HEALTH CARE REFORM

DOLE OUTLINES SIX GUIDING PRINCIPLES FOR REAL REFORM:
ISSUE CRIES OUT FOR BIPARTISAN COOPERATION:
EXCLUDING REPUBLICANS "BAD POLITICS, BAD POLICY, BAD SIGNAL"

WASHINGTON -- THE FOLLOWING ARE REMARKS PREPARED FOR DELIVERY BY SENATE REPUBLICAN LEADER BOB DOLE TO THE AMERICAN MEDICAL ASSOCIATION AT THE MAYFLOWER HOTEL IN WASHINGTON, DC:

I CAN'T HELP BUT THINK THAT IF HISTORY TURNED OUT A LITTLE DIFFERENTLY, I, TOO, MIGHT HAVE BEEN A MEMBER OF THE A.M.A. AS A HIGH SCHOOL STUDENT IN RUSSELL, KANSAS, I WANTED TO BE A DOCTOR. I WORKED AT A LOCAL DRUG STORE, WHERE THE WHOLE TOWN SEEMED TO PASS THROUGH DAY AFTER DAY. I HAVE TO TELL YOU, OUR DOCTORS REALLY IMPRESSED ME.

I WAS ABLE TO SEE THE DIFFERENCE THAT THESE SMALL-TOWN DOCTORS MADE, AND THE RESPECT IN WHICH THEY WERE HELD. AND IT WAS A SHORT STEP FROM ADMIRING DOCTORS TO WANTING TO BE ONE.

I WENT TO COLLEGE WITH THE INTENTION OF GETTING A MEDICAL DEGREE -- BUT WORLD WAR II CHANGED THAT -- AND I SPENT THE YEARS AFTER THE WAR BEING A PATIENT FOR DOCTORS, INSTEAD OF STUDYING TO BE ONE.

AND I WILL NEVER FORGET THE EFFORTS OF ONE VERY SPECIAL DOCTOR -- HAMPAR KELIKIAN -- WHO NOT ONLY REFUSED TO TAKE A PENNY FOR THE SEVEN OPERATIONS HE PERFORMED ON ME -- BUT WHO ALSO INSTILLED IN ME A PHILOSOPHY OF MAKING THE MOST OF WHAT YOU HAVE.

AND, SINCE REPUBLICANS HAVE ONLY THE SKETCHIEST OF DETAILS ON WHAT THE WHITE HOUSE IS DOING TO REFORM HEALTH CARE, I GUESS I WILL USE THAT PHILOSOPHY TODAY, TO PREDICT WHAT WILL HAPPEN THIS YEAR IN THAT AREA.

THE CLINTON TASK FORCE

THE PRESIDENT'S HEALTH CARE TASK FORCE IS IN FULL SWING, AND MRS. CLINTON HAS SOME VERY BRIGHT POLICY EXPERTS WORKING WITH HER TO HELP HER CRAFT A HEALTH PROPOSAL TO BE DELIVERED TO CONGRESS IN EARLY MAY.

RECENTLY, THIRTY-FIVE REPUBLICAN SENATORS MET WITH THE FIRST LADY TO HEAR HER IDEAS AND TO SHARE OUR THOUGHTS AND CONCERNS ABOUT APPROACHES TO HEALTH CARE REFORM.

WHAT QUICKLY BECAME EVIDENT DURING OUR MEETING IS THAT MRS. CLINTON -- AND THE PRESIDENT -- WILL SUFFER NO SHORTAGE OF ADVICE IN THIS ENDEAVOR. SENATE REPUBLICANS HAVE BEEN DEEPLY IMMERSED IN THE ISSUE, TOO. WE'VE HAD A HEALTH TASK FORCE HARD AT WORK FOR THE PAST TWO YEARS, AND I SAY WITH PRIDE THAT SOME OF MY REPUBLICAN COLLEAGUES TAKE A BACKSEAT TO NO ONE WHEN IT COMES TO HEALTH CARE EXPERTISE AND COMPASSION.

EXCLUDING GOP & OTHERS A BIG MISTAKE

BUT UNFORTUNATELY THE DESIRE FOR BIPARTISAN COOPERATION SEEMS TO HAVE FALLEN FAR SHORT OF REALITY. NOTWITHSTANDING PRESIDENT CLINTON'S INITIAL INDICATION THAT HE WANTED TO INCLUDE EVERYONE IN THIS EFFORT AT REFORM -- THE REPUBLICANS IN THE HOUSE AND SENATE HAVE BEEN EXPLICITLY EXCLUDED. BUT APPARENTLY WE AREN'T THE ONLY ONES.

NO DOUBT ABOUT IT, HEALTH CARE IS AN ISSUE THAT CRIES OUT FOR BIPARTISAN COOPERATION. IT WILL BE NEARLY IMPOSSIBLE TO PASS ANY MAJOR REFORM WITHOUT IT. AND BIPARTISAN DOESN'T MEAN SIMPLY PICKING OFF THREE REPUBLICANS SO THAT THE DEMOCRAT MAJORITY CAN RAM A PLAN THROUGH CONGRESS.

THE COST ISSUE

IT IS HARDLY NEWS THAT HEALTH CARE COSTS HAVE SPIRALED OUT OF CONTROL -- WE ARE RAPIDLY APPROACHING THE ONE TRILLION DOLLAR MARK FOR HEALTH CARE SPENDING. AND, AS YOU KNOW, THIS SPENDING IS CLOSELY LINKED TO THE DEFICIT -- WITH ENTITLEMENT PROGRAMS GROWING AND GROWING EACH YEAR, ALONG WITH THE NUMBER OF UNINSURED.

EVERYONE WANTS TO KNOW WHY HEALTH CARE COSTS KEEP GOING UP. FOR LEADERS AND EXPERTS, THE ANSWER IS THAT THE COST ISSUE IS A COMPLEX ONE. THEY REFER TO FACTORS SUCH AS DUPLICATION OF TECHNOLOGY AND SERVICES, DEFENSIVE MEDICINE, TOO MANY REGULATIONS, MOUNTAINS OF PAPERWORK, HEALTH COSTS ASSOCIATED WITH CRIME AND DRUG ABUSE, AND AN AGING POPULATION.

BUT, ACCORDING TO A RECENT SURVEY FROM GALLUP, THE AMERICAN PEOPLE CAN SUM UP THE COST ISSUE IN ONE SIMPLE WORD: GREED. THE SURVEY SHOWS THAT AMERICANS BLAME THE HIGH COSTS ON UNNECESSARY TESTS, OVERPAID DOCTORS, AMBULANCE-CHASING MALPRACTICE LAWYERS, WASTEFUL HOSPITALS, AND OVERPRICED PHARMACEUTICALS. FROM THE PUBLIC'S PERSPECTIVE, WE DON'T HAVE A COST PROBLEM, WE HAVE A "PROFITS" PROBLEM.

THE AMERICAN PEOPLE BELIEVE THAT OUR HEALTH CARE SYSTEM IS RIDDLED WITH WASTE AND GREED. THEREFORE, NO ONE IS EAGER TO TALK ABOUT HARD CHOICES. NO ONE WANTS TO GIVE UP ANYTHING. AND NOT MANY WANT TO CONSIDER CHOICES THAT RAISE THEIR OWN COSTS OR REDUCE THE SERVICES THEY GET. THE HARD FACTS ARE, IF WE ARE GOING TO IMPROVE THE LOT OF SOME -- OTHERS WILL HAVE TO DO WITH CHANGES IN WHAT THEY GET TODAY. BUT THAT IS NOT AN EASY PLAN TO SELL.

THE LESSON OF THE CATASTROPHIC CARE DEBATE

A GOOD EXAMPLE OF THAT IS THE CATASTROPHIC HEALTH CARE LEGISLATION THAT CONGRESS PASSED IN 1988. WE THOUGHT IT WAS A PRETTY GOOD IDEA. WE SAID TO THE PEOPLE WHO HAD MONEY, THAT THEY OUGHT TO PAY A LITTLE MORE. I THOUGHT IT MADE A LOT OF SENSE, AND WAS GOOD LEGISLATIVE POLICY. IT WAS A TOUGH DECISION, BUT IT PASSED CONGRESS BY AN OVERWHELMING MAJORITY. LESS THAN A YEAR LATER, IT WAS REPEALED BECAUSE THE PEOPLE WHO WERE GOING TO HAVE TO PAY MORE HAD A VERY EFFECTIVE LOBBY. THEY TOLD US HOW THEY EARNED THESE BENEFITS, AND HOW EVEN THOUGH THEY MIGHT HAVE SOME MONEY, THEY SHOULDN'T HAVE TO PAY ONE MORE CENT. AND LET'S FACE IT, WHEN THE SENIOR CITIZENS SPEAK UP, CONGRESS LISTENS -- AND THEN IT CHANGED SOME VOTES. WHAT LOOKED LIKE COMMON SENSE REFORM WAS QUICKLY REPEALED.

SO THE LESSON WE LEARNED THEN, AND WHAT WE ARE LEARNING NOW, IS THAT AMERICANS STILL WANT MORE CARE, MORE QUALITY, MORE ACCESS, BUT AT LOWER COSTS. SO, WHAT DO WE DO?

I BELIEVE WE ALL SHARE THE SAME GOALS -- UNIVERSAL ACCESS FOR ALL, IN A SYSTEM THAT CONTAINS COSTS WHILE PRESERVING CHOICE AND THE HIGH QUALITY OF CARE.

WE ALL WANT TO SEE HEALTH CARE REFORM -- WE ALL KNOW THAT WE CANNOT SUSTAIN OUR CURRENT RATE OF SPENDING -- AND WE ALL KNOW THAT WE MUST FIND A WAY TO BRING EVERYONE INTO THE SYSTEM.
THE GUIDING PRINCIPLES OF REFORM

THE AMERICAN PUBLIC SHOULD EXPECT US, THEIR ELECTED REPRESENTATIVES, TO SEEK SOLUTIONS THAT MAINTAIN THE FOLLOWING SIX PRINCIPLES. THESE PRINCIPLES SHOULD BE USED TO EVALUATE ANY PLAN PUT FORWARD BY THE ADMINISTRATION OR BY REPUBLICANS IF THEY ARE FORCED TO DEVELOP THEIR OWN ALTERNATIVE.

1. PROTECT QUALITY -- THERE IS A REASON OUR HEALTH SYSTEM IS THE ENVY OF THE WORLD -- WHY PEOPLE FROM EVERY COUNTRY IN THE WORLD SEND THEIR YOUNG PEOPLE HERE TO BE TRAINED, TO DO RESEARCH; WHY THEY FLOCK HERE FOR CARE -- THE REASON IS QUALITY. THANKS TO OUR SEARCH FOR QUALITY AND EXCELLENCE, WE HAVE DEFEATED PLAGUES, MADE SPARE PARTS FOR NEARLY EVERY BODY ORGAN, AND CAN SAVE THE LIFE OF THE SMALLEST, FRAILEST NEWBORN. IN OUR WISH TO LOWER COSTS AND BETTER MANAGE OUR RESOURCES, LET'S NOT THROW AWAY OUR MEDICAL MIRACLES.

2. PRESERVE CHOICE -- CONSUMERS, NOT THE GOVERNMENT, SHOULD BE THE ONES TO MAKE CHOICES ABOUT WHERE THEY GET THEIR CARE AND FROM WHOM. AT THE HEART OF OUR FREE MARKET SYSTEM, IS OUR ABILITY TO CHOOSE. IN HEALTH CARE, AS IN NO OTHER INDUSTRY, THAT CHOICE IS CRITICAL TO MAINTAINING QUALITY HEALTH CARE FOR YOU AND YOUR FAMILY. AS SOON AS WASHINGTON STARTS CALLING THE SHOTS ON HEALTH CARE, WE'RE ALL IN DEEP TROUBLE.

3. PRESERVE JOBS -- WE ALL ARGUE THAT WE HAVE TO INCREASE THE NUMBER OF PEOPLE IN THE COUNTRY WHO HAVE ACCESS TO HEALTH CARE AND HEALTH INSURANCE. WHAT WE DON'T WANT TO DO IS PUT THEM OUT OF WORK BY MANDATING AND TAXING SMALL BUSINESS OUT OF BUSINESS. MAKING INSURANCE AFFORDABLE AND AVAILABLE, CREATING JOBS, KEEPING PEOPLE AT WORK AND KEEPING OUR ECONOMY GROWING IS THE BEST PRESCRIPTION FOR BETTER HEALTH CARE BENEFITS.

4. NO GOVERNMENT CONTROLLED CARE -- ITS A SHAME THAT SOME CRITICS HAVE TO BE REMINDED, BUT WE ARE NOT SWEDEN OR GERMANY OR EVEN CANADA -- AND WE DON'T WANT TO BE. YES, WE'VE GOT REAL PROBLEMS. BUT THEY REQUIRE AMERICAN SOLUTIONS. MANAGED COMPETITION -- AS IT HAS BEEN DESCRIBED TO ME -- BUILDS ON THE PRIVATE SECTOR AND HELPS PEOPLE MAKE BETTER CHOICES ABOUT THEIR FAMILIES AND WHAT THEY NEED. THE GOVERNMENT SHOULD BE THERE TO HELP THOSE WHO NEED IT AND HAVE NO OTHER RESOURCES -- IT'S NOT THERE TO CONTROL OUR LIVES. AMERICANS DON'T WANT SOCIALISM BUT IT SEEMS THIS ADMINISTRATION IS TRYING MIGHTILY TO INSTITUTE IT WHENEVER IT CAN.

5. CONTROL COSTS NOT CARE -- GLOBAL BUDGETS AND PRICE CONTROLS TRANSLATE INTO REDUCED QUALITY AND RATIONED CARE. CONTROLS ON THE PRICES OF HEALTH CARE ONLY POSTPONES THE NECESSARY CONFRONTATION WITH THE UNDERLYING DEMAND THAT HAVE PRODUCED THEIR INCREASE. UNFORTUNATELY, CONTROLS ARE INEVITABLY TARGETED AT THE SYMPTOMS NOT THE CAUSES. LET'S CREATE AN ENVIRONMENT TO REDUCE COSTS AND UTILIZATION THROUGH A BETTER, MORE APPROPRIATE USE OF SERVICES. LET'S PUT RESPONSIBILITY ON PROVIDERS, EMPLOYERS AND EMPLOYEES TO USE CARE WISELY.

6. REAL TORT REFORM -- WITH NO RELIEF IN SIGHT FROM THE CONSTANT THREAT OF COSTLY LITIGATION, WE HAVE TO FIND A WAY TO FINALLY REFORM THE SYSTEM. IN NO OTHER INDUSTRIALIZED COUNTRY DO HEALTH CARE PROVIDERS CONFRONT THE DAY-TO-DAY THREAT OF LITIGATION. IT'S NO WONDER PHYSICIANS FIND IT HARD TO SAY NO WHEN A PATIENT DEMANDS ANOTHER TEST, OR THE PHYSICIAN SIMPLY ORDERS ANOTHER TEST TO AVOID QUESTIONS LATER. THAT'S NO WAY TO DO BUSINESS.

THAT'S WHY ITS TIME FOR THE DEMOCRAT MAJORITY TO STAND UP TO THE TRIAL LAWYERS AND SAY, ENOUGH IS ENOUGH! ITS ALSO TIME FOR US TO CREATE A LEGAL ENVIRONMENT THAT ENCOURAGES CONSOLIDATION AND COORDINATION IN THE HEALTH CARE SYSTEM -- NOT JUST CONFRONTATION.
CONCERNS ABOUT MANAGED COMPETITION

THIS YEAR, AS YOU KNOW, WE ARE DISCUSSING MANAGED COMPETITION, WHICH SOME SAY WILL CONTROL COSTS WHILE BRINGING EVERY AMERICAN INTO THE SYSTEM. I HAVE TO BELIEVE THAT MANY AMERICANS -- INCLUDING SOME IN GOVERNMENT -- ARE UNCERTAIN OF WHAT MANAGED COMPETITION IS, OR HOW IT REALLY WORKS. I, FOR ONE, HAVE QUESTIONED HOW MANAGED COMPETITION WILL WORK IN RUSSELL, KANSAS, OR ANY RURAL AREA, OR INNER CITY, WHERE THERE ARE ONLY ONE OR TWO DOCTORS.

AND, THERE IS CONCERN BY MANY THAT MANAGED COMPETITION WILL REDUCE THE ABILITY OF AMERICANS TO CHOOSE THEIR PROVIDERS, OR WILL LEAD TO RATIONING OF CARE. THESE ARE ISSUES THAT WILL HAVE TO BE ADDRESSED.

THE CHALLENGE NOW IS TO DEVELOP A FAIR AND EQUITABLE HEALTH CARE STRATEGY TO MAKE HEALTH CARE AVAILABLE TO ALL AMERICANS THROUGH A COMPETITIVE PRIVATE SECTOR HEALTH CARE SYSTEM.

PERHAPS THE REAL CHALLENGE IS TO ACCOMPLISH THIS WITHOUT RAVAGING THE ECONOMY -- WITHOUT HURTING BUSINESS -- AND WITHOUT FURTHER STRAINING OUR BANKRUPT ECONOMY. IT'S PRETTY EASY TO PROMISE EVERYBODY EVERYTHING, BUT THAT KIND OF PROPAGANDA WILL ONLY MAKE THE CRISIS A PERMANENT ONE.

PEOPLE WANT SOLUTIONS, NOT POLITICS

THIS DEBATE CAN NOT DISINTEGRATE INTO A POLITICAL CONTEST. IF IT DOES, THE AMERICAN PEOPLE WILL BE THE LOSERS. THE AMERICAN PEOPLE WANT ANSWERS AND SOLUTIONS, AND THEY DON'T CARE WHICH PARTY TAKES CREDIT. CLEARLY, WE HAVE TO WORK TOGETHER -- PROVIDERS, BUSINESS, INSURERS, CONSUMERS, AND THE GOVERNMENT.

I AM CONvinCED THAT REFORM CAN TAKE PLACE -- AND I AM CONvinCED THAT IT CAN BE DONE WITHOUT CREATING MORE REGULATIONS OR ANOTHER GOVERNMENT PROGRAM.

NO DOUBT ABOUT IT, THE ADMINISTRATION AND CONGRESS MUST WORK TOGETHER ON REFORMING OUR NATION'S HEALTH CARE SYSTEM. AND REPUBLICANS ARE READY TO ROLL UP OUR SLEEVES AND FACE THE DIFFICULT DECISIONS THAT MUST BE MADE.

GIVEN THE PRIORITy THE PRESIDENT HAS GIVEN TO RESOLVING THE HEALTH CARE CRISIS, HOW HE HANDLES SUCH DIFFICULT NEGOTIATIONS WILL BE A REAL TEST OF HIS LEADERSHIP ABILITIES.

THE REPUBLICAN COMMITMENT

I CAN ASSURE YOU THAT REPUBLICANS CONTINUE TO BE FULLY COMMITTED TO REFORMING OUR HEALTH CARE DELIVERY SYSTEM. WE CONTINUE TO MEET ON A WEEKLY BASIS AND WILL REMAIN COMMITTED UNTIL HEALTH CARE COSTS ARE CONTAINED AND ALL AMERICANS HAVE ACCESS TO THE SYSTEM. WE MAY BE LOCKED OUT OF THE WHITE HOUSE, BUT WE'RE NOT LOCKED OUT OF THE DEBATE. IF THE WHITE HOUSE THINKS IT CAN GO IT ALONE -- THAT IT CAN EXILE REPUBLICANS, INDEPENDENTS AND ROSS PEROT SUPPORTERS -- THAT IT CAN STIFF THE A.M.A. AND EVERY OTHER GROUP OF PROFESSIONALS -- THEN IT'S TIME TO TELL THE WHITE HOUSE IT NEEDS A CHECK-UP.

AS I CONCLUDE, I WOULD LIKE TO THANK ALL THOSE WHO ARE ON THE FRONT LINES OF HEALTH CARE DELIVERY IN THIS COUNTRY. I CONGRATULATE YOU AND THANK YOU FOR YOUR EFFORTS, AND LOOK FORWARD TO WORKING WITH YOU.

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