

Withdrawal/Redaction Sheet

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. list	Security List - Alfred P. Sloan Fellows (partial) (4 pages)	03/15/94	P6/b(6)

COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Carol Rasco (Meetings, Trips, Events)
OA/Box Number: 7262

FOLDER TITLE:

Brookings Institution (Indian Treaty) 3-24-94 11:15-12:00

rw166

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

- PI National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advise between the President and his advisors, or between such advisors [a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

- b(1) National security classified information [(b)(1) of the FOIA]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
- b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
- b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
- b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

QUESTIONS AND ANSWERS

1) Doesn't the Clinton plan add more layers of government bureaucracy?

No. The President specifically rejected a government-run system in favor of guaranteed private insurance. America basically faces 3 choices:

- government insurance for everybody
- guaranteed private insurance (the President's approach)
- leaving people without insurance

The President's approach is guaranteed private insurance. Everyone will have comprehensive coverage that can never be taken away.

2) But what about these so-called "alliances"?

The purpose of them is very simple -- to give bargaining power to small businesses and individuals and take it away from the insurance companies. Today, the deck is stacked against small businesses and individuals. Small businesses are paying 35% more than big business for the same insurance, and individuals pay even more.

So we have these consumer-controlled alliances to allow people and small businesses to band together and get more consumer clout in the marketplace. Consumer-controlled -- that's the President's idea, not government-controlled.

Now, Congress will figure out exactly how they should be structured, but this is an idea that has bipartisan support. The insurance companies don't like it because it means they have less power, but that's what alliances are intended to do. And that's why the insurance industry is spending millions to weaken or destroy the idea.

3) One of those TV ads says that the President's plan will limit my choice of doctor. Is that true?

No, it's not. You'll be able to choose your own doctor and health plan. In fact, to make sure that you get the high-quality care you deserve, the President's approach actually increases the choices most consumers will have. Because you will choose your doctor and health plan -- your boss

won't and the insurance company won't. So you can choose any doctor and health plan in your community. Remember who's paying for these ads: the insurance companies -- who are trying to scare you and preserve their profits.

4) Won't this plan mean that I'll pay more and get less?

No. In fact, the independent Congressional Budget Office (CBO) analysis that the Republicans praised said that the President's plan would cost Americans less money and give them more health benefits. Young, healthy people may pay a little more -- but that's because we're prohibiting the insurance companies from charging older people more than younger people.

Under the President's approach, you'll be guaranteed affordable insurance you can depend on. We'll make it illegal for insurance companies to jack up your rates or drop you if you get sick, use lifetime limits to cut off your benefits, or take away your benefits. The insurance companies won't be allowed to bleed you dry.

And the President's proposal calls for comprehensive benefits, including preventive care and prescription drugs. Under the President's approach, no one -- not your boss, not your insurance company -- can take those benefits away.

5) Won't your employer mandate cause massive job loss and cause thousands of small businesses to go bankrupt?

There is no credible evidence to support that claim. The independent Congressional Budget Office (CBO) analysis that the Republicans praised said that the Clinton plan would not result in the loss of jobs, and would benefit all small businesses.

Studies predict that there will, in fact, be job gains as a result of the plan. The Economic Policy Institute predicts 258,000 manufacturing jobs created over the next decade, Lewin-VHI, a widely-respected, bipartisan firm, predicts over one million jobs created by providing long-term care, and the Employee Benefit Research Institute predicts that the President's proposal could produce as many as 660,000 jobs.

The President specifically designed his proposal to help small businesses - the biggest victims of today's health care crisis. Small business owners will be able to get rock-solid, comprehensive coverage for their families and employees. And no longer will they be subject to insurers jacking up their rates or dropping their coverage when one employee gets sick. Because those insurance company abuses will be illegal.

6) Why do we need an employer mandate anyway?

If we want to guarantee every American health insurance, we've got to figure out how to achieve that goal. The President believes every job should come with health benefits. Most jobs do today because most employers accept this responsibility to provide worker health benefits. And yet 8 out of 10 Americans who have no insurance are in working families. We want everyone to have health benefits guaranteed at work. And under the President's approach, the government will provide discounts for small businesses, help cover the unemployed, and continue Medicare for older Americans. That's how we'll cover everybody.

7) When you try to cut costs and limit the amount premiums can rise, won't that just lead to rationing?

Absolutely not. The key to this is insurance company premiums can't continue to rise unchecked. Your money will go to buying you the highest quality of care and service, not padding the insurance company red tape. That's why there's a limit on how much insurance companies can raise your rates. In fact, it will be illegal for insurance companies to drop your coverage or take away your benefits. You'll be guaranteed affordable insurance you can depend on.

The President's approach is all about keeping you healthy. You'll have the right to choose your own doctor and health plan. We want to make sure you get high-quality care by giving you the choice, not your boss or insurance company.

8) I've got good insurance. What's in this plan for me?

First -- and most important -- you'll get something that no amount of money can buy in today's insurance market: guaranteed private insurance. Comprehensive coverage that can never be taken away. Second, you, not

your boss or insurance company, have the choice of doctor and health plan to make sure you get the high-quality care you deserve.

Third, unfair insurance company practices will be outlawed: 3 out of 4 insurance policies -- that's 133 million people -- have these lifetime limits which mean that your coverage could be cut out just when someone in your family is sickest. No more. No more jacking up prices when you get sick. You'll have affordable insurance you can depend on. Fourth, we protect Medicare. We'll cover prescription drugs under Medicare, and give new options for long-term care in the home and community. And fifth, everyone will have health benefits guaranteed at work, with the government providing discounts to small businesses and the unemployed. Even if you lose your job, you will never have to worry about losing benefits or being forced to change doctors.

9) Is it true that my doctor can be fined \$10,000 for treating me outside the system?

A: No, that's not true. You can see any doctor you want and pay for any procedure or treatment. The \$10,000 fine refers to the President's crackdown on insurance company fraud. Fly-by-night insurance companies will be fined if they try to dupe you by selling you "supplemental" benefits that you're already guaranteed by law.

[Note: By law, you'll be guaranteed the right to pay to see any doctor in the country, even if you are in an HMO.]

10) What's going to happen to my Medicare benefits?

A: Older Americans who receive Medicare will continue to receive all the benefits you do today. And you'll keep the doctor you now have. In addition, we'll strengthen Medicare by adding prescription drug coverage. Older Americans will also benefit from new long-term care options in their homes and communities, where they want to receive care.

11) What happens if the money runs out?

A: Today, when insurance companies go out of business, patients get struck without health care, and doctors don't get paid. The President's approach prevents that. It bans fly-by-night insurers, forcing the insurance industry to set aside funds to protect against bankruptcy or failure.

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. list	Security List - Alfred P. Sloan Fellows (partial) (4 pages)	03/15/94	P6/b(6)

**This marker identifies the original location of the withdrawn item listed above.
For a complete list of items withdrawn from this folder, see the
Withdrawal/Redaction Sheet at the front of the folder.**

COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Carol Rasco (Meetings, Trips, Events)
OA/Box Number: 7262

FOLDER TITLE:

Brookings Institution (Indian Treaty) 3-24-94 11:15-12:00

rw166

RESTRICTION CODES**Presidential Records Act - [44 U.S.C. 2204(a)]**

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advise between the President and his advisors, or between such advisors [(a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

- b(1) National security classified information [(b)(1) of the FOIA]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
- b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
- b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
- b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

The Washington Field Trip
for the
Alfred P. Sloan Fellows

conducted by
The Brookings Institution

in cooperation with
The Sloan School of Management
Massachusetts Institute of Technology

March 21-25, 1994

55 people

SECURITY LIST

Alain Robert Aerni

P6/b(6)

MIT
Switzerland

Paul M. Brenner

P6/b(6)

SS#:
USA

Ahmed Saleh Al Noaimi

P6/b(6)

MIT
Bahrain

Michael E. Charles

P6/b(6)

SS#:
USA

Abdul Razak A.H. Al-Qassim

P6/b(6)

MIT
Bahrain

June Choi

P6/b(6)

MIT
Korea

William K. Aulet

P6/b(6)

SS#:
USA

Jerry L. Enverso

P6/b(6)

SS#:
USA

Moya Bawden

P6/b(6)

MIT
New Zealand

Jorge Luis Gutierrez-Padron

P6/b(6)

MIT
Mexico

Susan C. Shackford

P6/b(6)

SS#: [REDACTED]

USA

Shahab Shadman

P6/b(6)

MIT [REDACTED]

Canada

Bambang G. Soekamto

P6/b(6)

MIT [REDACTED]

Indonesia

Albert F. Suchy

P6/b(6)

SS#: [REDACTED]

USA

Ryo Takahashi

P6/b(6)

SS#: [REDACTED]

Japan

Chee-Keon Tan

P6/b(6)

MIT [REDACTED]

Singapore

Marc S. Trinklein

P6/b(6)

SS#: [REDACTED]

USA

Yasuo Uchiyama

P6/b(6)

MIT [REDACTED]

Japan

Vincent B. Van Den Brekel

P6/b(6)

MIT [REDACTED]

The Netherlands

Jamie D. McCourt

Triyadi Prayogo

[Redacted] P6/b(6)

SS#: [Redacted]
USA

MIT [Redacted]
Indonesia

John D. McEvoy

Paul R.S. Rabelo

[Redacted] P6/b(6)

SS#: [Redacted]
USA

MIT [Redacted]
Brazil

Theodore D. McNeff

Pedro A. Richards

[Redacted] P6/b(6)

SS#: [Redacted]
USA

MIT [Redacted]
Argentina

Eduardo Melo

James F. Robbins

[Redacted] P6/b(6)

MIT [Redacted]
Mexico

SS#: [Redacted]
USA

James C.S. Meng

Hernan Rosas

[Redacted] P6/b(6)

SS#: [Redacted]
USA

MIT [Redacted]
Venezuela

Bernard Myette

Masayuki Saito

[Redacted] P6/b(6)

MIT [Redacted]
Canada

SS#: [Redacted]
Japan

Koichi Nakajima

John H. Sandvig

[Redacted] P6/b(6)

MIT [Redacted]
Japan

SS#: [Redacted]
USA

Robert D. Overbeek

Viney Sawhney

[Redacted] P6/b(6)

SS#: [Redacted]
USA

MIT [Redacted]
India

Richard A. Poisel

Oumar Seck

[Redacted] P6/b(6)

SS#: [Redacted]
USA

MIT [Redacted]
Senegal

Koichi Harada

Robert W. Lewis

P6/b(6)

MIT

SS#:

Japan

USA

Robert S. Hekemian, Jr.

Eng Lim

P6/b(6)

SS#:

MIT

USA

Singapore

John F. Horridge

Barbara D. Littell

P6/b(6)

MIT

SS#:

England

USA

Hiroshi Ishige

Pauline Liu McCormack

P6/b(6)

MIT

SS#:

Japan

USA

Mark Jones

Gustavo Lopez-Padilla

P6/b(6)

MIT

MIT

New Zealand

Mexico

Gisela Anne Kerschbaum

Susan Lowance

P6/b(6)

MIT

SS#:

Germany

USA

Philip Kirchlechner

Juan Carlos Maldonado

P6/b(6)

MIT

SS#:

Austria

Venezuela

Ioon Khoi Lam

Cathy Ann M. Martine

P6/b(6)

MIT

SS#:

Singapore

USA

Kwang-ho Lee

Jessica L. Masten

P6/b(6)

SS#:

SS#:

Korea

USA

THE WHITE HOUSE
OFFICE OF DOMESTIC POLICY

MAR 14 REC'D

CAROL H. RASCO
Assistant to the President for Domestic Policy

To: _____

Draft response for POTUS
and forward to CHR by: _____

Draft response for CHR by: _____

Please reply directly to the writer
(copy to CHR) by: _____

Please advise by: _____

Let's discuss: _____

For your information: _____

Reply using form code: _____

File: _____

Send copy to (original to CHR): _____

Schedule ? : Accept Pending Regret

Designee to attend: _____

Remarks: Event folder



THE BROOKINGS INSTITUTION

1775 MASSACHUSETTS AVENUE, N.W. WASHINGTON, D.C. 20036-2188
TELEPHONE: 202/797-6000 FAX: 202/797-6004

Center for Public Policy Education

March 2, 1994

The Honorable Carol H. Rasco
Assistant to the President for
Domestic Policy
Executive Office of the President
1600 Pennsylvania Avenue, N.W.
Washington, D.C. 20500

Dear Ms. Rasco:

We are delighted that you will be meeting with the MIT Alfred P. Sloan Fellows during their Washington Field Trip. Your session is scheduled for Thursday, March 24, 10:00-11:00 a.m. to discuss White House Staff operations. Enclosed is a list of the Fellows and their week-long agenda.

As you know, the Sloan Fellows are middle level managers from a variety of U.S. and international organizations who have been hand-picked and are fully funded by their sponsoring organizations for the twelve-month study program. The purpose of the trip is to meet with a cross section of the leaders in Washington and to gain firsthand exposure to current issues in the nation's capitol.

Our format is to ask speakers to make introductory remarks for 15 to 20 minutes and then take questions for the remainder of the time.

If you have questions regarding the program please contact me at (202) 797-6282.

Sincerely,

Jessica Masten
Meeting Planner

**The Washington Field Trip
for the
Alfred P. Sloan Fellows**

**conducted by
The Brookings Institution**

**in cooperation with
The Sloan School of Management
Massachusetts Institute of Technology**

March 21-25, 1994

AGENDA

**Monday
March 21, 1994**

8:00 a.m.
Auditorium
Brookings

Continental Breakfast/Briefing on the Day

8:30 a.m.

**Decisionmaking in Washington: A Look at the
Policymaking Process**

❖ *The Honorable A. Lee Fritschler**, President,
Dickinson College, Author, *How Washington
Works: The Executive's Guide to Government*

10:30 a.m.
Room S207, Mansfield Room
The Capitol

The Role of Congressional Staff

❖ *Sheila Burke**, Chief of Staff, Senator Robert Dole

11:30 a.m.

**Issues Before the Congress: A View from a
Democratic Senator**

❖ *Speaker to be announced*

* Denotes confirmed speaker

Monday
March 21, 1994-continued

12:30 p.m.

Lunch in Capitol Hill area

2:30 p.m.

Montpelier Room

Washington Court Hotel

The Role of a Lobbyist

❖ *Donald G. Ogilvie*, Vice President, American Bankers Association*

4:00 p.m.

Montpelier Room

Washington Court Hotel

Major Issues Before Congress

❖ *Peter Hoagland (D-NE)*, U.S. House of Representatives*

**Tuesday
March 22, 1994**

- 7:30 a.m.** Bus departs from Madison Hotel for Hyatt
- 7:45 a.m.** Continental Breakfast/Briefing on the Day
Columbia A Room
Hyatt Regency Hotel
Capitol Hill
- 8:30-9:30 a.m.** **Strategic and Security Issues**
❖ William S. Cohen (R-ME), U.S. Senate*
- 10:00-11:00 a.m.** **Issues in the International Economy**
Department of Treasury
❖ The Honorable Jeffrey A. Shafer, Assistant Secretary
for International Affairs, U.S. Department of the
Treasury*
- 11:30 a.m.-12:30 p.m.** **Managing in the Public Sector**
Department of Health &
Human Services
*❖ The Honorable Walter Broadnax, Deputy Secretary,
U.S. Department of Health and Human Services*
- 12:30 p.m.** Lunch individually
- 1:15 p.m.** Bus departs from DHHS for Coast Guard
- 2:15-3:30 p.m.** **U.S. Coast Guard**
❖ Admiral William J. Kime, Commandant, U.S. Coast
Guard*
- 4:00-5:00 p.m.** **Postal Service**
❖ The Honorable Marvin Runyon, Postmaster General,
U.S. Postal Service*
- 5:00-6:00 p.m.** Reception at Postal Service
-

**Wednesday
March 23, 1994**

7:45 a.m.
Auditorium
Brookings
8:15 a.m.

Continental Breakfast/Briefing on the Day

Depart for the Pentagon

9:00 a.m.
Room 1E801 #7
The Pentagon

Defense Policy Issues

❖ *John Deutch**, Under Secretary of Defense for
Acquisitions and Technology, U.S. Department of
Defense

10:30 a.m.- 12:00 noon

Depart for Gannett Company, Inc.* (a news
information company that publishes newspapers
(including *USA Today*), and operates television and
radio stations)

Host: *John Curley, President and Chief Executive Officer*

12:30 p.m.

Recess and Free Afternoon

Thursday
March 24, 1994

7:45 a.m.
Auditorium
Brookings

Continental Breakfast/Briefing on the Day

9:00-10:00 a.m.
OEOB

The President's Council of Economic Advisors

❖ *The Honorable Laura D'Andrea Tyson, Chair,
Council of Economic Advisors*

10:00-11:00 a.m.
OEOB

White House Staff

❖ *The Honorable Carol Rasco*, Assistant to the
President for Domestic Policy, Executive Office of
the President*

11:30 a.m.-12:30 p.m.
Embassy of Japan

Japan-U.S. Economic Relations

❖ *Tsutomu Himeno*, First Secretary-Economics,
Embassy of Japan*

1:00 p.m.

Lunch in the Dupont Circle area

2:30 p.m.
Department of State

Issues in U.S.-Latin American Relations

❖ *The Honorable Arturo Valenzuela, Deputy
Assistant Secretary for Inter-American Affairs,
U.S. Department of State*

Thursday
March 24, 1994 - continued

4:00 p.m.
Board Room
Federal Reserve Board

The Role of the Federal Reserve Board

❖ *The Honorable Susan Phillips*, Governor,
Board of Governors, Federal Reserve
System of the United States*

6:30 p.m.

Reception at the Argentine Embassy

Host: *His Excellency Raul Granillo Ocampo,
Ambassador of the Republic of Argentina to the
United States*

**Friday
March 25, 1994**

8:15 a.m.
Auditorium
Brookings

Continental Breakfast/Briefing on the Day

8:30 a.m.
Brookings

The U.S. Role in a Changing World Order

❖ *The Honorable Lawrence J. Korb*, Director, Center for
Public Policy Education, The Brookings Institution*

10:00-11:30 a.m.

Government and the Arts

❖ *The Honorable Constance Berry Newman, Under
Secretary of the Smithsonian Institution (Invited)*

**The Washington Field Trip
for the
Alfred P. Sloan Fellows**

conducted by the Brookings Institution

**in cooperation with
The Sloan School of Management
Massachusetts Institute of Technology**

March 21-25, 1994

PARTICIPANT LIST

ALAIN R. AERNI
Vice President
Customer Focus Manager
Baden, Switzerland

AHMED S. AL-NOAIMI
General Manager Finance
Manama, Bahrain

ABDUL RAZAK A.H. AL-QASSIM
Assistant General Manager
Manama, Bahrain

WILLIAM K. AULET
Finance and Planning manager
Watham, Massachusetts

MOYA BAWDEN
Information Systems Superintendent
South Melbourne, Australia

PAUL M. BRENNER
Managing Director
Technology Resource Center
Washington, D.C.

MICHAEL E. CHARLES
Management Leadership
Development Associate
Stratford, Connecticut

JUNE CHOI
Manager/Chief Executive Secretary
President's office
Seoul, Korea

GERALD L. ENVERSO
Manager
Major Facilities
Washington, D.C.

JORGE L. GUTIERREZ-PADRON
Advisor to the Undersecretary
Mexico

KOICHI HARADA
Associate Manager
Software Headquarters
Tokyo, Japan

ROBERT S. HEKEMIAN
Executive Vice President
Hackensack, New Jersey

JOHN F. HORRIDGE
Area Manager
Naples, Italy

HIROSHI ISHIGE
Chief Manager
Investment Banking Division
Tokyo, Japan

MARK R. JONES
Director
Hong Kong, Hong Kong

GISELA A. KERSCHBAUM
Service and Routing Manager
Continental Flights
Frankfurt, Germany

PHILIP KIRCHLECHNER
Deputy Regional Director-China
Shanghai, China

JOON K. LAM
Head of Department (Plans)
Singapore, Republic of Singapore

KWANG-HO LEE
General Manager
Electro-Telecom Export
Seoul, Korea

ROBERT W. LEWIS
Director
Charlotte, North Carolina

ENG LIM
Special Assistant to the President
Singapore, Republic of Singapore

PAULINE Y. LIU McCORMACK
Manager
Marketing and New Business
Development
Woburn, Massachusetts

GUSTAVO A. LOPEZ
Sub-Director of Finance

JUAN C. MALDONADO
Financial Officer
Caracas, Venezuela

CATHY-ANN M. MARTINE
Staff Director
Office of the Vice Chairman
Basking Ridge, New Jersey

JAMIE D. McCOURT
Attorney at Law
Brookline, Massachusetts

JOHN D. McEVOY
Senior Associate
Special Finance Group
Newark, New Jersey

THEODORE D. McNEFF
Strategic Alliance Director
Rochester, New York

EDUARDO MELO
Manager
International Credit and Finance
Garza Garcia, N.L., Mexico

JAMES C.S. MENG
Chief Scientist
Newport, Rhode Island

BERNARD MYETTE
Research Manager
Head Office
Quebec, Canada

KOICHI NAKAJIMA
Senior Manager
Project Finance Group
International Finance Division
Tokyo, Japan

ROBERT D. OVERBEEK
Assistant Project Manager
Technical Support
Redstone Arsenal, Alabama

RICHARD A. POISEL
Chief
Research and Technolgy Division
Warrenton, Virginia

TRİYADI PRAYOGO
Manager of Technical Operations
Jakarta, Indonesia

PAULO R.S. RABELO
Manager of Mobile Systems
Implementation Department
Sao Paulo, Brazil

PEDRO A. RICHARDS
Director
Buenos Aires, Argentina

JAMES F. ROBBINS
Director
RAB Systems Program Office
Fort Walton Beach, Florida

HERNAN P. ROSAS
Manager
Exploration and Production Systems
Caracas, Venezuela

MASAYUKI SAITO
Treasurer
Fort Lee, New Jersey

JOHN H. SANDVIG
Manager, Preliminary Design
Seattle, Washington

VINEY SAWHNEY
Executive Vice President
New York, New York

OUMAR SECK
Consultant in Planning and
Evaluation
Dakar, Senegal

SUSAN C. SHACKFORD
Director
Naval Hawk Final Assembly
Stratford, Connecticut

SHAHAB SHADMAN
Associate Director
Quality Engineering
Quebec, Canada

BAMBANG G. SOEKAMTO
Project Manager
Medan, Indonesia

ALBERT F. SUCHY
commanding Officer
Boston, Massachusetts

RYO TAKAHASHI
Director
Public Relations and Duty Free/
Special Market
Tokyo, Japan

CHEE-KEON TAN
Plant Manager; and
Manager Corporate Planning
Jurong Town, Republic of Singapore

MARCH S. TRINKLEIN
Director
Technical Support Operations
U.S. Department of the Air Force

YASUO UCHIYAMA
Manager
First Motor Vehicles Division
Tokyo, Japan

VINCENT B. van den BREKEL
Financial Consultant
Amsterdam, The Netherlands

BROOKINGS STAFF

BARBARA D. LITTELL
Senior Staff Member
Center for Public Policy Education

JESSICA L. MASTEN
Meeting Planner
Center for Public Policy Education

KACEY A. KNICK
Program Assistant
Center for Public Policy Education

THE BROOKINGS INSTITUTION
CENTER FOR PUBLIC POLICY EDUCATION
1775 Massachusetts Avenue, N.W.
Washington, D.C. 20036-2188

Fax: (202) 797-6133

Date: Feb 22

Number of Pages: 5 + cover

Fax To: Carol Rasco

From: Barbara Littell

+++++

Message:

Please see attached invitation.

Rog
I am very
interested in
doing this -
what is
schedule?



THE BROOKINGS INSTITUTION

1775 MASSACHUSETTS AVENUE, N.W. WASHINGTON, D.C. 20036-2188
TELEPHONE: 202/797-6000 FAX: 202/797-6004

Center for Public Policy Education

February 22, 1994

The Honorable Carol H. Rasco
Assistant to the President for
Domestic Policy
Executive Office of the President
The White House
1600 Pennsylvania Avenue, N.W.
Washington, D.C. 20500
Fax: 456-2878

*Accept
EOB 4/72
Indian Treaty*

Dear Ms. Rasco:

During the week of March 21-25, 1994, The Brookings Institution is organizing and conducting a seminar for the MIT Alfred P. Sloan Fellows. Enclosed for your information is a list of the 1993-1994 class.

The Sloan Fellows are 52 middle level managers from a variety of U.S. and international organizations who have been hand-picked and are fully funded by their sponsoring organizations for the twelve-month study program. It is expected that these men and women will go on to assume positions in the highest levels of industry and government. The purpose of the trip is to meet with a cross section of the leaders in Washington and to gain firsthand exposure to current issues in the nation's capitol. In past years, the Fellows have met with members of Congress and their staffs, executive agency officials, Federal judges, and ambassadors of foreign governments. Other field trips include New York City and an overseas trip in 1994 to Latin America.

I hope that you might be able to meet with the Sloan Fellows on Thursday, March 24, from 10:00-11:00 a.m. to discuss White House staff operations and, in particular, current domestic policy issues. Our format is for our speaker to address the group for 10 to 15 minutes, followed by questions from the Fellows. We hope to have M.I.T. alumnus Laura Tyson address the group from 9:00-10:00 a.m. at the OEOB and your session would follow. Those who have agreed to meet with the Sloan Fellows include Sheila Burke of Senator Dole's staff, Senator Bill Cohen, Postmaster General Runyon, Jeffrey Shafer of Treasury, Under Secretary of Defense John Deutch and Governor John La Ware at the Fed.

We appreciate your consideration of this request and will contact your office soon to answer any questions you may have. If you need additional information, please call me at (202) 797-6267 or Jessica Masten, the Meeting Planner for the program, at (202) 797-6282.

Sincerely,

Barbara D. Littell
Senior Staff Member

*You have met with similar groups
and I hope this time might be clear
for you to meet w/ the class. Many Thanks.*

FOUNDED 1916

**The Washington Field Trip
for the
Alfred P. Sloan Fellows**

conducted by the Brookings Institution

**in cooperation with
The Sloan School of Management
Massachusetts Institute of Technology**

March 21-25, 1994

PARTICIPANT LIST

Alain R. Aerni
Vice President
Customer Focus Manager
Baden, Switzerland

Ahmed S. Al-Noaimi
General Manager Finance
Manama, Bahrain

Abdul Razak A.H. Al-Qassim
Assistant General Manager
Manama, Bahrain

William K. Aulet
Finance and Planning manager
Watham, Massachusetts

Moya Bawden
Information Systems Superintendent
South Melbourne, Australia

Paul M. Brenner
Managing Director
Technology Resource Center
Washington, D.C.

Michael E. Charles
Management Leadership
Development Associate
Stratford, Connecticut

June Choi
Manager/Chief Executive Secretary
President's office
Seoul, Korea

Gerald L. Enverso
Manager
Major Facilities
Washington, D.C.

Jorge L. Gutierrez-Padron
Advisor to the Undersecretary
Mexico

Koichi Harada
Associate Manager
Software Headquarters
Tokyo, Japan

Robert S. Hekemian
Executive Vice President
Hackensack, New Jersey

John F. Horridge
Area Manager
Naples, Italy

Hiroshi Ishige
Chief Manager
Investment Banking Division
Tokyo, Japan

Mark R. Jones
Director
Hong Kong, Hong Kong

Gisela A. Kerschbaum
Service and Routing Manager
Continental Flights
Frankfurt, Germany

Philip Kirchlechner
Deputy Regional Director-China
Shanghai, China

Joon K. Lam
Head of Department (Plans)
Singapore, Republic of Singapore

Kwang-ho Lee
General Manager
Electro-Telecom Export
Seoul, Korea

Robert W. Lewis
Director
Charlotte, North Carolina

Eng Lim
Special Assistant to the President
Singapore, Republic of Singapore

Pauline Y. Liu McCormack
Manager
Marketing and New Business
Development
Woburn, Massachusetts

Gustavo A. Lopez
Sub-Director of Finance

Juan C. Maldonado
Financial Officer
Caracas, Venezuela

Cathy-Ann M. Martine
Staff Director
Office of the Vice Chairman
Basking Ridge, New Jersey

Jamie D. McCourt
Attorney at Law
Brookline, Massachusetts

John D. McEvoy
Senior Associate
Special Finance Group
Newark, New Jersey

Theodore D. McNeff
Strategic Alliance Director
Rochester, New York

Eduardo Melo
Manager
International Credit and Finance
Garza Garcia, N.L., Mexico

James C.S. Meng
Chief Scientist
Newport, Rhode Island

Bernard Myette
Research Manager
Head Office
Quebec, Canada

Koichi Nakajima
Senior Manager
Project Finance Group
International Finance Division
Tokyo, Japan

Robert D. Overbeek
Assistant Project Manager
Technical Support
Redstone Arsenal, Alabama

Richard A. Poisel
Chief
Research and Technolgy Division
Warrenton, Virginia

Triyadi Prayogo
Manager of Technical Operations
Jakarta, Indonesia

Paulo R.S. Rabelo
Manager of Mobile Systems
Implementation Department
Sao Paulo, Brazil

Pedro A. Richards
Director
Buenos Aires, Argentina

James F. Robbins
Director
RAB Systems Program Office
Fort Walton Beach, Florida

Hernan P. Rosas
Manager
Exploration and Production Systems
Caracas, Venezuela

Masayuki Saito
Treasurer
Fort Lee, New Jersey

John H. Sandvig
Manager, Preliminary Design
Seattle, Washington

Viney Sawhney
Executive Vice President
New York, New York

Oumar Seck
Consultant in Planning and
Evaluation
Dakar, Senegal

Susan C. Shackford
Director
Naval Hawk Final Assembly
Stratford, Connecticut

Shahab Shadman
Associate Director
Quality Engineering
Quebec, Canada

Bambang G. Soekamto
Project Manager
Medan, Indonesia

Albert F. Suchy
commanding Officer
Boston, Massachusetts

Ryo Takahashi
Director
Public Relations and Duty Free/
Special Market
Tokyo, Japan

Chee-Keon Tan
Plant Manager; and
Manager Corporate Planning
Jurong Town, Republic of Singapore

March S. Trinklein
Director
Technical Support Operations
U.S. Department of the Air Force

Yasuo Uchiyama
Manager
First Motor Vehicles Division
Tokyo, Japan

Vincent B. van den Brekel
Financial Consultant
Amsterdam, The Netherlands

THE HEALTH SECURITY ACT OF 1993: A SUMMARY

The Clinton plan offers a system of guaranteed private insurance. It proposes to build on the current system of private insurance with two critical changes: first, the guarantee of comprehensive health benefits that can never be taken away; and second, greater consumer power for people and small businesses to choose quality health insurance at lower cost.

Our national goal is health security for every American -- comprehensive health benefits that can never be taken away. No limit on benefits over your lifetime. No refusal of insurance if you have a pre-existing condition. No losing your insurance if you get sick or lose your job. And no rate increases if you get sick.

Our principles are clear and distinguish our approach: Security -- comprehensive benefits that can never be taken away. Simplicity -- creating a single claim form to reduce paperwork and bureaucracy. Savings -- controlling health care costs. Quality -- making the worlds' best care better. Choice -- preserving your right to choose your doctor and expanding choice of private insurance plans. Responsibility -- every American assumes responsibility to bring an out-of-control system under control and put funding on a fair and responsible basis.

Real reform and real savings are possible only if health care benefits are guaranteed to every American. Without universal coverage, there's no guarantee we will be able to control costs and provide comprehensive benefits. For example, today, everyone of us pays a part of the \$25 billion bill for health care for the uninsured; and a single claim form doesn't save money unless everyone is using it.

Comprehensive benefits include preventive care, prescription drugs, doctor visits, hospital services, home health care, hospice care, emergency care and ambulance services, mental health care, vision care, and dental care for children and eventually, for adults.

For seniors, the protection of Medicare remains with improvements -- new prescription drug coverage and a new long-term care program. Our health security plan will achieve real savings in Medicare and re-invest those savings to improve benefits.

For small business, our plan provides insurance discounts to help them afford comprehensive benefits for their employees. Most small businesses already provide health insurance to their employees but they're forced to pay as much as 50% more than larger companies. Our plan helps assure them the best benefits, controlling costs and expanding coverage.

If we fail to act:

- **Every American -- 100% -- can expect to pay higher insurance premiums nearly every year, with no guarantee of security, no guaranteed benefits, and no guarantee that insurance will be there when they need it.**
- **One of every four Americans will lose their insurance at some point in the next two years.**
- **Almost \$1 out of every \$5 Americans spend will go to health care.**
- **By the end of the decade, just to keep their benefits, American workers will sacrifice almost \$600 in wages every year.**
- **Millions of Americans will find that rising costs will force their firms to cut back on benefits and limit choices of doctors and health plans.**

Our plan for health security is the most comprehensive and responsible, building on what works in our current system and fixing what doesn't. We maintain an essentially private system, streamlined and less bureaucratic than what we face today. And, we're demonstrating how that system will work -- from details on the benefit package and premiums to a firm explanation of the most responsible financing possible.

HOW THE PLAN WORKS

How Health Care Reform Will Affect You

- *Our national goal is health security -- comprehensive health benefits guaranteed for every American.*
- *How will the President's plan work? The Clinton plan offers a system of guaranteed private insurance. It proposes to build on the current system of private insurance with two critical changes: first, the guarantee of comprehensive health benefits that can never be taken away; and second, greater consumer power (for people and small businesses) to choose quality health insurance at lower cost.*
- *How will you get health insurance? The way most Americans do today, through your employer. If you're employed, you'll choose your health plan at work, and your employer will make a contribution to help pay. If you're unemployed or self-employed, you'll sign up by mail or telephone. Every American citizen and legal resident will receive a Health Security card that will protect you from ever losing your coverage -- no matter what.*
- *Your Health Security card guarantees you comprehensive benefits that can never be taken away -- benefits as comprehensive as those most Fortune 500 companies offer: doctor and hospital care, prescription drugs, and something rarely found in today's insurance plans -- preventive care, including prenatal care, immunizations, and disease screening for adults, such as mammograms, Pap smears, and cholesterol tests. And there will be no lifetime limits on benefits.*
- *You choose your doctor and your health plan. Every American will have a choice of health plans -- and plans will enroll everyone who applies, regardless of age, occupation or medical history. You will be able to follow your doctor into a traditional fee-for-service plan, a network of doctors and hospitals, or a health maintenance organization (HMO). For older Americans, Medicare will be preserved and strengthened with new coverage of prescription drugs. And there will be expanded options for home and community-based long-term care.*
- *Informed choices strengthen consumers. Easy-to-understand "report cards" on health plans -- the doctors and hospitals involved, the quality of care, consumer satisfaction, prices, and other factors -- will help you make smart choices. Once a year, consumers will have a chance to choose a new plan, something most people can't do today.*
- *It's easy to get care. Once you've picked a plan, if you need to go to the doctor for a check-up or if you get sick, you'll simply take your Health Security card, show it at the doctor's office, and they'll take care of you. Then you'll fill out one standard form, and you're done. So when you get sick, you won't be buried in forms -- and neither will your doctor or hospital.*

WHY UNIVERSAL COVERAGE IS IMPORTANT

- **We must guarantee health security -- no matter what.**

Real health security means comprehensive health benefits that can never be taken away -- that is possible only with universal coverage. We need to be able to say to people who work hard and play by the rules that they will never lose their insurance. If you lose your job. If you start a small business. If you get sick. If your child gets sick. No matter what -- you're covered. It's time to give the American people freedom from the fear that they could lose their health coverage and be denied care when they or their children need it most.

- **Universal coverage is essential to controlling costs.**

Without universal coverage, too many will continue to get care from emergency rooms instead of doctors' offices -- because they couldn't afford preventive care or a doctor visit, and their illnesses became more severe. The costs end up being overly expensive in the emergency room, and each of us pays higher premiums and taxes to make up for those who don't pay. One health policy expert writes that "only with universality can we eliminate the practice of making patients with insurance pay the medical costs of those without it." In general, health policy experts agree that "cost control becomes easier when the plan is universal, not harder."

Today, some low-wage workers go on welfare just to get health benefits. Universal coverage will put an end to this practice, reducing what we spend on welfare. One study suggests that universal coverage could reduce welfare cases by up to 25 percent.

- **Universal coverage is necessary to simplify the system.**

Savings from simplifying and reducing the bureaucracy can't be realized without universal coverage. For example, a single claims form doesn't work unless everyone is in the system and following the same rules. And the simplicity and savings from a Health Security card won't happen unless everyone is guaranteed benefits that can never be taken away.

- **In a changing job market, people need security.**

With American workers changing jobs so often they'll hold an average of eight jobs in a lifetime and more and more companies using temporary or part-time workers, we need universal coverage to make sure no one will ever lose their health insurance. Even if people are without insurance for just a few months, during that time, they are an illness or injury away from financial catastrophe.

COMPREHENSIVE BENEFITS

- **All Americans will be guaranteed comprehensive benefits that can never be taken away.**

No insurance company will be able to drop people from coverage or deny them benefits when they get sick. No employer can decide to take away benefits. And no early retiree will see their benefits dropped. Americans will be guaranteed comprehensive benefits -- no matter what.

- **The comprehensive benefits package is as generous as that offered by most Fortune 500 companies.**

Every American will receive a Health Security card that will guarantee a comprehensive package of benefits as generous as those offered by most Fortune 500 companies, including hospital services, laboratory services, hospice and home care, vision care, mental health care, and other services. The executive editor of the *New England Journal of Medicine*, Dr. Marcia Angell, calls the benefits "quite comprehensive" and says that "very few private insurance plans do as much."

- **"Lifetime limits" on coverage will be illegal.**

Unlike current insurance, the plan places no lifetime limits on coverage and guarantees a full range of medically necessary or appropriate services.

- **Prescription drug coverage is included.**

All Americans will have coverage for prescription drug costs under the Health Security Act. For people under age 65, individuals will pay either \$5 per prescription or 20 percent of the cost after meeting a \$250 per year deductible, depending on the health plan. For those on Medicare, 80% of the cost will be covered after a person reaches the \$250 deductible. And annual out-of-pocket costs will be limited to \$1,000 -- everything over that will be covered.

- **Preventive care is emphasized.**

The benefits package goes beyond virtually all current insurance plans in covering preventive care. The *New York Times* says that "(a)mong the additions for many would be preventive care... Even the most generous of the Fortune 1,000 companies... do not offer such coverage in fee-for-service insurance plans." A wide range of preventive services -- including annual physicals, well-baby care, immunizations, prenatal care, cholesterol screenings, mammograms, and Pap smears -- are covered in the comprehensive benefits package.

THE HEALTH SECURITY ACT BENEFITS PACKAGE

Comprehensive Coverage For Every American
No Lifetime Limits

- Clinical Preventive Services
- Outpatient Rehabilitation
- Family Planning Services
- Mental Health Treatment
- Substance Abuse Treatment Services
- Services for Pregnant Women
- Children's Dental Care
- Home Health Care
- Laboratory, Radiology, & Diagnostic Services
- Ambulance Services
- Emergency Care
- Prescription Drugs
- Doctor Visits
- Hospital
- Vision Care
- Hospice Care
- Surgical Services
- Extended Care Services
- Durable Medical Equipment (e.g. Prosthetic & Orthotic Devices)

CHOICE

- **Every American will be able to choose their doctor.**

Choice is the basis of the doctor-patient relationship, and it will be protected. The Health Security Act ensures that you will be able to follow your doctor and his or her team into any plan they might choose. Some of the nation's largest groups of providers -- including the American Nurses Association and American College of Physicians -- have said that the plan will protect people's choice of health providers.

- **Increased choice of health plans.**

Individuals will be able to choose their own health plan, not employers or insurance companies. Most people will have a choice of several different kinds of plans -- traditional fee-for-service plans, networks of doctors and hospitals, or health maintenance organizations (HMOs). And there will be at least one traditional fee-for-service plan available to everyone. One of the nation's leading doctors' groups -- the American College of Physicians -- says that "...the President's proposal increases the choices available to most Americans...(it) allows patients, not their employers, to choose their health plans and their physicians. And the legislation allows patients to stick with their plans and their physicians even through changes in employment."

- **Information to make informed choices.**

Consumers will be provided with easy-to-understand information about the quality of different health plans and whether other consumers have been satisfied. So health plans will be forced to compete on price, quality and service, and consumers will be empowered to choose high-quality plans. In addition, information about the risks and benefits of different treatments will become more available, so that patients and doctors can work together to decide on what is the appropriate treatment.

- **The plan will increase options for long-term care.**

The Health Security Act provides a new federal-state program to cover home and community-based care, a long-term care option that most people prefer, and that often costs less than a nursing home. The American Association of Retired Persons (AARP) has said "...the President's proposal will provide America's families with choices they don't have under the current system. It will provide the option to receive care where people most want to receive it, at home and in their community. People will no longer have to feel that going into a nursing home is the only choice they have."

WHAT CONSUMERS PAY

- **Premiums that are affordable.**

Today, your premiums depend on many factors beyond your control: you're being charged more if you're sick, or older, or in a small company. This will change. Under the Health Security Act, your premiums will be predictable and easy to figure out. They will vary -- as they do today -- from plan to plan and state to state, but the system will be much simpler and much fairer. Everyone will pay the same price for the same plan -- no matter whether you are sick or healthy, whether you're old or young, whether you work for a small company or a large company. Your premium only depends on your family status (single, married couple, or family with children).

- **Employers pay most of the premium.**

Employers will all contribute for their workers, covering 80% of the cost of an average-priced plan. Individual contributions will make up the difference -- if you choose an average-priced plan, you will pay 20% of the premium. If you choose a lower-priced plan, you will pay less. If you choose a higher cost plan, you will pay more. If your employer pays the entire cost of the premium -- as many do today and may continue to do after reform -- you will pay nothing at all.

- **Low co-payments and deductibles.**

Co-payments -- the amount you pay out-of-pocket when you go to a doctor - will be limited and uniform, protecting you financially and making it easier to choose among health plans. Many of the plans that will be offered require just a small payment (\$10) for each doctor's visit. Others will require a larger fee for each visit but you will never have to pay more than \$1,500 for an individual and \$3,000 for a family per year. For a wide range of preventive services, there will be no co-payments in any plan.

Deductibles -- the amount you have to pay before your insurance kicks in -- are larger than \$200 per person in almost half of today's plans and can be as high as \$3,000. After reform, many plans will have no deductible at all. For the plans that do, deductibles will be \$200 for an individual and \$400 for a family.

- **Seven out of ten Americans will save.**

The majority of people covered through their employers -- nearly 7 out of 10 Americans -- will pay the same or less for health benefits that are the same or better -- on average, saving \$61 per month on premiums, co-payments, and deductibles. About 30% will pay more -- on average, about \$24 per month -- but those people will receive benefits that can never be taken away, and for many, better benefits.

WHAT BUSINESSES PAY

Most of the funding for the Administration's health care reform proposals comes from the same place it does today -- premium payments by employers and individuals. The employer share is a fixed amount. Employers only need to know whether their employee is buying a single, couple, or family policy to know what they will pay.

Today, the employer for one of the workers in a family often pays to cover that workers' entire family. The President is now asking each employer to contribute, spreading cost among all employers. Under reform, no single employer will have to bear the burden of covering the entire family when both husband and wife work. Employers together will contribute 80% of the average premium for each family. Therefore, the employer pays 80% of the average premium, divided by the average number of workers per family in each alliance.

So, the employer share for families will actually be less than 80%. This will make things simpler for employers -- all they have to do is pay a fixed amount for each employee. They won't have to coordinate with other companies where their employees' spouses work, or suddenly change what they pay in the event of a spouse being laid-off.

<u>Policy Type</u>	<u>Employer Share*</u>
Two-parent family w/children	\$2,479
Single parent	\$2,479
Couple	\$2,125
Single person	\$1,546

* 1994 Preliminary Estimates, Will Vary from State to State

GENERAL Q&A

1.) Doesn't the Clinton plan add more layers of government bureaucracy?

No. The President specifically rejected a government-run system in favor of a system rooted in the private sector, and based on what we have today. People will choose their own private insurance policy from among those offered in their area. The plan will free doctors and consumers from today's avalanche of paperwork, and streamline the system. It will require insurance companies to use a single claim form, which will replace the hundreds of different forms from the 1500 different insurance companies. And it will give every American a Health Security card which will lead to electronic billing and less paperwork.

2.) I've watched those TV ads where the couple at the kitchen table asks: "What happens if the money runs out?" What does happen?

Let's get one thing straight. Their ad says that the government will limit health spending under the President's plan. Well, that's wrong -- the limit they don't like is on how much insurance companies can charge on premiums. Insurance companies that say they have to jack up rates aren't playing straight with you.

The President's plan relies on the most responsible financing possible and it includes safeguards to ensure that health care will always be there for every American. If a health plan were to literally run out of money, and that's unlikely because of the way the President's plan is designed, consumers would simply join another plan. Unlike today, though, benefits would be guaranteed.

3.) How do you pay for this whole reform plan anyway? Isn't it just "smoke and mirrors?"

Not at all. Here's how we pay for reform. All the employers and individuals that don't pay anything today for the cost of their health care will be asked to contribute. We will raise the tax on tobacco and ask large corporations that decide to cover their own employees to help pay for the cost of health care for everyone. At the same time, we're going to slow the skyrocketing growth of federal health programs and crack down on health care fraud with new penalties.

Many leading, private-sector economists -- even those who disagree with the policy the President decided on -- have looked at the financing of the plan and said that the numbers add up. The plan uses very conservative assumptions and includes a 15% cushion in case costs grow significantly more than expected. Although the plan raises some additional revenue, it avoids a broad-based tax because the President feels that we can get better value for the dollars we currently spend on health care.

4.) One of those TV ads says that the President's plan will limit my choice of doctor. Is that true?

No, it's not. You will be able to choose your own doctor. What you pay will depend on which plans your doctor joins. There will be a range of plans available at a range of prices and your doctor will be free to join a number of plans -- so the choice will always be yours.

In fact, our plan actually increases the choices most consumers will have. Every American will be able to choose from several different kinds of health plans, no matter where they work. And the choice will be theirs, not their employer's. And, every American will be able to switch plans every year if they're not satisfied with their care or service.

Remember, this is an ad paid for by the insurance companies -- who are trying to scare you and preserve their profits.

5.) Won't this plan mean that I'll pay more and get less?

No. For the majority of insured Americans -- nearly seven out of ten -- our plan will mean you will pay the same or less for health care benefits that are the same or better -- on average, saving \$61 a month on premiums, co-payments, and deductibles. About three out of ten will pay more, on average about \$24 per month, but they'll receive benefits that can never be taken away, and for many, better benefits.

6.) Won't your plan cause massive job loss, driving thousands of small businesses into bankruptcy?

Absolutely not. You're listening to a scare tactic from some of the lobbyists trying to guard the status quo.

These studies don't take into account the significant discounts that the President's plan offers small businesses. The very lobbyist who paid for the most commonly cited job loss study calls it "outdated" and not relevant to the President's plan. And an independent expert calls it "way off base." (CNN, 10/22/93, about an Employment Policies Institute study predicting 3.1 million jobs lost, cited in a GOP ad) The Wall Street Journal called the Clinton plan "an unexpected windfall" for small business.

There will, in fact, be some job gains as a result of the plan. Manufacturers will see their costs go down, and one study from the Economic Policy Institute predicts that means 258,000 manufacturing jobs created over the next decade. There will also be health care jobs created, with one health economist at the Brookings

Institution predicting that the plan will create 750,000 home health care jobs. And the Employee Benefit Research Institute predicts that the President's proposal could produce as many as 660,000 jobs.

7.) **I've got good insurance. What's in this plan for me?**

People who like their insurance today have a lot to gain from the Health Security Act. First -- and most important -- you'll get something that no amount of money can buy in today's insurance market: **security -- the guarantee that your benefits will never be taken away.** You'll also get more choices of doctors and plans than many people have today, and you'll finally stop losing wages just to keep the same health benefits. And you'll probably pay less for high-quality care. **The bottom line is this: you can't guarantee that the benefits you have today will still be there tomorrow. The Health Security Act provides you with that guarantee.**

8.) **When you try to cut costs and limit the amount premiums can rise, won't that just lead to worse care and waiting on lines?**

Not at all. Costs will be controlled by eliminating the waste and fraud in the current system -- not by cutting corners on consumers. Doctors, nurses, and hospitals tell us they can save a lot and give better care if the insurance company red tape will get out of their way. The main reason plans won't cut corners is because they know patients will be free to choose a new plan and leave them if they don't provide quality care.

9.) **Won't the Clinton plan raise taxes on the middle class?**

No. The President specifically rejected a broad-based tax because he thinks that middle class Americans are already paying too much for their health care. There is already plenty of money in the system -- the problem is that much of it is wasted. The money saved by eliminating the waste, fraud, and inefficiency that exists today will help all of us get better value for our health care dollar.

10.) What's this I hear about Medicare benefits being cut?

That's not true. Older Americans who receive Medicare will continue to receive all the benefits they do today. In addition, Medicare will be strengthened by adding prescription drug coverage. If you're on Medicare, you'll actually have more choices after reform. You can continue to receive care like you do today, or choose among different health plans that may offer fuller benefit packages and lower payments. Older Americans will also benefit from new long-term care options in their homes and communities, where they want to receive care.

The growth of Medicare costs can be slowed, however, with comprehensive health care reform. Medicare will no longer have to reimburse doctors and hospitals for the cost of caring for the uninsured, saving billions of dollars per year. With all employers contributing to health care, Medicare will also save on workers now covered by those programs. Upper-income people will pay a larger share of their Medicare Part B premium, and there will be a crackdown on the fraud and overcharges that drive up Medicare costs. These reforms will slow the growth of Medicare costs from three to two times the rate of inflation, and the savings will be rechannelled into new benefits for older Americans, like prescription drugs and long-term care.

Every Democratic and Republican proposal recognizes that with national health care reform, we can save money in the rate of growth in Medicare and Medicaid.

HEALTH REFORM: THE PRESIDENT'S APPROACH

Here's how health reform works:

- **Guaranteed private insurance.** We want to guarantee every American comprehensive coverage that can never be taken away.
- **Choice.** We want everyone to have the right to choose their own doctor and their own health plan. We want to make sure you get high-quality care by giving you the choice, not your boss or insurance company.
- **Outlaw unfair insurance practices.** We'll make it illegal for insurance companies to jack up your rates if you get sick; charge older people more; or take away your benefits. That's how you'll get affordable insurance you can depend on.
- **Preserve Medicare.** We'll strengthen Medicare, and protect older Americans' choice of doctor. We also want to cover prescription drugs under Medicare, and give new options for long-term care in the home and community.
- **Health benefits guaranteed at work.** Every job should come with health benefits. Most jobs do today. And yet 8 out of 10 Americans who have no insurance are in working families. We want everyone to have health benefits guaranteed at work. The government will provide discounts for small businesses and the unemployed.

AMERICA'S HEALTH CARE CRISIS THE FACTS

Opponents of reform say there's no crisis, but they're wrong.

- **Your benefits are at risk.** 81 million Americans have "pre-existing conditions" that insurers can use to raise rates or deny coverage. 3 out of 4 insurance policies have lifetime limits that cut off benefits when you need them most.
- **Even if you have good insurance today, you can lose it tomorrow.** 58 million Americans are without insurance at some point during the year. And 2 million Americans a month lose their insurance.
- **You're paying more each year.** What American families pay for health insurance has risen 55% in just 3 years.
- **Your choices are declining.** In 1988, nearly 9 out of 10 employers offered health plans that let employees choose any doctor in their community. In 1993, however, only 6 out of 10 employers offered this option to their employees.
- **And you are losing wages.** Without reform, by the year 2000, American workers will lose almost \$600 in wages each year just to keep their health benefits.

FIRST YEAR ACCOMPLISHMENTS
January 14, 1994

INDEX

- ~~Executive Orders~~
- ~~Presidential Memoranda~~
- ~~Welfare Reform~~
- Crime - *consult round table Mon*
- Education/Job Training - *concord. of programs forums*
- Environmental
- Transportation - *Rodney Slater*
- Children/Youth/Families - *immunity. State plans*
- ~~Midwest Floods~~
- ~~Labor~~
- Empowerment Zones/
Enterprise Communities *Consulting w/ states in app. devel.*
- Homelessness - *states at forums*
- ~~Civil Rights~~
- ~~Political Reform~~
- ~~Violence~~
- Immigration - *Govs.*
- Disabilities *Health care, long term care*
- Timber/Forest Summit
- Consolidated Services *Jan 6 - CSP Ind. / WV Virginia 199 Fed/state progs.*
- Reinventing Government - *had state officials working on this*
- CD Banks
- Communication Summary
- *Nat. Service*