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## **Remarks in a Discussion at Youngstown State University in Youngstown, Ohio**

May 25, 2004

The President: Well, thank you, Ron. Thanks. Listen, thanks for coming. As you can see, I'm joined by some of your fellow citizens here to have a dialog about health care. And there's some really amazing things going on in the Youngstown area as well as across the country to make sure people have got a safety net. And that's what we're going to discuss, community health centers and why they're important for Ohio, why they're important for the country, and how they fit into a strategy to make sure we do a better job of controlling costs as well as making sure people get health care. That's what we're here to discuss.

We've got some real experts here that I'll be introducing in a minute, people who have actually used community health centers, people who work in a community health center, people who run community health centers, and people who oversee community health centers. We've got the whole spectrum of the community health center world right here in Youngstown to discuss why they're important.

Before I do, first of all I want to thank Tony Atwater, the provost of this fine university. Tony, thank you very much. You're a good man to host us. It's not easy to welcome The President: [Laughter] The entourages are quite large these days. But I'm really proud that we could visit your beautiful campus, and thanks a lot for the hospitality.

Tom Van Coverden is the president and CEO of the National Association of Health Care Centers. Tom, thanks for coming, glad you're here.

George McKelvey is with us. Mr. Mayor, it's good to see you. Thank you for your service. See you tomorrow. Mr. Mayor and I first met on a train, didn't we, 4 years ago. Thanks for coming by. You're doing a fine job here. And the mayor told me when I first met him, he said, "My vision is a modern Youngstown." And you're making it come true. I'm proud of your service — doing a great job.

And the mayor of Alliance is with us, Toni Middleton. Where are you, Mr. Mayor? There you go. Thanks for coming. The reason Toni is here, I think a community health center is opening up in Alliance.

Mayor Middleton: Yes, we opened up in December.

The President: Good. See, Mr. Mayor, you've got yourself a good asset in your community, which we'll be discussing here shortly.

Listen, when I landed at the airport, I met a fellow named Sid Harris. I'm about to introduce Sid. He has been an active volunteer at a local hospital for 15 years, where he's performed over 4,000 hours of volunteer help. Sid is a — he holds fundraisers so that children with heart problems can go to camp in Virginia. He sends nursing students to Youngstown State University. Sid is a soldier in the army of compassion. Sid is right here. Sid, why don't you stand up, if you don't mind. Thank you, Sid. His wife pointed out to me when I got off the plane, Sid may not be able to see you, but he sure can hear you. [Laughter]

And the thing about Sid is, is that he is such a loving guy that he wants to help somebody in life. That's what he wants to do. We talk about the strength of the country being the U.S. military, and we're going to keep it strong so the world will be more peaceful and free. We talk about one of our strengths being the fact that we're a wealthy nation compared to other nations, and that's the way we want it. We've got to make sure we remain the best place in the world to risk capital so people can work. But the true strength of the country is in the hearts and souls of our citizens. That's the true strength of America. The true strength of our country is the fact that people like Sid are willing to take time out of their lives to make somebody else's life better.

We've got people in our country who hurt, who are lonely, who wonder whether or not the future belongs to them, whether or not there's any brighter day. And we've got people in our country who are willing to surround the lonely with love and to help. See, that's the strength of America. And the reason I like to talk about the Sid Harris of the world is to thank those here and those around Youngstown and those around the country who are doing the same thing, and to call upon others to love your neighbor like you'd like to be loved yourself. We all can save America, one heart and one soul at a time. And Sid Harris is apart. I appreciate you coming, Sid.

There's an interesting debate in Washington about health care. My view is, is that we need to empower consumers and doctors. We need to make sure the patient-doctor relationship is the center of health care decision making, not Washington, DC. We need to make sure that we put good policy in place that helps patients.

One of the things that you're going to see happening here very quickly is drug discount cards will be sent out to senior citizens. It's a good thing. You take those drug discount cards, and you'll be able to — this is part of Medicare reform, making the Medicare system better. And the drug discount cards will allow seniors to save between 15 to 25

percent off of brand-name medicines and more off of generic drugs. There's a market over the Internet, kind of, that's taking place — in other words, people are now posting price so consumers have got the ability to choose price. And that is causing more price efficiency in the marketplace. It's a positive thing that's beginning to take place.

By the way, poor seniors will get a \$600 credit on their card. Many drug companies have said they're going to — once the \$600 credit is used, they'll extend to help the poorest of seniors with drug prices. It's a positive development.

Medicare reform is going to work, and it's going to work well. It fully kicks in in the year 2006. The first stage is the drug discount cards that are now being sent out.

Secondly, we've passed what's called health savings accounts. I suspect there's some small-business people here. These are particularly beneficial for individuals and small businesses. This will allow you to put money into a health savings account tax-free, earn interest on it tax-free, take it out tax-free to pay for ordinary medical expenses as well as to pay for a high-deductible, low-cost medical catastrophic policy. It's a good way to help control costs. It's a new innovation that is beginning to get in the marketplace, all aimed at helping to control medical costs and making sure the patient-doctor relationship is the center of medical decision making processes.

We need what's called association health care plans. This will allow small businesses to pool risk so they can have the same purchasing power as large businesses do. I believe there ought to be tax credits for the working uninsured.

And I know you need medical liability reform here in the State of Ohio and across the United States. Here's why. Junk and frivolous lawsuits cause docs to have to practice what's called defensive medicine. In other words, they practice more medicine than you need in order to make sure that if and when they get sued, they've got a good case. Secondly, junk and frivolous lawsuits mean their premiums go up for their medical liability insurance, which means your bills go up. Thirdly, junk and frivolous lawsuits discourage good docs from even practicing medicine in the first place. If you want health care to be affordable and available, you need to have a legal system that is fair and balanced.

I believe this is a national issue because it runs up the cost of medicine for national budgets. The Medicare budget goes up. The Medicaid budget goes up. The veterans' health care system costs go up. And we need law coming out of Washington to make medical liability reform the law of the land. It passed the House; it's stuck in the Senate.

These are practical ways to address the rising cost of health care, the availability of health care, all aimed at making sure the patient and the doc are the center of the health care decision making process.

Now, one of the problems we got here in America is that there are some people, quite a few people, who need primary care, a place where they can go get help when they need it. The problem, oftentimes people go to the emergency room, which is very cost-inefficient. It costs the taxpayers money. The emergency room ought to be used for true emergencies, not for the primary care of health care — primary healthcare for people who can't afford health care. So the Government wisely set up what's called community health centers. These are facilities where — that provide primary and prenatal care, checkups, immunization, preventative treatments to anybody who needs them. In other words, this is a part of the safety net. This is a wise expenditure of taxpayers' money. It relieves pressure off the emergency rooms, and it provides a safety net for some of the citizens in our communities.

We provide care up to about 13 million people a year, I think. I think it's important for us to continue to either expand existing community health centers or build new ones. The goal I set when I first got elected was that we would expand them by 1,200 — expand or build 1,200 new ones. We've accomplished half of that goal. I'm asking for Congress to accomplish the other half of the goal over the next couple of years. This is wise use... [applause].

These things make sense. It's a heck of a lot better system than having the entire health care system federalized. This makes a lot of sense to make sure that we recognize in our society people can't afford health care, and they need access to health care. And it's a practical way to do so.

Today you're going to hear from people who've used the community health centers. You're also going to hear about a doc who works at the community health center. But I first want to start off with Betty Duke. Her job is — well, she's got a pretty fancy title. She's the Administrator of the Health Resources and Services Administration, HRSA — HRSA — [laughter] — in Rockville, Maryland. She works for Tommy Thompson, who is my Cabinet Secretary for Health and Human Services. She's got such a complicated job, it required a Ph.D. But her job is to oversee this health center initiative, the expansion of existing health centers or the building of new ones in communities where there is a need.

Why don't you tell us, Betty, just anything you want to say, you're welcome. It's your mic.

[Dr. Duke made brief remarks.]

The President: Yes, I appreciate — one of the things — we're trying to get up to serving 16 million people, see. There's a lot of discussion about whether or not people have got access to health care. This is access to health care in a practical way — 16 million people...[applause].

They treat bicycle injuries? [Laughter] I was wearing my helmet, I want you to know. [Laughter]

Ron, you're the CEO of the Ohio North East Health Systems, Inc. That's a long title for...

Ronald Dwinells: We call it "ONE," as in "Number One." [Laughter]

The President: "Number One?" Okay. You're the health CEO of "Number One," then. So, like, what is your — how many of these centers do you run? How long have you been running centers? How often are they open?

[Dr. Dwinells made brief remarks.]

The President: Tell people why it's — I think they're cost-effective, otherwise I wouldn't be asking them to expand. Do you think they're — of course you think they're cost-effective. [Laughter] You're not a lawyer, but it's a leading question. [Laughter]

Dr. Dwinells: Yes, I definitely think it's very cost-effective. This year, we're anticipating 60,000 visits. We have a \$5 million a year budget this year. This is compared to \$600,000 in 1998. So there's been a huge growth. I believe — [inaudible] — I saw figures once where to care for a patient through community health centers, it was an ungodly small amount, a dollar-something per encounter. And it's amazing, because it's run close to...

The President: ...goes to an emergency room, or no care at all until it's too late — until, in other words, somebody gets so sick that they show up requiring a much greater bill. It's going to be — it will cost them a lot of money if we don't take care of our problem early.

[Dr. Dwinells made further remarks.]

The President: Right. One of the things I forgot to ask Betty about was the National Health Service Corps.

[Dr. Duke made further remarks.]

The President: I appreciate you doing that. In other words, what Betty does is not only see the construction and — oversee the construction or expansion of these facilities, her job also is to provide incentive to health care providers to show up and work there. And that's good. It's a good program. And part of it is to forgive loan.

Dr. Dwinnells: Mr. President, can I say...

The President: Yes, absolutely.

Dr. Dwinnells. I'm a National Health Service Corps alumni.

The President: Are you? Good.

Dr. Dwinnells: Yes, and I'm still here. [Laughter]

The President: We've got somebody who works for you here. Compton. Compton, I'm glad you're here.

Compton Girdharry: Thank you, Mr. President.

The President: Comp's a doc. What kind of doc are you?

Dr. Girdharry: I'm an obstetrician/gynecologist, Mr. President.

The President: How long have you been practicing medicine?

Dr. Girdharry: I was practicing for 21 years in the city of Alliance.

The President: And?

Dr. Girdharry: And I was unfortunately forced out — to give up that practice because of the rising cost of malpractice insurance.

The President: Let me stop you there. You hear me talk about the need for medical liability reform. You need to do it Ohio. We need to do it in Washington. Listen, everybody ought to have their day in court, but a reasonable person must know that the system is totally out of whack — totally out of whack when you start driving people out of business, people who you need in your communities. Fortunately — I didn't mean to tell your story for you — [laughter] — fortunately, you found a home.

[Dr. Girdharry made further remarks.]

The President: Doc, I'm here thanking you, see? [Laughter] You're the guy who's helping make people's lives better, and I appreciate that.

One of the interesting things is — and so, you were worried about medical liability reform — I mean, liability insurance as a private doc. What about now when you work here?

Dr. Girdharry: That's the great thing about it. Being in sole practice, I actually was administrating my whole practice, and my practice was a major headache. So now, with the Federal tort, I don't have to worry about that.

The President: Yes, in other words, the Government helps with the...

Dr. Girdharry: That is correct.

The President: Isn't that right, Betty?

Dr. Duke: That's correct. That's correct. We have a program in which we provide insurance for the health providers who work in our system.

The President: See, I want people who might be listening out there, who are docs out there, who are wondering whether or not it makes sense to go and lend their services and their expertise and their compassion to a community health center to understand that it's a good place to show — to do your skill; it's a good place to come.

Are you still looking for docs?

Dr. Duke: We are always looking for docs, and we make it really good for them to come to work for us.

The President: You do? Good. Well, you've got living proof of it right here in Compton.

Anything else you want to say, Compton, now that you've got the floor? [Laughter]

Dr. Girdharry: I think also that the health clinic is a great idea because a lot of my patients, when I went out of business, are traveling right now to different cities. And the problem is that a lot of them don't seek the health care because they either can't afford it or they can't do the distance and they have young kids at home. So it is a major help for these people.

The President: Well, that's good. Thanks, appreciate you being here. Thanks for your compassion. I'm glad you're here.

Cindy.

Cynthia Sacco: Yes.

The President: Got the mic there.

Ms. Sacco: Got the mic.

The President: Which one is your grandson?

Ms. Sacco: That handsome gentleman right there.

The President: In the uniform? Thanks for your service, Sergeant, appreciate it. Your grandmother was bragging on you. That's right. [Laughter]

Cindy, thanks. Tell us your story.

[Ms. Sacco made brief remarks.]

The President: So the center is sitting there, you go in...

Ms. Sacco: No insurance.

The President: Right.

Ms. Sacco: Didn't matter.

The President: Right. That's what they're there for.

Ms. Sacco: Come on in.

The President: That's exactly why we need to expand them. And, obviously, we want people to have insurance, need to work — encourage people to have insurance. There's ways to do so in a cost-effective way as well through tax credits. Some don't have insurance. Some are too poor. Some are sick. Some have never been to a doctor in their life. These centers are available. You not only go to the center, you obviously find a specialist or they find a specialist for you.

Ms. Sacco: They found him for me.

The President: Right, yes.

Ms. Sacco: They took care of everything. They don't only take care of you physically, the staff, from the doctors on down, take care of your emotional needs, your well-being.

The President: Kind of like a hospice.

Ms. Sacco: It's wonderful. The staff there is unbelievable.

Dr. Dwinells: We look at the total well-being of the person, not just the disease but the overall total. It's a holistic approach.

The President: And so do you have — so you have volunteers there who help post-surgery...

Dr. Dwinells: Well, they're not volunteers. We pay them. [Laughter] We have some volunteers.

The President: Paid volunteers. [Laughter] That's good. [Laughter]

You got anything else you want to say? I'm proud of your sons. Her other son is a marine in Haiti, serving our country.

Ms. Sacco: Grandson. That's their mommy, right there.

The President: I mean, grandson. What am I saying? Where's Mom? Hey, Mom, how are you? Are you the — you've got the same pictures on; that's good. I'm proud of them; that's good. Yes, tell them thanks. Well, already told one thanks. Tell the other one thanks. You don't look old enough. [Laughter]

Ms. Sacco: Nor do I. [Laughter]

The President: I was just about to say that. [Laughter]

Ms. Sacco: I'm cuing you. [Laughter]

The President: I quit. [Laughter]

Joyce Phifer is with us as well. Joyce, thank you for coming — a mom of 11 children. Any of them here?

Ms. Phifer: Yes, my son is here.

The President: Your son is here?

Ms. Phifer: He too was in the service until he had to have a kidney transplant.

The President: Where is he?

Ms. Phifer: He's there.

The President: There he is. Thank you, sir. Welcome.

[Ms. Phifer made brief remarks.]

The President: This is a fantastic story. And the operation was in January?

Ms. Phifer: In January.

The President: This year?

Ms. Phifer: This year.

The President: You look great. [Laughter] That's right. I hope this helps you understand a key aspect of our strategy, to make sure that our health care system is available to citizens from all walks of life. And that's really important for our society, is to have a health care system that is — that meets the needs of every patient and every consumer.

And one way to do it is to expand — one part of the strategy is to expand community health centers. It's a commonsense approach to making sure that the health care system works. You see, it's a commonsense approach to making sure the system meets the needs without centralizing the decision making process in Washington, DC. I think this system is — this approach is a much better approach.

It's — obviously, there's more that needs to be done. I mentioned several key things: Expand health savings accounts; make sure the Medicare reform continues forth; medical liability reform; association health care plans; tax credits for the uninsured — but all of it fitting together makes sense so that the country can be proud of the health care system, so docs can feel comfortable practicing medicine in the healthcare system, so that we can remain the best place in the world to get health care.

And one of the challenges we face is to make sure the health care system responds to the needs of the citizens. Another challenge we face is to make sure we secure our country. And I can assure you, I will use every asset at my disposal to make sure the American homeland is safe and secure.

We have faced a lot of challenges in this Nation, but our spirit is strong, our sight and vision is clear. America understands where we need to go. We need to be compassionate at home, and we need to be firm and resolved abroad as we spread freedom and peace.

It is such an honor to be here. I want to thank the folks who were willing to share their stories with you all and with me. I hope you have a better understanding of a key component of how America's health care system will work better as we head out into the 21st century.

May God bless the citizens of this community, and may God continue to bless our country. Thank you for coming.

*Note: The President spoke at 1:40 p.m. In his remarks, he referred to Mayor George McKelvey of Youngstown, OH; and Mayor Toni E. Middleton of Alliance, OH.*