business or build a new plant that could meet competitive costs. Under these circumstances, to stay in business, you would go to banks, the stock market or some other element in the private financial community for the money to rebuild.

But hospitals can't do that. When confronted with the same situation, they have to go to the community, and more recently to the government, for their financial resources.

Lest anyone get the mistaken idea that I am advocating the enactment of this bill on the promise that it will cut costs of hospital care in the Washington area, let me make it clear that the measure we are considering is designed primarily to increase plant capacity to the point where it can handle patient load—the one in existence today and the one we can anticipate from demographic studies for the next decade.

Our expert consultants tell us that the pediatric population in the Washington metropolitan area will more than double by 1980. Our own Children's Hospital is already overcrowded, and we are spilling over into rented buildings and even garages in the neighborhood to maintain current research, teaching and health care programs.

Because of the million-and-a-half dollar annual deficit we are incurring from the handling of charity and welfare patients, we have not until now been able to give adequate attention to the future.

Despite the day-to-day financial and other problems of keeping our institution going at its current level of quality medical service, we have finally been able to begin to plan for the future. As you may have noticed in the newspapers, we have accepted an offer of land from the Washington Hospital Center for the construction of a new children's medical center.

If we had the money today, we would still be from three to four years away from opening the doors to a new Children's Hospital. Without the money provided in the bill we are discussing today—and without the loan authority sought in an amendment to it—a new children's medical center for the Washington Metropolitan Area is impossible.

Even with enactment of this bill—and inclusion of loan authority—we will still have to go to the national and local community for millions of dollars of voluntary contributions in order to provide the metropolitan area with the kind of children's medical center that our children and grandchildren deserve.

The volunteer board of Children's Hospital is willing to make this massive effort, once the Congress gives us the clear signal that the dream can become a reality. For the future of our own institution and all other hospitals in Washington—and for the benefit of the patients we all serve—we hope you will look with favor on the bill pending before you.

Mr. BUCHER. In addition to that I would like to have submitted for the record a spread sheet of estimates and various statistics, both financial and other details, that has been placed before you, and attached thereto are the statements of several organizations proposing amendments to the legislation which I will be pleased to speak to.

Mr. SISK. Without objection, the material referred to will be made a part of the record at this point.

(The material follows:)