I would like to skip some more that we were just talking about and the portion concerning disbursements and move on to "Continuing Research Efforts" on page 14 of our prepared statement.

Senator Nelson. Your figures under the title "Outlay for Drugs,"

they are correct, are they not?

Mr. Seggel. I take it they are. And you have them in tabular form, I think, in the Secretary's response to your letter back in the late winter or early spring. And so I will proceed with the section on "Con-

tinuing Research Efforts."

As you know, we have been supporting several projects aimed at improving the provision of effective and more rational prescribing of drugs. As a prime example, the National Center for Health Services Research and Development has a contract with the San Joaquin Foundation for Medical Care to obtain data which will be used in determining the specifications for a model drug utilization review program. Information presently being obtained by the foundation provides, at predetermined intervals, four profiles of drug use as follows: Drug profile of all drugs prescribed; the patient profiles of drug use; the prescribing profile of physicians; the dispensing profiles of drug use. Information to be obtained in the contract will describe drug prescribing and use practices in nursing homes and extended care facilities, the activities of the drug utilization review committee, the internal control process, and a retrospective analysis of drug use data to determine the incidence of potential interactions between drugs.

The San Joaquin Foundation for Medical Care Services, review and pays the claims for the care provided for about 45,000 title XIX medicaid patients in four counties in California.

The information obtained through the contract will serve to improve the efficiency of the existing program of reviewing the dispensing and use of prescription drugs at the foundation. The contract is scheduled to be completed at the end of 1972.

And this will be used, if it turns out as we anticipate as more or less a model in terms of demonstrating what can be done throughout the

medical community, and the health care community.

Now, to the subject of practitioner education and information.

The Department also supports practitioner education and provides practitioners with information which can improve their choice and use of drug therapy. Public Law 92-157, which is the new Health-Manpower Act, has a special project section part of which deals with the training of physicians and pharmacists in clinical pharmacology. The program is administered by the Bureau of Health Manpower Education and has a current budget for all special projects activity of \$53 million.

One purpose of the special projects program is to place increased emphasis on clinical pharmacology for physicians. The bureau has 34 proposals from medical schools for improved programs in clinical pharmacology. The authority for providing capitation grants to medical and pharmacy schools includes a requirement for the teaching of clinical pharmacology in the universities.

Pharmacists in these clinical programs are working closely with physicians on drug therapy and advising them on adverse reactions,

drug interactions, and alternate drug therapy.