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Times – Picayune; 03.30.06

Age, damage make repair fiscally foolish

By Bruce Alpert; Washington bureau

WASHINGTON -- Charity and University hospitals in New Orleans were so badly damaged by the flooding from Hurricane Katrina -- and in such poor condition before the storm -- that spending money on repairs doesn't make sense, a federal report released this week concludes.

The finding by the Government Accountability Office would seem to bolster Louisiana State University's contention that the Charity facility, the flagship of the state's public hospital system run by the university, should be rebuilt from the ground up.

"Since the facilities were severely damaged and were already outdated, proceeding with federal funding for repairs may be wasting tens of millions of dollars," the March 28 report says.

Help from VA

LSU has signed a "memorandum of understanding" with the Department of Veterans Affairs, whose hospital facility also was devastated by Katrina, to join in developing a new coordinated medical facility in downtown New Orleans. Donald Smithburg, CEO of LSU's health care services division, said that plans should be ready for review by June 1.

In the meantime, Smithburg is trying to line up financing for a new hospital. The VA is well on its way after the U.S. House of Representatives two weeks ago approved \$550 million. The Senate Appropriations Committee is expected to take up the request -- part of a \$19 billion hurricane recovery package -- next week.

For the state's share of the project, Gov. Kathleen Blanco said recently that she would like to use \$300 million of the anticipated recovery money to rebuild the hospital.

"That will go a long way to making our component of the project work," Smithburg said.

FEMA balks

LSU officials originally had hoped to use disaster payments from the Federal Emergency Management Agency to rebuild, but the contentious negotiations over the cost and extent of the storm damage have stalled.

FEMA hired a private engineering firm specializing in medical facilities to estimate the cost of repairing flood and wind damage at Charity and University hospitals. The estimate for Charity, where the first floor and basement flooded, was \$23.9 million. Repairing University Hospital would cost \$12.4 million, FEMA's contractor said. Both hospitals remain closed.

LSU hired its own firm, whose numbers were significantly higher. Fixing Charity, it said, would cost \$257.7 million, and University Hospital would be \$117.4 million.

One reason for the discrepancy is that LSU's estimate counted repairing pre-disaster problems. Both hospitals were so rundown before Katrina that LSU was concerned about accreditation and had already begun exploring financing for rebuilding. Damage from the storm only accelerated the drive to rebuild.

But FEMA, which is guided by strict federal disaster regulations, considered only hurricane damage. Under the rules, if damage is less than half the total replacement value -- which the agency estimated could be as high as \$371 million for the two facilities -- FEMA will pay 90 percent of repair costs. If the damage is more than half the rebuilding price, FEMA would pay 90 percent of total reconstruction.

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"Given the uncertainty about the ultimate amount of federal contribution and uncertainty of how a future health care system should be configured, LSU faces a complicated decision about whether to repair Charity and University hospitals or build a new facility," the accountability office said.

Added costs

The report said that FEMA's estimate did not include cleanup of asbestos or mold, elevator repairs or building code upgrades. But even if it had, the estimate wouldn't be high enough to prompt FEMA to cover the costs of rebuilding.

FEMA defended its estimates Wednesday.

"Our engineers have found that damage caused by the hurricane was only \$23 million, not hundreds of millions of dollars," FEMA spokeswoman Nicol Andrews said.

Still, even though the money was based on repair costs, Andrews said that it could be used to rebuild Charity Hospital.

Smithburg said he hasn't given up trying to persuade the agency to increase its estimates. At the same time, he said, he is not counting on the FEMA money to finance construction of a new Charity Hospital, either.

FEMA "has come to the conclusion that you can clean up the basement and somehow all 21 stories will be restored," Smithburg said. "We've got to move forward on our own. If we wait for FEMA, we will be waiting for the conclusion of a multiyear marathon."

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<http://www.nola.com/news/t-p/frontpage/index.ssf?/base/news-5/114370720858250.xml>

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ASTRAZENECA HELPS REBUILD HURRICANE-DAMAGED NEW ORLEANS HEALTH CARE NETWORK

PR Newswire; 03.30.06

Medical Center of Louisiana at New Orleans Receives \$1 Million to Expand Health Management Programs

March 30, 2006- New Orleans, LA and Wilmington, DE – AstraZeneca, one of the world's leading pharmaceutical companies, today presented \$1 million to the Medical Center of Louisiana at New Orleans (MCLNO) to help increase patient access to primary care and improve healthcare outcomes to citizens in the aftermath of Hurricane Katrina. MCLNO is operated by the Louisiana State University (LSU) Health Care Services Division.

Specifically, the donation will help expand MCLNO's state-of-the-art telemedicine system and support healthcare programs in six community-based health centers planned to open in the greater metropolitan New Orleans area this year. The health centers will offer primary care services, such as those offered by family physicians, pediatricians and internists, and, in some locations, specialty services as community needs dictate.

"These centers will be fundamental in rebuilding the health care infrastructure for under- and uninsured people in the area. They will also serve patients who otherwise may not have had access to doctors and care because our healthcare facilities were damaged by Hurricane Katrina," said Dr. William Jenkins, president, LSU System.

"Increased access, coupled with innovative technology such as the telemedicine system, is a critical step forward in the rebuilding process."

The telemedicine system, the first of its kind for this type of health center in the region, will play an integral role in providing patients with access to doctors that aren't on-staff in their local facility, including those who specialize in treating conditions such as diabetes, asthma and even cancer. It will allow professionals on MCLNO's main campus to have two-way, real-time visual and verbal communication with the community-based sites, resulting in easier and quicker accessibility between doctors and patients.

"The devastation of Hurricane Katrina continues to impact residents throughout the Gulf Region, including more than 100 of our own employees," said Tony Zook, President and CEO, AstraZeneca US. "By helping to rebuild and expand the MCLNO health network, we hope to greatly enhance the delivery of medical services and make healthcare a more personal experience for this community."

Don Smithburg, executive vice president, LSU Systems and CEO of LSU Healthcare Services Division said, "Since the time Hurricane Katrina struck, AstraZeneca has been committed to providing immediate relief and rebuilding this region's healthcare community. This company's continued commitment to the Gulf Region will impact the lives of thousands of citizens residing in our region."

To date, AstraZeneca has contributed \$2.6 million in cash, and \$3.3 million in free medicine to victims of Hurricane Katrina. AstraZeneca also collaborated with organizations such as the Association of Black Cardiologists to provide medical relief and the National Council for Community Behavioral Healthcare to aid community mental health centers reaching out to displaced and relocated hurricane evacuees with serious mental illness.

About AstraZeneca

AstraZeneca (NYSE: AZN) is a major international healthcare business engaged in the research, development, manufacture and marketing of prescription pharmaceuticals and the supply of healthcare services. It is one of the world's leading pharmaceutical companies with healthcare sales of \$23.95 billion and leading positions in sales of gastrointestinal, cardiovascular, neuroscience, respiratory, oncology and infection products. In the United States, AstraZeneca is a \$10.77 billion healthcare business with more than 12,000 employees. AstraZeneca is listed in the Dow Jones Sustainability Index (Global) as well as the FTSE4Good Index.

For more information about AstraZeneca, please visit: www.astrazeneca-us.com

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About LSU HCSD

The LSU Health Care Services Division hospital and clinic system is the largest provider of health care in Louisiana, with more than 1.2 million patient visits annually to 350 outpatient clinics, and 46,000 admissions to nine hospitals.

For more information about LSU Health Care Services Division, please visit : <http://www.lsuhs.edu/hcsd/>

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<http://www.prnewswire.com/cgi-bin/stories.pl?ACCT=104&STORY=/www/story/03-30-2006/0004329826&EDATE=>

see attachment "Astrazeneca-MCLNO.pdf"

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Lawmakers take aim at post-storm health care

The Advocate; 03.30.06

By MARSHA SHULER; Capitol news bureau

Republican lawmakers will make improvements in the state's deteriorating post-hurricane health-care system its top priority during the 85-day legislative session that just got under way, GOP delegation officials said Wednesday.

High on the delegation's legislative list is getting money to private hospitals that have seen the number of uninsured patients they see skyrocket in the wake of hurricanes Katrina and Rita, said Rep. Jim Tucker, R-Terrytown.

"Uncompensated care is eating them alive," delegation chair Tucker said in an afternoon news conference.

Sen. Tom Schedler, R-Mandeville, a former Senate Health and Welfare Committee chairman, said a pool of \$200 million needs to be established to reimburse hospitals where uninsured care is equal to 3 percent or more of their adjusted gross revenues.

The delegation will push for both funding and guidelines for distribution of the funds. Today the uncompensated care dollars go to LSU's public hospital system and some small rural hospitals, he said. Private hospitals have been largely left out of program participation.

Gov. Kathleen Blanco has talked about health-care improvements since she took office, Tucker said. But this session "she lacks any major initiative other than teacher pay," he said.

And the health-care situation has gotten more dire in the wake of the hurricane, Tucker said.

Other delegation health-care initiatives include adoption of a seven-year plan to transform state-run health-care delivery systems to the private sector and allow Medicaid dollars to follow the patient, proper funding of medical education, and development of a small university hospital in New Orleans along with research facilities to support it and medical education.

The Republican delegation will also:

- * Support consolidation of local government in New Orleans, including moving from seven assessors to one assessor like other parishes.
- * Support legislation to protect private property rights.
- * Oppose changes to the state-funded college tuition program TOPS.
- * Fight to insure that community development block grant funds go to people devastated by the hurricanes and not into administration and bureaucracy. The delegation will continue to oppose approval of recovery centers and expenditure of 5 percent of the block grant funds for administrative costs.

<http://www.2theadvocate.com/news/2546771.html>

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Analysis: More Katrina hospital aid sought**United Press International; 03.29.06**

By TODD ZWILLICH

WASHINGTON, March 29 (UPI) -- The chancellor of New Orleans' largest health care provider said Wednesday that Louisiana's state-funded hospitals need up to \$60 million from Congress to make up for financial shortfalls wrought by Hurricane Katrina.

The money would go toward buying equipment, rehiring laid off workers, and meeting faculty payroll at the Louisiana State University Health Science Center, the state-funded overseer of six medical graduate schools and two major New Orleans hospitals closed by the storm.

It would also be used to repay some money paid by the Federal Emergency Management Agency to rebuild medical facilities damaged by the storm.

Larry Hollier, head of the center, said the money is critical to seeing key Louisiana health facilities through the next year to 18 months.

"As we move forward, I don't know what financial obstacles we may face," he told reporters Wednesday.

Two LSU hospitals in downtown New Orleans -- Charity Hospital and University Hospital -- were both closed by storm damage left by Hurricane Katrina and the subsequent flooding of the city. Officials have said that Charity is to remain closed for good, at least in its capacity as the large magnet hospital for uninsured and poor patients that it once was.

Officials plan to reopen University hospital on a limited basis in July. The opening could help relieve pressure on at least seven private greater New Orleans hospitals who have been trying to provide care in the city in the absence of widespread primary care health services.

But Hollier said his system needs more money to rehire some of the 1,900 LSU employees furloughed after Katrina. A trip to Washington this week is being used in part to convince members of Congress that the money is critical.

"They need to recognize that it is not going to be business as usual," he said.

But the money is not the last the state will seek from Washington for hospital care in New Orleans. Officials are currently negotiating plans for a brand new downtown facility housing both a new LSU hospital and a new veterans' medical center.

The project would help steer LSU away from the condemned Charity hospital. It would also allow the state access to a federally funded building and infrastructure financed through the VA. The "piggy-back" arrangement could save Louisiana's Medicaid system millions of dollars it used to keep up LSU's two downtown hospitals.

"The cost of delivery of health care for the state certainly goes down," Hollier said.

Louisiana Governor Kathleen Blanco, D, and VA officials signed a memorandum of understanding last month laying out planning for the facility, which would include a Level-1 trauma center.

Hollier said he expects a plan to be finalized and ready for congressional scrutiny by the end of the year.

Sen. David Vitter, R-La., said in an interview that the plan could be a "win-win" for both federal payers and his home state. But lawmakers are likely to need some convincing, he suggested.

"It's a new way for the VA to work and a new way for LSU to work, so a lot of people may have questions. But that sort of out-of-the-box thinking is exactly what we need," he said.

<http://www.upi.com/HealthBusiness/view.php?StoryID=20060329-012154-7833r>

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Urban Institute: After Katrina<http://www.urban.org/afterkatrina/>

Katrina was a devastating storm. It afflicted all income groups and races but revealed the particular vulnerability of the poor and the city's African-American community. Now, in the disaster's aftermath, two policy questions demand attention. First, what have we learned that could improve the nation's response to emergencies? Second, which public policy approaches would deal best with the devastation in greater New Orleans?

A wide array of policy alternatives must be examined, especially those aimed at helping the poor, and which levels of government should respond must be determined. The Urban Institute has spent most of its history studying such problems and proposing practical solutions to them. That experience—and the desire to help—prompted a team headed by senior fellow Rudy Penner to analyze many of the issues raised by Katrina. Forthcoming After Katrina briefs include essays on education, healthcare, employment, arts and culture, the social safety net, the well-being of children, the status and needs of nonprofit organizations serving the city, the care provided by New Orleans' hospitals after the storm, flood insurance coverage, the city's information requirements as it rebuilds, and the most effective ways for nonprofits and government at all levels to respond to disaster.

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Moss Regional budget cuts affecting hospitals statewide (video)

KPLC TV; 03.29.06

Reported by Laila Morcos

The LSU-run state hospitals, including Moss Regional, are facing budget cuts. That's millions that may leave them short of what they need to continue running as is, adding additional burdens to private hospitals. Moss Regional's administrator says, "No worries." State healthcare faces huge cuts every year.

Parts of Moss Regional Hospital are unchanged since Hurricane Rita. However, full patient care is underway at the facility. "All the services we had before, we have currently," says Administrator Dr. Pat Robinson. He says there's always another concern this time of year: state hospitals facing budget cuts because healthcare isn't protected from being cut in the state budget. He says, "we're now feeling the impact over about eight years of either cuts or freezes in the budget."

That's causing budget problems for private hospitals and physicians. You see, Moss Regional has been rated tops for preventative care. However, those needing specialized care may get sent to a private hospital. "The hospitals in town and the doctors eat that cost," he says.

Dr. Robinson adds, there are talks to redistribute healthcare money to ensure private hospitals get compensated for taking patients. But for now, no success. A better plan than what's already in place hasn't been found. Dr. Robinson says, "If you take a quarter and break it up into five nickles, and you can rearrange it how you want to arrange it, you still got a quarter."

But Dr. Robinson says rumors about charity hospitals closing are ever-present. "Again, we go through this every year. The governor comes out with a budget, and I've never seen that budget end up as what we get in the end," he says. He says it's too early to tell what will be cut, if anything. At this point, don't panic about healthcare. It's available.

The hospital system began the current fiscal year with a \$900-million budget but took a \$200-million dollar hit when New Orleans hospitals shut down after Katrina.

<http://www.kplctv.com/Global/story.asp?S=4698208&nav=0nqx>

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Defining Flagship

The Reveille; 03.30.06

Agenda to make LSU a nationally-competitive school has deep roots, faces obstacles

By Scott L. Sternberg

Two decades before former Chancellor Mark Emmert made proposals for his Flagship Agenda, Chancellor James Wharton was fighting to secure Louisiana State University's place as the flagship institution of Louisiana.

The words "flagship" and "LSU" first appeared together in 1988 at the top of legislation written to provide a single board of higher education to supervise all the four-year institutions in the state. That legislation failed, but the freshly coined term remained, Wharton said.

"'Flagship' was used as a noun in my tenure. LSU would be the flagship," said Wharton, who served as University chancellor from 1981 to 1989. "Emmert is the one who wanted to use it as an adjective and talk about the Flagship Agenda."

The Agenda, adopted in 2003, is now nearing its midpoint. The numbers, though, show the University has a lot of ground to cover to reach its 2010 goals, leaving some administrators and state officials wondering if all involved are doing everything they can to further the Flagship Agenda.

Numbers aside, Chancellor Sean O'Keefe insists that the Flagship Agenda is working — and the University is on the cusp of jumping higher in the rankings and peer assessments.

"Right now, it's kind of like the signs you see in bars on occasion that say 'free beer tomorrow.' Well, every day it's tomorrow," O'Keefe said. "It's thinking about what's going on right now and what's the condition of the University now."

With a capital campaign on the horizon set to bolster the University's relatively small endowment, administrators and faculty are also ready to wean the University from its dependency on state funds.

But without the state's support, Wharton said, LSU would never have reached its previous successes.

Wharton, a self-described scholar of LSU history, said there was a time when universities like the University of North Carolina at Chapel Hill were struggling to catch LSU in the rankings. Those days are long gone, and UNC is now one of the top public institutions in the country — but the history remains.

And it all started with Huey Long.

DEFINING SUCCESS

Between 1930 and 1939, LSU built 24 new buildings on campus and increased its budget five fold, Wharton said. Enrollment jumped from 1,600 to 8,000. Wharton said external factors like the GI Bill, which helped World War II veterans attend college, helped LSU's most notorious cheerleader, Long, give the University "a leg up."

"No university made more progress from 1930 to 1939," Wharton said. "He wanted a good band, a good football team and by the way, let's do something about academics."

By the 1950s, though, LSU had lost a lot of support. Troy Middleton, then chancellor of LSU, begged the Louisiana Legislature not to create other major universities in Louisiana. His effort failed. Wharton said LSU's financial support was taxed heavily because there was "one great big budget."

"In Texas, when they create a new university, they hire a president, and he's responsible to develop a new school," he said. "Here in Louisiana, they put it on the back of this campus to develop schools like [LSU] Eunice, Alexandria and UNO."

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Wharton said Louisiana has overbuilt higher education, and he doesn't see a major commitment to make LSU competitive with peer institutions such as the University of Georgia or the University of Florida.

But LSU's successes aren't all ancient history. During Wharton's term as chancellor, the University was ranked a "Research One" University by the Carnegie Foundation. Today, the University boasts several nationally competitive programs, such as its internal auditing and petroleum engineering programs. It is also one of only 25 universities designated as both a land- and sea-grant institution.

Wharton began sowing the seeds of the Flagship Agenda as early as 1981.

That year, he traveled across the country visiting highly-ranked schools such as Yale University, the University of California at Berkeley and the Massachusetts Institute of Technology to obtain information about how LSU could gain ground on those highly-ranked institutions.

"In history, we couldn't begin to compete with Yale," Wharton said. "MIT was spending more money on electrical engineering in 1981 than we were spending on the whole College of Engineering."

Until the mid-1980s, everyone who applied to the University was admitted. The open-door policy ended during Wharton's chancellorship, when in 1984, he brought high schools "kicking and screaming" to accept the University's new admission requirements of a grade point average of 2.0 and an ACT score of 20.

Since then, the requirement has risen to a GPA of 3.0 and an ACT score of 22. The Flagship Agenda states that by 2010, the freshman class should have an average profile of a 3.6 GPA and a ACT score of 26. The freshman class of 2005 was just below those marks.

Wharton works as a chemistry professor at the University, consults for higher education institutions around the country and has remained close to University administration, including chancellors Emmert and O'Keefe.

"The most important thing to me is to see this University get stronger," Wharton said. "I'll help anybody who's trying to make that happen."

LSU'S MISSION

August 30, 2005 is the day O'Keefe said LSU proved it has earned the rank of flagship institution for the state of Louisiana.

Starting that day — the first after Hurricane Katrina slammed New Orleans, Southeast Louisiana and much of the Gulf Coast — the University became a triage center for victims and a home for almost 3,000 displaced students from New Orleans-area universities.

O'Keefe said the University was making "substantial progress" before the hurricanes hit.

"If there was ever any doubt of the standing of this institution as the flagship of the state, it was demonstrated very clearly in the days and weeks following the hurricanes," O'Keefe said. "The last few months have shown a changing of priorities — but it's not a setback to what is the Flagship Agenda."

The Flagship Agenda's preamble says it will "enhance Louisiana by converting scientific and technological discoveries into new products and processes, by preparing an informed and creative labor force and by applying University resources to solve economic, environmental and educational changes."

But while state officials, including Gov. Kathleen Blanco, have expressed support for LSU and the Flagship Agenda, funding for higher education makes supporting that agenda tricky.

Roderick Hawkins, Blanco's deputy press secretary, said the governor's actions have supported the Flagship Agenda.

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The governor's push for teacher pay raises will "have a direct impact on LSU," Hawkins said.

"We can make sure we can get quality faculty," Hawkins said. "She's fighting for education and a stronger economy, and that requires a good research institution."

But state Sen. Jay Dardenne, R-Baton Rouge, a former LSU student body president, said the state is not doing enough monetarily to ensure the success of the Flagship Agenda.

"It is an agenda that requires a substantial financial commitment from a state that has limited resources and has not shown a tendency in the past to reward the flagship status of LSU—Baton Rouge," he said.

All the institutions of higher education in the state received \$5,505 per full-time enrolled student before the hurricanes of 2005. For the fiscal year 2006-2007, the Board of Supervisors is projecting that number to drop to \$4,861 per student after budget cuts.

Dardenne said despite cuts, there should be some kind "sweetener" for the flagship campus of Louisiana.

"There has been a tendency in the past to approach funding higher education in a matter of distributive politics, in which money was distributed to all campuses," Dardenne said. "There needs to be a funding mechanism that rewards the flagship institution."

Dardenne said one of the reasons LSU's enrollment will continue to grow is its need to "drive dollars" to the campus.

But Dardenne, who sits on the State Senate Education Committee, said changing the allocation is something that is not easy to propose. He said the "political reality of that argument" is much more difficult because legislators' loyalty is to their districts, many of which have other institutions of higher education.

"You're talking about potentially diminishing the funding to other institutions," he said. "This is something I think has to be done, but we have not yet gotten a broad enough base of support to get that legislatively."

State officials and administrators agree that LSU's mission should be to stimulate economic development in the state.

State Commissioner of Higher Education Joseph Savoie said Louisiana "desperately needs" the benefits a competitive research institution can provide.

Savoie also said the state has not adequately funded its flagship school, but it takes time to "adjust the internal culture" of the state.

LSU Board of Supervisors Flagship Committee Chairman Stewart Slack said it doesn't make sense for Louisiana not to pour money into the University and let the administration use that money to bolster academics and research.

"I see LSU as the best investment we've got," Slack said. "We have only one Fortune 500 company in Louisiana now. We can prosper in Louisiana by focusing on knowledge-based business. The way to leverage that is through higher education. We have to do what the Flagship Agenda is designed for."

Dardenne agreed the Flagship Agenda must be funded to help spur economic development.

"If we're missing the mark on the Flagship Agenda, we're short-changing the citizens on our economic challenges," Dardenne said. "We need to do more to advance the Flagship Agenda and ensure LSU's role as a flagship university."

But Savoie also said LSU's role is to educate Louisiana's citizens.

"LSU has a responsibility to provide educational opportunities to Louisiana citizens," Savoie said. "But its role in the scheme of institutions across the state is to focus on graduate-level opportunities and research opportunities."

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Wharton said TOPS could actually be hindering the Flagship Agenda, because TOPS eliminates the disparity in tuition prices between LSU and regional universities like UNO and Louisiana Tech. This essentially equalizes LSU with other institutions, letting students choose where they go based on academics and overall experience as opposed to finances.

“When cost is off the table, quality becomes the decision,” Wharton said. “Thirty-three percent of all the TOPS students in the state come here.”

At the undergraduate level, Wharton said, all universities are regional, but graduate programs are nationwide or worldwide.

Wharton said he judges a flagship by how much “knowledge it’s pouring out.”

“The state would have to put [a lot more money] into LSU, and it would take 10 to 15 years of really tough faculty recruiting to become competitive,” he said.

DESTINATION 2010

Halfway through the seven-year Flagship Agenda, the University is poised to launch a massive capital campaign to enlarge its endowment and remake the image of the University.

“It raises our visibility,” O’Keefe said of the campaign. “It reminds folks on a national basis that LSU is neither flooded nor on fire.”

O’Keefe and Vice Chancellor for Communications and Media Relations Michael Ruffner have repeatedly referenced the all-important U.S. News and World Rankings, which places LSU in the third tier of four-year higher education institutions.

Emmert has said LSU “doesn’t belong in the third tier” and said the University will have to re-calibrate after the events of hurricanes Katrina and Rita to demonstrate “nationally and globally what a great public university can do when it reaches out and supports its neighbors and communities.”

Still, raising the University’s rankings is a priority for the administration.

Bob Morse, director of data research for U.S. News and World Report, said Ruffner contacted him seeking insight on how the magazine’s ranking system worked.

Morse said LSU is a “certain type of school” with a mission and resources that doesn’t gel with the standards set by the ranking system.

“We’re saying it’s better to have higher standards of admission or pay higher salaries to their faculty,” Morse said. “That may not be possible for a school with [LSU’s] mission and resources.”

“Unless there’s some big changes, your school serves the state — you’re going to get students from in state,” he said.

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<http://www.lsureveille.com/vnews/display.v/ART/2006/03/30/442b737bce50a>

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Daily Briefing Health Care Advisory Board

03.29.06

Aging population not expected to be major driver of hospital demand

A new report by the Center for Studying Health System Change suggests that the aging baby-boomer population will play only a “relatively small part” in hospitals’ future inpatient demand. The study, which was published online yesterday in *Health Affairs*, suggests that other factors such as local demographic changes and advances in medical technology and procedures should be weighed more heavily than national population shifts when hospitals make decisions about expanding capacity.

Study suggests uninsured not main cause of ED overcrowding

Challenging long-held beliefs that uninsured patients are to blame for ED overcrowding, a new study suggests that the “vast majority” of frequent ED visitors have health insurance and access to primary care.

Report details cost of nosocomial infections in Pennsylvania

A report released today by the Pennsylvania Health Care Cost Containment Council (PHC4) finds that patients in Pennsylvania who developed nosocomial infections in 2004 incurred hospital charges that were more than seven times higher than those of patients who did not contract such infections.

Website offers free cancer information in several Asian languages

With cancer death rates among the Asian-American population climbing “faster than...any other racial group,” a new website unveiled this week aims to improve care for Asian Americans by providing prevention, screening, and treatment information in a variety of Asian languages.

New Orleans hospitals: Health care still in ‘shambles,’ report finds

A report released this week by the Government Accountability Office (GAO) finds that only a fraction of the hospital beds available before Hurricane Katrina devastated New Orleans and the surrounding region are up and running and that access to specialty care remains limited.

Portland hospitals (Ore.): Complete expansions in suburban areas

Many of Portland’s largest hospitals are branching out to the suburbs to care for a growing population of insured residents, driving what some say could amount to the area’s “first big hospital boom in decades.”

N.J. hospitals: Adopt new holistic techniques to speed recovery

With research documenting the “mind’s critical role in physical healing,” holistic methods of care are gaining popularity among some New Jersey hospitals and in some cases have led to new staff training initiatives.

GlaxoSmithKline agrees to pay \$14 million to settle Paxil lawsuit

GlaxoSmithKline yesterday agreed to pay \$14 million to settle a federal court case alleging that the drug maker caused state Medicaid programs and the general public to pay more for its antidepressant Paxil by stalling the entry of generic versions of the drug to the market.

Around the nation: Bite-sized hospital and health industry news

Et cetera: Many hospital workers, physicians influenced by superstitions

Although a 2002 study in the *British Medical Journal* found “no hard evidence” supporting common medical superstitions, many hospital workers say superstitious tendencies often are “passed down the chain of command” from high-ranking physicians to medical students.

<http://www.advisory.com/members/default.asp?program=1&collectionid=4>

or see attachment “57942_14_1_03-29-2006_0.pdf”

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