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# NEWS from U.S. Senator Bob Dole

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WASHINGTON, D.C.-- Repeating several themes he underscored in a week-end speech to Family Practice Physicians last Sunday in Great Bend, Kansas, Senator Bob Dole addressed a national dentist's organization, the American Dental Political Action Committee this noon. The following are excerpts of Senator Dole's remarks.

## NATIONAL HEALTH CARE OVERALL

All of this fits into an overall national health care picture. In the context of the present public discussion of the issue, we are variously told that the American health care situation is the best in the world, the worst in the world, should be left as it is, or is in need of drastic reform.

The truth, of course, as we all know and recognize, is somewhere in the middle. The quality of health care available to Americans is probably the best in the world in most respects. And it will continue to get better.

Our health care delivery systems are good. But they can and will be improved.

In some instances, the cost of care is a problem and a vexing one -- but it too can be resolved.

## AVOID QUACK REMEDIES

And I must assert my own view here, that the cost problem can be resolved by methods far short of plans like the proposed National Health Insurance scheme which many of my Democrat colleagues have adopted as the salvation of the American people.

My own view is quite different. I have in the past called the compulsory national health insurance plan question a "quack remedy." I have called such a proposal a "quack remedy." In the two years or so since it was first proposed, nothing has happened to change my mind on that score.

#### REALISTIC SOLUTIONS SOUGHT

The program could well cost more than it is worth. It could lead to problems for the patients and it would certainly lead to a whole range of problems for you, the practitioners. There would be the simple inconveniences involved in doing the flood of paper work and record keeping to be sure. And there would be deeper threats to your own freedom to act on your professional best judgements without undue interference from bureaucrats and Federal guidelines.

No action has yet been taken on the national health insurance proposal. Frankly, I don't expect any this year and quite possibly none will come in this Congress. As a member of the Health Subcommittee of the Senate Finance Committee, I am concerned, however, with seeing that some action is taken to find and implement solutions to problems involving health care.

That is why, for example, I have introduced a bill in the Senate which would authorize doctors and dentists who have a military obligation to opt to fulfill that obligation in civilian health service to rural areas where there is a shortage of qualified health service professionals. In my own State of Kansas, and in much of the country, this problem is an acute one. I believe that my proposal to help alleviate it by allowing medical personnel to exchange service in the National Health Service Corps for active military duty and to create certain incentives for such service in rural areas, is a realistic approach.

We need similar realism in our approaches to other health care problems, like that the national health insurance proposal attempts to deal with.

#### SUPPORT FOR REFORM

There have been a number of worthwhile proposals put forward. At this point, I do not believe any single one of them provides all the answers. But I feel several basic principles should be established in whatever legislation is finally enacted.

First, the basic structure of American medicine must not be uprooted. There need to be changes, but in the way or reform -- not total rejection of what we now have.

Second, the role of the private sector should be maintained in providing the assurance of adequate care. The Government should be a cooperating partner in this effort, but cannot displace or nationalize the health insurance industry.

Third, the program must contain built-in incentives toward reducing costs. Medicare has shown how dramatically costs can exceed estimates, when the Federal Government becomes involved. The Congress now has a clear responsibility to formulate a system which, by improving the nation's health, also reduced the overall price of having that health.

Fourth, the system must be financially responsible and in all ways realistic. This is one of the most difficult areas to approach, but in its simplest terms it means that the program shouldn't cost more than it is worth, nor should it cause more problems than it solves.