

REMARKS OF SENATOR BOB DOLE  
KANSAS ACADEMY OF FAMILY PRACTITIONERS  
GLENWOOD MANOR  
OVERLAND PARK, KANSAS  
JUNE 15, 1974

IT IS A PLEASURE TO BE HERE TODAY WITH THE FAMILY DOCTORS  
OF KANSAS.

IN THE HISTORY OF MEDICINE IN THIS COUNTRY, THE FAMILY  
DOCTOR HAS PERSONIFIED THE MEDICAL PROFESSION TO THE GREAT  
MAJORITY OF AMERICANS. AND THROUGH THIS PERSONAL CONTACT AND  
CONCERN ON AN INDIVIDUAL LEVEL, THERE HAS DEVELOPED A DEGREE  
OF RESPECT, TRUST AND AFFECTION WHICH NO OTHER PROFESSIONAL  
GROUP HAS EVER SURPASSED.

THIS IS A PRECIOUS ASSET FOR THE FAMILY PRACTITIONERS OF  
KANSAS AND EVERY OTHER STATE. AND IT IS ALL THE MORE VALUABLE,

*Legion  
of  
Family  
Doctors*

-2-

BECAUSE IT -- UNLIKE MANY OF THE AWARDS, PRIZES AND CITATIONS IN TODAY'S SOCIETY -- IS UNQUESTIONABLY DESERVED BY THOSE UPON WHOM IT IS BESTOWED. THE FAMILY PRACTITIONER PUTS IN LOTS OF HARD WORK, ROUND-THE-CLOCK "OFFICE HOURS" AND RECEIVES LITTLE OF THE GLAMOR OR PUBLICITY WHICH FALLS TO SOME OF THE OTHER FIELDS OF PRACTICE. BUT THIS FIELD HAS BEEN THE MAINSTAY OF MEDICINE FOR MOST OF OUR HISTORY. AND IT REMAINS AN ESSENTIAL ELEMENT IN OUR HEALTH CARE DELIVERY NEEDS TODAY.

SO, I APPRECIATE THE OPPORTUNITY TO JOIN YOU TODAY, AND TO DISCUSS SEVERAL TOPICS IN WHICH WE SHARE A MUTUAL INTEREST.

-3-

CONCERN OVER PSRO

I KNOW YOU ARE CONCERNED ABOUT PSRO. MANY OF US IN CONGRESS SHARE YOUR CONCERN.

YOU MAY REMEMBER THAT I WAS ONE OF THOSE WHO VOTED TO SUPPORT SENATOR CURTIS' MOTION TO STRIKE THE ENTIRE PSRO PROGRAM FROM THE BILL IN 1970. UNFORTUNATELY OUR MOTION LOST BY A VOTE OF 48-18. WE WERE CONCERNED THEN ABOUT THE CONFIDENTIALITY OF MEDICAL RECORDS AND ABOUT CREATING A NEW BUREAUCRACY TO DO WHAT MEDICAL SOCIETIES AND SPECIALTY SOCIETIES HAVE SHOWN THEIR ABILITY AND WILLINGNESS TO DO WITHOUT A FEDERAL BUREAUCRACY.

AS YOU MAY KNOW, I HAVE INTRODUCED S. 3589, A SERIES OF MAJOR AMENDMENTS TO PSRO. THESE WERE SUGGESTED BY AMA WITNESSES BEFORE

-4-

RECENT PSRO HEARINGS OF THE SENATE FINANCE COMMITTEE'S COMMITTEE ON HEALTH. AS YOU MAY KNOW, I SERVE ON THAT SUBCOMMITTEE AND WROTE TO EACH OF YOU ABOUT THE HEARINGS BEFORE THEY BEGAN. I WAS OVERWHELMED AND PLEASED BY THE MANY THOUGHTFUL RESPONSES FROM PHYSICIANS ALL ACROSS KANSAS. YOUR COMMENTS WERE MOST HELPFUL IN PREPARING FOR THOSE HEARINGS, AND MANY OF THE SUGGESTIONS AND IMPROVEMENTS WHICH YOU MADE ARE INCLUDED IN THE AMENDMENTS WHICH I INTRODUCED.



-5-

PSRO AMENDMENTS

FOR INSTANCE, MY BILL WOULD EXTEND PSRO REVIEW TO THE VA AND PUBLIC HEALTH SERVICE HOSPITALS. MANY OF YOU ASKED FOR THIS. MY BILL WOULD MAKE CLEAR THAT THE NORMS DRAWN UP BY THE PSROS WOULD NOT BECOME INFLEXIBLE STANDARDS WHICH EVERY PHYSICIAN MUST FOLLOW REGARDLESS OF WHAT HIS MEDICAL TRAINING AND JUDGMENT WOULD TELL HIM TO DO.

MY LEGISLATION WOULD MAKE CLEAR THAT THE NORMS WOULD BE USED TO ESTABLISH INITIAL POINTS OF EVALUATION AND REVIEW. THEY SHOULD NEVER BE USED AS SUBSTITUTES FOR THE MEDICAL JUDGMENT OF INDIVIDUAL PHYSICIANS.

-6-

MY BILL HAS MANY PROVISIONS WHICH ARE DESIGNED TO GUARD  
THE CONFIDENTIALITY OF YOUR MEDICAL RECORDS.

FINALLY, WITHOUT REVIEWING ALL OF ITS PROVISIONS, I  
WANT TO POINT OUT THAT IT WOULD PUSH BACK THE DATE BY WHICH  
ORGANIZATIONS OF PHYSICIANS WOULD HAVE TO BE ORGANIZED IN  
PSROS FROM JANUARY 1976 TO JULY 1978. THIS IS NECESSARY BE-  
CAUSE THERE JUST IS NOT TIME FOR HEW TO AWARD ALL THE CONTRACTS  
AND HAVE ALL THE GROUPS OPERATING BY A YEAR FROM JANUARY.

-7-

NOW I KNOW THAT MANY OF YOU THINK THAT PSRO SHOULD BE REPEALED, AND THAT WOULD BE ALRIGHT WITH ME. BUT THE POLITICAL FACT IS THAT IT IS NOT GOING TO BE REPEALED DURING THIS SESSION OF CONGRESS. THERE ARE SEVERAL REASONS WHY I HAVE COME TO THIS CONCLUSION. AFTER TALKING TO MY COLLEAGUES ON THE SENATE FINANCE COMMITTEE I WILL TELL YOU FRANKLY THEY ARE NOT READY TO REPEAL A PROGRAM THAT IS NOT INTO EFFECT YET. THEY MUST HAVE REASONS TO REPEAL A LAW THAT THEY HAVE JUST PASSED.

-8-

FINALLY THERE IS THE FACT THAT THERE ARE MEMBERS OF THE FINANCE COMMITTEE WHO WILL NOT VOTE TO REPEAL A PROGRAM THAT SOME BELIEVE SO STRONGLY REPRESENTS THE LAST BEST CHANCE FOR PHYSICIANS TO REVIEW THEMSELVES RATHER THAN HAVE REVIEW BY GOVERNMENT CLERKS. I KNOW THAT THESE VIEWS ARE SINCERE AND HELD IN THE FIRM BELIEF THAT PSRO IS ACTUALLY DOING THE MEDICAL PROFESSION A FAVOR. THEREFORE, I BELIEVE THAT CONSTRUCTIVE AMENDMENTS ARE THE MOST EFFECTIVE AND REALISTIC APPROACH TO DEALING WITH PSRO AT THIS POINT. I BELIEVE MY BILL IS RESPONSIVE TO THE MOST BASIC REQUIREMENTS FOR REFORM AND HOPEFULLY IT WILL BE ACCORDED EARLY CONSIDERATION BY THE FINANCE COMMITTEE.



-9-

WHEN WE TALK ABOUT A PROGRAM LIKE PSRO WHICH IS FRAUGHT WITH THE POSSIBILITY OF FUTURE GOVERNMENT INTERFERENCE IN THE PRACTICE OF MEDICINE, IT NATURALLY BRINGS TO MIND ANOTHER ISSUE WHICH IS BEFORE US. IT IS ALSO FRAUGHT WITH THE POSSIBILITY OF GOVERNMENT INTERFERENCE WITH THE WAY YOU TAKE CARE OF YOUR PATIENTS -- AND OF COURSE I AM SPEAKING OF NATIONAL HEALTH INSURANCE.

NATIONAL HEALTH INSURANCE

YOU MAY RECALL THAT THE SENATE FINANCE COMMITTEE HAD SEVERAL DAYS OF HEARINGS ON NATIONAL HEALTH INSURANCE A FEW WEEKS AGO. WE WERE SCHEDULED TO HAVE MORE HEARINGS BUT THEY HAVE

-10-

BEEN POSTPONED AS OUR COMMITTEE IS DEEPLY INVOLVED IN CRITICAL ISSUES OF THE DEBT LIMIT CEILING, TAX REFORM AND THE TRADE BILL.

THERE HAS BEEN NO DATE SET FOR RESUMPTION OF NATIONAL HEALTH INSURANCE HEARINGS. BUT I BELIEVE IT WOULD BE DIFFICULT TO RESUME IN THE NEAR FUTURE, IN VIEW OF THE OTHER DEMANDS ON OUR COMMITTEE'S TIME.

IN THE HOUSE THE HEARINGS ON NATIONAL HEALTH INSURANCE BEGAN IN APRIL AND HAVE CONTINUED ONE DAY A WEEK EVER SINCE. THEY ARE EXPECTED TO LAST THE REST OF JUNE AND PROBABLY INTO JULY.

-11-

THE OTHER FOUR DAYS A WEEK THE WAYS AND MEANS COMMITTEE HAS BEEN WRITING A TAX REFORM BILL.

OUTLOOK FOR LEGISLATION

IT WAS INTERESTING TO NOTE THAT LAST FRIDAY, JUNE 7, CHAIRMAN WILBUR MILLS WAS AT THE HEARINGS FOR THE FIRST TIME SINCE APRIL. AS YOU MAY KNOW, THERE HAS BEEN A LOT OF SPECULATION THAT THE CONGRESS JUST MIGHT PASS A BILL -- PERHAPS LIKE THE LONG-RIBICOFF BILL -- WHICH WOULD PROVIDE PROTECTION AGAINST CATASTROPHIC EXPENSES ONLY. THE THEORY HAS BEEN THAT IF THIS WERE ACCOMPLISHED DURING THE CURRENT SESSION, THEN PERHAPS THERE WOULD NOT BE ANY HEALTH INSURANCE LEGISLATION IN THE 94TH CONGRESS.

-12-

AS YOU KNOW, SOME SO-CALLED POLITICAL EXPERTS ARE PRE-  
DICTING AN OVERWHELMING LIBERAL BIAS IN THE NEW CONGRESS.  
AND SOME OF THE MORE EXTREME PREDICTIONS ARE THAT THIS  
LIBERAL BLOC WOULD THEN PUSH THROUGH LEGISLATION THAT WOULD  
MAKE EVEN THE FLOOD OF GREAT SOCIETY LEGISLATION IN THE  
1965-66 PERIOD SEEM PALE BY COMPARISON. OF COURSE THE MEANY-  
KENNEDY CRADLE-TO-GRAVE NATIONALIZED MEDICAL PLAN IS GIVEN A  
PROMINENT PLACE IN THIS PICTURE.

BUT THE INTERESTING THING ABOUT THE SPECULATION OVER  
WAYS AND MEANS ONLY REPORTING OUT A CATASTROPHIC PROTECTION



-13-

BILL IS THAT CHAIRMAN MILLS SHOWED UP LAST FRIDAY -- AS I SAID -- AND PROCEEDED TO COMMENT THAT CATASTROPHIC PROTECTION IS A FINE THING, BUT HOW CAN YOU BUILD A ROOF BEFORE YOU BUILD THE FLOOR AND WALLS? THIS CERTAINLY THREW SOME COLD WATER ON THOSE WHO SAID WE WOULD HAVE JUST A CATASTROPHIC INSURANCE BILL THIS YEAR. ACTUALLY, I BELIEVE IT IS STILL TOO EARLY TO SAY EXACTLY WHAT WILL HAPPEN.

AS FOR MYSELF, I JOINED IN INTRODUCING THE LONG-RIBICOFF BILL LAST OCTOBER, BECAUSE AT THAT TIME IT WAS THE BEST HOPE OF OVERCOMING THE LEGISLATIVE INERTIA AND BEGINNING A SEARCH

-14-

FOR A CONSTRUCTIVE CONSENSUS ON NATIONAL HEALTH INSURANCE. I BELIEVE IT ACHIEVED THAT GOAL, AND THE INTRODUCTION OF TWO NEW MAJOR PLANS HAS CERTAINLY CONTRIBUTED TO THE DIALOG.

I AM ALSO PLEASED TO BE A SPONSOR OF THE AMA MEDICREDIT BILL AGAIN THIS YEAR. WITH ITS 185 SPONSORS IT IS CLEARLY A LEADER IN THE CONGRESS. BUT THIS DOES NOT MEAN IT -- OR ANY OTHER BILL -- WILL BE ENACTED AS IT WAS INTRODUCED. WE ARE HOPEFUL, HOWEVER, THAT STRONG SUPPORT FOR THE PRINCIPLES THAT THE MEDICREDIT BILL IS BASED ON WILL BE INCORPORATED IN ANY LEGISLATION WHICH FINALLY PASSES CONGRESS. AND I BELIEVE THERE IS WIDESPREAD SUPPORT FOR THESE PRINCIPLES -- WHICH IN THE FINAL ANALYSIS BOIL DOWN TO BASIC REASONABLENESS AND COMMON SENSE.

-15-

BASIC PRINCIPLES

FIRST, IS THE IDEA THAT THE AMOUNT OF GOVERNMENT HELP SHOULD BE BASED ON THE NEED OF THE INDIVIDUAL PATIENT OR FAMILY. ALMOST EVERYBODY RECOGNIZED THAT WE CANNOT AFFORD SOME RADICAL BILL LIKE THE ONE LABOR IS PROMOTING WHICH WOULD COST \$60 OR EVEN \$80 BILLION A YEAR TO BEGIN WITH.

THE SECOND PRINCIPLE IS THAT THE BENEFITS SHOULD BE COMPREHENSIVE AND INCLUDE PROTECTION AGAINST CATASTROPHIC ILLNESS.

-16-

THE THIRD VERY IMPORTANT PRINCIPLE IS THAT WE BUILD ON THE BEST OF THE PRESENT SYSTEM. SOME WOULD HAVE US DESTROY THE WHOLE PRIVATE HEALTH SECTOR AND REPLACE THE HUNDREDS OF THOUSANDS OF JOBS IN THESE PROFESSIONS AND ASSOCIATED FIELDS WITH HUNDREDS OF THOUSANDS OF GOVERNMENT CLERKS.

THE FOURTH IMPORTANT PRINCIPLE IS THAT YOU AND YOUR PATIENTS MUST BOTH HAVE A CHOICE OF HOW YOU DELIVER CARE AND WHERE THEY RECEIVE CARE. I DO NOT BELIEVE IN A BILL WHICH WOULD USE FEDERAL DOLLARS TO PUSH ONE FORM OF PRACTICE OVER ANOTHER.



-17-

SUPPORT FOR HMO CHANGES

THESE ARE IMPORTANT PRINCIPLES, AND IN MANY RESPECTS -- PARTICULARLY WITH REGARD TO REDUCING COSTS AND AVOIDING UN-NECESSARY INTERFERENCE WITH THE DECISIONS OF DOCTORS AND PATIENTS -- I BELIEVE THEY HAVE APPLICATION BEYOND THE ISSUE OF NATIONAL HEALTH INSURANCE.

AS YOU MAY REMEMBER, I SUPPORTED A NUMBER OF AMENDMENTS TO THE KENNEDY HMO BILL LAST YEAR WHICH HAD THE PRACTICAL EFFECT OF REDUCING THE TOTAL PRICETAG FROM THE \$5.2 BILLION, THREE-YEAR PROGRAM FIRST PROPOSED BY SENATOR KENNEDY TO A \$75 MILLION A YEAR PROGRAM WHICH FINALLY PASSED. WE CUT THE KENNEDY HMO BILL 85 PERCENT AND ELIMINATED VIRTUALLY ALL THE SUBSIDIES

-18-

AND CONSTRUCTION MONEY THAT HE TRIED TO PUT IN IT. WE  
ELIMINATED, FOR THE MOST PART, THE PARTS IN HIS BILL WHICH  
WOULD HAVE HAD THE FEDERAL GOVERNMENT SUBSIDIZE A FORM OF  
PRACTICE TO COMPETE WITH YOU IN PRIVATE PRACTICE -- AND USE  
YOUR TAXES FOR THE SUBSIDY. PERHAPS WE DID NOT CUT DEEPLY  
ENOUGH. BUT THE BILL WHICH PASSED WAS A VAST IMPROVEMENT  
OVER THE ONE WHICH WAS REPORTED FROM THE SENATE LABOR AND  
PUBLIC WELFARE COMMITTEE.

-19-

MEDICAL MANPOWER NEEDS

TURNING TO ANOTHER POINT, I BELIEVE OUR EXPERIENCE WITH MEDICARE AND MEDICAID HAS SHOWN THAT ANY FUTURE FEDERAL HEALTH LEGISLATION IS GOING TO HAVE A DECIDED EFFECT ON THE NEED FOR MANPOWER. IT IS APPROPRIATE THEREFORE THAT THE CONGRESS IS TAKING ACTION TO EXTEND THE FEDERAL PROGRAMS WHICH HELP MEDICAL SCHOOLS AND MEDICAL STUDENTS. YOU KNOW THE GREAT PROGRESS THAT HAS BEEN MADE IN THE LAST SEVEN YEARS -- WE HAVE MOVED FROM 89 TO 114 MEDICAL SCHOOLS AND FROM 33,000 TO 50,000 MEDICAL STUDENTS. AND WE HAVE DONE IT WITH A MINIMUM OF FEDERAL INTERFERENCE.

-20-

UNFORTUNATELY ONE OF THE BILLS WHICH WOULD EXTEND THIS WORTHY PROGRAM OF FEDERAL ASSISTANCE WOULD ALSO IMPOSE STRINGENT NEW FEDERAL CONTROLS -- CONTROLS OVER MEDICAL STUDENTS AND GRADUATES -- AND FEDERAL DICTATION OF HOW MANY RESIDENTS THERE WOULD BE AND EVEN WHERE THESE RESIDENTS WOULD BE. AS YOU MAY KNOW, THESE NEW PROPOSALS ARE FOUND IN H.R. 14357 WHICH IS SPONSORED BY ANOTHER MEMBER OF THE KANSAS CONGRESSIONAL DELEGATION.

I DO NOT POSE AS AN EXPERT ON MEDICAL MANPOWER. BUT I SERIOUSLY QUESTION THE INTRODUCTION OF SUCH RADICAL FEDERAL CONTROL OVER ANY FORM OF PROFESSIONAL EDUCATION AND THE FREEDOM OF CHOICE THAT HAS TRADITIONALLY BEEN GUARANTEED TO THOSE WHO UNDER-



-21-

TAKE CAREERS IN THE HEALING ARTS. THEREFORE, I FOUND THE AMERICAN MEDICAL ASSOCIATION'S COMMENTS ON THIS PROPOSAL MOST PERSUASIVE.

STRONG CRITICISM FROM RESPECTED ANALYISTS

IN CONGRESSIONAL TESTIMONY ON THIS BILL, AN AMA WITNESS DESCRIBED ITS PROVISIONS IN THIS WAY:

"IT BURDENS THE INTENT OF THE PROGRAM FAR BEYOND THE ORIGINAL PURPOSE."

"WE DO NOT BELIEVE THIS IS AN APPROPRIATE EXPANSION OF THE NATIONAL HEALTH SERVICE CORPS AND COULD, IN FACT, HINDER THE PROGRAM'S POSSIBLE SUCCESS."

-22-

"IT IS FRAUGHT WITH QUALITATIVE AND QUANTITATIVE DIFFICULTIES."

"THE EXTREMELY BROAD AND PREEMPTORY CONTROLS PLACE UNREALISTIC RESPONSIBILITIES ON NATIONAL AND REGIONAL COUNCILS."

AND FINALLY THE AMA SAID "THE PROPOSED CERTIFICATION, A PUBLIC UTILITY TYPE CONTROL OF MEDICAL EDUCATION AND THE DISTRIBUTION OF PHYSICIANS, IS UNWISE, UNREALISTIC, AND UNWORKABLE."

AND JUST AS AN INDICATION THAT THE AMA IS NOT ALONE IN ITS VIEWS, I BELIEVE IT IS ILLUMINATING TO NOTE THAT THESE "UNWISE UN-REALISTIC AND UNWORKABLE" PROVISIONS ARE CONTAINED IN A BILL WHICH IS SPONSORED BY ONLY ONE MEMBER OF THE HOUSE HEALTH SUBCOMMITTEE. AND THE REASONS FOR THIS LONELY STATUS ARE PERHAPS EXPLAINED BY

-23-

THE FACT THAT THIS ONE MEMBER'S BILL WAS DESCRIBED THIS PAST WEEK BY THE WIDELY RESPECTED NATIONAL JOURNAL REPORTS AS ONE WHICH WOULD "RADICALLY ALTER THE FUTURE DIRECTION OF HEALTH MANPOWER POLICY."

FORTUNATELY, FOR THE LEGISLATIVE OUTLOOK, OTHERS HAVE SPONSORED BILLS WHICH ARE MORE REALISTIC, MORE WORKABLE AND WISER. SO I WOULD HOPE THAT AMERICA'S MEDICAL MANPOWER NEEDS CAN BE MET IN A RESPONSIBLE, EFFECTIVE MANNER AT THE EARLIEST POSSIBLE DATE.

I FULLY CONCUR WITH THE WALL STREET JOURNAL'S EDITORIAL COMMENT OF THIS PAST THURSDAY ON HEALTH MANPOWER PRIORITIES:

-24-

"NOR IS THERE ANY NEED FOR HEALTH MANPOWER LEGISLATION THAT PURPORTS TO REMEDY SPECIFIC SHORTCOMINGS BY CHANGING THE DIRECTION AND SCOPE OF AMERICAN MEDICINE. REPLACING AN IMPERFECT BUT WORKABLE PRIVATE SYSTEM WITH A FEDERAL MODEL, ENCUMBERED WITH ALL THE SHORTCOMINGS OF ANY BUREAUCRATIC SYSTEM, HARDLY STRIKES US AS AN ENLIGHTENED SOLUTION."

TO THIS I WOULD ADD A HEARTY "AMEN."

MORE FAMILY DOCTORS NEEDED

OF COURSE, I REALIZE THAT, ESPECIALLY IN THIS GROUP, THERE IS STRONG INTEREST AND EMPHASIS ON THE PRODUCTION OF MORE FAMILY PHYSICIANS. IN A STATE SUCH AS KANSAS WITH ITS VAST RURAL AREAS



-26-

THE RURAL HEALTH CARE DELIVERY ACT

AND IN RECOGNITION OF THIS NEED, I AM PLEASED TO BE THE AUTHOR OF S. 2511, WHICH WOULD GIVE SPECIAL EMPHASIS TO THIS LAST POINT BY INITIATING DEMONSTRATION PROJECTS AND PROGRAMS TO IMPROVE RURAL HEALTH CARE DELIVERY.

THESE AND OTHER STEPS CAN AND MUST BE TAKEN. BUT THEY CAN BE ACCOMPLISHED WITHOUT MAKING MEDICINE A PUBLIC UTILITY.

PENSION REFORM

AS A FINAL NOTE, I WOULD BE REMISS IN REPORTING ON LEGISLATION IF I DID NOT MENTION PENSIONS. WE EXPECT THAT THE LONG AND COMPLEX CONFERENCE ON PENSION REFORM LEGISLATION WILL BE ABLE TO

-27-

RESOLVE THE DIFFERENCES BETWEEN THE HOUSE AND SENATE VERSIONS,  
AND THERE IS EVERY REASON TO THINK THAT THE CONFEREES WILL REPORT  
OUT A BILL WHICH WILL INCLUDE THE INCREASE IN THE LIMITS ON KEOGH  
PLANS FOR THE SELF-EMPLOYED. THE PRESENT ANNUAL CONTRIBUTION  
LIMITS OF 10 PERCENT OR \$2500 WILL BE RAISED TO 15 PERCENT OF  
\$7500.

THE SAME BILL WILL PROVIDE LIMITS FOR PROFESSIONAL CORPORATIONS --  
LIMITS WE HAVE KNOW WERE COMING SINCE THE 1969 TAX AMENDMENTS. YOU  
MAY REMEMBER THAT AT THAT TIME THERE WAS A MOVE MADE TO IMPOSE KEOGH  
LIMITS ON PROFESSIONAL CORPORATIONS: ALTHOUGH THE SENATE, WITH

-28-

TREASURY DEPARTMENT SUPPORT, REJECTED THIS EFFORT. THE TREASURY DEPARTMENT DID, AT THAT TIME SAY THEY WOULD SUBSEQUENTLY SEND THEIR RECOMMENDATIONS TO THE HILL.

THEY WERE A LONG TIME COMING, BUT WE FINALLY GOT THEM. AND THE PENSION BILL IS NOW IN CONFERENCE WITH CEILINGS ON PROFESSIONAL CORPORATION PENSIONS. THESE LIMITS ARE MUCH DIFFERENT FROM THE PROPOSAL OF SEVERAL YEARS AGO. IT IS A COMPLICATED FORMULA, BUT IT WORKS OUT TO ALLOWING THE CORPORATION TO SET ASIDE ENOUGH TO GENERATE A PENSION EQUAL TO THE LESSER OF THE ACTUAL INCOME OF THE EMPLOYEE OR \$75,000 PER YEAR.

-29-

THESE PROVISIONS CAME OUT OF SENATE FINANCE COMMITTEE.  
CERTAINLY THEY ARE FAIR, AND THEY SEEK TO BRING PROFESSIONAL  
CORPORATIONS' PLANS INTO A COMPARABLE POSITION WITH THOSE OFFERED  
BY OTHER CORPORATIONS SUCH AS THE BIG NATIONAL COMPANIES. AND  
IN LIGHT OF THESE CHANGES IT WAS ONLY FAIR THAT AT THE SAME TIME  
THE KEOGH BENEFITS BE LIBERALIZED.



-30-

CONCLUSION

THIS HAS BEEN A BUSY SESSION, AND THE REST OF THE YEAR IS SHAPING UP AS MORE OF THE SAME.

THE MEDICAL PROFESSION HAS A SIGNIFICANT STAKE IN MUCH OF THE BILLS AND PROPOSALS WHICH ARE PENDING. AND I APPRECIATE THIS OPPORTUNITY TO BE WITH YOU AGAIN AND TO OFFER SOME INSIGHTS INTO THE BUSINESS WHICH IS BEFORE THE CONGRESS.