

Withdrawal/Redaction Sheet

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. memo	For Carol Rasco from Robert S. Litt and Dawn Johnsen re: Florida Health Security/Anti-Kickback Statute (3 pages)	08/05/94	P5
002. memo	To LeeAnn Inadomi and Tod Stern from Carol Rasco re: Letter to Graham and Gibbons (1 page)	08/08/94	P5
003. memo	For Leon Panetta from Carol Rasco re: Request from Governor Chiles (2 pages)	08/04/94	P5
004. note	Handwritten Note re: Florida (1 page)	08/01/94	P5
005. memo	For Leon Panetta from Carol Rasco re: Request from Governor Chiles (copy of #3) (2 pages)	08/04/94	P5
006. memo	For the President from Carol Rasco re: Florida Waiver w/attachment (4 pages)	07/21/94	P5
007. memo	For the President from Carol Rasco re: Florida Waiver w/attachments (6 pages)	07/21/94	P5
008. memo	For the President from Christine Varney re: Summary of Weekly Cabinet Reports July 15, 1994 through July 22, 1994 (8 pages)	07/15/94	P5
009. memo	For the President from Carol Rasco re: Waivers (1 page)	07/24/94	P5
010. memo	To Kevin Thurm from Michael Wald, Deputy General Counsel re: Beno v. Shalala (2 pages)	07/22/94	P5
011. memo	To Katherine L. Darwin from Carol Rasco re: Florida Waiver (1 page)	07/21/94	P5

COLLECTION:

Clinton Presidential Records
 Domestic Policy Council
 Carol Rasco (Meetings, Trips, Events)
 OA/Box Number: 5041

FOLDER TITLE:

Florida Waiver Briefing 5 August 1994 10:00-10:30

rw196

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]
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- P5 Release would disclose confidential advice 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]
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012. memo	For the President from Carol Rasco re: Floriday Waiver w/attachment (copy of #6) (4 pages)	07/21/94	P5
013. memo	To Carol Rasco from Kathryn Way re: Florida Waiver (1 page)	08/04/94	P5
014. memo	For Leon Panetta from Carol Rasco re: Call to Governor Chiles (1 page)	08/16/94	P5
015. note	Note re: phone call (1 page)	n.d.	P5
016. report	Draft of Safe Harbor Regulation for Insurance Agents (1 page)	08/11/94	P5
017. memo	To Carol Rasco from Kevin Thurm re: Florida Waiver - Safe Harbor Regulation (2 copies) (10 pages)	08/12/94	P5
018. memo	To Carol Rasco and John Angell from Kevin Thurm re: Florida Waiver (2 pages)	08/23/94	P5
019. fax	To Carol Rasco from John Angell re: language (3 pages)	08/18/94	P5

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ROUTING AND TRANSMITTAL SLIP

Date: *8-11-94*

TO: (Name, office symbol, room number, building, Agency/Post)	Initials	Date
1. <i>Carol Raseo</i>		
2.		
3.		
4.		
5.		

Action	File	Note and Return
Approval	For Clearance	Per Conversation
As Requested	For Correction	Prepare Reply
Circulate	<input checked="" type="checkbox"/> For Your Information	See Me
Comment	Investigate	Signature
Coordination	Justify	

REMARKS

From Kathi Way

DO NOT use this form as a RECORD of approvals, concurrences, disposals, clearances, and similar actions

FROM: (Name, org. symbol, Agency/Post) <i>Chaker</i>	Room No.—Bldg.
	Phone No.

5041-102
 ☆ U.S.G.P.O.: 1993 342-198/80005

OPTIONAL FORM 41 (Rev. 7-76)
 Prescribed by GSA
 FPMR (41 CFR) 101-11.306



U. S. Department of Justice

Office of Legal Counsel

Washington, D.C. 20530

DATE: August 5, 1994

FACSIMILE TRANSMISSION SHEET

FROM: Dawn Johnsen OFFICE (202) 514-3744
PHONE: _____

TO: Carol H. Rasco OFFICE (202) 456-2216
PHONE: _____

NUMBER OF PAGES: 3 PLUS COVER SHEET

FAX NUMBER: (202) 456-2878

REMARKS:

IF YOU HAVE ANY QUESTIONS REGARDING THIS FAX, PLEASE CONTACT KATHLEEN MURPHY OF KEVIN SMITH ON 514-2057

OFFICE OF LEGAL COUNSEL FAX NUMBER: (202) 514-0563
FTS NUMBER: (202) 368-0563

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**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.**

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THE WHITE HOUSE
WASHINGTON

OFFICE OF LEGISLATIVE AFFAIRS
FAX COVER SHEET

NOTE: THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS
CONFIDENTIAL AND INTENDED FOR THE RECIPIENT ONLY.

DATE: 8/8/94

TO: Rosalyn Miller

FROM: LeeAnn Inadomi 4567500
6221 (F)

RE: Bob Graham letter
Todd Stern asked that Carol
sign off on this before we send it.
Can you get her to look at it today?
Thanks!

DRAFT

The Honorable Bob Graham
United States Senate
Washington, D.C. 20510

Dear Senator Graham:

I appreciate your letter providing your personal explanation of the importance of the award of section 1115 waivers to the State of Florida, which would allow for the implementation of the Florida Health Security (FHS) Medicaid demonstration. The proposed demonstration makes insurance available to 2.6 million currently uninsured Floridians and places them in managed care systems.

The Department of Health and Human Services and the Health Care Financing Administration ^{as well as the Justice Dept} are currently conducting a review of Florida's proposal. ^{in discussions with Florida. All} They are committed to reviewing the proposal in an expeditious manner.

Thank you for forwarding your comments concerning the FHS proposal to me. A similar letter has been sent to Representative Sam Gibbons.

Sincerely,

Contact: Rhonda Rhodes/HCF/AAP/(202)690-7063

WAYS AND MEANS
COMMITTEE
(ACTING CHAIRMAN)

SUBCOMMITTEES:
TRADE

JOINT COMMITTEE
ON TAXATION
(VICE CHAIRMAN)

SAM M. GIBBONS

11th DISTRICT, FLORIDA

Congress of the United States

HOUSE OF REPRESENTATIVES

WASHINGTON, D.C. 20515

June 23, 1994

PLEASE RESPOND TO:

- HOUSE OFFICE BUILDING
WASHINGTON, D.C. 20515
TELEPHONE: (202) 225-3378
- 2002 N. LOIS AVE.
SUITE 280
TAMPA, FLORIDA 33607
TELEPHONE: (813) 870-2101
- 201 S. KINGS AVE., #6
BRANDON, FLORIDA 33511
TELEPHONE: (813) 889-2847

BARBARA TOFFLING
CHIEF OF STAFF

GREG WONDERS
FLORIDA OFFICE MANAGER

The Honorable Bill Clinton
The President
The White House
Washington, D.C. 20500

Dear Mr. President:

As we work to comprehensively reform the nation's health care system, substantial progress is being made at the state level. Currently, Florida is seeking a Medicaid 1115 waiver to implement the Florida Health Security (FHS) program, an innovative strategy to provide private health insurance to over one million working Floridians who lack health insurance. We are writing to underscore our strong support for Florida's proposal.

The need for Florida Health Security is critical. Over 22 percent of all Floridians under the age of 65, or 2.6 million people, are uninsured. Over 75 percent of our uninsured constituents are working families; one-third of the uninsured are children. According to the New England Journal of Medicine, three of the five most expensive health care cities in the country are in Florida--Miami, Ft. Lauderdale and Tampa.

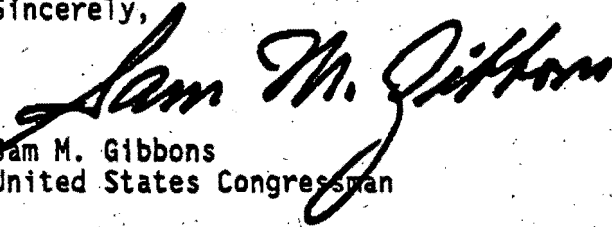
We strongly believe approval of Florida's program is consistent with the Health Security Act. Without universal coverage, we will never reach our goal. However, failure to positively address this request will send a chilling message to states which are working to support the Administration's efforts.

Governor Chiles submitted the state's application on February 9. Since then, the state has answered hundreds of written questions and resolved most of the outstanding issues. While negotiations over remaining issues are ongoing, we urge you to intervene on Florida's behalf and direct the Health Care Financing Administration to work with Governor Chiles towards a speedy and positive conclusion to these discussions.

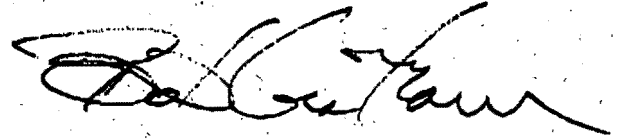
The Honorable Bill Clinton -- Page 2
June 23, 1994

We remain assured you will grant Florida the necessary flexibility to implement this bold and innovative program and look forward to our continued progress on health care reform at the national level.

Sincerely,



Sam M. Gibbons
United States Congressman



Bob Graham
United States Senator

SMG:t

cc: Honorable Donna Shalala
Mr. Bruce Vladeck



The State of Florida's

Washington Office

444 North Capitol Street
Suite 349
Washington, D.C. 20001

Telephone (202)624-5885
Fax (202)624-5886

FOLLOWING 6 PAGES

JUL 21 REC'D

TO: CAROL RASCO

fax # 456-2878

phone # 456-2216

FROM: DEBBY KILMER

DATE: 7/21/94 TIME: 11:00

NOTE: Per your request.

XC:

Joel K.:

This had been sent over while I was in a meeting. It is not necessarily relevant to the discussion now but I did pledge to pass it on.

Carol

hand delivered
7/21
Karn

2ed.

MEMORANDUM

TO: Bruce C. Vlodeck, Administrator
Health Care Financing Administration

FROM: Douglas M. Cook, Director

SUBJECT: Fees Paid to Agents by Florida Health Security Accountable Health Partnerships

DATE: July 14, 1994

DRAFT

As part of the Florida Health Security program, Florida proposes to use insurance agents to assist individuals enroll in Florida Health Security and advise applicants about eligibility for other Medicaid eligibility categories. To compensate insurance agents for such services, and in the process conform with traditional insurance/agent relationships, Accountable Health Partnerships ("AHP") will bid a premium on Florida Health Security products that contains an administrative loading factor, including a fixed percentage for agent commissions.

In our discussions with representatives of the federal Departments of Health and Human Services ("HHS") and Justice some concern has been expressed as to whether payments to insurance agents by the AHP violate the Social Security Anti-Kickback Statute ("Anti-Kickback Statute"), 42 U.S.C. § 1320 a-7b. The purpose of this memo is to explain the Agency's position that the arrangement which it is proposing does not violate the spirit of the Anti-Kickback Statute.

At the outset, it is worth explaining that the Florida Health Security Plan proposes to use Medicaid dollars to provide discounts for individuals to purchase insurance and, in that manner, to provide health insurance for over one million of Florida's currently uninsured residents. In its use of federal and state Medicaid funds to pay for private health insurance plans, Florida is on the cutting edge of a trend which may very well dictate the future of health care financing throughout the country. Presently, insurance agents are integral to the selling of health insurance. Every state, including Florida, licenses insurance agents and requires that only licensed agents sell insurance. Any state or federally funded health plan which seeks to utilize the private insurance industry, will, as a matter of law and practice, use licensed insurance agents. Thus, the implications for applying the Anti-Kickback Statute to insurance agents commissions goes far beyond the Florida Health Security program.

The specific grounds for the Agency's position that fees paid to an insurance agent by an AHP under the Florida Health Security Plan do not violate the Anti-Kickback Statute are as follows: first, a commission paid to an insurance agent is not criminal behavior or behavior which the anti-kickback statute was intended to protect against; second, such financial arrangements between insurance agents and AHP's do not contain the criminal intent necessary for criminal violations under the Anti-Kickback Statute; third, there are good public policy reasons for excluding insurance agent commissions from the Anti-Kickback Statute and

for exercising the government's discretion not to prosecute; fourth, arrangements which result in commissions being paid to insurance agents with Medicare or Medicaid funds are already possible under current law. Each of the foregoing grounds is set forth in greater detail below.

1. Purpose of Anti-Kickback Statute

The legislative history of the Anti-Kickback Statute shows that its purpose when passed and in its present form was to criminalize fraudulent and abusive conduct against the Medicare and Medicaid programs. In the House Report accompanying the 1972 version of the Statute¹, the stated purpose of the act was to

provide penalties for certain practices which have long been regarded by professional organizations as unethical, as well as unlawful in some jurisdictions, and which contribute appreciably to the cost of the medicare and medicaid programs.

Pub. L. No. 92-603, p. 5093.

In 1977, Congress passed the Medicare and Medicaid Anti-Fraud and Abuse Amendments which upgraded the previously covered offenses to felonies and substantially expanded the definition of prohibited kickbacks. (Pub. L. No. 95-142). Though the 1977 amendments significantly broadened those types of financial arrangements which could be considered illegal, the purpose of the Anti-Kickback Statute remained the same: to punish unethical or illegal financial arrangements which increased the cost of Medicaid or Medicare. A 1978 letter from Don E. Nicholson, Director, HHS Office of Program Integrity to the Honorable Leon E. Panetta, stated the Health Care Financing Administration's ("HCFA") understanding of the Statute:

The intent of [the anti-kickback and rebate prohibitions] is not to penalize individuals or entities participating in legitimate transactions. Rather, they are intended to penalize those who engage in unethical or illegal financial arrangements that unnecessarily increase the cost of Federal health care programs.

In the comment to the Final Rule, HCFA acknowledged that conduct which "would have been illegal at any time since the current law was enacted in 1977" would continue to be illegal today. (56 Fed. Reg. 35944). In other words, the conduct which Congress intended to penalize in the 1977 Act is the conduct which should be penalized presently.

It follows that the payment of a commission to an insurance agent is not the type of illegal, unethical business transaction which the Anti-Kickback Statute was intended to criminalize. Indeed, payment of a commission to an insurance agent is exactly the type of "legitimate transaction" to which the Anti-Kickback Statute was not intended to apply. The legitimacy of agent commissions is demonstrated by the fact that every state, including Florida, licenses insurance agents and requires that only licensed agents sell insurance. As a consequence of that requirement, the only way to sell private health insurance in the State of

¹ Pub. L. No. 92-603, § 242.

Florida is through licensed insurance agents. It also follows that so long as Medicare or Medicaid funds are being used to fund private health insurance, the utilization of insurance agents to market and sell such insurance will be necessary. The payment of commissions to such insurance agents cannot, therefore, be held to "unnecessarily" increase the cost of the Medicare or Medicaid programs.

2. Criminal Intent Requirement

On its face, the Anti-Kickback Statute is broadly worded and could, according to the comments published along with the Final Rule, technically cover "many relatively innocuous, or even beneficial, commercial arrangements." (56 Fed. Reg. 35952 (July 29, 1991)). Partly as a result of the Statute's broad language, safe harbor exclusions were created to provide some guidance as to the business and payment practices which would not be subject to criminal prosecution. The listed safe harbor exclusions (42 C.F.R. § 1001) were never intended, however, to be exhaustive. Indeed, HHS has the authority under the Anti-Kickback Statute to create additional safe harbors through regulation. (42 U.S.C. § 1320a-7b (b) (E)). In addition, the comments to the Final Rule make clear that "It is . . . not possible to provide safe harbor protections for all business arrangements that are not abusive." (56 Fed. Reg. 35954).

While the safe harbor exclusions provide some guidance, the primary inquiry in determining whether any business or payment practice violates the Anti-kickback Statute is whether the conduct in question is primarily intended to induce the referral of business reimbursable under Medicare or Medicaid. As a result of this "criminal intent" requirement, it is necessary to "examine the intent of the parties on a case-by-case basis." See 56 Fed. Reg. 35955.

The criminal intent requirement was emphasized in United States v. Bay State Ambulance and Hospital Rental Service, Inc., 874 F. 2d 20 (1st Cir. 1989), where following the Third Circuit, the court reasoned that the gravamen of Medicare Fraud is "inducement." The Bay State Ambulance Court also recognized that inducement must be the primary purpose for making the payment -- though it need not be the only purpose. Id. at 33.

In the proposed transaction between the AHP and an insurance agent, the agent would earn a commission regardless of which health plan he enrolls an individual insured. In addition, there are variety of factors which will influence an individual's decision to enroll in a particular health plan. Use of the alliances, in and of themselves, will reduce the role of the agent in recommending plans because a major function of the alliances will be to provide consumer education and materials. Such materials will include side by side comparisons showing for all plans information on which the consumer usually bases his decision to purchase health insurance. Insurance agents will be required to provide these comparison charts to all potential enrollees in Florida Health Security. The foregoing factors will significantly reduce, if not eliminate, an insurance agent's ability to induce a participant to enroll in one health plan over another.

Moreover, it is a violation of the Florida Fair Trade Practices Act, Section 626.9541 (h), Florida Statutes, for an insurance agent to receive an unlawful rebate. In the face of existing Florida law, and the foregoing considerations, it would be difficult to argue that the purpose of the commission was primarily inducement.

3. Public Policy and the Use of Prosecutorial Discretion

As with all criminal statutes, prosecution under the Anti-Kickback Statute involves a certain degree of prosecutorial discretion. Recognizing this, it was explained in the comments to the Final Rule that

in many (but not necessarily all) instances, prosecutorial discretion would be exercised not to pursue cases where the participants appear to have acted in a genuine good-faith attempt to comply with the terms of a safe harbor, but for reasons beyond their control are not in compliance with the terms of that safe harbor. In other instances, there may not even be an applicable safe harbor, but the arrangement may appear innocuous. (58 Fed. Reg. 35954).

Clearly, the decision to prosecute a particular arrangement would be made on a case-by-case basis and depend on a variety of factors. Factors which have been specifically identified by HCFA include the extent to which "remunerations offered to induce referrals increase Medicare or Medicaid program costs or result in unnecessary utilization." (56 Fed. Reg. 35956). Other factors which may be considered in the decision to prosecute include the fraudulent nature of the transaction and the extent to which the conduct is an otherwise acceptable business practice.

It is the Agency's position that none of the factors which have been identified as furthering prosecution exist with regard to AHP's payment of commissions to insurance agents. Commissions paid to insurance agents will not increase Medicaid or Medicare program costs, except to the extent absolutely necessary, nor will they result in unnecessary utilization of services. At the outset, the primary function of insurance agents -- to enroll participants in the Florida Health Security -- is a cost which would otherwise have to be absorbed as part of the outreach and eligibility determination process. Since agents are already trained and available in all areas of the state, it will be cost effective to use agents rather than employ state workers to provide such enrollment services.

Additionally, the Florida Health Security program will ultimately reduce overall health care costs resulting in a decrease in Medicaid costs. Medicaid funds which are now used to pay the actual health care costs of Florida's low income residents will instead be used to subsidize for health insurance premiums. Through the managed competition system developed in Florida as well as improved program management, we expect to reduce the cost of health care and, thereby, free up money to be spent on subsidizing insurance for Florida's uninsured. The net result of this arrangement will be to lower health care costs overall in the State and provide greater access to health care for a significant portion of Florida's currently uninsured residents.

There are sound public policy reasons which compel HCFA and the Department of Justice to avoid applying the Anti-Kickback Statute to insurance agents. As has been eluded to above, insurance agents are an integral part of the existing health insurance system. There are close to 42,000 health insurance agents in the State of Florida. Beyond Florida, in the

entire country, the number of agents selling health insurance is many times larger. Given the importance of the agent to the health insurance industry, and the growing trend towards using Federal Medicare/Medicaid dollars to fund private health insurance costs, the consequences of applying the Anti-Kickback Statute to insurance agents under the Florida Health Security Program would be far-reaching.

It bears mention that the 1977 Anti-Kickback Statute was adopted prior to any such arrangements between Medicaid and private health insurance were contemplated. Thus, it can be presumed that the drafters of the 1972 Act, and the 1977, 1980, 1987 or even 1989 amendments did not anticipate the application of the Anti-Kickback Statute to insurance agents. This is borne out by the fact that nowhere in the 1989 comments to the Final Rule, or in any reported court decision, is the application of the Anti-Kickback Statute to insurance agents mentioned or discussed. Therefore, as a matter of public policy it is also inappropriate to apply the Statute to insurance agents, a group to which it can be presumed the Statute was never intended to apply.

4. Similar Existing Arrangements Involving Medicaid/Medicare Funds

There exists in current law Medicaid and Medicare requirements which, at least indirectly, result in insurance agents being paid a commission to enroll recipients in Medicaid or Medicare funded health plans. That such arrangements -- described in more detail below -- are present in current law, attests to the inherent inconsistency in applying the Anti-Kickback Statute to insurance agent commissions.

The Family Support Act of 1988, which took effect April 1, 1990,² requires states to extend Medicaid coverage for 12 months to families which leave AFDC cash assistance due to earnings. During the first six months of coverage, states must provide each family with the same Medicaid coverage the family had while receiving AFDC. During this period, states also have a "Medicaid wrap-around" option which allows states to use Medicaid funds to pay a family's expenses for premiums, deductibles, and coinsurance for any health care coverage offered by the employer of the caretaker relative. It has been explained above that insurance companies are required to use agents to sell and market their health insurance. In that regard, a premium generally includes all administrative expenses including the payment of a commission to the insurance agent. Since Medicaid funds are used to pay for premiums, the "Medicaid wrap-around" option undoubtedly results -- though indirectly -- in insurance agents being paid commissions to refer insureds to Medicaid funded health plans.

Medicaid also funds health maintenance organizations ("HMO's"). These HMO's often use a sales force consisting of licensed agents. Again, in the case of HMO's as with the "Medicaid wrap-around" option, insurance agents may be paid a commission out of the premium funded by Medicaid. Thus, through Medicaid funding HMO's, insurance agents may also be paid a commission to enroll insureds in a Medicaid funded health plan.

Additionally, Section 1906 of the 1990 Omnibus Budget Reconciliation Act provides for mandatory enrollment of Medicaid eligibles in cost effective group health plans as a condition of Medicaid eligibility. Under this arrangement, Medicaid is required to pay for premiums, coinsurance, deductibles and other cost sharing obligations. Again, inasmuch as insurance

² Pub. Law No. 100-485.

agents are generally used to sell such group health plans, Medicaid funds would be used to fund the agent's premium. Further, insurance agents may be used to sell a Medicaid funded health insurance plan.

Similar examples of insurance agents selling federally funded health plans exist with regard to Medicare. The Medicare Risk Program is a federally funded health insurance policy which is sold in private industry and provided through private insurance carriers. Since the majority of private health insurance in the United States is sold through licensed insurance agents, it can again be assumed that insurance agents receive a commission in selling Medicare Risk Program policies.

The foregoing are but a few of the numerous examples of present arrangements in Medicare and Medicaid law which result, directly or indirectly, in insurance agents receiving commissions for referring insureds to federally funded health care plans. This Agency is not aware of any instance where the Anti-Kickback Statute has been applied to these existing arrangements.

In the final analysis, the very existence of the foregoing practices in Medicaid and Medicare is a strong indication of the inapplicability of the Anti-Kickback Statute to the payment of insurance agent commissions by the AHP. The legislative history of the Anti-Kickback Statute as well as cases construing the statute make clear that the statute was never intended to apply to a legitimate business transaction such as the payment of commissions to insurance agents. Even if the broad language of the Anti-Kickback Statute could be read to encompass insurance agents, strong political and policy considerations militate against applying the Statute to such a transaction. Certainly, the consequences of any decision to apply the Anti-Kickback Statute to commissions paid by AHP's to insurance agents go far beyond the Florida Health Security Program. Indeed, applying the Anti-Kickback Statute in such a manner could jeopardize any state or Federal health plan which seeks to use federal monies to fund an employer based health insurance.

Withdrawal/Redaction Marker

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
003. memo	For Leon Panetta from Carol Rasco re: Request from Governor Chiles (2 pages)	08/04/94	P5

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COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Carol Rasco (Meetings, Trips, Events)
OA/Box Number: 5041

FOLDER TITLE:

Florida Waiver Briefing 5 August 1994 10:00-10:30

rw196

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]
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- 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]

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
004. note	Handwritten Note re: Florida (1 page)	08/01/94	P5

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rw196

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
005. memo	For Leon Panetta from Carol Rasco re: Request from Governor Chiles (copy of #3) (2 pages)	08/04/94	P5

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rw196

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

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
006. memo	For the President from Carol Rasco re: Florida Waiver w/attachment (4 pages)	07/21/94	P5

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rw196

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
007. memo	For the President from Carol Rasco re: Florida Waiver w/attachments (6 pages)	07/21/94	P5

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Domestic Policy Council
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OA/Box Number: 5041

FOLDER TITLE:

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rw196

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

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FROM:

TO: 94562878

JUL 20, 1994 5:54PM P.01



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FOLLOWING 4 PAGES

TO: Carol Rascac

fax # 456-2878

phone # _____

FROM: Debra Kilmer

DATE: 7-20 TIME: _____

NOTE: _____

Florida's health on the line

□ Florida's health security plan can become a reality, but swift action is needed by Gov. Lawton Chiles and the Legislature.

Two things are needed to make health insurance available for 800,000 Floridians who now can't afford it:

■ The federal government would have to agree to allow Florida to use money saved through the state's efficient handling of Medicaid to subsidize low-income working families' purchase of health insurance.

■ Gov. Lawton Chiles would have to call another special session of the Legislature, and lawmakers would have to cooperate in approving the use of those Medicaid savings in Florida's health security plan.

That's needed not because sick and injured people are going without treatment. Health care is available to all. It's health insurance — and the preventive care it includes — that many low-income working people are doing without.

Consequently, when those people are treated — at abnormally high rates — in emergency rooms and can't pay the bills, the public ends up absorbing the cost in the form of higher medical costs, higher insurance premiums and higher taxes.

When faced with higher insurance-premium payments for workers' health insurance, many employers pare the size of raises, cut job benefits or even reduce their work force. Such reductions clearly hurt the overall economy.

It was most heartening that President Clinton, while visiting Miami this week, predicted that the Department of Health and Human Services' approval of the Medicaid waiver would be forthcoming.

The state's request has been under review for several months, and only a few issues remain to be resolved before approval is granted.

What Florida has requested is not extraordinary. Indeed, six other states already have been granted similar waivers to use Medicaid dollars in health programs. This state

deserves the same treatment.

Once that permission is in hand, Mr. Chiles should not delay in calling lawmakers back into session to approve using that money to subsidize the purchase of health insurance.

The plan would provide graduated subsidies to help individuals earning as much as \$18,400 a year and families of four with annual incomes of as much as \$37,000 buy coverage.

The size of the subsidy would vary, based on the actual income of the family and on whether the employers voluntarily would contribute toward the cost of their employees' insurance.

Contrary to misleading statements by some lawmakers, the program would not be a giveaway. One of the beauties of the plan is that those being insured would have to pay a portion of the premium.

Mr. Chiles' plan is so financially conservative, in fact, that it has been endorsed by Florida's leading business associations. Indeed, the plan features many of the concepts contained in a health plan being proposed by Republicans in Congress.

It's difficult, therefore, to justify the steadfast resistance to the plan by Republicans in the Florida Senate.

The objections of Florida Republican lawmakers appear to be nothing more than petty partisan politics, designed to deny Mr. Chiles credit as he seeks re-election. It would be at the expense, though, of the physical well-being of people who can't afford insurance and the financial health of all Floridians.

There's no time to waste. The longer the issue waits, the more politicized it will become. Mr. Chiles should act quickly to call the Legislature back into session.

Surely, lawmakers who truly care about the people of Florida would have no hesitation to approve — and take credit for — this thoughtful health security plan.

FLORIDA SENATE

JUL 20 1994

The Miami Herald

TUESDAY, JULY 19, 1994

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35 CENTS

Clinton: Haiti action coming 'sooner rather than later'

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HEALTH CARE IN FLORIDA

■ The president predicted Florida will win federal permission to offer government-subsidized health insurance, 5A.

threw President Jean-Bertrand Aristide in 1991 have resisted the pressure to step aside for reasons both greedy and fearful.

"For one, they're making too much money," Clinton told The Herald's editorial board during a

S. FLORIDA'S HOMELESS

■ Secretary of Housing and Urban Development Henry Cisneros praised Dade County's efforts to help the homeless, 1B.

morning interview at the Sheraton Bal Harbour Hotel. "It's difficult for people to give that up."

In addition, however, the president said he agreed with media reports that mid-level military officers and soldiers also fear ret-

tribution against them and their families by other Haitians if they surrender power.

As a result, Clinton said the United States had a "grave responsibility" to ensure that such acts of violent retaliation didn't occur. That entailed getting guarantees from Aristide that he will abide by the human rights guarantees outlined in the so-called Governors Island agreement, he said.

Also, the president said it

PLEASE SEE CLINTON, 5A



STEPHANIE SINCLAIR / Herald Staff

APPLAUSE: President Clinton with La Raza's Audrey Alvarado after he gives his speech at the Miami Beach Convention Center.

FROM:

TO: 94552878

JUL 20, 1994

5:55PM P.03



Topic

He sees

By TOM FIEDLER
Herald Staff Writer

President Clinton said today he has "bent over backwards" to avoid military action in Haiti to dislodge the dictatorship, but he suggests patience was nearing and some action would be "sooner rather than later."

During a busy day in Florida, the president believed the economic sanctions imposed against Haiti last year were having an effect. But the military rulers were

most influential organization of Hispanic Americans, which is holding its annual conference in Miami Beach. And he met with community leaders organizing events around the Summit of the Americas, which will bring 34 heads of state from throughout the hemisphere to Miami to discuss political and economic interests.

"He gave a public summit pep talk to an audience of 160 that included politicians and business people and civic personages. He called it "a simple thank-you-and-go-get-em."

"It took eight minutes. We must make these nations feel that we are their true friends and partners," the president said, "and that we are going into the next century together, not just for our children, but for their children."

Two exceptions

He painted a portrait of newfound hemispheric cooperation and said that the United States needs "to find a way to capitalize on the fact that all but two countries in the hemisphere are governed by democracy."

The two exceptions are Haiti and Cuba.

At the La Raza luncheon later, the president cited his administration's record in appointing Hispanics to government posts, headed by Henry Cisneros, the Housing and Urban Development secretary, and Federico Peña, secretary of transportation.

In the 19 months of his administration, Clinton said he had appointed more than twice as many Hispanics as either of his Republican predecessors, George Bush and Ronald Reagan.

"If you ask me do we need to do more, I would say yes," the president told the group at the Miami Beach Convention Center luncheon. "But we're doing better than anyone who has come before."

At both the luncheon and the meeting with Herald editors, the

AND HERE HE IS: President Clinton is introduced to the La Raza convention by Arizona congressman Robert Pastor. Clinton cited the record of his administration in appointing Hispanics.

president sought to rally support for two programs pending in Congress — the anti-crime bill, which provides for 100,000 community police and bans assault weapons, and health-care reform. Both measures are mired in debates facing staunch and mostly partisan opposition.

Health-care costs

Clinton warned that if something wasn't done to restrain health-care costs, such programs as Medicare and Medicaid will continue to gobble up increasing shares of the federal budget until all other discretionary programs are choked off.

"Within 10 years, if we don't do something, going to Congress will mean going to Washington and writing a check for health care, then going home," Clinton said.

Although he repeated statements that he was open to compromises in the health-care plan he submitted last fall, the president said he would stick by his insistence that any program move toward covering all working Americans and curb costs. He said he was confident that an impending fight over the inclusion of abortion benefits in the bill could be resolved to satisfy abortion-rights advocates and opponents, led by the U.S. Conference of Catholic Bishops.

Although he avoided commenting on Haiti in prepared remarks, Clinton fielded questions about the crisis at every stop.

Sidesteps questions

As he has since the beginning of the Haitian crisis, he sidestepped questions about whether he was preparing for imminent military action. He conceded to Herald editors that an invasion lacked broad support in Congress and among the American people, in part "because of the history of

such things in this hemisphere."

But he repeated his insistence that the only way the standoff can be resolved will be for the military rulers to leave.

"All I can say today, all I can responsibly say, is that [military action] is something that I cannot rule out," Clinton told the editors. "We've bent over backwards to try every other alternative."

"And I think it's apparent now that something is going to be worked out sooner or later — sooner rather than later."

In the wide-ranging interview, Clinton also:

■ Stood by the Cuban Democracy Act, which has tightened the economic embargo around Cuba and has been blamed for the island's rapidly deteriorating quality of life. The president said the measure's humanitarian aid provisions demonstrate that the United States is not attempting to hurt the Cuban people.

■ Praised the efforts of Lee Brown, the administration's anti-drug chief. But Clinton conceded the drug war has been

overshadowed in priority by more recent concerns over youth violence. He said he needed to find a way to reinstall fear in the minds of youths who, new statistics show, may be turning again to cocaine and other drugs.

■ Said he was eager for this fall's election campaigns to begin because they will provide an opportunity for voters to learn of the administration's accomplishments in repairing the economy, cutting the deficit, shrinking the federal bureaucracy and shifting the tax burden away from poor and middle-class Americans. He said if Democratic candidates run on this record, "We'll win."

■ Shrugged off personal attacks, describing them as part of the "ebb and flow" of American history. He said the Republican Party has mastered the use of the mass media to spread its criticisms. "There's no sense in complaining about it. What I have to do is master it," he said.

Herald Staff Writer Peter Slevin also contributed to this report.

Topic A for Clinton is Haiti

Solution 'sooner
rather than later'

CLINTON, FROM 1A.

would require the presence of a "robust" United Nations force — made up of U.S. and other troops — to act as a police force guarding against violent reprisals.

Keynote address

Clinton's visit to South Florida also included a keynote address to the National Council of La Raza, the nation's largest and



THE PRESIDENT'S DAY

TUESDAY, JULY 19, 1994 5A
THE HERALD

Clinton predicts OK for Chiles' subsidized health plan

buying private health insurance for the poor and the working poor.

predicted Monday the federal permit government-subsidize to low- and mid-

which could come could breathe new program sought es, who would still through the Leg-

ke money from the hat uses state and for health care for poor. The money subsidize the cost of

The governor wants those earning up to 2½ times the federal poverty level to get subsidies. That means individuals earning up to \$18,400 and families of four earning up to \$37,000 would qualify. The monthly premium would be \$116 per month for an individual, but the portion of the premium that would be paid by the government subsidies would vary by income level.

For example, an individual with an annual income between \$7,360 and \$11,040 would pay \$24 per month. The state and federal government would pay the remaining \$92.

An individual earning between

\$14,720 and \$18,400 would pay \$50 of the monthly premium. The state and federal government would pay the remaining \$66.

The governor failed to persuade the Legislature to approve the plan during its regular session and a special session in June. Although Chiles has indicated he may call another special session this summer, Senate Republicans remain opposed to his proposal. They call it "welfare for the middle class."

Clinton and Chiles discussed the health care reforms over lunch Monday in Miami. The president told The Herald's editorial board he is confident the federal government will waive its rules to permit the new insurance subsidy

plan.

"I believe it will work out, and that Florida will get its waivers," Clinton said.

Clinton said the only major questions left are from the Department of Justice. He said a California court decision last week raised questions about the federal government's authority to grant approvals similar to those sought by Florida.

"We don't think they apply to us," said Doug Cook, director of the state Agency for Health Care Administration. "But they are being cautious."

Six other states have received similar federal waivers to use federal money for custom-made health programs. But Florida's proposal would cover more

people than the six other states combined.

Chiles wants to offer 800,000 uninsured Floridians an opportunity to buy health insurance at a reduced cost. The premiums would be subsidized with state and federal tax dollars. The governor says much of the money for the program would come from savings by having Medicaid patients use HMOs or similar programs. He insists the program would not require a tax increase.

The federal government must approve the plan because federal Medicaid dollars would be used to help pay for the care of Floridians who don't qualify for Medicaid now.

Clinton

By **TIM NICKENS**
Herald Capital Bureau

President Clinton
that Florida will win
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dle-income residents

Federal approval,
as early as this week,
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would be used to su



AUG - 3 REC'D

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FOLLOWING 3 PAGES

TO: John Hart / Carol Rasco

fax # _____

phone # _____

FROM: A Kilmer

DATE: 8-4

TIME: _____

NOTE: zip's

① terms "presented to HHS today"

② headline that might shed some light —

**Florida Health Security
Section 1115 Waiver Terms and Conditions Related to Insurance Agents**

23. b. Accountable Health Partnerships (AHPs) may use either salaried sales representatives or independent insurance agents to market Florida Health Security (FHS) plans, enroll individuals in health plans that the member chooses to join, and assist individuals in completing FHS applications. Agents may be paid on a commission basis. On an ongoing basis, the Agency for Health Care Administration (AHCA) will assess plan enrollments, premium levels, and agent sales.
- c. The Department of Insurance (DOI), in consultation with AHCA, will monitor enrollment volume and growth in AHPs on a regular basis, as well as member acquisition costs, including marketing costs.
- d. DOI, in consultation with AHCA, will monitor insurance agent selling practices and take action against agents violating the requirements of the Florida Unfair Trade Practices Act, Section 626.9541, Florida Statutes, which establishes standards of market conduct and prohibits misrepresentation of the benefits, advantages, conditions or terms of any insurance policy.
- e. The Agency for Health Care Administration will conduct consumer surveys to assess satisfactions with agent services.
- f. AHCA will conduct a "secret shopper" program in which AHCA members will pose as Community Health Purchasing Alliance (CHPA) members and contact insurance agents for the purchase of health insurance. If the AHCA shopper finds violations, a referral will be made to DOI for action.
- g. AHCA will require CHPAs to enhance their AHP enrollment process, allowing an individual/family to disenroll at any time (i.e., at times other than the open enrollment period) upon submission of an affidavit and a finding by the CHPA that they were provided erroneous information by an insurance agent that biased their plan selection.
- h. AHCA will modify its AHP subscriber grievance process to permit FHS members to file grievances against AHP agents.
- i. Within 60 days of award, the State shall submit FHS proposed marketing guidelines and a code of ethics to the HCFA project officer for HCFA's approval.
- j. The CHPA shall require AHPs to indicate in their enrollment forms that multiple products must be offered to applicants.
- k. Regardless of agent compensation levels, federal financial participation of a FHS premium shall be limited to the state's Title XIX matching rate of the benchmark premium or the actual premium, whichever is lower.

- I. Prior to implementing FHS, the State shall implement the following additional safeguards to assure consumers a free choice of plans, protect consumers from unethical agent practices, and ensure valid quality of care and premium comparisons among health plans. The State shall:
 - Ensure that individuals have a choice of all FHS plans offered by the CHPA; employees of firms with 30 or fewer employees enrolled in a group plan have a choice of at least two health plans; and employees of firms with 31 to 50 employees have a choice of at least three plans.
 - Require agents marketing FHS plans to provide AHP comparison guides to employers and individuals.
 - Standardize the FHS benefit plan, guaranteeing minimum benefits regardless of the health plan selected.
 - Provide quality of care and premium comparisons (i.e., AHP Consumer Guides) directly to employers (group applicants) and individuals in an easy to use format.
 - Promote enrollment of FHS members through groups so that agents primarily market FHS plans to employers.
 - Provide a toll-free telephone number service to CHPA members so that they can directly obtain clarification of AHP comparison guides.
 - Establish a toll-free hotline for consumers to file complaints against insurance agents.
 - Contract with an external peer review organization to monitor the quality of health care plans and marketing practices.
 - Implement the Community Health Partnership (CHP) program, which is a network of providers owned, operated, or under contract with a county, political subdivision, or tax district to provide health care services to low income persons.
 - Require insurance agents who are authorized to market FHS plans to complete a FHS training course so that they can provide essential plan information in an understandable manner and to assist employers/individuals select a health plan that meets their needs.

Health care may hold key to Chiles bid

Republican candidates set sights on other issues

First of three parts
By CRAIG S. PALOSKY
Tribune Staff Writer

TAMPA TRIBUNE

AUG 04 1994

TAMPA -- Gov. Lawton Chiles' re-election hopes may depend on how much Floridians worry about their health care.

The Democratic governor says he has pushed hard to make health insurance easier to find and afford, especially for middle-income working folks. Too many families lack any insurance, and too many others fear they will lose theirs, he argues.

His Republican challengers generally see a health-care problem affecting far fewer people and requiring much smaller changes. Most residents fear broad reforms will leave them worse off, they argue.

"Most people in Florida are happy with their insurance," said state Sen. Aoder Crenshaw of Jacksonville, one of five major Republican candidates.

"The people who don't have it ... those are the ones that care," Crenshaw said. "But I don't think many Floridians think the government should provide all that."

If voters share such sentiments, Chiles may sail into rough waters this November.

He's the proud papa of Florida's health reforms, which attracted national attention well before Washington began to tackle the issue.

He encouraged managed-care insurance plans, such as health maintenance organizations, to set up shop statewide. The lower-cost plans make insurance affordable for more businesses, his backers argue.

He established voluntary alliances to help small businesses find affordable insurance for their workers. The alliances also will allow consumers to compare the cost and quality of various health plans.

He backed laws to stop doctors and clinics from ordering unneeded tests or overcharging for certain procedures. He has since offered to repeal parts of those laws in exchange for other reforms.

Now, Chiles wants to help the estimated one-in-six Floridians without any health insurance. He has proposed Florida Health Security, a subsidy plan to help perhaps 1 million working people afford coverage.

The partial subsidies would go mostly to low- and

From Page 1

middle-income workers whose employers do not provide coverage. As many as 1 million of the state's 2.5 million uninsured residents could participate.

To pay for it, Chiles has sought federal permission to revamp existing medical assistance programs. The savings could cover the subsidies, and no new taxes would be needed, an independent accounting review concluded.

"It's a historic opportunity," said Doug Cook, Chiles' top health reformer. "If we don't do this, we're missing a chance to cut the uninsured population in half."

Chiles' subsidy plan has drawn heavy fire from his main Republican challengers as well as anti-incumbent populist Jack Gargan, who has entered the Democratic primary. Their chief complaints include:

The program would be impossible to end once it begins. Politicians won't have the guts to kill it, no matter how costly it becomes.

Only sick people will seek the partial subsidies. That would make the program cost more money and reach fewer people than Chiles says.

The plan may never get federal approval. Even if it does, the state may have to raise taxes to extend it beyond a five-year trial period.

Lawmakers could convert the voluntary aspects into mandatory ones at any time. That would give bureaucrats much more power over health-care decisions.

"It's premature for a state to be going out on a limb like this," said Secretary of State Jim Smith, one of Chiles' Republican challengers.

The Republicans generally share similar ideas about health reform.

Crenshaw, Smith, presidential son and businessman Jeb Bush, and Tallahassee lawyer Ken Connor each contend the state should take very small steps, if any, toward new health reforms until Congress votes on national reforms. The House and Senate are set to debate compromise plans next week.

They argue the biggest changes must come at the national level, through federal policy and tax reforms. All four back "medical savings accounts" where individ-

people financial incentives to keep their medical expenses down, lowering costs nationwide, supporters said. They would have to pay for most routine treatment, not a private insurance company.

"Our current system encourages people to provide health care that is not needed," Connor said. "You could conceive going down to the grocery store, and when you go to check out, you just say, 'Send the bill to my insurance company.' You're going to buy more stuff than you need like that."

Of the Republicans, only state Treasurer and Insurance Commissioner Tom Gallagher argues the state should act quickly to open up the insurance market.

Gallagher pushed for insurers to sell policies to all small businesses equally. With Chiles' backing this year, he tried to expand those reforms to individuals, so insurers could not deny coverage to people with past problems.

He favors much of Chiles' earlier reforms, which are voluntary and market-based but wants the state to monitor HMOs more closely and provide consumers with better information.

"If I need a gall bladder operation, I ought to be able to look at figures that show where I can get the best care," Gallagher said. "I can't find that information now."

Gallagher and Chiles both take credit for refining the health insurance costs statewide. An independent survey shows businesses saw a 2 percent increase last year, down from 20 percent in 1990, the year before Chiles took office.

The other candidates remain wary about those earlier voluntary reforms, but only Connor outright opposes them, saying they are creating more bureaucracy. The others want to give them more time to work.

The Republican candidates all say health reform won't play much of a role in their September primary. Their positions are similar, and they said voters care more about crime, taxes and immigration this year.

They expect Chiles to revive the issue before the November general election. When that happens, they said, they believe voters will prefer their less-dramatic solutions to Chiles' subsidy plan.

"We should not focus on turning the whole system upside down," Bush said.

To: Roz 7118

From:

Debbie

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
008. memo	For the President from Christine Varney re: Summary of Weekly Cabinet Reports July 15, 1994 through July 22, 1994 (8 pages)	07/15/94	P5

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FOLDER TITLE:

Florida Waiver Briefing 5 August 1994 10:00-10:30

rw196

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]
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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)]

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
009. memo	For the President from Carol Rasco re: Waivers (1 page)	07/24/94	P5

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
010. memo	To Kevin Thurm from Michael Wald, Deputy General Counsel re: Beno v. Shalala (2 pages)	07/22/94	P5

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
011. memo	To Katherine L. Darwin from Carol Rasco re: Florida Waiver (1 page)	07/21/94	P5

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
012. memo.	For the President from Carol Rasco re: Floriday Waiver w/attachment (copy of #6) (4 pages)	07/21/94	P5

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
013. memo	To Carol Rasco from Kathryn Way re: Florida Waiver (1 page)	08/04/94	P5

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
014. memo	For Leon Panetta from Carol Rasco re: Call to Governor Chiles (1 page)	08/16/94	P5

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015. note	Note re: phone call (1 page)	n.d.	P5

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
016. report	Draft of Safe Harbor Regulation for Insurance Agents (1 page)	08/11/94	P5

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017. memo	To Carol Rasco from Kevin Thurm re: Florida Waiver - Safe Harbor Regulation (2 copies) (10 pages)	08/12/94	P5

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- 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]

Withdrawal/Redaction Marker

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
018. memo	To Carol Rasco and John Angell from Kevin Thurm re: Florida Waiver (2 pages)	08/23/94	P5

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For a complete list of items withdrawn from this folder, see the
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COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Carol Rasco (Meetings, Trips, Events)
OA/Box Number: 5041

FOLDER TITLE:

Florida Waiver Briefing 5 August 1994 10:00-10:30

rw196

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]
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- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

Withdrawal/Redaction Marker

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DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
019. fax	To Carol Rasco from John Angell re: language (3 pages)	08/18/94	P5

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COLLECTION:

Clinton Presidential Records
Domestic Policy Council
Carol Rasco (Meetings, Trips, Events)
OA/Box Number: 5041

FOLDER TITLE:

Florida Waiver Briefing 5 August 1994 10:00-10:30

rw196

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]
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Kevin Thurm

is on -

he asked that

you be interrupted -



DEPARTMENT OF HEALTH & HUMAN SERVICES

Chief of Staff

Washington D.C. 20201

FACSIMILEDATE AUG 23 1994

TO: (NAME, ORGANIZATION, CITY/STATE AND PHONE NUMBER):

Carol Rasco
Assistant to the President
for Domestic Policy

456-2216

FROM: (NAME, ORGANIZATION, CITY/STATE AND PHONE NUMBER):

Kevin Thurm
Chief of Staff

690-6133

RECIPIENT'S FAX NUMBER: () 456-2878NUMBER OF PAGES TO SEND (INCLUDING COVER SHEET): 3

COMMENTS:

THE WHITE HOUSE
OFFICE OF DOMESTIC POLICY

AUG 19 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: _____

