

# Programme OPERA – ENTRETIENS

Entretien – santé n°44

Pour citer cet entretien : Beaussier, Anne-Laure, Entretien santé n°44, Programme OPERA (*Operationalizing Programmatic Elite Research in America*), dirigé par W. Genieys (ANR-08-BLAN-0032) (*insérer hyperlien*).

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**Interviewer: So, I will ask you kind of questions about biographical--**

Responder: Okay.

**Yes, my first question is about your job now, your position now, sorry?**

Oh, okay.

**And how did you arrive there, and what does-- how?**

Let me go back. My name is Tim Westmoreland. I'm 55 years old. I'm originally from a rural part of the south in the mountains.

**Okay.**

Which is, mostly, very poor where I'm from, Appalachia.

**Okay.**

I-- my father was a minister, as in a Protestant minister--

**Okay.**

And for his work, he served a large rural area as a mental health counselor. He did not serve a church in his later life. He did not preach. He served as a mental health counselor for a government-funded mental health clinic, especially working with alcoholics and drug abusers.

**Okay.**

I-- when I went to college, I went to college at Duke in North Carolina, which is in the same state. I thought I wanted to be a psychologist so I could do the same kinds of things that my father did, but I did not want to be a Protestant minister.

But in college I decided that I-- to be a psychologist in America at the time, you had to do a lot of experimental work with rats and pigeons and babies and those kinds of things and I did not want to do the experimental work. So, I looked around to see what else I could do that was like that, but didn't require-- and so I decided to go to law school and concentrate on mental health and health law, which at that time was a very new field in America.

There were-- when people-- when I said I was interested in health law, people thought I was interested in malpractice. You know malpractice?

**Yes.**

And I'm not interested in malpractice. I am interested in getting health to people, not in-- so, at my law school, I went to law school at Yale, the law school said I could study health law by studying different places in different schools. So, I was in the medical school studying health law, in the divinity school studying medical ethics and religion, in the business school, health finance, but by the end of my law degree, which in America is a three-year degree, I knew a lot of things about health law and not much about being a lawyer.

So, I came to Washington, looking for a place in which I could work in the public interest on health law and at that time, Congressman Waxman -- have you seen his name?

**Yes, sure.**

Okay. Congressman Waxman had just become the Chairman of the Subcommittee on Health and the Environment in 1979. And as a new Chairman, he was able to hire a new staff and I had many people from-- that I knew from health law or other areas send him a letter-- sent him letters recommending me, and I got an interview and then I was offered a junior counsel job.

I did not understand at the time how rare, unusual, it is for someone straight out of school to get to work for a committee. That's very unusual. Usually you have to have much more experience and much more specialization, but they gave me the chance and I've been doing it ever since.

I still-- I worked for Waxman for 15 years at the same desk on public health policy and then when the Republicans took over the Congress-- you know, the staff people in the Congress work for the Chairman, for the most part. So, I think it was-- when the Republicans took over the Congress unexpectedly in 1994, I think 5,000 people lost their jobs on the same day because we were Democrats.

**Okay, 5,000.**

So, at that point, I came to Georgetown Law School and taught about legislation and about health law and then I-- in 1999, the Clinton Administration asked me if I would come to the executive branch and administer the Medicaid and Child Health programs for the nation.

So, it was-- I went from having one academic research assistant here to having a staff of 11,000 people.

**Okay, in the White House?**

No, not in the White House, in the Department of Health and Human Services.

**Okay.**

So--

**To work on the SCHIP program?**

I did work on SCHIP and mostly I worked on Medicaid.

**On Medicaid?**

Yes.

**Okay.**

But I was the Administrator of Medicaid and SCHIP.

**Yes, yes.**

And then when the Bush Administration came in, they fired me again for being a Democrat, and I came back to Georgetown Law School to teach and Mr. Waxman was, by then, the senior opposition Member of the Oversight Committee and they were doing many health issues and his staff director asked me if I would come back and work part time for the Oversight Committee, trying to help the-- now it is reversed. Now I am the old staff person and I am helping the young staff people again.

So, I am-- I would say I am like-- I have been like a graduate student advisor.

**Graduate student advisor.**

To the very young staff who have not worked on these issues before that I had worked on for, by then, 20 years, now 30 years.

And so, I asked Georgetown and they said that I could spend some time working for the Congress, as long as I didn't neglect my academic duties here and then the Democrats came back into the majority, so I was working with them on doing legislation, not just in opposition, and then Mr. Waxman became Chair of Energy and Commerce, and so I'm back to the same staff, in some ways, working on the same issues I used to work on, and as a-- but still only part time, sort of a graduate student advisor to the younger staff people there.

To say, we tried-- they bring me their projects of things that they think we should do and I'll say, we did that in 1987, it did not work, let's do another one. Or here are some people you can call and ask them. So, I'm just a graduate student advisor over there.

**You get their project and their idea and try to--**

And help them with it and then they go back and they do the real work.

**Okay.**

So, I am-- I'm 20 years older than anyone else on the staff, I think.

**Yes. This is something unusual, because I have seen some-- I have yellow books and people usually don't stay very long time in these positions.**

Yes. But Mr. Waxman is different. His staff people stay with him as long as we can. He is very smart. He cares. He studies quickly. He's very easy to work for. I've worked for him, in one way or another, for almost 30 years now. I have never heard him raise his voice or yell at a staff person, not once. I've had many congressmen and senators yell at me, but not the one that I worked for.

He's very quiet, a little bit shy, and he-- we all care about the same kinds of things. So, we're coming back together, in some ways, the staff, because many of the people who worked for him 15 years ago are coming back to work for him again. So, the staff director of the Committee is back and she is in charge of his legislation on health reform.

The senior person who worked on Medicaid is back and he's working on health reform. One of the senior people who worked on Medicare is back. One of the senior people who used to work on public health is coming back.

So, it's funny that on the Waxman staff there are a group of us who are in our 50s or older and then a large group of people in their 20s, late 20s, early 30s. So, there are two different bands of us, but we're working together on these things.

Only since he's gotten the Chairmanship of Energy and Commerce this year have other older people come back. When he was at Oversight, there were not very many of us of the older group.

So, that's how I-- and, I guess, one other thing. I largely have worked on public health issues, as opposed to insurance and health finance, but now I find myself working on both.

**Okay.**

When I started working on public health -- I came to Henry in 1979 -- I was working on issues of biomedical research and public health and infectious disease and then that meant I was the staff person for the Congress in 1981 when AIDS was first noted.

**Okay.**

And so I became the staff person on AIDS and HIV and did many pieces of legislation and many hearings on that topic.

**What was your role there?**

What was my role?

**Yes, what was your functions, what did you do?**

How do I describe? Do you have anything about congressional staff?

**Sure. I have read a couple of books, several books, on it.**

Committee staff -- well, there are three different-- four different types of congressional staff. Is this what you want to know?

**Yes, sure.**

There are people who work for the individual Member of Congress, personal staff, on issues. And those are called legislative assistants, LAs. They are very young. It is often their first job out of college, first or second job out of college.

They usually have no training in what they're working on. They will have a bachelor's degree in political science or in economics or something like that, but they won't know anything in particular about Medicare or Medicaid or defense or anything. They just said, here, go learn about this. And they advise the individual Member of Congress what he or she should vote on different issues and what issues they should take up.

Then, next group, there are committee staff. Committee staff work for either the Chairman of the committee or the senior opposition leader, which we call Ranking Minority Member.

**Yes.**

And those people, which is what I have always done, those people become a little more specialized, so, instead of doing all of health, I would do public health. That's still a very large field, but it's somewhat narrower than what a legislative assistant's would be.

And committee staff people write legislation. They organize congressional hearings. They even write the statements, the speeches, that the Members of Congress will give at those hearings. They write the questions that will be asked of the witnesses at those hearings. They write the amendments to legislation as it goes back and forth and then they write the committee reports on what the legislation is about.

Committee staff are all, in some fashion, political appointees. We are not civil servants. So, we can be hired and fired immediately.

**That's very strange, because I thought that committee staff worked for every Member.**

In theory, but the Chairman hires and fires, and the Ranking Minority hires and fires, and any member of the party on the committee can ask the committee staff to do something for them, but their real boss, the person who tells them what to do and who organizes is the Chairman or the senior opposition.

It is unusual for members of the committee to ask for very much special work from the committee staff. It is almost always working for the Chairman or for the Ranking Minority Member.

**Okay.**

I mean, clearly, if-- the Chairman wants to keep everyone happy, so if a member of the committee really wants a product or a piece of legislation, then the chairman will direct the staff people to help him or her, but it's unusual for them to do it. They usually are trying to work with the Chairman directly and say, I would like an amendment or something like that.

**Okay.**

In addition to that, there are another group of staff called leadership staff who work for the leaders of the House or the leaders of the Senate. They-- their jobs are usually not about substance, but about politics, trying to force compromises so that they can move on to the next bill, the next piece of legislation. It is less about -- this is not quite true, but almost true -- they almost don't care what the compromise is, as long as it's made and they can move on.

**Okay.**

Their job is watching the time and trying to get more things done.

**Okay.**

They are also-- and they deal with Members of Congress directly, not just with other staff people, but oftentimes with Members directly and say, I need to talk to you. Even though they're not Members of Congress themselves, they are very powerful people, who can speak to the Members directly and say, please do this, or the Speaker of the House or the Majority Leader of the Senate wants you to do this. So, the Members will respond.

**Is it, yes, more important today than before?**

It is always important.

**Yes?**

When Mr. Gingrich--

**Yes,**

--a Republican leader was in charge, his leadership staff was very, very strong.

**Okay.**

It is very important now because we need good working relationships with the White House for the Democrats to work with Mr. Obama and we need the senior leadership staff to be making political compromise decisions that way, too. But it is-- these jobs are-- unless it's a very weak leader. And Speaker Foley -- I doubt--

**Yes.**

You have?

**Yes, sure.**

He was a very weak leader and his staff could not force Chairmen to do things, and-- but Speaker Gingrich, Speaker Hastert, and Speaker Pelosi, are all very strong leaders and their staff is like their lieutenants.

(Signal tone) I'm getting--

And then finally-- oh, and the other thing that leadership staff are responsible for, and that's part of being responsible for politics, is schedule and they spend lots of their time trying to make things go faster.

And then the fourth type of staff are non-partisan staff, people who are not political, but are agents of both sides in the Congress. They are the parliamentarians who advise how the rules of the House or the Senate allow things to go forward and those rules are very, very, very important, because sometimes you can stop the whole Congress from debating something.

There are legislative counsel. They are people who actually take the idea from the committee staff or the legislative assistants and turn it into legislative language to be debated and make it fit into existing laws and use words that will be familiar to the courts and to the agencies. So, they are the professional draftsmen.

**Okay, yes.**

And then there's the Budget Office, which is increasingly important.

**The--**

Congressional Budget--

**--of CBO, yes. Okay, they're--**

They're not partisan staff and they are part of the Congress, yes.

**Okay.**

These are things I read about the budget.

**Okay, thank you very much.**

You're welcome.

The thing that I think is most important to understand about the Congress, I have three rules.

Rule one is everyone wants to do the right thing and at a time when everyone's cynical about the Congress, that is sometimes hard to believe, but I do believe it. I believe Republican, Democrat, conservative, liberal, they are there because they think they want to do the right thing.

But rule two is, in our Congress, nobody knows what the right thing is. People-- politicians arrive in Washington, often with very little education or experience in what they are then asked to work on.

So, the funny stories I tell are not so long ago, the chairman of the subcommittee in the House that did all the legislation about our stock exchange, our bourse, all that legislation, his job before he came to the Congress was selling used cars.

**Okay. That's very different.**

Very different and he knew nothing about the stock exchange is very complicated. Our banking system is very complicated. But he knew nothing and the person who was, 20 years ago, no, 10, 15 years ago, chair of our committee that dealt with health issues, his job before coming to Washington was as a director of funerals.

**Okay.**

So, we do not have philosopher kings. We do not have aristocrats who have done or mandarin bureaucrats who have done these things for generations. We don't have experts. People are not elected here because of their expertise. They are elected because they have some claim on representation.

And that leads, then, to the third rule, the most important rule, which is, the most valuable thing in Congress is not money and it's not staff and it's not power and it's not even position, it is time. No one has the time to learn-- to do what their job is, no one.

**Okay.**

So, that everyone's trying to do the right thing and they have to know the right thing within 15 minutes and they have to know the right thing within 15 minutes about international trade in Guinea-Bissau. I mean, just things they have no way of knowing.

And so all of Washington, all of the Congress, at least, is a mad race to learn things, to try to get things done, to persuade other people. It's just on one has time.

And so, starting back again, that legislative assistant arrives here with a bachelor's in political science and is then told to become an expert on foreign policy. And so he or she will go from hearing to hearing to hearing, listening to people, and then they'll go to briefings, and then

they'll read as much as they can, but usually they can't read anything that's even this long. They just read a two-page paper. They can't even read that.

**Okay, just very brief.**

These things. That will be what they read. A lobbyist will hand that to them and they'll study it and say, that's as much as I can do today, because my boss needs to vote in 15 minutes.

**Sure. So, it's lobbying.**

Lobbying is part of it. The committee staff, they have a little more time and a little more expertise, but for me, for instance, when I was there full time, I was the staff person on public health. Well, that sounds like a narrow issue, but that meant the National Institutes of Health and Biomedical Research, the Centers for Disease Control, and international-- domestic and international infectious disease, the Food and Drug Administration, and the regulation of the pharmaceuticals, the Health Resources and Services Administration and all about running domestic poverty health programs and the Substance Abuse and Mental Health Administration and all our work.

So, I was one person and I was supposed to learn all those things and have opinions and try to keep the policy moving and I was the person who was, in many ways, in charge of it for the House. It's not possible. You can't learn all those things. Even if you're Albert Schweitzer, even if you're, you know, Jonas Salk, you sit down there, you can't do it.

And you were always looking over your shoulder wondering did I do something really wrong? Did I make a big mistake? You know, and in the middle of the AIDS epidemic for myself, no one knew what to do at that point. Everyone was-- no one knew-- at the beginning, we didn't even know if it was a virus.

And so what do we do? How do we quell-- stop public panic? How do we advance research? And the Reagan Administration at the time was denying there was a problem.

So-- and then the political staff, the leadership staff, they don't have time, because-- I should back up. You know our Congresses meet for two years at a time?

**Yes, sure.**

Just checking what you know. In the average two-year Congress, there are 5,000 bills introduced.

**Yes.**

Of those 5,000 bills, on average, over two years, 1,000 of them will have anything happen to them at all. The other 4,000 are just printed and put on a shelf or in a file cabinet. But 1,000 will have something done to them.

(signal tone)

Excuse me.

(Phone conversation not transcribed)

It is the end of the academic term.

**Okay.**

And so tonight is my last class.

**So, you may have to prepare.**

Well, I'm prepared; I'm okay. But students are getting anxious for the exam.

**When do they pass their exam here?**

The exam is-- starts next week.

**Okay, sure.**

So, they're anxious. That's who that was. A student wants to talk about an exam.

**I understand. I've been there.**

So, the leadership staff are trying-- oh, 5,000 bills, 1,000 anything happens.

Of those 1,000, that "anything happens" means it may be only that they were mentioned aloud in a congressional hearing. So, if they're mentioned, you just check off, something happened. They were dealt with.

**Okay.**

Of those 1,000 bills that anything happens, half of those get turned into a law, pass House, Senate, so 500.

**Five hundred.**

But, of those 500, half of those are what we call commemoratives.

**Commemoratives?**

So, naming a building after Tim Westmoreland.

**Okay.**

Or declaring this to be National Health Insurance Week or something like that, something that will not have significant legal consequences.

So, we're from 5,000 bills to 1,000 references to 500 laws to 250 laws that mean anything. And every-- and the everyone who wants to do the right thing is pushing and shoving to try to

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get everybody to learn enough about their bill to be confident that they can vote for it. And then the leadership staff is trying to keep the train running so that this bill can move forward and this bill.

So, that if a bill turns out to be very controversial, the leadership staff will pull it out of the way and move on to things that are less controversial until this one can get compromised.

**Okay.**

So, it's all about time. The Congress doesn't make sense if you don't know that everyone's rushing.

**Yes, I'm sure.**

How did you deal with that, did you deal with those various issues during the time that you were in charge?

What do I mean, how did I deal with them?

**Yes, because you had-- you're telling me that you had a lot of issues you were responsible for, but no time, but where did you get--**

Oh, where did I get the information?

**--(inaudible)? Yes.**

Over time, you develop a cadre of people you can call or email or depend on for expertise.

**Okay.**

They may be and, oftentimes it was, within the executive branch, within the Department of Health and Human Services. I would get to know some public health or biomedical research people whom I trusted and who every time I asked a question would give me an answer and then, if it turned out to be right, then I could trust them again.

And there's-- I can offer no rewards to people, except-- and they can offer me nothing, except our word, that our word is good. And so if someone, we say, burns you, if someone lies to you, or misleads you, someone burns you, you don't go back to them again. You find a new source.

So, in the executive branch, then in universities.

**Yes.**

Where people are experts and say, maybe someone in the executive branch would recommend, you should talk to this person at this university, especially in public health issues. Or in state government, where I would be referred to people there.

And then it is very-- it is genuinely true, very important, that people depend on lobbyists.

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**Okay.**

There are good lobbyists and bad lobbyists. Good lobbyists will answer your questions and then try to persuade you. Bad lobbyists will try to persuade you without answering your questions.

But inasmuch as everyone is so rushed, in such a hurry, you have to depend on people coming to you with information. You do not have time to sit down and read an article, much less read a book. My joke was that at a certain point, they hire you for your reflexes, not for your thoughts. Does that make sense?

**Um-hmm (affirmative), sure.**

That you would tell me an issue and I'd say, well, my intuition, my reflex, is to do this. And then if I have time, I will ask someone, speak to someone, or read something to see if my intuition is the right answer. But at a certain level of seniority on a committee staff, and certainly in leadership staff, you don't have time to do the research yourself.

Now, I think that system of lobbyists and outsiders works when they're evenly balanced opponents, if it's British Petroleum versus Exxon, or something like that. Because if Exxon lies to you, then British Petroleum is going to show them, because they all have lots and lots and lots of lobbyists.

**So, they need to have a good reputation to--**

Do you need some water?

**No, it's okay. I have a catch in my--**

But I can get you some water, if you'd like.

**It's okay, thank you.**

But the two balance each out-- each other out. The problem comes when there is one big side and no one over here on the other side to oppose. So, pharmaceutical companies versus patients and there's no one over here lobbying for the patients.

Or pharmaceutical companies versus how much a price is. There's no one over here lobbying about their prices.

Or chemical companies and the environment and there are only a few people working on the environment, but there are big company chemicals. That's when the system of everyone depending on outside information doesn't work so well.

So, if it's a balanced group, one insurance company against another, but if it's an unbalanced group, if it's the public health versus chemical companies, it doesn't work because you don't get as much information from public health groups as you do from lobbyists. There are thousands of lobbyists for chemical companies and pharmaceutical companies.

**Okay. Working.**

It is genuinely true that there are-- we have to-- lobbyists have to register in Washington. There are more registered lobbyists for pharmaceutical companies than there are Members of Congress.

**Okay.**

So, it's more than one per Member out there.

**And they work every day for-- trying to influence this Member.**

Yeah, they may or they may decide we'll work-- we'll spend all our day-- they don't always get assigned one person to one Member, but, in effect, there's a ratio high enough that they could. In fact, most of them spend their time trying to influence the health committees or the patent committees and don't spend so much time trying to influence the agriculture committees.

(signal tone)

Excuse me.

(Phone conversation not transcribed)

**Yes. You were just-- you just told me about there was a problem with experts, depending on outside information, that congressmen or women are pretty senior, so who have their-- a lot of influence or stay in the field for a long time--**

They become relatively--

**Yes.**

--comparatively expert.

**Relatively.**

Relatively. I mean, none of them is going to be an expert as an academic or a bureaucrat who's in the field for a long time. But, I mean, that is sort of what committees are for in the Congress is the committees become-- the members of the committee and, especially, the long-standing members of the committee, become relative experts and they can advise their colleagues.

So, someone who sits on the Defense Committee becomes a little more expert about the war and then they advise their colleagues. And someone who sits on the Agriculture Committee, the same. Somebody who sits on the Health Committee, the same.

And they get a little more expert because they go-- they go to hearings, because they take part in debates, and also because they get lobbied.

**Okay. And Congressman Waxman--**

Yes.

**Waxman, sorry, for instance. He is there in this issue for a very long time.**

Thirty-five years, yes.

**Yes. So, he must have a very clear vision of the reform he wanted and also you work for him and your colleagues work for him for a long time, so probably you just push items?**

Yes, but it's not quite that easy. I have a very clear idea--

**Oh, thank you very much.**

This woman is on the faculty here and this woman works for Congressman Waxman. I have a very clear idea of what I would do for health reform if I could start over now and just clean slate begin from the beginning. But each time you approach it, you know, the Indian saying you cannot step in the same river twice?

**No, I didn't know that.**

I think it's about the Ganges River in India. But the river and everything about it will have changed.

**Oh, I see. Yes.**

And so, each time we come back to try to debate health reform, something has changed about it from the last time.

And so, while I have an ideal of where I'd like to end up, perhaps, or Mr. Waxman might have an ideal, my first ideal is something that can be enacted, that can be passed. I am not and he is not so set on a theory that we give up the opportunities that might be there to where we could get 51 out of 100 votes.

Henry has many times said to me, when I was saying, this is not good enough, we should do something more, take the opportunities that are presented to you. Take what you can do today and then be ready to come-- and that is something that's quite different about Henry than many Members of Congress is that he knows he will be there tomorrow, working on these same issues.

Many Members of Congress come and go.

**Okay.**

Many staff people come and go. But, you know, if you can't get 100% of what you want today, settle for 51% and then come back and start over again tomorrow.

So, in response to your question, I don't want it to seem like from 1979 until now we've always had the same ideal of what we thought we would-- what law we would pass today. We can't, because first there was the Reagan Administration. Then there was the AIDS epidemic. Now there's the deficit. Everything changes all around it as to whether you think you can get 51 out of 100 votes.

**Yes.**

Make sense?

**Yeah, sure.**

So, take the opportunities that are presented to you, even if it might be a lot less than you wanted.

**Are you speaking-- are you referring to the Medicare Modernization Act, for instance?**

For instance. But it's better to have prescription drug coverage, even if it's done through this strange way, than to have no prescription drug coverage at all. Yes.

Or-- our Medicaid program, it's limited to very, very, very poor people and only some of them. You have to be a pregnant woman with a child or you have to be totally disabled. Well, it doesn't actually make any sense to say only people who are disabled can get in. It should be everybody who's very poor, like a French system. But rather than saying, no, I don't want to help even the disabled people, you can get agreement about that, so let's start there and keep going.

There is-- there have been recently, because of Henry's new position, there have recently been many articles written him as a person. And there is a quotation from one of the Members of Congress describing Mr. Waxman, saying Henry Waxman is not a rock, he's a river. He will wear you down. Even though he doesn't smash you to start with, he will wear you down over time.

**Okay.**

And that is, I think, one of the things that is happening with the way that Henry and his old staff have been approaching this.

**Okay. You are trying to reach some objective, but not always on the same way.**

Right.

**Like improving the quality of care.**

Yes.

**But, depending on the politics.**

The politics and the economy.

**Okay.**

It's always a slow process.

**Okay, I see. And-- yes. What does change to have this staff, people-- senior people staff who stay a long time in this committee? What is the difference-- does it make a difference?**

Yes, it makes a huge difference because new people will not know who the people are who are lying to them. I mean, if you stay only two or three years, then there really is no enforcement against a lobbyist who burns you. If you stay five years, that lobbyist will need to talk to you again and then you can enforce the rule, you burned me, I'm not going to talk to you again. If you stay three years, you may not need-- he may not need to talk to you again.

**Okay.**

And I have a-- my Republican counterpart, the person who took my job when the Congress flipped is a very wealthy lobbyist now and I have described what I think is an anthropological, sociological theory to him, which is, especially among the Waxman staff, but I think, in general, more among the Democratic staff, if a Waxman staff person were to quit working for the Congress and go work as a lobbyist -- and I hope you know you can make much, much, much, much, much more money as a lobbyist.

**Yes. And a lot of people do that.**

But if a Waxman staff person did, there would be almost a taboo, almost a tribal shunning.

**Okay.**

You know the word "shunning?"

**I don't.**

Shun, turning your head away, not seeing. I won't talk to you any more kind of thing.

**Okay.**

And in anthropology, the tribes will shun someone who has committed a crime or a sin or something.

**Yes, I see.**

So, if someone went from the Waxman staff to become an expensive lobbyist, there would be some shunning and so, in some ways, the whole society is enforcing this norm, this rule. Whereas, in Republican circles, it's considered a normal part of a career to go from government into the private sector, back into the government, back into the private sector and that there is no tribal taboo.

And my friend, who's a Republican confirms this and says, yes, everyone-- no one thinks anything of it. That's what you do now and then you go there. It's not a good and evil kind of thing for him in the same way that it's a sort of good and evil kind of thing for us.

**For us, you mean Democrats or just the--**

Especially the Waxman staff, but Democrats, too. So, that instead-- when I lose my job with the Congress, because of the Republicans, I don't go downtown and become a lobbyist, I become a professor.

**Yes.**

And when another friend loses her job, she goes to work for an NGO. And it's not the same thing as becoming a for-profit lobbyist for the pharmaceutical industry, because that's who can afford to hire you.

**Sure.**

So, it's an odd thing. So, it varies who stays and who goes, in some ways, around that.

Then there are also problems because government work doesn't pay well enough for people who have several children to send them to private university.

**Okay.**

So, if-- I have no children, but if I had three children I wanted to send to Georgetown and I was working for the Congress, I couldn't afford to do so. It's not enough money.

**Oh, really?**

No. Georgetown is now \$45,000 a year, so if I had three children, that would be \$120,000 a year. That's more than the salaries usually are over there, much less how will you pay for your home and your food and everything else.

So, there are financial reasons that some people end up leaving Capitol Hill, as well. And I am in no position to criticize them for doing so. I mean, they have family obligations, too.

**I see. I don't want to (inaudible) you. You don't have so much time, but I just want to--**  
to ask two last questions.

Of course.

**One is, can you describe one reform in which you took part that was very important for you and your role on it?**

Yes.

**And the last question is, maybe, you have contact suggestions for me? That's it.**

Okay. There is a simple one, I think, rather than get big, complicated ones, I'd rather talk about a simple example.

In this country, we have Medicaid for the poor. We have private health insurance for people who are employed and we have some clinics for people who have no insurance.

But it is clear that we need to, as a society, make sure that all of the children are immunized. And so, when the Clinton Administration began, one of the things that Mrs. Clinton wanted to do was make immunizations free for everyone, regardless of how poor or how rich they were-

**Okay.**

And have the federal government pay for that. It's called Vaccines for Children is the program now.

**Okay.**

When the Administration started, they asked the Congress to pass legislation to do that, because they can't do it by themselves. They have to have the Congress pass the law and I was the-- one of two senior staff people on health issues at that time and met many times with the Clinton Administration Department of Health in which I argued back and forth with them, you have not shown me that we need this bill.

We have very bad immunization rates among some children in this country, but no evidence that it's related to cost, nothing. In fact, some of the worst immunization rates are among children on Medicaid who have full insurance.

**Okay.**

So, while it's a good instinct to say we should try to get everyone immunized, I'm not sure this is the right policy response. I want to get everyone immunized, too. I think it may be more about educating parents and making physicians and nurses available during non-working hours, because we have so many working mothers and working parents who can't get their children to a regular doctor's office during the day. I think it may be more about education and the convenience of the clinic than it is about paying for the vaccine.

The Clinton Administration wanted to start a fight with the pharmaceutical companies. They wanted to be seen go like this and say those are bad companies that are charging us too much for our children and they wanted that fight. The access to clinics and access to education wouldn't have prompted the fight with the-- wouldn't have given us the fight.

So, that was part of it. But all of us, as professional staff people on Capitol Hill, had said, you have no data to show us that this is the problem, this causes the problem. But the Administration said, yes, they really, really, really wanted to do this and it was a new administration. Mr. Waxman said, I feel like I need to do what they ask me as a new administration, so I'll start there.

And so we-- and we drafted the legislation to provide free vaccine to everyone and took it to the committee and the committee said, why are we giving free vaccine to millionaires? Why are we spending taxpayer money to give free vaccine to the rich? And the Democrats said that and then the Republicans said that and then, also, why are you socializing our vaccine industry?

And so we lost the Democrats on one side, who were saying, why are we spending taxpayer money for the rich. We lost the Republicans because the pharmaceutical industry hated it.

**Okay.**

And we ended up with a program that was only free vaccine for the lower middle class and the poor. Well, that's a good thing that we should have free vaccine for the lower middle class and the poor and one of the things that I worked very hard on is it also is free vaccine for illegal aliens, undocumented people, which is a-- we provide no health care for our undocumented people, nothing.

But now their children can get free vaccine. So, we got free vaccine for the poor, for the middle income, for undocumented people. We lost the parts for people who are rich. We lost the big fight with the pharmaceutical industry. But we got a little piece of Vaccines for Children and it is now a very popular program, because it gives vaccines both to the public clinics and also to private doctor's offices to give them free vaccine. How's that?

**Yes.**

And my role in this, I guess that's why you were asking, was, first, arguing with the Clinton Administration that this was not the right policy, then, presenting it to the committee. I drafted, I explained it to the committee as this is the right policy, because we are now supporting the Clinton Administration, and then, having to compromise when the votes aren't there, when we were losing.

**Okay. Was the final vote on this the solution you preferred, you liked, or--?**

I still think that the data aren't there that it has anything to do with cost. I mean, some of the worst insurance-- and worst immunization rates in the country are among people who have Medicaid for the poor and have no cost barrier at all.

**I see.**

And we have-- only at the end of the Clinton Administration did we start into the parent education and prompting and public health activities and then, this is how small a circle we all live in, by then, I was the head of the Medicaid program for poor people.

**Okay.**

And so I directed Medicaid money from inside the Clinton Administration to be used to have a series of reminder cards and registries for parents to come in and have their children-- because we have birth records in the Medicaid program, because we pay for the baby to be born. We pay for the pregnancy services. So, we'll have the birth record.

So, we can just start a computer system that mails the mother a post card every time she's supposed to have her child immunized. That has worked.

**Okay, so it works from the administrative side and not from the congressional-- and you passed this measure as a regulatory measure.**

Well, it was more of a grant measure, to encourage. It wasn't required. It's encouragement. States can get the money to send these reminders, but they don't have to.

**I see. Okay.**

Okay?

**Thank you. Yeah, last question, maybe your suggestion--**

Oh, contacts. Yes.

**--of people I can meet?**

Well, I want-- I'll take you down and introduce you to a graduate law fellow here who is studying healthcare reform and she may have some ideas of academic things you can think about.

I think you should try to speak to people at the Kaiser Family Foundation.

**Okay.**

Have you seen their website?

**Yes. I haven't contacted anybody there.**

The Kaiser Family Foundation. The telephone number is 202-347-5270.

**347-5270.**

And the person I would suggest you start with is a man named David Rousseau.

**David Russo. R-u-s-s-o?**

Just like the philosopher.

**Okay.**

And if you-- if you can, and I don't know if she'll have time but you can try, at the Center for American Progress there is a wonderful woman who has been on all sides of health reform named Judy Feder, F-e-d-e-r.

**Oh, yes. I know-- I have met her, last year, for 20 minutes interview in the morning, because she was running for Congress.**

Right, yes. Well, she lost. She did not win.

**Yes.**

But she's very good.

**Yes. I will see her. Yeah.**

And then, at the Georgetown Public Policy Institute, a woman named Karen Pollitz, P-o-l-l-i-t-z, and that number is 68-- 202-687-0880.

**Okay. Thank you and she's specialized in public health?**

She's specialized in insurance law, but she has worked for both the Congress and for the administration and now she is an academic, also. As I think of more people, I will email you with some other suggestions.

**Okay. Thank you very much. And, yes, thank you for all the-- do you think I can quote this paper?**

Oh, yes. It's-- yes.

**It has been published?**

Yes, it's been published in a law review.

**Okay, thank you.**