

Nomination for Assistant Administrators at the Agency for International Development

October 26, 1993

The President today announced his intention to nominate Thomas A. Dine as Assistant Administrator for Europe and the Newly Independent States and Jill B. Buckley as Assistant Administrator for Legislation and Public Affairs at the Agency for International Development, U.S. International Development Cooperation Agency.

"Thomas Dine and Jill Buckley are each experienced in their fields, and I am confident they will work hard to pursue AID's important goals," the President said.

NOTE: Biographies of the nominees were made available by the Office of the Press Secretary.

Nomination for an Assistant Secretary of Commerce

October 26, 1993

The President announced his intention today to nominate Washington, DC, lawyer Susan Esserman to be the Assistant Secretary of Commerce for Import Administration.

"Susan Esserman is an expert in international trade policy who has been widely recognized as one of the leaders in that field," said the President. "I am pleased that she has agreed to serve at the Commerce Department."

NOTE: A biography of the nominee was made available by the Office of the Press Secretary.

Remarks on Presenting the "Health Security Act of 1993" to the Congress

October 27, 1993

Thank you very much. Thank you, Mr. Speaker, Senator Mitchell, Senator Dole, Congressman Gephardt, Congressman Michel. To all the distinguished Members of the Congress from both Houses and both parties who are here today, I thank you for your presence and your continuing interest. I thank you for giving Hillary and me the opportunity to come here to Statuary Hall.

This has been a remarkable process. I can never remember a time in which so many Members of Congress from both parties and both Houses had so consistent and abiding commitment to finding an answer to a problem that has eluded the country and the Congress for a very long time. I want to thank the hundreds, indeed thousands, of people who have worked on this process which has led to the bill. I want to thank the literally hundreds of Members of Congress who attended the health care university recently, an astonishing act of outreach by a bipartisan majority of the United States Congress to try to just come to grips with the enormous complexity and challenge of this issue.

I believe the "Health Security Act," which I am here to deliver, holds the promise of a new era of security for every American and is an important building block in trying to restore the kind of self-confidence that our country needs to face the future, to embrace the changes of the global economy, and to turn our Nation around. A nation which does not guarantee all of its people health care security at a time when the average 18-year-old will change jobs eight times in a lifetime and when the global economy is emerging in patterns yet to be defined can hardly have the confidence it needs to proceed forward. If our Nation does that, I believe we will do as we approach the 21st century what we have always done: We will find a way to adapt to the changes of this time; we will find a way to compete and win; we will find a way to make strength out of all of our diversity.

This legislation, therefore, literally holds the key to a new era for our economy, an era in which we can get our health care costs under control, free our businesses to compete better in the global economy, and make sure that the men and women who show up for work every day are more productive because they're more secure and they feel that they can do two important jobs at once: be good members of their family, be good parents and good children, as well as good workers.

This is a test for all of us, a test of whether the leaders of this country can serve the peo-

ple who sent us here and can actually take action on an issue that, as tough and complex as it is, is still absolutely central to moving us forward. And it is a test that I believe we can all pass. And so I have today just one simple request: I ask that before the Congress finishes its work next year, you pass and I sign a bill that will actually guarantee health security to every citizen of this great country of ours.

The plan that we present today, as embodied in this book as well as the bill, is very specific, it is very detailed, and it is very responsible. And though we will debate many points, and we should debate many points, let me just make clear to you the central element of this plan that is most important to me: It guarantees every single American a comprehensive package of health benefits. And that, to me, is the most important thing, a comprehensive package of health care benefits that are always there and that can never be taken away. That is the bill I want to sign. That is my bottom line. I will not support or sign a bill that does not meet that criteria. That is what we owe the American people.

Now, as we enter this debate, which I very much look forward to, I ask that we keep some things in mind. First of all, when we debate something that the administration recommends or something some of you recommend and it seems bewildering in its complexity, I ask that it be compared against what we have now, because none of us could devise a system more complex, more burdensome, more administratively costly than the one we have now. Let us all judge ourselves against, after all, what it is we are attempting to change.

Secondly, I ask that we follow the admonition that Senator Dole laid for us: Let us all ask ourselves as clearly as we can, who wins, who loses, why is the society better off, and how much does it cost or save? And if we know, let us say. And if we don't know, let us frankly admit that we may not know the answer to every question.

We have gotten in a lot of trouble as a nation, I think—and I see Senator Domenici, one of our great budget experts, nodding his head—pretending that we could know the answer to some things that we don't know the answer to. We have tried to be as con-

servative as we could here in making sure that we have not overclaimed for cost savings or overestimated how small the cost of things will be. Therefore, I think we have, in our plan, put more money in than it will cost to implement this plan, but better to be wrong on that side than the other side. We have really worked hard here. And I think we must all do that.

Thirdly, I think we should all say what are the principles that animate this debate. For us, the principles are simple. They're the ones I outlined in my address to Congress, but let me briefly state them again. They are: security, over and above everything; simplicity, the system we create must be simpler than the one we have; savings, we cannot continue to spend for what we have 40 percent more than any other country and much more than that over and above what our major competitors, Germany and Japan, spend to cover fewer people; quality, we must not ask any American to give up the quality of health care; choice, people have to have choice in the private system of health care. Our plan would provide more choices to most Americans and fewer choices to none. And there must be responsibility. To pretend that we can control the costs and take this system where it ought to go without asking more Americans to assume more personal responsibility is not realistic. We have too many costs in our system that are the direct result of personal decisions made by the American people that lead to rampant inflation based on personal irresponsibility. And we have to tell the American people that and be willing to honestly and forthrightly debate it.

Now, our plan guarantees comprehensive benefits and focuses on keeping people healthy as well as treating them when they're sick by providing primary and preventive care. It reduces paperwork by simplifying the forms that have to be dealt with by doctors, by hospitals, by people with insurance. And that's important. Every one of us can agree on at least this: that the paperwork in this system costs at least a dime on the dollar more than any of our major competitors pay. We must deal with this. That's a dime on a dollar in a \$900 billion health care system. We can't justify that. It has nothing to do

with keeping people well or helping them when they are sick. We have to crack down on fraud. We know our system today is so complex we waste tens of billions of dollars in fraudulent medical expenses that we can change. We ought to help small and medium-sized businesses, self-employed people, and family farmers to have access to the same market power in holding their costs down that big business and Government have today.

I agree with Senator Dole or whoever it was that said this term "alliance" sounds foreboding, but an alliance is basically a group of small and medium-sized businesses and self-employed people and farmers designed to give them the same bargaining power in the health care market that only the Government and big business has today. We must do that. We cannot expect people to be at that kind of disadvantage, especially since many of them are creating most of the new jobs for the American economy.

We should, and we do, protect our cherished right to choose our doctors. Indeed, we try to increase choices for most Americans. Most workers insured in the workplace have now not very many choices about what kind of health care they receive; only about one in three have choices. Under our plan, all workers would have more choices in the kind of health care they receive without charging their employers more for the workers having the option to make that choice.

We preserve and strengthen Medicare. We give small businesses a discount on the cost of insurance. We invest more in medical research and high-quality care. We must never sacrifice that. That's something we want America to spend more on than any other country. We get something for it. It's an important part of our economy and an important part of our security. We should continue to do that.

Our plan rejects broad-based taxes but does ask everyone not paying into the system, that is still there for them when they need it, to pay in accordance with their ability to pay. Two-thirds of the funds that finance this entire system come from asking people who can access the system today, who have money but don't pay a nickel for it, to pay their fair share. And I think we ought to do that. It's

not right for people to avoid their responsibility and then access the system that the rest of the American people pay for. And they pay too much because too many people don't pay anything at all.

So these are the fundamental elements of our plan, of this bill. But above all, it guarantees true health care security. It means if you lose your job, you're covered; if you move, you're covered; if you leave your job to start a small business, you're covered. It means if you or a member of your family gets sick, you're covered, even if it's a life-threatening illness. It means if you develop a long-term illness, because you will be in broad-based community rating systems, you will still be able to work. It means that the disabled community in America, full of people, millions of them, who could be in the work force today, will now be able to work and contribute and earn money and pay taxes because they will be in a health care system that will not burden their employers or put their employers at undue risk.

That's what security means. It means that we will, in other words, be able to make the most of the potential of every working American who wishes to work during the time they can work. It is a huge, huge economic benefit in that sense. Every nation with which we compete has achieved this. Only the United States has failed to do so. We are now going to be given the chance to do it. And I think we must, and I think we will.

I want to reiterate what I have said so many times. I have no pride of authorship, nor do I wish this to be a partisan endeavor or victory. We have tried to draw on the best ideas put forth over the last 60 years by both Democrats and Republicans. This bill reflects the sense of responsibility that President Roosevelt tried to put forward when he asked that the Social Security program include health care. It reflects the vision of Harry Truman, the first President to put forward a plan for national health care reform. It reflects the pragmatic approach that President Nixon took in 1972 when he asked all American employers to take responsibility for providing health care for their employees. It embodies the ideas, the commitment of generations of congressional leaders who fought to build a health care system that honors our

Nation's responsibilities and who have tried to learn, too, how we might use the mechanisms of the marketplace and the competition forces that have helped us in so many other areas to work in the health care arena.

This is a uniquely American solution. It builds on the existing private sector system. It responds to market forces. It attempts to do what I think we should all be asking ourselves whether we're doing: It attempts to fix what's wrong and keep what's right. And that ought to be our guiding star, all of us, as we enter this debate.

I think by guaranteeing comprehensive benefits and high quality and allowing most people to get their coverage the way they do now, leaving important personal decisions about health care where they belong, between patients and doctors, we have done what we can to keep what is right. I think by asking people who don't pay now to be responsible, by simplifying the system, by cracking down on fraud, by making sure we minimize regulation, we are taking a long step toward doing what is necessary to fix what is wrong, to improve quality and hold down costs.

All of the alternatives that will be debated, I ask only what I have already said: Let us measure ourselves against the present system and the cost of doing nothing. Let us honestly compare our ideas with one another and ask who wins, who loses, and how much does it cost. And let us see whether we are meeting the guiding principles which ought to drive this process.

But when it is over, we must have achieved comprehensive health care security for all Americans, or the endeavor will not have been worth the effort. That is what we owe the American people. And let me say again, the most expensive thing we can do is nothing. The present system we have is the most complex, the most bureaucratic, the most mind-boggling system imposed on any people on the face of the Earth. The present system we have has the highest rate of inflation with the lowest rate of return. The present system we have is hemorrhaging, losing 100,000 people a month permanently from the health insurance system; 2 million people every month newly become uninsured, the rest of them get it back. They are

never secure. The present system we have has an indefinable impact on workers in the workplace, wondering what will happen if they lose their health insurance. What does that do to their productivity, to their self-confidence, to their family life? The present system we have is eating up the wage increases that would otherwise flow to millions of American workers every year because money has to go to pay more for the same health care. The present system we have, I would remind you, my fellow Democrats and Republicans, is largely responsible for the impasse we had over the last budget and the fights we had.

Look what we did. We diminished defense as much as we should, and some of us are worried about whether we did a little more than we should. We froze domestic spending, discretionary spending, for 5 years, when all of us know we should be spending more in certain investment areas to help us convert from a defense to a domestic economy and put people back to work in our cities and our distressed urban areas. We froze it. We raised a good bit of taxes. And even though over 99 percent of the money came from people at the highest income group, nobody in this Congress wanted to raise as much money as we did. Why? Because we passed a budget after doing all of that in which Medicaid is going up at 16 percent a year next year, declining to an increase of 11 percent a year in the 5th year; Medicare is going up at 11 percent a year next year, declining to 9 percent a year in the 5th year of our budget.

That's why we did that. We could have had a bipartisan solution, lickety-split, giving the American people a plan that would have reduced the deficit and increased investment in putting the American people back to work if we were not choking on a health care system that is not working.

Now, I don't know about you, but I don't ever want us to go through that again. That is not good for the Congress; it is not good for the country; it is not good for the public interest. And the most important thing is we can't give the American people what they need. They want to be rewarded for their work. They want to know if they're asked to go back to school, if they're asked to embrace

the challenges of expanded trade, if they're asked to compete and win in a global marketplace, that if they do what they're supposed to do, they'll be rewarded. They want to know that they can be good parents and good workers. They want to know if they get sick but they're still healthy enough to work, they won't have to quit because of the insurance system. They want to know if they're disabled physically or if they have had a bout with mental illness or they've dealt with any other thing that can be managed, that they can still be productive citizens. And the bizarre thing is that we could do all this and still have a system that is more efficient and wastes less than the one we've got.

So I ask you, let's start with this bill and start with this plan and give the American people what they deserve: comprehensive, universal coverage. That's what we got hired to do, to solve the problems of the people and to take this country into the 21st century.

Thank you very much.

NOTE: The President spoke at approximately 11:25 a.m. in Statuary Hall at the Capitol.

Letter to Congressional Leaders on the "Health Security Act of 1993"

October 27, 1993

Dear Gentlemen:

The "Health Security Act of 1993" holds the promise of a new era of security for every American—an era in which our nation finally guarantees its citizens comprehensive health care benefits that can never be taken away.

Today, America boasts the world's best health care professionals, the finest medical schools and hospitals, the most advanced research and the most sophisticated technology. No other health care system in the world exceeds ours in the level of scientific knowledge, skill and technical resources.

And yet the American health care system is badly broken. Its hallmarks are insecurity and dangerously rising costs.

For most Americans the fear of losing health benefits at some time has become very real. Our current health insurance system offers no protection for people who lose their jobs, move, decide to change jobs, get sick,

or have a family member with an illness. One out of four Americans is expected to lose insurance coverage in the next two years, many never to be protected again. Altogether, more than 37 million Americans have no insurance and another 25 million have inadequate health coverage.

Rising health care costs are threatening our standard of living. The average American worker would be making \$1,000 a year more today if health care accounted for the same proportion of wages and benefits as in 1975. Unless we act, health care costs will lower real wages by almost \$600 per year by the end of the decade and nearly one in every five dollars Americans spend will go to health care.

Small businesses create most of the new jobs in America and while most want to cover their employees, more and more cannot. Under the current health care system, cost pressures are forcing a growing number of small business owners to scale back or drop health insurance for their employees. Small businesses spend 40 cents of every health insurance dollar for administration—eight times as much as large companies. And only one in every three companies with fewer than 500 workers today offers its employees a choice of health plan.

Our health care system frustrates those who deliver care. Doctors and nurses are drowning in paperwork, and hospitals are hiring administrators at four times the rate of health care professionals. The system places decisions that doctors should be making in the hands of distant bureaucrats. Its incentives are upside down; it focuses on treating people only after they get sick, and does not reward prevention.

Clearly, our challenges are great. This legislation is sweeping in its ambition and simple in its intent: to preserve and strengthen what is right about our health care system, and fix what is wrong.

Our needs are now urgent. A nation blessed with so much should not leave so many without health security.

This legislation draws upon history. It reflects the best ideas distilled from decades of debate and experience.