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DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

PUBLIC HEALTH SERVICE

HEALTH RESOURCES ADMINISTRATION

- - -

THIRTY-FIRST MEETING OF THE

NATIONAL ADVISORY COUNCIL ON REGIONAL MEDICAL PROGRAMS

- - -

Conference Room M
Parklawn Building
3600 Fishers Lane
Rockville, Maryland

Tuesday, November 27, 1973

The meeting reconvened at 9:00 o'clock, a.m.,

Dr. Herbert Pahl, Acting Director, Regional Medical Program
Service, presiding.

COUNCIL MEMBERS PRESENT:

MRS. AUDREY M. MARS
GEORGE E. SCHREINER, M.D.
MR. EDWIN C. HIROTO
DR. LAWRENCE FOYE
MRS. MARIEL S. MORGAN
BENJAMIN W. WATKINS, D.P.M.
MR. SEWALL O. MILLIKEN
MR. C. ROBERT OGDEN

C O N T E N T S1
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Approval of minutes

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Motion
Vote

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Resolution re allocation of additional RMPS funds

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✓ Motion
Vote

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P R O C E E D I N G S

1
2 DR. PAHL: Will the meeting come to order.

3 We are starting the open session again this morning
4 and will have that go on as long as it seems desirable, and then
5 we will again go into executive session to complete the Council's
6 review of applications.

7 Now, I had two items of business for this session
8 carried over from yesterday. One has to do with the Council's
9 approval of the minutes, which I called to your attention yes-
10 terday as being in the agenda folder. I would entertain a mo-
11 tion for approval or amendment if you have had a chance to read
12 them.

13 MR. OGDEN: Move approval of the minutes as mailed.

14 MRS. MARS: Second.

15 DR. PAHL: It has been moved and seconded to
16 accept the minutes. Any discussion?

17 If not, all in favor say "aye."

18 (Chorus of "ayes.")

19 DR. PAHL: Opposed?

20 (No response)

21 DR. PAHL: So moved.

22 The second item of business from yesterday has to do
23 with a reconsideration of the draft resolution that we consid-
24 ered and what we have already distributed to you is a reworked
25 version which I believe has those kinds of directions in it
which came out of yesterday's discussion.

1 We have eliminated some of the whereases. We have
2 introduced the fact that Council and Departmental policies,
3 in addition to existing legislation, of course, should be pur-
4 sued.

5 We have also indicated that there is a limitation on
6 the discretionary authority given to the Director. We have sug-
7 gested in this resolution that it be no more than \$10 million.
8 That, of course, is an arbitrary figure that is even yet dif-
9 ficult to justify and it is not something which I would care to
10 state isn't alterable in one fashion or another from my point
11 of view. If anything, it could perhaps be lower.

12 I certainly don't see any need for additional funds.
13 So let me read for the record the redrafted resolution and then
14 see what kind of discussion we may have.

15 This is a resolution by the National Advisory
16 Council on Regional Medical Programs, recommending allocation
17 of additional RMPS funds in fiscal year 1974:

18 "WHEREAS: RMPS has established a mode for allo-
19 cating the funds already made available for Fiscal
20 Year 1974, and

21 "WHEREAS: Substantial additional funds may become
22 available for obligation by RMPS in Fiscal Year 1974,

23 "BE IT RESOLVED THAT: The National Advisory Council
24 recommends that:

25 "1. the Regional Medical Programs Service

1 allocate by the established mode the full amount of
2 Fiscal Year 1974 funds made available, up to the
3 maximum amount anticipated under the HEW Continuing
4 Resolution or Appropriation, \$81.9 million.

5 "2. up to \$10.0 million of any amount over
6 \$81.9 million which the Regional Medical Programs

7 "2. up to \$10.0 million of any amount over
8 \$81.9 million which the Regional Medical Programs
9 Service may be directed to obligate in Fiscal Year
10 1974, may be distributed in a manner that the
11 Director, Regional Medical Programs Service, finds
12 will make the best possible use of funds in accord-
13 ance with existing legislation, Council, Department
14 and RMPS policies.

15 "3. any other funds in excess of \$81.9 million,
16 not awarded pursuant to item 2, above, shall be
17 awarded subject to the Council's recommendation
18 thereon at its next regular or special meeting after
19 such funds shall have become available for obliga-
20 tion."

21 That is the end of the proposed resolution.

22 I would like to have whatever discussion or comments
23 you may have relative to this.

24 I hope that we have incorporated the points that were
25 made yesterday.

1 Dr. Foye.

2 DR. FOYE: Does somebody have a thing about "mode"?

3 (Laughter)

4 I am wondering about "method" or something.

5 The first one might read:

6 "RMPS has established a method, acceptable to this
7 Council, for allocating the funds already made available
8 for Fiscal Year 1974."

9 More than established, RMPS has picked a method, it
10 is a method acceptable to Council; and then the other would be
11 at the end of 2 be added:

12 "all such distributions will be reported to the
13 Council at its next regular meeting."

14 DR. PAHL: Sorry, that point was made yesterday. We
15 did include, certainly those are two appropriate points.

16 DR. FOYE: "Acceptable to Council," in the first para-
17 graph, is protective.

18 DR. PAHL: Yes. Is there other discussion?

19 MRS. MARS: I think with those points incorporated,
20 it is an excellent resolution, does cover everything, and I
21 move it be accepted.

22 MRS. MORGAN: I second it.

23 DR. PAHL: It has been moved and seconded to accept
24 the draft resolution as prepared and amended by Dr. Foye.

25 Any further discussion?

1 MR. MILLIKEN: Question.

2 DR. PAHL: If not, all in favor say "aye."

3 (Chorus of "ayes.")

4 DR. PAHL: Opposed?

5 (No response.)

6 DR. PAHL: So moved.

7 Now, that completes the items of business I believe
8 I carried over from yesterday.

9 It is open for any other matters that the Council
10 or the public may have.

11 MR. OGDEN: Herb, I might suggest at this point,
12 since we have adopted this resolution, anticipating the possi-
13 bility of additional funds, that this raises the question of
14 how the regions respond in the event there are additional funds
15 and how quickly they can do so.

16 It occurred to me, thinking about this last night,
17 perhaps what we should do is if not by resolution, then by
18 some other action of Council, reiterate the fact that our
19 mission statement in 1971 remains valid and Council will respond
20 to applications or to those already on file based on the
21 priorities encompassed in that mission statement as well as in
22 subsequent mission statements, which have been promulgated
23 by RMPS or by this Council.

24 I don't know exactly how to go about doing that, but
25 I think you see what I have in mind, because there may be little

1 time in which to get these funds committed.

2 I am sure that all of our programs would like to
3 go back to doing what they were doing before they were told to
4 phase out. Yet I suppose at this point they would need to
5 make formal application to be able to do that.

6 I don't know whether we can go back and simply say
7 let's go back to where we were before, but this is what I have
8 in mind.

9 DR. PAHL: I think it is most appropriate that you
10 again today refer to the mission statement and this point
11 came up yesterday. As a matter of fact, I think that some of
12 the coordinators have indicated to me that this is something
13 which should be in the public record, that the Council did en-
14 dorse this mission statement. It still represents a funda-
15 mental document of RMPS. And the comments that were made yes-
16 terday by Dr. Endicott and Dr. Margulies in relationship to
17 the options and priorities as being areas of high interest,
18 but no longer used in a restrictive sense, implied, and I
19 think it is good to make it explicit, that the mission state-
20 ment unless changed by the Council is still endorsed by the
21 Council. And we will bring that fact in written form to the
22 attention of the regions after this meeting.
23 So that the framework of what regions may do will be broadened,
24 or, if you will, referred back to the dimensions that it was
25 prior to the phaseout.

1 MR. OGDEN: In other words, you don't feel it will
2 be necessary for the Council to make a further statement on
3 this at this time?

4 DR. PAHL: I don't feel it would be necessary for
5 Council to do so. I think if you believe, in view of yester-
6 day's discussion, it would be appropriate for you, I see no
7 reason why you should not do so.

8 From staff's point of view, I believe the discus-
9 sion we have had at this Council meeting, with Dr. Endicott and
10 Dr. Margulies and then the Council itself, gives me sufficient
11 authority to transmit such information to the regions in
12 such form.

13 MR. OGDEN: Will you have the record read that
14 it was discussed by Council, it is the sense of the Council
15 this is the case with which you concur? On the basis of the
16 statements by Dr. Endicott and Dr. Margulies. And we would
17 urge the regions begin standby preparation for the submission
18 of proposals.

19 DR. PAHL: Yes.

20 MR. OGDEN: To move back to the programs which they
21 were engaged in prior to the time of the phaseout.

22 DR. PAHL: Also at the Chicago 18th or 19th meeting
23 of the coordinators and number of the chairmen of the Regional
24 Advisory Group and number of our own staff, we did discuss what
25 the position would be with both local RMP's and RMPS should

1 sizeable funds come to us for distribution. And the
2 challenge that this places on the regions to develop appropriate
3 kinds of activities. Because merely having the funds come
4 to RMPS is not in and of itself sufficient for us to distribute
5 these to regions unless they in fact have programs that can
6 justify their use, so that we again will make this information
7 available to the regions.

8 MR. OGDEN: What I say, I don't mean to ignore the
9 recent statement we have made concerning the five, what were
10 priority areas.

11 DR. PAHL: No.

12 MR. OGDEN: Certainly those represent a subsequent
13 mission statement which has been promulgated and which is of
14 considerable importance. Because what we are doing here today
15 recognizes that. And I should hate to see these things aban-
16 doned in favor of going back to things that had been done
17 before.

18 I think these need to be blended together now by the
19 regions so they are moving ahead with many of the quality
20 assurance items, with all due regard to the fact Dr. Roth
21 is not here and he and I had a little debate about that yes-
22 terday afternoon.

23 MR. HIROTO: Conversation.

24 MR. OGDEN: "Conversation," that is a better term.

25 (Laughter)

Doesn't put it quite in a strained light. I don't

1 think there was that indeed.

2 Okay.

3 DR. PAHL: Is there further discussion on this
4 point?

5 Dr. Sparkman.

6 DR. SPARKMAN: Dr. Pahl, I would like to support
7 this, not because I come from the State of Washington --

8 (Laughter)

9 -- as does my esteemed colleague.

10 MR. OGDEN: I appreciate the support.

11 (Laughter)

12 DR. SPARKMAN: I think the action, I am pleased to
13 hear the action of the Council yesterday saying that the five
14 priorities are options from which -- that there is action
15 possible beyond that point, in light of the fact you just
16 discussed; namely, additional funds may be available, may be
17 made available. It would be helpful to have some kind of fur-
18 ther guidelines or parameters I believe Mr. Ogden and you are
19 discussing.

20 I believe the mission statement of May 1971 adopted
21 by this Council is an appropriate one. I find nothing else in
22 your minutes since that time to indicate there was any change
23 in that.

24 I wonder whether there should also be any suggestion
25 that the regions return to the priorities that they themselves

1 set within the mission statement. Or is that necessary or is
2 it inappropriate now?

3 It would be helpful to us in considering the kinds
4 of proposals that will be coming in as we think about con-
5 tingency planning in case funds are available.

6 DR. PAHL: I think what we wish to return to, again
7 as local decision making, and what we have as I understand as
8 a Department understanding now, from statements made yesterday,
9 is that there are areas of priority interest to the Department
10 which should be made known to regions and it has been the
11 experience I think of RMPS when such priority areas by the
12 Department are announced, regions and regional advisory groups
13 take these into account. But it is not a restriction placed
14 upon the local regional advisory group in arriving at its set
15 of priorities.

16 Very honestly, I think that we continue to thread
17 our way through a series of understandings and I would like to
18 indicate since we are in public session, that what I intend to
19 do is to take the sense of this discussion, yesterday's dis-
20 cussion, together with the comments that were made by those
21 who have spoken for the Department, and try to formulate these
22 in a brief statement which will have the concurrence of those
23 who spoke to you, Dr. Margulies and Dr. Endicott. So that
24 there is no further need for understandings. And then submit
25 this to the coordinators and regional advisory groups.

1 I believe that that is probably our best insurance
2 for having understanding. Because when something is com-
3 mitted to paper, we can then have something we can all focus
4 upon and we can refer back to.

5 I don't believe there will be any difficulty in
6 this since we have the understandings and the transcripts,
7 and I believe we can move ahead much more expeditiously than
8 we have in the past.

9 So in that regard, we will try to clarify the
10 situation and take into account all of the points that have
11 been made throughout this Council meeting relative to the
12 mission, local decision making, termination dates, and those
13 important issues.

14 MR. OGDEN: I might just comment, I think you are
15 covering what Dr. Sparkman was saying.

16 DR. PAHL: Yes. All right, thank you.

17 There are other comments from Council?

18 Other members of the public who may be here?

19 Dr. van Hoek is on the side here and will be very
20 happy to respond to any questions that may come to mind as
21 a result of yesterday's discussion, and Mr. Landman, from
22 General Counsel Office, is here, if there is anything else
23 that has occurred to you as a result of discussions and those
24 we have expressed yesterday.

25 Well, if not, I think I will then close the open

1 session of the meeting and ask those who are not again involved
2 with the direct review of grant applications if they will
3 please leave at this time. And we will then turn to Mrs.
4 Silsbee for a continuation of our review of grant applications.

5 MR. OGDEN: Herb, did we announce in public session
6 what we are doing about Council meetings?

7 DR. PAHL: Yes, that was public session when we set
8 the dates.

9 MR. OGDEN: All right. I just want to make sure that
10 has been announced to the public session.

11 MRS. MORGAN: To go in the Federal Register, too.

12 DR. PAHL: Yes. As a matter of fact, we have a very
13 efficient staff; we already have rooms reserved in anticipation
14 I hope of some cancellations.

15 We also, of course, will be publishing this immedi-
16 ately in the Federal Register. So all the loose ends will be
17 taken care of.

18 (Whereupon, at 9:20 o'clock, a.m., the Council
19 adjourned the open session and reconvened in executive
20 session.)

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