



ASSISTANT SECRETARY

DEPARTMENT OF THE TREASURY  
WASHINGTON

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July 18, 1994

MEMORANDUM FOR SECRETARY BENTSEN  
DEPUTY SECRETARY ALTMAN

FROM: Alicia Munnell

SUBJECT: Health Care Briefing for Economic Team in  
Preparation for Wednesday, July 20, 1994  
Press Briefing

Date and Time July 19, 1994, at 11:30 a.m.

Location Roosevelt Room, White House

PARTICIPANTS:

Treasury Secretary Bentsen  
Deputy Secretary Altman  
Alicia Munnell  
Marina Weiss

Others Commerce Secretary Brown  
Labor Secretary Reich  
Robert Rubin  
Laura Tyson  
Alice Rivlin  
Erskine Bowles  
Gene Sperling  
Others TBD

BRIEFING: TAB A - Overview  
TAB B - Profile of the Uninsured - Myth vs.  
Reality  
TAB C - Draft Comments for Wednesday Press  
Briefing  
TAB D - Sample State/District Summary Sheets  
TAB E - Questions and Answers

## Overview

One hour press events are being planned for Wednesday and Thursday for Secretary Bentsen, Bob Rubin, Laura Tyson and Alice Rivlin to discuss about health care issues. A pre-briefing is scheduled for Tuesday at 11:30 am in the Roosevelt Room.

The format of the press events will be as follows;

- o Secretary Bentsen will welcome the press and introduce the speakers
- o Each speaker will talk for approximately 7 minutes.
  - Laura Tyson -- insurance reform.
  - Alice Rivlin -- cost containment.
  - Secretary Bentsen -- characteristics of the uninsured.
  - Robert Rubin -- workforce issues.
- o A half - hour question and answer session will follow the presentations.

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## PROFILE OF THE UNINSURED: MYTH VS. REALITY

As health reform reaches a critical stage in Congress, fashioning the right solution requires having a clear understanding of the characteristics of the uninsured. Contrary to popular myth, the uninsured are not all poor, elderly, or otherwise vulnerable. In fact, over half of the uninsured live in families where at least one spouse is a *full-year, full-time* worker. Roughly 84 percent come from families whose head works at least part of the year. In addition, while even short exposures without insurance put people at significant financial and health risk, being uninsured is predominately a long-term problem. Finally, those who do purchase insurance, and taxpayers as a group, bear much of the burden of the uninsured -- through both "cost shifting" to private insurance premiums and increased spending on public programs.

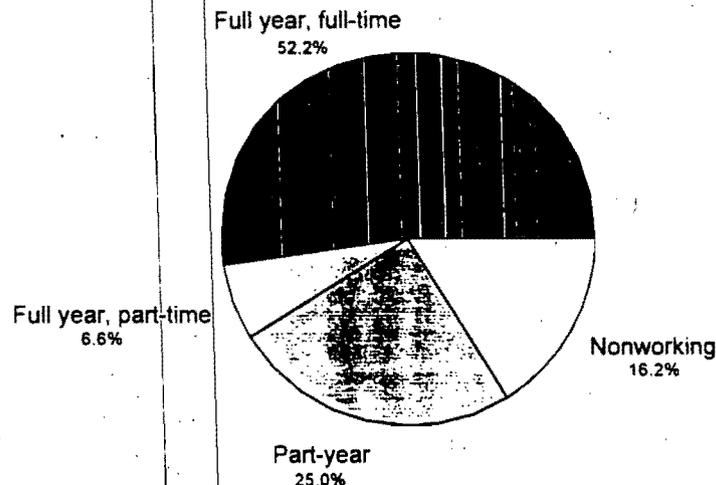
**Myth #1:** *The uninsured are unemployed.*

**Reality:** The uninsured are working Americans.

The vast majority of the uninsured -- 83.8 percent -- belong to working families. Federal programs already cover most of the non-working population. Medicare provides near-universal coverage for those over 65, and Medicaid covers 50 percent of those in poverty and 25 percent of those just above the poverty line.

As a result, large numbers of the uninsured are clustered in working families with moderate incomes, who do not qualify for Medicaid. Insurers in general charge higher rates to the self-employed and small businesses, which makes it difficult for them to obtain affordable coverage.

### Job Status of the Uninsured



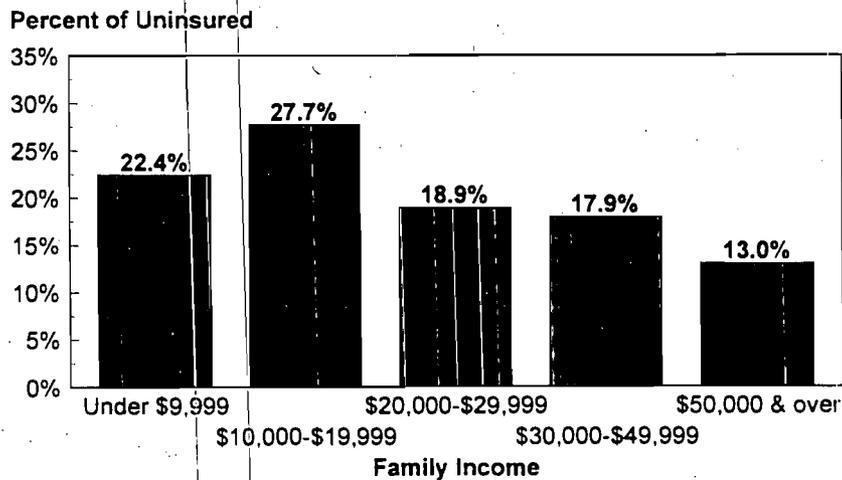
**Myth #2:** *The uninsured are poor.*

**Reality:** The bulk of the uninsured have moderate incomes; many are middle-class.

The vast majority of the uninsured -- 72 percent -- have incomes above the federal poverty threshold. While the average uninsured American family is a lower-income family, it is far from being in poverty.

The bulk of the uninsured are in hard-working families for whom health insurance is unaffordable. Because small businesses and the self-employed have difficulty obtaining affordable insurance, almost one in three of the uninsured is a member of a family making more than \$30,000 a year.

### Family Income of the Uninsured

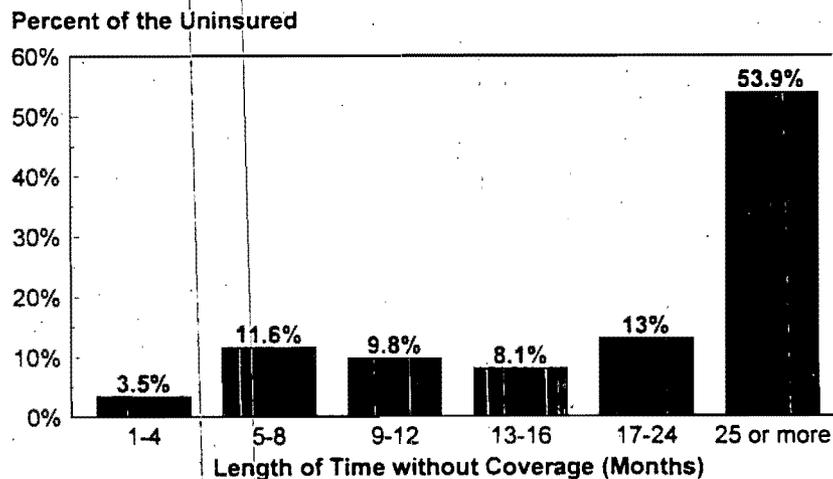


**Myth #3:** *For most of the uninsured, being without health insurance is a short-term, rather than a long-term, problem.*

**Reality:** 54 percent of those uninsured today will be uninsured for more than two years. 75 percent will be uninsured for more than a year.<sup>1</sup>

Some have suggested that being uninsured is a short-term problem, not a long-term condition. Even short periods of time without insurance do put people at significant financial and health risk. But being without health insurance is not a short-term problem. A researcher from the University of Missouri reports that nearly 75 percent of uninsured Americans are "chronically" uninsured, and will remain uninsured for longer than one year. Less than one in twenty out of those uninsured today will obtain health coverage before they have been uninsured for five months.

### Distribution of Uninsured, by Time without Coverage

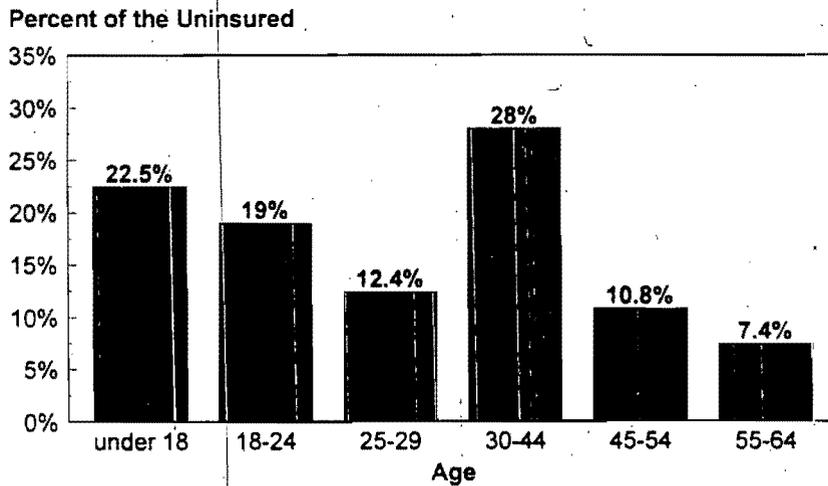


**Myth #4:** *The uninsured are mainly young and healthy; they choose not to buy insurance.*

**Reality:** Almost one quarter of the uninsured are children. Nearly half of the uninsured are over 30. Less than 30 percent of the uninsured are between 18 and 30 years of age.

While a disproportionate share of the uninsured are young, this is the result of low incomes and poor access to affordable insurance.

### Age of the Uninsured



**Myth #5:** *I have health insurance—the uninsured do not affect me.*

**Reality:**

- Americans who lose their jobs may well become uninsured.
- Private insurance costs are high because of the uninsured.
- Taxes are higher because of high Federal health costs.

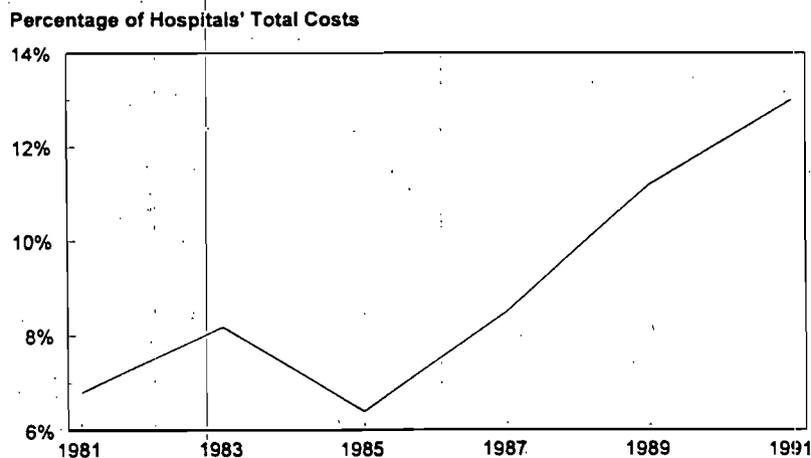
Nine out of ten Americans with private health insurance receive insurance through employers. Those who lose their jobs for an extended period of time may well lose their health insurance.

In addition, the uninsured place a large direct burden on those who do have insurance -- through higher taxes and through higher private insurance premiums. The effects of a large uninsured population go well beyond the individuals without coverage. The uninsured do receive health care -- often in emergency rooms, at very high costs. Hospitals and doctors raise the fees they charge those who have private insurance in order to cover the bill for the inefficient, high-cost services received by the uninsured.

The lack of private health insurance for some raises taxes for all. Some say the obvious solution is to cut, or "cap," federal health care spending. But cutting Medicare and Medicaid puts pressure on doctors and hospitals to raise the fees they charge those with private insurance. As the government pays less, everyone else pays more.

According to the Congressional Budget Office, unreimbursed costs for hospitals alone totaled over \$28 billion in 1991. As a result, private payers are charged substantially more by hospitals than the actual cost of their services.

**Hospitals' Unreimbursed Costs, 1981-1991**



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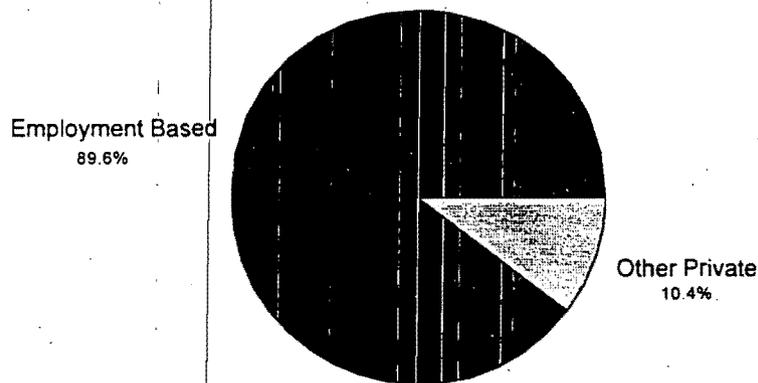
**Myth #6:** *An employer mandate is not necessary to fix the health care system, or to decrease the number of uninsured.*

**Reality:** The United States has an employment-based health care system. The major cause of increasing numbers of uninsured is employers dropping coverage.

According to the March 1993 Current Population Survey, nine out of ten of the nonelderly who purchase private insurance obtain it through the workplace.

Recent increases in the number of uninsured can be attributed to a decline in the number of employers who offer coverage. The share of the nonelderly population with employment-based coverage declined from 66.8 percent in 1988 to 62.5 percent in 1992. This fall was partly offset by a rise in the number of nonelderly Americans with publicly-financed health insurance -- from 12.4 percent to 15.1 percent. Even with this boost in publicly-financed coverage, the share of the non-elderly who are uninsured grew from 15.9 percent of the population in 1988 to 17.4 percent in 1992.

#### Source of Private Health Insurance, 1992



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## **Conclusion**

For millions of Americans with health insurance, the fear of losing their health coverage is a constant source of insecurity: over 38 million Americans were uninsured at some point in time in 1992.

Universal coverage is a universal issue. It is not simply about the unemployed, the poor, and or the young and healthy. Hard-working Americans are disadvantaged by today's health care system, and have the most to gain by reform that includes universal coverage. Today, the statistics show that the poor and elderly are covered by government programs, while millions of working Americans and their families are uninsured. Universal coverage is essential to strengthen the link between work and security.

It makes sense to build on the employer-based system. Most people today with private insurance obtain it through their employer -- it is a system that works for the vast majority of Americans. With universal coverage, small business will pay the same rates for the same coverage as do large businesses, and those who purchase insurance will no longer pay for those who do not.

## NOTES

Unless otherwise indicated, all numbers come from the March 1993 Census Population Survey. All CPS numbers refer to the non-elderly population (less than 65 years of age).

1. *Whither the Health Care Crises? Misinterpretations of Chronically Uninsured Estimates*, Timothy McBride, University of Missouri-St. Louis, April 1994.

- **WELL, I DON'T THINK WE'LL PRODUCE ANY HEADLINES TODAY. THE HEADLINE WILL BE IN A FEW WEEKS: "CONGRESS PASSES HEALTH CARE REFORM." BUT BETWEEN NOW AND THEN, YOU'LL BE FLOODED WITH COMPLEX -- AND CONTRADICTORY -- INFORMATION. SO, WE WANT A CANDID DISCUSSION.**
- **TODAY'S AGENDA IS THIS: IN THE FIRST HALF HOUR, DR. TYSON WILL DISCUSS INSURANCE REFORM ... DR. RIVLIN,**

COST CONTAINMENT ... I'LL SHARE  
INFORMATION DEVELOPED BY TREASURY ON  
THE DEMOGRAPHICS OR CHARACTERISTICS  
OF THE UNINSURED ... AND BOB RUBIN  
WILL REVIEW WORKFORCE ISSUES.  
THEN WE'LL OPEN IT UP FOR QUESTIONS  
AND COMMENTS.

- LET ME SAY ONE THING BEFORE LAURA  
STARTS. MOST OF YOU KNOW WHEN I WAS  
IN THE SENATE, ALONG WITH CHAIRMAN  
ROSTENKOWSKI, I AUTHORED AN

INCREMENTAL BILL -- TO CREATE VOLUNTARY ALLIANCES; ADDRESS INSURANCE ISSUES LIKE CHERRY PICKING AND PORTABILITY; ADD PREVENTIVE BENEFITS TO MEDICARE; AND MAKE PREMIUMS FULLY DEDUCTIBLE FOR THE SELF-INSURED. MY BILL PASSED THE SENATE -- TWICE -- BUT IT DIDN'T MAKE IT INTO LAW. NOT BECAUSE OF SUBSTANCE, BUT BECAUSE OF POLITICS.

● I WROTE AN INCREMENTAL BILL, BECAUSE I FELT IT WAS THE BEST WE COULD GET THROUGH -- AT THE TIME. PRESIDENT CLINTON FEELS -- AND I CONCUR -- WE CAN DO BETTER NOW. THE TIME IS RIGHT, AND WE HAVE A PRESIDENT WHO IS FULLY COMMITTED. IT'S DIFFERENT ON THE REPUBLICAN SIDE, TOO. WHEN IN YOUR WILDEST DREAMS DID YOU THINK BOB DOLE WOULD PROPOSE A BILL CALLING FOR \$100 BILLION IN SUBSIDIES?

**INTRODUCE LAURA  
INTRODUCE ALICE**

- **I WANT TO DISCUSS THE CHARACTERISTICS OF THE UNINSURED. WITH THE HELP OF THREE CHARTS, I'LL GO OVER THREE MYTHS, AND THE REALITIES.**

**SLIDE 1**

- **THERE'S A MYTH THAT UNINSURED ARE UNEMPLOYED. THE REALITY IS, THEY'RE WORKING AMERICANS. THE VAST MAJORITY**

-- ALMOST 85 PERCENT -- ARE IN WORKING FAMILIES.

- THIS CHART SHOWS THE JOB STATUS OF THE UNINSURED. 52 PERCENT WORK FULL YEAR, FULL-TIME ... 7 PERCENT, FULL YEAR, PART-TIME ... 25 PERCENT PART-YEAR ... WHICH LEAVES ONLY 16 PERCENT NOT WORKING.
- AMERICANS YOU'D EXPECT TO BE UNINSURED -- THE POOR, THE ELDERLY OR THE DISABLED -- ALREADY HAVE COVERAGE

THROUGH MEDICAID, MEDICARE, AND OTHER PUBLIC PROGRAMS, SUCH AS VA. SO, THAT LEAVES MOSTLY MIDDLE-INCOME WORKING FAMILIES AS THE ONES WITHOUT INSURANCE.

- AND THESE UNINSURED ARE NOT POOR. THREE-FOURTHS HAVE MODERATE INCOMES -- ABOVE THE POVERTY THRESHOLD. ONE IN THREE IS A MEMBER OF A FAMILY MAKING MORE THAN \$30,000 A YEAR.

**SLIDE 2:**

- **THE SECOND MYTH IS THAT THE UNINSURED ARE ALL YOUNG, HEALTHY PEOPLE WHO CHOOSE NOT TO BUY INSURANCE. THE REALITY IS, 44 PERCENT ARE OVER THE AGE OF 30.**
- **YOU CAN SEE FROM THE CHART THAT ONE QUARTER ARE CHILDREN. THAT'S CAUSED BY A COMBINATION OF LOW INCOMES AND HIGH INSURANCE PREMIUMS. BUT LOOK AT THE 18 TO 24 YEAR OLDS AND THE 25 TO**

29 YEAR OLDS. TOGETHER, THEY COME TO ONLY 30 PERCENT.

- THIS SAYS TO ME, THAT MOST PEOPLE WHO ARE UNINSURED EITHER HAVE AN EMPLOYER WHO DOESN'T PROVIDE COVERAGE, OR THE WORKER CANNOT AFFORD TO BUY IT WITHOUT SOME HELP WITH THE COST OF THE PREMIUM.
- AND FOR MOST OF THE UNINSURED, BEING WITHOUT INSURANCE, IS A LONG TERM, NOT A SHORT-TERM PROBLEM.

**THE UNIVERSITY OF MISSOURI CALCULATES THAT NEARLY 75 PERCENT OF UNINSURED WILL REMAIN UNINSURED FOR AT LEAST A YEAR.**

**SLIDE 3**

- **THE THIRD MYTH: THERE ARE THOSE WHO THINK THAT IF "I HAVE INSURANCE -- THE UNINSURED DO NOT AFFECT ME." THE REALITY IS THEY AFFECT YOU -- A LOT.**

- **INSURANCE COSTS ARE HIGHER ...  
TAXES ARE HIGHER BECAUSE OF HIGHER  
FEDERAL HEALTH COSTS ...  
AND AMERICANS WHO LOSE THEIR JOBS MAY  
WELL JOIN THE UNINSURED.**
- **YOU CAN SEE FROM THE CHART, IN 1981,  
ABOUT 7 PERCENT OF A HOSPITAL'S COSTS  
WERE UNREIMBURSED COSTS. IN 1991  
(THOSE ARE THE MOST RECENT NUMBERS WE  
HAVE), IT'S 13 PERCENT. CAN YOU  
IMAGINE IF 13 PERCENT OF YOUR READERS**

**DON'T PAY THEIR SUBSCRIPTION. IF 13 PERCENT OF YOUR ADVERTISERS DON'T PAY UP. YOU WON'T BE IN BUSINESS LONG, OR YOU MAKE UP THE LOSSES BY CHARGING OTHER CUSTOMERS MORE.**

- **ACCORDING TO THE CONGRESSIONAL BUDGET OFFICE, UNREIMBURSED COSTS FOR HOSPITALS ALONE TOTALED MORE THAN \$28 BILLION IN 1991. AS A RESULT, PRIVATELY INSURED PERSONS PAY**

**SUBSTANTIALLY MORE TO HOSPITALS THAN THE ACTUAL COST OF THEIR SERVICES.**

- **WHEN THE GOVERNMENT PAYS LESS, PRIVATE PATIENTS PAY MORE. THE HOSPITALS AND OTHER PROVIDERS SHIFT COSTS TO PERSONS WITH PRIVATE INSURANCE.**
- **LET ME CONCLUDE BY SAYING UNIVERSAL COVERAGE IS ESSENTIAL -- TO PROTECT THOSE WHO HAVE NO INSURANCE, THOSE WHO MIGHT LOSE IT, OR THOSE WHO PAY**

HIGHER PREMIUMS THAN THEY WOULD IF EVERYONE WAS COVERED. IT MAKES SENSE TO BUILD ON THE EMPLOYER-BASED SYSTEM, SINCE MOST PEOPLE TODAY OBTAIN THEIR INSURANCE THROUGH THEIR EMPLOYER. AND WE NEED TO MAKE SURE HEALTH CARE IS AFFORDABLE TO BOTH EMPLOYERS AND EMPLOYEES.

- AS THE PRESIDENT AND THE FIRST LADY SAY: UNIVERSAL COVERAGE IS ABOUT MIDDLE-INCOME WORKERS AND THEIR

**FAMILIES. IT'S NOT ABOUT THE  
UNEMPLOYED. NOT ABOUT THE POOR.  
NOT ABOUT OLDER AMERICANS.  
THE WORKING FAMILY IS THE ONE MOST AT  
RISK UNDER TODAY'S HEALTH CARE  
SYSTEM, AND IT'S THE ONE WITH THE  
MOST TO GAIN BY REFORM.**

- **INTRODUCE BOB.**
- **OPEN IT UP TO QUESTIONS.**

**CLOSE**

- **THANK YOU FOR COMING. BETWEEN NOW AND THE END OF THIS CONGRESSIONAL SESSION, I THINK THE MOST IMPORTANT STORY YOU'LL WRITE IS THE HEALTH CARE ONE.**
- **I HOPE YOU GAINED SOME NEW INFORMATION AND PERSPECTIVE AS THIS MOVES ALONG.**

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# Alabama

District	Representative	Total Uninsured (000's)	Uninsured in Working Families (000's)	Proportion of Uninsured in Working Families
1	Sonny Callahan	102	80	79.0
2	Terry Everett	97	78	79.7
3	Glen Browder	102	81	79.0
4	Tom Bevill	101	80	79.4
5	Bud Cramer	91	73	80.2
6	Spencer Bachus	85	68	80.6
7	Earl F. Hilliard	116	90	77.5
<i>Total</i>		694	550	79.3

# Alaska

District	Representative	Total Uninsured (000's)	Uninsured in Working Families (000's)	Proportion of Uninsured in Working Families
1	Don Young	84	76	90.5

# Arizona

District	Representative	Total Uninsured (000's)	Uninsured in Working Families (000's)	Proportion of Uninsured in Working Families
1	Sam Coppersmith	86	80	93.3
2	Ed Pastor	129	113	87.3
3	Bob Stump	78	71	90.6
4	Jon Kyl	77	72	93.3
5	Jim Kolbe	84	75	90.1
6	Karan English	87	77	88.6
<i>Total</i>		479	416	86.8

# Arkansas

District	Representative	Total Uninsured (000's)	Uninsured in Working Families (000's)	Proportion of Uninsured in Working Families
1	Blanche M. Lambert	126	109	86.1
2	Ray Thornton	114	100	87.6
3	Tim Hutchinson	118	104	87.6
4	Jay Dickey	120	104	86.1
<i>Total</i>		5,937	5,052	85.1

# Colorado

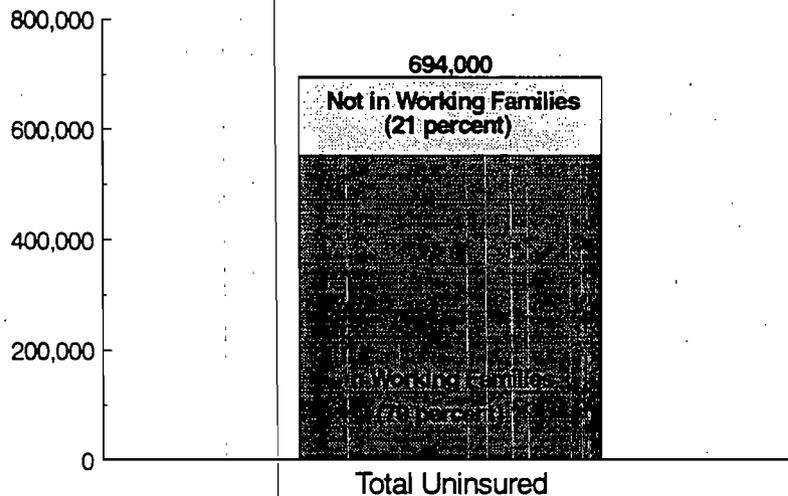
District	Representative	Total Uninsured (000's)	Uninsured in Working Families (000's)	Proportion of Uninsured in Working Families
1	Patricia Schroeder	80	66	81.6
2	David E. Skaggs	63	53	85.3
3	Scott McInnis	79	65	82.1
4	Wayne Allard	76	64	83.3
5	Joel Hefley	58	48	82.3
6	Dan Schaefer	55	48	86.0
<i>Total</i>		412	343	83.3

# Connecticut

District	Representative	Total Uninsured (000's)	Uninsured in Working Families (000's)	Proportion of Uninsured in Working Families
1	Barbara B. Kennelly	46	37	80.0
2	Sam Gejdenson	41	33	80.4
3	Rosa L. DeLauro	44	36	80.4
4	Christopher Shays	43	35	80.2
5	Gary A. Franks	40	33	81.6
6	Nancy L. Johnson	39	32	82.3
<i>Total</i>		255	206	80.8

**694,000 PEOPLE IN ALABAMA  
DO NOT HAVE HEALTH INSURANCE,  
INCLUDING 542,000 IN WORKING FAMILIES**

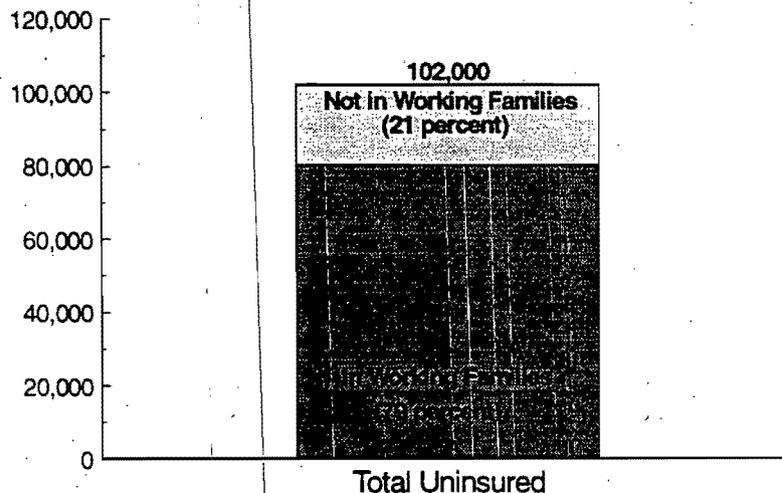
**Number of Uninsured in Alabama**



- **The uninsured are exposed to major health risks and financial insecurity.**
- **People *with* insurance in Alabama pay higher premiums to cover the costs of caring for the uninsured.**
- **Without universal coverage, thousands of hard working people in Alabama will remain at risk of losing their health insurance.**
- **542,000 (79 percent) of the 694,000 uninsured in Alabama are in working families.**

**102,000 PEOPLE IN ALABAMA'S FIRST DISTRICT  
DO NOT HAVE HEALTH INSURANCE,  
INCLUDING 80,000 IN WORKING FAMILIES  
(Representative Sonny Callahan)**

**Number of Uninsured in Alabama's 1st District**



- **The uninsured are exposed to major health risks and financial insecurity.**
- **People *with* insurance in Alabama's 1st District pay higher premiums to cover the costs of caring for the uninsured.**
- **Without universal coverage, thousands of hard working people in Alabama's 1st District will remain at risk of losing their health insurance.**
- **80,000 (79 percent) of the 102,000 uninsured in Alabama's 1st District are in working families**

## DISTRIBUTION OF UNINSURED

### Question:

Your data suggest that the uninsured are not equally distributed across States. Does that mean that a health reform bill that achieves "universal coverage" will be more beneficial to residents of certain States?

### Answer:

Your observation is right, residents of States with large numbers of uninsured stand to benefit substantially from universal coverage...but it is not correct to assume that persons who live in States with small percentages of uninsured won't also benefit. Let me explain.

In order to protect against loss of insurance as workers and their families move across State lines, it is important to extend insurance to every family. Moreover, many individuals and families in States with relatively smaller numbers of uninsured do not have adequate coverage. A comprehensive standard benefit package will both assure portability and upgrade coverage for millions.

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## COSTS TO SMALL BUSINESSES

### Question:

It strikes me that there is a "flip" side, if you will, to your argument that certain States with large numbers of uninsured will benefit most from universal coverage. Doesn't that also mean that small businesses in those States -- where many working uninsured are concentrated -- will have to bear a disproportionately large financial burden under the employer mandate?

### Answer:

Well, it is certainly true that under the President's plan, all businesses -- including small firms -- are expected to help pay for the cost of providing employer based coverage. And to the extent that they did not already do so, these businesses would have to make a contribution. But, it is very important to point out that small, low wage firms would be heavily subsidized through a system of discounted premiums. Moreover, small, medium and large firms that do offer insurance in those States would benefit significantly in that they are currently carrying a very substantial cost-shift burden [paying for the cost of caring for the uninsured]. Since small firms suffer most under the current system, these firms would be especially well-served by a better distribution of the cost of providing care.

Like the President, the committees dealing with this issue have acknowledged the need for a well-structured system of subsidies, and while the actual configuration of the subsidy is still evolving, I feel sure that at the end of the day we will be able to come together on a plan for helping individuals, families and firms make this change.

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## RELIABILITY OF DATA

### Question:

How good is this data once it is broken down into substate regions like Congressional districts? For example, is it fair to assume that communities with large numbers of uninsured do not provide adequate coverage through public health clinics -- services available to families but not captured in the insured data?

### Answer:

You're right, data is always better when it is aggregated -- that is, when you're dealing with data sets this large, you tend to be more accurate at the macro level. However, I am confident that the methodology used to arrive at the Congressional district breakdown is sound...and I don't think you'll find any better breakdown than what the Treasury staff has assembled.

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## SOURCE OF DATA USED

### Question:

Is there anything new here, Mr. Secretary? My impression is that the data you have included in this report is well known and already widely available. What should we look for here?

### Answer:

You are right, much of the health coverage data has been produced for years by various agencies, organizations and university based researchers. But given the complexity and texture of this debate, we thought you would appreciate having the most recent information about the uninsured assembled in one place. In addition, what is new here is the breakdown of information by Congressional district.

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## CONGRESSIONAL SUPPORT BY REGION

### Question:

Looking at the distribution of the uninsured by State, Mr. Secretary, it occurs to me that the final debate in Congress -- assuming you can get past the rhetoric of the last few weeks and months -- is likely to break down by region rather than by party. That is, Members from the southern and western States may either support universal coverage because there is such a great need for it among their constituents -- or oppose it because the burden on the businesses in those States is excessive.

Likewise, Members from the northeast, far west and midwest may either support universal coverage because it secures benefits that workers already have -- or oppose universal coverage because it is not such a serious problem in their States yet residents of those regions will have to bear a large portion of the cost of the subsidies. Am I right?

### Answer:

I think your point about the non-partisan nature of this debate is well taken. Both Democrats and Republicans represent districts and States where there are serious gaps in coverage, and even if coverage appears to be reasonable, there is the insecurity associated with losing your health coverage if you change or lose you job. For different reasons -- to secure existing benefits, to control costs, to extend benefits, to obtain subsidies -- we will all benefit from enacting a comprehensive health reform bill.

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July 18, 1994

## UNIVERSAL COVERAGE AND MANDATES

Question: If we can get close to universal coverage without mandates doesn't that make more economic sense than a system that even the Chair of the CEA admits may cost 600,000 jobs?

Answer:

- o First, you can't get close to universal coverage without a mandate of some kind or without going to a single payer system. Neither the Dole plan, nor the Senate Finance plan, nor the Cooper plan achieve the coverage targets they claim to achieve. Let's examine exactly what CBO said about Cooper.
- o On the one hand, CBO said that Cooper's bill could achieve 91 percent coverage if the subsidies were fully funded; but CBO also said that Cooper's bill underfunded the subsidies by \$30 billion a year and that its' mechanism for providers to simply absorb a subsidy shortfall is untenable.
- o Similarly, Lewin based its conclusion that Cooper would get to 91 percent coverage on this faulty assumption. CBO found that the Cooper plan has a \$30 billion a year financing hole in this plan, which will increase the deficit and leave 20 to 25 million people -- most of whom will be middle class -- uninsured.

## DEFINE UNIVERSAL COVERAGE

Question: The President has made it clear that he will veto a bill that doesn't achieve universal coverage but he has never defined the term "universal coverage." What would be an unacceptable time frame to get to universal coverage?

Answer: Universal coverage means that every citizen will have affordable comprehensive health benefits. Of course there will be people who fall through the cracks, but everyone will be able to obtain health care without fear of being bankrupted. The President deliberately made the time line flexible for achieving universal coverage and has always said that he would be willing to work with Congress on defining an acceptable phase in time. However, that date must be clear, and it must be in the foreseeable future.

## DEFINE UNIVERSAL COVERAGE-FOLLOW UP

Question: By all indications the date for universal coverage is going to be well into the future, and certainly not before 1998. Doesn't that leave you with many of the problems of an incremental transition against which you are campaigning so heavily now? If the health care coverage and cost crisis is now, isn't a bill with a slow phase-in unacceptable?

Answer: Yes, the coverage and cost problem in health care are real, and we believe they need to be addressed in a comprehensive and timely way. At the same time, we are talking about an enormous industry that today constitutes one seventh of the economy. We're not about to rush a new system into place. The important thing is to be clear with consumers, providers and payers about the fact that we will achieve universal coverage within a reasonable length of time.

## TRIGGERS

Question: Would a more market-oriented bill based on managed competition with a hard to meet the President's bottom line goal? What about a soft trigger in which a commission would make recommendations to Congress if coverage targets weren't achieved?

Answer: I would first remind you that the President's proposal is built around market forces as the chief mechanism for controlling costs, with a backup of limits on how fast premiums can rise. It would be premature to speculate about what Senator Mitchell and Congressman Gephardt will prepare to their respective chambers. I can only reiterate what the President has said all along. He will only sign a bill that achieves universal coverage, but that he wants to work with Congress in developing a compromise bill on how to get there. The administration would certainly consider a bill with triggers, but only if we are confident that it can achieve universal coverage and significant cost control.

## STATE FLEXIBILITY OPTION

Question: How far is the Administration will to go with allowing States maximum flexibility to design their own health care systems? There are rumors that the Administration is considering allowing States to design completely new reform system -- beyond the single payer option specified in the Health Security Act. Would the Federal government merely make block grants to States for subsidies? Wouldn't this maximum flexibility policy put already stretched State budgets even more at risk? What is the Administration's position on the California ballot initiative to go to a single payer system?

Answer: ERISA is the Federal law that covers pensions, health plans and other employee benefits. ERISA was enacted in 1974. I helped push the bill through the Senate Finance Committee. I was there when the President signed the bill in the Rose Garden, 20 years ago this Labor Day. The provision in ERISA preempting State laws governing benefits has done some good over the years in protecting multistate employers from having to deal with 50 different State laws.

But the balance here is allowing the people closest to the ground -- those back home in the states, counties and cities -- to have some flexibility to adapt their health system to meet their needs, while at the same time providing enough national uniformity to make sure that health plans don't have to deal with 50 different State laws and thousands of local laws. Every issue must be looked at with an eye toward finding the best mix of national uniformity and local flexibility. We are continuing to work with the business community and the State and local governments to get the right balance.

## DEFENDING THE MANDATE

Question: All of your arguments for universal coverage are really arguments for a mandate on businesses and individuals to purchase insurance. You yourself once argued as a senator for a more incremental reform -- one that wouldn't achieve universal coverage but would make the purchase of health insurance more affordable and accessible. Could you envision a scenario in which the President would sign a bill with no mandates? In other words, could there be a bill that achieves universal coverage without any mandates?

Answer: We in the Administration believe the best way to achieve universal coverage is through a system of shared responsibility between employers and individuals. I think we've seen some examples of problems with passing incremental reforms in the absence of universal coverage; in New York State last year when small group reform was enacted, young, healthy people stayed out of the system, leading to higher premiums for everyone else in the small group community rate pool. We are concerned that the incremental reforms now being debated will not achieve the coverage levels they claim (91 to 94 percent) and if enacted they could worsen the situation by increasing cost of purchasing insurance which could cause some individuals and families to forgo coverage. In other words, there is potential for increasing the number of uninsured.

## SUBSIDY STRUCTURE

Question: Your chief complaint against the incremental plans is that the plan subsidies are insufficient and would cause perverse economic incentives for businesses. But the President's plan faces many of these same issues; the cap on Federal spending for subsidies leaves subsidies availability for eligible recipients in doubt. Also, firms have a large incentive to rearrange themselves to maximize subsidies under the HSA. How should a Mitchell/Gephardt bill deal with these questions?

Answer: With regard to the availability of government subsidies for businesses and individuals, I think it's clear that incremental reforms could cost the government much more than a system of universal coverage, since these nonuniversal reforms present employers with such a powerful incentive to drop coverage thereby increasing the amount government would have to devote to individual subsidies. Secondly, we are working with Majority leaders Mitchell and Gephardt on the issue of target subsidies; as you know many of us have thought for some time that individual-based subsidies involve fewer economic distortions than firm-based subsidies and I think there is interest in congress in that type of structure. But the first decision you need to make is whether you are going to go to a system of universal coverage or not. Everything else flows from that.



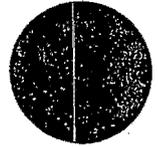
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DEPARTMENT OF THE TREASURY  
WASHINGTON

ASSISTANT SECRETARY

July 19, 1994



MEMORANDUM FOR SECRETARY BENTSEN

FROM: Michael B. Levy *MBL/ELR*  
Assistant Secretary (Legislative Affairs)

SUBJECT: Letters for approval to the full House and Senate  
Members on the Health Care Study

ACTION FORCING EVENT:

The Office of Economic Policy has just concluded a study which highlights the broad level of uninsured, in particular those in working families. We propose transmitting the study to each Member of Congress.

RECOMMENDATION:

That you approve the attached letters.

*MBL*  
Agree

\_\_\_\_\_ Disagree

\_\_\_\_\_ Let's Discuss

ATTACHMENTS: Letters for approval

Edward S. Knight

The Honorable Daniel K. Akaka  
United States Senate  
Washington, D.C. 20510  
Dan

The Honorable Robert F. Bennett  
United States Senate  
Washington, D.C. 20510  
Bob

The Honorable Jeff Bingaman  
United States Senate  
Washington, D.C. 20510  
Jeff

The Honorable David L. Boren  
United States Senate  
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David

The Honorable Bill Bradley  
United States Senate  
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Bill

The Honorable Hank Brown  
United States Senate  
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Hank

The Honorable Dale Bumpers  
United States Senate  
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Dale

The Honorable Max Baucus  
United States Senate  
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Max

The Honorable Joseph R. Biden, Jr.  
United States Senate  
Washington, D.C. 20510  
Joe

The Honorable Christopher S. Bond  
United States Senate  
Washington, D.C. 20510  
Kit

The Honorable Barbara Boxer  
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Barbara

The Honorable John B. Breaux  
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John

The Honorable Richard H. Bryan  
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The Honorable Conrad Burns  
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Conrad

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Thad

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Kent

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Larry

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Jack

The Honorable Dennis DeConcini  
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Dennis

The Honorable Ben Nighthorse Campbell  
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Ben

The Honorable Dan Coats  
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Dan

The Honorable William S. Cohen  
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The Honorable Paul Coverdell  
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The Honorable Alfonse M. D'Amato  
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Al

The Honorable Thomas A. Daschle  
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The Honorable Christopher J. Dodd  
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Chris

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The Honorable J. James Exon  
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THE SECRETARY OF THE TREASURY  
WASHINGTON

July 20, 1994

The Honorable Daniel K. Akaka  
United States Senate  
Washington, D.C. 20510

Dear Dan:

Enclosed for your use is a study, carried out by the Treasury Department, of the characteristics of those Americans who lack health care insurance -- their distribution across states and Congressional districts.

Three of the major conclusions deserve special mention:

- . Four out of five of the uninsured are in working families;
- . Nearly one-third of the uninsured live in families with incomes of more than \$30,000 a year. The majority of the uninsured have incomes above the poverty level; and
- . For most people, lack of insurance is a long-term problem. Specifically, fifty-five percent of the uninsured remain uninsured for more than two years.

Since nine out of every ten Americans with private insurance obtain it through their employers, an employer-based system is one of the least disruptive ways to extend coverage to the uninsured.

I hope that you find this study helpful during the course of the Congressional debate over health care reform.

Sincerely,

Lloyd Bentsen

Enclosure



THE SECRETARY OF THE TREASURY  
WASHINGTON

July 20, 1994

The Honorable Neil Abercrombie  
U.S. House of Representatives  
Washington, D.C. 20515

Dear Mr. Abercrombie:

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Sincerely,



Lloyd Bentsen

Enclosure

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