

TASK FORCE REPORT ON

*Federal Medical
Services*

Supplement to
[*Appendix O*]

PREPARED FOR
THE COMMISSION ON ORGANIZATION
OF THE EXECUTIVE BRANCH
OF THE GOVERNMENT

March 1949

Federal Medical Services

A REPORT WITH RECOMMENDATIONS

Letter of Transmittal

WASHINGTON, D. C.
5 March, 1949

Dear Sirs: In accordance with Public Law 102, approved July 7,

the Government submits to the Congress herewith a supplemental report on the Medical Services of the Federal Government.

The Commission's own Report on Federal Medical Services is submitted to the Congress separately.

P R E P A R E D F O R

THE COMMISSION ON ORGANIZATION OF THE

EXECUTIVE BRANCH OF THE GOVERNMENT

The Honorable

The President of the Senate

The Honorable

The Speaker of the House of Representatives

by

The Chairman of the Committee on Federal Medical Services

Acting for the Committee



Federal Medical Services

A REPORT WITH RECOMMENDATIONS

PREPARED FOR

THE COMMISSION ON ORGANIZATION OF THE
EXECUTIVE BRANCH OF THE GOVERNMENT

by

The Chairman of the Committee on Federal Medical Services
acting for the Committee

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Supplemental Report on
AN INDEPENDENT MEDICAL AGENCY

Letter of Transmittal

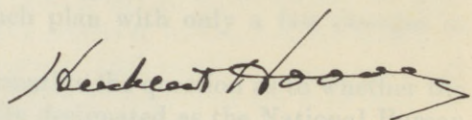
WASHINGTON, D. C.

5 March, 1949.

DEAR SIRs: In accordance with Public Law 162, approved July 7, 1947, the Commission on Organization of the Executive Branch of the Government submits to the Congress herewith a supplemental report on the Medical Services of the Federal Government.

The Commission's own report on Federal Medical Services is submitted to the Congress separately.

Faithfully,



Chairman.

The Honorable

The President of the Senate.

The Honorable

The Speaker of the House of Representatives.

Supplemental Report on

AN INDEPENDENT MEDICAL AGENCY

Proposal to set up a United Medical Service organization as an independent administration reporting to the President, instead of as a bureau of a department of health, education and security.

As our committee had been instructed to assume that any consolidated health organization would be a part of a new cabinet-level department embracing health, education and security, which the Commission would recommend, our main report contained on page I the following statement: "The above instructions excluded from our consideration the question as to whether a separate cabinet department would be established for health alone, as urged by professional groups. However, should this be done, the organization which we are proposing would be adapted to such plan with only a few changes in nomenclature."

Thus, we answered in the affirmative the question as to whether the organization, which we originally designated as the National Bureau of Health, could function as an independent department or agency.

It remains to consider whether such an alternative would be preferable. This question has been fully considered by our committee, and we have reached the conclusion that such an independent organization would be preferable to placing this function in a larger department, as the Commission originally proposed.

In favoring this, we recognize that such an organization would create some additional problems. For example, the administration of health and welfare require close coordination in certain areas. Their separation would require an adjustment of the dual functions of the Children's Bureau and of the Office of Vocational Rehabilitation. These, however, can be solved without undue difficulty.

The advantages of an independent agency are:

a. The health agency, if submerged within a multipurpose department, would be more likely to find its health functions impeded by collateral considerations pertaining to welfare and insurance.

b. Appropriations for health should, if possible, be clearly identified as such and not confused with those for social security, welfare or other social programs.

c. Other departments, such as the armed forces, using the medical service agency would be concerned only with its health functions as such and would thus be protected from any collateral and irrelevant considerations having to do with welfare, social security, etc.

d. The special personnel policies which we have recommended in our main report (sec. XI) could be established with much greater freedom and better success for an independent agency than they could be for one of three bureaus standing side by side in a single department. The new plan would, therefore, greatly facilitate obtaining personnel of the highest quality for the key positions. Under the previous plan, this was a problem which occasioned serious concern in our minds because of the contrast between the great responsibilities of the director general and the heads of his three main divisions (especially the Medical Care Division) and the relatively limited governmental position and pay of the head of a Bureau and the chiefs of its subordinate divisions. We believe, therefore, that the new proposal would go far to solve this problem which we regard as the most serious affecting the original plan.

e. The head of such an independent agency should be assisted by an advisory committee, representing the several departments and agencies which would be the principal users of medical services, such as the Medical Departments of the Army, Navy, and Air Force, the new proposed Department of Welfare, and the Veterans' Administration. With the agency independent, it would be more flexible to adapt its services, with the assistance of such advisory committee, to the needs of the several interested departments and agencies in its medical care facilities, in the training and staffing of professional and technical personnel, in its public health functions, and in other ways.

In considering the establishment of such an independent health agency, our committee again calls attention to a most important consideration pointed out in chapter III (p. 26) of our main report. The agency should be headed by a professional career director general. Under the new plan he should report directly to the President, and should, in the nonmilitary Federal medical organization, be the highest ranking physician in the Government. The supreme medical importance of the position of the Director General should command, irrespective of all other considerations, the ablest medical and health administrator whose services can be obtained by the Government.

For these reasons, the committee views the present proposal for an independent organization as a significant improvement over the previously submitted plan.

For the Medical Services Committee:

TRACY S. VOORHEES,
Chairman.

FEBRUARY 8, 1949.

