

Withdrawal/Redaction Sheet

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. profiles	House of Representatives (4 pages)	nd	P5
002. memo	Chris Jennings to Hillary Clinton Re: Senate Leadership Lunch (2 pages)	5/4/92	P5
003. profiles	Senate Democratic Leadership (8 pages)	5/2/93	P5
004. memo w/attach	Chris Jennings to Hillary Clinton Re: Kassebaum/Glickman "BasicCare" Meeting (7 pages)	5/5/93	P5
005. memo	Chris Jennings to Hillary Clinton Re: Meeting with Congressman McCurdy (1 page)	5/5/93	P5
006. memo	Chris Jennings to Hillary Clinton Re: Summary of David Pryor's Aging Committee Event (3 pages)	5/5/93	P5
007. profiles	Democrats on Senate Aging Committee (5 pages)	nd	P5
008. profiles	Republican Members of the Senate Aging Committee (6 pages)	nd	P5
009. memo w/attach	Chris Jennings to Hillary Clinton Re: Meeting with Senator Wellstone and Single Payer Groups (4 pages)	5/5/93	P5

COLLECTION:

Clinton Presidential Records
 Domestic Policy Council
 Chris Jennings (Health Security Act)
 OA/Box Number: 23754

FOLDER TITLE:

May 1993 HSA [2]

gf82

RESTRICTION CODES

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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.

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THE WHITE HOUSE
WASHINGTON

DETERMINED TO BE AN ADMINISTRATIVE
MARKING Per E.O. 12958 as amended, Sec. 3.2 (c)

Initials: MT Date: 8/12/05

~~PRIVILEGED AND CONFIDENTIAL~~

May 5, 1993

MEMORANDUM FOR HILLARY RODHAM CLINTON

SUBJECT: Closing the Deal With Interest Groups

FROM: Mike Lux

cc: Ira Magaziner
Bob Boorstin
Chris Jennings ✓

Maggie Williams
Melanne Verveer
Alexis Herman

Ira and Maggie both thought it would be helpful for you if I did a memo describing where we are with key groups, and a strategy for closing the deal with them. I will start by dividing key groups into the following categories:

1. Groups which, while they have some issues they care about more than others, essentially are ready to come on board. If I'm reading them right, all they need to close the deal is a final meeting (or phone call) with you or the President (four of those meetings are already set up.) These groups are:

Families USA
National Leadership Coalition for Health Care Reform
Children's Defense Fund
American Nurses Association
American College of Physicians
American Hospital Association
Catholic Health Association
National Council of Churches

2. Groups which are haggling with us over a few key policy details, but which are likely to end up in our camp. With these groups, I would let Ira and I continue to work with them on these policy details, but we would definitely need you for a final meeting to close the deal. Depending on how far we've gotten with them, some of these final meetings will be easy but some of

them might be real toe to toe, final round negotiations. These groups are:

- AFL-CIO
- NEA
- AARP
- National Council of Senior Citizens
- National Committee to Preserve Social Security and Medicare
- National Association of Social Workers
- Citizen Action
- Consumers Union
- Consumer Federation of America
- National Medical Association

3. There are a number of major organizations whose position on our plan is totally dependent on some major policy decisions we have yet to make. Once we make those decisions, we'll know whether we should proceed with a "close the deal" strategy or a "how do we manage the opposition" strategy. This includes the following groups:

- AMA
- Blue Cross/Blue Shield
- The Big Five Insurance Companies
- National Association of Retail Druggists
- National Association of Chain Store Druggists
- American Pharmacists Association
- Pharmaceutical Manufacturers Association
- American Trial Lawyers Association

4. We have a separate business strategy based on the assumption that this is too divisive an issue to get business association support, but that we can get a great deal of individual CEOs to support us. We are working on scheduling you and the President to maximize that kind of support. (Part of that strategy is sending you to this business retreat on the 7th.)

Below are summaries on the organizations you are currently scheduled to meet:

1. Liberal groups pulled together by Families USA

There will probably be representatives from 200 to 300 liberal groups at this meeting: civil rights, women, churches, aging, and consumer groups. The purpose is to close the deal with much of the liberal establishment in D.C.

Some of the groups there will be single payer, but most are liberal groups who just generally support universal access and are not set on any particular approach.

Major issues: Universal access sooner rather than later.

2. National Leadership Coalition for Health Care Reform

They are a three year old, business-led coalition which is very close to us on the issues. CEOs or Washington reps of over fifty major corporations will be at there, and this meeting could really boost our chances of bringing all of them on board.

We have an excellent relationship with them; they feel very good about their chances for input and about our plan in general.

- Major issues:
1. Financing (They prefer the payroll tax or a VAT.)
 2. Cost controls (They like the idea of voluntary cost controls with a hammer.)

3. National Education Association

The NEA feels very good about the administration overall. While Keith Geiger, President, wants the NEA to support the health package, he is nervous about getting support because there is a strong single payer contingent in NEA. Geiger wants to be able to say he had a direct meeting with Mrs. Clinton.

- Major issues:
1. Not allowing big companies to opt out of HIPCs.
 2. Tax cap.

4. American Association of Retired Persons

We are having this meeting to close the deal. They feel extremely good about their input into the process, and very much want to support the package. They are nervous about how far we'll go on long term care, and how we'll structure a phase-in (they don't want any phase-in). They feel very strongly about including age in the community rating, believing that not community rating age encourages age discrimination.

- Major issues:
1. Long term care
 2. Drugs: include in benefits package; price controls
 3. Community rate by age

5. American College of Physicians

They are the second largest physicians group. They are very sympathetic to us, and this meeting could close the deal.

Their plan looks a lot like ours substance-wise, and they worked closely with us during the campaign. Although Ira Magaziner and several other administration officials have had them in for meetings, they have had their feelings a little ruffled by not being more "inside" the process.

Major issues:

1. Promotion of general practice
2. Administrative simplicity/paperwork
3. Universal coverage
4. Medical malpractice