in any state, and the fact that his employer is there, or no employer, to this legislation here the employment is based upon the profitability that he may not have the same interest or may become calloused. It is not going to change that emphasis, because if he is of this nature, he will be the same way in his own practice. The only thing that will keep it from being that way is his interest in maintaining a level of income. He will be interested in his practice from that standpoint, unless he really truly is there to serve the public. If he is there to serve the public, he will do it in one place or the other.

Mr. JACOBS. Is that not the whole theory of the free-enterprise system, the professional, the private practitioner's attitude? It may be true that a lot of people may be sick and need eyecare, and, therefore, the optometrist has a long line at his door. But is it not still true that when he has to collect money for his fee from each individual patient, at least, he has the interest of not wanting to turn the bill over to a collection agency, and he does have that much extra interest in the individual, quite apart from a professional quality which we hope that the optometrist would have? We hope that everybody is nice, but we found out a long time ago that we do need to cope with human nature. So, are you quite sure that you want to go on record as saying that the man who must depend upon the individual patient for an individual fee is not more motivated towards that individual patient than the man who has a yearly salary guaranteed?

Dr. ROWE. This is a two-edged sword, apparently. A man in private practice has financial responsibility which he has to meet, drug bills and utility bills and reception-room salary and taxes. Certainly, he is motivated from the financial standpoint. It may not be well motivated. He may have a tendency to do a little bit of over-selling in order to meet that rent bill, and the like.

The point I am trying to stress is that the practice has nothing to do with what he is going to do for his patient. That is not quite necessarily correct——

Mr. JACOBS. Would socialism not be preferable to our private practice program in the United States—by that reasoning?

Dr. ROWE. I would not say that socialism would be better. The effect is brought about by the private practice that would not exist where an optometrist is employed.

Mr. JACOBS. The abstract reasoning that you submitted for the record is not that the doctor in the United States has to worry about paying his receptionist, his rent, and all that sort of thing, but that he would be less motivated towards his patient than that of the fellow in Great Britain who draws down a check every month, regardless of all of those incidentals in private practice?

Dr. ROWE. As I say, it is a two-edged sword. There are possibilities on both sides. The employed optometrist can become calloused and not care. The self-employed optometrist can have some pressure, financial responsibilities, which affects his judgment as to what is really good for the patient or whether to get the most dollars out of the patient. It works two ways. Once again, this depends upon the individual.

If the man goes into optometry and spends a number of years to become one and makes the investment that is needed in his education, then he should still, during that period of time, be primarily concerned to take care of the patients regardless of whether he is employed or whether he is not.