



EXECUTIVE FORUM

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PRESIDENT'S MESSAGE

WHA and the Value of Human Contact

By Diane Ung

It is an honor and privilege to serve as President of Women in Health Administration for 2008. WHA remains devoted to the professional growth and health care knowledge of its members, and the advancement of women in the health administration field. Your Board is working as hard as ever to bring you a variety of programs and opportunities to further our mission.

As our nation enters into this presidential election year, health care reform has risen once again towards the top of the agenda. A recent survey of both insured and uninsured individuals found that 95 percent of respondents are concerned about their ability to afford health insurance in the coming years, and believe the nation's health care system must be completely rebuilt or fundamentally changed. In some instances, this concern has translated into activity at the state level, and substantive proposals by the leading presidential candidates.

While this enthusiasm portends opportunity for real reform, it is dampened by the current state of the economy. California, like other states, faces seemingly insurmountable budget deficits, a factor that contributed in large part to the demise of the state's latest health reform attempt. On a national level, recession is either looming or is already here. And, there are indications that the health care industry may not be as "recession proof" as it was once thought to be.

So, given all the potential opportunities and challenges, what is our role? As either current or future health care industry leaders, at a minimum we need to stay informed, and more importantly, contribute to the development and dissemination of expertise.

As a professional organization, WHA strives to keep its members up to date on the issues, to facilitate discussion and encourage advocacy. While the electronics age allows us to communicate with many from afar, and find an infinite number of articles on any topic with a few simple key words, we believe there is still value in human contact! A WHA event, be it an evening speaker program, fireside chat or social outing, is organized and presented for you with this in mind. So far this year, we have had well-attended events, including the presentation by Dr. Ben Chu, the president of Kaiser Foundation Health Plan and Kaiser Foundation Hospitals for the Southern California Region (see event writeup in this issue). I am sure those

attendance will agree that both the speaker and breadth of industry representation at the program were stimulating.

A year ago, the WHA Board embarked on the development of a strategic plan on how best to provide value for our members in the core areas of educational forums, networking, information, and advocacy. You may recall several months ago receiving the WHA member survey, which was designed to elicit your input on your expectations and how the organization can better serve you. We are in the process of evaluating your comments and suggestions, and putting them into practice. Among other actions, the Board decided to assemble a sub-group charged with identifying and developing activities and benefits that would add value to your WHA membership. If you are interested in being a part of this sub-group, please contact Michelle Tuimauluga at mtui@ca.rr.com.

I look forward to seeing you at one of our upcoming events. And I encourage you to invite along a colleague, a mentee, or mentor, to get to know your fellow WHA members and maximize the value of human contact. ✦

SAVE THE DATE

WHA FIRESIDE CHAT

Contract Negotiations Skills Workshop

featuring

Leeba Lessin
President, CareMore

APRIL 26, 2008
PARKER'S LIGHTHOUSE
LONG BEACH

Watch your email inbox for more information about this exciting event!

JANUARY EVENT

An Evening with Kaiser Permanente's Ben Chu

By Dayna Nicholson

At our January event, approximately 50 WHA members and guests gathered to hear Ben Chu, M.D., President of the Southern California Region of Kaiser Permanente, discuss his thoughts regarding the future of health care reform in the United States. Following a smorgasbord of tasty appetizers and wines, served in the beautifully appointed conference center at the Downtown L.A. office of Foley & Lardner, the participants settled in for Dr. Chu's remarks.

When thinking about health care reform, the first thing that typically comes to mind is the high cost of health insurance and/or care, and the common consensus is that the mechanism by which Americans pay for care is broken. Dr. Chu began his remarks by describing efforts to "fix" the cost of healthcare on both the state and federal levels. However, since the flow of funds to purchase care or coverage is only one facet of the health care system, Dr. Chu did not limit his remarks to payment reform; rather he offered ideas on how to incentivize better-quality care and reform the actual delivery of care.

Regarding payment reform in California, Dr. Chu stated that Governor Arnold Schwarzenegger's proposal, which did not pass in the CA legislature, is very similar to Mitt Romney's plan that was recently adopted in Massachusetts. The Massachusetts plan includes the following requirements: (1) individuals must maintain a minimum level of health insurance (similar to the concept of requiring auto owners to carry liability insurance), (2) business owners must either provide a certain level of health insurance coverage for their employees or pay a "Fair Share Fee" into a state-run program, and (3) the state government must provide subsidies and/or health insurance coverage for certain low income children and adults. Under this plan, the goal is to ensure that health insurance coverage in Massachusetts is near universal.

Governor Schwarzenegger envisioned a similar outcome for California. However, when it came time to institute his plan in California, his efforts failed. According to Dr. Chu, it was difficult to put together a coalition that would support the plan, even though the Governor's plan was touted as providing near universal health insurance coverage. As an example, he said it is unlikely that insurance companies will support the concept of guaranteed coverage (even with an individual mandate that people purchase health insurance), because the expense in providing coverage to all, without regard for age, experience or health status, would be incredibly high.

Dr. Chu also indicated that the state's economy is not currently able to handle the Governor's proposal. In the final analysis, he believes that state efforts for reform (in California and elsewhere) will not be entirely successful, because hurdles created by politics and the economy will be too difficult to overcome.



WHA President Diane Ung introducing the evening's speaker Dr. Ben Chu of Kaiser Permanente.

Since health care payment reform is unlikely at the state level, it will have to take place on the federal level. Dr. Chu briefly described the platforms of the presidential candidates: John McCain has proposed a free market plan, in which people will purchase insurance and will thus be healthy; Hillary Clinton would impose an individual mandate and would use the current system to meet the increased demand; and Barack Obama would also expand the current system to increase access, although he would not mandate individual coverage.

According to Dr. Chu, whether reform on the federal level will occur is dependent on a number of external factors, including the importance placed on various other issues by the American people. He cited examples of polls that showed health care reform slipping from the second biggest concern to Americans (behind the war in Iraq), to third, with concerns about the economy moving past health care in the rankings. Such a shift in concerns is understandable because the majority of Americans have some health insurance coverage, and are more likely to be impacted by the economy than by health care reform.

Although the current prospects for payment reform are uncertain, Dr. Chu believes there are other ways to address the issues of gaps in access, the uninsured, etc., such as changing the way care is provided and the manner in which it is delivered.

He pointed out that the health care system is currently oriented toward acute episodic cases, rather than prevention and wellness, even though 75% of the care provided actually relates to chronic and/or preventable diseases. For example, hospitals are paid for admitting a patient but receive nothing for provid-

(article continued on page 3)

JANUARY EVENT (CONT'D)**... Ben Chu**

ing care designed to keep them from needing to return. In the current system, preventive medicine – taking steps to keep people healthy – is good for health, but is simply not profitable.

Dr. Chu described various strategies for incentivizing the provision of preventive care, in order to decrease the need for episodic care. Managed care is one such strategy, which has been in use for quite some time. However, while capitation theoretically provides better incentives for keeping people healthy, it only works well if the capitated physician group is large enough to harness the requisite economies of scale.

Another strategy is to alter the amount of reimbursement based on the level or quality of the care that is provided, such as bundling payments for all the care necessary for a particular condition; not reimbursing providers for care related to hospital acquired infections, unexpected complication, unnecessary tests, etc.; and paying decreased rates for performing procedures and increased rates for providing cognitive services, such as consultations and wellness programs.

Dr. Chu also believes there must be a fundamental change in the way care is delivered. He said that increased transparency in the level and quality of the care provided must be obtained via mechanisms such as mandatory reporting requirements and better outcome measures. The most important factor in increasing transparency (and, thus, quality of care) is enhanced information technology. Enhanced information technology will drive changes in care delivery because it will tie together the often sporadic care from multiple providers that most Americans receive.

For example, physicians generally only focus on a patient during an office visit. In addition, patients only go to doctor when

they are sick, and care is typically not coordinated between multiple physicians. Finally, when patients visit a specialist, the focus is solely on the specific problem with little attention paid to the patient's entire health. A Rand study states that only about 58% of patients get all the care they need and the other 42% have gaps in the care they receive. The solution, then, is to create a care delivery system that follows the whole person and focuses on preventive care. But this cannot be accomplished without adequate information technology, which can amalgamate information to track the care received by any one patient and identify gaps in that patient's care.

In the end, Dr. Chu believes the solution to America's health care woes is not simply about covering the uninsured. Rather, the payment mechanism, care delivery model, and information technology systems must be aligned, and they all must be re-oriented toward maximizing efficiency and effectiveness.

WHA thanks Dr. Chu for sharing his thought-provoking insights with our members and guests. ☒

Want to increase your networking connections, learn the latest events and news, and chat with fellow WHA members?

Join the WHA Group on [Facebook.com](https://www.facebook.com/WHAgroup) today!

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WHA would love to hear from you! Please let us know of any important news in your lives, ideas for events and activities, book reviews, articles, etc. Better yet, get involved and lend your talent and ideas by joining one of the WHA committees!



Dr. Chu speaking to WHA members at the Foley & Lardner conference room.

MEMBER SPOTLIGHT

Ada Cheng, WHA Events Chair

By Nina Niu-Ok and Ada Cheng

This issue's Member Spotlight features Ada Cheng, the Events Chair on the 2008 WHA Board. Ada has been instrumental in continuing WHA's tradition of presenting quality events to its membership. She is a recent graduate of UCLA's Master of Public Health, Health Services program, and is currently an Administrative Fellow, at the VA Desert Pacific Healthcare Network.

When asked why she embarked on a career in healthcare, Ada responds, "In undergrad, I originally started as a pre-med student, but I soon discovered through many extracurricular activities that I also enjoyed management, policy, and politics. I found public health, and specifically, health services management to be a great mix of my interests." So far, Ada's healthcare experiences have been with the VA. "I'm lucky because my previous and current bosses have been great mentors and provided me with amazing opportunities to develop my leadership and management skills. Serving America's heroes is one of the most rewarding jobs and the Veterans inspire me everyday. I can truly say I'm proud of what I do."

Regarding her membership in WHA, Ada began her involvement with WHA as a graduate student. "I've been a member of WHA since my first year in grad school, and I first got involved in WHA after I was invited by my school to attend the 25th Anniversary Gala for free. I met a lot of the WHA members there for the first time and really liked the atmosphere of women leaders supporting each other. Since then, I have served on the events committee and never left!"

She most appreciates the networking aspect of the organization. "One of my favorite parts of being a member of WHA is that the networking opportunities seem so much less stressful when it's a room full of ladies like yourself, and the organization as a whole has a



Ada Cheng back home in her native Hawaii, visiting Sea Life Park.

great mix of all types of healthcare experiences to learn from."

In addition to being a member of WHA, Ada is also a member of American College of Healthcare Executives and the Healthcare Executives of Southern California.

Ada lives in Los Angeles with her fiancé, Chris, and two dogs. In her spare time, Ada enjoys acrylic painting, cooking/trying new recipes, and watching Oscar quality movies. The majority of her free time, however, is spent playing with her dogs Arby and Otto. "Arby's a cool corgi-retriever mix and Otto is a tiny, cute Norwich terrier. I adopted both of them from shelters and they are so much fun. They totally keep me relaxed and happy!" ❖

Get to Know Your Fellow WHA Members at a WHA Social Outing!

Downtown Flower Mart & Dim Sum in Chinatown

Saturday, May 31, 2008 from 8 – 11:30am

More info to come in your Inbox, or contact mtui@ca.rr.com

USEFUL NEWS


Californians Can Now Review Hospitals' Charity Care Policies

By Dayna Nicholson

The state of California recently launched a website on which uninsured and underinsured consumers can review the charity care policies established by their local hospitals. According to a press release issued by California's Office of Statewide Health Planning and Development ("OSHPD"), the website will offer consumers "the ability to shop and compare every hospital's charity care or discount payment policies."

Under Assembly Bill 774, which legislation was enacted in 2006 and became effective on January 1, 2007, California hospitals are required to establish charity care and discount payment programs for individuals whose income is at or below 350% of the Federal Poverty level, and to

notify their patients of such policies through various mechanisms. Hospitals are further required to submit to OSHPD their policies regarding charity care, and the application for obtaining free or discounted care by January 1, 2008, and at least biannually thereafter.

The new website makes available to consumers the policies, eligibility criteria, and applications submitted by the hospitals, and can handle searches based on hospital name, street address, city name or zip code. The website can be accessed at <http://syfphr.oshpd.ca.gov/> 

CALLING ALL MEMBERS! TIME TO GET INVOLVED!

Ever wonder how you can be more involved with WHA? All of our fantastic events and activities are made possible by members who volunteer their time, energy, and expertise, and there are many different ways that you can help.

If you have experience with data management, web design, and information technology, consider joining the recently-formed **IT Committee**. This new committee has recently been given the challenge of reviewing our current IT capabilities, and investigating the ways in which we might enhance our collection, storage, and use of membership data, as well as how we might enhance our presence on the web and provide members additional web-based services.

To join the committee, please send an email indicating your interest to whasocal@gmail.com, or contact Dayna Nicholson (dnicholson@fulbright.com) for more information.

Get in the know – JOIN the EVENTS Planning COMMITTEE!

Help us plan upcoming, exciting social and educational activities that create opportunities for networking, personal growth, and raise awareness of current healthcare issues. Contact WHA Events Chair Ada Cheng (mizzada@gmail.com).

Upcoming Event Topics: Pay for Performance, Contracting Skills, and Dim Sum!

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