Remarks Announcing the Health Care “Consumer Bill of Rights and Responsibilities”

November 20, 1997

Thank you very much, first of all, Peter, for your outstanding remarks and the power of your example. And I accept your offer to play golf.

[Laughter]

I thank all the Commission members and the members of the staff for a truly remarkable piece of work. And I’d like to say a special word of appreciation to Secretary Shalala and Secretary Herman, who cochaired the Commission and who, I believe, did a remarkable job, and I thank you very much. I thank the Vice President for his work in overseeing this effort and for his concern.

This whole health care issue is very personal to me and to our family, to the First Lady. When I was running for President, I met person after person after person who had a cost, a quality, or an accessibility issue with the health care system. But long before that, as a Governor in what my opponents used to call a small southern State, I had the great gift that representing a small population gives you, of knowing a high percentage of the people who hired me, from all walks of life and all social strata, from all different circumstances. And I just kept—I had such ambivalent feelings. I could see in my own State that we had the finest health care system in the world. I saw miracle after miracle after miracle, I saw person after person given a chance to reconstitute his or her life, and then all these terrible problems arising from the cost or the quality or the accessibility issues.

So we’ve worked very hard on them. The Vice President mentioned the quality issues. I would also like to say, this has been a very good year across the board for American health care. In the balanced budget bill we have $24 billion to provide health insurance to another 5 million children, about half of those who don’t have health insurance—something that has become very important because the number of uninsured Americans has continued to rise since 1993. Ironically, even as the percentage of people in the work force eligible to purchase health insurance with the involvement of their employers has gone up, because of price the coverage has gone down.

We had a significant step in reforming the Medicare program to add many years of life to the Trust Fund and provide more choices, including preventive care to Medicare recipients and earlier tests for mammographies for younger Medicare-eligible women. We had what the American Diabetes Association called the most significant advance in the care of diabetes since the discovery of insulin 70 years ago, in this bill. In a day or so, I’m going to sign the bill reforming the Food and Drug Administration and its procedures. The FDA, I might point out, has already won an award for its groundbreaking work in accelerating the approval of drugs while continuing to meet safety standards to try to increase the availability of possibly life-saving medication more quickly.

So a lot of good things happen. Yesterday I signed an adoption bill which was the product of an overwhelming bipartisan consensus in Congress which will revolutionize adoptions, including adoptions of children with special needs, which also will have a terrific health impact on some of the most vulnerable children in this country. So I want you to see this Commission’s work against that backdrop. There is an emerging consensus in America that while people may not have wanted to bite the whole apple at once in 1994, almost the whole populace wants to keep nibbling away at the apple until we actually have solved the problems of cost, accessibility, and quality for all responsible American citizens.

What this Commission has done today with their health care consumer bill of rights is a truly extraordinary thing—all the more extraordinary because the Commission actually represents all walks of life and all the different financial equities in the health care debate in America. And again, let me say, I thank you very much. We will be much closer to making these rights reality for every American because of the courage of the Commission and because of the composition and the broad experience of the different Commission members.

Throughout our whole history, our strength has come from our families, from our individual
citizens, from our continuing commitment to re-
define and expand the parameters of opportunity
and freedom, and at the same time, to do it
in a way that brought us closer together as a
society instead of dividing us further. Those val-
ues were in America’s Bill of Rights, and they
are certainly in this health care consumer bill
of rights.

Today, our families face so much change, and
of course the changes in the way we work, the
way we live, the way we relate to each other
and the rest of the world are quite profound.
I think, in a major way, the mission of our
administration here must be to try to help
America prepare for these changes so that we
can expand the opportunities they present and
adequately meet the challenges they present, and
so that we can go forward together.

Health care is changing dramatically, as we
all know. The Vice President detailed some of
those things. And we have worked hard to help
people deal with these changes. Now, there are
still particular problems that plainly require spe-
cific solutions. Millions of Americans have seen
their health plans convert to HMO’s and new
kinds of health insurance. In many cases, man-
aged care does bring lower costs and improved
preventive care. And the health care industry,
I believe, as a whole truly shares our goals of
improving quality. And I have never been one
who believed that improving efficiency involved
the sacrifice of quality and, often, not even a
sacrifice of quantity.

Our administration has reduced the size of
the Federal Government by 300,000, eliminated
a few hundred programs and several thousand
pieces of regulation, and I have yet to have
a single American citizen come up to me and
say, why did you get rid of this or that. So
we believe that you can have efficiency and im-
prove quality and often improve the sheer vol-
ume of service as well. That’s one of the things
that technology makes it possible for us to do.

Still, I think it’s fair to say that almost every
family feels some insecurity at the scope and
pace of change in the world, including the scope
and pace of change in the health care industry.
And very often people feel actually lost because
they have come up against this change in a
way that is, to be charitable, not positive.

There are so many people in this country
that because of these changes feel like they’re
always going to be on the losing end of cost-
cutting and quality issues in every sector of life,
maybe even where they work, and they certainly
are most frightened of it when it comes to
health care, even more frightened than when
it comes to their own job, I think, because with
the unemployment rate being low and real flexi-
bility in American labor markets, Americans
have proved that they are incredibly resilient
at getting new jobs. And increasingly, those new
jobs are as good or better than the ones they
lost, something that was not true just a few
years ago. But when it comes to health care,
you can’t be sure of that kind of recovery, and
no matter how much confidence you have in
your own resilience, somebody else has got to
help you.

So even as we are trying to give Americans
more job security in a changing environment
by keeping unemployment low and intensifying
our efforts to help people if they do lose their
jobs to get better skills and find a job that
is as good or better, we have got to recognize
that the elemental insecurity that a loss of con-
fidence in the quality, the accessibility, or the
affordability of health care can breed in our
society is staggering. The flip side of that is
that if we can address those concerns, the in-
creased confidence people have in the stability
of the society as it affects their family and their
lives will make them immeasurably more able
to deal with the challenges of technology and
globalization and change that no one can repeal.

So I don’t think it is possible to minimize
the peripheral impacts, positive impacts of hav-
ing the right kind of consumer bill of rights
in health care and how much it will do to the
sense of stability people feel on the job, how
much it will do to increase employee prod-
cutivity when they’re not worried about their hus-
band or their wife who got cancer 3 years ago,
or if they’re not worried about what’s going to
happen if their kid is in a car accident, like
Peter was. If they know that at least they’re
going to have the best chance they can get,
it will have a terrific impact to stabilize and
sort of harmonize our society in ways that I
think will be immensely positive for the econ-
omy. And obviously, the business leaders on this
Commission agree.

Now, consider the consumer protection issue
in the larger context. Today, Americans receive
consumer protection when they purchase cars,
use credit cards, buy toys for their children.
All this Commission is recommending is that
we extend that kind of protection when a person
visits a doctor, checks into a hospital, or buys into a health plan. Whether it’s traditional health care or managed care, we have to make sure it’s not inferior care. There are basic standards that I believe every American should be able to count on wherever they live, whatever their needs. Those standards ought to be the right of every citizen.

Here is what the health care consumer bill of rights says: You have the right to be informed about your health plan in plain English. You have the right to choose the right doctor for the right type of care; the right to medical services in an emergency wherever and whenever the emergency arises; the right to know all your medical options, no matter how much they cost; the right to respectful care and equal treatment at every health care facility by every health care provider; the right to know your medical records are confidential and only used for legitimate purposes; the right to express your concerns about the quality of care you receive and to take action when that care is inadequate.

This consumer bill of rights, as has already been said, is the product of a broad consensus from a broad group of business leaders and health insurers, working people and health advocates, doctors and nurses. There are still those who oppose it, and that is their right. But this is a case where the national interest must prevail over the narrow interest, where the family’s interest must prevail over the fear of change.

I ask those who are afraid, on the other side, to balance in their equation the fear that has been in the hearts of all the Americans who have confronted the health care system without this consumer bill of rights. We all have to bear our fair share of the uncertainty of change. And that seems to me to be the best argument that we can take to those who do not yet agree that this is the right thing to do.

These protections, in fact, are long overdue, and now we have to act to make them real for all Americans. Some will require Federal standards to be implemented. Where they do, I challenge Congress to make them the law of the land. There will be no more important test in the coming months of our commitment to strengthen our families. And I look forward to working with Congress.

You heard the Vice President say there’s broad bipartisan support for moving forward here. But we shouldn’t wait for Congress to act, especially when it’s not necessary. So today I am acting within my power as President to implement the rights to the extent that I legally can. I’m directing every Federal agency that administers or manages health plans to adopt the protections of the consumer bill of rights, and to report back to the Vice President about where they need legislation to do so. With this step, we can ensure better quality health care for tens of millions of Americans, including all Medicare and Medicaid beneficiaries and all Federal employees. And I challenge all private health plans to adopt the consumer bill of rights voluntarily, to give their members greater confidence and security.

In that connection, I want to thank GTE and one of our Commission members, an officer of GTE, Randy McDonald. They are the first large company to guarantee the consumer bill of rights to all the 400,000 people on their health plan, employees and their family members. It’s an extraordinary step. And if they can do it, others can follow. I don’t know if Randy is here today, but if he is, will you stand up? Thank you very much. God bless you.

Finally, it would be wrong for us to end this without acknowledging that there can be no rights without responsibilities, that our community can only go forward when there is a corresponding responsibility for every opportunity and every right.

The new world of health care offers greater choice and more fundamental opportunities for health than ever before. And today we outlined the rights that every American should have in dealing with that health care system. But every American also has an enhanced obligation to take an active role in his or her own health care and to take responsibility for his or her own health. We spend a lot of money in this country every year that we wouldn’t spend if we’d just go through the day in a sensible way every day. And we have to acknowledge that, and we cannot blame the health insurance industry or the health care providers or anybody else in the wide world for the burdens we impose on ourselves for the extra cost, the lower income, the reduced productivity that are the direct result of daily choices made by individual citizens that they do not have to make in the way they live their lives, and we ought to be honest about that.
And we should never point the finger at other people when we have problems until we have first examined ourselves and what we have to do. And I know a lot of companies are looking at ways to reward responsible behavior and ask that some payment be made for that behavior that imposes costs on society as a whole. That’s a large part of what we’re attempting to do in settling this issue of the marketing and selling of tobacco to young people in America in ways that violate our laws. So I think that has to be a part of this; we can never lose sight of it.

When President Kennedy proposed a consumer bill of rights over 30 years ago, he said, “Under our economic as well as our political form of democracy, we share an obligation to protect the common interest in every decision we make.” I am convinced, as I have said repeatedly, that the coming years will be a time of remarkable breakthroughs in science and medicine, remarkable breakthroughs in the space and in the ocean, remarkable breakthroughs in the structure of human genes. They will also be a time of remarkable opportunity to relate to other people around the world, economically and culturally. They can be, this next 50 years, the best half-century human society has ever known. But we have to look after the common interest. No matter how individualized our computers, our telephones, our fax machines, our self-employment—no matter what happens, we will still have to protect the common interest if we want to have safe streets, good education, good health care, a clean environment, and a healthy economy.

Today, by standing up for individual rights, this Commission has advanced the common interest, and America will be much better for it.

Thank you very much.

NOTE: The President spoke at 12:11 p.m. in Room 450 of the Old Executive Office Building. In his remarks, he referred to Advisory Commission on Consumer Protection and Quality in the Health Care Industry member Peter Thomas, Chair of the Subcommittee on Consumer Rights, Protections, and Responsibilities, who introduced the President. The Office of the Press Secretary also made available the Commission’s report, entitled “Consumer Bill of Rights and Responsibilities.”

Memorandum on the Health Care “Consumer Bill of Rights and Responsibilities”
November 20, 1997

Memorandum for the Secretary of Defense, the Secretary of Labor, the Secretary of Health and Human Services, the Secretary of Veterans Affairs, the Director of the Office of Management and Budget

Subject: The Health Care Consumer Bill of Rights and Responsibilities

Last spring, when I appointed the members of the Advisory Commission on Consumer Protection and Quality in the Health Care Industry, I specifically charged them to develop a consumer bill of rights. This period of rapid change and experimentation in the way Americans receive and pay for their medical care holds the promise for improved quality, greater choice, and lower expense. At the same time, we must identify and protect certain fundamental rights of patients and their families so that, whatever health care delivery system they choose, they can obtain the information and care they need when necessary.

Health care consumers also need to understand their responsibilities in a changing health care environment to ensure that they get the best possible care. Confirming such rights and responsibilities is critical to ensuring that the quality of medical care does not suffer as we seek to expand access and improve efficiency of delivery.

The Consumer Bill of Rights and Responsibilities in Health Care, issued today by the Commission, fully lives up to my high expectations. The members of the Commission have brought to bear their own considerable abilities and have obtained information from a wide range of sources. This Bill of Rights and Responsibilities is a comprehensive and thoughtful document.