
DIGEST

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Barrow

HCR No. 139

Directs DOA, DHH, and LSU to develop and submit a report to the legislative health and welfare committees and to the Joint Legislative Committee on the Budget no later than 30 days prior to the convening of the 2014 R.S., and annually thereafter, concerning the operation of state hospitals by private providers which includes, at minimum, the following information for each state hospital operated by a private provider through a cooperative endeavor agreement with the state:

- (1) A detailed account of the net costs or savings associated with the privatization of hospital operations.
- (2) A recapitulation of the measures reported to the Centers for Medicare and Medicaid Services through the Hospital Compare program.
- (3) A comparison of employment information for the hospital prior to and subsequent to privatization, including the number of employees terminated and the number subsequently rehired; the average compensation, including wages, benefits, and retirement contributions, for hospital employees prior to and subsequent to privatization; a comparison of average compensation of employees terminated and subsequently rehired pursuant to privatization; and a comparison of the number of credentialed personnel employed at the hospital by professional category, including but not limited to physicians, allied health professionals, registered nurses, and licensed practical nurses, prior to and subsequent to privatization.
- (4) A comparison of actual costs to the state of delivering hospital services through the private provider with the best estimate of costs to the state of delivering the same level of services directly, including but not limited to per diem costs for inpatient care.
- (5) Measures of accessibility of health care services at the hospital by medically needy patients prior to and subsequent to privatization, along with recommendations for mitigating or eliminating any barriers to health care access which medically needy persons experience.
- (6) Evaluation of overall health outcomes and quality of care for medically needy patients in the catchment area of the hospital prior to and subsequent to privatization, along with recommendations for policy changes to improve such outcomes and quality of care.

- (7) If obstetrics, gynecology, contraception, or other health services for women are not offered by the private provider operating a state hospital, then the report shall address means by which the state provides for access to health services for women in the catchment area of the hospital.