

Remarks at Johns Hopkins Hospital in Baltimore, Maryland  
July 13, 2001

Thank you very much. Dr. Miller, it's my honor to be here in the number one hospital in the United States to talk about an incredibly important issue. And that's Medicare and how to make sure it's relevant as we head into the 21st century.

I want to thank you for giving me a chance to come. I'm honored to be traveling today with Tommy Thompson. I knew Tommy as a Governor. I knew he'd be a great Secretary of Health and Human Services, and he's proved me right. I appreciate you being here, Tommy.

I want to thank Dr. Brody. I want to thank Mr. Peterson. I want to thank Congressman Cummings, Congressman Ehrlich for being here as well. Mr. Mayor, thank you very much for coming. I appreciate the baseball bat with Cal Ripken's signature on it. [*Laughter*]

I am so proud of the health care system of America. We're the best in the world. We've got the best docs in the world. We've got the best research in the world. We've got the best hospitals in the world. And I intend to keep it that way. It's really important that our health care be responsive and innovative and rewarding.

And there are some bills coming up in front of Congress now that will help determine the course of medicine. One is called the Patients' Bill of Rights. It's really important that we not have our system laden down by unnecessary lawsuits, that when we pass legislation, we keep patients in mind and make sure patients have direct access to specialists and make sure patients have the capacity to take their complaints to an independent review organization so that the complaint can be remedied quickly, not held up in a court of law.

I think we'll get a pretty good piece of legislation out. I certainly hope so, because it's part of a reform process, all aimed at

making our health care system focus on patients and their relationship with doctors.

The big issue also confronting us is Medicare. The other day in the Rose Garden I laid out a Medicare set of guidelines, and I'm going to reiterate those here today. But I started off my talk by reminding people that another Texas President, Lyndon Johnson, started Medicare. And he presented former President Harry Truman with the first Medicare card, as he outlined the dream of Medicare.

And the truth of the matter is, Medicare has met the goals of America. Seniors are better off as a result of Medicare. But the problem with Medicare is, medicine changes, and Medicare has not. Medicine in the United States is changing dramatically, and I witnessed firsthand some of the fascinating technologies taking place in your eye clinic here and incredibly important changes when it comes to kidney transplants.

And yet, oftentimes, as innovation occurs in the health care area, Medicare is stuck in the past. It won't change, because it's too bureaucratic. The other day I said, you know, 1965 is when the program started, and even though a lot of people think the 1965 Mustang was the best car ever made, it wasn't very modern. And even though Medicare may be the best invention of man, it's not very modern today.

And so, in the Rose Garden and here again at Johns Hopkins, I call upon the Congress to work with the administration to modernize Medicare, to make sure the Medicare system reflects the great hopes and promises of the health care in the 21st century. And what does that mean?

Well, it means, first and foremost, that anybody who likes Medicare today can stay on Medicare; that if you're happy with the Medicare system, getting up in your years, you're not interested in change, that you

should be allowed to stay in the system as it is. In other words, no change, no threats, no problems.

However, Medicare also ought to do what it does for Federal employees. The Federal Congress ought to say, "If it's okay for Federal employees to have a variety of choices from which to choose, so should America's seniors. If it's okay for people who work for the Federal Government to be able to pick and choose a plan that meets his or her needs, seniors ought to be able to do that as well."

So we need to bring new opportunities and options into Medicare for America's seniors, all of which must include prescription drug benefits, all of which must understand that part of the innovation that has taken place in the medical arena has included brandnew prescription drugs and new opportunities for people to have prescription drugs, and prescription drugs needs to be an integral part of Medicare, not only the system that exists today but whatever options seniors choose to use in the future.

Thirdly, any good Medicare system will create competition for service and will reduce premium.

Fourthly, any good Medicare system must have stop-loss insurance provided for patients. I mean, we have a system today in Medicare where there's no telling how much people pay, depending upon the complications on the procedure. And that's not right. We need stop-loss. We need to say to seniors, there is certainty when it comes to your Medicare bills. And that's not the case today in Medicare.

And at the same time, we've got to recognize that we need to take care of low-income seniors as well. There are going to be some seniors that simply aren't going to be able to afford much. And our Government must be kind and generous in taking care of those seniors.

And finally, this system needs to be on sound financial footing. Trying to figure out Medicare financing is pretty confusing for

the layman. We've got one fund where everybody says it's got a surplus; we've got a second fund that's in significant deficit. And that kind of accounting has got to stop. We need honesty in accounting when it comes to Medicare, by combining both Part A and Part B into a unified trust, so the American people know exactly what's happening in the Medicare system.

Those are the guidelines I laid out. I'm pleased to report to you, yesterday in the Rose Garden there were some Democrat Members, there were some Republican Members, and there was even an independent Senator. [Laughter] This is an incredibly important issue.

Now, I understand politics pretty well, and I'm afraid the American people do too. They've seen what happens with the Medicare issue. That's why, in the political vernacular, they call it "Mediscare," because somebody who comes along and tries to do what's right will have the issue used against them for political purposes.

The truth of the matter is, I'm not afraid of the issue, because it's the right thing to do. We've got a lot of baby boomers, like me, fixing to retire. And we had better make sure we modernize the system to make sure the system is whole and sound for tomorrow's seniors.

But we also have an obligation for today's seniors. And the idea that many seniors can't access the latest technology, many seniors on Medicare don't have the same benefit that other seniors do in the private markets—who've got private insurance—just simply is not right.

And so it's time for the United States Congress to set aside the kind of political bickering that has tended to dominate our Nation's Capital, and to focus on what's right for the people—it's to seize this moment before it's too late, to come together, both parties coming together, to modernize Medicare, to make it sound but also to make sure it's a compassionate system and one that works.

Health care is an incredibly important part of our country. It's what sets America apart. It makes our land so incredibly unique. And those of us who hold high office have the obligation to make sure the system works as best as it possibly can.

I want to thank the docs for your hard work and your compassion. My hope is that with proper reforms, we'll continue to attract the best and brightest in our society to the medical profession, so that doctors actually get to perform their talent, as opposed to spend hours on paperwork; that you get to spend more time in your offices, as opposed to the courtrooms; that you get to practice the medicine for which you've been trained.

I want to thank the folks here at Hopkins for setting up a fine example for hospitals all across the land. And I want to thank my fellow citizens for giving me a chance to be the President of the greatest country on the face of the Earth.

Thank you for letting me come by, and God bless.

NOTE: The President spoke at 2:45 p.m. in Hurd Hall. In his remarks, he referred to Edward D. Miller, Jr., M.D., chief executive officer, Johns Hopkins Medicine; William R. Brody, Ph.D., president, Johns Hopkins University; Ronald R. Peterson, president, Johns Hopkins Hospital; Mayor Martin O'Malley of Baltimore; and Baltimore Orioles third baseman Cal Ripken, Jr.

## Statement on Climate Change Review Initiatives *July 13, 2001*

Last month I announced the fundamental principles to guide a scientifically sound and effective global effort to reduce the buildup of greenhouse gases in the atmosphere. As I said then, my administration's climate change policy will be science-based, encourage research breakthroughs that lead to technological innovation, and take advantage of the power of markets. It will encourage global participation and will pursue actions that will help ensure continued economic growth and prosperity for our citizens and for citizens throughout the world.

Today I am pleased to report on specific initiatives that have been advanced in the past month by my Cabinet-level Climate Change Working Group. These initiatives represent important steps in putting our principles to work through partnerships with other nations, industry, and non-governmental organizations. They are designed to increase our scientific understanding of climate change, to tap the enor-

mous promise of technology in addressing greenhouse gas emissions, and to promote further cooperation on climate change with our partners in the Western Hemisphere and beyond.

To advance the science of climate change, the Secretary of Commerce has convened an interagency work group charged with developing a Federal research plan that will prove vital to increasing our understanding of the dimensions and dynamics of climate change. Prominently, NASA will invest over \$120 million in the next 3 years in research on the natural carbon cycle, climate modeling, and the link between atmospheric chemistry and climate to help reduce uncertainties in the science highlighted by the recent National Academy of Sciences report requested by my Cabinet-level working group.

To advance technological innovation, the Department of Energy has just signed agreements to begin two significant new projects to study carbon sequestration. The