

In support of HB599

Health - Licensure of Hospitals - Ownership Requirements

What happens when for-profits take over hospitals?

A detailed study, published in the Journal of the American Medical Association documents this clearly: *“Private equity acquisition was associated with increased hospital-acquired adverse events, including falls and central line–associated bloodstream infections, along with a larger but less statistically precise increase in surgical site infections.”*

Full article at:

<https://jamanetwork.com/journals/jama/article-abstract/2813379>

This should not be surprising. Private equities are in healthcare to make money, and money is made by cutting expenses and increasing revenue. From the private equity perspective, doctors, nurses, and staff could just as easily be making shoes as taking care of patients.

While these entities are making billions, it is patients, families, and clinical staff who are suffering, and taxpayers, employers, and individuals are the ones footing the bill. As a result, the US spends more on healthcare per-capita than any other country, but we rank 67th in the international Statista Health Index Score.

To put it bluntly: there are too many pigs feasting at the healthcare trough at our collective expense.

This was described by Dr. Donald Berwick in his JAMA article:

“Salve Lucrum: The Existential Threat of Greed in US Health Care.” He wrote, *“The grip of financial self-interest in US healthcare is becoming a stranglehold, with dangerous and pervasive consequences. No sector of US health care is immune from the immoderate pursuit of profit...The cycle is vicious: unchecked greed concentrates wealth, wealth concentrates political power, and political power blocks constraints on greed.”* Full article

at: https://jamanetwork.com/journals/jama/fullarticle/2801097?guestAccessKey=ffab3c72-bbd7-42d9-98cc-9799f47cc133&utm_source=silve

For those of us who are on the front lines, this is nothing new. Even worse is that so-called “non-profit” hospitals are doing the same things to sustain excessive executive salaries.

The above does not address the myriads of problems affecting America's health and healthcare – our poor ranking in health measures compared to other developed nations from falling life expectancy to rising infant and maternal mortality, profiteering pharmaceutical companies, and unaffordable medications. Medical debt continues to be the most common cause of personal bankruptcies. Don't let anyone tell you that we don't have the money to do better. We do. The money is there. It's just not going to where it's needed: to those who perform the front-line work of patient care, for preventive services and public health, and to create an effective affordable system that focuses on care rather than profit.

Submitted by Dan Morhaim, M.D.

(The views above are mine alone and not representative of any entity or organization with which I am affiliated.)