

Memorandum on Federal Agency Compliance With the Patient Bill of Rights

February 20, 1998

Memorandum for the Secretary of Defense, the Secretary of Labor, the Secretary of Health and Human Services, the Secretary of Veterans Affairs, the Director of the Office of Personnel Management

Subject: Federal Agency Compliance with the Patient Bill of Rights

Last November, I directed you to review the health care programs you administer and/or oversee and report to me on the level and adequacy of the patient protections they provide. Specifically, I asked you to advise me on the extent to which those programs are in compliance with the Health Care Consumer Bill of Rights (the "Patient Bill of Rights") recommended by the Advisory Commission on Consumer Protection and Quality in the Health Care Industry ("the Quality Commission").

Yesterday, you formally conveyed your reports to me through Vice President Gore. He advises me that each of your agencies is well on its way toward full compliance with the patient protections recommended by the Quality Commission. By doing so, your agencies will serve as strong models for health plans in the private sector.

Under your leadership, we are showing that it is possible and desirable to ensure that patients have the tools they need to navigate through an increasingly complex health care delivery system. We are showing that common sense solutions for all too common problems in our health systems are the right prescription not only for beneficiaries of Federally administered programs, but for our private sector colleagues as well. Your efforts illustrate that patient protections can be accomplished without excessive costs or regulations.

While the news is encouraging, your reports also indicate that we have not completed the job. Although Federal health programs are taking a leading role in providing protections to patients, your report indicates we have the regulatory and administrative authority to come into substantial compliance with the Patient Bill of Rights, and I believe that this should be one of my Administration's highest priorities.

Therefore, I hereby direct you to take the following actions consistent with the missions of your agencies to come into compliance with the Patient Bill of Rights.

The Secretary of Health and Human Services shall:

- take all appropriate administrative actions to ensure that the Medicare and Medicaid programs come into substantial compliance with the Patient Bill of Rights, including access to specialists and improved participation in treatment decisions, by no later than December 1999; and
- notify all State Medicaid directors that emergency room care protections should be consistent with the Patient Bill of Rights.

The Director of the Office of Personnel Management shall:

- ensure that all 350 Federal Employees Health Benefits Plan (FEHBP) participating carriers come into contractual compliance with the Patient Bill of Rights, particularly with regard to access to specialists, continuity of care, and access to emergency room services by no later than December 31, 1999; and
- with respect to participating carriers, propose regulations to prohibit, within 90 days, practices that restrict physician-patient communications about medically necessary treatment options.

The Secretary of Veterans Affairs shall:

- take the necessary administrative action to ensure that a sufficient appeals process is in place throughout the Veteran's Health System by September 30, 1998; and
- issue a policy directive to ensure that beneficiaries in the Veteran's Health System are provided information consistent with the Patient Bill of Rights by September 30, 1998.

The Secretary of Defense shall:

- establish a strong grievance and appeals process consistent with the Patient Bill of Rights throughout the military health system by September 30, 1998;

- issue a policy directive to promote greater use, within the military health system, of providers who have specialized training in women's health issues to serve as primary care managers for female beneficiaries and to ensure access to specialists for beneficiaries with chronic medical conditions by September 30, 1998; and
 - issue a policy directive to ensure that all patients in the military health system can fully discuss all treatment options. This includes requiring disclosure of financial incentives to physicians and prohibiting "gag clauses" by September 30, 1998.
- The Secretary of Labor shall:
- propose regulations to strengthen the internal appeals process for all Employee Retirement Income Security Act (ERISA) health plans to ensure that decisions regarding urgent care are resolved within 72 hours and generally resolved within 15 days for non-urgent care; and
 - propose regulations that require ERISA health plans to ensure the information they provide to plan participants is consistent with the Patient Bill of Rights.

WILLIAM J. CLINTON

Videotaped Remarks on Expansion of United Nations Security Council Resolution 986 Concerning Iraq

February 20, 1998

No people have suffered more at the hands of Saddam Hussein than the Iraqi people themselves. I have been very moved, as so many others around the world have been, by their plight. Because of Saddam Hussein's failure to comply with U.N. resolutions, the sanctions imposed by the U.N. at the end of the Gulf war to stop him from rebuilding his military might are still in place.

As a result, the people of Iraq have suffered. They are the victims of Saddam's refusal to comply with the resolutions he promised to honor. The United States strongly supports the U.N. Secretary General's recommendation to more than double the amount of oil Iraq can sell in exchange for food, medicine, and other humanitarian supplies. We will work hard to make sure those funds are used to help the ordinary people of Iraq.

Since the Gulf war, our policy has been aimed at preventing Saddam from threatening his region or the world. We have no quarrel with the Iraqi people who are heirs to a proud civilization and who have suffered for so many years under Saddam's rule.

From the beginning, the international sanctions that are aimed at denying Saddam Hussein the funds to rebuild his military machine have permitted food and medicine into Iraq. The United States has led the way in trying to make sure Iraq had the resources to pay for them.

In 1991, with our leadership, the U.N. Security Council encouraged Iraq to sell oil to pay for these critical humanitarian supplies. Saddam Hussein rejected that offer for 4 years, choosing instead to let his people suffer. What resources he had went not to caring for his people but to strengthening his army, hiding his weapons of mass destruction, and building lavish palaces for his regime.

In 1995 America led a new effort to aid the Iraqi people. After refusing the proposal for a year, Saddam finally accepted U.N. Security Council Resolution 986, which permits the sale of oil for food. Then he engaged in delay and bureaucratic wrangling for yet another year before allowing the resolution to take effect.

Perhaps worst of all, Saddam deliberately and repeatedly delayed the pumping of oil, which held up shipments of food and medicine to the Iraqi population. Even so, the international community has managed to deliver to the Iraqi people more than 3 million tons of food.

Just as Saddam deprives his people of relief from abroad, he represses them at home, brutally putting down the uprisings of the Iraqi people after the Gulf war, attacking Irbil in 1996, and draining the marshes of Southern Iraq.

Saddam's priorities are painfully clear: not caring for his citizens but building weapons of mass destruction and using them—using them not