VETO MESSAGE—EMERGENCY MEDICAL SERVICES SYSTEMS ACT OF 1973

MESSAGE

FROM

THE PRESIDENT OF THE UNITED STATES

RETURNING

WITHOUT APPROVAL THE BILL (S. 504) ENTITLED "THE EMERGENCY MEDICIAL SERVICES SYSTEMS ACT OF 1973"



AUGUST 1, 1973.—Read and ordered to be printed

U.S. GOVERNMENT PRINTING OFFICE WASHINGTON: 1973 To the Senate of the United States:

I am returning today without my approval S. 504, the "Emergency

Medical Services Systems Act of 1973.

At my direction, this Administration has been engaged for the past two years in an effort to demonstrate the effectiveness of various types of emergency medical services which can be utilized by local communities. Some \$8 million was budgeted for this purpose last fiscal year, and \$15 million should be spent in the current fiscal year. I strongly believe the Federal role should be limited to such a demonstration effort, leaving States and communities free to establish the full range of emergency medical services systems that best suit their varying local needs.

By contrast, S. 504 would establish a new Federal grant program which would provide Federal dollars to State and local governments for emergency medical services. The program would be a narrow, categorical one, thrusting the Federal Government into an area which is traditionally a concern of State and local governments and should

remain under their jurisdiction.

Instead of providing flexibility for local decisionmaking, a new Federal categorical program of this sort would encourage State and local governments to commit limited funds to federally-defined objectives when their funds might otherwise be spent for local purposes of

higher priority.

The bill would authorize appropriations of \$185 million for this program over the next three years. This is far in excess of the amounts that can be prudently spent, and S. 504 therefore represents a promise of Federal financial assistance that cannot be kept. I believe all of us must avoid actions of this kind which tend to mislead and therefore

disappoint the public.

My second objection to this bill is that it requires the continued operation of the inpatient facilities of the eight general hospitals presently maintained by the Public Health Service. These hospitals have a record of service to this Nation, and especially to its merchant seamen, which is long and distinguished. Nevertheless, it is clear that their inpatient facilities have now outlived their usefulness to the Federal Government. The number of individuals they serve is declining and many of the facilities have become old and outmoded.

Accordingly, the Department of Health, Education, and Welfare has embarked upon a program of contracting with community hospitals for the care of those now served by Public Health Service hospitals. The patients now cared for in Public Health Service hospitals are entitled to receive the best medical treatment available. The fact is that many of our community hospitals are more modern, better equipped and more conveniently located than the Public Health facilities and thus would provide better medical care. I cannot agree to legislation that would deny these patients that opportunity.

RICHARD NIXON.