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ISSUE ALERT

To: Minnesota ALEC Members
From: ALEC's Health and Human Services Task Force
Re: The Moratorium on Radiation Therapy: House Files 383 and 595
Date: April 25, 2011

It has come to our attention that Minnesota House Health and Human Services Reform Committee will consider two radiation therapy bills tomorrow. House File 383 would extend the current moratorium on radiation therapy facility construction in certain counties until 2017. House File 595 would repeal that moratorium.

[Please see ALEC's Resolution on Certificate of Need \(CON\) Laws Required for the Establishment of Certain Health Care Services.](#)

At a time when many states are fighting a government takeover of health care, ALEC questions the practicality of House File 383, which would impose unnecessary, harmful, and anti-market regulations on health care facilities, and will lead to rationed care for cancer patients.

ALEC urges all of its Minnesota members to support the moratorium repeal, as contained in House File 595. ALEC further urges its Minnesota members to consider the following key points about the current moratorium on radiation therapy facilities:

- Government-imposed barriers to entry into the healthcare market will lead to higher prices. Restricting the supply of radiation therapy facilities will only facilitate a monopoly of existing facilities that can charge higher prices. Competition, not regulation, will drive costs down.
- Central planning of healthcare services will lead to shortages, waiting lists, and lower quality care. It is impossible for anyone to accurately predict the healthcare needs of Minnesotans, and then allocate healthcare resources accordingly. When the government picks winners and losers in the healthcare industry, some areas will experience shortages—which means waiting lists and lower quality care. Patients, doctors, and entrepreneurs, not legislators in Minneapolis, should decide whether radiation therapy facilities should exist (and where).
- Government-imposed barriers into the healthcare market will stifle innovation. Cancer patients in the 14-county moratorium area should not be denied access to the innovative treatment

approaches that new facilities would provide. Government should not decide which patients have access to new and innovative technologies.

ALEC opposes any government-imposed barriers to entry into the healthcare market—as contained in House File 383—and in 2009 passed a model resolution, Resolution on Certificate of Need (CON) Laws Required for the Establishment of Certain Health Care Services (attached), which condemns these practices.

ALEC supports the moratorium repeal—as contained in House File 595—and believes that market forces, not overregulation and protectionism, will improve the quality of care while lowering costs and fostering healthcare innovation.

Thank you for your attention in this matter. If you have questions about ALEC's position, please contact Christie Herrera, ALEC's Health and Human Services Task Force Director, at christie@alec.org.

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