

REMARKS OF  
SENATOR BOB DOLE  
BEFORE THE  
AMERICAN DENTAL ASSOCIATION  
AND THE  
AMERICAN DENTAL POLITICAL ACTION COMMITTEE  
L'ENFANT PLAZA HOTEL  
WASHINGTON, D. C.  
WEDNESDAY, MARCH 5, 1975

IT IS A PLEASURE TO BE HERE WITH YOU THIS MORNING TO TALK ABOUT THE PROSPECTS AHEAD FOR HEALTH LEGISLATION IN THE 94TH CONGRESS.

AS RANKING MINORITY MEMBER OF THE HEALTH SUBCOMMITTEE OF SENATE FINANCE, I KEEP TELLING MYSELF I SHOULD BE IN A POSITION TO GIVE YOU SOME ACCURATE PREDUCTIONS ABOUT OUR PLANS AND OBJECTIVES IN THAT AREA. BUT UNFORTUNATELY, EVERY TIME I START THINKING I HAVE A REALISTIC FORECAST FIGURED OUT, SOMETHING HAPPENS TO MAKE ME RELUCTANT TO PUBLICLY DECLARE IT.

SO, WHEN HAL CHRISTENSEN OF YOUR WASHINGTON OFFICE INVITED ME TO JOIN YOU AND EXPRESS MY VIEWS ON "WHAT MIGHT LIE AHEAD" IN THIS AREA, MY IMMEDIATE REACTION WAS -- "GIVEN ALL OUR PREOCCUPATION WITH ENERGY MATTERS AND THE ECONOMY: WHAT CAN I POSSIBLY TELL THEM THAT THEY HAVEN'T ALREADY HEARD, OR THAT WILL STILL BE VALID SIX MONTHS FROM NOW?"

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TOPICS OF CONCERN

WELL, THE BEST APPROACH FOR ANY POLITICIAN TO TAKE IN THIS SITUATION, I SUPPOSE, IS ONE OF NON-COMMITMENT -- AND I'M CERTAINLY NOT GOING TO PASS UP THE OPPORTUNITY TO CAPITALIZE ON THAT PRIVILEGE NOW. HOWEVER, THERE ARE, I THINK, SOME OBSERVATIONS I CAN MAKE WHICH SHOULD INTEREST ALL OF YOU IN THE DENTAL PROFESSION -- WHO HAVE A DEFINITE STAKE IN ANY NATIONAL HEALTH INSURANCE PROPOSAL ULTIMATELY ADOPTED.

IN ADDITION, THERE ARE SEVERAL OTHER "POPULAR" TOPICS OF DISCUSSION AMONG YOU WHICH DESERVE MENTION HERE, SINCE THEY WILL VERY LIKELY BE A FOCUS OF ATTENTION AT SOME TIME DURING THE COMING YEAR. THESE INCLUDE THE CRISIS IN MALPRACTICE LIABILITY INSURANCE; THE POSSIBILITY OF A DOCTOR AND DENTIST "DRAFT" COMING OUT OF HEALTH MANPOWER LEGISLATION (WHICH CONGRESSMAN WAXMAN CAN PROBABLY TELL YOU MORE ABOUT); THE PROPOSAL BY THE ADMINISTRATION TO ELIMINATE MATCHING FUNDS FOR NON-EMERGENCY, ADULT DENTAL CARE UNDER MEDICAID; AND THE ROLE OR "NON-ROLE", AS THE CASE MAY BE, OF DENTISTS VIS A VIS PROFESSIONAL STANDARDS REVIEW ORGANIZATION POLICY.

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PSRO REPRESENTATION

BY "NON-ROLE", OF COURSE, I MEAN THAT IN SPITE OF THE FACT THAT DENTAL SERVICES ARE SUBJECT TO PSRO STANDARDS, THERE ARE CURRENTLY NO PROVISIONS FOR OTHER THAN PHYSICIANS AND OSTEOPATHS ON EITHER THE LOCAL, STATE OR NATIONAL COUNCILS. WHILE THE LAW DOES "ENCOURAGE" THE PSRO BOARDS TO "WORK WITH OTHER HEALTH CARE PRACTITIONERS TO ASSIST IN DEVELOPING POLICY," DENTAL PROFESSIONALS CERTAINLY HAVE A LEGITIMATE "NO REPRESENTATION" GRIEVANCE HERE -- ONE WHICH HAS BEEN ADDRESSED IN SENATE BILL S. 153.

I MYSELF INTRODUCED LEGISLATION LAST SESSION CALLING FOR SIMILAR PSRO MODIFICATIONS, AND INTEND TO WORK WITH SENATOR HANSEN TO BRING ABOUT THESE DESIRED CHANGES LATER ON. BUT REGARDLESS OF WHAT WE DO WITH PSRO'S, MANPOWER, OR THE LIKE, YOUR MAJOR CONCERN MUST STILL LIE WITH ANY ACTION THE CONGRESS TAKES IN THE AREA OF COMPREHENSIVE, OR EVEN LIMITED, GOVERNMENTAL HEALTH BENEFITS.



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HEARINGS IN 1974

BEFORE GETTING INTO THE PRESENT SITUATION, LET ME RECALL A FEW THINGS ABOUT LAST YEAR, WHEN THE MOMENTUM REALLY BEGAN BUILDING TOWARD ENACTMENT OF A HEALTH BILL, ONLY TO FALTER NEAR THE END OF THE SUMMER. WE HAD JUST ABOUT EVERY CONCEPT CONCEIVABLE BEFORE US WHEN THE WAYS AND MEANS COMMITTEE BEGAN ITS HEARINGS IN APRIL -- WITH THE FINANCE COMMITTEE FOLLOWING SUIT IN MAY -- AND EVERY INDICATOR WAS POINTING TOWARD SOME KIND OF ACTION.

I WAS IN ATTENDANCE WHEN YOUR THEN-PRESIDENT, CARLTON WILLIAMS, AND CHIEF COUNSEL, BERNARD CONWAY, TESTIFIED ON BEHALF OF THE ASSOCIATION, SO AM WELL AWARE OF THE POSITION ADVOCATED THEN ON YOUR BEHALF. WHILE DR. WILLIAMS DIDN'T NECESSARILY STATE THAT THE ADA WAS PROMOTING ENACTMENT OF NATIONAL HEALTH INSURANCE PER SE, HE DID INDICATE THAT IF CONGRESS WAS INSISTENT ABOUT IT, YOU WANTED TO INSURE THAT DENTAL SERVICES WOULD BE INCLUDED -- ESPECIALLY FOR CHILDREN.

I CAN CERTAINLY APPRECIATE THAT STAND, AND FEEL IT IS VERY SIGNIFICANT THAT EVERY MAJOR BILL INTRODUCED IN THE LAST CONGRESS RECOGNIZED THE IMPORTANCE OF ROUTINE DENTAL CARE (EXCLUSIVE OF ORTHODONTIA) FOR YOUTHS UP TO VARIOUS AGE RANGES. MOREOVER, I THINK IN NEARLY ALL INSTANCES, DENTISTS WOULD BE REIMBURSED AS INDEPENDENT PROVIDERS.

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#### FACTORS AGAINST

IN ANY EVENT, THAT WAS LAST SPRING, AND WHEN IT BECAME APPARENT NEAR THE END OF AUGUST THAT THE WAYS AND MEANS COMMITTEE WAS GOING TO BE UNABLE TO REACH A CONSENSUS ON THE VARIOUS COMPETING PROPOSALS, A SORT OF LEGISLATIVE STALEMATE ENSUED. THEN, JUST ABOUT THAT SAME TIME, THE ECONOMY BEGAN TO TAKE A TURN FOR THE WORSE.

FRANKLY, I THNK IT IS THAT SAME ELEMENT -- THE STATE OF THE ECONOMY -- WHICH IS THE MAJOR FACTOR WORKING AGAINST EARLY ACTION ON ANY NATIONAL HEALTH INSURANCE BILL DURING THIS SESSION. WE IN CONGRESS HAVE OUR HANDS FULL WITH THE TWIN PROBLEMS OF INFLATION AND RECESSION -- AS WELL AS THE CLOSELY-LINKED ENERGY MATTERS -- AND WHILE THE HEALTH NEEDS OF OUR PEOPLE BY NO MEANS GO AWAY, THERE IS SIMPLY THE QUESTION OF WHEN AND HOW WE CAN GET TO THEM, GIVEN THE OTHER PRIORITIES AND EVENTS I HAVE JUST DESCRIBED.

#### OUTLOOK FOR ACTION

IT SEEMS TO ME, THAT IS -- AND I KNOW TO A NUMBER OF OTHER SENATORS ON THE FINANCE COMMITTEE -- THAT AT A TIME WHEN INFLATION IS PUTTING ADDED STRAIN ON THE ECONOMIC BUDGET, AND WHEN MANY ARE CALLING FOR A TAX CUT TO DEAL WITH THE RECESSION, PASSAGE OF A MASSIVE PIECE OF DOMESTIC LEGISLATION (SUCH AS NATIONAL HEALTH INSURANCE WOULD ENTAIL) WOULD BE INAPPROPRIATE.



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IT IS EXTREMELY INTERESTING, HOWEVER, THAT WE STARTED OFF THIS YEAR TALKING ABOUT OUR LIMITED, "FINITE" SOURCES OF FUNDING, WHICH WOULD DEFER ANY COMPREHENSIVE BENEFITS PLAN, YET NOW ARE ACTIVELY CONTEMPLATING THE GOVERNMENTAL SUBSIDIZING OF PRECISELY SUCH BENEFITS FOR A LIMITED CATEGORY OF CITIZENS. TO ME THIS IS A CHANGED SITUATED WHICH, WHILE PERHAPS PREDICTABLE, IS NOT WITHOUT ITS IRONIES.

#### RECONCILING A PARADOX

THE FIRST OF THESE IRONIES IS OBVIOUSLY THAT A MAN WHO WAS UNEMPLOYED WHEN THE RATE WAS 4% HAD JUST AS GREAT A NEED FOR HEALTH INSURANCE AS A WORKMAN NOW WHO IS UNEMPLOYED WHEN THE RATE HAS SHOT UP TO 8 1/2 PERCENT. THE PROPONENTS OF THESE PARTICULAR COVERAGE SCHEMES RESPOND TO THIS ARGUMENT THAT THEIRS ARE ONLY "TEMPORARY" PROGRAMS -- WHICH DEMAND IMMEDIATE ATTENTION -- AND THAT THEY ARE CALLED FOR NOW MERELY BECAUSE OF THE VAST NUMBERS AFFECTED.

I CAN CERTAINLY APPRECIATE THAT SENTIMENT, BUT WE ALL KNOW HOW MANY OF THESE SO-CALLED "TEMPORARY RELIEF" MEASURES END UP BECOMING PERMANENT GOVERNMENTAL PROGRAMS. IN ANY EVENT, I FIND IT DIFFICULT TO RECONCILE THIS IDEA THAT WE HELP THE UNEMPLOYED WHEN THE RATE

IS 8 1/2 PERCENT BUT NOT WHEN IT'S AT 4% OR FURTHER THAT WE RELY  
ONLY THOSE WHO HAD BENEFITS WHEN THEY WERE WORKING, WHILE HAS REGARD

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IS 8 1/2 PERCENT BUT NOT WHEN IT'S AT 4, OR FURTHER THAT WE HELP ONLY THOSE WHO HAD BENEFITS WHEN THEY WERE WORKING, WHILE DISREGARDING THE NEEDS OF THOSE -- SUCH AS A GREAT MANY ASSOCIATED WITH AGRICULTURE PRODUCTION -- WHO HAVE NEVER HAD ANY HEALTH INSURANCE AT ALL.

#### HUMOR IN DISTRESS

THERE ARE SEVERAL OTHER INTERESTING, IF NOT SOMEWHAT AMUSING, IRONIES PRESENTING THEMSELVES CONCURRENT WITH THIS SNOWBALLING TREND, AND I AM NEVER ONE TO PASS UP AN OPPORTUNITY TO EXTRACT SOME HUMOR FROM AN OTHERWISE SERIOUS THE UNEMPLOYED DEVELOPMENT. THE FACTORS AND PERSONALITIES COMING TO BEAR IN THIS INSTANCE ARE JUST TOO ATTRACTIVE TO IGNORE, HOWEVER, SO LET ME POINT OUT SOME OF THE "LIGHTER" ASPECTS OF THE CURRENT SITUATION.

FIRST WE HAVE SENATOR BENTSEN, FOR EXAMPLE -- WHO WAS A BUSINESSMAN BEFORE COMING TO CONGRESS AND HAD NO SMALL DEGREE OF TIES WITH THE PRIVATE INSURANCE INDUSTRY -- INTRODUCING A BILL WHICH WOULD PROVIDE HEALTH INSURANCE BENEFITS FOR THE UNEMPLOYED USING THE MEDICARE, OR SOCIAL SECURITY, APPROACH. BY CONTRAST, SENATOR KENNEDY, WHO HAS CONSISTENTLY DENOUNCED THE PRIVATE HEALTH INSURANCE INDUSTRY IN TERMS OF THEIR CAPACITY, BIAS, AND MOTIVES -- AND FORMERLY EXCLUDED THEM FROM ANY ROLE WHATSOEVER IN HIS COMPREHENSIVE NATIONAL HEALTH INSURANCE PLAN

HE HAS INTRODUCED A BILL WHICH WOULD OPEN THE DOORS OF SUBSIDIZING

THE EXISTING PRIVATE INSURANCE PROGRAMS OF EMPLOYERS.



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-- HAS INTRODUCED A COMPETING BILL WHICH TAKES THE ROUTE OF SUBSIDIZING THE EXISTING PRIVATE INSURANCE PREMIUMS OF EMPLOYERS.

FURTHER CONFUSION

TO FURTHER COMPLICATE MATTERS, WE HAVE LABOR -- WHICH HAS TOTALLY RESISTED ALL ATTEMPTS IN THE PAST TO BRING ABOUT ANYTHING SHORT OF A MAJOR COMPREHENSIVE PLAN OF NATIONAL HEALTH INSURANCE -- NOW SUPPORTING JUST SUCH A PIECEMEAL APPROACH -- WHEN IT COMES TO COVERAGE FOR THEIR UNEMPLOYED MEMBERS. I GUESS MAYBE IT'S A QUESTION OF WHO'S "PIECE" IS INVOLVED, BUT THE OBSERVATION THAT THERE ARE A LOT OF SPECIAL INTEREST FORCES "AT WORK" HERE IS INESCAPABLE.

TO CAP IT ALL OFF ON HEALTH INSURANCE BENEFITS FOR THE UNEMPLOYED -- AND ALL THE PUBLICITY ATTACHED THERETO -- WE HAVE THE FOLLOWING SEQUENCE OF EVENTS:

- 1) ON THURSDAY, FEBRUARY 20, THE FINANCE COMMITTEE ANNOUNCED THAT IT WOULD HOLD HEARINGS ON THE BENTSEN BILL ON MARCH 7;
- 2) AROUND NOON THAT SAME DAY, THE LABOR AND PUBLIC WELFARE COMMITTEE ANNOUNCED THAT THEY WOULD HOLD THEIR HEARINGS ON THE KENNEDY BILL ON MARCH 5 AND 6; BUT



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3) THE WINNER IN THE RACE WAS THE WAYS AND MEANS COMMITTEE, WHICH ANNOUNCED TRIUMPHANTLY AROUND 3 O'CLOCK THAT AFTERNOON THAT ITS HEARINGS WOULD COMMENCE ON MARCH 3.

WELL, REGARDLESS OF WHO'S GOING TO GET THE CREDIT FOR WHATEVER HAPPENS HERE, I THINK WE HAVE A TOUGH DILEMMA WITH WHICH TO CONTEND: THAT OF A VERY REAL PROBLEM OF WHAT TO DO ABOUT HEALTH COVERAGE FOR 8 MILLION IDLE MEMBERS OF THE WORK FORCE, COUPLED WITH AN EVER-PRESENT AND MASSIVE FEDERAL DEFICIT. ALL THIS, I MIGHT ADD, WHEN WE HAVE THOSE WHO WOULD ASK "WHERE DO WE STOP?" AND USE THE PRESENT SITUATION AS A SPRINGBOARD TO PROMOTE PASSAGE OF "THE WHOLE WORKS."

#### MORE THAN ANTICIPATED

I THROW THAT OUT TO YOU AS A VERY REALISTIC POSSIBILITY, BECAUSE THE EXISTING INEQUITIES -- WHEN VIEWED IN CONJUNCTION WITH THE NEED FOR CONGRESSIONAL RESPONSE -- MIGHT JUST FORCE US INTO TAKING MORE THAN SIMPLY A NARROW APPROACH TO AFFORDING RELIEF FOR THE UNEMPLOYED. WHILE I CERTAINLY DO NOT ENDORSE THIS TREND, I THINK WE NEED TO BE AWARE THAT WE MIGHT BE GETTING OURSELVES INTO MORE THAN IS ANTICIPATED AT THIS PARTICULAR TIME.

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IN ANY EVENT, HEALTH INSURANCE ITSELF IS A MATTER FOR TIMELY DISCUSSION BY US ALL, AND I WOULD CERTAINLY WELCOME ANY COMMENTS WHICH YOU MIGHT LIKE TO SHARE ON BEHALF OF YOURSELVES OR YOUR PROFESSION. DENTISTS EVERYWHERE ARE GOING TO BE PLAYING A KEY ROLE IN ANY PROGRAM ULTIMATELY ADOPTED, AND THE MOMENT FOR PARTICIPATION IN DETERMINING WHAT THAT ROLE WILL BE IS NOW.