

The President. Thank you. There you go. Kind of looks like you.

Anyway, thank you all for coming. God bless. I appreciate the wonderful story that's come out of your family.

Q. Mr. President, how did you hear about the story, and what's your reaction?

The President. Saw it on TV. Saw it on TV, and I wept, just like a lot of other people. It's just one of those stories that touched a lot of people's heart.

Q. Did somebody play it for you, or did you just see it?

The President. I can't remember exactly how it happened. Probably somebody played it for me, you know, being the President and all. But it's a wonderful tale. God bless.

NOTE: The President spoke at 10:50 a.m. at the Greater Rochester International Airport. In his remarks, he referred to Jason McElwain, an autistic student at Greece Athena High School who scored 20 points in his first varsity basketball game; and James Johnson, coach, Greece Athena High School boys basketball team.

Remarks in a Discussion on Medicare Prescription Drug Benefits in Canandaigua, New York March 14, 2006

The President. Thank you all. Be seated. Thank you all very much. Thanks for coming. Thanks for the warm welcome. Thanks for giving me a chance to come and talk to you about an important issue for our seniors.

Before I get started, though, I do want to thank the folks here at Canandaigua Academy for letting me come by to say hello. The assistant principal, John LaFave, kindly greeted me behind stage here. As I understand, some of the students are here in the room, and some are watching. I'm glad to provide you a convenient excuse to get out of class. [*Laughter*] I want to thank the superintendent, Steve Uebbing, for greeting me as well.

For all the teachers who are here and are paying attention to this, thanks for being a teacher. It's a noble profession. It's an important—it's really important. And speaking about teachers, I married one. [*Laughter*] She sends her love. Laura W. Bush is a unique woman who is obviously a patient woman. [*Laughter*] When I married her, she was a public school librarian who wasn't that much interested in politics.

Now she's the First Lady of the United States. And I'm proud to call her First Lady, and I love to call her wife. And she sends her love too.

I want to thank Randy Kuhl; he served with distinction in the United States Congress. He said, "Look, you've been in my district before; come back up here if you want to be with some just good, down-to-earth people that care about the future of the country." And one of the reasons I'm here is because of Randy's invitation.

I also want to thank Congressman Sherry Boehlert, right next door. I appreciate you being here. Mighty New York Yankee fan, I want you to know—[*laughter*]—fierce baseball—advocate for baseball. Plus, he's a good Congressman.

I want to thank Antonia Novello. Dr. Novello, where are you? She's here—oh, there you are. Good to see you. Appreciate you coming. She's the commissioner of health for the State of New York. I'm honored you're here. I'll tell old 41 I saw you. That's the number for my dad. See, he's the 41st President; I'm the 43d President, so—I'll tell him I saw you.

I want to thank the mayor, who is here—Madam Mayor, where are you? Thanks for coming. Yes, I appreciate you coming. Thanks for your hospitality. It's great to be in your city. I want to thank all the other folks who are State government and local government.

Most of all, I want to thank our panelists. There are different ways to describe an issue that's of concern to the American people. And so one way to describe the issue is to have others help describe it for you, and that's what we're doing. This is a opportunity for me and others to share thoughts about Medicare.

The role of government is to provide good health care for our seniors. We made that commitment, interestingly enough, when Lyndon Baines Johnson was the President. When I got to Washington, I took a look at the Medicare system to determine whether or not Medicare was providing excellent health coverage. If you're going to provide health coverage for somebody, you want to make sure it works. I found a system that was old and stale. It really wasn't a modern health care system. Medicine had changed; Medicare had not changed.

For example, the Government would pay \$28,000 for an ulcer surgery for a senior on Medicare but not a dime for the prescription drugs to prevent the ulcer surgery from being needed in the first place. There was a lot of times the cures for disease would lag behind the Government saying it's okay to provide that as a benefit. In other words, it was an old system.

So I worked with the Congress, and we've modernized Medicare. And for the first time, seniors can now get a prescription drug benefit under Medicare. And that's what we're here to talk about—the benefits of such a program; the need for people to, at the very minimum, take a look to see whether or not that program makes sense, and if it does make sense, to sign up on it. You'll hear me make the case: It's a good deal. Now, don't take my

word for it. I would hope people would seek advice, seniors seek advice as to whether or not it's a good deal. Twenty-six million seniors so far have taken a look and said, "I think it's worthwhile to sign up."

And so part of the—the main reason I'm here is to talk about the Medicare reform plan, the prescription drug benefit, all aiming to convince people to the very minimum to take a look. I think you're going to like what you see.

One of the things that was necessary in Medicare to make it work better was to have—was to start exercising preventative medicine, to analyze and diagnose disease early, before they become acute. Interestingly enough, in the new Medicare reform law that I signed, for the first time, we're beginning to screen—offer screenings and a free physical for seniors when they sign up for the program. And that's important. Part of making sure health care is modern is to recognize that if you catch disease early, it makes it much easier to cure the problem.

And so not only are we talking about a prescription drug benefit that's important to make sure Medicare and medicine is modern, but we've now got screenings and preventative care—annual screenings and a "Welcome to Medicare" physical. So if you're thinking about signing up, think about having an additional benefit of having a screening or a physical. And that's an important part of making sure that our systems are modern and Government is fulfilling its responsibility to provide good, quality health care for our seniors.

The benefit is really important because it makes sure that seniors have choices as well. See, I've always believed that the consumer has got more options from which to choose, it provides higher quality. I'm one of these people that we ought to—that says, "We ought to trust people; we ought to trust their judgment." So one of the things about the reform plan that went

forward is, not only does it provide a prescription drug benefit, but it says seniors ought to have a menu of opportunity, different options from which to choose to meet their needs.

And that created some confusion initially. And I knew it would, as a matter of fact. I knew some seniors on Medicare really didn't want to be confronted with any choice, and that the myriad of options would create a little confusion to begin with. But when people have taken time to look at the options and have sought help—whether it be a son or a daughter, or a community-based organization, or a faith-based organization, or 1-800-MEDICARE—they begin to realize that maybe the system is geared toward them. The more options a senior has to choose from, the more likely it is that the benefit is going to be tailored to his or her needs. And that's important for people to understand.

If you're a low-income senior, the Government is going to pay over 95 percent of your costs. Low-income seniors must take a look at this deal. I'm telling you, it's a good opportunity for you. You know, there was a period of time when seniors had to choose between rent and prescription drugs, and that wasn't right in our country. And this bill I signed is taking care of that problem, so people don't have to make the zero-sum choice. Prescription drugs has become an integral part of health care for a lot of folks, as you know.

The competition is good for consumers; it happens to be good for our taxpayers too. One of the interesting things that has happened is, is that because there are people saying, "I can do a better job for you," if you're a senior, the anticipated premiums for the drug benefit has dropped from \$36—\$37 a month to \$25 a month in a 6-month period of time. In other words, people looked at the bill, and they said, "Well, this is what we think it's going to cost a senior for drug benefits, 37 bucks

a month—not low-income seniors but seniors." And instead, the cost is \$25 a month.

The anticipated—in Washington, you know, we spend a lot of time guessing what something is going to cost. And the anticipated cost to the taxpayers for this drug benefit is 20 percent lower in the first year than anticipated. In other words, it matters when people have choice. It matters not only for quality but for price. The average senior on Medicare will get a—will see their prescription drug bills cut in half. If you're a low-income senior, the Government is going to pick up a significant portion of your tab. If you're an average senior—average senior, you're going to see your drug bills cut in half. If you're a taxpayer, the anticipated costs are significantly lower than we thought. It's working. It makes a lot of sense.

Part of my mission here, as I said earlier, was to convince people to find out about the program. If you haven't looked at the new prescription drug benefit, do so. Call 1-800-MEDICARE, or go to medicare.gov on the Internet. We're beginning to see some surveys from people who are actually using the program, and what's interesting is a lot of the seniors are getting information from the Internet. There's—and you'll see it's user-friendly. It's been designed to make it easy for the senior to take advantage of this new program.

If you're interested in the program, get your son or daughter to help you. And if you're a son or daughter and your mom or dad is eligible for Medicare, make sure you at least take time to give your parent the benefit of finding out what's available. If you're an average-income senior, you're going to get one-half of your prescription drugs cut. If you're a poor senior, this Government is going to pay over 95 percent of the cost of your prescription drugs. It makes a lot of sense.

I called upon a fellow named Dr. Mark McClellan to join me in this effort. He's here. That's him right there. He is a—

he's a Ph.D., see. I'm a C student. [Laughter] Look who's the President and who's the adviser. [Laughter]

Dr. Mark is in charge of what's called CMS. He'll tell you what that means. We use a lot of initials in Washington. The way I like to describe it to you is, he is in charge of making sure the Medicare reform plan is explained, rolled out, and administered properly.

And so, Mark, thanks for coming. Welcome.

Mark B. McClellan. Mr. President, it's great to be here. CMS is—

The President. Ph.D. in what?

Dr. McClellan. In economics, and I'm a physician as well.

The President. See, he spent a lot of time in the classroom. [Laughter]

Dr. McClellan. It's great to be part of the team, sir.

The President. We're glad you're here. Tell people what CMS stands for, and tell them what your job description is.

Dr. McClellan. CMS is the Center for Medicare and Medicaid Services. It's the Agency that oversees the Medicare program and also Medicaid. Overall, we're providing health insurance for more than 90 million people. And this is a very important year for us, as the President said. We're making some major improvements in the Medicare program so that seniors will not just think of us as the program that's going to pay the bills when they get sick but the program that's going to help them stay well and live a longer and healthier life. And we're working with States like New York to improve the Medicaid program for people with limited incomes as well.

The President. So we just cranked up. Anytime Washington passes a new law, sometimes the transition period can be interesting. And so we had some early challenges.

Dr. McClellan. That's right. In fact, I was just talking with Diane about this beforehand. Diane is a pharmacist. You're going to hear from her in a minute.

The President. No, I'm the emcee. [Laughter] You're the explainer. [Laughter] You know how these Ph.D.s are. You know, they kind of—[laughter].

[At this point, Dr. McClellan made further remarks.]

The President. How about the phone lines? People have—

Dr. McClellan. The phone lines are much better wait times. If you call 1-800-MEDICARE, that 24/7 help line that we make available so seniors can find out exactly what this program means for them, your wait time now is an average of two minutes or less. So you can get through very quickly and find out what this program means for you.

The President. So would you recommend people—a loaded question—kind of leading the witness, and I'm not even a lawyer. [Laughter] Why would—why should people sign up for this?

Dr. McClellan. Well, now is a really good time to find out about it. We've got hundreds of thousands of people enrolling each week now, and we're ahead of what I think is going to be a rush towards the end of April and the first part of May as we approach the enrollment deadline. It's a 6-month period that people have to make a decision about the new coverage.

People are finding that they can save typically 50 percent on their prescriptions—or more—compared to not having coverage. And Consumer Reports pointed out recently that if you're willing to look at generic drugs, or other drugs that work in a very similar way to the ones you're taking now, you can save 70 or 80 percent. And if you call 1-800-MEDICARE, go to medicare.gov, or go to one of the many events happening all over the country, including right here in Canandaigua, there are places to go to get face-to-face help right here to find out about what this means for you. You can save literally thousands of dollars

on your drug costs, and you can be protected for the rest of your life against high prescription drug costs in the future.

The President. Yes, describe that—the catastrophic care component of Medicare.

Dr. McClellan. Well, the drug benefit will, in most cases, start paying right off the bat. Most seniors who have signed up are already saying they're saving money with the program just 2 months into the benefit. There is what's called catastrophic protection as well. So if you have very high drug expenses, your coverage is never going to run out. For people who have higher—relatively high incomes, if they spend \$3,600, Medicare will then pick up as much as 95 percent of all their subsequent drug costs. So no matter what your drug needs are for the rest of your life, you're going to be protected against very high expenses.

And, Mr. President, as you said, for people with limited means, about one in three seniors is living just on a fixed income—they get extra help, so they pay, typically, just a few dollars for each prescription. It's very important help.

The President. People need to take a look. I get out of Washington, people say, "Well, I'm not so sure we can trust the Government all that much." Take a look. One of the reasons I have come is to ask people who are eligible for Medicare just to explore the options. It's a good deal.

For the taxpayers who are here as well, we're doing an—we're providing an important service for our seniors. I repeat to you: The Federal Government has made the commitment to our seniors for good, modern health care. I happen to believe if that's the commitment, we ought to keep it. And the bill that I had the honor of signing keeps that commitment.

And so, Mark, thanks for coming. Stay on it. I'm a results-oriented guy. When I heard that it took a while for people to get on that—call that number and somebody wouldn't answer, I started asking, why? And they're solving it. We're making sure this opportunity for our seniors is done

in a cost-effective, efficient way. We want it to be user-friendly for our seniors.

Again, I repeat: I fully understand some people are perfectly content with life the way it is, and they're not interested in looking at forms and opportunities and choices. I would urge you to get somebody to help you take a look at the opportunities available for you.

Somebody who is helping people understand the opportunities is Susan Wilber. Susan, what do you do? *[Laughter]*

Susan Wilber. Well, I'm an A student, always was, so I became a health care professional. *[Laughter]*

The President. Look, you don't need to rub it in, you know.

[Ms. Wilber, director, The Brighter Day, made brief remarks.]

The President. That's good. If you're a church or community-based group or a synagogue, talk to your folks who go to your facility and encourage them to contact 1-800-MEDICARE, medicare.gov, Susan. I mean, there's all kinds of people like Susan.

What have you found to be the response initially, today? Give us a sense for—

Ms. Wilber. Initially, there was a lot of panic and confusion, a lot of new information coming from all directions—the newspaper, the television, the mailings. I think that we're a strong health care system in this community and that we're all well-connected as a health care network, so people were very willing to bring their concerns to us and to ask for help. And that's certainly a confidence that we've instilled in people. And I'm very grateful for that opportunity.

But we've set up individual meetings; we've set up situations where we meet with family members; we've done conference calls with families out of State to help their loved one here. So it's really been quite a collaborative effort to get people signed up.

The President. Thanks. Thirty—26 million people have signed up. That requires

a lot of community effort around the country. And I want to thank Susan and others who just make sure the opportunity is at least presented in a way that people can make a choice. And the amazing thing about our country is we've got a lot of really decent souls, like Susan, at the community level who are very concerned about somebody else, that they want to help somebody. And one way to help somebody is to let seniors know about the opportunities available in this Medicare reform.

And you're signing up quite a few people, I understand.

Ms. Wilber. We've had quite a few people sign up initially.

The President. Good. How's it going?

Ms. Wilber. It's going well. There was a little bit of confusion at first, but—

The President. But, I mean, you don't want to recommend somebody to sign up and they say, "Why did you get me to sign up for this?"

Ms. Wilber. For the most part, it's worked very well. We've gotten some excellent feedback from our customers.

The President. Good. Thanks for being here.

Ms. Wilber. Thanks for having me.

The President. My call is, please help. I really hope a son or a daughter takes time on behalf of their mother or father and get on the Internet, medicare.gov, and take a look. You ought to do it. I think it happens to be a duty. If your mother or father is not that interested in getting on the Internet, get on with them. Walk through the steps and take a look at what's available.

We've got with us Diane Lawatsch. Welcome.

Diane Lawatsch. Thank you, Mr. President. I'm happy to be here.

The President. You're gainfully employed?

Ms. Lawatsch. I am gainfully employed.

The President. How? [Laughter]

Ms. Lawatsch. Uh-oh. [Laughter] I am a pharmacy operations manager for

Wegmans Food Markets. I've been a registered pharmacist for almost 18 years. And a pharmacy operations manager helps to oversee the operations in pharmacy. And I have four stores in this region, and the Canandaigua store is one of them.

The President. Good. So give us a feel for how you view the Medicare bill, how it came to be, your reaction. Obviously, you're very much involved in prescription drugs.

[*Ms. Lawatsch made brief remarks.*]

The President. Obviously, pharmacists have got a stake in this. I mean, people show up at the counter, and there's a lot of pharmacists around the country who are saying, "Can we help you?" It's, frankly, in the interest of the pharmacist to give people the opportunity to get a very generous prescription drug benefit from the Government. I don't know if you've seen attitudinal changes yet amongst the people using the program.

Ms. Lawatsch. Well, absolutely. We definitely see customers come in that say, "Gee, I've never had coverage before," and now they have the coverage. One of the things, too, that we did at Wegmans was we started over a year ago preparing and investing in our people and putting our pharmacists and our technicians through training programs. We had four different online training courses so that they were prepared come January, and that helped a great deal.

The President. Good. Thanks. You're on the frontline.

Ms. Lawatsch. Yes, we are.

The President. So we've got Bob and Eleanor with us. Isn't that right?

Bob Wisnieff. Yes, we're here.

The President. So, in my family, the wife starts speaking first. [Laughter]

Eleanor Wisnieff. Okay, I'll go first.

[*Mrs. Wisnieff, retiree, made brief remarks.*]

The President. I like the idea of somebody saying, "Here are three choices from

which to choose.” See, if you give people an opportunity to choose, it means they’re more likely to be able to find something that meets their needs. It’s a different approach, isn’t it? The older—one approach is, “We’ll tell you what you need; the Government probably knows a little better than you do, anyway; we’ll think on your behalf.” What this bill says is, is that let’s have some options available so people get to tailor the options to meet their needs. And what ends up happening is, is that there’s choice. When we trust seniors with judgment, it helps on price and it helps on quality.

Do you have anything to offer, Bob?

Mr. Wisnieff. Well, I think Eleanor has pretty much got the punch line of my whole thing, so I’ll have to be a bit of a Paul Harvey and say “the rest of the story.” [Laughter]

The President. Pretty good. How long have you all been married?

Mr. Wisnieff. Fifty-two years.

The President. Fifty-two years?

Mr. Wisnieff. Fifty-two happy years. I hope you have the same.

The President. He said 52 happy years, by the way. Thanks for setting a good example.

[*Bob Wisnieff, retiree, made brief remarks.*]

The President. The key is saving a little money in retirement. They’re on a fixed income. They’ve got now a prescription drug benefit. They don’t have to make the awful choice between food, electricity, and prescription drugs. And they’re actually putting a little extra money in their pocket. If that’s true—is that true?

Mr. Wisnieff. That’s true.

The President. Okay. If it’s true, you ought to look at it. Senior citizens not only here in upstate New York but all across the country ought to look at this plan, ought to look at the opportunities. If you like it, sign up. It’s a good deal. If you need help, ask for help. If you want to find out more about it, call 1-800-MEDI-

CARE or get on the Internet, medicare.gov.

For the students listening here, one of my jobs is to help explain things to the American people, explain why we make the decisions we make. Today I’ve tried to explain to you why the Medicare system needed to be changed and some of the principles inherent in the change that benefits our seniors. Part of explaining something is to have people who are actually involved with the program, people that are helping to educate, people that know something about the pharmaceutical industry, people who are benefiting from the plan, to come and share their experience as well. And so I want to thank you all for giving me a chance to come.

One thing I didn’t say—I do want to conclude by saying, Dr. Steve Uebbing, who is the superintendent of schools—when I came through the line, he told me about his son Daniel’s service in the United States military. I meant to thank a good, proud dad, but more importantly, I want to thank his son for volunteering to serve his country, for volunteering to serve.

And for the students listening, I urge you to find out a way to serve your community. Mentor somebody; help feed the hungry; provide shelter for the homeless. If you’re interested in volunteering for the military, that’s one way to serve. Peace Corps is a fantastic opportunity to serve your country. Being a teacher is a fantastic way to serve your country. The strength of the United States of America is not the size of our military or the size of our wallets; the strength of the United States of America is found in the hearts and souls of decent, honorable, compassionate people who have heard a call to serve something greater than themselves.

Thank you all for giving me a chance to come by. I ask for God’s blessings on you all and on the United States of America. Thank you.

NOTE: The President spoke at 11:45 a.m. in the Canandaigua Academy Theatre. In his remarks, he referred to Stephen J. Uebbing,

superintendent, Canandaigua City School District; and Mayor Ellen Polimeni of Canandaigua, NY.

Remarks Following a Visit to Ferris Hills at West Lake Senior Center in Canandaigua

March 14, 2006

The reason I have come is I'm trying to explain to people the benefits of a new Medicare program. Congressman Randy Kuhl asked me to come, and so I did. It shows how influential he is.

I thought the system needed to be changed because it didn't provide a modern form of medicine. A lot of it was good, but some of it was stuck in the past. And so I worked with Congress to get a prescription drug benefit added on to Medicare. The problem is, is that when something changes, people get a little concerned. You know, they say, "Well, I'm not so sure I want to see a change; I'm not so sure change is something that I'm interested in." And I knew that was going to be the case.

But I also knew that if we could convince people who pay attention to take a look and see what options were available, that people would begin to make rational choices, particularly if they had some help. And so I want to thank the Thompson Health Care Group for helping. And as I said at the high school over there, I said,

"If your mom or dad could use a little Medicare, you owe them the opportunity to explain different options and show what's available." But the pharmacists are helping a lot to say, "Look, you ought to take a look at the program."

So we're in your community to urge people to, you know, kind of step back, see what's available, design a program that meets your needs, if that's your interest, and it's going to save some money. That's the key, because this—the benefit is costing less than anticipated, as a result of competition and choice. It's really worthwhile looking at.

I've spent a lot of time, as my administration spends a lot of time, talking about how to get people—information into people's hands. And so that's why we're here. Thank you for giving us a chance to come by and visit with you. It looks like you've got a beautiful facility.

Okay, well, thanks to the press for coming.

NOTE: The President spoke at 1:09 p.m.

Remarks on Medicare Prescription Drug Benefits and a Question-and-Answer Session in Silver Spring, Maryland

March 15, 2006

The President. Listen, thank you all for coming. First of all, I'm proud to be traveling with a Cabinet Secretary. He runs Health and Human Services. His job is to

make sure that the Medicare plan works the way it was designed to work.

We've come to answer some questions, if you have any—about any subject.