

The President
The White House
Washington, D. C.

Dear Mr. President:

It is my honor and warm privilege to inform you of your election as an Honorary Life Member of the National Rifle Association of America. In the 112-year history of this venerable and patriotic organization, only twelve individuals have ever been accorded this singular honor before you.

This action was taken by the Board of Directors at its meeting in Phoenix, Arizona, following the Annual Meeting of Members, and the vote of the Board was unanimous. In accordance with the ByLaws of the Association, an individual may be nominated as an Honorary Life Member by the Executive Council and be elected to such membership by the Board of Directors. This recognition is for outstanding service to the Association on a national scale in any one or more of the primary fields of endeavor of the National Rifle Association of America. The recognition is highly prized but rarely conveyed.

Because of my relationships with you over the years as a conservative Republican Congressman for Alaska, and before that as an Alaska State Senator and Territorial Representative (before Statehood in 1958), I am particularly proud, as my first official act of office as the new President of the Association to advise you of this historic appointment and high honor.

It goes without saying, Mr. President, that the Official Family and more than 2.5 million members are proud indeed to have you as a member and now as an Honorary Life Member of the Association.

God love you and keep you and yours always.

Respectfully,

Howard W. Pollock

Howard W. Pollock,
President

The last sentence of the second paragraph should be changed. As written, the President would be saying that paradoxes are underlying truths that may seem contradictory on the surfaces. That is not what a paradox is.

I suggest the sentence be changed to read: The answers lie in seeming paradoxes, but underlying truths often appear contradictory on the surface.

M. Beckham

5/19/83

THE WHITE HOUSE

WASHINGTON

May 12 , 1983

MEMORANDUM FOR FAITH RYAN WHITTLESEY

VIA JONATHAN VIPOND

FROM MORTON C. BLACKWELL

SUBJECT: Draft of Presidential Letter to Paul Weyrich

This letter is almost satisfactory, but I strongly suggest one change.

In the fourth paragraph, next to last sentence, change the sentence to read: "Whether by contributions to a candidate or by independent political activity, the essence of a free society with a republican form of government is for citizens to be free to work together voluntarily to express their views."

Morton - JV III
read this and
said it looks
fine. Would you
please look
at it & Comment Yeah

Document No. 125188SS

WHITE HOUSE MEMORANDUM

DATE: May 11, 1983 ACTION/CONCURRENCE/COMMENT DUE BY: TOMORROW c.o.b. May 12

SUBJECT: Presidential letter to Paul Weyrich Concerning Political Action Committees

	ACTION	FYI		ACTION	FYI
VICE PRESIDENT	☐	☐	GERGEN	☑	☐
MEESE	☐	☑	HARPER	☐	☐
BAKER	☐	☑	JENKINS	☐	☐
DEAVER	☐	☑	MURPHY	☐	☐
STOCKMAN	☐	☐	ROLLINS	☑	☐
CLARK	☐	☐	WHITTLESEY	☑	☐
DARMAN	☐P	☑SS	WILLIAMSON	☑	☐
DUBERSTEIN	☑	☐	VON DAMM	☐	☐
FELDSTEIN	☐	☐	BRADY/SPEAKES	☐	☐
FIELDING	☑	☐	ROGERS	☐	☐
FULLER	☑	☐	_____	☐	☐

Remarks:

Please provide any comments/edits by tomorrow, May 12th.

Thank you.

Richard G. Darman
Assistant to the President
(x2702)

Response:

THE WHITE HOUSE

WASHINGTON

May 9, 1983

MEMORANDUM FOR RICHARD DARMAN

FROM: EDWIN L. HARPER

SUBJECT: Presidential Letter to Paul Weyrich
Concerning Political Action Committees

Attached is a proposed draft for a letter from the President in response to Paul Weyrich's inquiry concerning political action committees. The letter repeats the President's stance of two years ago in opposition to legislative moves to place additional restrictions on political action committees.

I have attached copies of (1) Weyrich's letter to the President dated January 31, 1983 and (2) an earlier letter from the President to Weyrich, dated June 2, 1982, concerning the same topic.

Would you please staff this letter to the appropriate offices for their review.

Dear Paul:

Thank you for your letter concerning congressional efforts in the 98th Congress to restrict the activities of political action committees and individuals who participate in the electoral process. I share your conviction that the freedom of all Americans to express their views in the electoral process is among the most precious of our rights as American citizens.

Apparently, some who disagree with my view are making an effort in the 98th Congress to restrict the ability of groups of citizens to participate effectively in the electoral process. You ask my view now of legislation to limit the amount of money that groups of citizens can give to candidates, to limit the amount that candidates can receive from such groups, to begin taxpayer financing of congressional campaigns, and to restrict independent expenditures by voluntarily supported organizations.

Overregulation of citizen involvement is a serious danger to an open and free democratic process. I have stated my firm opposition to the Obey-Railsback bill, which failed to pass the 96th Congress. I will certainly oppose any similar legislation in the future.

Intrusive limitations on our freedom to engage in political, electoral speech must be avoided. The essence of a free society with a republican form of government is for citizens to be free to work together voluntarily to express their views. How else can they hope to guide the government toward the course they prefer?

I believe that the attention of our legislators in this area should focus on <u>improving</u> the opportunities of people to participate openly and honestly in the political process without harrassment from a federal bureaucracy.

Our election laws today are too complex. They give too many opportunities for regulators to trip up even the most careful candidates. It is too easy for selective enforcement to target any candidate or committee based on technical violations.

True reform would simplify our election laws, not complicate them. In addition, the dollar limits on contributions put in place in the early 1970s have been drastically eroded in value by inflation. A maximum allowed contribution of $1,000 ten years ago is worth less than half that today. We obviously need to raise the dollar limits to account for the effects of inflation.

I appreciate your support for improving our democratic process and opposing any efforts to overregulate our elections.

If it comes to a fight in this Congress, you can count on me to fight.

Sincerely yours,

Ronald Reagan

The Committee for the Survival of a Free Congress

721 SECOND STREET, N.E. • CAPITOL HILL • WASHINGTON, D.C. 20002 • (202) 546-3000

January 31, 1983

123820

President Ronald Reagan
The White House
Washington, D.C.

Dear President Reagan:

In 1981 I wrote to inquire about your position on further restrictions on Political Action Committees. Your response in June of that year stated that you "would surely oppose any bill similar to the Obey-Railsback proposal."

As the 98th Congress begins, it is apparent that there will be a renewed effort to restrict the activities of PACs and individuals in the electoral process. While it is not yet clear exactly what the content will be, legislation will certainly be introduced in both the House and the Senate which will attempt to limit the role of PACs in Congressional elections by placing limits on the amount of money that PACs can give or by placing limits on the amount of PAC money that candidates can accept. Additionally, proposals to implement taxpayer financing of Congressional elections and to restrict the ability of organizations to engage in independent expenditures are likely to be offered.

You stated in your letter that "in my view the growth of political action committees has enabled many thousands of people to increase their participation in the political process" and that "the freedom of all Americans to organize themselves voluntarily to affect the course of their government is a precious right." The legislation which is likely to emerge in Congress during this session will undoubtedly serve to limit the rights of people to influence or affect the course of their government and reduce their participation in the political process.

You stated that "our election laws need to be simplified rather than made more burdensome." Whether the Congress considers a further limit on the ability of PACs to contribute to candidates or a limitation on the rights of organizations to engage in independent expenditures, the federal election laws will become more complicated, not less.

The arguments you set forth in your 1981 letter are still valid. As Congress begins to consider the legislation that will emerge from the

House and Senate Committees concerning election laws, a letter re-affirming your opposition to Obey-Railsback type legislation and stating your opposition to legislation which would restrict the practice of independent expenditures would be most appropriate.

Thank you for your continued support for an open electoral system. I look forward to your response to this request.

Sincerely,

Paul M. Weyrich

Paul M. Weyrich
Executive Director

PMW/rsm