Remarks and an Exchange With Reporters on Child Immunization at the Fenwick Center in Arlington, Virginia
February 12, 1993

The President. Thank you. We are delighted to be here today. I want to thank all of you for hosting us and coming out in such wonderful numbers, and I want to especially thank the young people who are here.

I want to begin my introducing the First Lady, my wife, Hillary. As many of you know, she is the chair of the President's Task Force on Health Care and came today to review the work of this wonderful clinic in anticipation of our presenting to the Congress a program to provide affordable health care for all Americans in the next several weeks.

We've had a wonderful time here today. And I want to introduce the person to my left who will speak in a moment, the Secretary of Health and Human Services, Donna Shalala. I also want to introduce two United States Senators who came with us today: first, the chair of the Senate Committee on Labor and Human Resources, Senator Edward Kennedy of Massachusetts; and Senator Don Riegle of Michigan.

I'd like to thank Jim Hunter, the Arlington County Board chair, for meeting us here. I know we have members of the Virginia Senate and House here, and the school board chair, Frank Wilson. I thank all of them for being here. But the two people I'd like to thank most today are the two fine public servants who showed us around. I'd like to ask them to stand and be recognized: Dr. Susan Allan, the Arlington County health director—where is Susan?—and Sue Adams, the Family Health Bureau chief. Thank you, Sue.

We've had a wonderful time today. We got to walk through the process of what it was like for a parent to have a child immunized here. We saw the good news, which is that this place is doing a wonderful job of reaching people. We also saw some of the bad news, which is it's still pretty cumbersome to have a child immunized. And we did get to see a young woman of 20 months, get her a polio vaccine, which is an oral vaccine. So it was nice to see someone be vaccinated without pain. [Laughter]

We came here today to make this day a landmark and to fight to protect the health of millions of our children. I can think of no better place to announce a new immunization policy than right here on the front lines of the fight to provide accessible, affordable health care to every family in this area.

I'm pleased to be joined here by the children's advocates whom I have introduced. And I do want to say again our thanks to Sue Adams, the director of this clinic, and all the wonderful staff that came out and said hello to us and encouraged us along the way.

This week I was startled to read of the case of a young boy named Rodney Miller, a 20-month-old child who lives in Miami, currently being treated for meningitis in the Jackson Memorial Hospital. He's there because he did not receive a meningitis vaccine that cost $21.48. The bill for his stay in the hospital has already topped $46,500.

In the health care policy that our national task force is developing, nothing will be more important than preventive care. Today, American taxpayers are being hit with $10 in avoidable health care costs, avoidable health care costs, for every $1 we could be spending on immunizing our young people. The recent resurgence of measles in our country afflicted over 55,000 people, most of whom were children. The epidemic cost this country $20 million in avoidable hospital costs alone. Prevention would have cost $1 million. And those figures don't begin to take into account the terrible human cost, the agony of a young man like Rodney Miller with his joints swollen, with his ankles so swollen they have to be relieved with needling to get the pus out, that the pain and problems that he and many others will take
throughout their lives simply because we don’t immunize our children.

Lest you think that this is a problem that every country has, I want you to know in this beautiful health care building that the United States has the third worst immunization record in this hemisphere. Of all the nations in this hemisphere, only Bolivia and Haiti have lower immunization rates for their children than the United States of America.

Over the past 10 years, while immunization rates have been declining in many important areas, the price of vaccine has risen at 6 times the rate of inflation. Immunizing a child cost about $23 10 years ago; it costs more than $200 today. In a public clinic, the cost of fully immunizing a child has leapt from $7 to more than $90. Manufacturers of these vaccines cite the cost of research and development to defend the rising prices. Well, nobody wants research to slow down, but let’s look at what’s really happening.

The pharmaceutical industry is spending $1 billion more each year on advertising and lobbying than it does on developing new and better drugs. Meanwhile, its profits are rising at 4 times the rate of the average Fortune 500 company. Compared to other countries, our prices are shocking. Listen to this: The polio vaccine in the United States currently costs close to $10. In England, the same drug is available for $1.80. In Belgium, it costs 77 cents. The problems of having an adequate delivery system, plus the spiraling costs, are putting America’s children and America’s future in jeopardy.

To make matters worse, the makers of these vaccines have refused to make their products available to States at more affordable cost. I should tell you, those of you who don’t know, that the Federal Government buys vaccines from the manufacturer and distributes it through the States and ultimately the people through the Center for Disease Control. We buy the vaccines at a much lower cost than a doctor can. The States often directly buy vaccines. They buy the vaccines at a higher cost than the Federal Government, but still at a lower cost than doctors. States can order large quantities and therefore should receive lower prices.

But listen to this: While 10 States have succeeded in negotiating agreements with the vaccine manufacturers that allow them to immunize all the children they can reach, manufacturers are now balking at starting talks with other States. In fact, just recently Texas, South Carolina, and Hawaii were all turned away. They were told that their efforts to get cheaper vaccines for their children were against public policy.

Today we must tell the drug companies to change those priorities. We cannot have profits at the expense of our children. These practices have got to stop.

But I want to make it clear: Dealing with the cost of vaccines will not be enough. We also have to improve the delivery of preventive care. I want to say to the members of the press and to all the people who are here, we should be under no illusion that every family and every child in America has access to a health clinic as good as this one. We should be under no illusion that every family and every child in America has access to a health clinic that opens at 7 a.m. in the morning and closes at 7 p.m. at night so that working families can bring their children.

Even here, where there has been a dramatic increase in the number of children immunized, we are still seeing rates of 70 percent immunization when the national goal, and what is necessary to assure that there will be no outbreak of communicable diseases, is 90 percent. Without an outreach program to go out and reach people where they are, in the languages they speak, in the homes and in the neighborhoods and in the organizations that they frequent, we will not be able to reach this goal.

So today I am announcing a three-part policy to protect our children’s future and to save the taxpayers millions of dollars. It will require changes on the part of all of us. And as I have in the last 3 weeks, I want to begin with the Government so that we do our job first before we ask anyone else to change what they are doing.

I am pleased to announce that the job stimulus program that I will outline on Wednesday evening to the Congress will include $300 million to make vaccination services more widely available to all Americans. These funds will help public programs buy more vaccines. They will improve community services and personal outreach efforts. They will mean extended clinic hours all across America, more staff, and increased education efforts in conjunction with the Department of Education and the Department of Health and Human Services, and the resources necessary to create a national tracking
system so we know what is happening to these children. These folks here are having a terrible time getting good and accurate records because we don’t have a national tracking system.

These are the kinds of things that the National Government owes the American people and owes these fine public health professionals if we’re going to do what we should be doing to help protect our children. And we will begin with that.

Second, I’m directing Secretary Shalala to begin negotiations with our drug manufacturers to assure that other States who do not have the arrangements that 10 do can buy the vaccines they need at affordable prices. There is no reason in the world why a child in Texas is unable to receive vaccination while a child in Massachusetts can. We can’t stand this kind of inequality simply because of the economic priorities of the manufacturers of the vaccine. It’s wrong.

Finally, the administration will prepare an initiative for my review, in cooperation with key congressional health leaders such as Senator Kennedy, Senator Riegle, Senator Bumpers, Senator Pryor, Congressmen Dingell, Waxman, and others, that will guarantee the immunization of every child in America.

And I want to challenge the manufacturers of these vaccines to work with us. We cannot possibly justify financing research and development in future vaccines based on prices that will assure that children will not receive the vaccines that are available today. We can do better than that, and we have to.

Our Nation is the only industrialized nation in the entire world that does not guarantee childhood vaccination for all children. It ought to be like clean water and clean air; it ought to be a part of the fabric of our life. Look at these children. How can we risk losing one of them, and how should we waste one dollar on our already over-bloated health care system that we could do away with vaccinations.

The cruel irony is that we are the Nation that develops and produces the majority of the world’s vaccines. But we don’t have an effective or an affordable mechanism for distributing them, and we charge more for vaccines in this country than are charged in other countries for the same vaccines that are manufactured here. That is an irony that we cannot permit to continue.

So the steps we’re taking today will go a long way towards solving that dilemma. We’ll make sure that excessive profits do not stand in the way of children’s health. And I want you to know that we will not stop until preventable childhood diseases no longer threaten the families, the children, and the future of the United States.

[At this point, Secretary of Health and Human Services Donna E. Shalala made brief remarks.]

The President. Thank you very much. Thank you very much. We’re going to shake hands, but I promised the press we’d answer a couple of questions. Does anybody have one? Where are they? I was listening for a familiar voice. Go ahead.

Q. Mr. President, can you tell us what you hope to achieve? What makes you think that the health costs——

The President. Well, one thing, the drug companies are used to selling drugs on a bulk basis at a discount rate to the Federal Government and to some of the States. I think that the position they have taken, that we should continue the status quo, is untenable. But if they have legitimate arguments on research and development, maybe there’s some other ways we can try to address those.

I think we ought to let Secretary Shalala and the White House folks meet and deal with them and see what position they take. I cannot believe that anyone seriously believes that America should manufacture vaccines for the world, sell them cheaper in foreign countries, and immunize fewer kids as a percentage of the population than any nation in this hemisphere but Bolivia and Haiti. I can’t believe that that is their position. But that is the inevitable consequence of what we have not done.

Yes?

Q. [Inaudible]—Congress is going to go along with any——

The President. Well, I’m going to present a program to the Congress to provide for the immunization of all children at a reasonable price. I hope they will be a part of developing that program. Whether they are or not is up to them. But this is unconscionable. We are running the risk of new epidemics spreading out in this country. We cannot do it. We were supposed to have 90 percent of our kids immunized in 1990. That’s what Dr. Koop wanted when he was Surgeon General. We missed the deadline. They put it off to the year 2000. And unless
we do something about the delivery system and the price, we’re not going to get there in the year 2000. I want to get there sooner, and I think we can. I believe they’ll be a part of this. I think the public outpouring on this is going to be so strong that they’ll come along and do it.

I’m still going to try to pass a bill that will permit us to immunize all the children of the country.

Q. [Inaudible]

The President. Well, let me say, in my State the public health department does 85 percent of the immunizations done. I’m very proud of that. And there are a lot of Southern States that, because of our legacy of poverty, have had to develop very elaborate public health networks. So this is something that we’ve been sensitive to for a long time.

I’ve also been interested in buying the vaccinations. But everything that I’ve done on public health since—well, ever since we got into public life, Hillary’s been a part of. So she’s been pushing this, but so has Secretary Shalala. I don’t know who to give credit to. But I don’t care who you give credit to, as long as we get it done.

Thank you very much.

NOTE: The President spoke at 11:07 a.m. at the Arlington County Career Center.

Exchange With Reporters Prior to a Meeting With Congressional Leaders
February 12, 1993

Q. Mr. President, what kind of feedback have you been getting, sir? What kind of feedback you’ve been getting from the Congressmen and—

The President. Very helpful.

Q. Do you think the Republicans will go along with you?

The President. Well, I don’t know. Right now, I’m gathering their ideas and opinions, and we’ll see. I hope so.

Q. Are you going to cut spending, sir, on the space station and the super collider?

The President. Tune in Wednesday.

Q. Have you started writing the speech?

The President. I’ve started putting the elements of it together. It may not be as much of a speech as a talk.

NOTE: The exchange began at 3:08 p.m. in the State Dining Room at the White House. A tape was not available for verification of the content of this exchange.

Nomination for Under Secretary and Assistant Secretaries of Commerce
February 12, 1993

The President today announced his choices for four top leadership positions at the Department of Commerce, expressing his intention to nominate James Baker to be Under Secretary for Oceans and Atmosphere, Doug Hall to be Assistant Secretary for Oceans and Atmosphere, Sheila Anthony to be Assistant Secretary for Legislative and Intergovernmental Affairs, and Larry Irving to be Assistant Secretary for Communications and Information.

Baker and Hall will serve as the Director and Deputy Director of the National Oceanic and Atmospheric Administration (NOAA), one of the Federal Government’s key environmental research agencies.

“Secretary Ron Brown is putting together a superb leadership team at the Department of Commerce,” said President Clinton. “I am looking forward to working with them to turn Commerce into one of our administration’s most vital agencies.”

“We have found the perfect balance to lead NOAA,” the President added. “With Jim Baker and Doug Hall, we have a team that will bring