

SOCIOLOGY

Advise Aid to Sick, Aged

► **BUSINESS** through the Chamber of Commerce of the United States is recommending actions to bring aid to the sick, disabled and aged.

A task force of over a hundred reported extensive recommendations. Among them are:

Government programs should be used only if voluntary and private means cannot adequately meet society's needs.

The maze of programs available should be pieced together in a meaningful way to help the sick, disabled and aged poor.

Communities should plan and organize voluntary medical facilities.

Hospitals should be reimbursed in full for welfare patient costs and free services in order that paying patients will not be overcharged.

The public should be informed about the effect of the abuse and misuse of hospital and other health facilities and services on the cost of medical care.

Home services for the sick and disabled rather than hospital or nursing care should be utilized wherever possible.

An anti-quackery campaign should be conducted and laws tightened to prevent the uneducated, uninformed and the poor from being victimized.

Efficiency committees, including businessmen and community leaders as well as medical and administrative experts, should be established in every large hospital.

Broader health plans and insurance should be encouraged.

Health insurance companies are urged to include deductibles and cost-sharing arrangements in their plans that would deter people from abusing health facilities and services.

Health insurance companies are urged to continue and accelerate efforts to reduce the cost of health care.

Medical research should be encouraged and supported as a contribution to the alleviation of poverty.

Because the poor receive less preventive health care than other income groups, more should be done to help them benefit from medical and health research.

More can be done to rehabilitate disabled people by detecting policies and programs that destroy incentive to seek rehabilitation or divert people from helping themselves.

There should be prompt help for the disabled in order to obtain their earliest return to self-sufficiency.

More should be done to utilize the rehabilitated handicapped.

There should be more and better programs by health insurance companies to cover costs and income loss resulting from long-term illness and disability.

The Social Security Administration is urged to determine whether recent changes in the retirement test are helping the beneficiaries in need.

The current minimum benefit of \$44 a month is too low and the minimum benefit should be changed upward and downward as situations indicate.

All over 65 years of age not now eligible for Social Security retirement benefits should be brought into the program.

Public assistance programs for the aged should assure minimum-decency living standards.

Private pension plans should have continued improvement and growth.

People in retirement should be protected against the adverse effects of inflation.

A program to reduce resistance to employment because of age should be developed.

There should be special attention to early retirement and a study of its social and economic implications.

Studies should seek ways of developing useful and meaningful job opportunities for older people, especially the poor.

• Science News Letter, 89:61 January 22, 1966

MEDICINE

First Hospital Insurance Intermediaries Selected

► **THE BLUE CROSS** Association, the Travelers Insurance Company, and Aetna Life and Casualty were named by Secretary of Health, Education and Welfare John W. Gardner, as the first three intermediaries selected to receive and pay bills under the hospital insurance part of the Medicare program.

• Science News Letter, 89:61 January 22, 1966

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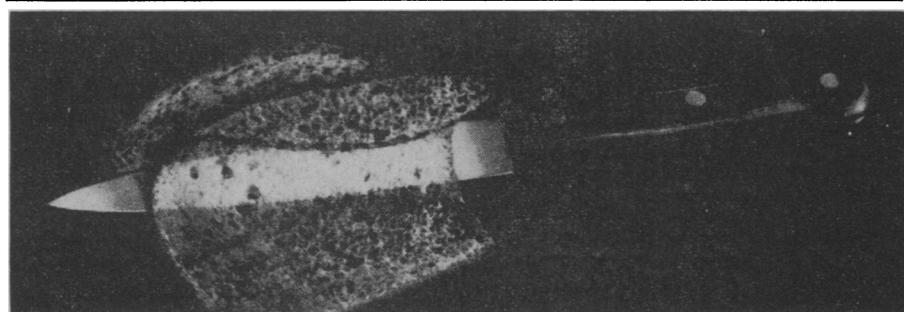
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