

One of the problems we face is, many people pay your bills for you. This is a third-party payer system. And therefore, you don't really have much to say—if somebody is going to pay it, you don't ask what's the price or what's the quality. There's very little consumerism in health care. And yet consumerism can help with price and quality. And so the question is, can government help consumerism become a part of health care? And one way we do—we buy a lot of health care, and so we then insist upon transparency. We say, if you're going to take government money as a hospital, we expect you to put your prices up there for everybody to see, and then encourage programs like HSAs to put the consumer in charge of the purchasing.

It's a long answer to a simple question; I apologize. But it's a complex subject. And the truth of the matter is, the debate is whether or not the Federal Government is going to run your health care, or whether or not we're wise enough to not let that happen. And for the next 16 months, I can assure you we're wise enough to not let that happen, and that's—[*applause*].

Last question.

Presidential Election/President's Decisionmaking

Q. Mr. President, when do you think there will be a girl President for the Republican Party?

The President. Well—[*laughter*—I do think—yes, you took my line. [*Laughter*] I think a lady will be President, yes, and she'll be a Republican. [*Laughter*] Look, I—yes, I do. I believe—I absolutely believe it. Look, I—one of the things I benefited from is the advice of strong women, not only in my own house—[*laughter*—but at the Cabinet table. And I've seen women who are plenty capable of being President of the United States and capable of making the hard decisions and capable of making sure they stick to principle.

See, one of the hardest things about making good, solid decisions is—one of the worst things you can do is to try to chase a poll or a focus group. In order to make decisions that will yield the peace, you got to make them based upon certain fundamental principles and certain values.

And I hope you got a sense of the values and principles by which I'm making decisions today. I'm honored you let me come by. I'm heading to Memphis, believe it or not, and I thank you for the chance to share my thoughts with you. God bless you, and God bless the United States of America.

NOTE: The President spoke at 12:55 p.m. at the John Q. Hammons Convention Center. In his remarks, he referred to former Representative John P. Hammerschmidt of Arkansas; former Senator Bob Dole and former Secretary of Health and Human Services Donna E. Shalala, Cochairs, President's Commission on Care for America's Returning Wounded Warriors; former Prime Minister Junichiro Koizumi of Japan; Aung San Suu Kyi, leader of the National League for Democracy in Burma; and Yamile Llanes Labrada, wife of Cuban political prisoner Jose Luis Garcia Paneque, who was arrested in Cuba on March 18, 2003. A participant referred to former Federal Aviation Administration Administrator Marion C. Blakey; and H.R. 1125 and S. 65.

Remarks Following a Meeting With the President's Commission on Care for America's Returning Wounded Warriors

October 16, 2007

Good afternoon. Thanks for coming. Welcome to the Rose Garden. I appreciate Senator Dole and Secretary Shalala and other members of their Commission for joining me today. Welcome.

I just finished an inspiring meeting with Secretary Gates and Acting Secretary Mansfield, with service members who were rebuilding their lives after being severely wounded in the service of our country. I wish all Americans could hear the service members talk about their strong desire to not only rehabilitate but to enter—be productive citizens here in America. I was most impressed by your spirit and your courage, and I—welcome here to the White House.

I appreciate the fact that they are helping to find a—to define a culture that says, we're going to judge people by their potential, not their disabilities. I appreciate the fact that they are demonstrating the great breakthroughs in technologies that are now available for the wounded. I don't know if you noticed, two of them came in on a Segway.

Medical advances have enabled battlefield medics and hospitals to provide our wounded warriors with care that would have been unimaginable just a decade ago. Yet our system for managing this care has fallen behind. It's an old system; it's an antiquated system; it's an outdated system that needs to be changed.

You know, that's what happened at Walter Reed Army Medical Center earlier this year. First of all, the care that's provided there is magnificent. Our doctors and nurses at Walter Reed are great healers and caregivers, and they've saved a lot of lives. But there were serious problems caused by bureaucratic delays and administrative failures, and we're not going to let those problems continue.

We took immediate steps to address the problems at Walter Reed. The building where outpatients were living that was substandard was shut down. They were moved to high-quality housing, and those responsible were held to account. And to ensure wounded troops at Walter Reed and other facilities across America get the care they deserve, I asked Senator Dole and Secretary Shalala to chair a bipartisan Presidential commission. The Commission conducted a comprehensive review of the care provided to service members returning from the global war on terror from the time they leave the battlefield through their return to civilian life.

At the end of this review, the Commission submitted specific recommendations for modernizing and improving our system of care. My administration strongly supports the Commission's recommendations. We've taken steps to implement them where we can through administrative action. And today we're sending Congress legislation to implement the recommendations that require legislative action.

The legislation will help us achieve three important goals. First, this legislation will modernize and improve the way we evaluate disabilities and award compensation for injured service members. Right now the Departments of Defense and Veterans Affairs both have their own systems for making these determinations. The Commission found that this process is difficult to navigate and con-

fusing for service members and their families. We need to streamline the system.

So this legislation will assign both Departments clear and separate roles. The Defense Department will determine whether wounded warriors are still fit for service. Those unable to serve will receive a pension from the Defense Department based on their rank and length of service. Then they will move directly into the Veterans Affairs system, where they will receive compensation for their disabilities. This compensation will take into account both loss of earnings and the overall impact on the quality of life resulting from a service member's injury or disability.

This new system will also emphasize rehabilitation and retraining. It will provide new support and financial incentives for therapy and education. It will help our wounded warriors rejoin their communities. Look, these men and women want to be productive, and they want to be active members of our society, and this legislation will help them achieve that goal.

Secondly, this legislation will strengthen support for families during the recovery process. When our service members suffer wounds, their families suffer with them. They pray beside hospital beds; they discuss the options with the doctors; and they help injured loved ones readjust to everyday life. These commitments often require family members to take long leaves of absence from work, yet many family members cannot get this time off without losing their jobs.

Our military families deserve better. So this legislation will give many parents and spouses the opportunity to take up to 6 months of unpaid leave when their loved ones are seriously wounded in combat. It provides severely wounded service members with aid and attended care services—for instance, up to 40 hours per week of in-home help from an assistant—so their families do not have to shoulder the responsibilities of caring alone.

Third, this legislation will improve treatment for Posttraumatic Stress Disorder. The Commission found that many service members still worry about the stigma associated with this serious condition. We need to end this stigma by encouraging those suffering to get help. This legislation will make it easier

for our troops to receive care for this disorder, and it will help affected service members to move forward with their lives.

The need to enact these reforms into law is urgent, and I call on both Republicans and Democrats in Congress to come together and pass a good bill that I can sign into law. We also need to complete the Veterans Affairs appropriations bills that funds veterans' benefits and other ongoing programs. I fully recognize Congress and I have our differences on other appropriations bills, but the Veterans Affairs bill is one where we agree. I ask the House and Senate to work together to pass a bill that I can sign, and send it to my desk by Veterans Day.

As we work with Congress on this legislation, my administration will continue to institute the recommendations of the Dole-Shalala Commission that do not require congressional approval. We're acting on the Commission's recommendations to form a new corps of well-trained recovery coordinators. These coordinators will work with families to establish recovery plans and monitor the healing process, facilitate the transition to civilian life, and ensure wounded service members do not get lost in the system.

We're also acting on the Commission's recommendations to ensure health professionals working at the Defense Department and Veterans Affairs facilities can easily share patient information. This will allow us to provide patients with better care as they move through the system. We're also developing a new secure web portal, where service members will be able to access all their medical files and benefit information in one place.

We're acting on the Commission's recommendation to create incentives for medical professionals and administrators to work at Walter Reed. One out of every five wounded service members passes through this hospital. And while Walter Reed is set to close at 2011, we will ensure it remains a state-of-the-art facility until the last day of operation.

By taking these steps, we'll honor a shared commitment to care for those who defend our freedom. One of those people is Ryan Groves. While serving with the Marines in Iraq in 2004, he lost his left leg and severely injured his right leg in a rocket attack. Today,

he refuses to allow his disability to stop him from living his life. He's going to Georgetown. He wants to be a lawyer. He travels using the Segway. He's an amazing fellow. He's an inspiration for all Americans. And we need to build a system of care that is worthy of the sacrifice that he and others have made.

I look forward to working with Congress to achieve this goal. Together we can give our wounded warriors the best possible care and help them build their lives of hope and promise.

And now it's my honor to introduce Secretary Donna Shalala.

NOTE: The President spoke at 4:25 p.m. in the Rose Garden at the White House. In his remarks, he referred to former Senator Bob Dole and former Secretary of Health and Human Services Donna E. Shalala, Cochairs, President's Commission on Care for America's Returning Wounded Warriors. The transcript released by the Office of the Press Secretary also included the remarks of Cochairs Dole and Shalala.

Memorandum on Provision of United States Drug Interdiction Assistance to the Government of Brazil

October 16, 2007

Presidential Determination No. 2008-03

Memorandum for the Secretary of State and the Secretary of Defense

Subject: Provision of U.S. Drug Interdiction Assistance to the Government of Brazil

Pursuant to the authority vested in me by section 1012 of the National Defense Authorization Act for Fiscal Year 1995, as amended (22 U.S.C. 2291-4), I hereby certify, with respect to Brazil, that (1) interdiction of aircraft reasonably suspected to be primarily engaged in illicit drug trafficking in that country's airspace is necessary because of the extraordinary threat posed by illicit drug trafficking to the national security of that country; and (2) that country has appropriate procedures in place to protect against innocent loss of life in the air and on the ground in connection with such interdiction, which shall at a minimum include