

Federal Government recognition of the importance of accreditation by the Joint Commission is evidenced by the effort made to operate and maintain federally-owned facilities at a level which will meet the accreditation standards. The recently enacted medicare legislation, it is important to note, prescribed that general hospitals currently accredited by the Joint Commission will be deemed to meet all conditions of participation in the program provided that they also furnish adequate evidence of an effective utilization review plan. In the case of tuberculosis and psychiatric hospitals, there are additional staffing and medical records requirements considered necessary for the provision of intensive care.

Almost all States have established licensure requirements for the full operation of general hospitals. As of the beginning of 1964, however, one State had no licensure law or regulations for general hospitals and another State licensed only hospitals operated for profit. Some States, in 1964, did not license some publicly owned hospitals—State, State and county, or county and municipal. Several others license only the maternity departments and only approve or certify hospitals as eligible to receive payments for public aid recipients. In all except five States the licensing agency is the health department. Licensure requirements vary widely from one State to another. A few States have licensure laws which have not been revised for 20 or 30 or more years and do not cover new functions assumed by hospitals in that time or changes in functions existing at the time the law was last updated.

A further indication of qualitative standards of performance is the extent to which existing hospital beds need modernization. As mentioned previously under "quantitative standards," Hill-Burton State agencies are now in the process of submitting plans which show the total number of beds needed and the count of existing beds. These State plans also show the number of beds which conform and do conform to the minimum Public Health Service physical plant on standards plus any standards added or increased by the itself. A preliminary estimate, based on the plans received to this time, is that about 260,000 general hospital beds are in of modernization, that is, do not conform to the minimum is. In terms of population this means that of the estimated existing beds per 1,000 population, an estimated 2.58 beds per 1,000 population conform to the State and Public Health Service is and 1.39 need modernization.

Tuberculosis beds are also being measured against these State and Health Service plant evaluation standards. Again using the plans received thus far, the tentative estimate of tuberculosis which conform to the plant evaluation standards is equivalent 0.18 beds per 1,000 population, or two-thirds of the 0.27 total tuberculosis beds per 1,000 population.

2. EXISTING CAPITAL PLANT

and (b) *Number of Facilities and Distribution by State*

At the beginning of 1965, Hill-Burton State plans showed a total of general hospitals. This number includes facilities that have approved and/or scheduled for construction by Hill-Burton