



Dear Representative Doggett:

I am writing to urge you to oppose language that is currently being considered by the House in its healthcare reform package as introduced on July 14, 2009. This language, if passed, would prevent physicians from being able to treat Medicare patients at hospitals they own. Patients would no longer have access to specialized care at hospitals that are designed, owned and operated by doctors to provide a more efficient, higher quality of care. Doctors would no longer have the ability to partner with other hospitals or with their communities to provide financial support to hospitals struggling in these difficult economic times.

Furthermore, many patients would be left without access to healthcare in their communities.

Heart Hospital of Austin has been the #1 rated Cardiac Program in Texas for the past six years according to Healthgrades. I am the President of the hospital and can tell you that we are proud of another accomplishment. We have the highest patient satisfaction scores in Central Texas by a wide margin. The proposed legislation would not allow future expansion of the hospital and we do not think that is right. We were formed legally and have done everything we ought to in providing healthcare services.

For over 8 years physician hospitals have been fighting to be recognized as a valuable player in the healthcare industry. During that time we have clearly demonstrated that physician ownership is good for patients, good for physicians, good for communities and good for the healthcare. Physician hospitals are leaders in health reform, providing a model for high efficiency, low cost, high quality care. Accusations against physician hospitals have consistently been disproved, making it clear that opponents seek the destruction of our hospitals simply to wipe out competition.

There are several specific reasons why legislation against physician hospitals should not be passed:

1. Limiting physician ownership of hospitals will **reduce patient choice** in many communities for no reason other than the fear of competition and greed of many community hospitals.
2. The closure of these hospitals will have a huge economic impact, eliminating \$2.7 billion in total payroll, \$605 million in federal taxes, \$2.8 billion in trade payables, and will put 60,000 full- and part-time employees out of work.
3. Language previously considered on several bills in 2008 and 2009 is overly broad, affecting any hospital that has physician owners, including general community hospitals,

rural facilities, women's and children's hospitals, rehab hospitals and other specialized hospitals. It widens the debate far beyond previous attempts to harm specialty hospitals without any Congressional hearings to discuss who is affected, how, and whether such measures are appropriate.

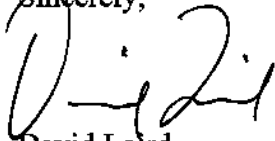
4. Not only would such language prevent any new physician owned hospitals from being built, it would halt all existing projects currently under development, with a significant financial loss to investors. Currently there are 104 hospitals under development, with an estimated \$5 billion already expended. The addition of these 104 hospitals would also equate to an estimated 25,000 more jobs.

5. Existing hospitals would not be allowed to grow to meet community needs.

Legislation limiting physician ownership is bad for health care, bad for business, and bad for Medicare beneficiaries who receive care at the many physician-owned and operated hospitals throughout the country.

Please oppose any legislation that would discriminate against physician owned hospitals. Please contact House leadership and ask them to make sure that any language outlawing physician ownership is not included in future bills. Let them know how much harm this provision or any other language affecting physician's rights to own hospitals would cause to medical services in your district and state. Thank you for careful consideration of these views.

Sincerely,



David Laird
President & CEO
Heart Hospital of Austin