of foreign social security officials and through technical assistance programs abroad. SSA officials have also participated in a number of advisory missions to other countries.

(*g*) *With nonprofit organizations or institutions.*—In the administration of the disability program, SSA has continuing liaison with the American Medical Association and with State and county medical societies to discuss the needs of the disability insurance program. In these contacts the primary concern is to improve the understanding of practicing physicians about the evidentiary requirements of the disability determination process as well as the philosophy and objectives of the disability program. Since the family physician is the primary source of medical evidence relating to the claimant's disability it is vital to the effective administration of the program that the attending physicians cooperate fully and that they understand what is needed for a disability determination. SSA staff has visited the AMA headquarters in Chicago to discuss these problems, and AMA officials have attended meetings sponsored by SSA. An information film directed at physicians was jointly produced with the AMA, and SSA articles have been published in the AMA Journal and in State journals. Since the beginning of the disability program a medical advisory committee made up of nongovernmental consultants in the medical and related fields has been helpful. The original medical adjudicative guides were cleared with and approved by this committee, and subsequent revisions have been discussed and cleared at other meetings of the same committee. The committee has been consulted on policies and procedural proposals affecting the medical profession. The membership of the committee has changed during the 10 years of its existence; the present arrangement is for a rotating membership. SSA also has liaison with the American Hospital Asociation in discussions of medical evidentiary needs for claimants who have been hospitalized.

The health insurance amendments authorize the Secretary of Health, Education, and Welfare to enter into agreements with such private organizations as are nominated by groups of providers under which the organization will determine (subject to review) the amount of reimbursement to be made to providers and will make the payments. By agreement, such organizations may perform numerous other administrative services for the Government in connection with the program. Also, in the supplementary medical insurance program, there is provision for contracting with organizations lawfully engaged in the health insurance business to administer the program.

Under the legislative language, such nonprofit organizations as Blue Cross, Blue Shield, and various other types of mutual group health insurance organizations might qualify for significant administrative roles in implementing the health insurance program.

The SSA collects a wealth of data which it makes available, on a very limited basis, for research uses by other organizations, private as well as public, under the regulations set up to maintain the confidentiality of information relating to individuals.

The SSA supports research by people outside Government through the cooperative research and demonstration grants program. The program provides for grants, contracts, or cooperative arrangements with universities and other nonprofit agencies, public and private, for the support of research or demonstration projects that relate to