H.R. 6526 is identical in substance with H.R. 15070 in the 89th Congress. Its companion in the Senate, S. 1228, was amended in Committee and passed by the Senate on December 15, 1967. I will comment on the Senate changes a little later on.

PURPOSE OF LEGISLATION

As did their predecessors, these bills embody the Administration proposals for a temporary program of supplemental aid for modernization of hospitals, and for modernization and construction of other types of health facilities in the District of Columbia. To qualify for such supplemental aid projects would have to be approvable under construction aid programs—the Hill-Burton program, or the Mental Retardation Facilities of the Mental Health Centers Construction programs. Supplemental aid would be conditioned upon such approval or the denial of approval upon the sole ground of insufficient funds under the District's allotments under those programs.

SENATE AMENDMENTS

The Senate amendments make two substantive changes in the proposal. First, an aggregate ceiling of $36,227,000 is imposed on the 4-year appropriation authorization; and second, clarifying amendments assure that extended care facilities are included in the types of facilities for which supplemental grants are authorized. The Council has no disagreement with these changes.

NEED FOR LEGISLATION

The proposed legislation grew out of growing concern for the pattern of special aids for individual hospital construction projects in the District—under the Washington Hospital Center Act of 1946 and later extensions and amendments of that Act. This pattern arose because the ability of District sponsors to raise private capital does not square with the basic premises of the nation-wide Hill-Burton program and, as a result, the District was unable to use considerable sums alloted to it under that program. In 1961 the Department of Health, Education, and Welfare was directed by the President to look into the District's continuing need for special assistance of this kind. The proposed legislation is the outgrowth of the Department's findings. The District's special difficulties in obtaining the necessary capital financing for health facilities are amply documented in the Department's July 22, 1965 transmittal letter of the original draft legislation. The Council emphatically agrees with the Department's conclusion that there is great need for special assistance for construction and modernization of health facilities in the District and that such an assistance program should be put on an orderly basis, subject to review under the same type of procedures that govern project approval under the basic construction programs.

The Planning Council was established in April, 1962 with the assistance of the Public Health Service and under the sponsorship of the Metropolitan Council of Government. Its purpose is to encourage area-wide planning for health facilities within the Metropolitan Wash-

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