Dear Chairman Keiser:

I apologize that I will not be able to spend the day with you and the members of the Interim Legislative IBL Committee as you discuss health care reform. I was not aware of this meeting until this past Monday and by then my schedule was set.

What I would like to do is let you and all of the members of the Committee know of the economic importance of the Bismarck medical community to Bismarck-Mandan, the surrounding region and the state. The BMDA has recognized this importance from the time our organization was created in 1979. At that time the BMDA worked very hard to keep both hospitals, clinics and surrounding specialty practices in the downtown area. We were successful and today there are over 6,000 medical personnel employed in the downtown medical community providing state-of-the-art health care to patients from the surrounding multi-state region.

These 6,000 plus medical professionals generate a payroll in excess of \$700,000 million dollars annually, making them the largest employer by numbers and payroll. The impact of the quality health care and continually growing payroll is realized throughout Bismarck-Mandan and the surrounding multi-county region. And none of this includes the added value of the economic multiplier which happens as those health care dollars pass from one person to another.

Without going into the finite details of the positive impact of the medical community, I would like to say that it is part of the BMDA's Strategic Vision to assist the medical community in achieving continued growth. For too many years, federal reimbursements have shorted the medical services provided in smaller communities like Bismarck. As a consequence, Bismarck's medical facilities were left with substantial losses because of those short payments. It is a credit to their ability to provide exceptional management of those limited resources to provide some of the finest health care in the nation.

It is my understanding the new national health care program will bring new financial assistance to medical communities like Bismarck. This is long overdue and will be a good step toward bringing economic stability to the medical providers. No one should view this new financial assistance as some sort of undue reward or windfall, because it will be much needed to help the medical community catch up with the lost prior medical payments. Hopefully, this will happen before the anticipated flow of new health care seekers who previously had no health coverage, start seeking the healthcare they never had.

In summary, the BMDA will continue to work with the Bismarck medical community to meet the demands of the future. We sincerely ask this committee to not impose any additional burdens and costs, including taxes. The medical providers will need all the funds they have available to them to develop the processes, facilities and medical staffs necessary to take care of those in need of quality health care.

Sincerely yours,

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