NLWJC - Kagan DPC - Box 036 - Folder 013

POTUS Press Conference - Q&A 12/16

Questions and Answers on Welfare Reform and Jobs December 11, 1997

- Q: Some people are concerned that there won't be enough jobs for all the welfare recipients who need work: in fact, there was a union-sponsored study released last week that said one out of two welfare recipients won't be able to find jobs. Are you concerned about this issue?
- A: Right now, the nation's jobless rate is at its lowest level in 24 years. We've created nearly 14 million jobs since I took office. Nationally, we are creating enough jobs for individuals leaving welfare -- for example, the economy created over 400,000 new jobs in November, far more than the roughly 60,000 adults who leave welfare each month.

But to make sure there will be enough jobs in every area of the country, I fought for and won a \$3 billion welfare-to-work fund in the Balanced Budget Act targeted specifically to high unemployment and high poverty areas where jobs may be scarce. I have also challenged companies all across the nation to hire welfare recipients -- over 2,500 have agreed so far -- and have committed the federal government to hire its fair share of workers from the welfare rolls.

Background:

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On Friday, December 5th, the Labor Department released data showing that the number of jobs increased by 404,000 in November and that the unemployment rate stood at 4.6 percent. Since August 1996, about 180,000 people have left the welfare rolls each month, about 60,000 of whom are adults (the rest are the children in those families). Since you took office, the economy has created nearly 14 million new jobs, and nearly 1.2 million adults have left the welfare rolls (for a total caseload decline of 3.8 million persons, both adults and children).

On Wednesday, December 10th, Jobs With Justice, an AFSCME-sponsored group, released a study arguing that there are twice as many welfare recipients seeking work as there are low wage jobs. DPC and CEA staff believe the study understates the number of low-skilled jobs being created and overstates the number of welfare recipients needing jobs by assuming, for example, that one-third of adults on welfare, or 1.2 million persons, will need to enter the labor force next year.

Questions and Answers on the Tobacco December 11, 1997

Q: Do you see any signs that Congress will pass your comprehensive tobacco legislation?

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A: Yes. There are promising signs that Congress will come together in a bipartisan fashion and pass tobacco legislation in the upcoming year. Shortly after I announced my plan for the reduction of youth smoking we had a meeting with the leaders of both the House and the Senate on this issue -- Republicans and Democrats -- and the response was very positive. We've continued to talk with members of Congress of both parties to pave the way for the enactment of tobacco legislation next year

Protecting our children is a goal we can all agree on. Several Senators of both parties have introduced legislation, and there is a consensus that we have a unique opportunity if we act right now to control teen smoking. Of course, this is a complicated issue. It needs to be dealt with carefully. But we have great hopes that the Administration and Congress can work together to enact bipartisan legislation in the near future.

- Q: Can you clarify the Administration's position on the money states have received from tobacco settlements. Are the states required to share that money with the federal government?
- A: The states, particularly the state attorneys general, deserve enormous credit for their role in the fight against the tobacco companies. Their efforts, together with the FDA's rule, have led to extraordinary progress in our fight to reduce the death and illness caused by tobacco.

Current law requires HHS to seek recovery of the federal portion of any Medicaid reimbursements arising from state tobacco settlements. I would prefer to see the allocation of tobacco funds between the federal and state governments resolved through legislation, and I look forward to working with the states and Congress to reach a mutual agreement on how to use the funds generated by tobacco legislation.

Questions and Answers on Southwest Border Drug Initiative December 11, 1997

Background:

For several months, General McCaffrey has been arguing for a comprehensive effort to stem the flow of drugs coming across the Southwest Border. Based on his site visits to many of the 39 points of entry (POEs) along the Southwest Border, McCaffrey has argued for improved management and increased resources to support the "rule of law" along the border. Yesterday, General McCaffery announced to the press that the Administration would be releasing a 5-year Southwest Border strategy as part of the State of the Union.

- Q: Mr. President, this past week General McCaffrey announced that you would be announcing a new strategy for the Southwest Border in your State of the Union Address. Is this true and, if so, can you tell us a little bit about this proposed strategy?
- A: This summer, General McCaffrey and other officials spent a considerable amount of time on a fact-finding tour of the Southwest Border. He has since briefed me and key Members of Congress on his findings. Our Southwest Border is one of the largest and most active borders in the world, and is getting even busier. Tens of millions of cars and trucks cross every year, as so do hundreds of millions of people -- and billions of dollars in two-way trade. And this increased traffic makes our drug control efforts more important than ever.

This Administration has already dramatically increased the federal presence at the border. We have doubled the number of Border Patrol agents from 3,000 to 6,000 and added other law enforcement resources. But even more needs to be done.

Along with the Departments of Justice and the Treasury, General McCaffrey is working on additional ways to improve our efforts to stop the flow of drugs at the border. They are looking at a range of proposals, including some to improve infrastructure and technology at the border and to enhance and better coordinate intelligence efforts. We are considering these issues in the budget process and in the development of our National Drug Control Strategy, and I expect we will come forward with recommendations and improvements throughout the year.

Questions and Answers on Medicare December 11, 1997

Medicare Commission

- Q: Why haven't you appointed a chair for your Medicare Commission? What's the hold up?
- A: First, let me say I am very pleased with my appointments to the Commission. I believe they will serve the Commission and the nation well. The Chair is required by law to be mutually agreed to by the Republican leadership and myself. We have yet to reach a consensus on a candidate that is acceptable for all of us. However, I am confident that we will be able to come to closure on this in short order.
- Q: Do you think the Medicare Commission is dead on arrival?
- A: No. This Commission can make an extremely valuable contribution in helping this nation address the challenges facing the Medicare program. I'm confident that members of the Commission will take a close look at the challenges the program faces and the possible solutions. In 1996, few people thought that we would ever agree on a balanced budget, but of course we did. The Commission has a difficult task, but I'm hopeful of a good and productive outcome.
- Q: Do you think the Chairman or the Commission should uphold the Speaker's no tax pledge in its upcoming deliberations?
- A: As I have said before, I do not know if taxes will be necessary to address the challenges the program faces. However, I do not believe that any preconditions should be placed on the members of this Commission. I think we should let the Commission do its work, rather than speculate now about its ultimate recommendations.

Medicare Policy

- Q: Will you be supporting proposals to extend health care coverage to older Americans who are not yet eligible for Medicare?
- A: I have always been extremely concerned about this vulnerable population, and the difficulties that many of these Americans face. These older Americans are one of the most difficult to insure populations: they tend to be less healthy and are more likely to have problems gaining access to affordable health care.

I have asked for information to better understand the challenges this population faces and for possible ways to assist them in obtaining more affordable health care coverage. However, it is early in my review process and no decisions have been made at this time.

- Q: What is your response to reports that Medicare is overpaying for prescription drugs by \$447 million?
- A: I am well aware of concerns about Medicare's overpayments for prescription drugs. For this reason, I included a proposal in last year's budget to ensure that the program pays no more than the actual costs for these drugs. This proposal is consistent with the IG's report and recommendations that have been reported on in recent days.

I fully intend to include this proposal in my upcoming FY 1999 budget. If Congress passes this provision, the Department estimates that it will save millions of dollars.

Questions and Answers on Child Care December 15, 1997

- Q. The New York Times reported that you are going to announce a significant child care initiative at the State of the Union, with tax credits, an increase in the block grant and other proposals. What are you planning?
- A. Working parents of all income levels and backgrounds struggle with child care. We hosted a White House Conference on Child Care a few months ago to examine this issue and explore how we as a nation can do better to improve child care for America's working families. At the White House Conference, I announced that I will include a child care initiative as a part of my next budget request and will unveil it during my State of the Union Address. While we are still working through the details, my proposal will address the issues which were illuminated at the Conference -- the problems families face with the cost of child care, the quality of care (especially for infants and toddlers), and the availability of care (especially for school-age children).