

The original documents are located in Box 15, folder “National Medical Association, 1969-1972 (3)” of the Stanley Scott Papers at the Gerald R. Ford Presidential Library.

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Mr. Brown:

These are additional thoughts about ideas that may be of interest to NMA representatives when they meet with the President. NMA will probably have questions about Hill-Burton legislation.

② The Health Maintenance Option - its present status.

They will probably bring up questions about its ~~eff~~ possible effects - a) How will capital be provided to get groups started?

b) What standards and regulations will be developed to determine types of care, comparable quality of care, comparable costs of care?

c) What assurances will be developed that groups that undertake Health Maintenance programs (if the legislation is passed) that they will not select out low medical and financial risk patients from the general population

and therefore leave the care of ② the sick poor to agencies, institutions and organizations that are already in serious financial difficulties and whose facilities are already run down and overloaded.

③ They may ask about the status of the health manpower legislation and F.Y. '71 and F.Y. '72 funding levels.

The legislation for assistance to schools of public health has been extended for 3 years and passed.

The legislation for allied health manpower has been heard by both Senate and House. The Senate has passed a bill to continue the support by the Federal Government, of allied health programs for

③

3 years. Included in the senate passed bill is an amendment introduced by Senator Javits to authorize \$100,000,000 as a one-time authorization, money to be available until expended, to relieve the financial distress of medical schools that are financially overextended because of their response to national programs in:

① Research

② Expansion of student enrollment's including disadvantaged students

③ Undertaking programs to provide medical care to ghetto dwellers, the urban poor, rural poor including OEO programs,

To receive the funds they must give assurance that they will continue the problems.

④

The Nurse Training legislation and the health professions education assistance legislation expires on June 30, 1971. No new legislation has been introduced but reports to congress are being received in DHEW.

This legislation assists schools of:

Medicine

Dentistry

Osteopathic medicine

Optometry

Pharmacy

Podiatry

Veterinary medicine

Nursing
It assists through aid for

passes on
transfers
for recon
funding for
& institutional
① Renovation & reconstruction
② Student aid - Scholarships and programs



—
3. Institutional support -
a formula grant

⑤
④. Project grants for
enrollment increases
curriculum improvement
and revision to give students
experience in ambulatory
care, public health, family
medicine, etc.

| Special emphasis will be
given to student aid,
to educational opportunities
to students from disadvantaged
families, the problems of
financing Meharry and Howard,
the longrange recruitment
and preparation of black students
for the health professions.
If I can be of further help
let me know. Len Fanning (496-3503)



February 2, 1970

MEMORANDUM FOR DWIGHT CHAPIN

FROM: ROBERT J. BROWN

SUBJECT: Delegation from National Medical Association

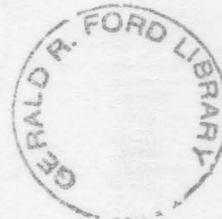
With regard to the proposed meeting of a delegation from the National Medical Association with the President, I think this meeting should be held sometime during the week of February 23 through the 26th.

In all probability, Judge Carswell should be appointed by that time.

Please give me a definite time and date as soon as possible so that I might set it up with the delegation from NMA.

cc: Leonard Garment

RJB:rm



MEMORANDUM

THE WHITE HOUSE

WASHINGTON

January 26, 1970
Monday - 2:00 p.m.

MEMORANDUM FOR:

✓ MR. ROBERT BROWN
MR. LEN GARMENT

FROM: Dwight L. Chapin

RE: Delegation from National Medical Association

The President has approved receiving a delegation from the National Medical Association (8 to 10 doctors) for half an hour to discuss medical needs of Negroes and poor people.

Will you please advise me as to when you think the appointment should be set -- i.e. should it be after Judge Carswell is confirmed?

CC: Mr. John Ehrlichman
Mr. Chuck Colson
Mr. Hugh Sloan, Jr.



HRH 1/21-
10-2

THE WHITE HOUSE
WASHINGTON

January 20, 1970

MEMORANDUM FOR THE PRESIDENT

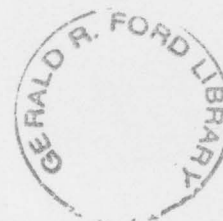
APPOINTMENT: Delegation from National Medical Association (Tab A)
(represents majority of Negro doctors in country)

PURPOSE: To alleviate feelings among the black doctors
that they are being ignored by the Federal government

DATE: open

PRESIDENTIAL PARTICIPATION

- in your office
- 8 to 10 doctors
- half an hour
- discuss medical needs of Negroes and poor
- Secretary Finch and Dr. Egeberg



PREVIOUS PARTICIPATION

Dr. Julius W. Hill, President of the NMA, was present
at a swearing-in ceremony in San Clemente last summer

NOTE: You saw a delegation from the AMA on December 11, 1969

RECOMMENDATIONS

L. Patrick Gray, for Secretary Finch, recommends this meeting since you saw the group from the AMA and because the NMA represents almost all of the Negro physicians in the country. The meeting "could contribute significantly toward the creation of goodwill and give added assurance that we are concerned and interested in the health and welfare of all Americans." (Tab B)

Bob Brown recommends the meeting because this group "can be very helpful to the Administration". (Tab C)

John Ehrlichman recommends it. "He saw the black lawyers with good results." (Tab D)

Len Garment recommends that you see them. (Tab E)

Chuck Colson recommends it. (Tab F)

ACTION

Approve _____ Disapprove _____

BACKGROUND

Dr. Julius W. Hill, President of the NMA, has written requesting that a delegation from this organization, which represents 6000 Negro doctors, meet with you to discuss the health care crisis, particularly as it affects minority groups and the poor. This includes such problems as shortage of health manpower, shortage and maldistribution of health facilities, and the cause of failure of some of our Federal health programs. "I am impressed that such a meeting will go a long way in alleviating some of the apprehension felt by our black doctors and the general feeling among us that we are being ignored by the Federal Government." (Tab A)

DWIGHT L. CHAPIN

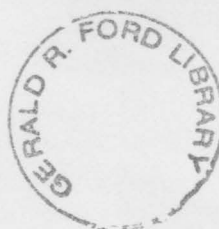


National Medical
Assn
THE WHITE HOUSE
WASHINGTON

2/4/70

Ed Morgan
TO: Garment, Chapin, Bruce, Thad
FROM: Robert J. Brown

For your information.





DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

WASHINGTON, D.C. 20201

OFFICE OF THE SECRETARY

FEB 4 1970

INFORMAL LETTER FOR HONORABLE ROBERT J. BROWN

In accordance with your recent request, I am enclosing our comments on the proposed agenda items submitted to you by the National Medical Association. Please note that we reproduced the agenda items exactly as submitted by NMA and then followed them with our comments.

A handwritten signature in dark ink, appearing to read "Roger O. Egeberg", is written over the typed name and title.

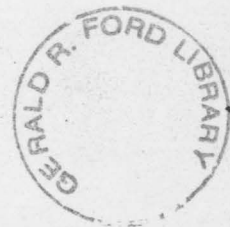
Roger O. Egeberg, M.D.
Assistant Secretary for Health
and Scientific Affairs

Enclosure



NATIONAL MEDICAL ASSOCIATION SUGGESTED AGENDA ITEMS
FOR PROPOSED CONFERENCE WITH THE PRESIDENT

1. Introductory remarks.....Julius Hill, M.D., Pres.
if present, if not, by Emerson Walden,
M.D., Chairman of the Board of Trustees
2. Financial Assistance to Black Medical Students
 - a. The House and Senate Conference Committee on the HEW FY 1970 Budget have agreed to a health professions scholarship budget which is about two million dollars less than what the Nixon Administration sought for student scholarships. Since both scholarships and loans are intended for the financially needy student--and the vast majority of the Black students at Howard and Meharry fall into this class as they for the most part come from economically disadvantaged parents--and since the amount Congress allowed is for scholarships is less than the President sought and would probably cover only 10 percent of the Howard and Meharry students whereas the need is probably about 75 percent--we would urge that President Nixon direct the Bureau of Health Professions, Education and Manpower Training of NIH--which we understand is in charge of this program to shift health professions loan funds to scholarship funds to adequately supply Howard and Meharry students, where the need is so acute and greatest.
 - b. Legal authority does exist for such a transfer by the President's directive.

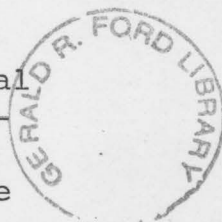


HEW Comment

The Public Health Service Act provides that the Secretary of HEW shall make scholarship grants to schools of medicine, osteopathy, dentistry, optometry, podiatry, pharmacy and veterinary medicine. The amounts of these grants are determined by a formula in the law of \$2,000 times 10 percent of the number of full-time students.

Meharry Medical College received \$60,400 and Howard Medical College received \$72,640 in scholarship grants. At the same time these schools were awarded \$65,373 and \$90,050 respectively in student loan funds. Loan funds were also distributed by a statutory formula and awarded under advance obligation authority.

The Health Manpower Act of 1968 allows a school to transfer Federal funds from its student loan fund supplied under the Federal capital contribution's method to its scholarship award and vice versa. The amount transferred cannot exceed 20 percent of the amount paid to the school unless approved by the Secretary. No authority exists whereby the Secretary can directly increase a scholarship or loan award beyond the amount determined by statutory formula.



No major increase is anticipated for health professions scholarship grants.

3. Funds for the Operation of the "Have Not" Medical Schools

Included in the FY 1970 Appropriations for Medical School Operating Grants is \$11.6 million dollars (eleven point six million) for the so-called "have not" medical schools (i.e., those with the lowest budgets and funding among U.S. medical schools). This money is intended to help schools

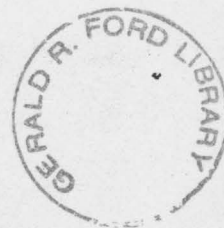
who are in financial difficulties, schools "in trouble", to help them weather the storm. Witness testimony before the Senate indicates that the funds provided would help only about 11 schools, and that for every dollar in grant money appropriated, there were eight dollars in pending applications.

Since Howard and Meharry's level of financial support is so low (Howard spends annually only 37 percent of the national average expenditure for U.S. medical schools of \$11.9 million, and Meharry only 21 percent of such national average), it is recommended that we urge upon President Nixon the necessity of allocating to each school a significant portion of the \$11.6 million which is available for new health professions schools operating grants.

HEW Comment

	<u>Loan Amount Requested</u>	<u>Loan Allocated</u>	<u>Scholarship Allocated</u>
Meharry	\$527,500	\$65,372	\$60,400
Howard	297,000	90,050	72,640

Both Howard and Meharry have been identified by various groups as being included among the "have not" medical schools. It would appear that Meharry has less non-Federal resource than any other medical school in the country. On the other hand, there are 12 schools in the country that report non-Federal expenditures for education, at a level less than those reported by Howard.



At this point of time, both of the schools are receiving significant institutional support from the Federal Government. For FY 1968-69, the figures are as follows:

Howard

Basic Institutional support	\$237,500
Special Project Support	400,000

Meharry

Basic Institutional Support	\$175,000
Special Project Support	744,039

In addition, both institutions have supplemental requests that are currently under review. Howard has requested a supplemental special project of \$200,991, and Meharry has requested a supplemental special project of \$150,051 under the Physician Augmentation Program.

The suggestion that specific funds be earmarked for these two schools deserves comment. Although these two institutions have financial need, they are not alone among the schools of the country. Existing authorities are flexible enough to allow decisions on magnitude of support to be made in full recognition of the need. If specific earmarking were done, it would have the disadvantage of potentially facing a level of support that might not be adequate for the two or the reverse could happen with their support utilizing such portion of total resources that other institutions might be jeopardized.

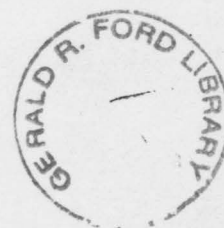


4. New Howard University Hospital

HEW's own testimony before Congress demonstrated that there must be at least a \$10.7 (ten point seven) million dollar increase in excess of the 22.2 million dollars which the House and Senate Committees have agreed upon for the new hospital. However, this amount only reflects the increase in construction costs for the new hospital since the time the request for funds was originally made.

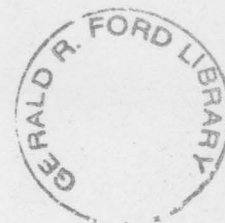
The National Medical Association has stated its belief that the facility, as funded by the House, is inadequate in all respects, the facility containing only some 587,000 some odd gross square feet, NMA cited authoritative sources (such as Dr. Russell A. Nelson, President of Johns Hopkins Medical Center who served as Howard's construction consultant who as early as 1962 recommended that the new 500-bed hospital have 683,466 gross square feet and the Surgeon General's 1964 Architectural Guide for Medical Education facilities which recommend 682,000 gross square feet for a 500-bed teaching hospital) for our conviction that the new hospital was too small by approximately 95,000 gross square feet.

NMA recommends that while it favors, of course, the appropriation of the \$22.2 million, that before any funds were spent for construction that the Appropriations Committee direct the Secretary of HEW to reevaluate the Budget Bureau ceiling on cost in light of the recommendations of hospital planners. NMA seeks the President's aid in seeking redesign of the hospital to provide additional space and additional funding so that Black Medicine can have a hospital which is the equal of other comparable facilities to enable it to perform its function in the training of physicians to care for such a large segment of the economically disadvantaged in our population.



HEW Comment

The gentlemen seeking the audience with the President represent the National Medical Association but they do not represent Howard University or Freedman's Hospital. More specifically, John A. Kenney, Jr., M.D., who is to be there in his capacity as Chairman of the Medical Legislative Committee of NMA, is a Professor of Dermatology at Howard University. The comments that they are likely to make to the President about the inadequacy of design of the new Howard University Hospital are believed to stem from Dr. Kenney's feeling that there is inadequate provision for his residency program in dermatology.



Plans for the construction of a new hospital at Howard University have had the active involvement of many responsible people over a period of years. Originally, consideration was given to building a new hospital immediately adjacent to the present Freedman's Hospital, but the desirability of having closer proximity to the medical and dental schools and the availability of land, made the Griffith Stadium site more suitable. The time lapse between program delineation and the prolonged discussions that developed with BOB on the one hand and GSA on the other, has been such that the Howard University project has experienced what has been characteristic for many health care facilities. The annual increase in construction costs has meant that the \$22.2 million authorized by the Congress is not enough. The \$10.7 million figure cited by the National Medical Association as being additional funds needed is somewhat above our target. We plan to ask the Congress for a supplemental appropriation of \$7.7 million, which was announced in the budget transmitted to the Congress by the President on February 2.

The NMA comment above deprecates the 587,000 gross square feet that are proposed in the new building and implies that the gross square feet figure contained in our HEW publication is the only satisfactory figure. It is freely admitted that if given unlimited funds Howard University might, if it started afresh, achieve a more adequate facility than the one proposed, but the same can be said of most projects.

The Administrator at Howard University does believe that the present proposal will provide a good teaching hospital and that work should get underway for its construction in as rapid a manner as possible. It would be disastrous to abandon the proposal and start its redesign. HEW would urge that no support should be given to that aspect of the NMA proposal.

5. NMA seeks the President's Aid in the Elimination of Legal Obstacles to the Use of PHS Construction Grants by Howard University, and to the Use of NIH Research Grants to Compensate Principal Investigators at Howard University.

- a. Howard has not shared in any of the approximately \$60 million in Federal Financial Construction Assistance heretofore provided to hospitals in the Washington, D.C. area, nor is it scheduled to do so in the future under P.L. 90-457 legislation authorizing \$78 million in loans and grants to nonprofit private medical facilities in the District of Columbia. There are legal obstacles to this.
- b. At present funds derived from NIH research grants are not available to Howard Medical School faculty members as they are at all other U.S. medical schools. This operates to the detriment of Howard faculty members. This will be explained.

NMA urges the appointment of a White House aide or Liaison man who can explore these difficulties and recommend appropriate relief or action.

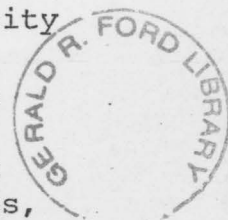


HEW Comment

- a. The portion of the NMA paper that allege that Howard University is not eligible for construction grants of various kinds is not completely accurate. The University is eligible to receive construction grants but has found none of the programs to its interest because each has a matching requirement. Special consideration by the Congress with a commitment to support has been more attractive to Howard University than the matching requirements would be.

There is one exception to this which the NMA group may be referring to.

In special legislation last year the Congress did authorize grant assistance for the construction and modernization of public and private nonprofit hospital facilities in the District of Columbia. Thus Howard University is eligible for such assistance under the terms of the authorizing legislation. The Supplemental Appropriation Act for 1969, however, limited the use of funds for that fiscal year to private nonprofit facilities, thus precluding their use at Howard University as well as D.C. General Hospital.



- b. NIH does not have a policy which precludes payment of salaries to Howard Medical School faculty members from research grants awarded to the University equivalent to the time they work on the grant-supported activities. Grant funds may not be used to supplement established university salary levels at Howard or any other grantee institution.

[May 1970?]

Report Language
Howard University Supplemental

1970 Appropriation	\$52,264,000
1970 Revised Estimate	59,964,000
Supplemental Appropriation Requested	7,700,000
House Allowance	7,700,000
Committee Recommendation	7,700,000



The Committee concurs with the House in recommending a supplemental of \$7,700,000 to provide the additional funds needed to permit GSA to advertise for bids on the new Howard University teaching hospital. Plans for the hospital are now nearly complete and it is expected that bids will be advertised in the ^{Sept} ~~summer~~ of 1970 and that construction will start in ^{JAN 71} ~~November~~ 1970.

The new hospital is badly needed by the University as a replacement for Freedmen's Hospital in order to provide a modern teaching facility for Howard's College of Medicine and for students in other health fields. The amount listed in the 1970 budget request was based on 1966 cost data. Since that estimate was developed however, construction costs have been rising throughout the Nation and in the Washington D. C. area in particular. Whereas the original estimate for plans, construction and basic equipment was \$23,430,000, the amount appropriated to date, the new estimate has now increased to \$31,130,000. The Committee again expresses its desire for construction of the hospital to proceed as expeditiously as possible and urges that any further delays be avoided.

May 25, 1970

Revised Construction Schedule
Howard University Teaching Hospital

completion of design	Early August, 1970
completion of working drawings	Mid-August, 1970 <i>SEPT 14, 1970</i>
bid invitations	<i>OCTOBER</i> End of September, 1970
bid opening	<i>NOVEMBER</i> End of October, 1970 —
contract award	<i>MID-DECEMBER</i> Mid-November, 1970
notice to proceed	<i>EARLY JANUARY</i> Early-December, 1970
completion	in approximately 780 days-- January , 1973 Feb. March , 1973 <i>MARCH/APRIL, 1973</i>



MEMORANDUM

THE WHITE HOUSE

WASHINGTON

June 17, 1970

NMA



MEMORANDUM FOR DWIGHT CHAPIN

FROM: ROBERT J. BROWN

SUBJECT: Presidential Appointment for Delegation from
National Medical Association

As you know, the National Medical Association requested this meeting last December. In January the request was staffed out and was ultimately approved by the President.

To the extent that the present delay relates to the question of optimum timing, I strongly recommend that the meeting with a delegation from the NMA be held prior to the NMA's annual meeting which is scheduled for the first week of August in Atlanta, Georgia.

cc: John Ehrlichman
Robert Finch
Leonard Garment
Bryce N. Harlow
Herbert Klein
Elliot Richardson

RJB:BR:ljh

MEMORANDUM

THE WHITE HOUSE

WASHINGTON

June 16, 1970
Tuesday - 10:30 a.m.

MEMORANDUM FOR MR. ROBERT BROWN

FROM: Dwight L. Chapin

RE: Presidential Appointment for Delegation from
National Medical Association



We are going to drop the idea of scheduling a Presidential appointment for a delegation from the National Medical Association until Elliott Richardson advises that the meeting is timely.

CC: Mr. Morgan
Mr. Sloan

MEMORANDUM

THE WHITE HOUSE

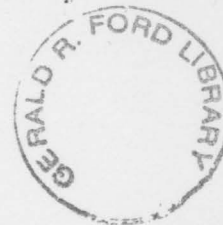
WASHINGTON

June 24, 1970

TO: Dwight Chapin
FROM: Lamar Alexander *LA*

Bryce Harlow endorses Bob Brown's recommendation that the President meet with the (black) National Medical Association prior to the first week in August, if possible.

Reason: to help improve the Administration's poor relations with blacks.



bcc: Bob Brown

RJB 7 National Medical Assn

National Medical Association delegation's proposed appointment with the President

Mr. Donald Bliss
Assistant to the Secretary



As requested in your June 30 memorandum, I am attaching a suggested response for the Secretary to send to Mr. Sloan on the appropriateness and timing of the President's meeting with a delegation from the National Medical Association.

Our records show a similar exchange of communications on such a proposal earlier this year, and I am attaching copies for your information and guidance.

An appointment with the President prior to the Association's annual meeting at Atlanta in early August undoubtedly would prove to be of great help in discouraging this professional group from unfavorably attacking the Administration on volatile issues which are of mutual concern but uncertain solution at this time.

Please know that this office is ready to assist in preparations for any further action which may be taken in response to the Association's requests.

Roger O. Egeberg, M.D.
Assistant Secretary
for Health and Scientific Affairs

Attachments (6)

Memorandum for Hon. Hugh W. Sloan, Jr. (proposed)

Memorandum for Hon. Hugh W. Sloan Jr. from Patrick Gray III
dtd. 1/16/70

Memorandum for Secretary Finch, from Hugh W. Sloan Jr. 1/9/70
Letter to President Nixon from Julius W. Hill, M.D., Pres.
NMA, dated 12/29/69

Informal ltr to Hon. Robt. J. Brown from Dr. Egeberg 2/4/70
Memorandum for Roger Egeberg from Robert J. Brown 1/19/70

NOTE: All above are copies except proposed memo.

EXSEC:OASHA:cr 7/9/70

MEMORANDUM FOR HONORABLE HUGH W. SLOAN, JR.

As requested in your June 24 memorandum, I am glad to give you my thoughts on the appropriateness and timing of a meeting with a delegation from the National Medical Association.

There seems little doubt that such a meeting could help provide assurance that the Administration is indeed concerned about the health needs of minority groups and the poor, and that it is aware of the special interest, concern and intelligence that the National Medical Association's membership has to offer those of us seeking to find the best solution to the problem.

It has come to my attention that the National Medical Association will meet in annual session at Atlanta, August 2-6, 1970. In view of the several requests the President has had for an appointment, perhaps a meeting of a preliminary nature, introductory to further sessions with staff of the White House and this Department, could be held prior to the Association's Atlanta convention. This would certainly be received as an important gesture of goodwill.

If, on the other hand, the President's schedule would not permit such a meeting to take place on short notice, you might wish to consider a brief message of good wishes for the success of the Association's annual meeting, in which there would be mention of his intention to meet soon with a delegation from the Association. We would be pleased, of course, to assist in the preparation of such a message.

Secretary

EXSEC/OASHA:cr 7/9/70



THE WHITE HOUSE
WASHINGTON

Mr Bliss

June 24, 1970

MEMORANDUM FOR SECRETARY RICHARDSON

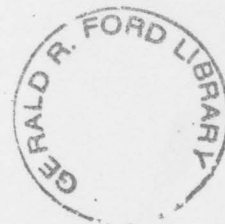
FROM: HUGH W. SLOAN, Jr. *HWS*

RE: Presidential appointment for delegation from
National Medical Association

The members of the National Medical Association have made several requests for an appointment with the President.

We would appreciate having your thoughts on the timing of such a meeting, if you believe one would be appropriate.

Thank you.



DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
OFFICE OF THE SECRETARY

Date: June 30, 1970
Reply to
Attn of:

Subject: Presidential appointment for delegation from the
National Medical Association
To: Dr. Roger Egeberg
Assistant Secretary for Health and Scientific Affairs

The Secretary would appreciate your recommendations on the attached matter. Please prepare a response to Mr. Sloan for his signature.

Donald T. Bliss
Assistant to the Secretary



JUL 1 9 34 AM '70
HEW-DASHSA
EX-SEC

U45 - MEMORANDUM
DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

JAN 16 1970

MEMORANDUM FOR HONORABLE HUGH W. SLOAN, JR.

Attention is invited to a letter from Dr. Julius Hill, President of the National Medical Association, dated December 29, 1969, and your memo dated January 9, 1970.

Two primary considerations are operative on the part of Dr. Hill in this instance, namely:

- a. What the AMA gets, the NMA should get also, and,
- b. Since it represents practically all of the Negro physicians in this country and is knowledgeable about health needs of Negroes and the poor, the NMA feels it should be consulted on all National health issues.



As stated in Dr. Hill's letter, the Association is interested in discussing the health care crisis, particularly as it affects minority groups and the poor, including such problems as shortage of health manpower, shortage and maldistribution of health facilities, and the cause of failure of some of our Federal health programs.

Recommendation

It is believed that a meeting by the President with this organization, perhaps including Secretary Finch and Dr. Roger C. Egeberg, could contribute significantly toward the creation of good-will and give added assurance that we are concerned and interested in the health and

FILE COPY

OFFICE	SURNAME	DATE	OFFICE	SURNAME	DATE
152	W. Hill	1-16-70			
154	Finch	1-16-70			
154	Egeberg	1-16-70			

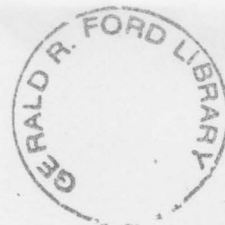
Page 2 - Honorable Hugh W. Sloan, Jr.

welfare of all Americans. Further situations of this type may be avoided in the future by calling for representation from this organization when discussing national health problems with similar national health organizations.

/s/ Henry Hyde.

L. Patrick Gray, III
Executive Assistant
to the Secretary

EDCROSS:gde 1/14/70



SIGNED AND MAILED

JAN 16 1970

DEPARTMENT OF
HEALTH, EDUCATION AND WELFARE

January 13, 1970

Assistant Secretary

for Health and Scientific Affairs

Attached Correspondence

Executive Assistant to the Secretary



1. Attention is invited to a letter from Dr. Julius Hill, dated December 29, 1969, and a memo from Mr. Hugh Sloan, dated January 9, 1970.
2. Two types of consideration appear to be operative in this situation, namely:
 - a. What the AMA gets, the NMA should get also, and,
 - b. Inasmuch as this group represents practically all of the Negro physicians in this country and are knowledgeable about health needs of Negroes and the poor, it feels it should be consulted on all National health issues.
3. Upon the basis of the above, I feel that the President and the Administration could obviate the necessity for requests for separate meetings by having representation from all such pertinent organizations when National health problems are being discussed.
4. As stated in Dr. Hill's letter, they are interested in discussing the Health Care Crisis, particularly as it affects minority groups and the poor, including such problems as shortage of health manpower, shortage and maldistribution of health facilities, and the cause of failure of some of our Federal health programs.

Recommendation:

I would think the President, Secretary Finch, and myself could do much to create good-will and an assurance that we mean it when we say, "Forward Together", by meeting with representatives from this organization at this time. Further

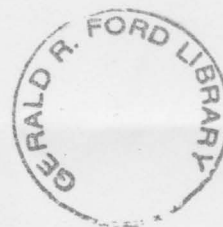
2.

situations of this type may be avoided in the future by calling for representation from this organization when discussing national health problems with similar national health organizations.

Roger O. Egeberg, M. D.

Attachments

EBCROSS/gde 1/13/70



THE WHITE HOUSE
WASHINGTON

January 9, 1970

*Esso and
McGray's signature*

MEMORANDUM FOR SECRETARY FINCH

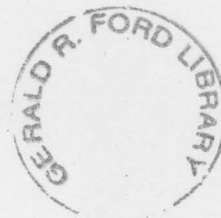
The National Medical Association, whose president is Dr. Julius W. Hill, has asked for an appointment with the President for a delegation of its membership.

We would appreciate having your estimate of what the NMA wishes to discuss with the President and whether or not you think he should meet with them.

Many thanks.

Hugh Sloan

HUGH W. SLOAN, Jr.
Staff Assistant



*HW-SLOAN
EX-SEC
JAN 13 9 57 AM '70*



NATIONAL MEDICAL ASSOCIATION, INC.

ORGANIZED 1905
INCORPORATED 1924

JULIUS W. HILL, M.D.
PRESIDENT
1628 SO. WESTERN AVENUE
ANGELES, CALIFORNIA 90006
213-731-7000

ACTION
TID _____
SCHEDULE NO. _____
DATE RECEIVED
JAN 2 1970
TELE MESSAGE _____
STAKERS BUREAU _____
OTHER _____

December 29, 1969



President Nixon

The White House

Mr. President:

As President of the National Medical Association, an organization which encompasses the 6,000 Black Negro Doctors in this country, I was quite concerned when I learned through the American Medical News, the weekly publication of the American Medical Association, that you had met with the President of the American Medical Association, Board of Trustees of the Liaison Committee to Government, for discussion of medical problems. The National Medical Association has made repeated efforts to have such a conference with you, and with Doctor Roger Egeberg. We were able to have an audience with Secretary Finch last July, 1969, however since that time, there has been no further liaison between the National Medical Association and the Federal Government.

The National Medical Association, as you may recall, was the only National Organization which supported the present Medicare and Medicaid programs enhancing the efforts of Both President Kennedy and President Johnson in their efforts to make such, the law of the land. The National Medical Association has also been deeply concerned about the manpower situation and has expended tremendous sums of money in its talent recruitment program, to recruit medical manpower and alleviate if possible, the shortage of black medical doctors.

I noted in the American Medical News the fact that we are short approximately 52 thousand doctors in the United States. Should we eliminate the 35 thousand foreign medical graduates who are physicians practicing in this country, our shortage should be 87 thousand physicians. The immediate need for black physicians in this country is at the present time 30 thousand. Black physicians represent only 2 per cent of the physicians practicing in this country, whereas, the black population represents 11 per cent.

The problems of the black physician and the black people in the United States is one and inseparable, and I am impressed that no one can speak for the black doctor or the black population, except the black doctors and the black people themselves.

Mr. President.

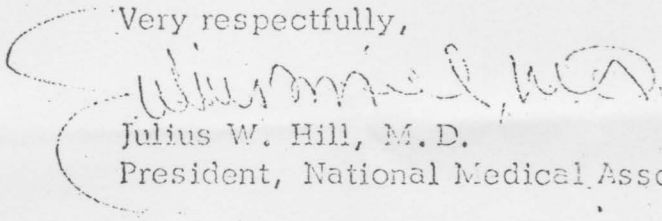
Page 2

For this reason, Mr. President, I am sincerely requesting a similar conference between you and key members of the National Medical Association, for a frank discussion of the problems as they pertain to the black physician, the black people, and the black medical manpower situation.

Rapport with you and the National Medical Association, I feel, is an urgent need at this time, and I sincerely hope that in the very near future you can spare the time to sit down with a representation from the National Medical Association, just as you have found time to have a frank discussion with the members of the American Medical Association.

In the event that you are able to consider the above request, I shall be very happy to contact the key personnel of the National Medical Association for such a meeting. I am impressed that such a meeting will go a long way in alleviating some of the apprehension felt by our black doctors and the general feeling among us that we are being ignored by the Federal Government.

Very respectfully,


Julius W. Hill, M.D.

President, National Medical Association

JWH/lbh



DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

FEB 4 1970

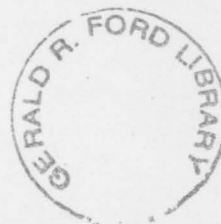
INTERNAL LETTER FOR HONORABLE ROBERT J. BROWN

In accordance with your recent request, I am enclosing our comments on the proposed agenda items submitted to you by the National Medical Association. Please note that we reproduced the agenda items exactly as submitted by NMA and then followed them with our comments.

Roger O. Egeberg, M.D.
Assistant Secretary for Health
and Scientific Affairs

Enclosure

JHCavanaugh:aah:2/4/70

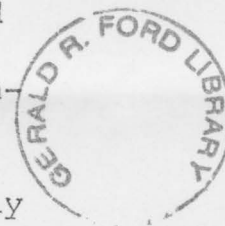


OFFICE	SURNAME	DATE	OFFICE	SURNAME	DATE
ASH	Cavanaugh	2/4			

115 COPY

NATIONAL MEDICAL ASSOCIATION SUGGESTED AGENDA ITEMS
FOR PROPOSED CONFERENCE WITH THE PRESIDENT

1. Introductory remarks.....Julius Hill, M.D., Pres.
if present, if not, by Emerson Walden,
M.D., Chairman of the Board of Trustees
2. Financial Assistance to Black Medical Students
 - a. The House and Senate Conference Committee on the HEW FY 1970 Budget have agreed to a health professions scholarship budget which is about two million dollars less than what the Nixon Administration sought for student scholarships. Since both scholarships and loans are intended for the financially needy student--and the vast majority of the Black students at Howard and Meharry fall into this class as they for the most part come from economically disadvantaged parents--and since the amount Congress allowed is for scholarships is less than the President sought and would probably cover only 10 percent of the Howard and Meharry students whereas the need is probably about 75 percent--we would urge that President Nixon direct the Bureau of Health Professions, Education and Manpower Training of NIH--which we understand is in charge of this program to shift health professions loan funds to scholarship funds to adequately supply Howard and Meharry students, where the need is so acute and greatest.
 - b. Legal authority does exist for such a transfer by the President's directive.



HEW Comment

The Public Health Service Act provides that the Secretary of HEW shall make scholarship grants to schools of medicine, osteopathy, dentistry, optometry, podiatry, pharmacy and veterinary medicine. The amounts of these grants are determined by a formula in the law of \$2,000 times 10 percent of the number of full-time students.

Meharry Medical College received \$60,400 and Howard Medical College received \$72,640 in scholarship grants. At the same time these schools were awarded \$65,373 and \$90,050 respectively in student loan funds. Loan funds were also distributed by a statutory formula and awarded under advance obligation authority.

The Health Manpower Act of 1968 allows a school to transfer Federal funds from its student loan fund supplied under the Federal capital contribution's method to its scholarship award and vice versa. The amount transferred cannot exceed 20 percent of the amount paid to the school unless approved by the Secretary. No authority exists whereby the Secretary can directly increase a scholarship or loan award beyond the amount determined by statutory formula.



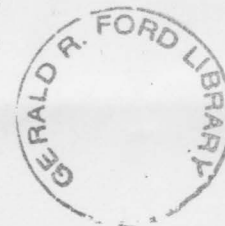
No major increase is anticipated for health professions scholarship grants.

3. Funds for the Operation of the "Have Not" Medical Schools

Included in the FY 1970 Appropriations for Medical School Operating Grants is \$11.6 million dollars (eleven point six million) for the so-called "have not" medical schools (i.e., those with the lowest budgets and funding among U.S. medical schools). This money is intended to help schools

who are in financial difficulties, schools "in trouble", to help them weather the storm. Witness testimony before the Senate indicates that the funds provided would help only about 11 schools, and that for every dollar in grant money appropriated, there were eight dollars in pending applications.

Since Howard and Meharry's level of financial support is so low (Howard spends annually only 37 percent of the national average expenditure for U.S. medical schools of \$11.9 million, and Meharry only 21 percent of such national average), it is recommended that we urge upon President Nixon the necessity of allocating to each school a significant portion of the \$11.6 million which is available for new health professions schools operating grants.



HEW Comment

	<u>Loan Amount Requested</u>	<u>Loan Allocated</u>	<u>Scholarship Allocated</u>
Meharry	\$527,500	\$65,372	\$60,400
Howard	297,000	90,050	72,640

Both Howard and Meharry have been identified by various groups as being included among the "have not" medical schools. It would appear that Meharry has less non-Federal resource than any other medical school in the country. On the other hand, there are 12 schools in the country that report non-Federal expenditures for education, at a level less than those reported by Howard.

At this point of time, both of the schools are receiving significant institutional support from the Federal Government. For FY 1968-69, the figures are as follows:

Howard

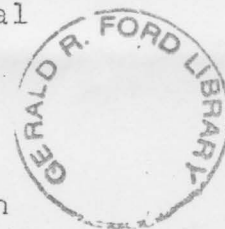
Basic Institutional support	\$237,500
Special Project Support	400,000

Meharry

Basic Institutional Support	\$175,000
Special Project Support	744,039

In addition, both institutions have supplemental requests that are currently under review. Howard has requested a supplemental special project of \$200,991, and Meharry has requested a supplemental special project of \$150,051 under the Physician Augmentation Program.

The suggestion that specific funds be earmarked for these two schools deserves comment. Although these two institutions have financial need, they are not alone among the schools of the country. Existing authorities are flexible enough to allow decisions on magnitude of support to be made in full recognition of the need. If specific earmarking were done, it would have the disadvantage of potentially facing a level of support that might not be adequate for the two or the reverse could happen with their support utilizing such portion of total resources that other institutions might be jeopardized.

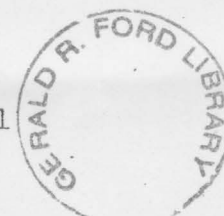


4. New Howard University Hospital

HEW's own testimony before Congress demonstrated that there must be at least a \$10.7 (ten point seven) million dollar increase in excess of the 22.2 million dollars which the House and Senate Committees have agreed upon for the new hospital. However, this amount only reflects the increase in construction costs for the new hospital since the time the request for funds was originally made.

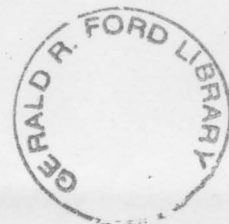
The National Medical Association has stated its belief that the facility, as funded by the House, is inadequate in all respects, the facility containing only some 587,000 some odd gross square feet, NMA cited authoritative sources (such as Dr. Russell A. Nelson, President of Johns Hopkins Medical Center who served as Howard's construction consultant who as early as 1962 recommended that the new 500-bed hospital have 683,466 gross square feet and the Surgeon General's 1964 Architectural Guide for Medical Education facilities which recommend 682,000 gross square feet for a 500-bed teaching hospital) for our conviction that the new hospital was too small by approximately 95,000 gross square feet.

NMA recommends that while it favors, of course, the appropriation of the \$22.2 million, that before any funds were spent for construction that the Appropriations Committee direct the Secretary of HEW to reevaluate the Budget Bureau ceiling on cost in light of the recommendations of hospital planners. NMA seeks the President's aid in seeking redesign of the hospital to provide additional space and additional funding so that Black Medicine can have a hospital which is the equal of other comparable facilities to enable it to perform its function in the training of physicians to care for such a large segment of the economically disadvantaged in our population.



HEW Comment

The gentlemen seeking the audience with the President represent the National Medical Association but they do not represent Howard University or Freedman's Hospital. More specifically, John A. Kenney, Jr., M.D., who is to be there in his capacity as Chairman of the Medical Legislative Committee of NMA, is a Professor of Dermatology at Howard University. The comments that they are likely to make to the President about the inadequacy of design of the new Howard University Hospital are believed to stem from Dr. Kenney's feeling that there is inadequate provision for his residency program in dermatology.



Plans for the construction of a new hospital at Howard University have had the active involvement of many responsible people over a period of years. Originally, consideration was given to building a new hospital immediately adjacent to the present Freedman's Hospital, but the desirability of having closer proximity to the medical and dental schools and the availability of land, made the Griffith Stadium site more suitable. The time lapse between program delineation and the prolonged discussions that developed with BOB on the one hand and GSA on the other, has been such that the Howard University project has experienced what has been characteristic for many health care facilities. The annual increase in construction costs has meant that the \$22.2 million authorized by the Congress is not enough. The \$10.7 million figure cited by the National Medical Association as being additional funds needed is somewhat above our target. We plan to ask the Congress for a supplemental appropriation of \$7.7 million, which was announced in the budget transmitted to the Congress by the President on February 2.

The NMA comment above deprecates the 587,000 gross square feet that are proposed in the new building and implies that the gross square feet figure contained in our HEW publication is the only satisfactory figure. It is freely admitted that if given unlimited funds Howard University might, if it started afresh, achieve a more adequate facility than the one proposed, but the same can be said of most projects.

The Administrator at Howard University does believe that the present proposal will provide a good teaching hospital and that work should get underway for its construction in as rapid a manner as possible. It would be disastrous to abandon the proposal and start its redesign. HEW would urge that no support should be given to that aspect of the NMA proposal.

5. NMA seeks the President's Aid in the Elimination of Legal Obstacles to the Use of PHS Construction Grants by Howard University, and to the Use of NIH Research Grants to Compensate Principal Investigators at Howard University.

- a. Howard has not shared in any of the approximately \$60 million in Federal Financial Construction Assistance heretofore provided to hospitals in the Washington, D.C. area, nor is it scheduled to do so in the future under P.L. 90-457 legislation authorizing \$78 million in loans and grants to nonprofit private medical facilities in the District of Columbia. There are legal obstacles to this.
- b. At present funds derived from NIH research grants are not available to Howard Medical School faculty members as they are at all other U.S. medical schools. This operates to the detriment of Howard faculty members. This will be explained.

NMA urges the appointment of a White House aide or Liaison man who can explore these difficulties and recommend appropriate relief or action.



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THE WHITE HOUSE
WASHINGTON

January 19, 1970

HEW-DASHSA
EX-SEC

JAN 21 3 23 PM '70

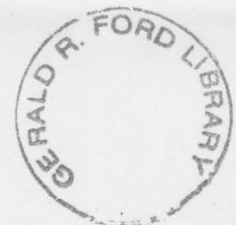
MEMORANDUM FOR ROGER EGEBERT

FROM: ROBERT J. BROWN

Per our conversation of this afternoon, I have attached the proposed agenda sent to me by the NMA. Needless to say we have a time factor involved here and I would like to have the position paper as soon as possible.

Thank you for your cooperation in this matter.

Attachment



NATIONAL MEDICAL ASSOCIATION

Emerson C. Walden, M.D.
Chairman, Board of Trustees
Edmondson Avenue
Baltimore, Maryland 21229
Phone: 301-947-2718

John A. Kenney, Jr., M.D.
Chairman, Med. Legislative Committee
1442 Iris Street, N.W.
Washington, D.C. 20012
Phone: 202-332-2519

Proposed
SUGGESTED AGENDA FOR CONFERENCE WITH PRESIDENT NIXON
JANUARY 1970

Introductory remarks Julius Hill, M.D., Pres.
if present, if not, by Emerson Walden,
M.D., Chairman of the Board of
Trustees

Financial Assistance to Black Medical Students

- a. The House and Senate Conference Committee on the HEW FY 1970 Budget have agreed to a health professions scholarship budget which is about two million dollars less than what the Nixon Administration sought for student scholarships. Since both scholarships and loans are intended for the financially needy student--and the vast majority of the Black students at Howard and Meharry fall into this class as they for the most part come from economically disadvantaged parents--and since the amount Congress allowed is for scholarships is less than the President sought and would probably cover only 10 per cent of the Howard and Meharry students whereas the need is probably about 75%--we would urge that President Nixon direct the Bureau of Health Professions, Education and Manpower Training of NIH--which we understand is in charge of this program to shift health professions loan funds to scholarship funds to adequately supply Howard and Meharry students, where the need is so acute and greatest.
- b. Legal authority does exist for such a transfer by the President's directive.

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vided would help only about 11 schools, and that for every dollar in grant money appropriated, there were eight dollars in pending applications.

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Page 3 of Suggested Agenda--National Medical Association Conference
with President Nixon--January 1970

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NMA urges the appointment of a White House aide or Liaison man who can explore these difficulties and recommend appropriate relief or action,



7/31/70

HOWARD UNIVERSITY

Institutional Grant (current amount they are receiving)

Medical \$237,500

Dental 196,000

Special Project Grants (current amount they are receiving)

Medical \$465,840

Dental 568,913

Dental Auxillary Utilization Grants

Dental \$128,154

Contract with the Medical School

Medical \$ 91,581

Health Professions Loans and Scholarships

<u>Medical School</u>	<u>1970</u>	<u>1971</u>
Loans	\$ 96,123	\$ 57,421
Scholarships	72,640	66,109

<u>Dental School</u>		
Loans	77,868	52,772
Scholarships	67,400	60,759

<u>Nursing</u>	
Loans	8,940
Scholarships	6,429

Pharmacy
Institutional Grants \$101,049

<u>Pharmacy</u>	<u>1970</u>	<u>1971</u>
Loans	\$ 12,136	\$ 29,085
Scholarships	14,060	33,486



July 31, 1970

MEMORANDUM FOR EMERY BACON

FROM: BOB BROWN

On Wednesday, August 5, 1970, at 11:45 a.m. in the White House, the President is meeting with the Officials of the National Medical Association.

I would like you to prepare for me a listing of any potential funds or prospective plans which Federal agencies might have to assist in the development of professional health services, particularly as they relate to Black Colleges and the two medical schools, Howard and Meharry.

The President is anxious to pass on affirmative action programs to these medical leaders.



RJB:rm



DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
OFFICE OF THE SECRETARY
WASHINGTON, D.C. 20201



August 3, 1970

MEMORANDUM FOR HONORABLE ROBERT J. BROWN

Subject: Briefing Memorandum for Meeting with the
President on August 5, 1970, with the
Officers of the National Medical Association

Last December the National Medical Association proposed the meeting with the President. At the time they suggested a number of agenda items which they would like to discuss. The items are:

1. Financial Assistance to Black Medical Students
2. Funds for the Operation of the "Have-Not"
Medical Schools
3. New Howard University Hospital
4. Elimination of Legal Obstacles to the Use of
HEW Construction Grants by Howard University

(1) I recommend that the President not comment on the specifics of any of the above issues. Rather I recommend that he confine himself to indicating that we will take a look at each of the issues that they raise and that he will ask Secretary Richardson to followup in direct communication with the National Medical Association. I would urge that the President confine his remarks to calling the National Medical Association's attention to our recently proposed health maintenance organization, Title XVIII and Title XIX, approved by the House and now before the Senate Finance Committee, and urging their support of the amendments.

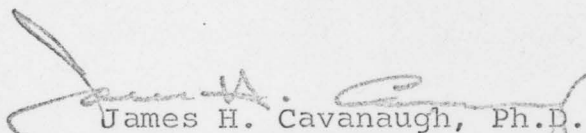
(Tab A)

(2) Additionally, I think the President could point with pride to the 4 projects supported by HEW, approved and funded since he became President, that are designed to serve predominately black communities in the State of Mississippi. A brief description of each of the projects is attached. (Tab B)

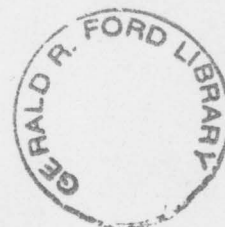
③ The President may wish to discuss in a general way his concern that the Nation apparently does not have adequate numbers of physicians and that we must not let the two medical schools who provide education to predominately black students close because of financial distress.

We are attaching as Tab C the earlier agenda items submitted by the National Medical Association for the presidential meeting along with HEW's comments.

One final point, you should be aware of the fact that former President Johnson went to Dallas in August 1968 to address a general session of the National Medical Association Annual Meeting.


James H. Cavanaugh, Ph.D.
Deputy Assistant Secretary for Health
and Scientific Affairs

Attachments (3)



Health Maintenance Organization Amendments
to the Social Security Act

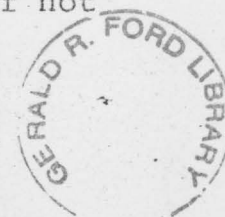
We are seeking a number of changes in the Social Security Act that will enable the Federal Government to enter into health maintenance contracts with groups of providers such as medical societies, hospitals, medical schools, and private corporations. Under this plan, contractors would agree to provide comprehensive care for Medicare beneficiaries at an annual, agreed-upon cost, paid in advance. The services provided to those who elected to receive care under this option would include all the care now available under Parts A and B of Medicare, plus additional health services.

However, the annual cost per patient would have to be no more than 95 percent of prevailing costs for services under Parts A and B alone in any geographic area. Similar arrangements could be made for Medicaid beneficiaries if a State elected to undertake this kind of health care for its welfare recipients.

At the present time nearly six million Americans are now participating in pre-paid health care plans.

Among the most efficient prepaid programs, hospital admission rates are below average, manpower requirements are lower, and consequently the overall annual cost of care per patient is less than we find for comparable groups of people who obtain health care in the conventional way.

The health maintenance organization proposal is an attempt to rehabilitate our health care delivery system. Some would say that for the Federal Government to propose this approach is indeed revolutionary. The contracts allowed under this proposal represents the kind of incentives which will allow the medical profession and other providers to take the lead...to take the initiative...in improving the organization and delivery of health services. Until the delivery system is working efficiently, and will withstand the demand for more personnel and resources, I am convinced that we cannot move on to the equally, if not more important issue of financing health care.



CITY : Fayette

PROJECT NUMBER : 43086

PROJECT TITLE : Development of Comprehensive Health Care System
in a Rural Area of Mississippi

GRANTEE : City of Fayette
Fayette, Mississippi

PROJECT PERIOD : 5/1/70 - 4/30/71

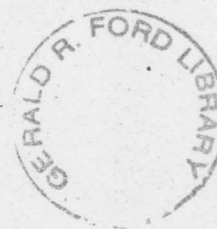
CURRENT 314(e) AWARD: \$131,970

DESCRIPTION : The major objective of this program is the development of a comprehensive primary care program to include team medical-dental-nursing services, systematic community outreach, community coordination around health issues, training of community health aides, environmental engineering services, transportation facilities, and limited hospitalization facilities with appropriate back-up services as needed from nearby medical centers. This program will be available to all residents of Jefferson and Claiborne Counties.



NATIONAL MEDICAL ASSOCIATION SUGGESTED AGENDA ITEMS
FOR PROPOSED CONFERENCE WITH THE PRESIDENT

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if present, if not, by Emerson Walden,
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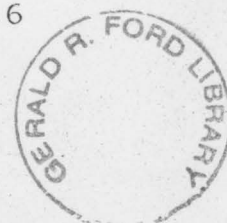
who are in financial difficulties, schools "in trouble", to help them weather the storm. Witness testimony before the Senate indicates that the funds provided would help only about 11 schools, and that for every dollar in grant money appropriated, there were eight dollars in pending applications.

Since Howard and Meharry's level of financial support is so low (Howard spends annually only 37 percent of the national average expenditure for U.S. medical schools of \$11.9 million, and Meharry only 21 percent of such national average), it is recommended that we urge upon President Nixon the necessity of allocating to each school a significant portion of the \$11.6 million which is available for new health professions schools operating grants.

HEW Comment

	<u>Loan Amount Requested</u>	<u>Loan Allocated</u>	<u>Scholarship Allocated</u>
Meharry	\$527,500	\$65,372	\$60,400
Howard	297,000	90,050	72,640

Both Howard and Meharry have been identified by various groups as being included among the "have-not" medical schools. It would appear that Meharry has less non-Federal resource than any other medical school in the country. On the other hand, there are 12 schools in the country that report non-Federal expenditures for education, at a level less than those reported by Howard.



At this point of time, both of the schools are receiving significant institutional support from the Federal Government. For FY 1968-69, the figures are as follows:

Howard

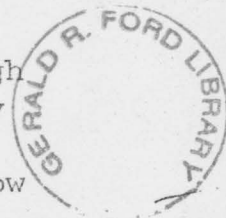
Basic Institutional support	\$237,500
Special Project Support	400,000

Meharry

Basic Institutional Support	\$175,000
Special Project Support	744,039

In addition, both institutions have supplemental requests that are currently under review. Howard has requested a supplemental special project of \$200,991, and Meharry has requested a supplemental special project of \$150,051 under the Physician Augmentation Program.

The suggestion that specific funds be earmarked for these two schools deserves comment. Although these two institutions have financial need, they are not alone among the schools of the country. Existing authorities are flexible enough to allow decisions on magnitude of support to be made in full recognition of the need. If specific earmarking were done, it would have the disadvantage of potentially facing a level of support that might not be adequate for the two or the reverse could happen with their support utilizing such portion of total resources that other institutions might be jeopardized.

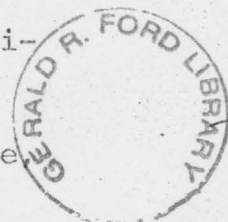


4. New Howard University Hospital

HEW's own testimony before Congress demonstrated that there must be at least a \$10.7 (ten point seven) million dollar increase in excess of the 22.2 million dollars which the House and Senate Committees have agreed upon for the new hospital. However, this amount only reflects the increase in construction costs for the new hospital since the time the request for funds was originally made.

The National Medical Association has stated its belief that the facility, as funded by the House, is inadequate in all respects, the facility containing only some 587,000 some odd gross square feet, NMA cited authoritative sources (such as Dr. Russell A. Nelson, President of Johns Hopkins Medical Center who served as Howard's construction consultant who as early as 1962 recommended that the new 500-bed hospital have 683,466 gross square feet and the Surgeon General's 1964 Architectural Guide for Medical Education facilities which recommend 682,000 gross square feet for a 500-bed teaching hospital) for our conviction that the new hospital was too small by approximately 95,000 gross square feet.

NMA recommends that while it favors, of course the appropriation of the \$22.2 million, that before any funds were spent for construction that the Appropriations Committee direct the Secretary of HEW to reevaluate the Budget Bureau ceiling on cost in light of the recommendations of hospital planners. NMA seeks the President's aid in seeking redesign of the hospital to provide additional space and additional funding so that Black Medicine can have a hospital which is the equal of other comparable facilities to enable it to perform its function in the training of physicians to care for such a large segment of the economically disadvantaged in our population.



HEW Comment

The gentlemen seeking the audience with the President represent the National Medical Association but they do not represent Howard University or Freedman's Hospital. More specifically, John A. Kenney, Jr., M.D., who is to be there in his capacity as Chairman of the Medical Legislative Committee of NMA, is a Professor of Dermatology at Howard University. The comments that they are likely to make to the President about the inadequacy of design of the new Howard University Hospital are believed to stem from Dr. Kenney's feeling that there is inadequate provision for his residency program in dermatology.

Plans for the construction of a new hospital at Howard University have had the active involvement of many responsible people over a period of years. Originally, consideration was given to building a new hospital immediately adjacent to the present Freedman's Hospital, but the desirability of having closer proximity to the medical and dental schools and the availability of land, made the Griffith Stadium site more suitable. The time lapse between program delineation and the prolonged discussions that developed with BOB on the one hand and GSA on the other, has been such that the Howard University project has experienced what has been characteristic for many health care facilities. The annual increase in construction costs has meant that the \$22.2 million authorized by the Congress is not enough. The \$10.7 million figure cited by the National Medical Association as being additional funds needed is somewhat above our target. We plan to ask the Congress for a supplemental appropriation of \$7.7 million, which was announced in the budget transmitted to the Congress by the President on February 2.



The NMA comment above deprecates the 587,000 gross square feet that are proposed in the new building and implies that the gross square feet figure contained in our HEW publication is the only satisfactory figure. It is freely admitted that if given unlimited funds Howard University might, if it started afresh, achieve a more adequate facility than the one proposed, but the same can be said of most projects.

The Administrator at Howard University does believe that the present proposal will provide a good teaching hospital and that work should get underway for its construction in as rapid a manner as possible. It would be disastrous to abandon the proposal and start its redesign. HEW would urge that no support should be given to that aspect of the NMA proposal.

5. NMA seeks the President's Aid in the Elimination of Legal Obstacles to the Use of PHS Construction Grants by Howard University, and to the Use of NIH Research Grants to Compensate Principal Investigators at Howard University.

a. Howard has not shared in any of the approximately \$60 million in Federal Financial Construction Assistance heretofore provided to hospitals in the Washington, D.C. area, nor is it scheduled to do so in the future under P.L. 90-457 legislation authorizing \$78 million in loans and grants to nonprofit private medical facilities in the District of Columbia. There are legal obstacles to this.

b. At present funds derived from NIH research grants are not available to Howard Medical School faculty members as they are at all other U.S. medical schools. This operates to the detriment of Howard faculty members. This will be explained.

NMA urges the appointment of a White House aide or Liaison man who can explore these difficulties and recommend appropriate relief or action.



HEW Comment

- a. The portion of the NMA paper that allege that Howard University is not eligible for construction grants of various kinds is not completely accurate. The University is eligible to receive construction grants but has found none of the programs to its interest because each has a matching requirement. Special consideration by the Congress with a commitment to support has been more attractive to Howard University than the matching requirements would be.

There is one exception to this which the NMA group may be referring to.

In special legislation last year the Congress did authorize grant assistance for the construction and modernization of public and private nonprofit hospital facilities in the District of Columbia. Thus Howard University is eligible for such assistance under the terms of the authorizing legislation. The Supplemental Appropriation Act for 1969, however, limited the use of funds for that fiscal year to private nonprofit facilities, thus precluding their use at Howard University as well as D.C. General Hospital.

- b. NIH does not have a policy which precludes payment of salaries to Howard Medical School faculty members from research grants awarded to the University equivalent to the time they work on the grant-supported activities. Grant funds may not be used to supplement established university salary levels at Howard or any other grantee institution.



THE WHITE HOUSE
WASHINGTON

MEMORANDUM FOR

THE PRESIDENT

SUBJECT: Meeting with Officials of the National
Medical Association
August 5, 1970
12:00 noon (30 minutes)

I. PURPOSE

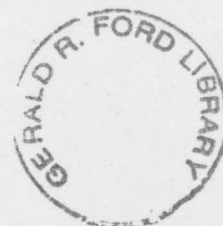
Members of the National Medical Association (NMA) propose to discuss with the President the Administration's programs designed to meet the health needs of minority groups in general and black medical schools in particular.

II. BACKGROUND, PARTICIPANTS, AND PRESS PLAN

- A. The NMA is a trade association of the nation's approximately 6,000 black physicians that had its inception in 1895. More than eighty percent of its members are graduates of predominantly black Howard and Meharry Medical Colleges.

The organization will commence its 75th National Convention on August 5, 1970, in Atlanta, Georgia. Dr. Julius Hill, President of the NMA, will preside over the convention, and is the person who originally requested this meeting in December 1970.

- B. Eight officials of the NMA will participate in this meeting. A list of these persons is attached (Tab A).



B. (Cont.)

Administration officials participating in the meeting will be Mr. Elliot Richardson, Secretary of the Department of Health, Education and Welfare, Counsellor Robert Finch and Robert Brown.

Matters of particular interest:

1. Dr. Julius Hill is presently serving on the Technical Assistance Committee of the White House Conference on Children and Youth.
2. Dr. James Whittico has been appointed to serve a three-year term (commencing on August 4, 1970) on the National Advisory Council on Education for Health Professions. This Council advises the Director of NIH on policy matters relating to the Administration of the Health Profession Construction Program, and reviews all applications for grants in support of medical and dental research and manpower.

- C. There will be a brief photo opportunity at the beginning of the meeting. Subsequent to the meeting, Ron Ziegler will discuss with the President the advisability of having the group meet the press.

III. PROBABLE POINTS OF DISCUSSION OF VISITORS, AND
RECOMMENDED RESPONSES

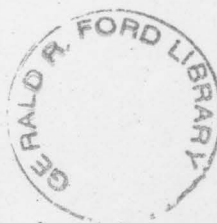
- A. NMA officials will probably raise questions concerning each of the following items:
1. Financial Assistance to black medical students.
 2. Increased assistance to Howard and Meharry Medical Colleges (Student loan and scholarship assistance for both colleges were decreased for fiscal 1971.)

A. (Cont.)

3. New Howard University Hospital.
4. Removal of legal obstacles to use of HEW construction grants by Howard University.

RECOMMENDATION

1. That the President abstain from commenting on the specifics of any of the above. However, he may wish to have Secretary Richardson speak briefly to each of them or communicate later with the NMA relative thereto.
2. The President might wish to express concern over the inadequate numbers of physicians, particularly black physicians, and indicate that we must not let the two medical schools providing education to predominantly black students close because of financial distress.
3. Relative to items one and two, the President might wish to mention his "Higher Education Reform Act of 1970" that is designed to respond to the financial needs of students from low-income families, and urge the NMA to support this legislation (Tab B, for highlights of Act).



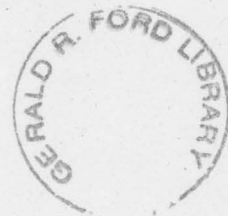
IV. Other Points You May Wish to Raise

A. On August 7, 1970, a group of high level officials of HEW, working with officials of Howard University, will commence a review of the long-range medical needs of that institution with a view toward developing a viable Federal program to support these needs.

B. As a result of a recently completed report on Black Colleges and Universities by the Federal Interagency Committee on Education, (FICE), the President has directed HEW to reprogram an additional \$20 million from its budget for support of these schools during fiscal 1971.

In this regard, Bob Brown and FICE officials held a meeting on August 4 with the program representatives of the various departments and agencies to discuss ways of increasing agency assistance to black and other small colleges.

C. The President should point with pride to the four projects this Administration has approved and funded that are serving predominantly black communities in the State of Mississippi. A brief description of these projects is attached (Tab C).



NATIONAL MEDICAL ASSOCIATION
OFFICIALS

1. Dr. James Whittico - (St. Louis, Missouri) -
Past President of the National Medical Association
2. Dr. Julius Hill (Los Angeles, California) -
President of the National Medical Association
3. Dr. W. T. Armstrong - (Rocky Mount, North Carolina) -
President-elect of the National Medical Association
4. Dr. Charles Bookert - (Pittsburgh, Pennsylvania) -
Speaker, House of Delegates of the National Medical
Association
5. Dr. Andrew Thomas - (Chicago, Illinois) -
Member of the Board of Trustees of the National Medical
Association
6. Dr. Emerson Walden - (Baltimore, Maryland) -
Chairman of the Board of Trustees of the National Medical
Association
7. Dr. John Kenney - (Washington, D. C.) -
Chairman of the Legislative Committee of the National
Medical Association
8. Mr. Lloyd Kirkpatrick - (Washington, D. C.) -
Legislative and Research Advisor, National Medical
Association



TAB B

HIGHER EDUCATION REFORM ACT OF 1970

When submitting this legislation to Congress on March 19, 1970, the President stated "no qualified student who wants to go to college should be barred by lack of money." This legislation would provide basic reforms to present student aid programs under which Federal subsidies would be directed to students who need them the most. Every low-income student entering an accredited college would be eligible for a combination of Federal grants and subsidized loans sufficient to give him the same ability to pay as a student from a family earning \$10,000.

This program would nearly double the Federal assistance available to about two million low-income students, a large segment of whom are black.

This legislation would also charter a "National Student Loan Association" -- a private financial intermediary institution, create a new "Career Education Program" in the Department of Health, Education, and Welfare, and establish a "National Foundation for Higher Education" to develop a national policy and pursue excellence in education.



A SUMMARY OF THE FOUR
PARTNERSHIP-IN-HEALTH GRANTS
FUNDED UNDER SECTION 314(e)
THAT ARE DESIGNED TO SERVICE
PREDOMINANTLY BLACK COMMUNITIES
IN THE STATE OF MISSISSIPPI

CITY : Jackson

PROJECT NUMBER : 43021

PROJECT TITLE : Delta Pilot Project - Intensive Health and
Medical Services

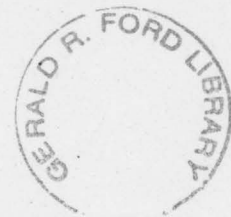
GRANTEE : Mississippi State Board of Health
Jackson, Mississippi

PROJECT PERIOD : 9/1/68 - 8/31/73

CURRENT BUDGET
PERIOD : 9/1/69 - 8/31/70

CURRENT 314(e)
AWARD : \$200,416

DESCRIPTION : The objectives of this project are the improvement
of the operational efficiency of the five county
health departments in this Delta area where there
is a paucity of public health manpower, and the
expansion and improvement of the delivery of basic
comprehensive health services. The project provides
for expansion of services beyond the traditional
role of public health, specifically in the provision
of medical care on an outpatient clinic basis,
emergency dental care, and some in-hospital care.
The project provides for the employment and training
of community health workers as nursing and sanitation
aides to be drawn from the target population. These
aides perform para-medical tasks and, at the same
time, serve as a cultural bridge between the health
department's personnel and the target population.
Environmental health services, nutrition counseling,
and health education activities are offered in addition
to basic medical care. The project is demonstrating
that methods for the delivery of basic health services
can be devised despite the lack of public health man-
power in this area. Local physicians and the Universi
Medical Center are cooperating in the program.



CITY : Jackson

PROJECT NUMBER : 43070

PROJECT TITLE : Meeting Selected Health Needs in a Target Area of Mississippi

GRANTEE : University of Mississippi Medical Center
Jackson, Mississippi

PROJECT PERIOD : 6/1/69 - 5/31/74

CURRENT BUDGET PERIOD : 6/1/70 - 5/31/71

CURRENT 314(e) AWARD: \$361,694

DESCRIPTION : This project is designed primarily to alleviate the tremendous problems related to high maternal and infant mortality and morbidity in this particular area of the country. There is a large component, supported primarily by the Bureau of Health Professions Education and Manpower Training of NIH, for the training of nurse midwives, who will in turn, conduct training sessions for granny-midwives. This training has already been initiated. This project also includes provision for the use of indigenous health aides whose training is supported by funds from the Office of Education. Prenatal, postnatal, and infant care clinics are to be established in several locations. The primary emphasis will be on health services for pregnant women, infants and young children including prenatal care, delivery, postnatal care for mothers and infants, nutrition counseling, family planning and treatment of episodic illness in young children. The project intends to utilize the limited number of physicians in the area on a fee-for-service basis.



CITY : Marks

PROJECT NUMBER : 43085

PROJECT TITLE : Planning a Comprehensive Community Health Program

GRANTEE : Howard University
Washington, D. C.

PROJECT PERIOD : 5/1/70 - 4/30/71

CURRENT 314(e)
AWARD : \$84,668

DESCRIPTION : The major objective of this program is to develop a tri-part program in medicine, dentistry and community development by establishing a comprehensive approach to provide improved health services, both medical and dental, as well as to devise a community development program to enhance the quality of life of the residents of Marks and Quitman County.



CITY : Fayette

PROJECT NUMBER : 43086

PROJECT TITLE : Development of Comprehensive Health
Care System in a Rural Area of
Mississippi

GRANTEE : City of Fayette
Fayette, Mississippi

PROJECT PERIOD : 5/1/70 - 4/30/71

CURRENT 314(e) AWARD: \$131,970

DESCRIPTION : The major objective of this program is the
development of a comprehensive primary
care program to include team medical-
dental-nursing services, systematic
community outreach, community
coordination around health issues, training
of community health aides, environmental
engineering services, transportation facilities,
and limited hospitalization facilities with
appropriate back-up services as needed from
nearby medical centers. This program will be
available to all residents of Jefferson and
Claiborne Counties.



NATIONAL DENTAL ASSOCIATION, INC.

OFFICE OF THE PRESIDENT

September 24, 1970

Mr. Eliot Richardson
Secretary of Health Education Welfare
330 Independence Avenue S. W.
Washington, D. C. 20201

Dear Mr. Richardson:

May I take this belated opportunity to congratulate you and wish you the very best during your term as Secretary of Health Education Welfare.

I am asking as the President of the National Dental Association an audience with you and any other related persons to discuss minority group funds for our Nation's Dental Students.

Very truly yours,

Clyde R. Broadus, D. D. S.

CRB:jw

cc: Mr. Robert Brown
Dr. Joseph Henry
Dr. W. H. Allen



*Memorandum**Health
(NMA)*

TO : Thomas Laughlin, Jr., Associate Commissioner
Medical Services Administration, SRS

DATE: October 12, 1970

FROM : *Ed Davis*
Edward Davis, Associate Regional Commissioner
for Medical Services, Region IV

REFER TO:

SUBJECT: North Carolina - Suspension of Providers (Dental)

The following is in response to the inquiry received Friday, October 9.

Of the original 16 dentists that were screened for further review, one was immediately suspended from further participation in the program. This dentist was white. Of the remaining 15, 6 were subsequently cleared, and the fiscal agents or State Agency had no record of the breakdown. Of the remaining 9 dentists, the agency had the field representatives to check these out - 5 are black, 4 are white. Therefore, of the original number that required suspension or indepth review, 5 are black, 5 are white.

The consultative staff of Blue Cross/Blue Shield consists of one black physician, one white physician, and two white dentists.

The peer review committee for dental services consists of 5 white dentists and one black dentist.

The State Agency, prior to this situation, notified the fiscal agent that all organizations or groups of physicians and dentists were to be represented on the various committees. They are following up on this to assure that all groups are represented.

The expression "historical pattern" came up in my conversation with Dr. Little (black) when he indicated he had as many white patients as black patients. It was made with reference to his location of practice, meaning of course that his patients, white or black, would go to the dentist who was conveniently located to them. There are some things that are occurring that would bring services closer to the people with participation by all groups - the Neighborhood Health Centers in the Model Cities (Charlotte), the comprehensive family health program in Durham, and the Winston Salem health centers. The State Agency has obtained agreements from providers that they will meet the requirements of Title VI (Civil Rights). The agency has a staff member assigned to this area. Also, the Regional Civil Rights Office performs reviews.



MEMORANDUM

THE WHITE HOUSE

WASHINGTON

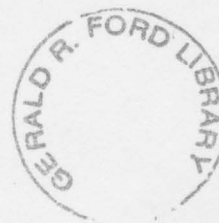
March 2, 1972

MEMORANDUM FOR ROBERT BROWN

FROM: PAUL LAVRAKAS

SUBJECT: NMA problems with Bureau of Health Manpower Education,
NIH

- A. Spoke with Emerson Walden, March 1; he feels Endicott of NIH is giving him the runaround despite verbal commitment to fully cooperate with NMA in selection of personnel for Office of Health Manpower Opportunity. Walden said that Endicott plans to bring a particular black doctor down from Harvard; this man is not acceptable to Walden and the NMA. Walden is putting a memo of agreement together, which would put in writing that which Endicott agreed to verbally.
- B. Spoke to Dr. Endicott who denies NMA applicants were sloughed off, Endicott said that NMA has provided him with a long list of candidates for various slots -- and that Blue Spruce, the present director of the office in question, will nominate the candidate. He also says that two of the four main slots will be given to NMA candidates, including deputy director. This is contrary to Walden's statement. It is important to remember, Endicott notes, that he is receiving a lot of pressure from other black medical groups (e.g. National Black Medical Students Association), who consider the NMA to be old line conservatives.



June 12, 1972

MEMORANDUM FOR

**Mr. G. Marshall Moriarty
Executive Assistant to the
Secretary
Department of Health, Education
and Welfare**

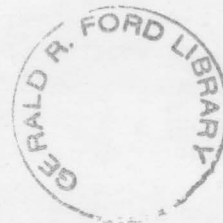
**SUBJECT: Attached proposal from National Medical
Association for the training of ex-military
minority medical personnel**

I am strongly interested in the attached proposal.

**I would appreciate at your earliest convenience a
brief report on the possibility of this proposal
receiving HEW support within the next several
months.**

Thank you for your consideration.

**Robert J. Brown
Special Assistant
to the President**



Attachment

RJB:PL:rm

June 14, 1972

MEMORANDUM FOR

**Honorable Donald E. Johnson
Administrator
Veterans Administration**

**SUBJECT: Attached Proposal from the National
Medical Association, Inc.**

I am very interested in the attached proposal.

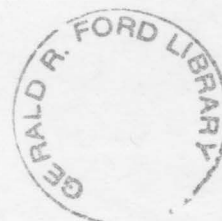
I would appreciate your comments on the possibility of this proposal receiving Federal assistance within the next several months.

Many thanks.

**Robert J. Brown
Special Assistant
to the President**

Attachment

RJB:PAL:lmct



June 29, 1972

ADMINISTRATIVELY CONFIDENTIAL

MEMORANDUM FOR ROB DAVISON

FROM: BOB BROWN

SUBJECT: National Medical Association (NMA)

The NMA has submitted to HEW a proposal for a program to prepare ex-military minority medical personnel for new health careers. They are requesting \$10 million over a five year period to train 880 people in the para-medical area.

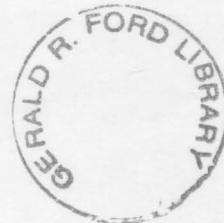
The program is a good one in concept, although the amount requested is probably unrealistic. I would recommend a grant of \$500,000 or so be made to launch this program on a one year pilot basis with continued support pending evaluation of the initial effort.

Rationale for Support

The support of the black medical community is an important part of our black vote drive. If I were able to announce this above grant at the NMA convention, where I am scheduled to speak on August 15, the impact would be considerable. Therefore, if a commitment could be made by the Bureau of Health Manpower Education prior to the above date it would be most helpful to us.

ADMINISTRATIVELY CONFIDENTIAL

PL:rm





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DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
WASHINGTON, D.C. 20201

OFFICE OF THE SECRETARY

JUL 31 1972

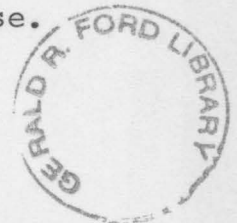
MEMORANDUM FOR HONORABLE ROBERT J. BROWN

This is in response to your memorandum of June 12 concerning the proposal from the National Medical Association for training of ex-military minority medical personnel.

On July 7 the Secretary forwarded the attached letter to Mr. Robert Watkins of the National Medical Association. In accordance with the Secretary's letter, Dr. Kenneth Endicott at the Bureau of Health Manpower Education, National Institutes of Health, has called Mr. Watkins for the purpose of arranging a meeting to discuss the Association's proposal. This meeting has not yet been scheduled.

Preliminary review of the Association's proposal by Department staff has identified three problems:

1. The proposed costs of the project appear to be extremely high when compared with those associated with similar allied health training programs.
2. The proposal, as presently written, does not provide for assurances of employment for those who successfully complete the training.
3. Although the proposal is based on the premise that increasing numbers of ex-military minority medical personnel that will become available over the next several years, Department of Defense projections do not support this premise.



Page 2--Honorable Robert J. Brown

I am told that the Department officials who reviewed the proposal do believe it has merit and will be pleased to work with the Association in modification of the program so as to increase the chances for funding.

We will, of course, keep you posted on further developments.



G. Marshall Moriarty
Executive Assistant
to the Secretary

Attachment





THE SECRETARY OF HEALTH, EDUCATION, AND WELFARE
WASHINGTON, D. C. 20201

JUL 7 1972

Mr. Robert D. Watkins
Executive Vice President in Charge
of Administrative Affairs
National Medical Association, Inc.
2109 E Street, N. W.
Washington, D. C. 20037

Dear Mr. Watkins:

Please accept my apologies for the delay in thanking you for your and Mr. Bennett's letter of June 1 and the proposal for "A Program to Open New Health Careers to Ex-Military Minority Medical Personnel." May I also take this opportunity, on behalf of the President, to acknowledge your telegram to him concerning this proposal.

The plans which you have set forth for a National Urban Health Corps touch upon areas which are of great interest and concern to us. Several significant programs are now going forward to enhance the training, education, and employment of veterans, as well as to increase the availability of health services for those who now lack them. Some of the recruitment and training programs are especially designed to aid former servicemen who have had medical or allied health training and experience to enter health careers. These include MEDIHC (Military Experience Directed into Health Careers) and VEHTS (Versatile Employment of Health Trained Servicemen).

The Comprehensive Health Manpower Training Act of 1971 (P.L. 92-157) includes specific authority for grants to establish or operate projects designed to identify individuals with a potential for education or training in the health professions who due to socioeconomic factors are financially or otherwise disadvantaged, and to encourage and assist them to enroll in a health professions school or to undertake such postsecondary education or training as may be required to qualify them to enroll in such a school. Veterans with health related experience in the Armed Forces are specifically mentioned in this provision of the Act.

The new special health careers opportunity grants program has been implemented by the Bureau of Health Manpower Education, National Institutes of Health, and I have asked the Bureau to give careful consideration to the several aspects of your proposal.



Page 2 - Mr. Robert D. Watkins

It would be helpful if you could meet with officials of the Bureau for further discussions. Dr. Kenneth M. Endicott, Director, will be glad to arrange a meeting with interested members of his staff, and suggests that you call his office directly (496-4068).

With kindest regards,

Sincerely,

A handwritten signature in dark ink, appearing to read "E. R. ...", with a stylized, flowing script.

Secretary

