As I understand it, you say that an amendment is needed to permit the addition of beds to already existing hospitals, and that an amendment is also necessary to permit nursing home care or extended care?

Mr. HANNAN. We feel, Mr. Chairman, that an amendment is required so as to permit, for example, the suburbs to expand their bed capacity, and having in mind that the bill provides that this should always be done under a viewing body, a planning body, who would see to it that there was no over-expansion, that you did not get out of line with the needs of the whole metropolitan area.

Secondly we feel that the bill as written does permit for extended care facilities construction, new construction.

However, if there is any doubt in anyone's mind, and it is too late after it is written, I should like——

Mr. SISK. I would like to get this pinned down. As you know, we discussed to some extent with Dr. Grant and with Dr. Graning.

I see Dr. Graning shaking his head a bit. I hesitate to get out of order, but, Dr. Graning, did your answer to my question earlier cover Georgetown Hospital, for example? Let us assume they desired to build 200 extended care beds as an addition to that hospital. Would they be precluded from using this money for that purpose in your opinion?

Dr. GRANING. Yes, as I understood it, the witness spoke to the need for being able to build additional beds in a suburban area. We recognize the need for additional beds in the suburban area, but this would have to be funded under the regular Hill-Burton construction program. There is no intent that this money would be made available for building anything in a suburban area. This is limited specifically to the District.

Mr. SISK. That is right. Certainly all this money has to be spent in the District of Columbia.

Dr. GRANING. I support the point of the witness that there is need for additional beds in the suburban area, but those beds would have to be funded through the Hill-Burton Program.

Mr. HANNAN. That is right.

Dr. GRANING. As far as additional beds in the District are concerned, this legislation does not provide for additional acute care beds, and as the witness stated it does provide for additional long-term care beds or extended care beds.

Perhaps the witness can clarify his anwer.

Mr. HANNAN. We are in agreement on this.

Mr. SISK. Maybe I am the one who is a little slow in the uptake.

I thought I understood you to say, Dr. Graning, in answer to my initial question, that it would not permit Georgetown—and I cited it as an example—to build 200 additional beds to their present hospital for extended care.

Dr. GRANING. For extended care this is possible, yes.

Mr. SISK. All right. I want that clarified. Perhaps you did not hear that portion of it. I added "for extended care." I was thinking of this intermediate care situation which Mr. Hannan was discussing.

You do take the position that this bill does provide for intermediate care beds to be made additional to an existing hospital under the terms of this legislation?