HLS 15RS-1391 ORIGINAL

2015 Regular Session

1

HOUSE CONCURRENT RESOLUTION NO. 129

BY REPRESENTATIVE BARROW

HEALTH CARE: Creates a task force to study and make recommendations concerning health services delivery and financing in the Baton Rouge region

A CONCURRENT RESOLUTION

2	To create a task force to study health services delivery and financing in the Baton Rouge
3	region, and to require the task force to report findings and recommendations to the
4	Capital Region Legislative Delegation and the legislative committees on health and
5	welfare.
6	WHEREAS, profound changes in healthcare delivery and financing in Baton Rouge
7	have occurred in the past several years, dramatically impacting access to care in the city and
8	surrounding region; and
9	WHEREAS, these changes include the closure in 2013 of the city's state-owned
10	public hospital, the Earl K. Long Medical Center, and privatization of the services formerly
11	delivered there; the closure of the city's mental health emergency room extension, which was
12	part of the Earl K. Long Medical Center and kept patients with mental illness from
13	congesting hospital emergency departments and jails; and the closure of the emergency
14	department of the Baton Rouge General Medical Center's Mid-City hospital due to its
15	inability to cover the cost of treating the overwhelming number of uninsured patients that
16	it began to see in the aftermath of the closure of Earl K. Long; and
17	WHEREAS, as evidenced by final passage of House Bill No. 1493 of the 2010
18	Regular Session requiring reports to the legislature relative to privatization of services of the
19	Earl K. Long Medical Center, which was the first of nine hospitals in the state's ten-hospital
20	system to be privatized, and by extensive debate concerning the state health system in every

1	session since 2010, the legislature has expressed deep concern about the fiscal and public
2	health consequences of hospital privatization since the outset of the privatization efforts; and
3	WHEREAS, the executive budget for the state proposed for state fiscal year 2015-
4	2016 lacked sufficient funds for Our Lady of the Lake Regional Medical Center, the private
5	partner now responsible for the indigent care and physician training services that had
6	formerly been delivered at Earl K. Long, to continue delivering the services which it is
7	obligated to provide pursuant to its cooperative endeavor agreement with the state; and
8	WHEREAS, after the 2015-2016 executive budget was issued, officials with Our
9	Lady of the Lake determined that the seven million four hundred thousand dollar shortfall
10	in public funding it faced originally for provision of publicly-required services had doubled
11	to approximately fifteen million dollars due to increased emergency department utilization
12	resulting from the closure of the Baton Rouge General Mid-City emergency department; and
13	WHEREAS, supply of and demand for medical care in the capital region have
14	become increasingly misaligned in recent years; and
15	WHEREAS, these circumstances are of serious concern to policymakers at the city
16	and state level.
17	THEREFORE, BE IT RESOLVED that the Legislature of Louisiana does hereby
18	create a task force to study and make recommendations concerning health services delivery
19	and financing in the Baton Rouge region.
20	BE IT FURTHER RESOLVED that the task force shall be composed of the
21	following members:
22	(1) The mayor-president of East Baton Rouge Parish or his designee.
23	(2) The chief executive officer of the Baton Rouge Area Foundation or his designee.
24	(3) Two members representing the Capital Region Legislative Delegation.
25	(4) The chief executive officer of Our Lady of the Lake Regional Medical Center
26	or his designee.
27	(5) The chief executive officer of the Baton Rouge General Health System or his
28	designee.
29	(6) The chief executive officer of Lane Regional Medical Center or his designee.
30	(7) The chief executive officer of Ochsner Health System or his designee.

1	(8) The coroner of East Baton Rouge Parish or his designee.
2	(9) The administrator of East Baton Rouge Parish Emergency Medical Services or
3	his designee.
4	(10) The chief executive officer of the Baton Rouge Area Chamber or his designee.
5	(11) The president of the Louisiana AFL-CIO or his designee.
6	(12) The lead organizer of Together Baton Rouge or his designee.
7	(13) The president of the Capital Area Medical Society or his designee.
8	(14) The president of the Campaign for Healthcare for Everyone - Louisiana or his
9	designee.
0	(15) The president of the Louisiana Center for Health Equity or his designee.
1	(16) The secretary of the Department of Health and Hospitals or his designee.
12	BE IT FURTHER RESOLVED that the task force shall examine issues related to
13	health services delivery and financing in the Baton Rouge region including, without
14	limitation, the following:
15	(1) Barriers to access to healthcare faced by low- to moderate-income persons.
16	(2) Impacts of cuts to federal disproportionate share hospital funding provided
17	through the Patient Protection and Affordable Care Act that finance expansion of Medicaid
18	programs of states which elect to participate in Medicaid expansion.
19	(3) Effects on public health of the closure of the state-operated public hospital in
20	Baton Rouge and privatization of the services formerly delivered there.
21	(4) Impacts on private hospitals which do not operate under a cooperative endeavor
22	agreement with the state of providing uncompensated care.
23	(5) Policies which could expand the capacity of public and private urgent care clinics
24	to meet the healthcare needs of medically underserved populations.
25	BE IT FURTHER RESOLVED that the president of the Louisiana Center for Health
26	Equity shall take such actions as are necessary to ensure that the task force convenes on or
27	before September 1, 2015.
28	BE IT FURTHER RESOLVED that at its initial meeting, the task force members
29	shall elect a chairperson, and shall adopt rules of procedure and any other policies as may
30	be necessary to facilitate the work of the task force.

1 BE IT FURTHER RESOLVED that the task force shall submit a written report of 2 findings and recommendations concerning health services delivery and financing in the 3 Baton Rouge region to the members of the Capital Region Legislative Delegation, the House 4 Committee on Health and Welfare, and the Senate Committee on Health and Welfare no 5 later than thirty days prior to the convening of the 2016 Regular Session of the Legislature 6 of Louisiana. 7 BE IT FURTHER RESOLVED that a copy of this Resolution be transmitted to the 8 mayor-president of East Baton Rouge Parish, the chief executive officer of the Baton Rouge 9 Area Foundation, the chief executive officer of Our Lady of the Lake Regional Medical 10 Center, the chief executive officer of the Baton Rouge General Health System, the chief 11 executive officer of Lane Regional Medical Center, the chief executive officer of Ochsner 12 Health System, the coroner of East Baton Rouge Parish, the administrator of East Baton 13 Rouge Parish Emergency Medical Services, the chief executive officer of the Baton Rouge 14 Area Chamber, the president of the Louisiana AFL-CIO, the lead organizer of Together 15 Baton Rouge, the president of the Capital Area Medical Society, the president of the 16 Campaign for Healthcare for Everyone - Louisiana, the president of the Louisiana Center for 17 Health Equity, and the secretary of the Department of Health and Hospitals.

## DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

HCR 129 Original

2015 Regular Session

Barrow

Creates a 17-member task force to study and make recommendations concerning health services delivery and financing in the Baton Rouge region.

Requires the task force to submit a written report of findings and recommendations to the members of the Capital Region Legislative Delegation and the legislative committees on health and welfare no later than 30 days prior to the convening of the 2016 RS.