

I believe our experience in Michigan is not atypical. I do think it is important for us to understand the soundness of the program which is under way, the marshaling together of resources, the innovation which characterizes all of the planning activities in the foundation for the program which is being well laid at this point in time.

To help these programs, I would certainly hope that a great deal of emphasis will be placed on the need for the efforts under comprehensive health planning programs and the cooperative regional arrangements developed under the Regional Medical Program Act, to be compatible and in conformity.

I think they are complementary with respect to goals and activities, and I think at the local level we must do everything possible to be certain that these are not in conflict, but in fact do cooperate and support each other.

I do believe there is a real need, as the statement indicates, for limited construction funds, and I would hope that as a part of the introduction of my formal statement in the record that you would also include the appended article entitled "Hospitals and Regional Medical Programs, a Plea for Coordinated Action," which was in the December 1967 issue of Hospitals magazine. This was written by my good friend, Dr. Robert Evans, and I think amplifies eloquently on the point that I would make, that there is a real need for limited construction dollars.

Mr. Chairman, I certainly hope that this bill will be supported by your committee and will be adopted. I think the progress so far is sound, because we have gone cautiously. I believe the operational programs will speed the day that we will get to every area in Michigan, to every citizen in Michigan the benefits that this program was designed to bring.

I should be pleased to answer any questions you might have. It has been a pleasure to appear.

(Mr. Sibery's prepared statement follows:)

STATEMENT OF D. EUGENE SIBERY, EXECUTIVE DIRECTOR, GREATER DETROIT AREA HOSPITAL COUNCIL, DETROIT, MICH.

Mr. Chairman and members of the subcommittee, I am D. Eugene Sibery, executive director of the Greater Detroit Area Hospital Council. I also serve as chairman of the American Hospital Association's Council on Research and Planning, and I am the president of the Association of Health Planning Agencies. I was the acting coordinator of the Michigan Regional Medical Program during its initial, organizational period, and now serve on that Program's Regional Advisory Group.

I am here today to speak in support of Title I, H.R. 15758, to extend the authorization for Regional Medical Programs for heart disease, cancer, and stroke.

As a health planner involved with the coordinated planning activities of a hundred hospitals in one of the Nation's most heavily urbanized areas, I am strongly attracted by the potential of Regional Medical Programs and impressed by their progress.

The strength of these Programs stems from the spirit of voluntary cooperation which underlies them, and which was written into the law largely by your committee three years ago.

This voluntary, cooperative approach to problem solving isn't as swift as a more directive approach might appear to be, but I hope that you will be persuaded that it is far more sure.

Regional Medical Programs are becoming strong and successful forces in our society because they challenge the ingenuity of the participants. They are becoming strong and successful forces in our society because they exist to meet specific local problems, not problems that have been rendered sufficiently vague to be