undertaken if funds become available. These estimates forecast hospital construction amounting to \$700 million a year and an additional \$300 million a year for long-term care, including chronic care hospitals, nursing homes, rehabilitation facilities and outpatient diagnostic or treatment centers.54 These estimates indicate unmet needs, and public support appears to be strong for further Federal assistance in this program. In 1959 Congress, in the same appropriation bill which increased funds for medical research, also increased funds for Federal grants for hospital construction to \$186 million, \$85 million more than requested by the administration.

Table 11 .- Hospital construction, value put in place and value by source of funds [Millions of current dollars]

	Value of new hospital construction put in place ¹			Value of hospital construction by source of funds			
				Federal	Non-Federal		
	Total	Public ²	Private		Without Federal aid	Federally aided	Federal share as percent of federally aided ³
1940	697 673	54 477 496 528 473 365 360 322 298 333	33 202 344 419 394 317 337 351 328 525	5 169 146 132 113 66 35 22 37 45	82 386 466 569 532 434 529 553 467 560	124 228 246 222 182 133 98 122 253	31. 8 39. 7 35. 4 33. 0 27. 1 28. 2 25. 8 25. 0 29. 7

Source: Health, Education, and Welfare Indicators, August 1958.

CHAPTER 3. THE PRICE INDEX OF MEDICAL CARE

TRENDS

The medical care component of the Bureau of Labor Statistics-Consumer Price Index, currently weighted at 5.3 percent of the total CPI (see table 12), gives an indication of price reactions to demand and supply relations. During the period 1947-58, only two items in the medical care "market basket" increased more than the "all services" index: hospital room rates and group hospitalization insurance premiums. All other services in the "market basket" of medical services increased less than the average for all services. chart 6 and table 13.)

Medical care services generally rose about 58 percent from 1947 to 1958, but hospital room rates rose more than 125 percent and group hospitalization premiums rose almost 80 percent from 1951 to 1959. When hospital rates and hospitalization insurance prepayments are removed from the medical care price index (see table 13), the rise in

Includes construction of health-related institutions, such as nursing homes.
Includes construction of federally owned hospitals.
For projects approved and construction begun under the Hill-Burton hospital and medical facilities construction program.