

APR 20 1971

DATE: April 17, 1971

To : Memorandum for the Record

FROM : John L. Wilson, M.D.

SUBJECT: Luncheon Meeting with Representative Rogers, Chairman of the Subcommittee on Health Legislation, U. S. Congress

During the past few days Representative Rogers and his aide, Mr. Lawton, have been touring the medical schools of California. Dr. Clinton Powell, of the University of California, arranged for Mr. Rogers and Mr. Lawton to come to Stanford for a luncheon meeting on this date. Those present at the meeting besides Dr. Powell, Mr. Lawton and Representative Rogers were Dr. Joshua Lederberg, Dr. Henry Kaplan, Dr. Count Gibson, Dr. David Hamburg, Mr. Robert Lindee and I. The meeting lasted from 12:00 noon to 1:30 p.m. and a wide range of subjects was covered. The following important topics were reviewed with Representative Rogers who indicated that he would welcome memoranda from us with expressions of opinions and advice:

1. Primary Health Care. Dr. Gibson described the Livingston Project briefly and indicated the type of health team approach which he believes appropriate to many communities throughout the nation where physicians' services are absent or inadequate. Dr. Gibson stressed the importance at this time of support to medical schools for the development of educational and research programs in Primary Health Care and made suggestions regarding the manner in which legislation might be formulated for this purpose.
2. Cancer Research Authority. Drs. Kaplan and Lederberg described their respective reactions to current developments at the national level with respect to cancer. There appeared to be general agreement that responsibility for the special cancer program would be most appropriately placed in the National Cancer Institute provided that review, administrative and other procedures of the NCI were modified in such a manner as to facilitate the program and assure its quality.
3. Emergency Health Manpower. Representative Rogers has sponsored emergency health manpower legislation which is now law. He has been visiting U. S. Public Health installations in order to study the future role of the U. S. Public Health Service in providing for health care manpower in the future. Questions were raised regarding financial incentives, long-range impact and the importance of complementary educational and other programs in order to improve the effectiveness of emergency manpower assignments under Representative Rogers' bill.

ROGERS
OFFICE MEMORANDUM • STANFORD UNIVERSITY • OFFICE MEMORANDUM

4. Capitation Support to Medical Schools. Representative Rogers stated that he favors legislation which will provide a capitation sum to medical schools for each medical student admitted. The sum of money currently in the bill is \$3500 per student to be continued throughout the student's medical education. Mr. Rogers recognizes that this sum does not cover the cost of education in medical schools, but he believes that it is a start and an amount likely to be acceptable to Congress. He stated that he did not favor the principle of paying the medical schools a capitation fee on the basis of the number of students who graduate. He raised the question of accompanying the capitation award with formula, project and other types of grants to medical schools in order to provide for flexibility, new developments and increased enrollment incentives. He specifically asked regarding the number of students and faculty at Stanford and regarding the possibility of Stanford increasing the class size. He was informed that increase in enrollment is under study but that no decision on this had been reached.
5. Commission to Study Federal Licensing Standards. Mr. Rogers asked whether it would be advantageous to study the question of federal licensing standards which would, if established, allow for mobility of medical graduates among the states.
6. Nursing Education. This subject was mentioned briefly near the close of the meeting as one in which Mr. Rogers has a special interest. He also asked whether Stanford was developing allied health manpower programs and passing reference was made to the Physician's Assistant Program here.
7. National Study of Health Manpower and Educational Needs. Representative Rogers indicated that legislative programs will be based on studies of this nature. There was some discussion of the advisability of conducting a study at the national level which would result in a comprehensive and long-range plan for medical education and manpower. Mr. Rogers asked whether or not additional medical schools were needed and stated that he was proposing to put a recommendation for five additional medical schools in his bill. The group was very hesitant to answer Mr. Rogers' question regarding the number of medical schools needed in the nation at this time but did in general seem to favor establishing the precedent for federal support for additional medical schools by indicating a specific number of new schools in his bill. It was noted that the Veterans Administration is being considered as the site for new medical schools. Quite clearly Mr. Rogers did not favor the Veterans Administration as the site for the development of medical schools.
8. Health Maintenance Organizations. A point was made to Mr. Rogers regarding the effect of health maintenance organizations on medical centers such as Stanford. It was pointed out that funding principles within the health maintenance organizations may decrease the referrals

to medical centers and in this fashion decrease the quality of medical care available to those patients requiring the resources of the medical centers. Mr. Rogers suggested that catastrophic insurance added to the health maintenance organization concept may provide for ease of referral and reimbursement.

9. Medical Research and Training. A strong point was made that it is vital to continue the support of medical research and postdoctoral training in order that solutions to health problems may be found and academicians prepared. The need for various categories of teachers and investigators was pointed out and the short supply of faculty and practitioners in the fields of radiology and mental health was particularly mentioned. Representative Rogers was encouraged to resist the tendency to decrease the funding for research and advanced training at a time when there is considerable pressure to concentrate existing resources on the health services aspect of the overall health care problem.
10. Contingency Repayment Plan. Representative Rogers is interested in various means of providing support for medical education and specifically mentioned the contingency repayment scheme as under consideration by him. This was discussed briefly and certain of its advantages and disadvantages were reviewed. A point was made of the necessity for such a plan to be on a national scale in order to assure its effectiveness. It was questioned whether implementation of such a plan in a few schools would prove to be of great benefit.

Representative Rogers stated that he would like to bring his full committee to the West Coast for a visit if he could. He was encouraged to visit Stanford with the committee if possible. We should decide whether to extend to Representative Rogers a formal invitation to visit Stanford. Please let me know your views on this matter.

By a copy of this memorandum I am asking those who attended this luncheon to let me know on which of the above topics you will be willing to write a position paper for dispatch to Representative Rogers. Mr. Lindee will coordinate our response.

John L. Wilson
John L. Wilson, M.D.

JLW:sc

cc. → Dr. Joshua Lederberg
Dr. Henry Kaplan
Dr. Count Gibson
Dr. David Hamburg
Mr. Robert Lindee
Executive Committee
Dr. Kathryn Smith