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Week Ending Friday, April 16, 1999

Remarks on the Patients' Bill of Rights in Philadelphia, Pennsylvania

April 9, 1999

Thank you, Joan, for making the trip up here and for your very, very moving account of your experience. I want to thank all of you who have come here today—John Sweeney, and Congressmen Brady, Borski, and Fattah; Congresswoman DeLauro; my good friend Congressman Dingell who flew up with me this morning; and Congressman Dave Bonior.

I'd like to thank the other Members of Congress who are here: Congressmen Ron Klink and Joe Hoeffel, from Pennsylvania; Congressmen Donald Payne and Rob Andrews from New Jersey; Congresswomen Carolyn Maloney, Carolyn McCarthy, Congressman Joe Crowley from New York; Congressman Ted Strickland from Ohio. That's a pretty impressive group, and we had Congressman Pallone here a little earlier, from New Jersey. I thank them all.

I also want to thank Judy Lichtman from the National Partnership for Women and Families; Ron Pollack and Families USA; Fran Visco and the National Breast Cancer Coalition; Beverly Malone and the American Nurses Association. And there are 150 other provider, consumer, and patient organizations, all of them working for the Patients' Bill of Rights. I thank them all. That's very, very impressive.

I want to thank the local Pennsylvania leaders who are here: Senator Schwartz; Senator Fumo; former Congresswoman Marjorie Margolies-Mezvinsky; Representative Bill DeWeese, the Democratic House leader. And I think the city council president is here, Anna Verna, and other members of the Philadelphia City Council. I thank them all for coming.

But I want to say a special word of congratulations to the mayor. This is the last year of his term. You know, I was a Governor for a dozen years, and I loved every day of it. And in the late 1970's and early 1980's, most of the new ideas for what we should be doing as a people were coming out of the Governors' mansions of the country. In the 1990's, most of the new ideas and most of the innovations have come out of the mayors' offices. There's not a better mayor in America than Ed Rendell, and I'm very proud of him. I also want you to know that he has worried me to death on a number of issues for Philadelphia—[*laughter*]—but none more than the Philadelphia Navy Yard. And I am so glad we got that worked out, so that the city can be—[*applause*]——

And you know, I've been working on this Patients' Bill of Rights for a long time. And I've listened to all the Members of Congress speak, to my good friend John Sweeney, to the mayor, and to Joan, and—did you watch the Oscars? You know, where Benigni, that great Italian actor says, the second time they called him up, he said, ''This is a terrible mistake. I used up all my English!'' [*Laughter*] They used up all my English! [*Laughter*] They have said everything that needs to be said.

But I would like to make a couple of points, to hammer home what this is about and why we're here. First of all, we're here in Philadelphia, as has been said, not only because it is the home of the Constitution, the Declaration of Independence, the Bill of Rights, it was also, interestingly enough, the home of the very first petition drive. Back in 1701, the citizens of Philadelphia launched what I think was the first successful petition drive in the New World, when they asserted and won the full and unfettered right to practice whatever religion they chose.

Philadelphia, thanks to Ben Franklin, was the home of America's first hospital, later America's first medical school and first nursing school, still one of the most important medical centers not only in the United States but in the world.

Now, this petition, as Rosa DeLauro said when she gave you the right address, is a little bit more modern. But we have to do it. And I'd like to say why and what the larger stakes are and go back over this one more time.

Why are we having to do this petition? I mean, this is a bill supported by over 70 percent of the American people and by almost equal margins, in every research document, almost equal margins, by Republicans and Democrats and independents. As a matter of fact, it is virtually the only issue that I have worked on in the last 5 years where there is almost no difference by party in levels of support, except in Washington, DC.

Now, why is that? That's because the people who are against it, basically the large HMO's, the insurers, have got the ear of the congressional majority, and they have a lot of political influence. And how Washington works, for good or ill, is that—people say, ''Well, who cares if there are a lot of people for it, this is not very high up on their scale. The economy's doing fine. Most people are all right. There aren't all that many stories like Joan's. We'll let this slide.''

Now, that's what's going on here. We need this petition drive because unless there is a clear, unambiguous signal from the people of the United States not just that we want this, not just that we need this, not just that we believe in this—the organized forces of the status quo will do nothing. They will say, ''Oh, well, the President went to Philadelphia, and he brought all the Congress Members here. And there were 100 Members of Congress around the country, but they probably can't break through on the evening news tonight because of Kosovo.'' That's another excuse we'll have to let this thing slide.

You know, this is the kind of thing you can do when you're not running for office anymore. You can be more frank with people. [*Laughter*] I'm just telling you, that's what's going on.

Now, I have talked about this until I am blue in the face. I have met with people like Joan, and I have heard these stories. And I want you to know that I feel a special responsibility to do this, because I don't oppose all managed care. I think managed care has done some good in this country. Health care costs were going up at 3 times the rate of inflation when I became President. It was going to bankrupt the country. We should want all organizations, including health care organizations, run as efficiently as possible. But every organization that forgets its primary purpose is doomed to fail. The primary purpose is not to deliver cheap health care; the primary purpose is to deliver quality health care as inexpensively as possible.

Now, I wish we had somebody here representing the other side, standing here beside another microphone. Here's what they would say. They'd say, ''Well, Mr. President, that's very compelling, and you got a nice applause line. But the truth is there are just hard decisions, and you've got to decide whether you want to bankrupt us or not, and this Patients' Bill of Rights will bankrupt us.'' So let me make a countercase.

Here's what we asked for in the bill. Number one, the right to have a specialist when you need it. That's Joan's story, right? She got the specialist, all right, after she lost her sight. I've sat with people who got the specialist after their loved one lost their life or when it was too late to do the medical procedure. Because the way these things are organized—you heard John talk about his doctor friend who got fired—if you're down the chain in the review process in one of these organizations, you just know one thing: You are never going to get in trouble for saying no.

You know, put yourself in the position of a young person working for an HMO; suppose you've got a little kid; suppose you're worried about your Christmas bonus; suppose you've got to save your job. You will never get in trouble if you say no, because you say, ''Well, they can always appeal it to somebody else higher.'' So delay is one of the biggest problems here—the right to see a specialist when you need it.

The right to emergency room care, wherever and whenever you need it. I know you find this hard to believe if it's never happened to you, but Philadelphia's a pretty big city, with a lot of hospitals. If you get hurt on one side of Philadelphia, and the hospital that your HMO works with is on the other side, they can go past three hospitals after you've been hit by a car. That's wrong. You

know, that may not seem like a big deal unless that happens to you, but that's wrong.

The right to have your doctor level with you and discuss all your treatment options. The right to a timely and independent appeals process. The right to hold your plan accountable if it causes you or a loved one harm. The right to know—this is a big deal—the right to know that you won't be forced to switch doctors in the middle of a treatment, like a pregnancy or a chemotherapy treatment.

That may seem unbelievable, but a lot of employers, particularly smaller employers—to be fair to them, they have to change their providers from time to time. They're always struggling to try to get affordable coverage. All we say is, ''Okay, nobody wants to stop you from changing your providers, but if one of your employees is 7 months into a pregnancy, or another one is halfway through a chemotherapy treatment, then the provider, the new provider can't force them to change the people that are giving them the health care.'' It seems to me that this is basic human decency.

Now, we have worked hard to do our part and to try to honestly explore the contention of the opponents of this bill that this is going to cost them too much money. We are the single largest buyer, the Federal Government, of private health insurance. Today—today—we are completing the process of giving the 9 million men, women, and children who receive their health benefits through the Federal Government all the vital patient protections recommended by the Health Care Quality Commission. We're informing—listen to this—all 285 companies who provide coverage for Federal employees that if they want to do business with us, they've got to add the last two of our protections.

We've already imposed the rest of the requirements; now we're saying you can't make people switch doctors in the middle of treatment, and you have to provide full disclosure of what the plans cover, what incentives are offered to doctors, and how satisfied other patients have been with their care.

Now, here is the important point. This is the answer to the opponents of our bill. A new analysis by the Office of Personnel Management—Janice Lachance, the head of that office, is here with me today—shows that providing all these protections—listen to this—all these protections will cost less than $1 per person per month—less than $1 per person, per month. I think that is worth it to stop the story that Joan just told us, and the hundreds of stories around this country.

Now, today, the Republican leadership in the House is not even debating a comprehensive bill. In the Senate the leadership plan does not ensure access to specialists, does not prevent the health care plans from forcing you to change doctors in mid-treatment, does not give you adequate recourse if your health plan fails to provide adequate care, and because it applies only to self-insured plans, actually leaves more than 120 million patients without all these guarantees.

Now, this is a clear choice. But again, I say, this does not need to be a partisan issue. This is not a partisan issue anywhere in America, but Washington, DC. I've heard tell that most doctors are Republicans, but the AMA is for this. The Nurses Association is for this. The health care providers are for this. And I'm telling you a lot of us who have supported the idea of more efficient management of the health care system are for it. What is the purpose of the health care system? It is quality health care at the least cost.

Now, let me just ask you one last thing. Everybody says, anybody says, ''Well, one of the things that worries me about the modern world is that we're going to leave people behind.'' Well, I've been working for 6 years to stop that. You heard the major mention Chakah Fattah's work with us to try to make sure all of our kids can go to college. We changed the law so that we wouldn't leave anybody behind; everybody could afford to go to college.

We talked about this part of Philadelphia being in the empowerment zone. We are now offering to Congress a new market initiative to bring jobs to the poorest part of America by giving people who invest in those areas the same incentives we give them if they invest in some other country—to have the same incentive to invest in America and create jobs, to close the job gap in America.

So we've got to close the education gap; we've got to close the job gap; we've got to close the technology gap. But this is closing

the health care gap. Do you know what would happen to me this afternoon if I started having the symptoms Joan did? Do you have any idea what would happen to me? Within 15 minutes, I'd be on a helicopter; within half an hour I'd be there. I would have whatever specialist was needed, and I would get it. And when I'm gone from the Presidency, because I'll have a good pension, and if, God willing, I stay healthy, a decent income, the same thing would happen. Maybe it would take an hour longer. Not a month longer. [*Laughter*]

Now, we can laugh about this, because sometimes it hurts too much to cry. But I am telling you, the political reality is that the system believes it can resist the opinion and the desire of the American people. That is what this petition drive is all about.

And don't you think it won't make a difference. This could be a good education for a lot of people all over America. They could teach people how to use the Internet for the first time by putting their name on this petition. We ought to have schoolchildren doing it. We ought to have civic clubs doing it. We ought to have religious organizations doing it. People ought to be accessing—this could be their first experience on the Internet

But the reason we are here, the true, honest-to-goodness reason we're here is that everybody knows we need to do it; we have now proved we can afford to do it; the whole country is for it; the system in Washington is resisting it; and the people still rule if they will make their voices heard loud enough. Stand up and be heard.

Thank you.

NOTE: The President spoke at 1:57 p.m. in the Great Hall at Memorial Hall. In his remarks, he referred to Joan Bleakly, a patient who was denied access to a specialist; John J. Sweeney, president, AFL–CIO; Judith L. Lichtman, president, National Partnership for Women and Families; Ronald F. Pollack, vice president and executive director, Families USA; Frances M. Visco, president, National Breast Cancer Coalition; Beverly L. Malone, president, American Nurses Association; State Senator Allyson Y. Schwartz; State Representative H. William DeWeese, Democratic House leader; Anna C. Verna, president, Philadelphia City Council; Mayor Edward Rendell of Philadelphia; and actor-director Roberto Benigni.

This item was not received in time for publication in the appropriate issue.

The President's Radio Address

April 10, 1999

Good morning. Today I want to talk to you about our continuing efforts to break the cycle of dependency and make responsibility and work a way of life for all Americans.

Work is more than just a weekly paycheck. It is, at heart, our way of life. Work lends purpose and dignity to our lives, instills in our children the basic values that built our Nation. But for too long, too many Americans were trapped in a broken welfare system that exiled generation after generation from the mainstream of American life by cutting them off from the world of work.

I took office determined to change that, from giving States the flexibility they needed to make welfare a second chance, not a way of life, to passing the historic bipartisan welfare reform bill that ended welfare as we knew it, to launching the Welfare to Work partnership to create private sector jobs for welfare recipients. We have made remarkable progress.

Today I am pleased to announce that since 1993, we cut the welfare rolls nearly in half by a record 6½ million people. Thanks to our strong economy and strong leadership in the States and the private sector, the number of Americans who are beginning to replace welfare checks with paychecks has tripled since 1992. I'm proud to announce that we in the National Government are doing our part to help, surpassing the goal we set for ourselves by hiring almost 12,000 welfare recipients in just 2 years.

You can see the evidence of our progress in communities across our country, in hard-pressed neighborhoods where bus drivers who used to pass by empty stations now report their buses are filled with people on their way to work. You can see it on inner-city streets where new storefront tax preparing businesses are helping people file their income tax returns, some for the very first time in their lives. April 15th may not be the most favorite day for Americans, but for these people it's a cause for celebration.