For immediate release - July 11, 1947

COLUMBUS, OHIO - ENRICH

On NATIONAL HEALTH ACT OF 1947

(6-1200) to the U.S. Senate Committee on Labor and Public Welfare.

For the past several weeks this subcommittee has had the opportunity to obtain all the facts and show opinion on one of the fundamental long-range problems facing this nation -- how to protect and improve the health of our people.

You have come to know as the great need of our people, not only those of low income but the many millions in the middle income groups, for adequate medical care and security against the economic strain of illness. As one of its sponsors I am convinced more than ever that the National Health Insurance and Public Health Act of 1947 provides the only practicable program to deal with the problem.

I shall not burden you with the detailed argument which you can find extensively spread in the testimony of the experts who have appeared before you. I want only to assure you of the convictions that I can express that the national health bill is deeply rooted in the rich soil of American democracy, both as to the objectives it seeks to achieve and in the manner it proposes to carry for their attainment.

It should not be unfairly perturbed by the vicious attacks of its misanthropic enemies that the national health bill is Communitistic and un-American. Every measure for social welfare to improve the lot of the people has been stigmatized with this accusation. In no other case is the charge more palpably false.

Individualism, no doubt, is basic to the American way of life. In some quarters, however, it has been distorted into a doctrine of jungle morality, echoing Cain's boast that he was his brother's keeper. I prefer to believe that the true concept of American individualism is expressed by the Judeo-Christian ethical concept of the worth of the individual and the sacrosanctity of his life, a man's life and that of his wife and children are no less sacred and no less worth saving because he does not happen
to be in the income brackets in which adequate medical care and
facilities can be provided. After these ten years of destruction
of human life, we should indeed experience joy bordering on ecstasy
in dedicating our energies and resources to the alleviation of
pain, fear, and suffering.

Equal opportunity in the pursuit of happiness is
a basic concept of our democracy. The widespread impaired health,
evidenced by the high rejection rates of selective service during
the war, constitutes a denial of the principle to millions of
Americans.

Adequate medical services on the basis of need, not
ability to pay, is a birthright of every American. It is a matter
of right, not charity.

The present system of individual fee for service medical
care is inadequate to assure this birthright to the mass
of our people. It can be secured to them only through the
established insurance principle of distribution of risks promulgated
by government cooperative effort. In the realm of health insurance,
the national health bill implements Lincoln's view that "the
legitimate object of government is to do for a community or people
whatever they need to have done but cannot do at all or cannot do
so well in their separate and individual capacities."

The national health bill is in the groove of American
political tradition in establishing a nation-wide system of
private personal health service benefits and federal grants to
states for expanded health service. It retains the virtue of
national planning and avoids the disadvantages of overcentralisation
by providing for state and local responsibility for operation.
Disease is no respecter of social, local or state boundaries.
Sickness and its incidence are a national problem and can be
traced effectively only on a national scale.
The patient-doctor relationship, too, is treated by the bill in the traditional spirit of American cooperation. It will not be regimented. Far from depriving the patient of his free choice of a physician, the national Health bill will enhance that freedom by making medical care responsive to need rather than to ability to pay. To the mass of our people, particularly in the rural areas, the free choice of a doctor is no mockery. Just as the right to a job is a reality only in an economy of full-employment, so the free choice of a physician can have meaning only when financial and other barriers to medical assistance are removed.

A corresponding increase will occur in the freedom of the physician. His economic position will improve in consequence of the greater demand for his services and the elimination of the many charity patients he now has to treat, liberated from the limiting and irrelevant considerations of the patient's ability to pay, and given impetus by sufficient hospital and research facilities, the physician's art and science will reach yet undreamed of heights of achievement. The harnessing of atomic energy and other wartime projects have shown that what can be accomplished by freeing man's creative energies. If we can mobilize for purposes of destruction, why not to eliminate cancer and the other scourges that afflict mankind? There is enough idealism in the rank and file of the medical profession to welcome an era when they can truthfully say that they give of their best and serve not the few but all who are in need of their administrations.

A nation's greatest asset is its people.

To the preservation and improvement of this asset the national Health bill addresses itself in the traditional American way of doing things. On the present world stage the eyes of the people everywhere are upon America to observe whether we can provide security, the new imperative of our age, within the framework of freedom and democracy. If we are to emerge successful in the titanic struggle of political ideas and systems, the national Health bill is a must. Let us pass it without further delay.