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**CHARLIE MEIER**  
STATE REPRESENTATIVE • 108<sup>TH</sup> DISTRICT

**COMMITTEES:**

- LABOR
- SPECIAL COMMITTEE ON MENTAL HEALTH
- ENVIRONMENT
- ELEMENTARY & SECONDARY EDUCATION: CURRICULUM & POLICIES
- APPROPRIATIONS - HUMAN SERVICES
- AGRICULTURE & CONSERVATION (SPOKESPERSON)
- SPECIAL COMMITTEE ON SPECIAL NEEDS (SPOKESPERSON)

August 20, 2020

Courtney Avery, Administrator  
Illinois Health Facilities & Services Review Board  
525 W. Jefferson Street, 2nd Floor  
Springfield, IL 62761

**RECEIVED**

AUG 27 2020

HEALTH FACILITIES &  
SERVICES REVIEW BOARD

Re: Opposition to CON Application #20-017 – Metroeast Endoscopic Surgery Center

Dear Ms. Avery:

As one who generally supports free markets and consumer choice, I rarely find it appropriate for government to decline opportunities to an entrepreneur – and this is one of those rare occasions. Beyond standing with three hospital constituents, I write in opposition to Project #20-017 because it will unavoidably diminish health care services in my area, including safety net services at a Critical Access Hospital, while increasing patient costs based on the CON application.

The involved entrepreneur justifies CON Project #20-017 by generally representing that it will reduce consumer costs, certainly a worthy goal, though he has provided no supporting documentation. In fact, the CON application demonstrates otherwise. As an example, for CPT Code 29807 (Arthroscopic Shoulder Surgical Repair Slap Lesion), he proposes to charge \$39,897, which is more than double what my Critical Access Hospital charges for the same procedure at \$17,535.

The CON application states that Project #20-017 depends upon the redirection of 200 surgeries annually from my Critical Access Hospital, representing all its orthopedic surgeries and more than 15 percent of its total outpatient volume, and 20 more each year from another hospital in my district. These revenues from outpatient services will no longer be available to cross subsidize under-reimbursed necessary services, like a 24/7/365 emergency room. The unfortunate net result will be fewer healthcare services, at higher prices, as the impacted hospitals are forced to trim jobs and make service cuts – all during a pandemic that has already negatively impacted all Illinois hospitals and rural health care. Strong rural hospitals are necessary for many reasons, including to recruit doctors and expand health care options; generally, when new services are proposed in rural areas, it makes sense for the involved professionals to first negotiate with the hospital to provide them.

Putting all this in terms consistent with the Illinois Health Facilities Planning Act, I respectfully believe that this CON application should be denied because it unnecessarily duplicates existing hospital services, threatens safety net services at a Critical Access Hospital, and raises costs for health care consumers. Thank you for your consideration of my comments and for your service to our state.

Respectfully,

A handwritten signature in cursive script that reads "Charles E. Meier".

Charles E. Meier  
Illinois State Representative, 108<sup>th</sup> District

Cc: Mike Constantino