

January 18, 2018

Dear Lawmaker -

Archaic laws and government regulations continue to prevent access to health care for this country's older Americans. In many cases, these old laws and regulations simply act as financial and bureaucratic barriers for health care providers in order to protect an established provider's medical monopoly in the local market.

Virginia is the perfect example of this. Any health care provider in Virginia that seeks to make a major investment – anything from opening a new facility to purchasing a CAT scan machine or adding a parking garage to an existing hospital – must seek prior approval from the Virginia Health Commissioner. Virginia law requires state regulators to determine whether a health care provider's proposed investment is needed in that community, and if it is, they grant a "Certificate of Public Need" (COPN). The approval process requires an upfront application fee up to \$20,000 and can take up to nine months to complete. A hospital cannot move forward with its plans without the COPN golden ticket, no matter how important their proposed project may be.

Enacted more than 40 years ago, Virginia's COPN law was designed to keep health care costs down and allow for coordinated planning of services. However, this antiquated law has done nothing but suppress competition, increase costs, and limit access to medical services.

The federal government rescinded the COPN requirement decades ago and while many states have changed their laws, Virginia has stayed the same. Over the past 40 years, medical advances have transformed our health care system but outdated laws like COPN are limiting patients' ability to access 21st century health care services.

Enclosed with this letter are materials delving into some of the myths and facts surrounding Virginia's Certificate of Public Need (COPN) system. As this legislative session continues, I encourage you to consider this information in your decision-making and keep older Americans in mind.

Sincerely,

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Thair Phillips President RetireSafe