



HOT SPRINGS COUNTY MEMORIAL HOSPITAL

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(58FR21116)

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July 13, 1993

Secretary
U.S. Nuclear Regulatory Commission
Washington D.C.
20555

ATTENTION: Docketing and Service Branch

Dear Sir and or Ms.:

In accordance with Section 2903 (c) of the Energy Policy Act of 1992, I am writing to you in order to offer public comment on changes to the Nuclear Regulatory Commission Policy and associated legislation for fees assessed in accordance with CFR Parts 170 and 171.

We represent Hot Springs County Memorial Hospital, a 50 bed acute care facility in Thermopolis, Wyoming. Because of our size, we feel there is an unfair cost burden placed on us in the fee assessment for the required NRC inspection process.

We are a one machine, one technologist, and Radiologist area, yet we are levied fees on a scale with much larger facilities with departments of mega size.

The term in the text refers to "fluctuating" fees which is an almost ironic misnomer. The annual fee for us increases every year far and disproportion to the services offered to us.

We can not justifiably pass on this cost to the patients since most are under Medicare where costs can not be reimbursed dollar for dollar. We are forced to absorb the cost in order to provide these nuclear scans to our patients. The time is running out. The continued fee escalation and inequity in its assessment can only mean cessation of service in ours and other rural areas. This would be another example of "lack of access to care" - a buzz word/phrase. Patients with gastrointestinal bleeding or pulmonary emboli will then have to be transported to larger urban hospitals for such treatment. An unnecessary transportation in lieu of the possibility of services offered at the local level.

The current cry is to stop run away health care costs. Here in an

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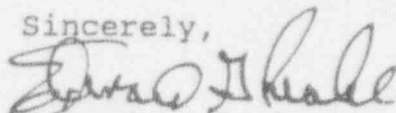
example of unnecessary and unreasonable costs over which we, the hospital, have no control.

The rational of one fee for all is almost ludicrous. It becries a variation of unfair monopoly. Just as the NRC is trying to recover costs for services rendered, so are we. The costs on their part, from what I understand, could certainly be reduced or recouped predicated on a fee schedule taking into consideration the institutional size, volume, output, etc. All of which certainly effects the time and cost of the survey imposed.

Some have said "well maybe you should not be doing that test in your area"! And we answer "why not"? We have the equipment, staff, expertise and patient population. We can perform the test here without patients being inconveniently transported 50 to 100 miles, and we can do it at a lesser price. We are not looking to make large profits; break even here would be good, just to offer the services. Please help us at your end, the area whose costs we can not control.

I remain,

Sincerely,



Edward G. Leake

EGL:pej

cc: Senator Alan Simpson
Senator Malcolm Wallop
Congressman Craig Thomas