Announcement

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The Subdivisions

Drifting About In

Mr. and Mrs. Lyman Bush and children were guests of Mr. and Mrs. Floyd Hibbler in Imlay City on Sunday.

The Advisory Board of Farm Bu-reau Women will meet in Mount Clemens this Thursday.

Mr. and Mrs. Otto Rexin and Mr. and Mrs. Edward Dundoff and children were callers at Rogencamp home near Sunday.

Mrs. Howard Green of Novi, Mrs. Alfred Haack of Wixom and Mrs. Otto Rexin were in Pontiac fast Thursday for a meeting of the secretaries of Blue Closs Insurance groups.

Mr. and Mrs. Marvin J. Stayman of Twelve Mile Road amounce the birth of a baby daughter, Mary Helen. Mrs. Stayman is the for-mer Dorothy McHale. The Stay-mans have one other daughter,

Mr. and Mrs. Clark Cambell of Berkley announce the birth of a son, Gregory Keith. Mrs. Cambell is the daughter of Mrs. Mary Pro-kopp, a former resident of Hag-gerty Road.

Guests of Mr. and Mrs. Norris Hill last Sunday were Mr. and Mrs. Walter Hastings of Flint and Mrs. Myrtle Mate of East Lansing.

John Clappison Sells Insurance Phone GR. 4-3511

"SO LITTLE DONE — SO MUCH TO DO"

There is so much to do in our Pharmacy that like the busy housewife, "Our work is never done."

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We are continuously learning about the new advances in medical treatment to be prepared to compound the prescriptions of any Physician with the exact ingredients he specifies.

VOUR PHYSICIAN CAN PHONE GR. 4-2011 WHEN YOU NEED A MEDICINE

us with the responsibility of filling their prescriptions. May we compound yours?

REXALL FOR RELIABILITY

27702 W. 8 Mile Road

Advisory Group Favors \$8 Million School Bond Issue

An \$8 million bond issue for

tee, and to work in conjunction with the Administrative Staff when requested by the Board of Education"

Local Elks Participate In Bowling Tournament

when requested by the Board of Education;
Voting be the board of Sequence of S



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Two Editorials on Michigan Blue Cross

Featured below are the full texts of two editorials which appeared in The DETROIT TIMES on February 26, 1956 and in The DETROIT FREE PRESS on February 27, 1956. Because they present the considered editorial judgment of two of Michigan's great newspapers, we are reprinting them in full as a public service for the information of our 3,600,000 Blue Cross members and all the people of Michigan.

From The Detroit Times, February 26

BLUE CROSS FUSS

We didn't suspect a week ago today, when we started a series of articles on Blue Cross, that the fuss over hospital prepayment would attain the intensity it has now reached.

The amount of hullabaloo, frankly, is getting out

of hand.

Rep. Allison Green has a bill for the Legislature, which he fondly hispes will solve everything. It won't insurance Commissioner Joseph A. Navarre has been quoted with some remarks which we suspect he will regret when he begins to realize what he has said. A group of unions in Detroit and Flint is proposing to jet up a rival "Blue Cross plan," which is entirely which their citate cover hisper we of the proposing the period of the proposing the period when the proposing the citate seven though we doubt it will book

to jet up a rival "Blue Cross plan," which is entirely within their rights, even though we doubt it will look as imple to them once they have gotten into what is a very complicated problem.

Of the three-Rep. Allison, Commissioner Navarra, and the unions-we think the unions are behaving most reasonably. We differ with them only in our opinion as to whether they CAN produce what they think they can.

But of the whole lot, we think Blue Cross and its present managers are the most capable of providing what we want. We think Blue Cross is getting a vicious and needless pushing around.

In our news stories we have tried to tell what was happening without letting our opinions sway us. But this is the editorial page, and this is our opinion, and we are saying what we think.

First of all, a series of articles which began con-trently in another Detroit paper is, for all we know this moment, still running. We don't have any briel with the facts in it.

quarrel with the tacts in it."

We do believe it has placed too much emphasis on "over-utilization"—that is, the complaint that some people either stay too long in the hospital, or get in under Blue Cross when they shouldn't—when they

under Blue Cross when they shouldn't-when they rearch really side.

The Times reported that. We can take you back in the files a couple of years and show we were the first newspaper to report there was some of this chiseling going on. It should be halted. We think it is being halted.

But it makes a rather sensational subject to write about—and some people talk too much about it. This lover-inflization" while it does happen, is not occur-ing to the extent that it makes any vast difference in premium payments.

why do we think "over-utilization" is not as great some people try to suggest? . . .

First, because a Blue Cross study group itself was the first to dig into the matter. No attempt to hide anything, Just an effort to correct the situation, since chiseling by one subscriber is paid for by all the hones ones.

Sechand, Blue Cross, by subsequent and continuous incuiry, thinks that this evil is under good control. even though there is still an afocasional violation.

Third, because Michigan isn't the drily Blue Cross plan. The same generical plan exists in all the states, each under its own laws and its own management. If the plan here happened to be af fault, in some way, it is hardly possible that all the states would be af fault in the same way.

Somewhere in the country we would find that Blue Cross rates were markedly lower—we would find it.

Cross rates were markedly lower-we would find it, that is, if Michigan's Blue Cross were letting the cus-

Cross rates were markedly lower—we would find it, that it, if Michigan's Blue Cross were letting the customer's get away with murder.

Somebody would have found a solution, and would be brigging about it. But no, rates dre pretty comparable anywhere you go.

Thirefore, we suspect this "over-ptilitation" has been publicited into a bigger fault than it really is. We con't think lever many people get much fun out of going to, or skaying in, a hospital.

Now Rep. Green thinks he could bring about lower rates, and thwat all the chiselers (such as there are—more people are honest) by a law making Blue Cross change its policy.

He would make everyone who pees Blue Cross pay the whole cost of the first day in the hospital (the most expensive day, because then you have all the tests, and usually the operation if you need one) and also pay 15 per cent of the cost after the seventh day. Of lowers that would reduce the premium you pay for Blue Cross—but you'd soon find it ididn't save any moncy. Furthermore, it would put the biggest burden.

on the people who are most seriously ill. Who wants

Rep. Green, with the best of intentions has over-mplified the situation. Besides, he wants to make is compulsory for everybody—doesn't even want to ve subscribets a choice of which way they'd rather it.

give subscribers a cheire of which way they'd rather to it.

Commissioner Neavarre, for reasons which excepts, has indorsed Rep. Green's notion. We suspect some politics somewhere, because we think Neavarre to be supported by the subscriber of the subscriber of the Blue Cross in offering a so-called ideductible policy. People have been able, if they chose, to buy such policy from Blue Cross for upwards of the last year. Blue Cross made no secret of the fact that such a policy was being offered. People could hive it, at a lower price, if they wanted it. They didn't want to rolley which gives more benefits at lower cost. Who doesn't like the jidea? Who doesn't want the good five-cent cigar back, or the \$700 automobile, or the area-cent newsphere, for that matter? Wed like thems all back.

But you can't slap economics in the face.

all back.

But you can't slap economics in the face.

You can't legislate Utopia.

And so far se we are concerned, you can't say that:
Blue Cross hasn't been doing a good job.

Its prices haven't gone up any faster than factory,
wages. It has been so good that it now has 3,600,000.

people, or half of the whole state, using Blue Cross
and liking it.

* * *

Trying to make out, all of a sudden, that something "wrong," or that some simple little bill in the regislature can turn time backward and make things out less—that's nonsense. We don't think this union group can do it, eithe, the world concede their right to try. At least they rent trying to tell averyloody else how to do it.

We think, flatly, that Blue Cross is a fine thing, all the noise won't fool the people and the nope all the noise won't fool the people and the noise won't fool the

Blue Cross is merely a victim of our rising econ-my just as everybody else is.

From The Detroit Free Press, February 27

Hospital Insurance Costs

TRYING TO SPOT THE REAL VILLAIN

Old melodramas had their advantages. It was easy to identify the villain. This is not so in the current uproar about heighteliatation insurance. Rates have skyrocketed. Many think Blue Cross has thrust its hand too deeply into the pockets of its 3,500,000 Michigan subscribers. Investigations are being made, bills are being submitted to the legislature, and the air is blue with charges.

Much is still being learned, but we think some observations can be made now.

Much is still being learned, but we think some observations can be made now. The public's demand in the last decade for better medical and hospital care has been great. Therefore, or top of inflation must be added the cost of this improved care. An increase in Blue Cross rates might, then, be considered automatic. The question is: Do the allegedly excessive rates relect only inflation and improved care?

Ample proof to the contrary appears in surveys of hospital cases covered by hospitalization insurance, The studies indicate clearly that alarming abuse they cropped up These take the form of unnecessary hospitalization, prolonged stays for convenience or comfort and excessive use of drugs and laboratory facilities.

The problem remains the same. Whom do we his

Is it hospitals for operating inelliciently? Is it: physicians who find it convenient to group patients in hospitals for quick and lucrative rounds of call, that require only an hour or so each proming? Is it patients who unnecessarily demand and get from the control of the c

Blue Cross for permitting such known abuses to continue?

Frankly, we suspect the answer to all such questions may be "Yes!"

At least one offered solution appears to be precipitus and short-sighted. A bill introduced in the Michigan Legislature suggests a deductible plan similar to auto insurance. The proposal to make subscribers pay for the first day of hospitalization and 15 per cent after seven days no doubt would cut rates. It also would greatly reduce the value of the service, It would not, we believe, strike hard enough at the abuses.

It would, however, seem logical to offer-optional plant, Blue Cross has such a plan, in which the patient pays the cost of the first two days and \$2 a day for

the remainder of the hospital stay. The saving of fut 16 per cent in prémiums does not seem adequité, considéring that the average stay is seven days. Blé-Cross also is readying a "catastrophe" policy, buijf in the saving is no jevater than offered under the yel-old deductible pijn it too probably will not be widd to rounder.

opular.

One additional thought stands out prominently.

One additional thought stands our prominently. Physicians, through their dealings with patients and because they control both the hospitals and the Blue Cross organization, have failed, in our estimation, to take an active public stand on the abuses under the voluntary hospitalization insurance plans.

Because they are so closely involved in the abuses and tecause voluntary plans were their answer in a period when socialized medicine appeared around the corner, they should be available to comined the public. The public wholeholarizedly accepted the voluntary plans and should have the wise advice of doctors.

Since Blue Cross is a \$100,000,000-a-year bisiness, the entire problem should be throug-fly examined, calmly, circumspectly and publicly.



