

the prevention or reduction of dependency, that aid in the coordination of planning between private and public welfare agencies, or that will help improve the administration and effectiveness of the SSA.

(h) *With business enterprises.*—Commercial insurance companies engaged in the health insurance business may qualify as intermediaries under the basic hospital insurance program under the supplementary medical insurance plan (as indicated in (g), above).

Hospitals, nursing homes, home health services, and medical laboratories are potentially eligible to participate as providers of services in the health insurance program even though operated as profitmaking private business enterprises.

The health insurance legislation creates the possibility of continuous development of cooperative and coordinative action between the public and private sectors in providing health insurance benefits to the elderly.

(i) *With others.*—The law provides for the periodic appointment of an Advisory Council on Social Security to review the status of the trust funds in relation to the long-term commitments and effectiveness of the program. The councils are made up of representatives of organizations of employers, employees, self-employed people, and the general public.

Specific provision is made in the health insurance amendments for the appointment by the Secretary of a Health Insurance Benefits Advisory Council and a National Medical Review Committee. The membership of the Health Insurance Benefits Advisory Council will include persons who are outstanding in fields related to hospital, medical, and other health activities. The Council will advise the Secretary on matters affecting the health insurance program. The membership of the National Medical Review Committee shall include individuals representative of organizations and associations of professional personnel in the field of medicine or related fields, and at least a majority of the members shall be physicians. The Committee will study the utilization of hospital and other medical care and services for which payment may be under the health insurance amendments and may make recommendations for changes in the administration of the program. Because of the nature of these functions it will be some time before this Committee is constituted.

In addition to the coordination specifically required by the law in establishing these two advisory groups, consultation with professional groups interested in the provision of medical care will proceed on a broad base through continuous contacts with professional groups and associations of groups, such as the American Medical Association, the American Hospital Association, the Life Insurance Association of America, the Blue Cross Association, the American Association of Hospital Accountants, and numerous others representative of physicians, nurses, hospitals, nursing homes, elderly persons, health insurance organizations, etc.

Continuous interchange of views between the SSA and these various interested groups creates the possibility of a vast, coordinated effort to achieve maximum results from the health insurance legislation on behalf of elderly citizens.

An Advisory Committee on Research Development, composed of outstanding social scientists, provides advice on the development of the research program and its relationship to the research activities