contains significant improvements and establishes a pattern which we believe to be sound. When these programs can be supported by adequate appropriations, we can make rapid progress toward the provision of educational opportunities for all qualified young Americans in the health fields and an adequate supply of well-trained medical manpower.

Health services are delivered to individuals and society by a vast array of trained people and we would emphasize the desirability of supporting all the schools of the health professions. In this broader context, an adequate number of properly qualified physicians is of central importance and we should not lose sight of the level of responsibility each of the types of schools carry for the public welfare.

We think it is very wise to authorize "such sums as may be necessary" for each title of the Act and for Congress each year to decide how much of the available federal resources to allocate to these purposes. We recognize the fact that other national needs restrain the amount than can be invested in these programs at the present time.

The Congress and the public undoubtedly realize that the Academic Medical Centers can increase their output of physicians, trained specialists, trained investigators, allied health professionals trained in medical centers, research and service to patients and communities only to the extent they are provided financial support.

Construction Grants

We think it is wise to extend the programs for four years because of the length of time it takes for institutions to develop optimal plans for these complex facilities and to arrange for local matching funds.

The provision authorizing a school to make all applications to the Health Professions Education Act construction program for the construction of facilities which are to a substantial extent for teaching purposes but are also for health research purposes or medical library purposes is, in our opinion, sound, indeed almost necessary. Health professional schools typically design and use facilities for these interrelated purposes and, from time to time, reassign rooms or whole sections of buildings among these purposes. We assume that it is intended that clinical facilities justified as essential to the eligible educational programs will continue to be eligible as they have been in the Health Professions Educational Act and consider this very important.

We also think it highly desirable that, as provided in this legislation, the facilities be available for graduate, continuation, and other advanced training activities as well as that attributable specifically to the training of persons in the first professional degree programs. The restrictions which have excluded these necessary functions have constituted undesirable and artificial barriers.

We hope Congress will make these amendments effective beginning in Fiscal Year 1969, because they will make it possible to use the funds to be appropriated more effectively.

Institutional Grants (Formula)

We believe the formula proposed in the legislation is an appropriate one. It gives credit for all full-time students with twice as much credit for each student in the increase in enrollment as for other full-time students and includes a factor for the number of graduates. These represent desirable improvements, but it seems important to emphasize that even with an approved formula, what can be accomplished will be limited by the amount of funds actually made available. Unfortunately, the funds appropriate for the present legislation have not been sufficient to pay the full amount authorized by the present legislation. The medical schools of this country have responded to the existing legislation and have expanded their enrollments of entering students and have been severely disappointed that the Congress did not appropriate as much as its own legislation authorized.

The Association of American Medical Colleges has somewhat mixed feelings about the expansion of enrollment as a condition for receiving a formula grant. On the one hand, expansion of enrollment is so clearly desirable that steps in that direction are in the public interest. Relating expansion to the *average* first-year enrollment for a five-year period is more desirable than relating it to the *highest* enrollment in a five-year period, as the present legislation requires. We consider it desirable that the Secretary, after consultation with the Advisory Council, have the authority to grant a waiver for this requirement, if that waiver is in the public interest and consistent with the purposes of this part of the legislation.