

A. This won't require legislation. I don't say that it may not require some legislation, but from what I understand the cost control that is had in mind by certain people who are advocating it within the health structure — the private health structure — would not require a State agency but would possibly require the utilization of the Hospital Cost Analysis Service with some teeth in it.

Q. Now they offered this cost analysis service. Just last week they suggested that they take a (interruption)

A. It may very well be that later on we may want to, meaning the Legislature and the administration, would want to formally phrase into law some control over hospital costs; but so that we can get started quickly with the cooperation of the hospitals themselves, I would think that we would turn first to the voluntary self-regulative area.

Q. Governor, the fear that was officially expressed last week that the City Hospitals in Baltimore might have to close because of the budget cuts and the like. Do you have any comment?

A. No, I don't think that this could be a serious contention. From my contacts with the hospital people it is perfectly obvious that no one has been hurt as yet. We did extend Medicaid through June 30th, and the general hospital sector is completely aware of our problem in financing it next year; and the purpose of this committee is to look to a solution that will allow us to finance the critical side of the program without hurting anyone. I think that's a gross exaggeration; City Hospital isn't going to have to close.

Q. Governor, with the exception of Dr. Allen and Senator Hughes the entire membership of this committee seems to be either Baltimore or Baltimore area. Does that represent the belief that this is primarily a Baltimore urban problem?

A. No, I didn't look at geography when I appointed this group. There's no intention to only represent the Baltimore area but I think that we have to be aware that the two teaching institutions that are most vitally involved in the State portion of the health program are Baltimore area institutions; even though the University of Maryland is a Washington area college, the medical side of it is located in Baltimore. There is no intention to create geographic division in this group. I simply reached for the people I thought would be most knowledgeable in this area.

Q. Do you think there is a possibility that the State might sometime take over the publicly operated hospitals such as City Hospitals and others in the counties?