

Mr. GORDON. Excuse me, Dr. Apple, you mentioned companies. How about organizations?

Dr. APPLE. As far as we can see, this entire campaign, obviously, is well-orchestrated by both the PMA and the NPC.

Obviously, in any national organization, the membership of organizations have to follow, or will follow, the basic policy of the organization in carrying out this kind of a communications effort. It would be difficult for us to believe that all of this happened coincidentally and accidentally when the pronouncements starting with December 19, 1973, were initiated by PMA originally in its attack on the program. So we look at this as just being a followthrough.

And, of course, the committee already has the testimony of at least the PMA. I do not know that NPC has ever testified on this matter.

Mr. GORDON. Is there any evidence that the NPC, which is coming after you, has participated in this program?

Dr. APPLE. We know from reports we have received from pharmacists in the field of speech efforts by NPC which have conveyed impressions to pharmacists that the MAC program is going to put them out of business—that HEW is going to destroy them. As I have indicated on the next page of my testimony, we have never witnessed a more intensified propaganda campaign on any issue, at least in my 25 years of personal experience, on any controversial issue; especially unidentified propaganda in terms of everything distributed on unidentified white paper.

We had a situation in Texas where letters were distributed—I think it was by Wyeth—to physicians and to pharmacists. By mistake the sales representatives were distributing the physicians' letter to pharmacists and the pharmacists' letter to physicians. And the stories were very interesting. I believe the committee has those letters on file. If not, we will certainly obtain them for the committee.

Senator HATHAWAY. Thank you.

Dr. APPLE. At APhA we make a sincere effort to separate fact from fiction. Our understanding of the facts has, as I indicated, led us to conclude that the basic MAC policy is still worthy of support, while the regulations proposed to implement that policy are worthy of substantial criticism, and we have not hesitated to criticize in an effort to help get this program on the right track.

Senator, our frustration over the delay in implementing the MAC program is compounded by our sincere belief that this program can be simply and effectively implemented without economic disaster or disruption of professional practice judgments in HEW will only face up to a few basic principles. It is to these principles that I will now address myself.

Pharmacists, both as health care providers and as taxpayers, want a pharmaceutical service benefit in federally supported health care programs that will maximize benefits to the public and minimize program costs; consistent with high quality care and fair treatment of both the drug industry and the pharmacy profession. We do not want either the quality or quantity of medical care reduced.

It is clear to APhA that to minimize total program costs, administrative costs of the programs themselves must be minimized. It is absolutely unconscionable for anyone to permit vitally needed health