

Mr. Bernard Harrison is director of AMA's Legislative Department, and Dr. William Ruhe is director of AMA's Division of Medical Education.

The three parts of H.R. 15758 affect three programs of special interest to the American Medical Association. I will comment on the first part which relates to the extension of the regional medical program. The second part proposes an extension of the program for grants for health services for migratory workers. The third part proposes a new program for alcoholic and narcotic addict rehabilitation. Dr. Brill will provide the subcommittee with the association's views on the latter two subjects.

STATEMENT OF DR. BLAND W. CANNON

Dr. CANNON. One hundred and twenty-one years ago, as a result of the concern of the profession with problems relating to the quality of medical education and health care, the AMA was founded. Since that day in 1847, organized medicine has encouraged methodologies of health care which it believes will best provide improved health care for all patients.

The increased longevity which the American people enjoy today is a tribute to medical advances and their application to the health care of the American people. The American physician today is prepared to render the best medical care in the world because he is a product of a constantly improving pattern of the finest medical education and research; because his opportunities for postgraduate education are unexcelled anywhere; and because he has been armed with matchless and ever-advancing diagnostic and therapeutic techniques.

I have made the previous statement, Mr. Chairman, because it should be clear that while we constantly strive for improvement so that what we have today will be better than yesterday, and what we obtain tomorrow will still be better than today, we must not lose sight of the remarkable accomplishments that have been made in health care by our medical educators, medical researchers, and practicing physicians.

In July 1965, when Dr. James Z. Appel, who was then president of the association, appeared before the full Interstate and Foreign Commerce Committee to testify on the bill to establish the regional medical program concept, he voiced the association's concern with certain provisions of the bill then before the committee. Because of the amendments made by the committee, much of our concern was quieted. RMP began auspiciously and, since that time, continues to promise a hopeful future.

But there are still some who would like to see the regional medical program as an instrument by which the organization and delivery of health care to the American people could be changed in some revolutionary manner. Importantly, this does not appear to be the view of those in the administration charged with the implementation of Public Law 89-239.

Dr. Dwight L. Wilbur, president-elect of the AMA, in addressing the conference-workshop on regional medical programs on January 18, 1968, noted that on an earlier occasion Dr. R. Q. Marston, director of the regional medical programs, had said that RMP faces the challenge of influencing the quality of health services without exercising Federal