

the full cost, if a patient has the means to pay for such service; certificates that a veteran is unable to pay should be investigated thoroughly to determine the true ability to meet the cost of hospitalization. Further that terms of coverage of all prepaid medical associations, plans and companies be amended by action of the legislatures, supervisory bodies or membership, so as to provide payment to VA hospitals for non-service-connected treatment on the same basis as payment to private voluntary and public hospitals.

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Resolution—Report of U.S. Advisory Commission on Veterans Benefits

AVC's view has always been that military service is an obligation of citizenship. It should not automatically entitle all ex-servicemen to a lifetime of governmental largesse.

AVC regrets that upon examination of the Report of the U.S. Veterans Commission on the Veterans Benefits System it is compelled to reject it—despite some few worthwhile points—because it basically reiterates the position of the professional veterans that the simple act of service in the armed forces is sufficient to endow veterans with a permanent position as a privileged class in the nation.

AVC recognizes and supports the justifiable claims of aid and rehabilitation on the part of those veterans whose service-connected disabilities have placed them at a disadvantage.

Veterans without service-connected disabilities should, upon demobilization, be eligible for benefits under a broad G.I. Bill of Rights. In deference to their lost time, interruption of education and careers and their special contribution to their nation's welfare, these veterans should receive rehabilitation benefits that would reduce their sacrifices to a minimum and enable them to resume their places in society as quickly as possible.

AVC notes with disfavor that the Commission's report seeks to increase the scope of benefits for all veterans and considers this philosophy as decidedly detrimental to the total citizenry. If a privileged social class of veterans is not to be superimposed upon our nation, the needs of those veterans who may have special problems should be integrated with those civilians with like problems and handled by the new programs designed for all citizens which are being developed and implemented.

Because of the very strong reservations which AVC holds in regard to the tone and recommendations of the Commission's report, it strongly urges that said report not be implemented. Instead, AVC calls for the setting up of a permanent "Board of Review of Veterans Affairs." This Board should not be made up of people supporting the existing system and should not repeat the mistakes which have characterized earlier efforts in this area; for this reason it should be composed of people dedicated to the broad public interest, responsible for reporting only to the President and charged with a continuing searching evaluation.

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Dr. BYRD. We want to thank you, Mr. Chairman and members of the committee, for affording us this opportunity. Our purpose was to express our philosophy and to emphasize the two bills we have presented.

Mr. HALEY. Thank you very much, Dr. Byrd. Are there any questions?

Mr. HALPERN. Mr. Chairman, I don't have any questions but I would like to thank the witness for his very interesting testimony. He has a very realistic program and his committee has contributed much to the enactment of veterans' legislation. I want to commend you, Dr. Byrd, on your presentation.

Mr. HALEY. Any other questions?

Mrs. HECKLER. Mr. Chairman, I would like to ask a question. Could you tell us what is the present name of the hospital in Mississippi that you want renamed?