

Women Health
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**PRESIDENT'S BUDGET BUILDS ON A STRONG RECORD OF
IMPROVING WOMEN'S HEALTH**

Protecting Women Through a Health Care Patients' Bill of Rights. The patients' bill of rights is particularly important to women as they are greater users of health care services, and they make three-quarters of the health care decisions for their families. Women also have specific health care needs that are directly addressed by a patients' bill of rights. For example, the patient protection that gives women direct access to an obstetrician/gynecologist is not only necessary to make sure that pregnant women get the care they need, but is also important to ensure that women get important preventive services as studies show that gynecologists are almost two times as likely as internists to perform timely, needed women's preventive services. For nine months, the President has called on Congress to pass a strong enforceable patients' bill of rights that contain a range of protections, including: guaranteed access to needed health care specialists, access to qualified specialists for women's health services; access to emergency room services when and where the need arises, and access to a meaningful internal and independent external appeals process for consumers to resolve their differences with their health plans and health care providers. The President also issued an Executive Memorandum in February to bring all of the Federal health plans in compliance with the patients' bill of rights. The nation's health care system has changed dramatically, as 160 million Americans are now in managed care plans.

Helping Older Women by Proposing New Options for Americans Ages 55 to 65 to Access Health Insurance, Including Buying Into Medicare. Currently, three million Americans ages 55 to 65 are uninsured. Women make up sixty percent of the uninsured between the ages of 55 and 65 are women. One-fifth of the uninsured between the ages of 62 and 64 lose their health insurance because their spouse becomes eligible for Medicare. Of this population, over 80 percent are women. The number of uninsured women in this age group will likely increase as the number of Americans in this age groups is expected to rise by more than 50 percent from the current 21 million to 35 million by 2010. The President's proposal gives this vulnerable population three new options to access health insurance by: (1) allowing Americans ages 62 to 65 to buy into Medicare, through a premium that ensures that this policy is self-financed; (2) providing vulnerable displaced workers 55 and over access to Medicare by offering those who have involuntarily lost their jobs and their health care coverage a similar Medicare buy-in option; and (3) giving Americans 55 and over who have lost their retiree benefits after they retire access to their former employers' health insurance.

Preventing Discrimination Based on Genetic Information Both by Health Plans and Employers. Studies show that a leading reason women do not get genetic testing for breast cancer is because they fear the information will be used to discriminate against them. A study in Pennsylvania designed to understand how to keep women with breast cancer gene mutations healthy reported that nearly one-third of the high-risk women invited to participate in the study refused because they feared discrimination or loss of privacy. The President has urged Congress to pass bipartisan legislation to prohibit health plans from inappropriately using genetic screening information to deny coverage, set premiums, or to distribute confidential information. He also has supported legislation that ensures that employers do not use genetic information to discriminate against employees. Tests for a genetic predisposition to certain diseases and conditions -- such as Huntington's disease, breast cancer, and certain types of colon cancer -- are already available and more genetic tests are on the horizon. However, genetic testing also can be used by insurance companies and others to discriminate and stigmatize groups of people.

Covering Cancer Clinical Trials for Medicare Beneficiaries. About 60 percent of Medicare beneficiaries are women. Americans over the age of 65 make up half of all cancer patients, and are 10 times more likely to get cancer than younger Americans. Currently, only three percent of cancer patients participate in clinical trials. Many scientists believe that higher participation in clinical trials could lead to faster development of cancer therapies, as it often takes between 3 and 5 years to enroll enough participants in a cancer clinical trial to make the results scientifically legitimate and statistically meaningful. The Vice President recently announced that, for the first time, Medicare beneficiaries would be able to have the patient care costs associated with cancer clinical trials explicitly covered through a new demonstration. This would give Medicare beneficiaries access to cutting-edge treatments and encourage higher participation in clinical trials.

Creating a Historic "21st Century Research Fund" Which Includes an Unprecedented-50 Percent Increase in Biomedical Research. Scientists are on the cusp of important new breakthroughs in biomedical research which could revolutionize the way medical experts understand, treat, and prevent some of our most devastating diseases. For example, revolutionary progress in genetics and imaging technologies are charting new ways to conquer diseases, such as breast cancer, Alzheimer's, osteoporosis, and other diseases which impact millions of women. In FY 1999 alone, the "21st Century Research Fund" would provide the largest increases in history for the National Institutes of Health (\$1.15 billion). And, for the first time, the President is proposing a sustained investment in biomedical research with a 50 percent increase in the NIH in the next five years, and with over \$20 billion dedicated to biomedical research the NIH in 2003.

Increasing Family Planning. The President's FY 1999 budget makes comprehensive family planning programs more widely available. The budget calls for: increased funding for Title X Family Planning grants by \$15 million -- a 46 percent increase since FY 1992 and about \$200 million for the National Institutes of Health's research on infertility and contraception, and related matters and CDC's programs to educate teenagers about sexual development and abstinence.

THESE NEW PROPOSALS BUILD ON A STRONG RECORD OF IMPROVING WOMEN'S HEALTH

Protected and Strengthened Medicare. About 60 percent of Medicare beneficiaries are women. The Balanced Budget Act, the President signed into law this summer: extended the life of the Medicare Trust Fund for a decade; expanded choices in health plans; and provided beneficiaries new preventive benefits, including more affordable annual mammograms for all beneficiaries, cervical cancer screening, and tests to help detect osteoporosis.

Preserved and Strengthened Medicaid. Nearly 60 percent of Americans who receive Medicaid are female. The President fought to stop proposals to block grant the Medicaid program, preserving the guarantee of health care for the millions of vulnerable pregnant women, older Americans, children, and people with disabilities who depend on this program.

Passed Legislation to Allow Mothers and Their Newborns 48-Hour Hospital Stays Following a Delivery. In 1996, President Clinton signed legislation that protects mothers and their babies from drive-through-deliveries, ensuring them adequate stays in hospitals following a delivery. This law requires health plans to cover at least 48 hours following a delivery and 96 hours following a caesarian section.

Expanded Medicare to Pay for Annual Screening Mammograms for all Medicare Beneficiaries Age 40 and Over. The balanced budget expanded coverage to pay for annual screening mammograms for all Medicare beneficiaries age 40 and over, enabling women to follow the National Cancer Institute's (NCI) recommendations to undergo regular mammogram screening at forty. President Clinton has also taken action to bring Medicaid and federal employee health benefits in line with NCI recommendations.

Made Medicare Mammograms More Affordable and Accessible. The balanced budget enacted by the President this August waived deductibles for all mammograms, making mammograms more affordable for older women. Costs can be a significant barrier for older women to get mammograms. Although Medicare has covered screening mammography since 1991, only 14 percent of eligible beneficiaries without supplemental insurance receive mammograms.

Built on HHS Commitment to Breast Cancer Research, Prevention and Training. Since the President took office, funding for breast cancer research, prevention and treatment has nearly doubled, from about \$276 million in FY 1993 to \$513 million in the President's FY 1998 budget.

Continued Department of Defense Funding for Breast Cancer Research. In FY 1998, the DOD will spend over \$100 million on breast cancer research. This is an unprecedented partnership between the military, scientists, physicians, and the community to fund grants to invigorate breast cancer research. One of the most important and innovative aspects of the program is that breast cancer survivors are actively engaged in defining the program and serve on scientific panels which review grant proposals.

Educating Older Women to Use the Medicare Mammography Screening Benefit. The First Lady has launched a yearly mammography campaign to inform and encourage older women to use the Medicare mammography screening benefit. This year the First Lady's campaign focuses on populations with particular low mammography utilization rates.

Improved Mammography Quality Standards. The President supported regulations that strengthen and improve the program the FDA implemented for mammography standards in 1994 to ensure that they meet standards for equipment, personnel, record-keeping, and quality control. Women and their families can look for the FDA certificate as evidence that the facility meets quality standards. These new standards will ensure women that they can rest assure they received a high quality mammograms which give accurate readings. Women can also find a certified mammography facility by calling 1-800-4-CANCER.

Preventing Women From Being Forced Out of the Hospital Only Hours After a Mastectomy. President Clinton has endorsed bipartisan legislation to ensure that women are not forced out of the hospital before they are ready because of pressure from their health plan. The Department of Health and Human Services also sent a letter to all Medicare managed care plans making it clear that they may not set ceilings for inpatient hospital treatment or set requirements for outpatient treatment, and that a woman and her doctor should make decisions about what is medically necessary.

Combating Violence Against Women. Millions of women throughout our nation are plagued by the terror of family violence. Approximately 20 percent of all emergency room visits by women result from domestic violence. President Clinton has given high priority to eliminating domestic violence from our communities. Through the Violence Against Women Office at HHS and DOJ, the Clinton Administration is taking strong steps to fight domestic violence including: creating a National Domestic Violence Hotline which has received over 100,000 calls; enhancing assistance for welfare recipients who are victims of domestic violence as they move to work; passing a new Federal Anti-Stalking Law and Domestic Violence Gun Law; and enhancing funding for domestic violence intervention and prevention through the Violence of Women Act.

Providing Cervical and Breast Cancer Screening for Low-Income Women. CDC's National Breast Cervical Cancer Early Detection Program offers free or low-cost mammography screening to low-income elderly and minority women. On October 1, 1996, Secretary Shalala announced the expansion of the program to all fifty states. The goal is to reduce breast cancer deaths among these women by 30 percent and cervical cancer deaths by 100 percent through increased mammographies and pap testing.