



# LSU

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LOUISIANA'S HOSPITAL SYSTEM

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## Louisiana Doctors Leaving the State WAFB TV | 07.28.06

VIDEO: Louisiana Doctors Leaving the State

In the aftermath of Hurricane Katrina, Louisiana is facing a quiet crisis as one by one, medical doctors are leaving the state. There is a concern about the uncertain future of New Orleans and patients who can't pay them for care. WAFB's Julie Baxter reports that this is a loss already hitting patients and hospitals across south Louisiana.

Katrina's turmoil in New Orleans is still washing over the medical community from all directions. The Louisiana State Medical Society has 5,000 members and we were told there are 700 more members they haven't been able to contact since Katrina.

"We've lost a tremendous number of physicians in the New Orleans area -- and not just in Orleans Parish," says Ochsner Clinic Chief of Staff Jay Brooks.

Doctors in the medical community are saying that the roughly 4,000 doctors who served the New Orleans area before the storm are now down to 1,200 to 1,500 in number.

"A number of physicians have left with the loss of medical centers at LSU and Tulane," says Brooks.

Doctors say part of the problem is no clear vision on how New Orleans will look once it's rebuilt -- and no clear plan to get there.

"The issue is what is the environment for the physician to practice in, what is the payer mix, in terms of how many patients can pay for their health care, or have insurance," Brooks says.

And a larger percentage of uninsured patients is a serious problem for doctors having to group together to try to keep their practice open.

"Many physicians are working very hard, taking in large numbers of patients but not necessarily receiving any pay for the work they're doing," Brooks says. "They're having to pay for their office staff, for electricity, just for overhead of their office."

Meanwhile, doctors say around the country their colleagues are extremely concerned about doctor Anna Pou's being arrested prior to any grand jury investigation for allegedly administering a lethal dose of morphine and Ativan to patients at memorial hospital after Katrina.

"They're very concerned about what will happen next time they're asked to remain behind and take care of patients in a very difficult situation," Brooks adds.

And with doctors and medical professionals in huge demand everywhere else in the country right now, it is Louisiana patients who will feel the pain of the doctor drain.

"They'll see longer waits to see doctors, may not be able to see the doctor they want, the specialty they want immediately," says Brooks.

Brooks says during this past session, the state legislature agreed to fund money for hospitals that treat patients who can't pay. They didn't, however, provide any money for doctors who are treating patients without compensation.

Reporter: Julie Baxter [jbaxter@wafb.com](mailto:jbaxter@wafb.com)  
<http://www.wafb.com/Global/story.asp?S=5201946>

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## **Gov. Blanco very supportive of LSU The Advertiser | 07.28.06**

I have read recent negative comments concerning Gov. Kathleen Blanco's decision not to reappoint Ronnie Anderson and Stewart Slack to the LSU Board of Supervisors, with the implication that this was done to undermine LSU and further the University of Louisiana at Lafayette. First, let me say that Anderson and Slack were outstanding members of the Board of Supervisors, and they were extremely effective chairmen. No one loves LSU more than they do. I am truly sorry they were not reappointed.

However, in looking at the governor's new appointments to the LSU Board, it should be noted that all of them, with one exception, are LSU graduates. None of her appointments, I believe, would do anything that would harm LSU. All these LSU alumni "bleed purple and gold" and are committed to helping the LSU System.

I recently had the opportunity to talk to the governor and her chief of staff. Our conversation was on the lines of "tell me about LSU, the LSU Health Sciences Center and the Charity Hospital System and what is best for them." Gov. Blanco pointed out that to improve Louisiana's economy, the state needs a very strong flagship university. Toward that end, she provided an additional \$3.2 million in funding to assist LSU in meeting the goals of its flagship agenda. I challenge anyone to find one single instance in which she has not acted in the best interest of LSU. I thank Gov. Blanco for her support of the LSU System and for all of higher education.

Jack A. Andonie, M.D.,  
Member

LSU Board of Supervisors

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<http://www.theadvertiser.com/apps/pbcs.dll/article?AID=/20060728/OPINION03/607280311/1014>

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## Reform May Include Paying Doctors to Treat Uninsured La Political Fax Weekly | 07.28.06

The medical community has been among the slowest to recover from the hurricanes, with estimates that as many as two-thirds of the 4,000 doctors practicing pre-Katrina have not returned to the New Orleans area. Their mobility, loss of patients and the lack of a plan for the city's comeback are cited as major contributing factors, and the arrest of Dr. Anna Maria Pou in the "mercy killings" case has not helped.

What could help is changing state law to allow doctors to receive federal reimbursement for treating uninsured patients. That's a key proposal being discussed in the state healthcare collaborative for inclusion in the reform plan it is fashioning.

DHH Secretary Dr. Fred Cerise, who is chairing the collaborative, favors the concept as a way of relying more on preventive care and less on public hospital emergency rooms. "If we're to provide more access, whatever payment model there will be would have to include doctors in that," he said.

Under federal law, any changes in the state's reimbursement model would have to be revenue neutral, so paying doctors could mean less for hospitals. But proponents say the state's 30 percent match would almost pay for itself in the income taxes doctors pay and the economic activity generated, not to mention enticing more of them to stay or come back.

<http://www.lapolitics.com>

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## Kennedy concerned about spending

**The Advocate | 07.28.06**

By PATRICK COURREGES

LAFAYETTE — State Treasurer John Kennedy said Thursday that Louisiana's government may be rolling in money in the wake of the hurricanes of 2005, but leadership needs to be aware that the flush times are probably temporary.

He told a luncheon meeting of the Lafayette Rotary Club that Gov. Kathleen Blanco and legislators dealt with a \$27 billion state budget in the recent legislative session following the double hit of hurricanes Katrina and Rita in 2005 — an amount unprecedented in the financial history of the state.

Tax collections on sales, gambling and corporate income are up, and the state's Revenue Estimating Conference found another \$750 million available during the middle of the recent session, Kennedy said.

"The Legislature spent every penny," he said.

Kennedy said he expects that, when the Revenue Estimating Conference meets next, it will likely find even more money coming into the state than has been budgeted so far.

He said that he is pleased by the windfall for Louisiana, but not surprised, because studies he has read show that a short-to-medium-term economic boom generally follows when states deal with major disasters.

That is generally a mix of federal aid and rebuilding activity bringing more money into the state and state government, Kennedy said.

"The real issues are, No. 1, how we spend that money, and No. 2, whether we spend that money in such a way that, after the short-to-medium-term boom, Louisiana is better off," he said. "That's the part I'm worried about."

Kennedy said that Blanco and legislators placed the wrong projects and services on their priority lists.

Kennedy said that between \$30 million and \$75 million in this year's state budget earmarked for various projects or programs could have been better spent on the real needs of the state — roads, drainage, jails and the like.

He said that only about 12 percent of the budget was dedicated to business and infrastructure needs.

Kennedy said one of the biggest omissions in the Legislature's discussions during the session was that legislators made no headway on the idea of remaking the state's costly and much-criticized charity hospital system.

He said Hurricane Katrina's devastation of the state's main charity hospital in New Orleans created the opportunity for the state to reconsider how it handles health care for the poor, but nothing was done.

"We have a chance to design a health-care system that looks like we designed it on purpose," Kennedy said.

Kennedy said state leaders "need to step on toes" to bring state health-care spending under control, although entrenched interests will fight the idea.

"When you spend \$5 billion to \$7 billion cash a year, some people are making money," he said. "You talk about changing it, they get upset."

Working the private sector more into the health-care model could mean lower costs and better care, Kennedy said.

"Frankly, right now, I don't see the political will to do it," he said.

<http://www.2theadvocate.com/news/suburban/3442941.html?showAll=y&c=y>

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## **DEVILLE: Keeping an eye on the Board**

### **Tiger Rag | 07.28.06**

By: Matt Deville

But in addition to preparing our flash back to the previous year, we have experienced one of the busiest summers in recent memory. Since our last issue on June 10, LSU has hired a new baseball coach, lost two prominent athletes to the ranks of professional sports, watched a former LSU women's hoops star become a WNBA All-Star, ushered five former LSU star athletes to the hall of fame and rewarded four coaches all with new contracts and lots of money.

While it has been a rather newsworthy summer, there is one storyline that sticks out above all the rest.

Typically, I reserve the pages of Tiger Rag for sports coverage from the campus of LSU. Seldom do I dive off into the deep end of the pool dissecting the bureaucracy surrounding the political side of LSU.

However, there have been developments on the LSU Board of Supervisors that needs to be brought to the attention of Tiger fans everywhere.

Over the course of the past several weeks, the terms of four of the sitting members of the LSU Board of Supervisors have expired and each were due for re-appointment.

Two of those members, Ronnie Anderson and Stewart Slack, were not re-appointed by Gov. Kathleen Blanco.

Two others, Marty Chabert and longtime board member Charlie Cusimano, have not been re-appointed, but have not been replaced as of press time.

"Marty Chabert and Charlie Cusimano are still in limbo," outgoing board member Ronnie Anderson told Tiger Rag. "They have not been re-appointed, but no one has been appointed in their places so they are still serving."

After nine years of service, Anderson got an initial call from Blanco's office then was officially relieved of his seat on the board via a letter.

"I got a letter from the governor's office saying 'sorry,' that I was not being re-appointed to the board," Anderson said. "She (Blanco) 'thanked me for my dedication to the board.' The governor has total control of the board and who serves on it. She wanted to put some new blood on the board. Our terms are staggered and it just so happens that a lot of us came up for re-appointment at the same time."

Conspiracy theorists everywhere have come out of the woodwork and the rumor mill has heated up in recent months. Since LSU Systems President William Jenkins announced he would retire, a debate ensued over who would replace the highly successfully and wildly popular leader.

"There have been some things going on with president Jenkins," Anderson said. "He has until August 2008 before his normal retirement date would be reached. Some of us felt like there was a little bit too much haste in pursuing someone to fill his position. Then there were the rumors about Sally Clausen and the UL system. We felt like it needed to slow down a little bit. It has to an extent."

Clausen, president of the University of Louisiana System, was being rumored as Blanco's choice for Jenkins' replacement, a movement which was met with strong opposition.

"I am, initially, concerned with Sally Clausen replacing President Jenkins. I am not really in favor of that," Anderson said. "I think the board should do a national search (for Jenkins' replacement). It may turn out that she (Clausen) is the best candidate. But I think they should go through the process and see what options they have nationally."

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In the interim period, LSU hired a search firm to detail the qualifications for the new president before the actual search begins.

“There is a search firm that is putting together some ideas about what the qualifications should be for the next LSU System president,” Anderson said. “They are supposed to give a report to the board pretty soon.”

Another major concern Anderson has surrounding the re-structuring of the board is the future of the LSU Systems’ member institutions. It is widely-known that Blanco, an alum of the University of Louisiana-Lafayette, is a huge proponent of the growth of the University of Louisiana system. There has been speculation that several member schools in the LSU System could be handed over to the UL System.

“I do know (Commissioner of Higher Education) Dr. (E. Joseph) Savoy with the (Louisiana) Board of Regents and the past president of our board, Bernie Boudreaux, did visit the UNO, LSU-Alexandria and the LSU-Eunice campuses and talked to them about moving from one system (LSU) to another (UL),” Anderson said. “I am not in favor of that. Those schools were developed and built by the LSU System and it is in theirs’ and the LSU System’s best interest for them to remain a part of this system.”

Anderson says there is no need to panic right now, but with all that has transpired, people should take notice.

“I think it is something LSU fans and backers should watch,” Anderson said. “I think they need to be aware of the possibilities and what could happen.”

Anderson, who serves as the president of the Louisiana Farm Bureau Federation and Farm Bureau of Louisiana, said he is proud of the time he served on the board and will always remember what the board accomplished during his terms of service. Under Anderson’s watch, the board hired former LSU chancellor Mark Emmert and football coach Nick Saban, which triggered the most successful period in the history of LSU athletics.

The board achieved many notable accomplishments outside the realm of athletics over the last nine years. The board reformed and raised admission standards, which resulted in an increase in average GPA and graduation rates. Also, Anderson helped oversee the transition of the charity hospital system to the LSU system, something he called “a huge project under good conditions, much less after the hurricanes.”

“It really has been a tremendous experience over the last nine years,” Anderson said of his term on the board. “I am just tickled to death to have had the opportunity to serve. It was quite an honor. I am just sorry that I am not going to be able to stay longer.”

As the clock ticks down on Blanco’s term in office, all eyes will be affixed on every move made and how each could affect the LSU System and its future.

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## Blanco still haggling with feds over hurricane response

The Associated Press | 07.28.06

By DOUG SIMPSON

BATON ROUGE, La. (AP) — As the heart of hurricane season approaches, Louisiana Gov. Kathleen Blanco and the federal government continue to debate how to handle tough problems of evacuations and shelters if another storm on the scale of Hurricane Katrina takes aim at the struggling state.

In a letter to U.S. Homeland Security Secretary Michael Chertoff, issued late Wednesday, the governor asked that the federal government provide shelter for at least 150,000 people if another such storm headed toward Louisiana's coast. Blanco complained that Chertoff's agency had promised — but not delivered — written assurances that such evacuees would have housing.

"We have received no indication from you that staffing, logistics and security for additional shelters have been addressed," Blanco wrote. "We have not received any such indication in formal written form."

Russ Knocke, a spokesman for Chertoff's agency, declined Thursday to discuss Blanco's specific complaints. He said post-Katrina planning is particularly difficult because so much of southeast Louisiana remains in shambles: many residents live in vulnerable trailers and thousands of rebuilding projects mean the region is covered with construction equipment that could easily become airborne missiles if another storm strikes.

"We have been working with the state on the very unglamorous planning, that has never been done before, and needs to be done," he said.

Hurricane season runs from June through November, with peak activity usually coming in August and September.

Blanco's letter was in response to Chertoff's July 17 request for specifics on the state's shelters, immobile patients and transportation points before pledging federal help with hurricane evacuations.

In that request, Chertoff wrote to Blanco: "You have informed DHS that for the 2006 hurricane season the state is unable, without federal support, to evacuate all those who cannot evacuate themselves. As such, we are prepared to provide that support. But we cannot do so effectively without your close cooperation and assistance."

He added: "The heart of the hurricane season begins in August and it is critical that we address outstanding preparedness issues in your state before then."

Blanco responded that the state has three shelters in northern Louisiana for evacuees without transportation: pre-storm space for 82,000 people in general population shelters and 1,915 people with special needs. After a storm, the state will have space for 124,000 total, she said.

A congressional investigation of the Katrina response, released in February, found fault with Chertoff's agency for failing to activate a national plan to trigger fast relief and for overseeing a bare-bones and inexperienced emergency response staff.

The report also concluded that Blanco and New Orleans Mayor Ray Nagin waited too long to order a mandatory evacuation of the city. Despite warnings of Katrina's potential destruction 56 hours ahead of landfall, the mandatory evacuation order came 19 hours before Katrina hit.

In her letter, the governor said federal officials have kept the state in the dark on hurricane response plans.

For example, Blanco said that the federal government is working on an evacuation plan with New Orleans and Amtrak officials without state government's input.

As a result, she said, "When the state's shelters are full, the federal government must assume complete responsibility for Amtrak, from embarkation to safe delivery at a federally established shelter."

<http://www.nola.com/newsflash/louisiana/index.ssf?/base/news-26/115400426210610.xml&storylist=louisiana>

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## State, feds still staking out turf in storm

**Times – Picayune | 07.28.06**

Sticking points remain on who will do what

By Laura Maggi; Capital bureau

BATON ROUGE -- Just days before Louisiana enters the peak of the hurricane season, state and federal officials still are working out who will be in charge of key responsibilities when a storm is brewing in the Gulf and coastal residents need to head to safety, according to recent correspondence between the Bush and Blanco administrations.

The letters between Gov. Kathleen Blanco and Homeland Security Secretary Michael Chertoff show that there are sticking points on how to evacuate people without their own transportation and where people will go once they are out of harm's way.

In an 18-page missive sent to Washington on Wednesday night, Blanco pinpointed a number of other outstanding issues she said still are unresolved, such as what to do with the most fragile hospital patients and whether the Federal Emergency Management Agency should take responsibility for evacuating group trailer parks.

But the governor's correspondence -- a response to a letter sent by Chertoff on July 17, itself an answer to previous state requests for federal assistance during the hurricane season -- does not address all of the concerns raised last week by the nation's top homeland security official. In particular, the state's identified shelter capacity is far below the 150,000 beds that Chertoff indicated would be ideal within Louisiana.

Despite the significant issues to be worked out, both Louisiana and federal officials emphasized that they are operating with an unprecedented level of cooperation and planning to prepare communities still reeling from Hurricanes Katrina and Rita. Although the Gulf Coast hurricane season started June 1, historically the most active storm period is from mid-August through early October.

"We are doing our very best to create a system that will give people the secure knowledge that they will be properly taken care of," Blanco said during a phone interview.

Russ Knocke, a spokesman for the Department of Homeland Security, declined to answer specific questions about Blanco's letter or readiness activities, saying the agency needed a couple of days to review the response to determine whether any "ambiguities" need to be resolved with the state.

"We are going to continue to work with the state and parishes to finalize any details and make certain there is absolute clarity on the roles and responsibilities going into this storm season," Knocke said.

### Getting people out

In many instances in the letters, Blanco and Chertoff are asking the other side to take responsibility for a key activity. But in the critical area of coordinating transportation for people without cars, both the state and federal governments seem to think they should take the lead.

In his letter, Chertoff indicated that the bus, rail and air transportation made available by the federal government will be run out of the Joint Field Office that FEMA has established in Baton Rouge, encouraging the state to move its personnel there to ensure a coordinated state and federal effort. The federal government has signed contracts to be ready to move 80,000 people by bus, 46,000 in airplanes and 15,000 by rail.

But Blanco responded that the "National Response Plan" that governs the protocols to follow during emergencies calls for the federal government to coordinate its transportation efforts at the state's Movement Control Center, which has been established at the Louisiana Department of Transportation and Development.

Col. Jeff Smith, the acting director of Louisiana's Office of Homeland Security and Emergency Preparation, said all parties now agree that evacuation efforts will be coordinated from the state's center.

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State officials did respond to a federal request for the list of "pick-up" points where local governments are supposed to bring people to get rides out of town; in New Orleans, those sites will be the Ernest N. Morial Convention Center and Union Passenger Terminal.

But Smith said there are still questions about the federal plan to use Amtrak trains to evacuate the city. Smith said the concept of using the rails for evacuations has been worked out between the city of New Orleans and the federal government. The state was left out of the loop, but it likely will be responsible for determining where to shelter evacuees, he said.

Because trains have never been used in an evacuation, Smith said the federal government should plan to use the option only as a backup. He said it is also unclear whether the rail cars that would be used are equipped to handle the task.

#### More places for shelter

Once people have been evacuated, many will need shelter. It is unclear whether the state or federal government will be responsible for expanding the number of available shelter slots.

Louisiana has increased its shelter capacity from about 45,000 beds during the 2005 hurricane season to about 84,000 spaces this year, according to the state Department of Social Services.

That total comprises 1,915 spots for people with special medical needs, 10,000 places at three large shelters in northern Louisiana and 72,526 in regular parish-run shelters. The number of spots will grow to 124,000 after a storm, which will include shelters south of Interstate 10 that the American Red Cross will authorize only after a hurricane.

In addition, the state has identified a shelter in Arkansas and another in Tennessee for as many as 9,000 people if state capacity is reached.

Chertoff wrote in his letter that his agency's work with the state had identified 75,000 more shelter spaces in Louisiana that could be used, questioning whether failure to include the beds in the state's plan indicated that some local governments were not cooperating.

But Blanco said many of those spots were in coastal parishes where the Red Cross will not allow shelters, while others were unavailable this year or were damaged during the 2005 hurricane season. Smith said the state could find 20,000 to 25,000 more spaces within Louisiana.

Regardless, both Smith and the governor said the state can't operate more shelters in Louisiana without the federal government providing staff and adequate supplies. Indeed, Blanco's letter to Chertoff asks that the federal government be ready to provide 150,000 shelter spaces during a "catastrophic event," which Smith said would essentially involve evacuating the entire coast.

#### Uncertainty about hospitals

The letters also seem to indicate there is some question as to whether critically ill patients will be "sheltered in place" at hospitals, instead of evacuated before a storm. The Chertoff letter says this should be the state's plan, asking for various information about the number of fragile patients in hospitals.

But Blanco said the state previously was instructed by federal officials to evacuate all patients from hospitals and nursing homes, no matter what condition the patients are in. While the state prefers to shelter the most critical patients at health-care facilities -- because of concerns they could die during an evacuation -- she said the state needs federal assistance to make sure health-care facilities have generators raised off the floor and other necessary supplies.

The Blanco letter asks that FEMA take responsibility for evacuating group sites of travel trailers, which are vulnerable to even tropical-storm-force winds. She said local and state governments have not been given sufficient access to the parks to ensure a smooth evacuation.

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<http://www.nola.com/news/t-p/capital/index.ssf?/base/news-4/1154066243142400.xml&coll=1>

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## Hardship enables opportunity; that's our history, our heritage

### The Hill | 07.26.06

By Mike Leavitt

As President Bush said while standing in New Orleans shortly after Hurricane Katrina struck, “We are heirs to the men and women who lived through those first terrible winters at Jamestown and Plymouth, who rebuilt Chicago after a great fire and San Francisco after a great earthquake. ... Every time, the people in this land have come back ... to build anew — and to build better than what we had before.

That’s why President Bush has committed a total of \$90 billion to the entire Gulf Coast. That’s why I have encouraged and supported state and local officials from all across Louisiana to establish a formal collaborative effort to address the needs of the healthcare system.

And last Monday, I joined with other supporters as members of the Louisiana Healthcare Redesign Collaborative committed themselves to establish a blueprint for a better healthcare system in New Orleans and across the state.

We mourn the fact that Katrina struck, taking the lives of thousands and changing the fortunes of millions more, but those circumstances have contrived to create an unprecedented opportunity, the chance to build a new, patient-centered system that will provide a continuum of care — from preventing diseases to long-term support for chronic conditions.

Doing so will not only save lives and reduce suffering, it will light the way for a nation struggling to find a better way to deliver healthcare.

So, what will the right system look like when our work is finished? Time will tell. One thing we know is that it shouldn’t look like the current system.

There is widespread agreement that the old system may have served well in a former day, but that day has passed. Filled with good intention, it was fraught with inefficiency and even dysfunction.

A recent report prepared for the Louisiana Recovery Authority by PricewaterhouseCoopers declared that “the entire healthcare system suffers from high cost and lower than expected quality.”

The report noted that Louisiana’s two-tiered system has led to:

- An excess of beds in the private sector that produce more care than is needed.
- A shortfall of beds in the public sector that produce less care than is required.

The two-tiered system also depends on emergency rooms for routine medical care. Any system that does so will provide neither type of care well.

Shortly before Katrina struck, I was told by Kevin Stephens, the director of public health for New Orleans, that patients who went to the emergency rooms of charity hospitals could count on 24-hour waits.

Care delayed becomes care denied. Chronic conditions can become exacerbated. Those who could gain the most from preventive care and proactive involvement — the poorest and most vulnerable — rarely receive it.

And so the signers of the pact have agreed upon principles of what that new system will look like. I think those principles will produce a system where:

- Every citizen has a medical home — whether hospital or community health center — where the goal is to keep people healthy and not just to treat them after they get sick.

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## **It was Heroism, Not Homicide, During Katrina Time Magazine | 07.25.06**

A New Orleans physician argues that the attorney general's case against a surgeon and two nurses is "absurd"

Last week New Orleans surgeon Anna Pou and two nurses were accused of second-degree murder in the deaths of four critically ill patients under their care at Memorial Medical Center in the days following Hurricane Katrina. "This is not euthanasia; this is plain and simple homicide," said state attorney general, Charles Foti, Jr. The three women were released on bail. For a perspective on the case, TIME turned to Dr. Ben deBoisblanc, a critical care expert who attended 50 critically ill patients stranded for five days at nearby Charity Hospital.

My first impression when I heard the charges against Anna Pou was shock and disbelief. I know Dr. Pou and have found her to be among the most professional and ethical physicians I know. Then I heard the attorney general and I became even more incredulous. He referred to a combination of drugs she used with her patients — the sedative Versed and the painkiller morphine — as a "lethal cocktail guaranteed to kill." This is absurd. If it were true, then thousands of people would be dying at the hands of doctors every day, because we use these drugs in combination all the time to give comfort, either during hospital procedures or at the end of life.

We struggle with end-of-life issues every single day. An episode like Katrina only complicates this struggle because it puts additional physiologic stresses on patients and emotional stresses on those who care for them. You can imagine a New Orleans summer without air conditioning — how unbearably hot it can be. At Charity Hospital, not far from where Dr. Pou was working, I and nearly 60 other staff doctors, nurses, and residents were stuck in a hospital without electricity, without water, without food, for five days with about 340 patients, 50 of them critically ill. We had no ability to use ventilators, so we had to squeeze ambu bags by hand to get air into their lungs. We had no monitoring equipment, no X-ray, no laboratory, no dialysis. Compounding all this, we were unable to have families at the bedside — or even available by phone — to participate in treatment decisions for the sickest patients. It was very, very difficult.

Like every acute-care hospital, we had patients die during the Katrina crisis — nine in all, and we did our best to make sure that when these patients died, they died with dignity and as comfortably as possible. Versed and morphine are appropriate drugs to ease suffering at the end of life in such a situation. Versed relieves anxiety and gives patients amnesia for events so they don't have horrible recollections of frightening events. Morphine is used to relieve pain. The combination is not some witch's brew, as was inferred during the press conference announcing the arrests. At the end of life we want to make sure that the experience is as comfortable as it can be. If a patient's attention is focused on pain, he or she might miss an opportunity for closure.

The major difference between comfort care and euthanasia or murder is intent. In a dying patient, giving sedatives and pain killers with the intent to cause death would be considered euthanasia or murder, while giving the same drugs in the same dosages with the intent to relieve suffering would be considered good, compassionate medicine, even if death were to be a consequence. In the wake of Katrina if a patient had died in a hospital without evidence of having received comfort care, I would question that treatment.

I am surprised that the attorney general would rely on post-mortem drug levels to determine whether these drugs were administered in proper dosages. The drug levels in the patients — whatever they may be — mean nothing. Some patients receive very, very high doses of the medications with minimal effects, while other patients are very sensitive and require very little. The idea that you can check a drug level and determine intent is absurd.

We don't know the whole story from all participants, including Dr. Pou and the nurses: what the conditions were like and what their intentions were. Until all the facts are known, it's wrong for the attorney general to act as if he's dealing with hardened criminals. He may very well be dealing with heroes.

<http://www.time.com/time/nation/article/0,8599,1218776,00.html>

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## Two unions trying to attract evacuees into job training The Associated Press | 07.25.06

NEW ORLEANS (AP) — Two unions that represent construction workers and health care employees said Tuesday that they are trying to attract hurricane evacuees back to the city for job training and, hopefully, long-term employment and residence in New Orleans.

The Laborers International Union of North America will train workers in such fields as demolition, mold remediation and basic construction. The Service Employees International Union plans to train and place workers as home health aids, followed by nursing positions.

The joint venture, known as the New Orleans Worker Resource Center, is designed to find good-paying jobs for people who want to return to the city permanently, said Tom Wordruff, SEIU executive vice president.

"We're focusing on people who lived here to get this training, so they will live here and have decent jobs," Woodruff said Tuesday.

The center had its first training class Tuesday as 20 recruits attended a 10-hour training course focusing on workplace safety.

Workers who finish the training and are placed in jobs will be eligible for union-provided debit cards that will enable them to have basic health care services, help with prescription drugs and ways to manage their money, officials said.

"We want to provide some minimal amount of benefits," Woodruff said. "We not only want to put people in jobs, but make sure these are decent-paying jobs. We don't want these to become minimum-wage jobs."

Currently, workers are being recruited in the New Orleans area. In the next few weeks, former New Orleans residents living in Baton Rouge will be approached, followed by evacuee populations in such cities as Atlanta and Houston, Woodruff said.

Woodruff said housing remains a key issue. The city, with a sharply reduced housing stock, is undergoing a period of skyrocketing real estate prices and stiffer rents. Woodruff said the unions are working on possible temporary solutions, such as apartments and motels.

If workers are placed in temporary housing, they can have jobs while rebuilding their homes and then make their temporary residences available for other recruits, Woodruff said.

The unions are putting up about \$1 million to get the program started, Woodruff said. "We'll spend as much as it needs and takes," he said.

<http://www.nola.com/newsflash/louisiana/index.ssf?/base/business-3/1153873758204230.xml&storylist=louisiana>

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## Daily Briefing Health Care Advisory Board

July 25, 2006

### Health care systems pursue retail health clinic patient base

As retail health clinics begin to proliferate in supermarkets, drugstores, and other retail chain stores nationwide, some regional health care systems are forging their own agreements with retailers or entering into referral or oversight agreements with retail clinics in an effort to recapture a portion of their patient base and the accompanying revenue. Traditionally, retail health clinics—which include start-ups such as RediClinic, MinuteClinic, and Take Care Health Systems—have avoided establishing formal ties with the broader medical community and have instead contracted directly with retailers to provide services.

### Citing savings, medical tourism groups pitch overseas care to employers

As the popularity of “medical tourism” continues to grow, companies that arrange travel and medical care abroad are increasingly focusing their marketing efforts on U.S. employers looking for new methods to trim medical spending.

### CMS announces disaster response plan for renal disease patients

CMS yesterday announced a plan that seeks to ensure appropriate care for end-stage renal disease (ESRD) patients during disasters.

### HCA: California lawsuit seeks to block leveraged buyout deal

A California attorney has filed a motion with the Davidson (Tenn.) County Chancery Court to block the \$21.3 billion purchase of Nashville-based HCA by a group of private equity firms, claiming that HCA’s directors are “violating their duty to shareholders” by not pursuing a higher per-share price for the company.

### Microsoft to purchase health care software, collaborate with MedStar

Microsoft this week announced plans to purchase the health care software Azyxxi, which was developed by physicians at the Washington, D.C.-based Washington Hospital Center (WHC) to collect patient information from various sources and make it instantly available to clinicians.

### GSK reports avian flu vaccine is highly effective, even at low doses

GlaxoSmithKline yesterday announced that it has developed an avian flu vaccine that the company says is more effective than any previous version—even at low doses—and that it could be mass produced as early as 2007.

### Pfizer says it will market heart drug as standalone and combo pills

Aiming to allay widespread criticism that Pfizer was “putting profits ahead of patients’ health” by selling its new heart drug torcetrapib only in combination with Lipitor, the drug manufacturer this week announced plans to apply for approval to sell torcetrapib as a standalone medication.

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

### Et cetera: Clinics using ‘laser acupuncture’ to curb cigarette cravings

Patients are flocking to new smoking-cessation clinics that offer treatment with a painless, low-intensity laser applied to various pressure points, although experts contend that there is no scientific evidence the therapy works.

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

or see attachment “60559\_14\_1\_07-27-2006\_0.pdf”

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