

Toward a national policy

The United States is in serious trouble nationally and locally on health-care policies, and concern over the nation's inadequate health-care system is building rapidly. The problem centers around an inefficient health-care delivery system that has been called by some no system at all. Along with the public's protest against rising costs, Medicaid's maladies have grown worse and Congress, disgusted with the enormous costs of government-funded programs, is probing deeper and deeper into the cause.

One solution gathering support seems to be the enactment of a compulsory national health insurance program that would restructure the entire system (SN: 11/15, p. 453).

Fear of so major an upheaval has prompted the Administration to seek a solution of its own. At the request of President Nixon, Secretary Robert H. Finch of the Department of Health, Education and Welfare has expanded a task force on Medicaid to consider what directions and initiatives HEW should pursue toward a national health insurance plan. Its recommendations may be as radical as the others.

Although a number of plans are being advanced, says Arthur E. Hess, deputy commissioner of HEW's Social Security Administration and staff director of the task force, many of them are vague and no one has essentially figured out how much they will cost.

"It will be a long, long battle," he says.

The nation, warns Walter J. McNerney, president of Blue Cross Association and chairman of the task force, should not spend more money for another program that finances care without significantly changing the ways to provide it.

In the first of a series of memoranda on Medicaid being submitted to Finch, the panel has called for a major departure in present policy, stressing that funds for Medicaid and Medicare should be used not only to pay rising hospital and doctor bills, but to provide health services as well. The first 41-page preliminary report concentrates on making the present system more effective, but later reports are expected to recommend radical changes.

The panel contends that Federal programs should assume some of the responsibility for supplying health care because they in fact create the demand. Current Federal programs not only reinforce the existing costly systems, but allow waste and discourage less expensive but more efficient methods of health care.

"Medicaid and related programs such as Medicare should not be merely conduits for funds which reinforce the inadequacies of the existing health care system, but should be used as instruments to improve the system," the report states.

It recommends that five percent of the Federal Medicaid appropriation be made available each year to develop health services—beginning with low-income groups. Based on the present year's expenditure of \$2.6 billion, this would supply \$130 million to establish alternatives to costly hospital care.

With this device, McNerney claims, ongoing programs can be stimulated to be more innovative. "Eventually all private and public programs that influence the demands for health services should set aside a portion of expenditures to improve services," he says.

The report suggests that HEW reward state Medicaid programs that devise efficient methods of helping the poor. As an example, states should experiment with new payment methods for doctors, such as reimbursement for time spent and group-plan payments.

Furthermore, the states should shelve outdated standards that force patients into hospitals. Neighborhood health centers would be less costly, but currently many states bar Medicaid payments for services provided by these centers, such as those supported by the Office of Economic Opportunity. The panel urges that recipients be permitted to choose their own facilities on a flexible basis.

The task force recommends that a new unit be established in the office of the assistant HEW secretary for health and scientific affairs, to set policy for all Federal health programs. As it stands now, the panel charges, many of Medicaid's difficulties stem from its being operated as a "passive payment program under welfare departments."

The current report criticizes the

Medicaid system for being "callous and indifferent." An applicant's eligibility should be simplified by having him fill out a short declaration form, it argues, rather than have caseworkers visit the family as is currently the practice.

McNerney says that the group is also considering a proposal to offer free legal services at certain Medicaid grievance hearings, but that this is only in the early stages.

The study group is composed of doctors, business executives, labor representatives, state Medicaid officials and college professors. Many of its recommendations thus far would require new legislation.

SEISMOLOGY

Underground test detector

Hopes for a successful international ban on the development and testing of nuclear weapons depend on the availability of methods for accurate detection of nuclear explosions on one continent by monitors on another. Means are available to detect nuclear explosions in the air, in the oceans and in space, and all these types of tests are forbidden by the current treaty between the United States, Great Britain and the Soviet Union.

Up to now there has been no sure way to distinguish underground tests from earthquakes, and so underground tests were not covered by the treaty, leaving a serious loophole that has been repeatedly used. The Atomic Energy Commission occasionally announces detection of seismic signals that "indicate" a Soviet test, not because it can tell absolutely that they come from an explosion, but because they come from an area in Siberia where nuclear test facilities are known to be.

Now, however, studies done in a mine in New Jersey give a hope of distinguishing earthquakes from explosions.

The work involves development of a seismograph that is one hundred times as sensitive to long-period seismic waves, those between 20 and 80 seconds per cycle, as any other. The sensitivity comes from isolating the seismometer in a steel tank and rigidly controlling its environment to suppress unwanted influences. The work was done by Drs. Peter Molnar, John Savino, Lynn R. Sykes, Robert C. Liebermann and George Hade of the Lamont-Doherty Geological Observatory and Paul W. Pomeroy of the University of Michigan.

They recorded and analyzed two types of long-period waves, Rayleigh waves and Love waves, generated by all earthquakes, and avowed subterranean nuclear explosions in the West-



Blackstone-Shelburne

McNerney: Money changes.