

President's Health Message

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The President's health message calls for expansion of federal government interference in the practice of medicine. He helps lay the groundwork for "nationalization of health" and simultaneously denies it is necessary. He pours fuel on the fire calling it "a crisis" while the real "crisis" is reckless government usurpation of power and deficit spending.

In 1965 federal interventionists, by the unconstitutional assumption of power, established the principle of federal government interference in private medical care. As they said then re Medicare "all we want to do is get our foot in the door, and we will expand the program after that."

The first paragraph of Mr. Nixon's message, asking for expansion of government, explains that: American's medical bill went up 170% in the last ten years, and the federal government was largely responsible. However, he doesn't propose to re-establish the sound constitutional principle that the federal government has no authority to extract money from the people to spend on health schemes—but asks, "What are we getting for all this money?" As if "we"—meaning mostly the government—has a just right to the money.

President Nixon's proposed expansion of central government interference in medical care appears mild compared to the radical plan of Senator Kennedy. Yet, it is very dangerous and contains some of the same radical basic proposals of the Kennedy scheme.

Both plans will increase cost and lower the quality of care. Both are against individual responsibility upon which this country's success is based. Both violate the clear meaning of the Constitution as intended by its founders. Neither is authorized by any amendment to the Constitution. Both illegitimately usurp power. Both violate ethical principles, [are] uneconomic, and perpetuate a hoax against unsuspecting patients and taxpayers. Both are collectivist oriented. The differences are of degree only.

Mr. Nixon's plan would subsidize closed-panel per-capita prepayment groups as would plans by both Senator Kennedy and Senator Javits (R-N.Y., an ardent interventionist). Per-capita payment is the basis of socialized medicine in Great Britain. Mr. Nixon says his administration is "enthusiastic" about this scheme and says, "That is why we proposed legislation last March to enable Medicare recipients to join such programs." This concept was in the 1970 Social Security Bill (HR-17550) which passed the House and the Senate last year but died as the last session expired before the House and Senate could reconcile their differences. It has been reintroduced. It, too, was strongly supported by the leftists who understood how it would gradually undermine our system.

AAPS strongly opposed it in testimony before the Senate Finance Committee in September. Most other medical groups, who say they are for saving private medicine, gave only token opposition to it. AMA, in fact, submitted its own plan of subsidy and control (Medicredit and Peer Review), which could be used as a club to police doctors via medical societies as agents of the federal government. The closed-panel plan was recommended to Mr. Nixon by entrenched advisers in H.E.W. [the Department of Health, Education, and Welfare]. They sugar-coated this old and deadly socialized medicine scheme, calling it "new" and giving it the pleasant-sounding name "Health Maintenance Organizations."

Government centralizers of every hue have favored the plan for 40 years. (Write: U.S. Department of H.E.W. for Research Report 29, which shows that the plan was proposed in 1932.) If enacted, it will help prepare public acceptance later for the more harsh and obviously damaging other provisions of the Kennedy plan of subsidy and control. In fact, Senator Kennedy told H.E.W. Secretary Richardson that the HMO proposal is "one of the most imaginative and creative aspects of the President's program."

The New Republic (February 27), considered to be the outstanding Fabian-Socialist magazine in this country, while dutifully parroting the falsehoods of Wilbur Cohen about infant mortality and the rest of the interventionist propaganda for compulsory nationalized medicine and while promoting Senator Kennedy's circus (called a Senate Health Hearing), says: "Mr. Nixon has come a long way on the issue, and many of his proposals are to be commended." Also Mr. Woodcock, President of UAW [United Auto Workers], successor to the late Walter Reuther, in February testifying before a U. S. Senate Committee, said: "I take special pleasure in complimenting the Administration in placing great emphasis on the need to support the development of HMOs—Health Maintenance Organizations. This term embraces Neighborhood Health Centers and Family Health Centers, and what we and many others have for years known as group practice prepayment plans (GPPPs) and Professional Foundations (PFs)."

To cap the climax, AMA, according to quotations in the *Chicago Tribune*, endorsed the President's plan saying: "Our initial reaction to President Nixon's health proposals is generally favorable." It then endorses the revolutionary principles of the Medical Committee for Human Rights (Dr. Quentin D. Young, past national chairman, etc.) saying, "We endorse the principal [sic] that it is the basic right of every citizen to have available to him adequate health care." Mr. Kennedy knows it leads to loss of freedom and more control; apparently our friends do not.

Even the *New York Times* warns against the Nixon-Kennedy

plans saying: “Both the Nixon and Kennedy proposals rely in different degrees upon the assumption that increased use of pre-paid group practice systems—what the President calls Health Maintenance Organizations—can simultaneously lower costs and improve care. Unfortunately, this assumption requires more proof than is yet available, and there are some students of medical economics who challenge this claim vigorously. Moreover, some existing systems of prepaid group practice—such as Kaiser Permanente groups—have found that they tend to be inundated by clients whose troubles are more emotional than organic, thus hindering patients with serious organic illness from gaining timely access to proper care. More study and experimentation are needed.”

“Whiched”

Friends and foes, patients and doctors, are being “whiched”: “which” of two government programs do you choose? “Which” route should the nation take as far as medical care is concerned with respect to more taxes, more inflation, more red tape, more bureaucracy, more political interference in personal transactions, more special deals for insiders, and more government employee interference with the medical judgment of qualified doctors?

The question isn’t asked, “Should we stop plunging into the chaos of government subsidy and control?” We are asked “which” government plan should we accept? That being promoted by AMA, AHA, Nixon, Kennedy, Javits, Pell, Omar Burleson (the insurance industry) or dozens of others? This “which” is a trap. The question isn’t “‘which’ of the proposed government plans do you choose?” It is “Do you choose to be a private doctor; exercising your free and independent judgment, dealing directly with your patient and looking to him only for payment” or “Do you choose to be a political puppet smothered by minute government rules and regulations and looking to government for payment?”

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Our system has made 85% of us the envy of the world. Through government intervention, the 85% of us can be dragged down to the level of the 15% who haven’t made it. By being “whiched” you can contribute to tearing down the good of the 85%. But why do that? Why not, through voluntary non-governmental means help the 15% to improve themselves? Through our system, the 15% have a chance to improve their lot. Under foreign schemes, 100% are trapped by government with escape being their only chance for improvement. The unfortunate few among the 15% here who are legally judged incapable of caring for themselves should first be taken care of compassionately and personally by their family, neighbors, church, or local government.

When individuals cannot care for their own “needs” those closest to them can judge the extent of their needs and how to help them best. This is not Heaven, yet it isn’t the Hell of political medicine for everyone.

Those who do not believe in freedom have abandoned the idea of “need” and say “medical care is a right.” They also say reading is a right. This, of course, is begging the question. We either build on our system of individual responsibility and keep government in check, or we repeat the mistakes of history and permit political medicine to destroy good medicine.

Under Mr. Nixon’s expansion of federal interference, private employers would be forced to pay for insurance for employees, which the central government would control through the establishment of standards and other subtle means of manipulating the insurers and the insured. It could force cancellation of private insurance through refusal of double coverage. We are reminded that the old folks regardless of their desire or ability to pay lost their insurance by mass cancellation with government approval. We wonder what the health insurance industry will have left to it. The whole scheme proceeds a pace in helping to destroy private decision-making (private capitalism) and inflating government monopoly capitalism. This is the revolutionary transition blueprint Lenin followed, and his disciples are now using.

One Senator summed the whole thing up in a couple of words when he was asked what was going on in the health care field, he said, “An auction!”—meaning that a political auction is taking place between competing candidates for the presidency as to how to buy the election with Federal Treasury funds, and never mind the fact that it will result in the patients paying more, getting less, and losing their heritage.

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Crushing Burdens of Bureaucracy

Yet Mr. Nixon told the American College of Cardiology “we must keep the doctor free from the terrible crushing burden of bureaucracy. I don’t want my doctor to spend so much time filling out forms that he doesn’t spend enough time doing what is needed to be done as a doctor for the patient.”

Judging from Mr. Nixon’s protest about his intentions and his conflicting advocacy of government intervention as proposed by H.E.W. and government interventionists for the past 90 years, he is trapped and confused. Only vigorous and intelligent action by you and your patients and many other doctors and their patients will stop the “auction” and “the confusion.”

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