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INTERVIEW OF THE FIRST LADY
STEVE SCULLY - CSPAN

MR. SCULLY: Mrs. Clinton, when the legislative maneuvering is complete, what in the end will American's health care look like?

MRS. CLINTON: I hope that it will look like, for most of us who use the system, very much as it is today. It will be a system where we have access to the fine physicians and hospitals that are here, in which we are able to choose what doctors and what health plans we want to enroll in; in which we have much better quality information to make judgments about what is and is not good health care; in which we only have one form to fill out because we have simplified the system and stripped out the paperwork.

What it will not be, I hope, is still bogged down by the extraordinary burdens and costs imposed primarily by our financing system which is driven by insurance companies. But I don't think most of us who are insured will really see that much difference. We will be spending less because we will begin to control cost, and I think will be more secure knowing that whoever we are, we will always have insurance. How many cities have you visited as you have travelled and talked about health care?

MRS. CLINTON: I have no idea. I haven't stopped to count them all.

MR. SCULLY: Is there a moment, is there a day, or a person that you have met that typifies what you have learned?

MRS. CLINTON: Oh, boy, yes. I mean, I had a movie that runs through my head, and I see the faces and hear the stories. There are so many. One that has haunted me is a visit I made in New Orleans to a small factory where I talked with a number of the workers there who did not have health insurance, many of whom had worked there for 15, 20, 25

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years. They told me about how they postponed care, they didn't seek it until they were really sick, or their spouse was really ill.

And then I met a woman who had worked there for a number of years, who tried to take good care of herself, and always had a physical exam which of course she paid for out of her own pocket. And they had discovered a lump in her breast and sent her to a surgeon. And the surgeon told her, this woman, sadly, if she had had insurance he would have biopsied it. But since she didn't, they would just watch it. I was (inaudible) by that.

I was in Las Vegas a week ago, and a man told me with great emotion in his voice how he was employed full time, he had four children. He had to make a choice as to whether to insure his children or his wife because he couldn't afford the coverage for both. And he and his wife decided to insure their children. His wife got pregnant again, in fact was about a month from having the baby when I met her, and she told me that they are seriously thinking not to have any anesthesia during the delivery even though she has always had to have it before, because paying for the anesthesia is paying for a house payment.

You know, I thought to myself no member of Congress, the high-priced lobbyists who are going to be lobbying members of Congress on health care, they are all well insured, they don't have wives who have to sit around worrying at night about whether they can afford to have anesthetic if they delivered a baby.

So those are just two of the stories that I think about all the time. And what drives me every day as we go forward in this, is my feeling that I have some obligation to these people, and that when it's all said and done I want to be able to look any one of them in the eye and say we have taken care of what the problems are.

MR. SCULLY: What's your reaction to the business round table and other business groups who say that they will look at Congressman Cooper's plan or another plan, but not the White House plan?

MRS. CLINTON: That's their prerogative. We have a lot of support in the business community, and whatever any particular group wants to do is fine. We are not doing this

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for the well paid chief executive officers in major businesses in America. We are doing this for every American, no matter who he or she is.

And when you make policy that is going to affect ordinary Americans, as my husband tries to do every week when he thinks about what's at stake, you're going to run into opposition from groups that have their own interests that they want to promote. But we think that this is an issue that's very important to most Americans. And eventually the President's demand that we have legislation that guarantees private insurance is going to be (inaudible).

MR. SCULLY: Can you spell out what's on the negotiating table and what is not negotiable?

MRS. CLINTON: Well, as the President has said over and over again, he will not sign the bill if it doesn't guarantee having insurance to every American with good benefits that can never be taken away.

And we have said over and over that we have come forward with a plan which we think will work. If others have better ideas, fine. We want to see that. But in order to achieve the President's goal, you are going to have to really be honest with the American people. How will we finally guarantee private insurance? The President has put forward what he thinks will be best and cheapest for Americans.

How are we going to make sure that insurance companies don't charge sick people more than well people, or older people more than younger people? The President's plan makes all that illegal. Other plans do not.

So we are waiting to see how others will answer the harder questions that we have been answering. And certainly if people have better ideas that will get us to our objective, we are open to that.

MR. SCULLY: What do you think about Congressman Cooper's plan?

MRS. CLINTON: I think it has some features that are very much like the features in the President's plan, and it has some serious problems that need to be carefully analyzed.

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MR. SCULLY: Can the White House and Senator Dole and Republicans work together on this?

MRS. CLINTON: We hope so. We have said from the very beginning that we think these issues should be beyond partisan politics or ideology. When you have met the people I have met, and heard their stories, you have heard from people who hit their lifetime limits because they have a desperately ill child. They are not looking for a Republican or a Democratic solution.

When you talk to a small business owner, who is trying to insure himself, his family and his employees, they are being discriminated against in the health care insurance market. He is not interested in your ideology. He wants some pragmatic problem solving.

And so I hope that the Congress will put aside a lot of these political or ideological barriers that have stood in the way of health care reform, going back to President Roosevelt, and get about the business of trying to do the job.

MR. SCULLY: So in the end, what kind of coverage can every American expect? How much is it going to cost?

MRS. CLINTON: Well, under the President's plan every American can expect comprehensive health care benefits that are like those currently provided by most big corporations. But with the added benefit of good preventive care, prenatal care, well-child care, mammograms, PAP smears, cholesterol screening, and mental health benefits. Treatment for serious mental illness as well as substance abuse. Those benefits are ones that we have carefully analyzed and costed out.

The President believes it's important to tell the American people what kinds of deductibles they would have, co-pays they would have, how much outpatient and inpatient care will be covered. So he has us do that. People say, why is your bill so long? Because we laid it on the table. We told everybody what the benefits are. Many of the other competing alternatives don't do that. They say we want to create a national board and then tell the American people, after the legislation is passed, what the benefits will be.

Well, when you spell out the benefit, that takes up

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some pages. If you say kick it up to a national board yet to be created and named, that's an easy way out which I don't think most people are going to think is a good idea. So we want to have good, solid benefits and ones that will be there for everybody always.

MR. SCULLY: And the payment system?

MRS. CLINTON: The payment system will build on what most Americans now have through private insurance, by building on the employer base system. Most insured Americans, the vast majority, get their insurance through the combined contributions of themselves and their employers. It works. We want to build on that, and we want to give discounts to small businesses and to low wage employees.

I am very interested by all of the criticism about this approach because many of the same people who criticize it, they have the health insurance paid for by their employer, including those in Congress. Their taxpayers pay 75 percent of the health insurance costs for members of Congress because the federal government is their employer.

And what we want to do is to say to small businesses, particularly, you are discriminated against now.

I was in northern Maine at the university, and met with a group of small businesses who had run the numbers, and had sat down and said how much will this cost me? And they discovered that if we can eliminate the discrimination that exists now against small business, many small businesses will be able to provide health care for themselves and their employees at less than what they currently pay for their own family coverage.

And for many small businesses that have adjusted over the decades to minimum wage increases, without going bankrupt, without having a lot of the problems which many of the critics of the President's plan say will happen, they know that they can make the adjustment. And we think that it is the most realistic way to achieve coverage for every American.

MR. SCULLY: I wonder if you could take us back I guess about a year and a half ago. At what point did you and the President talk about your role in health care reform? Was it during the campaign?

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MRS. CLINTON: No, it was never during the campaign. We don't talk about things like that during campaigns. It's like talking about a no-hit game. You don't want to jinx anything. It was probably January of last year when he made up his mind after he had assigned all sorts of responsibilities to other people that he would like me to do that.

And in his first term as governor, I had chaired a commission on rural health care, so I had some familiarity with rural health care issues. I have been on the board at Children's Hospital. I had been involved in a lot of health care concerns through some of my national work. So it was an issue I cared about, and he asked me if I would do this.

MR. SCULLY: There are a lot of stories about your role in reforming the Arkansas education system. Is that a fair comparison? Are they similar issues the way you worked politically on that?

MRS. CLINTON: Well, they are certainly both important issues, but the scale of this is obviously much greater. But the way I worked on education reform, I tried to do the same thing I have done here, tried to bring a lot of people together, tried to get the issues beyond politics as usual, tried to reach a consensus. And that's what I am trying to do with respect to health care.

MR. SCULLY: Ten months ago when you were in Little Rock for your father's illness, what did you learn?

MRS. CLINTON: I had so many conversations with so many people in the hospital because I was there practically around the clock. And I learned that what we are trying to do is what real people need. For example, the pharmacist in the hospital came by to see me one day and told me that every day patients were discharged with prescriptions in their hands that they couldn't afford to fill, and that there was all kinds of self-medicating going around. A prescription would say take four pills a day, and people couldn't afford it. So they would take one pill every four days or something.

And he said, "You know, I know that because people can't pay for their prescriptions, a lot of times they get sick again, end up back in the hospital, and you end up paying more for them."

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I talked with many doctors who shared with me their concerns about a system where they felt like they were losing control because insurance companies or the government were telling them what tests to run, and how many days to keep a patient on a particular medication, or something like that.

And I talked with a lot of nurses who are extremely well trained and need to be part of the health care team and delivery of patient care. And mostly I heard about the paper work, about how everybody in the hospital was drowning from paper work.

And those are all issues that I took back with me and we tried to solve in the health care plan as it is presented.

MR. SCULLY: As you know, the Republicans used that chart Senator Spector came up with. When you saw that, what did you think?

MRS. CLINTON: (Inaudible.) I mean, you know, you could make a chart on anything that would look ridiculous if that's your goal. I am not interested in making anybody look ridiculous. I just want to get the information out to people.

And I have seen lots of funny charts, some of them attacking the Republicans, and some of them attacking the Democrats or whatever. But, you know, a chart, no matter how cleverly drawn, is not going to provide prenatal care to a pregnant woman or prescription drugs to an older American. I really want to get beyond all that. I don't think it serves anybody very well.

MR. SCULLY: Where does this go from here? What kind of a timetable are you under?

MRS. CLINTON: Well, it's really in the Congress's hands now. And there are at least five communities, and probably more, that are working on health care, holding hearings. I have been told that members of Congress want to move expeditiously and try to get a bill written up, and try to do what they can to actually have the Congress vote on it, and get a bill to the President before the August recess. And I think that would be just great if that could be done.

MR. SCULLY: You have been quoted as saying you

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like the term "politics of need." Does that apply to health care? And if so, how?

MRS. CLINTON: Yes. You know, it's a term that I suppose can mean a lot of things to different people. But what it means to me, as I travel around the states that I have been in, is that people want meaning in their life at a spiritual level, and are searching for that. But they want their politics to mean something. They are tired of the same old rhetoric and the same old games.

And what I am so proud of is that the past year we have moved beyond gridlock and drift. And the Congress and the President have hammered out some very important changes in policy from a good plan for deficit reduction to the Brady Bill to the other things that were done. That's meaningful. It's meaningful for real people. Too often in the past what the Congress did didn't mean anything to people. They feathered somebody's nest or given some special break to some special interest. But real people couldn't see what it meant in their lives.

Now with this agenda in front of us, we have got the Crime Bill. That's very meaningful, putting 100,000 police officers on the street to make us safer, providing drug treatment, doing the things that that bill will get done, will give real security to people.

Welfare reform. What more meaningful effort could the Congress engage in than trying to provide independence and self-sufficiency and end welfare as a way of life?

And then health care. Every time I hear a story from some American, what they are asking for is the recognition that they mean something; that their government recognizes their worth and their dignity, and is not going to be turning its back on them.

So I think that what we are embarked on is not just reforming the health care system. It is giving some meaning to who we are as a country again, and how we take care of each other, and whether we have respect for those among us who are sick or old. And I think that's really meaningful.

MR. SCULLY: Thirteen months after entering the White House, (inaudible) to what you expected?

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MRS. CLINTON: Well, it is in some ways, and it's very different. In many ways it's been a wonderful time for our family and for the opportunities we have. We have had a personal tragedy, losing my father and losing Bill's mother. But the time that we had with them, their enjoyment, having been from the inaugural to our last Christmas together with Virginia Kelly was so important to us.

It does require some adjusting. It's hard to recognize how much everything you do is subject to either interpretation or misinterpretation. But mostly it's been a very exciting and wonderful experience for us.

MR. SCULLY: Have the media treated you fairly?

MRS. CLINTON: Oh, that's for them to judge. You know, I think that what the President tries to do every day, and what I try to help him do is what he said he would do during the campaign, is to try and make life better for the people who live in this country; average middle class Americans. And the results are beginning to be shown.

So, just like that old saying by Abraham Lincoln: When the truth is finally known about what he has done and what he has been able to bring about, that's what's going to count. And what thousands of angels swear and otherwise is not going to make any difference.

So from my perspective, I am more interested in what really happens and not what people say on a day-to-day basis.

MR. SCULLY: When do you think he will sign the Health Care Bill into law (inaudible) President?

MRS. CLINTON: Well, I hope that the President will have a bill by the August recess.

MR. SCULLY: Mrs. Clinton, thank you very much.

MRS. CLINTON: Thank you.

(The interview was concluded.)

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