

March 22, 1976

kind of fees they did pay and there is nothing wrong with that.

SENATOR BARNETT: In your own mind, then, you say there will be no deficit on this at all.

SENATOR GOODRICH: I can't guarantee that but I am suggesting that if there is a shortage of funds in this particular program that they would come back next year and have to justify it to the Appropriations Committee and then they, in turn, present it to you fellows on the floor.

SENATOR BARNETT: I appreciate that. I understand it a little better now. Thank you.

PRESIDENT: Senator Warner.

SENATOR WARNER: Perhaps I could ask a question first of Senator Goodrich and I believe he brought this up originally.

SENATOR GOODRICH: Okay, it was Senator Mahoney's motion. I just supported it.

SENATOR WARNER: Whoever wishes to answer the question, as I understood your explanation the other day, the federal government requirements on welfare, as I understood, were such that if a patient was treated at a publicly owned institution, that under those circumstances, they would not pay for the doctor and the argument was that the patient would go to Children's or some hospital that was not state owned or state operated and thus the students would lose the opportunity from an educational standpoint of looking at those students. I take it from this amendment which seems to me to be an attempt to a shell game that you are going to treat both institutions the same. That is no different, as a practical matter, than the \$194,000 that you advocated other than we do not have a dollar amount, is that correct?

SENATOR GOODRICH: That is exactly correct.

SENATOR WARNER: So it could have a cost?

SENATOR GOODRICH: It could have cost....

SENATOR WARNER: And it may not have a cost?

SENATOR GOODRICH: When you don't talk into your mike, I have a heck of a time hearing you. You are saying that it could have cost, is that what you're asking that it could have cost? Yes, this is possible, if, for example, a sufficient number of these operations are performed in a public institution which the University Hospital is, there is a possibility that at the end of the year or prior to the end of the year they would run out of dollars to pay the cost of the operation. The main incentive is to get the fee paid whether it is at the University Hospital or wherever it is at so that we do not give them a dollar incentive to dissipate the program, and not only reduce