the loan on an insured basis? Participation would thus be voluntary and there would be no cost or burden to the Treasury. If we can confine this bill to insured loans would your opposition be lessened?

Dr. RENGER. With your permission, I would like for Mr. Harrison to answer that.

Mr. HARRISON. Mr. Chairman, if the bill were confined to mortgage insurance and it contained no priorities and no direct loan provisions—and I don't know whether you indicated that in your comment or not—I don't believe we would be in here opposing the bill. We may still continue to believe that, generally speaking, physicians are well able to handle financing through conventional means. But certainly, our opposition to the bill would be greatly reduced, and while we might not find a mechanism to support the measure as such, I believe we would not be in here opposing this bill, if both those provisions were deleted.

Mr. BARRETT. Mr. Harvey?

Mr. HARVEY. Dr. Renger, as I understand your testimony, at the present time, what you are saying is that the American Medical Association sees no need for this legislation period, is that not right?

Dr. RENGER. That is right.

Mr. HARVEY. Let me ask you personally. Do you know of your own knowledge or have you heard of any physicians, young or old, who have had any difficulty whatsoever financing clinics to conduct a group practice whatsoever?

Let me ask further, has that ever been discussed in the American Medical Association as one of the problems facing physicians, young or old today?

Dr. RENGER. I don't know whether it has been discussed on a national level. I know it has been discussed on a State level. To my knowledge there hasn't been any need at all, because most young physicians, particularly if they get in a group, have a high potential which is recognized by most of the banking concerns; they certainly don't have any trouble getting loans.

Mr. HARVEY. That certainly has been my impression in the State of Michigan where I come from, that physicians' credit or dentists' credit is A–1. Frankly, they have been able to walk into our banks and savings and loans the day after graduation from medical school and finance their entire operation if they needed it.

I also remember, Dr. Renger, I heard the testimony of Dr. Appel and the other officers of the American Medical Association at that time. I also heard the officers of the American Dental Association testify on this bill and one statement that the representatives of the Dental Association had to say, was that even these loans would not, in his judgment, induce dentists to go into remote areas in the country to practice where they otherwise would not want to practice. Is that, in your judgment, a correct statement?

Dr. RENGER. I think that is right. That has been proven, particularly in my own State of Texas. Such loans are certainly not an incentive for groups to move into a small rural area where work is not available for a group larger than three.

Mr. HARVEY. What you are saying so that I understand you correctly is that if this bill were enacted as it is, those who would take advantage of it would not be the physicians or the dentists, but would