ington community in order to further effective expenditure of available construction dollars and to avoid unnecessary operating costs. The bill would strengthen such planning efforts by making review of applications for supplemental grants by a responsible metropolitan area planning body a required stage in the project approval procedures. The recommendations of such a body would have to be taken into account by the District's Hill-Burton agency and submitted to the Surgeon General; the planning group's views would not be controlling, however.

AMENDMENT FOR ADDITIONAL BEDS

The Council again urges the Committee to give serious consideration to broadening the bill to permit supplemental grants for construction of additional beds. Unless the suburbs can build additional beds to keep pace with their population growth the pressures on District hospitals will increase. District hospitals provide annually about two thirds of all patient days of hospital care in the entire metropolitan area. Furthermore, with emerging patterns of care that tend to concentrate the more costly and complex procedures in institutions which are at the heart of urban complexes, there may be special expansion needs in central city hospitals that cannot well be brought under the "modernization" category. We believe this suggested relaxation in the uses permitted for supplemental construction grants would make for a more flexible program without encouraging over-building in the District. Required review procedures and current planning efforts, under this and other programs, should continue the impetus toward health facility construction in nearby suburbs.

Passage of the "Demonstration Cities and Metropolitan Development Act of 1966" (P.L. 89–754) authorized a program of supplemental aid for metropolitan development projects. Under title II of the Act, it would be possible for a hospital or health facility project that was in accordance with and would further metropolitan area-wide comprehensive planning and programming to obtain a supplemental grant of up to 20% of the cost of construction, with an overall ceiling of 80% for total Federal contributions. It is our understanding, however, that no appropriations have so far been made to

carry out this program.

After July, the designated area-wide comprehensive planning agency would also review applications for projects within the metropolitan area for construction grants under the basic construction programs, including the Hill-Burton program. Thus that Act strengthens over-all metropolitan area planning and provides additional incentives, through supplemental grants, for an economic and balanced distribution throughout the area of needed facilities in the Federally assisted categories (including health facilities).

Federally assisted categories (including health facilities).

The partnership for Health legislation further strengthens efforts toward sound planning for an effective use of our costly health care

resources.

In conclusion, the Council reaffirms its strong support for H.R. 6526 and S. 1228 and urges prompt enactment. With the passage of legislation to enable the District to participate in the Federally-aided