

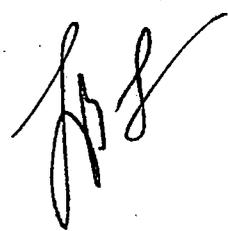
Correspondence – National Council of Senior Citizens

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July 26, 1974



Honorable William R. Hutton
Executive Director
National Council of Senior Citizens, Inc.
1511 K Street, N.W.
Washington, D. C. 20005

Dear Mr. Hutton:

Thank you for sending me A Program for Older Americans, which gives the policies on aging of your fine organization. It is an excellent paper and will be helpful to us.

With very best wishes.

Sincerely,

Jimmy Carter

PRESIDENT
 NELSON H. CRUIKSHANK
 Washington, D. C.

FIRST VICE PRESIDENT
 MATTHEW DEMORE
 Washington, D. C.

SECOND VICE PRESIDENT
 WALTER NEWBURGER
 Congress of Senior Citizens
 of Greater New York.

THIRD VICE PRESIDENT
 DAVID MILLER
 UAW Retirees Council,
 Detroit, Michigan

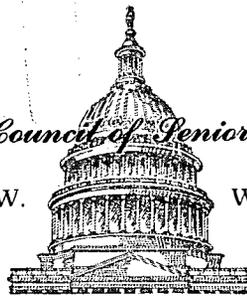
FOURTH VICE PRESIDENT
 JAMES CARBRAY
 Whittier, California

SECRETARY-TREASURER
 ANDREW W. L. BROWN
 Detroit, Michigan

PRESIDENT EMERITUS
 EMERSON O. MIDYETT
 San Francisco, California

National Council of Senior Citizens, Inc.

1511 K Street, N.W. Washington, D. C. 20005



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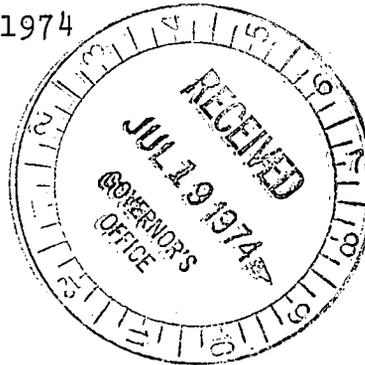
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Membership Assistant

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Research Assistant

July 16, 1974



Honorable Jimmy Carter
 Governor of Georgia
 Atlanta, Ga.

Dear Governor Carter:

George Kourpias of the International Association of Machinists spoke with me by telephone today concerning his earlier telephone conversation with you.

He has requested that I forward to you the enclosed copy of the paper we submitted to your staff assistant concerning NCSC's policies on aging.

Respectfully,

William R. Hutton

William R. Hutton
 Executive Director

WRH:LP

Enclosure

Janet
 "Th - an
 excellent
 paper -"
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A PROGRAM FOR OLDER AMERICANS

The Older Voter

There are more than 20 million men and women aged 65 or over in the U.S. There are also another 20 million age 55 to 64. In more than half of the Congressional districts, people 55 and over who are either retired or nearing retirement make up nearly 30 per cent of the voters.

The well-being of this large segment of the population is not only an important socio-economic consideration for America but should be of major concern to all candidates for public office.

For a variety of reasons, more and more elderly are joining senior citizens organizations. It has been estimated that one of every two Americans 65 and over has joined some kind of senior citizens group.

National groups of the elderly have clubs or individual members in all Congressional districts. They have their own highly developed channels of communication and an organizational structure which serves national, statewide and area council policies.

More importantly, they have a growing awareness of their strength and political power as a result of their victorious struggle against the AMA to win enactment of the Medicare program and their successive battles to win improved Social Security benefits. For example, the National Council of Senior Citizens includes more than 3,000 affiliated groups with members in all states. The late President Lyndon B. Johnson, in a White House announcement on June 28, 1968, said: "Without the National Council of Senior Citizens there would have been no Medicare."

Clubs of the National Council of Senior Citizens and many other organizations of the elderly, which saw significant progress and promise in meeting the problems of the elderly during the Kennedy-Johnson era have become utterly dismayed by the actions of the Nixon Administration over the past five years in turning back the clock on programs for older Americans.

They have seen the promising recommendations of the 1971 White House Conference on Aging gather dust in the national archives because of Nixon Administration neglect. They feel betrayed by the Nixon election propaganda barrage which followed that conference.

The National Council of Senior Citizens says Democratic office seekers should not get hung up thinking older people are overly conservative on issues. They say that on most social issues--voting Social

Security benefit increases, Medicare, services to the elderly, transportation and housing for the aged, opportunities for meaningful retirement--to name a few--older Americans respond with enthusiasm to a candidate who clearly highlights these issues in a positive way.

The elderly do not want improvements only for themselves, though they are seriously disadvantaged by early retirement on fixed incomes amid the growing problems of inflation and the energy crisis. They also want to improve the quality of life for their children and their grandchildren. They want Congress to help solve their problems--but in harmony with the national interest. A nation as wealthy as ours can afford to do more for its older people without decreasing its efforts for the younger generation.

The candidate who wants to help older Americans will be interested to learn that, on the average, 65 per cent of Americans 55 and over exercise their right to vote. For those under 45 the figure is less.

In most Congressional districts the support of older voters is important to assure a candidate's success--in marginal districts it is essential.

The Problem of Income

Half of the Americans over 65--that's ten million people--have no other income but Social Security benefits or Supplemental Security Income (S.S.I.).

S.S.I. provides only \$146 a month for an individual or \$219 for a couple so far as federal payments are concerned--though states have supplemented their payments. Nearly all S.S.I. levels of total payments fail to meet the lowest, or poverty level budget presented by the U.S. Bureau of Labor Statistics.

The average Social Security benefit is \$186 per month for a retired individual and \$310 for a couple. This is about \$2,000 below what the U.S. Bureau of Labor Statistics considers needed to meet the intermediate level budget for a retired couple and about \$1,000 below that for retired individuals.

Of course there are another 10 million persons over age 65 for whom Social Security benefits represent a mainstay of their retirement income but who do receive income from other sources. But, only one in five persons age 65 and over record sufficient taxable income from all sources to have paid any Federal income tax in the last taxable year.

Every older person in America should have sufficient income to assure a standard of living no lower than the Bureau of Labor Statistics moderate level--a level which is adequate to maintain health and enable an individual to be self-sufficient. In 1975 this modest level of income would require \$6,000 for elderly couples and \$3,300 for single persons.

As is the case with other industrialized countries, general revenues should help support the costs of this nation's social insurance program because the whole society benefits from this program. Over the long run it is reasonable to expect the federal government to become a financially equal third party to reduce the heavy burden of the payroll tax on low-income workers.

Older People and the Social Security System

Aside from establishing the general revenues from the Federal Government as an equal source of funding for the Social Security System--which is viewed as the single most needed change--elderly people have become increasingly aware of the need for three basic changes in the System.

Over the last five years, the Social Security System has become increasingly politicized. First, there has been increasing use of the very envelopes containing benefit checks as a means of conveying political messages by elected officials. This practice should be prohibited.

Also seen as important is the removal of the Social Security Trust Fund from the unified Federal Budget. The practice of counting the monies from the Social Security System--which are protected from actual expenditure on anything but Social Security--to falsely balance the President's deficit Federal Budget is viewed with alarm. This practice has been one cause of the Administration's continued opposition to meaningful benefit increases.

Finally, older persons were seriously concerned when the President allowed the post of Social Security Commissioner to remain vacant for seven months following the firing of Commissioner Robert M. Ball. The single Commissioner should be replaced by a three-man panel appointed by the President, but approved by the Senate with special attention to insuring that both political parties are represented on the board.

The Nixon Record on Social Security

Here is the Nixon Administration record on Social Security benefit increases starting with the President's first year in office.

In April 1969, Mr. Nixon proposed a seven per cent increase in Social Security benefits. Organized labor and the National Council of Senior Citizens lobbied hard against the Administration's proposal. In September of that year, the President increased that offer to 10 per cent. But Congress insisted on a more adequate figure and in December, included a 15 per cent increase as part of the tax reform bill. The President reluctantly bowed and signed the bill.

In 1971, President Nixon proposed a six per cent increase in Social Security benefits, but Congress again ignored the President and passed

a 10 per cent increase in March, which was tied to the Debt Ceiling bill.

In June 1972, Congress again circumvented the President. At first, he favored a five per cent increase but later agreed to a 10 per cent boost. Labor and senior citizens organizations insisted on 20 per cent which became law when Congress again attached the increase to the Debt Ceiling law.

The Nixon Administration in 1973 tried to delay the cost-of-living increase plan from taking effect until July 1975, the next fiscal year, to maintain the fiction of a more nearly balanced budget to offset deficit spending in other areas. However, Congress realized the urgent need for the increase to be effective as soon as possible and rejected the Administration's misleading argument.

But the unprecedented increases in the cost-of-living last year made remedial action by the Congress necessary if older Americans living on fixed retirement incomes were to avoid further poverty and deprivation. Thus it became necessary for Congress to enact a further cost-of-living benefit increase to help elderly persons living on a fixed income. The result violently opposed by the President was the 11 per cent two-step increase with cash benefits increasing 7 per cent in April and a subsequent 4 per cent in July.

It is fair to assume, with this record, that politically aware and informed senior citizens will be looking to elect a Congress this November that is "veto proof".

Older People and National Health Insurance

The goal of National Health Security enunciated by the 1971 White House Conference on Aging is that health care for the aged should be provided as an integral part of a coordinated system that provides comprehensive health services to the total population. Under such a coordinated delivery system, everybody--rich and poor, old and young--would be assured of continuity of care for both short-term and long-term medical conditions.

But the President's "Comprehensive Health Insurance Plan" offers instead a monstrosity of multiple systems.

Of immediate concern to millions of elderly people is the effort reflected in the President's proposal to alter profoundly the basic purposes and concepts of Medicare.

For example, surely one of the major shortcomings of Medicare is the fact that it leaves a significant part of the medical and hospital bill of the older patient to be paid out of his own income.

The Nixon proposal to meet this shortcoming is to add to the deductibles and coinsurance amounts poor elderly people must pay resulting in even a smaller proportion of the total bill to be covered.

Again it is claimed the present program costs are excessive because hospital services are over-utilized. The Nixon plan, however, requires the patient to pay 20 per cent of each day's costs out of his own pocket above the \$100 deductible subject only to the limitation on maximum liability. In short, make hospital care so costly to patients that they will plead with their doctors not to commit them to the hospital except in cases of urgent need.

Older people have learned through the experience of Medicare that insurance, whether private insurance or social insurance, should be designed to protect the great majority of the covered population against the most common risk, rather than just the exceptional cases. The Nixon proposal clearly fails to meet this basic standard. Its guiding principle seems to be to take a lot from a great many in order to give a few people very little.

After almost eight years of experience with Medicare, government officials should have learned that if you pour money into the health system without controls you just get inflationary increases in charges and little or no organizational improvement.

Further still, the President's proposal ignores the lessons gained in the eight years of Medicare experience. Older people have learned that the Federal government has a responsibility that goes far beyond the mere provision of financing and bill-paying mechanisms. It has responsibility for improving the delivery of the health care system so that all people are assured of comprehensive coordinated care of high quality at the most economical cost.

Older people are committed to the basic principles of no deductibles, co-payments, or coinsurance; no billing of the patient; financing through payroll taxes and general revenue rather than through premiums taken out of retirement incomes.

Housing for the Elderly

The 1971 White House Conference on Aging asserted as one of its prime goals that "In keeping with the inherent dignity of the individual, older people are entitled to suitable housing--individually selected, designed and located with reference to special needs and available at a cost which older people can afford."

To provide that housing, the 1971 Conference recommended that "Federal, State and local funds should be earmarked to provide adequate housing for the elderly."

The Administration has responded to the call for increased housing for the elderly by placing a moratorium on new housing while abandoning sections of the Federal Housing program which provided direct loans and housing subsidy programs. This has resulted in the curtailment of a program which has proved successful for 40 years.

To replace this successful program, the Administration has proposed that the elderly be given "housing allowances" to allow them to rent standard housing in the private market.

During Congressional hearings called by Senator Harrison A. Williams (D., N.J.) a coalition of organizations representing the elderly led by the National Council of Senior Citizens proposed an eight-point program to undo the damage done by the Administration's abandonment of proven housing programs. Those proposals are:

*The immediate lifting of the moratorium, the release of impounded funds and the appropriation of sufficient funds to continue existing programs.

*Allowances should be made in authorized prototype costs for the higher per square-foot costs which sponsors require if they are to properly satisfy the special housing needs of the elderly.

*A continuing effort to meet the critical need of the elderly for housing should be assured by earmarking specific minimum amounts in appropriations--at least 25 per cent--for this purpose.

*The inability of the low income elderly, especially minority groups, to afford basic rental charges must be overcome by sufficient rent supplements.

*The ability of communities to provide necessary as well as desirable services to those elderly who reside in dwellings other than multi-family housing should be enhanced by enabling housing facilities for the elderly to provide outreach services.

*The special needs which elderly occupants of multi-family housing facilities have for recreation, nutrition, medical and nursing care, as well as security must be recognized and satisfied by enabling such projects to provide facilities for these services.

*There should be an adequate level of housing construction to insure a minimum of 120,000 units annually for the elderly, as recommended by the White House Conference on Aging and the Senate Special Committee on Aging.

*In the national interest, the critical need of the elderly for proper housing should be served by establishing within the Department of Housing and Urban Development an Assistant Secretary for Housing for the Elderly, who shall administer a clearly defined and adequately funded program of housing for the elderly.

Older People and Institutional Care

One million people currently live in long-term care institutions--nursing homes and homes for the aged. Statistics show--and older

people know -- that about one person out of five is likely to spend some part of his life in such an institution.

During his first term, President Nixon made two speeches deploring the quality of nursing homes, calling them "unsanitary and unsafe, overcrowded and under-staffed". He cited improving nursing home care as "the goal of this Administration", and specifically promised, "One thing you can be sure, I do not believe that Medicaid and Medicare funds should go to substandard nursing homes in this country and subsidize them."

During President Nixon's second term, instead of cutting off funds to substandard nursing homes, the Administration has lowered the standards. In January, 1974, the Administration revised the regulations for skilled nursing homes. In the revision, the Administration deleted the requirement that a registered nurse must visit every patient every day; it changed the minimum requirement for physicians' visits from once a month to once every two months; and it eliminated the requirement that homes be equipped with parallel bars -- essential equipment for physical therapy needed by the many stroke victims who live in nursing homes. Although President Nixon in his first term recognized under-staffing as a major cause of poor care, the President in his second term has refused to set requirements for staff size.

Despite the President's statement in 1971 that "when facilities fail to meet reasonable standards, we will not hesitate to cut off their Medicare and Medicaid funds", a study at the end of 1973 showed that 59% of skilled nursing homes receiving Medicare and Medicaid funds did not comply with federal fire safety standards.

Nursing homes differ from other health care providers in that most nursing homes are businesses, and are run for profit. The only way to assure that \$1.8 billion of Medicare and Medicaid money that goes to nursing homes every year -- and the bulk of it to profit-making nursing homes -- gets used for patient care and is not diverted into the pockets of nursing home owners is by rigid government regulation of staffing and services, and strict enforcement. Also needed is mandatory disclosure of owners of nursing homes -- so that the public can bring pressure on unscrupulous operators who buy drugs from affiliated companies at inflated prices, and who stint on food and tranquilize patients instead of caring for them.

To overcome the resistance of the Nixon Administration, Congress must require HEW to adopt and enforce specific staffing requirements. Congress also must pass a law requiring disclosure of the names of all owners of nursing homes, and of related businesses owned by the same people. (Present law requires disclosure only of stockholders who own 10% or more of a nursing home). To assure enforcement of standards, Congress must make it a crime for a nursing home to violate federal standards while accepting Medicare and Medicaid money. (Present law contains no penalty for past violations; the only penalty is to remove Medicare and Medicaid funding in the future).

In the next few years, our country will adopt a system of national health security, which will include care for the chronically ill. Our health system has focused on "cures" and curable diseases. We do not know how to care for people with chronic illnesses, who need continual care for years on end. We do know that shutting people off in bleak institutions, away from stimulation and away from life is not the answer. We must experiment now on how to meet the needs of the chronically ill so that under National Health Security we can offer Americans something better than spending the last years of their lives in "warehouses for the dying".

Other Areas of Concern to the Elderly

Among the other areas of deep concern to older voters is the problem of a meaningful retirement. The Federal Government must establish and maintain firm guarantees which insure that older people are allowed to participate to their fullest ability in all Government programs. Further, Federal programs, operated on a coordinated National basis--such as the highly successful National Council of Senior Citizens Senior AIDES Program--must be maintained to provide manpower employment and training to those retirees who were forced into retirement or who now find that for either financial or emotional reasons need to work in areas of community service not otherwise covered by the younger work force.

Older Americans also look toward the improved availability of mass transit at the local level. They recognize that the decision to allow reduced-fare, or no-fare ridership for the elderly on local mass transit is a local decision. But they are convinced that a firm commitment by the Congress to follow its historic "busting" of the Highway Trust Fund by approving a workable plan of operating subsidies for hard pressed mass transit system is an urgently needed next step.

The elderly also see it as the role of the Federal Government to serve as a strong advocate for the elderly. This is especially true of Congress since most older Americans are now convinced that the President has totally ignored his duties of leadership as spokesman for the interests of America's poorest elderly.

Of prime importance to candidates, though, is the fact that politically educated and aware older Americans are demanding action and meaningful programs on all these areas of concern now. They are no longer content to watch the government of this country ignore the problems of the elderly in the vain hope that the problems--and the elderly will disappear. The candidate who hopes to capture the older voter must be ready with comprehensive programs. Rhetoric will no longer do the job.