other hand, these states will receive only \( \frac{1}{n} \) of federal funds for every dollar of their own which they spend on medical care.

As between hospital construction and medical care, a state will obviously receive more for its money by investing in new hospitals than by spending money on the care of patients in existing institutions. But hospitals and medical care are to a large extent mutually complementary. Moreover, the relative need for the one as compared to the need for the other will vary from place to place. The arbitrary weighting in favor of hospital construction might, therefore, prove inimical to the economic budgeting of public funds.

Federal grants-in-aid are, of course, not limited to the field of health and medical care. The Social Security Act provides for grants to the states on a 50-50 matching basis for old-age assistance, aid to dependent children and aid to the blind. A Federal Aid to Education Bill providing for grants to the states on a non-matching basis was introduced at the last regular session of Congress. In view of the possible influence which the formulae under which these grants are made might exert on state and local budgetary policies, it would appear desirable to correlate all of them as far as possible in the interest of a rational allocation of public funds.

INDEX—MEDICAL CARE

**AMERICAN ASS’N FOR LABOR LEGISLATION**, 499.
**AMERICAN ASS’N FOR SOCIAL SECURITY**
"model "health insurance bill sponsored by, 629-32.
**AMERICAN FED. OF LABOR v. Buck Stove Co.,** 600.
**AMERICAN FOUNDATION,** 609.
**AMERICAN HOSPITAL ASS’N,** 545, 607, 608.
**AMERICAN MEDICAL ASS’N**
position of, as to cash versus service benefits, 514, as to free choice of physician, 514, as to remuneration of physicians under plans, 514; enforcement by, of ethical rules, 517; development of rules of, as to contract practice, 518-22; indictment of, for violation of Antitrust Law, discussed, 595-605; position of, as to: early health insurance movement, 605-07, health titles of Social Security bill, 608; disapproval by, of Nat. Health Program, 609, of Nat. Health Bill, 619, of Sheppard-Towner Act, 611. See ANTITRUST LAWS.
**AMERICAN PUBLIC WELFARE ASS’N**
survey of public medical services by, 622-23.
**Anderson v. Shipowners’ Ass’n,** 600.
**Anderson v. U. S.,** 600, 601.
**ANTITRUST LAW**
indictment of AMA and other medical societies under, 596; indictment summarized, 596-97; formal sufficiency of indictment in AMA case considered, 597-98; question whether actions of medical societies against GHA were illegal under, 598-601; question whether practice of medicine is "trade" under, 601-04.
**Atlantic Cleaners and Dyers, Inc., v. U. S.,** 601, 603, 604.

**Brighton College v. Marriott,** 602.

**CALIFORNIA PHYSICIANS’ SERVICE**
principles controlling organization of, 566; lack of precedents for, 566-67; not illegal corporate practice, 568-69; not subject to insurance law, 569-71; provisions of, as to: management and policy, 572, voting control, 572, free choice of physician, 573, protection of members’ interests, 573-74, reserves, 574-75, unit system of paying physicians, 575, supervision of physicians, 575-76, forms of contracts, 576-79, types of medical care covered, 577-78, dues, 579, protection from tort liability, 581-82.

**COMMISSION ON HOSPITAL SERVICE**
of Am. Hospital Ass’n: standards for approval of hospital service plans fixed by, 534, 541-42, 543-44, 548; model enabling act proposed by, 542-43.
**COMMITTEE OF PHYSICIANS FOR THE IMPROVEMENT OF MEDICAL CARE,** 609, quoted, 642.
**COMMITTEE ON COSTS OF MEDICAL CARE,** 499, 607, 608, 642.
**COMMITTEE ON EDUCATION AND LABOR,** 500, 646, 671.

**CONTRACT PRACTICE**
defined, 516; historical growth of, 517-19; abuses in, 518; evolution of AMA ethical rules as to, 518-22.

**CORPORATE PRACTICE**
development of, 522; basis of legal rules restricting, 523-24; distinctions based on types of cor-

Cost of Medical Care
effect of, on adequacy of medical services, 502; uneven incidence of, 503-04; relation of disability to, 504-05; effect of changing technology on, 507, 616.

Disability Insurance
provision for grants in aid of temporary, in Nat. Health Bill, 615, 646; inclusion of permanent, in old-age benefit system proposed, 646; need for, as shown: by dependency due to disability, 647-50, by extent of disability found in Nat. Health Survey, 650-51, in Great Britain, 651, in Germany, 651-52, among railroad workers, 652-53; inadequacy of voluntary, 653; types of disability to be covered by, 654; problem as to administrative relation of temporary, to permanent, and to other insurances, 545-57; problems of, as to: coverage, 567-58; definition of compensable disability, 568-59; benefit rates, 659-60, waiting period, 660-61, benefit period, 661-62, eligibility, 662; estimates as to costs of temporary, 662-64, permanent, 664-65, of both, 665; provisions for, in "model" bill of Am. Ass'n for Social Security, 630-31, in Cal. Health Ins. bill, 635-36, in Wagner-N. Y. Health Ins. bill, 636. See Health Insurance.

Eastern States Lumber Dealers' Ass'n v. U. S., 599.

Farm Security Admin'ns Medical Care Program
basis of FSA farm loans, 583-84; need for, 584-85; reason for prepayment plan in, 585; initial steps in, 585-86; agreements with county medical societies, 587; benefits and costs to member, 587-88; states in which, operates, 589; operation of, on FSA homestead projects, 589-90; special plans of, in N. and S. Dakota, 590-92, in California and Arizona, 592; attitudes of physicians and borrowers toward, 593-94.

Federal Aid to Education Bill
grants-in-aid under, compared to those in Nat. Health Bill, 672, 678. Federal Trade Comm'n v. Raladam, 603.

Free Choice of Physician

Grants-in-Aid
under Nat. Health Bill: total of, contemplated, 666; purposes of, 669; table analyzing salient provisions relating to, 668; variations in, depending on financial resources, 669-70; procedure for, illustrated by hypothetical child-health grant, 670-71; criticisms of formulae for, considered, as to administration discretion, 672-73, as to discriminatory effect on progressive and on poorer states, 673-77, as to effect of varying formulae on entire health program, 677-78; table showing taxes required of states to match, for child health, 676. Graves v. Minnesota, 603.

Group Health Ass'n, Inc.
organization of, 595; opposition to, by medical societies, 595-96; held not illegally practicing medicine or selling insurance, 595.

Group Health Ass'n v. Moor, 570, 605.

Group Health Federation, 515.

Group Practice
defined, 516; use of corporate form in, 522; encouraged under Cal. Health Ins. bill, 635; advocated, 642.

Hall D'Arth v. British Provident Ass'n, 570.

Harris v. Thomas, 603, 604.

Health Insurance

Health Insurance

Hospital Construction
grants for, under Nat. Health Bill, 614, 668, 669, 678; by PWA and WPA, 614.

Hospital Service Plans
economic need for, 528-29; origins of, 529; in New York, 531, elsewhere, 532; standards for approval of, 534, 541-42, 543-44, 548; form of corporate organization of, 545-46; administrative organization of, 546-47; obligations of hospitals in, 547-48; subscriber contracts: duration, 548-49; scope of benefits, 550-52, 557; promotional activities for, 552-53; enrollment practice of, 553-54; family coverage in, 554-55; subscription charges of, 555-56, 557; reciprocal benefits of, 556-57; expansion of, 557-58; relation of Cal. Physicians Service to, 580, effect of Title XIII on, 627.
Hospital Service Plan Enabling Acts
in New York State, summarized, 529-31; states passing, 531-32; states ruling, unnecessary, 532; hospital responsibility under, 533; powers of regulatory bodies under, 533-34; relation of, to insurance laws, 534; granting tax exemption, 534-35; investments authorized by, 535; requirements of, as to: directors, 535-36; eligibility of hospitals, 536; rates, 536-37, examinations and reports, 537, working capital, reserves, and surplus, 537-38; type of service, 538-39; hospital responsibility, 539; special provisions in, 540-41; text of model, 542-43.

Insurance

Interdepartmental Committee to Coordinate Health and Welfare Activities, 499-500, 609.

Maternal and Child Health

Medical Care Plans
chart for analysis of, 508-09; Ross-Loos Medical Group, 509-10, 513; Roanoke Rapids Community Service, 510, 513; Stanocola Employees Med. & Hosp. As'n, 510, 513; Spaulding Bakeries Employees' Mut. Benefit As'n, 511, 513; Consolidated Edison Co. Mut. Aid Soc., 511, 513, 514; King County Med. Service Bureau, 511, 513; Saskatchewan Municipal Doctor System, 512; Transport Workers' Union Plan, 512-13; should, be limited to specific groups? 513; service versus cash benefits in, 513-14; methods of remunerating physicians under, 515. See California Physicians' Service, Farm Security Admin's Medical Care Program.

Medical Care Plan Enabling Acts
history, of in Michigan, 559-60; digest of Michigan bill for, 560, with legislative changes, 560-61; relation of, to insurance laws, 561-62, to corporate practice, 562, to malpractice liability, 562; digest of, in Connecticut, 563, in Pennsylvania, 563-64, in Vermont, 564, in New York, 564; unsuccessful bills for, listed, 564.

Medical Ethics

Medicine
changing technology of, 497, 507, 616; study of social factors in, 497-98; effect of social factors upon, 500-02, 617-18.

Montague & Co. v. Lowry, 600.

National Health Bill
outlined, 496; development of movement culminating in, 606-10; special experience in relation to specific proposals of, 611-16; social forces in background of, 616-18; see Disability Insurance, Grants-in-Aid, Health Insurance, Hospital Construction, Maternal and Child Health, Public Health Service, Public Medical Services.

National Health Conference, 500, 609.

National Health Survey
findings of, as to extent of disability, 649-51.


Pratt v. British Medical As'n, 602, 603, 604.

Public Health Service
U. S. Pub. Health Service program of, 612; in rural areas in relief program, 613; under Social Security Act, 613; under Nat. Health Bill, 613, 668.

Public Medical Services
early development of, 620-21; effect of depression on, 614; under Regulation No. 7 of PERA, 615, 631; groups in need of, 615; deficiencies in existing, 622-23; grants in aid of, authorized by Nat. Health Bill, Title XIII, 619, 668; scope of, subsidized under Title XIII, 623-24; standards for approval of plans for, under Title XIII, 624-27.

Sheppard-Towner Act, 607, 610, 611.

Social Security Act
limited health program provided by, 499, 608; maternity and child welfare programs under, 611; crippled children's aid under, 611; public health program under, 612; relation of disability insurance to unemployment compensation and old-age benefits of, 656-57, 633; grants-in-aid under, compared to Nat. Health Bill's, 677.

The Schooner Nymph, 603.


Wagner, Robert F.
quoted, 675.

Wagner National Health Bill

Workmen's Compensation Laws
effect of, on contract practice, 518; relation of, to disability insurance, 616, 645, 656-57.