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PRESERVATION

THE WHITE HOUSE

Office of the Press Secretary

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REMARKS BY THE FIRST LADY  
TO THE COMMUNICATIONS WORKERS OF AMERICA

MRS. CLINTON: Do you all think you could come back like once a week? You know, it's been a great week for us, as Morty said. The President started his week by going to Milwaukee and having an opportunity to spend time with Morty and meeting many of your members. The real secret, I have to go ahead and confess, was that Air Force One has been having communications problems, so we thought we'd get some really firsthand advice.

I also am pleased to be here with all of the leadership that you are and the members you represent. I want to particularly thank Barbara and Loretta for meeting me and greeting me as I came in this morning. But I really am here to say thank you to all of you.

It is true, as Morty said, that we finally look like we're on the verge of the historic change that health care reform will bring to our country. And we could not have gotten there without a President whom you helped elect, who cared about the health care of the people of this country.

But we also would not be on the verge of this change if you at CWA had not worked year in and year out on behalf, not only of your membership, but of millions of Americans who may never know what CWA stands for. Because you tried in every way you knew how to make health care a priority for this country. They will be better off because of it, and I am personally grateful for your support.

But you know it's not going to be easy. It is going to be a real struggle in the next couple of months to do what all of us in this room know needs to be done. We've been in a situation for the last decade or so where a lot of our problems have been denied. There's been a lot of political rhetoric, you know, politicians, radio talk show hosts, all kinds of people ranting and raving, but until last year, very little action.

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Now we've got a year behind us in this administration. I think most of us, if two years ago had been in a meeting like this, we would have thought we were dreaming if we had said, you know, I would just like a president who would be responsible about the budget and go ahead and take on the problems that this country has, and go ahead and reduce the deficit by half, and while he was at it, give tax breaks to millions of working Americans who deserve them because they're working every day but they can't get themselves out of poverty. Leave everybody else alone, and only tax the top 1.2 percent of the wealthiest of Americans.

Wasn't it interesting last week when you finally got down to filling out those tax returns? I know. Probably my favorite time of year.

You know, there has been this year-long blast about how, you know, everybody's taxes were being raised, and then a lot of the Republicans and a lot of their allies ran all these ads last week, you know, saying, look what happened. Lo and behold, it happened to the people it should have happened to. I mean, that's what this is all about.

But think back, you know, two years ago, and again let's dream a little. Suppose we had said, wouldn't it have been wonderful to have a president who really was going to try to do something about violence in America, not just talk about it, not just hold press conferences about it? Wouldn't it be wonderful to have a president who would finally have the guts to sign the Brady Bill and start getting guns out of the hands of teenagers?

You know, as unrealistic as it might have seemed two years ago, wouldn't it have been wonderful to have a president who really believed that we needed more police on the streets? Because you know in the 1950s when I was growing up, and maybe some of you as well, as I look around this room, we had three police officers for every serious felony committed. Now we've got three serious felonies for every police officer.

So two years ago we would have been here saying, oh, I mean, it's a pipe dream. But wouldn't it have been

MORE

great if we could get maybe another 100,000 police officers on the street, and get us safe again in our homes and our neighborhoods? That's what we're on the brink of doing with the crime bill that's in the Congress right now because of the presidential leadership.

There are so many other things like that, I mean everything from waking up two years ago knowing that, despite all of the confusion in the world and the Soviet Union crumbling, there were still hundreds and thousands of missiles pointed at our country. Now we've got, through peaceful means and through leadership, the effort to dismantle that.

We've got a national service program that next year is going to start paying young people to do service in their communities. We've got a new college loan program that's going to start rewarding the children of people who work for a living and can't afford college. We've done all of these things in just one year that two years ago would have seemed unimaginable, because we were living in a kind of drift, a denial, and gridlock.

But leadership does make a difference, and what we now are on the brink of facing is one of the most important issues: health care reform. And it's an issue that's been around for at least 60 years. You know, Franklin Roosevelt thought that health care security would be the other half of social security. He had to fight to get social security. He got that, thank goodness, and yet he couldn't get health security through.

Harry Truman made health care reform one of his major issues. He worked as hard as he knew how -- and I've gone back and read some of his speeches. I mean, he called it like he saw it. He called names, he pointed fingers. He knew exactly what he was up against, because he was trying to change a system that is entrenched, and a lot of people make a lot of money out of.

Dwight Eisenhower even came into his presidency trying to do something about health care reform. Finally, in the 1960s, Presidents Kennedy and Johnson got Medicare. And we ought to be so grateful for that, because at least we provided basic health care services for our older Americans.

Even President Nixon had a health care reform bill

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that he fought for, that was employer-based. And Jimmy Carter came to the Congress with ideas about health care reform.

Oh, we've tinkered on the edges. We've gotten some good things like Medicare. We put a safety net under the poorest of Americans, those on Medicaid. But every year that went by, as Morty referred to earlier, all of you have seen wages held steady or even decline in many sectors of the economy, when the only thing you could bargain for, the only thing you could get, were health care benefits.

And many other workers without the kind of leadership that you have, they've seen not only their wages stagnate and decline, but they've seen their benefits slowly eroded, and many of them have ended up without health care benefits at all. You and I all know people who went to work for corporations 20 and 30 years ago and thought they would always be there. They aren't there anymore, and the health care benefits have gone out with them.

So what we are facing now, as we look at health care reform, is the possibility of making good on the promises and the hopes of the leadership of this union of presidents, both democrat and republican, over 60 years, and making good on the fundamental promise that health care should be a right, not a privilege of a select few.

Now look at what we have before us. We have the President's approach, which will do the following things. And we have alternatives that are being debated in the Congress. And we have, I hope, a national consensus that the time has come, assuming we keep the momentum going. Let me just briefly outline the principles that the President believes have to be part of his health care reform effort.

Number one, every American must be guaranteed private insurance, and that must carry with it a package of benefits that are comprehensive and emphasize primary and preventive health care. For too long, insurance has been penny-wise and pound-foolish. It won't pay for pre-natal care, it won't pay for the immunization, it won't pay for the well-child care. It often won't pay for the mammogram or the Pap smear or the cholesterol screening, but it sure will pay when you get real sick and go to the emergency room.

We want to start paying for and encouraging people

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to use preventive health care. We want to keep people healthy, we don't just want to take care of them when they are real sick and need the kind of care that only is expensive and available in hospitals. So let's begin by committing ourselves to guaranteed insurance with a comprehensive set of benefits.

The second thing we want to do is, we want to outlaw insurance practices that discriminate against any person on the basis of preexisting conditions. Nobody should be denied health care insurance or told, yes, you can have it, but at a price that is so out of sight that in effect it's unaffordable, because they or a member of their family has been sick.

You know, during the last year I have traveled all over the country, and I have talked with so many people about what has happened in their lives. And I've got this movie that runs in my head. I see the faces, I see the settings, I hear the stories. But probably nothing, nothing, summed up the tragedy of preexisting conditions quite the way a woman did in Cleveland, at the Children's Hospital there.

While I was talking with a group of families whose children were seriously ill -- they had leukemia, cerebral palsy, cystic fibrosis -- very serious illnesses which require not only a lot of health care, but require a lot of emotional and psychological care as well. And this woman, whose husband was a lawyer -- they made a good income -- told me about how their first child, their son, had been born healthy. :

Then they had two little girls, both of whom had cystic fibrosis. And she recited for me what it had meant for this family to try to find insurance for those little girls, because of course, once the first one was born, the insurance company began pricing it out in such a way that basically they were told, you can have insurance for yourselves and your son, but not your daughter.

And then, unbelievably, a second daughter with the same problem. This woman said to me that after going from place to place -- they've never asked for a handout, they've never wanted their child to be on welfare and to get Medicaid -- she remembered talking to an insurance agent and begging him to help her get some kind of insurance. He finally looked at her and said, what you don't understand is,

MORE

we don't insure burning houses.

Now, you know, I could not even imagine what that mother felt like. And I could not even imagine that if that were to happen to Bill and me with our daughter, how I would react. I was so stunned.

So if we do one thing in this whole year that will mean more to me than anything, it will be to eliminate preexisting conditions. It will also be to eliminate lifetime limits, because what lifetime limits do is cruelly say to a family, when you are really sick, when you need insurance health care the most, you may run out.

Some policies, when you read the fine print, have a lifetime limit as low as \$50,000. Others go to a million. But you know in today's high-tech medical world that often doesn't last very long, especially if you have a really sick member of your family. So we're going to outlaw -- make it absolutely illegal -- for insurance companies to do anything that will in any way restrict your coverage on the basis of preexisting conditions or lifetime limits. That is what we are trying to do.

The third principle is one that is very important to me personally and I would imagine to many of you. And that is, we want to give every American the choice of doctors and choice of health plan. Now there has probably been more misinformation about this than any other aspect of the President's plan, and I think I've kind of figured out why.

In addition to the advertising campaigns run by interests that don't want you to have choices, what's happening right now is that many, many of us are losing our choice. Employers are picking plans and then telling you what doctors and hospitals you can use. I hear that everywhere I go in the country.

I was in Baltimore on Monday, and I met a family who had a child with a chronic condition. They were very pleased with their doctor. The husband's employer changed insurance policies, and all of a sudden they were told they can't take their child to the same doctor they've been taking him to ever since he was born. They had to go to somebody else.

What we want to do is to stop the trend that is

MORE

taking choice away from people, because if we do nothing, if we do not reform the system, I can guarantee you that most of us will not have any choice in the next 10 years. It won't matter how hard you bargain, it won't matter how hard you shop, there will be big conglomerates that will decide what doctors can belong and what doctors cannot. They will offer the lowest prices to the employers. That's what will be taken, and the rest of us will be left with no choice.

What I want for the American people is what the members of Congress and federal employees have today. They have an employer-based benefit. They have the federal government -- which pays their salary, then pays 75 percent of their health care benefits -- going into the marketplace and finding health plans that want to bid on my health business.

That's what a co-op, or an alliance, or a buyer's club would do. It doesn't deliver health services. It does what the federal government does for my husband and me, and for members of Congress. Every year we get a whole bunch of brochures and information, and can attend a meeting, so that we're told about all the different health plans that are available in the Washington area. This goes on all across the country for federal employees.

What I want is for Americans to have that choice. It's not my husband's employer, it's not the federal government telling us what health care plan to choose, it is our choice. If it's good enough for Congress, it's good enough for the American people.

And the fourth principle is, we want to preserve and improve Medicare. Medicare has worked for older Americans, but it has two big gaps we need to fill. It does not cover prescription drugs, and it does not provide alternatives for long-term care to older Americans and people with disabilities.

Why are prescription drugs important? Well, we want them to be a part of the benefits package for all of us under 65, and we want it to be available for the people who use the most prescription drugs, people over 65. So we have to change the Medicare system in order to be able to do that and provide that benefit.

But you know, it's not only the right thing to

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do -- because I have met people all over this country who every month make a choice at the end of the month, based on their fixed income, between prescription drugs and food. I have met them, I have talked with them.

I have gone down rope lines on streets and in big rallies, and people have grabbed my hands -- older men and women -- and thrust into them their prescription drug bills. And I had a man in New Jersey say to me, here's how much my wife and I live on. We live on social security, a very small pension, and here is what we make every year. I'm spending half of my income on prescription drugs for myself and my wife.

Now it's not only the right thing to do because we need to help these people, but it is the economical thing to do as well. Do you know most older Americans, when confronted with costs like prescription drugs -- they hesitate. You know, you've seen them. I've seen them. I've talked to doctors and pharmacists.

They don't know whether to get the prescription filled. They leave their doctor's office with a bunch of prescriptions, but they may only get one of them filled, not knowing that you need to take all three for it to work. Or they may get the vial and it says, take four pills a day for 10 days, and they say, if I only take one a day, it will last longer.

What happens? They end up back in the doctor's office. About 23 percent of the admissions of older people to hospitals are because the medication wasn't done right or taken right, or administered right. So it's not only the right thing to do, it will save us money. It is more economical to help people with their prescription drugs than to re-admit them to the hospital, or to pay the doctor when they didn't do the drugs right. So that's the first thing.

And the second is, let's begin to provide some alternatives -- to older Americans and Americans with disabilities -- besides nursing homes. I have met hundreds of Americans, and I have gotten a million letters, and many of those letters are about the struggles families have trying to take care of their loved one.

Families struggling with Alzheimer's -- you know, that's not just a disease of an individual. That affects an

MORE

entire family. Struggling with the effects of a stroke or of serious diabetes, or of a heart condition, not only affect older people but also younger people, very often leading to the person needing nearly full-time help during the day.

And yet for those families that want to take care of their loved ones, we don't give them the help they need. We don't pay for the visiting nurse. We don't help pay for the equipment they need in the home to be able to take care of the physical needs. We don't provide reimbursement for adult day care so that you can keep, like, an Alzheimer's patient at home, but drop the care-giving family members off on the way to work, pick them up at night, so that the family can keep working and stay together.

No, what we do is say, "well, too bad, you're either on your own taking care of that relative all by yourself, or go ahead, spend yourself into poverty, and then you can go into a nursing home that costs thousands and thousands of dollars." That is not a very fair thing to do, and it is also not very cost effective.

If we say to families, we want families to get together -- you know, I'm tired of people saying they're pro-family and not lifting a finger to help working families. Why don't we begin to put our policies where our mouths are, and say, let's help families stay together?

And that's what we would do in the President's plan. He would enable Medicare to provide options at home, in adult community centers and congregate housing, so that people who would might eventually enter the nursing home, would slowly move toward levels of needing this.

And the fifth point is that we want to provide health care benefits through the work place. That's where most of us, the 100 million of us who are insured, get our benefits. We want to be able to say to every employer and employee, everyone must share the responsibility of paying for health care.

Many of your employers have not only contributed to your health care, they have subsidized their competitors, they have subsidized other businesses in the community, because those businesses took advantage of the health care system you and your employer paid for without contributing themselves. We need a level playing field where every

MORE

employer and every employee makes a fair contribution. What the President has proposed will be fair to small business. It will help give discounts to them. It will help support low-wage workers. But the bottom line is this: we have to provide that opportunity.

Now there are a couple of other things that I wanted to say just quickly to this group. One thing that the President's approach will not do is, it will not tax health care benefits. It didn't seem right to us to turn around and penalize the people who gave us wage increases over the last decade or two, increase their compensation, largely through the addition of benefits, primarily health care, and then say, we're going to tax that. We don't think that's right, and the President has not proposed that. The President's plan will protect early retirees, and it will provide a single payer option for states that wish to pursue a single payer system.

You know, I was thinking this morning as I was coming over here that it seems so self-evident to those of us in this room that we need to reform our health care system, because you've seen the effects of eroding wages, you've seen increasing costs, as Morty said, no matter what you and your employers try to do. You kept running up against cost increases that were coming because the entire system was out of control, even though you were doing your best to be responsible.

And yet you know as well as I that the same arguments, and even some of the same people who were against social security and against Medicare, are against health care reform. And I don't want anyone in this room to at all feel that this is going to be as self-evident to the Congress and the rest of the country.

You know, when I first started working in public policy -- it seems like 100 years ago, it's probably about 20 or 25 years -- I was primarily concerned about children's issues. I was always amazed when I would go and talk to somebody, and I would say, but the need is so obvious. And you know, fill in the blanks, you know. These children are not getting immunized. These children are not getting, you know, good nutrition. These children are being abused.

And I would make what I thought was certainly a winning argument, and would be met with a blank stare, or met

MORE

with a kind of brush-off, or met with an ideological argument about how, well, that was the way it was meant to be. So I know that this is a challenge for all of us. But I cannot think of anything more important for us to be engaged in right now, because this is not just a debate about economics, although it is.

The economy will be stronger when we stop spotting our competitors five cents on every dollar because we spend so much more on health care. It is not only an issue of social justice, although it is that, because how much longer can we live not only with the nearly 40 million uninsured but the 25 million under-insured?

And the insecurity that any of us face is because there is not one of us in this room, not one, who can say with any certainty you will have the same health care benefit at the same cost this time next year. And it's not only a political issue to see how well our system can respond, and whether it can actually rise to the occasion as it did 60 years ago and 30 years ago. It is also a question of what kind of country we want to be.

We are starting to take on such problems. It's not easy. It's controversial, but at least we're facing up to them. We're starting to get some results. We're beginning to see that there is some hopefulness. The economy is back. Consumer confidence is up. We're starting to do what the President said he wanted to see when he ran for the Presidency.

But really, it's not up to him, and it's not really even up to members of Congress, is it? It's up to all of us, the way we are every day, how we treat each other, our responsibilities for our families, our responsibilities at work. Those are the things that make a great nation.

We have always been great. But now we need to rise to this occasion and make it absolutely clear that we will not tolerate a two-class medical system, that we will not tolerate insecurity that afflicts every one of us, and that we can deal with and solve our problems and move toward creating a more caring, compassionate, and yet practical country.

That's what my hope is, and that's why I'm going to do everything I can to make health care reform happen this

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year. Thank you all.

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