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Recording Overview: Representative Joe Moakley and Representative Ella Grasso discuss current issues related to healthcare for the elderly. The discussion was broadcast on WILD as an episode of a radio show featuring Congressman Moakley and other members of Congress.

Transcript Begins

JOE MOAKLEY: My guest today is Congresswoman Ella Grasso of Connecticut, one of the most prominent women in American politics today. Ella was the first woman to be floor leader in the Connecticut State House and Mrs. Grasso may very well be the first woman to be governor of the State of Connecticut. Mrs. Grasso is a very active member of both the Educational Labor Committee and the Veterans Affairs Committee. She's long been a leader in the fight to protect the rights of the elderly. Ella, it's a pleasure to have you on the program today.

ELLA GRASSO I want to tell you how pleased I am to be here and how pleased I am to be your associate in the Congress working for those programs that are a benefit to all of our people.

MOAKLEY: Ella, really you're one of the first people I came in contact with when I came to Congress because of certain stands you took on certain legislation. And it was very happy for me to share a head table with you recently in Boston when you were cited as a very outstanding woman of Italian heritage when you received the Marconi Award, an award which was probably the first time was ever given to a woman, wasn't it?



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GRASSO: I think it is the first time, and I was pleased to get the award not only because it came from the Sons of Italy, but also because it was involved in legislation that we had passed for Cooley's Anemia, which was an area of deep concern to me as well as to the organization, because these health issues and the involvement of Congress I feel is very important.

MOAKLEY: I was very impressed being there to see you cited out of all of the people in the United States as the one person who had done so much work on this bill. And for the Sons of Italy to take recognition of this fact and to honor you publicly at their annual meeting I think was quite an honor to you. I was very happy to be there, and I was very impressed with the talk you gave that day on what you had done in this sphere in how much the award meant to you. Which just shows that Ella Grasso is still a woman of the people, right?

GRASSO: Yes. And you know that's what I like about my associates of Massachusetts and the work that you are doing now as a freshman member of the Congress, taking all of your good experience. And although you're very young in years, you've had full opportunity, I think, to become an effective member of the Congress because of this solid background of service and of responsibility and of your very deep concern for people, and I'm especially pleased people of all ages, most especially our elderly.

MOAKLEY: Thank you very much, Ella. Ella, one of the major issues in which this Congress will consider this year is the healthcare. And you've been very outspoken on the issue. You've been a leader, especially as healthcare refers to the elderly. Do you think that the Congress can make the existing Medicare program more effective?

GRASSO: Well, I think that Congress has got to work to make it more effective while we're trying to overcome all the obstacles that HEW [Department of Health, Education and Welfare] manages to put in the way in the matter of regulation. Certainly, we found that in the very

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¹ Cooley's anemia, or Beta Thalassemia, is a rare blood disorder that requires regular transfusion and extensive medical care. This condition mainly affects people from the Mediterranean and Asia.



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beginning when with hospital care people heretofore had been paying seventy-four dollars they were very fast, in spite of the opposition that was demonstrated by so many of us, to make that figure a higher figure. And another area of great concern to our older people is the incredible paperwork in which they are so often involved, and the very great difficulties they have in even getting someone to help them take care of this on a volunteer basis.

When you think that someone has been ill and perhaps discouraged, then to have to go through so much of the requirements of the regulations to give answers to questions, I think it adds one more burden on top of the financial burdens. And then of course, for many people is the fact that rates vary and the amount of money that is allocated is not enough to meet all of the costs. And this cost must in turn be born by the people themselves.

There is a deep concern on the part of our elderly people has to how effective the program is. But when they see the great program that our president has prepared for them, then I think that they would rather leave some situations as they are. Because hidden away in this are all kinds of cost increases that would make the first ninety days of hospital care cost almost as much as ten times more than what they are now having to pay out-of-pocket under some of our own programs. I think this is what we must do. And I think it is the responsibility of each of us in the Congress, now that the bills have been introduced, to do an evaluation so that everyone knows at every level what is going to be expected, where the money is going to come from, and what will be benefited by it. The president says his program isn't going to cost anything. Well, costs are there that have to be borne one way or another. And I feel that that is just glossing this over much too readily and that we should be very sure that the dollars are going to be allocated to serve health needs. And then we've got to decide how we're going to get this money, which is one of the issues for discussion in the Congress.

MOAKLEY: Mrs. Grasso, I know that you and I and many people talked, I just think that when you're talking about healthcare for the elderly, I think we should be more insistent in putting more preventative medicine into the elderly program. And I think that we can save not only



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many, many lives, but many, many millions of dollars, because as the program now is, people are afraid to go to the doctor to get a prescription because they're just not covered at this stage of the proceedings. And I think that if they were covered right from penny one, that they could go and get rid of that cold rather than waiting until it turns into pneumonia or some other respiratory disease.

GRASSO: Or they could find out what causes that ache before it develops into another kind of illness. I think people are apprehensive as to what will develop. But so many people are so afraid because the costs are so high and they think maybe if they wait a little while it will go away. And in too many occasions, this just doesn't happen. So, I think that what you say that preventative medicine is a very effective key not only to helping people maintain vitality and maintain health, it is a cost saving device in the long run.

MOAKLEY: Ella, what do you think that we in Congress could do to control the prices of prescription drugs that are now being used by the elderly? And do you find it helpful that HEW appears to be changing its attitude about the use of generic drugs?

GRASSO: Of course. I think that it's high time that they change their attitude with regard to the use of generic drugs. The cost differential is a factor that is readily apparent to everyone. And I would hope that in the Congress we would get to the stage where prescription drugs are included so that the elderly don't need to worry about these high costs. And some of them are unbelievable. I've seen some of these bills. The medication comes at a very high price, and so many times the few dollars of people. And we've got to remember that these are people living on limited incomes and they do not have opportunities to augment their income through other kinds of jobs, living on limited incomes in time of inflation having to bear these great burdens.

MOAKLEY: Well, that's one thing about the elderly, they're the first ones affected by any price increases such as fuel, such as rent, such as food. And they're probably the last ones to be brought into line. And you know the struggle we have when we amended the Social Security Act



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that took affect this year to give just a paltry 11 percent in two payments to those who are living really on the bottom of the socio-economic ladder. And of course, this is why they're very hesitant to go to that doctor for the prescription and very hesitant to go to the drugstore to get it filled.

GRASSO: And I think what you say is important because so many times our older American is hesitant to express their opinions and make known the problems that they have. And so, they need to have others who speak for them. And you have spoken time and again, eloquently and well, you say how you recognize the contributions that our elderly, our senior citizens have made to our society, and you talk about the great debt which we owe to them. I think that that is a very fine and positive attitude. And if all of our young people felt as you did, we would be further along to finding solutions to our problems.

MOAKLEY: Actually, you're really making me a lot younger than I am, Ella, and I appreciate it.

GRASSO: I say this relatively. But you talk from the heart. You know what the problems are, and you understand them, and you appreciate them. And we just have to have more people who do this.

MOAKLEY: Ella, several weeks ago, you and I both voted finally for the Nutrition Bill, which was finally passed. Do you think that this will substantially affect our older Americans who now go hungry? And what will be some of the other gains that you see coming out of this bill?

GRASSO: Well, you know, the bill that we passed provides for 150 million dollars in fiscal [year] '75, then it goes to 200 million, then to 250 million. We're now funding this at a hundred million dollars a year, and it would have expired at the end of this fiscal year. We had to fight to make it a three-year program. The administration only wanted a one-year program. And I was very pleased that no one on the other side of the aisle felt that they had to pick up the flag in this



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particular issue. It seems to me that this money is only seed money. It only begins to approach a problem. In some areas decisions have to be made. And who is going to be the Solomon who says we go this far and then you can't go any further? They're encouraging people not to sign up every week or not to sign up for more than so many days within a week. But in every community, there is a very real recognition that this money just isn't enough. And with the increased cost of food, the problem is even greater.

And you know this might have become a reality much sooner than this year, because the program had been passed, but the money had been in the HEW budget that had been consistently vetoed by the president. So, that it has only been really since the beginning of the year that we've had ongoing programs in most of our states. And I have been in my own state and in my own district to visit some of the places at which luncheons are served and I've been so impressed not only because a very real need is met—one man said to me, he was eighty years old and his wife had died. This was the first warm meal he had in a long time, because he just couldn't get together all of the things that he would need to cook, to prepare it, to serve it. He was having it in a pleasant atmosphere with old friends. There was volunteer work shown in the people who had come in to help out with the program. There was a good measure of local, state and federal cooperation. And these are all positive and healthy things. But I tell you that I think that the money that has been authorized does not begin to do the job, and we've just got to put more money into the program.

MOAKLEY: It really makes me wonder sometimes when you're talking about older Americans how many people when they're campaigning for office tell about all the great things they're going to do for older Americans. And once they take the oath of office they seem to forget about it. And it's very refreshing that there are many people in Congress that haven't forgotten their promises. So, that bills such as the Nutrition Bill and the Older Americans Act and the increase in Social Security finally did get off the ground and did get through this year.



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GRASSO: If I can just interrupt. And trying to make all of the concepts of the Older Americans Act a reality so that we would have funds to provide for drop-in centers and that this wouldn't have to be a new building, but it could be used to remodel another kind of structure. That we could try to provide some kind of supplemental job opportunity so that one then could earn a few extra dollars. That the transportation needs of the elderly could be recognized because I think that their problem is even more acute in this time of shortened energy. Gasoline is so high many of them are no longer driving cars. In some places, public transportation facilities are inadequate. And special kinds of transportation programs to meet their special needs are essential. And then there is housing.

MOAKLEY: I was going to say that housing in my area is very bad, and I'm sure in parts of your area it's very bad too. Again, it's the older Americans, the senior citizen housing developments that seem to be the last ones off the drawing board for some reason. I know that we're making some strides now in the New England area, and I just hope we'd get more because this really is a disgrace to house some of our elder Americans who made it all possible for you and I to be housed in some of those developments.

My guest today is the congresswoman from Connecticut, Congresswoman Ella Grasso. And this is one woman that really makes politics work. She has been very active in many of the elderly affair projects. I'm sure that if God is good and she keeps up her stamina and this speed, that Connecticut will have again and the Congress will have a little loss. And I'm sure that whatever the future holds for you, Congresswoman Ella Grasso, I'm sure it will be out helping people, as you've done so many years here in the Congress.

GRASSO: Well, I thank you. And I'm proud to have had this chance to work with you, because you care and I care and that's what this is all about.

END OF INTERVIEW