

the outstanding quality of its medicine and its medical institutions. This has come about, to a great degree, through a unique and enlightened partnership between the State, the medical profession, voluntary hospitals and community leadership. It is this partnership—its past, its present and its future—which I should like to talk to you about today. It is an old partnership, which I have indicated, and still it reaches forward into new frontiers.

As recently as a year ago, Maryland took another significant step forward in the health care of the indigent and the medically indigent. We became the first State broadly to relate payments in the program to the actual cost of service. And again Maryland placed itself in the vanguard of medical progress. We are all aware that the voluntary hospital system in this country is beleaguered by rising operating costs, the obsolescence of facilities and the urgent need of expanded hospital plants and equipment. One of the problems is: Where is the money coming from to correct this situation? Voluntary hospitals are finding it difficult to produce the funds needed by traditional fund-raising devices. At the same time, private hospitals are wary of direct financial intervention by federal and state governments. Somewhere, in my opinion, there is a middle-of-the-road solution. And I suspect it will be found in this unique partnership for health care in Maryland—physicians, lawmakers, hospital trustees and administrators and community leaders.

Over a great many years, your State government has been aware of its responsibility for the medical and hospital care of its citizens who otherwise could not afford such care. Maryland legislative history of the nineteenth century is sprinkled liberally with appropriations of specific amounts to individual hospitals for particular purposes. A singular feature of this early history of medical care for low-income citizens was the nature of the approach to the problem. It was never an undertaking of the State alone. From the very beginning, it was a joint enterprise of the State, the hospitals, the medical profession and the community. This was not the case in most other states.

One of the early successes of this partnership was the institution of a public health system. Maryland was the first State in the union to have a health officer in every county. In time, there was developed within this partnership an almost missionary zeal to bring good health care to everyone in the State. Medical teams from the great hospitals in Baltimore journeyed regularly by steamboat and even horseback to the outlying hospitals of the State. Those pioneers of modern medical care in Maryland were many. On the honor roll we recall such names as Reilly,