

In supporting vital legislation such as the nuclear test ban treaty, civil rights and voting rights, tax and excise bills, the Housing and Urban Development Act of 1965, the antipoverty programs, etc., the National Council of Senior Citizens has not merely sought special favors for older people. It has promoted the interest of senior citizens in harmony with the national interest.

And we have asked to make this statement today to support H.R. 9256 and the identical bill introduced by Mr. Gonzalez, because we believe this legislation is another much-needed step along the road to achieving a better life for all Americans—of all ages.

We believe that it is the duty of government to assist its citizens to secure and enjoy those rights to which they are entitled in a free society but which they cannot procure and possess unaided.

We also believe that health is a right and that a state of health is in the public interest. A healthy population is a vigorous, dynamic and creative population and therefore, for its own sake, a government should take appropriate steps to assure the healthiest possible citizenry.

It was a natural development that legislation for hospital development came into being. Because the construction of health facilities was financed with public money, the quality of services in them was a concern to all interested citizens, and there was increasing demand that these services be of high quality.

The enactment of the social security amendments of 1965 which have become popularly known as medicare is, of course, a giant step in the direction of providing many of our citizens with an opportunity to achieve the right of health.

The National Council of Senior Citizens is convinced it may take many years to develop the best kind of comprehensive programs to meet the health rights of all our people, but the programs which begin on July 1, 1966, represent perhaps lifegiving benefits to millions of older people who are unable to carry the burden of serious illness unassisted.

But we cannot totally ignore the health rights of those Americans who are neither aged nor indigent. Government must continually seek to close the gaps in availability and accessibility of quality health services for all citizens.

A program to assist voluntary associations in the construction and equipping of facilities for comprehensive group practice of medicine, such as provided for in H.R. 9256, can importantly help in bringing good medical care to all our people.

No one today denies the efficiency and effectiveness of group practice in delivering high quality health care. More than 2,000 group practice organizations exist in all States—plus nearly 60 dental group practices. Some offer comprehensive prepayment plans, others are on a fee-for-service basis.

But one of the chief obstacles to the development of these plans has been the difficulty of securing financing on reasonable terms to meet the high cost of constructing facilities and providing needed equipment for essential health services. When such financing is granted under the terms of this bill, more prepayment plans will find it possible to open up in communities which desperately need more readily accessible high quality health care.

The expansion of group practice facilities will importantly help to direct emphasis on prevention in the health programs of the future—and eventually help us turn back the tide of rising health care costs.

The ready availability of group practice facilitates the education of citizens to the advantages of preventive measures, early diagnosis and treatment. More and more will come under treatment in the early course of their illness.

ON SENIOR CITIZEN HOUSING

While addressing itself to this Housing Subcommittee the National Council of Senior Citizens would also like to express its views on what it considers serious limitations in the Housing Act of 1965. We would also like to make further suggestions concerning housing for the elderly.

First, we support wholeheartedly, the President's request for appropriation of the full \$30 million authorized for this fiscal year to implement the rent supplement program. We earnestly request this subcommittee to support the President with all the strength it can muster in this crucial program.

We urge removal of the limit imposed by the experimental portion of the rent supplement program in the Housing Act providing that only up to 5 percent of the funds appropriated for rent supplements can be used for section 202 and section 231 housing.

The limited funds available if appropriated under current authorizations would meet only a small part of the need among elderly residents of "202" projects who