

The President and the Prime Minister committed to making tangible progress on existing commitments under the TIFA, including in the areas of intellectual property rights, investment, and customs, as a necessary first step towards a possible free trade agreement. Both leaders also committed to work together in the World Trade Organization's Doha Development Agenda negotiations, emphasizing that progress on agriculture will be key to a successful conclusion of the Doha negotiations.

Both sides recognized that Life Sciences will be one of the leading industry sectors in the new century, promising significant human benefits and economic growth. In that regard, Thailand welcomed the U.S. initiative to establish the Life Sciences Innovation Forum under APEC. The Prime Minister expressed hope that such mutual cooperation would advance Thailand's efforts to become a world class center for research and development in Life Sciences and related health fields.

The President congratulated Prime Minister Thaksin on his leadership of APEC in 2003. The two leaders affirmed their commitment to making tangible progress in APEC on both trade and investment liberalization and counterterrorism objectives. The President looked forward to his State visit to Thailand before the APEC Economic Leaders' Meeting and expressed appreciation for the gracious invitation of His Majesty King Bhumibol Adulyadej to visit Thailand. Prime Minister Thaksin expressed appreciation for the excellent arrangements being made for the forthcoming visit by His Royal Highness Crown Prince Vajiralongkorn to Washington. The leaders agreed that these visits would further strengthen the already warm friendship between their two governments and between the American and Thai peoples.

NOTE: An original was not available for verification of the content of this joint statement.

Remarks to Senior Citizens in New Britain, Connecticut June 12, 2003

Thanks for the warm welcome. I really want to thank the good folks of the New Britain General Hospital for putting up with me and the entourage. [Laughter] But thanks for letting me come to talk about some important issues facing America.

I'm on my way to Maine, where I'm going to spend the weekend with one of my favorite seniors. [Laughter] He is turning 79 today. I'm not going to tell you how old my mother is, because I want to have a place to sleep. [Laughter]

Thanks for giving me a chance to come down. We face big challenges in this country. We've still got a challenge of making sure the Nation is secure and the world is more peaceful. Even though we've been successful in two major battles in Afghani-

stan and Iraq, there is still an enemy who lurks, who hates America because of what we stand for. And we stand for freedom. That's what we believe. We believe in freedom to worship, freedom to speak, freedom to succeed. And those freedoms are dear to our heart.

And people don't like the fact that we stand for freedom and promote freedom. And therefore, they're out there. But we'll find them, and we'll bring them to justice. There's no greater job for an administration than to protect the security of the American people. And that's precisely what this administration will continue to do.

And we have got a challenge when it comes to quality health care for our seniors. We face a challenge because many seniors

face the high cost of prescription drugs. It's a challenge we've got to deal with here. Today I'm going to act on how to speed up the approval of generic drugs, to make sure that prescriptions are more affordable for all Americans, particularly our seniors.

We also face a challenge because the Medicare system is antiquated. Medicine is modernizing, and Medicare isn't. And that's not right for our seniors. And so I've come here today to remind Congress that Congress has an obligation and a responsibility to meet the needs of our seniors and to make sure that Medicare is modern.

And there's no more strong advocate for making sure Medicare meets its promises than Nancy Johnson. She is a tireless advocate for quality health care all across America. And I want to thank her for her leadership. And I want to thank her for her friendship. And I want to thank her for her introduction.

I was a Governor once, so I got to know the Governors—the Nation's Governors. And the State of Connecticut has got a great Governor in John Rowland. He's been dealt a pretty tough hand this last year, but he's playing it like a pro. And the citizens of this State are fortunate to have him here.

I want to thank the mayors who are here. The best politics, of course, is local politics. I want to thank you all for coming. I appreciate you taking your time out of your day for coming.

I met Ruth Campanario when I got off the chopper. And you probably say, why would you mention her? Well, there's a lot of focus on the great strength of America these days. They talk about our military might, and we're plenty tough if we have to be. They talk about our muscle, but the true strength of the country is the heart of the country because of the compassion of the citizens who live here.

And Ruth is a volunteer; she volunteers at the Friendship Service Center. It's a local shelter that offers emergency and transitional housing and job training and

counseling services. She takes time out of her life to try to make somebody else's life better. That's the strength of America. It's the willingness of people to serve something greater than yourself, to love a neighbor just like you'd like to be loved yourself.

So Ruth, I want to thank you and thank all who volunteer to make their communities a better place. And thank you for coming. Where are you, Ruth? Oh, there you are. Stand up, Ruth. Thank you. Thank you very much.

Our health care system is the best in the world, and we need to keep it that way. We're great because we've got great docs. We're great because we've got unbelievable research; new technologies literally save lives on a daily basis. I mean, we're really good at health care. But we've got problems we've got to deal with.

And one of the problems is the cost of prescription drugs. We live in an age of miracle drugs. Millions of our citizens have found healing and hope from medicines that were discovered and created in this country, and it's—but the treatment, the use of drugs, has replaced major surgeries as well. Treatment is changing. And this has been a blessing. It's been a blessing for a lot of seniors who are living longer and better lives. But the challenge for America is to make sure that lifesaving drugs are both affordable and available to America's seniors.

Now, one way to make prescriptions more affordable is to ensure that generic drugs are not delayed in reaching the market, are not delayed for consumers to be able to purchase. In our system, when a drug company develops a new medicine, the company is given a patent. And patents ensure that investment and innovation are rewarded, so we continue to get additional lifesaving drugs as new discoveries are made. It makes sense to have a system that protects investment for a while.

Yet when a patent expires, other companies have the right to make a safe, lower cost generic version of the drug. However,

the system a lot of time doesn't work because the original inventor of the drug uses delaying tactics to avoid competition. They delay the process of patent expiration so that consumers don't have additional choices of generic drugs.

At my direction, today the Federal Drug Administration, the FDA, is taking action to close loopholes that slow the movement of generic drugs to the marketplace. First, we are limiting the amount of time that a drug company can delay the marketing of a generic competitor. Instead of letting them file one delay after another, the Government will allow a single 30-month stay while legal complexities are sorted out. In other words, the initial manufacturer of a drug will not be allowed to use the legal process for endless delay, which hurts our consumers in America. Secondly, we are no longer allowing drug companies to block generics because of patents on minor features, such as the color of the pill bottle or some combination of ingredients not related to the effectiveness of the medicines. Thirdly, we are tightening the overall rules on patent applications so that false statements to get a patent result in criminal charges.

By taking these actions, we will bring generic drugs to the market much more quickly—in some cases, years earlier. And this should save the American consumers about \$3.5 billion each year—savings that will go, of course, to the consumers, to our seniors, or to Medicaid programs administered by the State, or to employer health plans.

The Senate is looking to write these reforms that we're now implementing to executive action in the law. And I support their efforts. I want to work with both the House and the Senate on this legislation to make certain that prescription drugs are more affordable to the American people.

And then we've got to deal with the issue of accessibility for our seniors. People on Medicaid, Medicare need to have a choice of affordable plans, all of which provide

prescription drug benefits. Every Federal employee—including every Member of Congress—gets to choose the health coverage that best fits their needs. If it's good enough for the employees and the Members of Congress to have choice, it's good enough for our seniors to have choice when it comes to health care plans as well.

And so here are the choices available. If a senior wants to stay in the current Medicare system, they should have that option. And that option should include a prescription drug benefit. If seniors want to have enhanced benefits, such as more coverage for preventative care and other services, they ought to have that choice as well. And finally, seniors who like the affordability of managed care plans should be able to enroll in managed care plans. They shouldn't be starved to death so seniors don't have that option. And low income seniors should receive extra help in meeting whatever plan—the premiums of whatever plan they choose so that all seniors will have the ability to choose a Medicare option that includes the prescription drug benefit.

These are the principles on the legislation that Nancy and I are working on. And these are the principles that we believe will be incorporated in the bill, so long as you let your Senators and others know that you're interested in reform, that you want a modern Medicare system.

Sandra Sorensen—I just met with some of your fellow citizens from the area, all of whom are seniors. I listened to their stories. Let me share some of the stories with you. Sandra Sorensen is here. She is on a Connecticut special program called ConnPACE, a program that, Johnny, you probably helped design. It helps her on her prescription drugs.

The problem is, is that she wants to move up to be with her daughter in New Hampshire. Her daughter is worried about her at times, I guess is the right thing to say, Sandra, kind of worried about you. She wants you to make sure that, you know,

that you're well taken care of. She wants to be close by. The problem is, if she goes to New Hampshire, she loses ConnPACE, which means she won't have the medicines necessary to take care of her current ailments. We need to reform Medicare to make sure people have got the capacity to go from one State to the other without losing prescription drugs.

The Rowlands are with us today, Ralph and Bernice. They were quite outspoken about the need to make sure the Medicare system works properly. Ralph was wondering out loud, "How come Medicare doesn't try to prevent disease before it happens?" That seems to make sense. [*Laughter*] It doesn't. They pay now about \$200 a month, and what they're worried about is increasing drug costs will make it very difficult for them to live out their older years.

The Humphreys are with us as well. Ginny spent her time working in the Connecticut health care system. She knows a lot about health care. She claims she had a stroke; it's certainly hard to tell it. She's very articulate. But she understands—and she likes Medicare+Choice, but she sees that Medicare+Choice is slowly getting starved in the budgets of the Federal Government. The plan also doesn't have a drug coverage. They spend about \$1,000 each month on a variety of medicines. They need a modern Medicare system so they can live out the rest of their years in comfort.

Lois Splain is here with us. She likes Medicare. She likes being able to choose her doctor without a referral. But she needs coverage for prescription drugs. Hilda Gandara is here from—Cuban American is with us. And she is—lives in West Hartford. Unfortunately, she lost her husband recently. She's on her own, like a lot of seniors are. Her costs are—drug costs are about \$700 a year. She's worried about whether or not she can afford prescription drugs.

There's story after story after story all across America about people wondering whether or not they can afford lifesaving drugs in their later years. And the Congress must act. That's what the Congress must do. The Congress must understand we've got a problem with Medicare. They should not politicize the issue. They ought to focus on what's best for our fellow Americans and get a package done. And the House needs to get it done, and the Senate needs to get it done prior to the Fourth of July break.

One of the important parts of a good health care system is the relationship between patient and doctor. And any good health care policy must recognize that relationship. But we've got a problem in America that is affecting the relationship between patient and doctor, and that is we got a medical liability system that is out of control. If we want affordable health care and available health care, we got to make sure that junk lawsuits don't run docs out of business and run the cost of medicine up so high that people can't afford medicine.

And it's an issue—it's a real issue all across America. And if people in America don't think their bills are being affected by these frivolous lawsuits, then they don't really understand the system, in my judgment. The cost drivers are high. Not only are docs having to pay higher and higher premiums—I suspect we'd find some pretty good testimony right here. I heard it yesterday from a baby doc in Chicago whose premiums, annual premiums are \$170,000 a year. He anticipates they'll go up 40 percent next year, and he's never been sued.

The other cost driver is preventative medicine. If there's a—if people are filing lawsuits right and left in our society, which they are, it's natural that a doctor or a hospital will want to practice more medicine than is necessary to be able to defend themselves in case they end up in a court of law. And that's expensive.

This is a Federal issue, in my judgment, because of the costs of litigation—how it affects the Federal budget. It affects the cost of Medicare. Lawsuits affect the cost of Medicaid. It affects the cost of veterans' health care. It is a national issue that requires a national solution. And that national solution says people ought to have their day in court. But junk lawsuits make it harder for somebody who's actually been hurt to have their day in court. It also recognizes bad doctors need to be punished, something good doctors fully subscribe to. It recognizes that people ought to be able to recover their economic damages, but there needs to be a hard cap of \$250,000 on non-economic damages. And we need to make sure that we have a reasonable cap on punitive damages.

This is a necessary part of health care reform. It is necessary to keep docs in business. It is necessary to keep consumers in a position where they can have affordable and available health care. The House has passed the bill. The Senate needs to pass the bill. And if you're interested in medical liability reform, you ought to contact the United States Senators from the State in which you live and let them know your opinion.

I believe we can get things done in Washington, DC, if we remember whose time we're on. We're on the people's time in the Nation's Capital. We spend—we're there to get the job done. By working together, we can make sure this country is more secure and, I believe, the world more peaceful. And by working together, we can make sure that our folks have got economic security and, as importantly, health security.

I want to thank you for giving me the chance to come today to talk about an exciting opportunity for those of us who are honored to serve the American people—the opportunity to bring Medicare into the 21st century, so we can look our seniors in the eye and say we were called to solve a problem, and by working together, we were able to solve that problem, not only for this generation but for future generations to come.

Thanks for your time. May God bless you. May God continue to bless America.

NOTE: The President spoke at 1:03 p.m. in the cafeteria at New Britain General Hospital. In his remarks, he referred to Representative Nancy L. Johnson of Connecticut.

Statement on the Death of David Brinkley

June 12, 2003

David Brinkley was a pioneer of broadcast journalism. He was respected for his integrity, admired for his candor and wit, and distinguished by an exceptional career

that spanned more than a half century. Laura joins me in offering our heartfelt condolences to Susan and the entire Brinkley family.