

The original documents are located in Box D34, folder “National Leadership Conference, American Medical Association, Chicago, IL, February 16, 1973” of the Ford Congressional Papers: Press Secretary and Speech File at the Gerald R. Ford Presidential Library.

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OK Ford please have Dr. Hilder for copywriting
NATIONAL LEADERSHIP CONFERENCE OF THE

AMERICAN MEDICAL ASSOCIATION, CHICAGO,
ILLINOIS, 7:15 P.M. FRIDAY, FEBRUARY 16,
1973.

my impressions of 1972
Dems - disappointed - {Pres. Senate House} ① Castro / Lipman
6.D.P. -

THE NOVEMBER ELECTIONS GAVE US
13 MORE REPUBLICAN CONGRESSMEN. IF THE
RHETORIC OF THE LAST FEW WEEKS IS ANY
INDICATION OF WHAT WE ARE UP AGAINST THIS
YEAR, WE ARE GOING TO NEED EVERY ONE OF
THOSE NEW REPUBLICANS.

IN ALL, THERE ARE 69 NEW MEMBERS
OF THE HOUSE, 43 OF THEM REPUBLICANS.
MANY OF THESE NEW MEMBERS REPLACED OLDER
MEMBERS WHO RETIRED, SO OUR NET GAIN WAS
FAIRLY SMALL, COMPARED TO THE TOTAL
NUMBER OF NEW GOP MEMBERS IN THE HOUSE.

BRADDO/Beard.
5070
6 yrs.
NEVERTHELESS, THE NEW MEMBERS
FIT A MOLD WHICH I FIRST SAW EMERGE FROM
THE 1966 ELECTIONS. THEY ARE --

FOR THE MOST PART -- YOUNGER, MORE
AGGRESSIVE, PEOPLE-ORIENTED MEMBERS OF
CONGRESS. THEY WANT TO MOVE ON THE
PROBLEMS OF THE DAY. THEY WANT CONGRESS
TO BE RESPONSIVE.

THESE NEW MEMBERS OF CONGRESS¹
~~ARE NOT NECESSARILY MORE LIBERAL. THEY~~
DO NOT BELIEVE THAT THE FEDERAL DOLLAR IS
THE ANSWER TO ALL PROBLEMS. THEY HAVE
HEARD THE OLD LINE THAT THE FIRST THING
WASHINGTON DOES WHEN A PROBLEM COMES UP
IS THROW MONEY AT IT AND HOPE IT WILL GO
AWAY.

~~THEY ARE NOT LIBERAL, BUT~~ THEY
ARE CONCERNED. THEY ARE LOOKING FOR
ANSWERS. IF THE FEDERAL GOVERNMENT HAS AN
APPROPRIATE ROLE TO PLAY IN PROVIDING
THESE ANSWERS, THEY WILL NOT HESITATE
TO SUPPORT NEW FEDERAL LEGISLATION.

*particularly
Homer*

I'm proud to say
PARTLY DUE TO THESE NEW, YOUNG
GOP MEMBERS, REPUBLICANS IN THE HOUSE HAVE
FORGED AHEAD WITH REFORMS WHICH THE
DEMOCRATS ARE NOW ADOPTING. WE HAVE
SHARED OUR LEADERSHIP AMONG AS MANY PEOPLE
AS POSSIBLE, PROVIDED MORE DEMOCRACY IN
SELECTING OUR LEADERSHIP AND GENERALLY
MOVED TO MAKE CONGRESS MORE RESPONSIVE.

WE NOW SEE ON THE MAJORITY SIDE
OF THE AISLE WHAT APPEARS TO BE MORE
AGGRESSIVE LEADERSHIP. MY GOOD FRIEND,
SPEAKER ALBERT, HAS TAKEN STRONG STANDS
ON SEVERAL ISSUES PERTAINING TO THE
ORGANIZATION OF THE CONGRESS WHICH HE
PREVIOUSLY DID NOT GET INVOLVED IN. THE
DEMOCRATIC LEADERS IN THE HOUSE AND SENATE
SHOW SIGNS OF MORE COORDINATION THAN
THERE HAS BEEN IN THE PAST, AND AS A

RESULT, I EXPECT THAT WE WILL SEE CLASHES BETWEEN THE DEMOCRATIC LEADERSHIP IN CONGRESS AND THE NIXON ADMINISTRATION CONTINUE AND ACCELERATE. THIS IS ESPECIALLY TRUE IN THE AREA OF APPROPRIATIONS AND SPENDING. THIS WILL BE A GOOD DEBATE, A HEALTHY DEBATE. CONGRESS MUST JEALOUSLY GUARD ITS ROLE AS THE REPRESENTATIVE OF THE PEOPLE.

NEVERTHELESS, OUR FEDERAL GOVERNMENT NEEDS TWO THINGS THAT THE NIXON ADMINISTRATION IS TRYING TO DELIVER.

FIRST, IT NEEDS FISCAL RESTRAINT IN THE FACE OF LARGE DEFICITS SEVERAL YEARS IN A ROW.

SECONDLY, IT NEEDS REORGANIZATION OF THE BUREAUCRACY.

PRESIDENT NIXON IS MOVING IN BOTH OF THESE DIRECTIONS, AND I THINK HE

WILL FIND GENERAL SUPPORT IN THE CONGRESS
EVEN THOUGH THERE WILL BE A LOT OF
RHETORIC FROM SOME PEOPLE ABOUT THE BAD
TREATMENT BEING GIVEN TO PROGRAMS
"FOR PEOPLE" AND THE LACK OF "HEART" ON
THE PART OF THE NIXON ADMINISTRATION.
THIS IS JUST CAMPAIGN ORATORY IN THE
OFF-YEAR.

*Pres. will
win in
F186A2*

PRESIDENT NIXON ALREADY HAS
ACHIEVED AN IMPRESSIVE RECORD IN REFORMING
GOVERNMENT. THINK BACK OVER HIS FIRST
FOUR YEARS. THERE HAS ALREADY BEEN REFORM
OF THE DRAFT AND THE POSTAL SERVICE, AND
REVENUE SHARING IS REFORMING THE FEDERAL
GRANT PROGRAMS. IT WAS ONE OF THE
DISAPPOINTMENTS OF HIS FIRST TERM THAT THE
CONGRESS DID NOT REFORM THE WELFARE
SYSTEM, ALTHOUGH THE HOUSE PASSED IT
TWICE.

I THINK PRESIDENT NIXON IS DOING WHAT NEEDS TO BE DONE IN 1973. HE IS TAKING A HARD LOOK AT PROGRAMS THAT HAVE BEEN WITH US FOR YEARS, EVEN FOR DECADES, AND ASKING THE TOUGH QUESTIONS ABOUT EACH. "IS IT WORTH IT? HAS IT PRODUCED?"

I KNOW THAT YOU ARE INTERESTED IN HEALTH LEGISLATION AS WELL AS GENERAL LEGISLATION. I WOULD SAY THAT NATIONAL HEALTH INSURANCE HAS A 50-50 CHANCE OF BEING PASSED BY THIS 93RD CONGRESS. CERTAINLY THE COST OF SOME OF THE NATIONAL HEALTH PROPOSALS INDICATE THEY HAVE A ROUGH WAY TO GO. SENATOR KENNEDY'S BILL WOULD COST \$80 OR \$100 BILLION, DEPENDING ON WHOSE FIGURES YOU READ. I DON'T SEE HOW THE AMERICAN TAXPAYER WOULD STAND FOR THIS.

ON THE OTHER HAND, THERE ARE OTHER PROPOSALS WHICH ARE MOST MODEST IN COST, YET WOULD GET TO THE HEART OF THE PROBLEM. TO ME THE MOST IMPORTANT THING IS TO GIVE PROTECTION TO EVERYONE AGAINST THE COST OF A SERIOUS ILLNESS OR ACCIDENT. YOU ALL KNOW HOW HIGH HOSPITAL COSTS ARE. YOU HAVE ALL PROBABLY TREATED PATIENTS WHOSE BILLS HAVE RUN INTO TENS OF THOUSANDS OF DOLLARS. IT IS VITAL THAT EVERYONE HAVE SUFFICIENT HEALTH INSURANCE TO COVER THESE CATASTROPHIES.

UNFORTUNATELY, NOT ALL OF US DO. THEREFORE, CONGRESS IS IN A MOOD TO PASS NATIONAL HEALTH INSURANCE OR SOME HEALTH PROGRAM WHICH PROVIDES PROTECTION FOR EVERYONE AGAINST MEDICAL BANKRUPTCY. I DON'T CONSIDER THIS A LIBERAL OR A

CONSERVATIVE PIECE OF LEGISLATION. I THINK IT WOULD FIT THE LINCOLN PHILOSOPHY OF GOVERNMENT. AS LINCOLN SAID OF GOVERNMENT, ITS FUNCTION IS TO DO FOR THE PEOPLE WHAT THEY CANNOT DO SO WELL FOR THEMSELVES.

I NOTE THAT AMA's HEALTH INSURANCE BILL, THE MEDICREDIT BILL, DOES PROVIDE THIS PROTECTION AGAINST CATASTROPHIES. I AM SURE THAT IS ONE REASON WHY THE AMA BILL ATTRACTED MORE COSPONSORS THAN ANY OF THE OTHER HEALTH INSURANCE BILLS IN THE LAST CONGRESS -- SOME 174 COSPONSORS. INCIDENTALLY, I THINK IT IS PARTIALLY BECAUSE OF AMA's MEDICREDIT BILL AND THE SUPPORT IT RECEIVED THAT SENATOR KENNEDY's BILL DID NOT GO FARTHER AND FASTER THAN IT DID IN THE LAST CONGRESS.

THERE ARE PROBLEMS, AND WE CANNOT BURY OUR HEADS IN THE SAND.

ALL OF US MUST OFFER CONSTRUCTIVE SOLUTIONS TO THESE PROBLEMS OR SOMEONE ELSE WILL. OTHER SOLUTIONS MAY BE UNACCEPTABLE, BUT IF THERE ARE NO ALTERNATIVES AVAILABLE, WE MIGHT BE STUCK WITH THE OTHER FELLOW'S ANSWERS.

OTHER SPEAKERS WILL PROBABLY GIVE YOU MORE OF THE SCHEDULE OF NATIONAL HEALTH INSURANCE. I KNOW THE WAYS AND MEANS COMMITTEE IS GOING TO BE TIED UP FOR SOME TIME IN TAX REFORM LEGISLATION, SO NATIONAL HEALTH INSURANCE WILL HAVE TO WAIT AT LEAST UNTIL THAT IS FINISHED.

THERE IS ANOTHER PIECE OF LEGISLATION THAT IS NOT GOING TO WAIT -- THE HEALTH MAINTENANCE ORGANIZATION LEGISLATION. NOW I AM NATURALLY PARTIAL TO THE HOUSE OF REPRESENTATIVES SINCE

I HAVE SERVED THERE 24 YEARS, BUT EVEN SENATORS HAVE SPOKEN OUT RECENTLY TO DEPLORE THE LACK OF TIME THEY HAVE TO GIVE REAL CONSIDERATION TO LEGISLATION AND THE IMPACT OF WHAT THEY PASS. IN THE HOUSE, ON THE OTHER HAND, A MAN SERVES ON ONLY ONE MAJOR COMMITTEE. LEGISLATION IS GIVEN A GOOD HARD LOOK IN THE HOUSE COMMITTEES. FORTUNATELY, HOUSE LEGISLATION PREVAILS OVER THE SENATE IN CONFERENCE MORE OFTEN THAN THE OTHER WAY AROUND.

IN THIS HMO LEGISLATION, WE SEE THE SAME THING HAPPEN. SENATOR KENNEDY'S HMO BILL PASSED THE SENATE LAST YEAR 60-14. MANY SENSIBLE, CONSERVATIVE SENATORS VOTED FOR THE BILL WHEN PERHAPS THEY SHOULDN'T HAVE. IT IS NOT A GOOD BILL.
IT WOULD COST OVER \$5 BILLION DOLLARS.

IT IS A BACKDOOR APPROACH TO THE
KENNEDY-TYPE NATIONAL HEALTH SECURITY.
IT PROVIDES AN OUTRAGEOUS SUBSIDY TO A
FORM OF MEDICAL CARE THAT IS SUPPOSED TO
BE MORE EFFICIENT. YET IT PASSED, 60-14.

HOW DID SUCH A BILL REACH THE
SENATE FLOOR? IT GOT THERE BECAUSE
SENATOR KENNEDY HAD THE PROXY OF ALL THE
DEMOCRATS ON THE COMMITTEE AND VOTED DOWN
EVERY AMENDMENT THAT WAS OFFERED BY THE
REPUBLICANS. I PREDICT RIGHT NOW THAT IF
THAT BILL SHOULD PASS THE SENATE AND THE
HOUSE WITHOUT AMENDMENT IT WILL SURELY
BE VETOED BY THE WHITE HOUSE.

BUT OF COURSE THE HOUSE WILL NOT
STAND FOR SUCH NONSENSE. THE HOUSE HEALTH
SUBCOMMITTEE WROTE ITS OWN BILL IN THE
92ND CONGRESS, BUT TIME RAN OUT BEFORE

IT REACHED THE FLOOR. THIS BILL HAS BEEN REINTRODUCED IN THIS CONGRESS AND WILL PROBABLY BE BEFORE US IN A FEW WEEKS. I CAN TELL YOU THAT IT IS A MUCH MORE REASONABLE BILL, WITH LIMITED SUBSIDY AND AN ABSOLUTE LIMIT OF AID TO 40 PROJECTS THE FIRST YEAR, 50 THE SECOND YEAR AND 60 THE THIRD YEAR, CONSISTING OF LOANS AND LOAN GUARANTEES RATHER THAN GRANTS OR CAPITATION PAYMENTS. IT IS AS GOOD A BILL AS YOU WILL GET.

SOME MONTHS AGO SOME OF AMA'S LEADERS MET IN MY OFFICE WITH SOME OF THE KEY REPUBLICANS FROM THE HOUSE, AND WE TALKED ABOUT HMO's. YOUR LEADERSHIP POINTED OUT THE GOOD AND THE BAD OF HMO's, AND THEY URGED US TO BE CAUTIOUS BEFORE WE UNDERTOOK ANY LONG-RANGE ^{AND SUBSTANTIAL} COMMITMENT OF FEDERAL MONEY FOR NEW HMO's.

THE HOUSE BILL IS AN EXPERIMENTAL
PROGRAM WITH SPECIFIC PROVISIONS FOR REVIEW
OF THE PROJECTS. I WOULD NOT WORRY ABOUT
THE HOUSE BILL. I AM SURE THE WHITE HOUSE
WOULD SIGN IT.

THE PROBLEM IS THAT THERE MUST
BE A CONFERENCE BETWEEN THE SENATE BILL
AND THE HOUSE BILL; IF WE SPLIT THE
DIFFERENCE BETWEEN THEM, WE MAY HAVE A
BILL WITH SOME UNDESIRABLE FEATURES.

I THINK YOU HAD BETTER TALK TO
YOUR SENATORS ABOUT THAT BILL. PERHAPS
YOU SHOULD ASK THEM THESE TWO QUESTIONS:

WHY DOES AN HMO SYSTEM,
SUPPOSEDLY BETTER AND LESS EXPENSIVE,
NEED A \$5 BILLION SUBSIDY?

HOW CAN THE SENATE HOLD OUT THE
EXPECTATION OF \$5 BILLION IN BENEFITS TO

HMO's IN THE FACE OF A SPENDING CEILING
WHICH THE SENATE LEADERSHIP HAS AGREED TO?

FINALLY, I WOULD LIKE TO LEAVE YOU WITH THIS THOUGHT -- YOU HAVE HEARD ME SAY THAT MANY CONGRESSMEN, ESPECIALLY THE NEW MEMBERS OF MY PARTY, ARE ACTION ORIENTED; THEY ARE LOOKING FOR SOLUTIONS. IN THE FIELD OF HEALTH, YOUR SUGGESTIONS WILL RECEIVE SERIOUS AND SYMPATHETIC CONSIDERATION. YOU ARE THE EXPERTS. WE DO NOT WANT TO TAKE ACTIONS WHICH WILL MAKE IT DIFFICULT FOR YOU TO PRACTICE GOOD MEDICINE.

I THINK IT IS IMPORTANT THAT THE AMA CONTINUE TO SUGGEST LEGISLATION SUCH AS MEDICREDIT, ITS EMERGENCY MEDICAL SERVICE BILL, AND THE OTHER BILLS IT HAS PROPOSED. WHILE WE ARE OPERATING

UNDER SOME BUDGET CONSTRAINTS, NEVERTHELESS
THIS CONGRESS IS NOT GOING TO STAND STILL.
IT IS GOING TO MOVE TO SOLVE PROBLEMS OF
HEALTH CARE, AS WELL AS POLLUTION,
TRANSPORTATION, HOUSING AND TAX REFORM.

IF YOU IGNORE THE PROBLEMS, IF
YOU REACT NEGATIVELY TO OTHER SUGGESTIONS
AND GIVE NONE OF YOUR OWN, I DON'T THINK
YOU WILL LIKE WHAT THE CONGRESS WILL DO.

SHOW US THAT YOU ARE INTERESTED.
GIVE US YOUR SUGGESTIONS. HELP US FIND
THE ANSWERS.

-- END --

Distribution: 20 Copies to Mr. Ford only *M Office Copy*

REMARKS BY REP. GERALD R. FORD, R-MICH.
REPUBLICAN LEADER, U. S. HOUSE OF REPRESENTATIVES
BEFORE THE NATIONAL LEADERSHIP CONFERENCE
OF THE AMERICAN MEDICAL ASSOCIATION
O'HARE MARRIOTT HOTEL
CHICAGO, ILLINOIS
7:15 p.m. FRIDAY, FEBRUARY 16, 1973

FOR RELEASE AT 6:30 p.m. FRIDAY, FEB. 16

The November elections gave us 13 more Republican Congressmen. If the rhetoric of the last few weeks is any indication of what we are up against this year, we are going to need every one of those new Republicans.

In all, there are 69 new members of the House, 43 of them Republicans. Many of these new members replaced older members who retired, so our net gain was fairly small, compared to the total number of new GOP members in the House.

Nevertheless, the new members fit the mold which I first saw emerge from the 1966 elections. They are -- for the most part -- younger, more aggressive, people-oriented members of Congress. They want to move on the problems of the day. They want Congress to be responsive.

These new members of Congress are not necessarily more liberal. They do not believe that the federal dollar is the answer to all problems. They have heard the old line that the first thing Washington does when a problem comes up is throw money at it and hope it will go away.

They are not liberal, but they are concerned. They are looking for answers. If the Federal Government has an appropriate role to play in providing these answers, they will not hesitate to support new federal legislation.

Partly due to these new, young GOP members, Republicans in the House have forged ahead with reforms which the Democrats are now adopting. We have shared our leadership among as many people as possible, provided more democracy in selecting our leadership and generally moved to make Congress more responsive.

We now see on the majority side of the aisle what appears to be more aggressive leadership. My good friend, Speaker Albert, has taken strong stands on several issues pertaining to the organization of the Congress which he previously did not get involved in. The Democratic leaders in the House and Senate show signs of more coordination than there has been in the past, and as a result, I expect that we will see clashes between the Democratic leadership in Congress and the Nixon Administration continue and accelerate. This is especially true in the area of appropriations and spending. This will be a good debate, a

(more)

healthy debate. Congress must jealously guard its role as the representative of the people.

Nevertheless, our Federal Government needs two things that the Nixon Administration is trying to deliver:

First, it needs fiscal restraint in the face of large deficits several years in a row.

Secondly, it needs reorganization of the bureaucracy.

President Nixon is moving in both of these directions, and I think he will find general support in the Congress even though there will be a lot of rhetoric from some people about the bad treatment being given to programs "for people" and the lack of "heart" on the part of the Nixon Administration. This is just campaign oratory in the off-year.

President Nixon already has achieved an impressive record in reforming government. Think back over his first four years. There has already been reform of the draft and the postal service, and revenue sharing is reforming the federal grant programs. It was one of the disappointments of his first term that the Congress did not reform the welfare system, although the House passed it twice.

I think President Nixon is doing what needs to be done in 1973. He is taking a hard look at programs that have been with us for years, even for decades, and asking the tough questions about each: "Is it worth it? Has it produced?"

I know that you are interested in health legislation as well as general legislation. I would say that national health insurance has a 50-50 chance of being passed by this 93rd Congress. Certainly the cost of some of the national health proposals indicate they have a rough way to go. Senator Kennedy's bill would cost \$80 or \$100 billion, depending on whose figures you read. I don't see how the American taxpayer would stand for this.

On the other hand, there are other proposals which are most modest in cost, yet would get to the heart of the problem. To me the most important thing is to give protection to everyone against the cost of a serious illness or accident. You all know how high hospital costs are. You have all probably treated patients whose bills have run into tens of thousands of dollars. It is vital that everyone have sufficient health insurance to cover these catastrophies.

Unfortunately, not all of us do. Therefore, Congress is in a mood to pass national health insurance or some health program which provides protection for

(more)

everyone against medical bankruptcy. I don't consider this a liberal or a conservative piece of legislation. I think it would fit the Lincoln philosophy of government. As Lincoln said of government, its function is to do for the people what they cannot do so well for themselves.

I note that AMA's health insurance bill, the Medcredit Bill, does provide this protection against catastrophies. I am sure that is one reason why the AMA bill attracted more cosponsors than any of the other health insurance bills in the last Congress -- some 174 sponsors. Incidentally, I think it is partially because of AMA's Medcredit Bill and the support it received that Senator Kennedy's bill did not go farther and faster than it did in the last Congress.

There are problems, and we cannot bury our heads in the sand. All of us must offer constructive solutions to these problems or someone else will. Other solutions may be unacceptable, but if there are no alternatives available, we might be stuck with the other fellow's answers.

Other speakers will probably give you more of the schedule of national health insurance. I know the Ways and Means Committee is going to be tied up for some time in tax reform legislation, so national health insurance will have to wait at least until that is finished.

There is another piece of legislation that is not going to wait -- the Health Maintenance Organization legislation. Now I am naturally partial to the House of Representatives since I have served there 24 years, but even senators have spoken out recently to deplore the lack of time they have to give real consideration to legislation and the impact of what they pass. In the House, on the other hand, a man serves on only one major committee. Legislation is given a good hard look in the House committees. Fortunately, House legislation prevails over the Senate in Conference more often than the other way around.

In this HMO legislation, we see the same thing happen. Senator Kennedy's HMO bill passed the Senate last year 60-14. Many sensible, conservative senators voted for the bill when perhaps they shouldn't have. It is not a good bill. It would cost over \$5 billion dollars. It is a backdoor approach to the Kennedy-type national health security. It provides an outrageous subsidy to a form of medical care that is supposed to be more efficient. Yet it passed, 60-14.

How did such a bill reach the Senate floor? It got there because Senator Kennedy had the proxy of all the Democrats on the committee and voted down every

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amendment that was offered by the Republicans. I predict right now that if that bill should pass the Senate and the House without amendment it will surely be vetoed by the White House.

But of course the House will not stand for such nonsense. The House Health Subcommittee wrote its own bill in the 92nd Congress, but time ran out before it reached the floor. This bill has been reintroduced in this Congress and will probably be before us in a few weeks. I can tell you that it is a much more reasonable bill, with limited subsidy and an absolute limit of aid to 40 projects the first year, 50 the second year and 60 the third year, consisting of loans and loan guarantees rather than grants or capitation payments. It is as good a bill as you will get.

Some months ago some of AMA's leaders met in my office with some of the key Republicans from the House, and we talked about HMO's. Your leadership pointed out the good and the bad of HMO's and they urged us to be cautious before we undertook any long-range and substantial commitment of federal money for new HMO's.

The House bill is an experimental program with specific provisions for review of the projects. I would not worry about the House bill. I am sure the White House would sign it.

The problem is that there must be a conference between the Senate bill and the House bill. If we split the difference between them, we may have a bill with some undesirable features.

I think you had better talk to your senators about that bill. Perhaps you should ask them these two questions:

Why does an HMO system, supposedly better and less expensive, need a \$5 billion subsidy?

How can the Senate hold out the expectation of \$5 billion in benefits to HMO's in the face of a spending ceiling which the Senate leadership has agreed to?

Finally, I would like to leave you with this thought. You have heard me say that many Congressmen, especially the new members of my party, are action oriented; they are looking for solutions. In the field of health, your suggestions will receive serious and sympathetic consideration. You are the experts. We do not want to take actions which will make it difficult for you to practice good medicine.

I think it is important that the AMA continue to suggest legislation such

(more)

as Medigredit, its Emergency Medical Service bill, and the other bills it has proposed. While we are operating under some budget constraints, nevertheless this Congress is not going to stand still. It is going to move to solve problems of health care, as well as pollution, transportation, housing and tax reform.

If you ignore the problems, if you react negatively to other suggestions and give none of your own, I don't think you will like what the Congress will do.

Show us that you are interested. Give us your suggestions. Help us find the answers.

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Why does an HMO system, supposedly better and less expensive, need a \$5 billion subsidy?

How can the Senate hold out the expectation of \$5 billion in benefits to HMO's in the face of a spending ceiling which the Senate leadership has agreed to?

Finally, I would like to leave you with this thought. You have heard me say that many Congressmen, especially the new members of my party, are action oriented; they are looking for solutions. In the field of health, your suggestions will receive serious and sympathetic consideration. You are the experts. We do not want to take actions which will make it difficult for you to practice good medicine.

I think it is important that the AMA continue to suggest legislation such

(more)

as Medigredit, its Emergency Medical Service bill, and the other bills it has proposed. While we are operating under some budget constraints, nevertheless this Congress is not going to stand still. It is going to move to solve problems of health care, as well as pollution, transportation, housing and tax reform.

If you ignore the problems, if you react negatively to other suggestions and give none of your own, I don't think you will like what the Congress will do.

Show us that you are interested. Give us your suggestions. Help us find the answers.

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