has come about primarily because of the revision in the duties and responsibilities and format of the Department of Health, Education and Welfare.

I am reminded this also is the vehicle which Senator Lister Hill has introduced for nationwide legislation in order to assure that funds under each title will be used as Mr. Hannan suggested, that all Federal funds should be used most effectively and not geared to separate sections or titles or separate types of facilities.

We ask that the loan provision attached to this document which you here already made a part of the record, be added at the appropriate place within the bill. I believe you have that attached to your spread sheet. The suggested language for the loan amendment was forthcoming from Senator Hill's bill which is before the Senate and which will apply to nationwide legislation. Specifically, what this does is what Dr. Grant and several others have mentioned. While we have funds forthcoming under the Hill-Burton legislation to provide matching funds for construction, we are in the same position as, for illustration, Mr. Gude is in Maryland, where the State has provided some $70 million of loan funds in order to permit the individual hospitals to obtain sufficient funds to complete their construction.

I would like to turn now to ask Father Collins, on my right, who is deeply involved in both health care and the hospital end of it, to support only the one particular point as to the availability of loan funds for health care and educational facilities. After that I would like to turn this discussion over to Dr. Ordman to proceed with testimony of the Washington Hospital Center.

Mr. SISK. All right, Father Collins.

GEORGETOWN UNIVERSITY HOSPITAL

Father COLLINS. The purpose of this legislation is to enable the hospitals and medical facilities in the District of Columbia to supply a need that is upon us now. This program has been under study for seven or eight years. All of us have participated through the centralized planning efforts in the District of Columbia and in truth the entire metropolitan area in the planning for health facilities and health care.

The specific problem which I would like to illustrate from experience at Georgetown University Hospital, which I know also to be the case of other private institutions in the District, is in answer to Mr. Whitener's quest: "Why does not the community of the Greater Metropolitan Area respond to the needs that is so obvious?"

I can only answer from experience of the Georgetown University Hospital in three years of an intensive nationwide effort trying to supply funds to meet critical needs in its shared responsibility with the District, that there is no response from the Washington area. I don't know if that is because of the transient nature of the area, but the fact is that the funds are not forthcoming even though a great deal of effort has been made by myself and others at Georgetown University in the Washington area. Our own analysis is that it is because of the turnover, that the roots of the people here are at the places from which they come.

So I think the responsibility for supplying these needs should be on the ones who cause the needs. We all owe a service to the Federal