



EXECUTIVE FORUM

April-June 2006 • Volume 9, No. 2

Feature Article

AHIP Minority Management Development Program

An Interview with Karen Valentine, AHIP MMDP Fellow

By Sharon Vickers

Graduation ceremonies and celebrations may be in store for some of our WHA members this June, but it is doubtful that any of us will have an experience like WHA Board member Karen Valentine. In early June Karen will receive her Masters in Health Administration from the California State University, Northridge. A few days later she will then fly to San Diego to receive fellowship experience from America's Health Insurance Plans (AHIP).

For the past year, Karen has been participating in AHIP's Minority Management Development Program (MMD). This program pairs AHIP's health insurance plans, AHIP staff and health care industry experts both within and outside of the organization to help prepare its participants, called "Fellows," for increasingly responsible leadership roles in the industry. Health Insurance plans, such as WellPoint, Karen's employer, recommend potential candidates to AHIP. Upon acceptance Fellows begin an in-depth year-long program of study and project work.

Each Fellow has both an External Mentor and an Internal Mentor. The Internal Mentor serves as primary advisor, and helps the Fellow develop a Learning Plan. Karen chose WellPoint's Vice-President of Human Resources, Lisa Moriyama, for this role. The Internal Mentor is responsible for supervising the Fellow's progress, providing direction, and acting as a 'cheerleader' to the Fellow. Karen's Internal Mentor seems to excel at this. "I've learned so much from my Internal Mentor. She is such a role model to me. I feel very fortunate to have Lisa as a mentor. She has added value to my personal and profession life since meeting with her. I've always heard wonderful things about her – they were all true. Talking with Lisa is like talking to a long time friend – guiding you in the right direction and holding nothing back. I've learned you don't have to be shrewd to succeed. It's about self-development and motivation," Karen says.

In addition to having regular contact with their mentors,

MMD Fellows must complete a project, a Learning Plan; participate in a supplemental educational component, pass the associated exam, prepare and submit monthly journal entries to AHIP, and participate in three of AHIP's conferences, including the 2006 National Policy Forum.

Thus far, Karen has relished the MMD Program but admits that it is a tremendous amount of work. This is in addition to her two other jobs: MBA student and full-time Business Development Specialist in Business Development Division at WellPoint. Although WellPoint pays for the conferences and provides the Internal Mentor, Karen is

(story continued on page 2)

SAVE THE DATE

WHA MAY EVENT

"Physician/Hospital Relations: History and Prognosis"

featuring

Ellen M. Meier, RN, MBA
Vice President for Physician Strategy
Sutter Health

THURSDAY, MAY 18, 2006

5:30PM

MAGGIANO'S AT THE GROVE, LOS ANGELES

*Watch for email announcement or contact mtui@comcast.net
for more details*

FEATURE ARTICLE (CONT'D)**....Karen Valentine, AHIP MMDP Fellow**

on her own in completing the assignments. Most of these must be done on her own time. Karen also co-chairs WHA's Events Committee.

In case you are wondering what Karen hopes to accomplish with the MMD Program and the MHA work, what her goals may be for the future, now is simply not the time to ask. Come back in the summer or fall and ask then, as Karen is "just too busy to even think about that now."

What does she think about the mentoring experience? Karen says, "I think every single person needs a mentor to help accelerate their career, or simply to give guidance. You wonder how the person gets where they got to without one. It's not about how you got where you are today – it's about bringing others along with you. Mentors are real people, just like you and me." Karen especially relishes the human side and admits that some of the greatest benefits she has derived from her mentors have involved personal lessons – lessons on life. This is Karen, "the mentee," speaking, but Karen also acts, and has acted, as a mentor to others. It may not be as formal as the AHIP MMD program; nevertheless, it's reaching out to people who are looking for your leadership expertise.

What's in it for the mentors? Karen says that mentoring is "a two-way street." Mentors benefit by getting "the satisfaction of helping people. Some people are lost and do not know what to do." Mentors can help them find the way. It



(photo courtesy of Ventura County Star)

Karen Valentine (right) and internal mentor Lisa Moriyama, VP of Human Resources at WellPoint, Thousand Oaks.

can be as simple as reviewing a person's resume or helping them prepare for a job interview.

Are you still trying to decide whether to participate in WHA's Mentor/Mentee Program? Take it from WHA's own, Karen Valentine, you definitely should. Contact Jan Frates for more information: jefrates@adelphia.net or 949-515-0181. It's not too late, mentors! ❖

WHA Jobline Success Story!

"I would like to take a few moments to commend WHA on their incredible job hotline! I found this to be an invaluable resource for seeking employment. As a result, I was recently hired by the HealthConnect division at Kaiser Permanente as a Project Manager I. I never would have known about this wonderful opportunity, if it had not been listed in the hotline. My heartfelt thanks goes out to all those responsible."

-- Mary Sue Pierce, WHA Member

Executive Forum is published four times a year by Women In Health Administration of Southern California. We welcome your comments, suggestions and article submissions. Please contact:

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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!

25 YEARS OF WHA

Then and Now: A Look Back and Forward at the Healthcare Industry

By Jan Frates

1981, when WHA was officially launched, was a year that portended many changes in healthcare:

- Ronald Reagan was elected President on a platform of reducing government spending and involvement, and to promote competition in healthcare. Among his early proposals were block grants for Medicaid and a federal cap on both Medicaid and Medicare expenditures. Congress agreed to provide more state flexibility in Medicaid program administration and to reduce federal matching payments. This agreement laid the groundwork for future Medicaid reforms such as new hospital payment systems (such as California's selective contracting system), waiver of beneficiaries' freedom of provider choice (a longstanding barrier to managed care contracting) and a number of community long term care initiatives (to offer alternatives to nursing home care). While Congress balked at the proposed Medicare spending cuts, the debate over rising hospital expenditures (46% of personal health spending in 1980) led to the subsequent adoption of the prospective payment system for hospital payments based on Diagnosis Related Groups (DRGs). One of the most far reaching reforms for the hospital industry, its effectiveness derailed the efforts of many states to enact rate-setting programs.
- Health policy analysts expressed alarm that health care spending as a percentage of the Gross National Product was 9.4% in 1980, higher than ever before. The American Medical Association stated in its November 1981 newsletter, "Physicians and the general public agree that cost is the main problem facing health care today, according to new studies commissioned by the AMA." Reformers debated three principal approaches: federal price regulation, increased cost sharing, and competition among alternative delivery systems. The third approach, for whom the leading intellectual architect was Stanford health economist Alan Enthoven, generated the expansion of managed care in the next two decades.
- Approximately 12 percent of the U.S. population was uninsured.
- HMO growth was noted as an emerging phenomenon; the annual Interstudy Census listed 243 plans serving approximately 10.3 million members.

Today, 25 years later, we face some of the same problems and other new challenges:

- President George Bush is emphasizing individual consumerism, expanded tax incentives and more flexibility for interstate health insurance marketing to curb rising

terstate health insurance marketing to curb rising health care costs. Business groups are seeking ways to limit their future healthcare spending while still maintaining health benefits, while labor and consumer advocates protest further efforts to shift costs to workers and individuals.

- Health care costs are now 16% of Gross Domestic Product; the medical price increase of 7.9% in 2004 was almost triple times the overall national inflation rate of 2.7%.
- Approximately 15 percent of the population is uninsured, about 45 million people. Just 60% of employers offered health benefits in 2004, down from 69% in 2000.
- In 2003 (latest data available) 454 HMOs enrolled 72 million members nationwide. However, Berkeley health economist Jamie Robinson in 2001 was the first of several healthcare industry pundits to proclaim the end of managed care and the emergence of consumer-driven health care as the 21st century's emerging healthcare model. Robinson's latest publication in *Health Affairs* proposes an era of "managed consumerism." While commercial HMO membership started to decline in 2002, states continue to move more Medicaid beneficiaries into managed care plans.
- Medicare's new Part D outpatient drug benefit marks the biggest change (some say the biggest free-for-all) in the history of this program. With between 11 and 20 organizations offering Rx drug plans in 34 regions, seniors throughout the nation have a wide choice of prescription drug plans—too many choices for some, as cries of confusion abound.
- Industry consolidation continues at a rapid pace, with UnitedHealth Group's recent purchase of PacifiCare and WellPoint's purchase of Anthem last year. Each of these giants also purchased a consumer-driven health plan last year (United bought Definity Health and WellPoint bought Lumenos), as did CIGNA (ChoiceLinx).
- On the IT front, everyone seems to agree that electronic medical records are an important tool for reducing medical errors and administrative costs. Larger organizations have pushed forward, but most physician groups have yet to go digital. The federal government, payers and hospitals are all offering various incentives to encourage more doctors to computerize their medical practices.
- Use of IT is a key element in the growing physician/medical group pay-for-performance (P4P) movement pioneered by California's Integrated Healthcare Association. Now that some have accumulated several years worth of data, 2006 will be a critical year for measuring the return on investment in these programs.

What do *you* see as the health care trends and challenges of the future? WHA welcomes your ideas for articles and programs! ✕

MEMBER SPOTLIGHT**Cheryl Cross, New WHA Member***By Jan Frates*

Cheryl Cross is an executive recruiter who conducts searches for Fortune 1000 financial institutions and health-care organizations within the U.S. and Europe. She considers herself a “connector of people” and most enjoys the opportunity her work affords her to learn about an organization’s human capital needs and help find the best people to meet those needs.

In addition to the standard “headhunter” contingency and retained search engagements where fees are paid as a percentage (usually 15-30%) of the candidate’s starting annual salary, as a solo practitioner Cheryl also offers her clients some other innovative and cost-effective recruitment services. Recruiting Process Outsourcing (RPO) involves assessing an organization’s needs and offering specific services on an hourly or fixed fee contract basis—an especially attractive option for nonprofit organizations. Under this type of arrangement, she is currently providing preliminary sourcing services-identifying organizations and individuals as candidate referral sources- for a large public hospital system.

Cheryl began her career as a Competitive Intelligence Professional (IP) within the financial services and capital markets Industries. Working with such industry giants as Solomon Smith Barney in the US and Chase and Wertheim in the UK, she assisted in the development of proprietary financial software and the creation of a competitive business database. She was formerly a Director of Marketing and

Publicity for an Atlantic Records division in both Los Angeles and New York and an award-winning broadcaster in the Radio Industry. Her work as a technical writer and project manager led her into recruiting, and as she became more involved in recruiting she also became more interested in healthcare. That led her to pursue a Master’s degree in Public Health at UCLA, and to become a certified educator for Planned Parenthood and the National Alliance for the Mentally Ill.

The recruiting talents of WHA’s immediate past president and fellow UCLA alum Krisianna Lee led Cheryl to join WHA: “Krisianna was so enthusiastic about the organization, so forthcoming and willing to network. I was looking for a way to expand my recruiting business in the healthcare industry through a smaller organization where the emphasis was more on personal relationships and networking, as opposed to the big national organizations.” As a new WHA member, Cheryl has volunteered to serve on the membership committee and also offered some ideas on how to improve the WHA job line and attract more interest from executive recruiters.

Cheryl Cross is an outspoken advocate on the topic of women’s international health issues, namely HIV/AIDS, STDs and most recently, heart health. She is currently directing a health awareness campaign with a medical corporation in Los Angeles, the Center for Cholesterol Management (www.lipidcenter.com) about the importance of advanced cholesterol testing (LDL-P “particle testing”) to prepare for National Cholesterol Awareness Month in September. ☒

2006 WHA Scholarship Awarded to UCLA Student Stephanie Heintz*By Judy Vacarro*

The WHA Scholarship Committee is pleased to announce the 2006 WHA Scholarship to Stephanie Heintz. She was among an exceptional field of applicants.

Stephanie Heintz will graduate from UCLA's Executive MPH for Health Professionals Program in June 2006. Prior to her current studies, Stephanie obtained a MS degree in human resources from Chapman University in 2001 and a BS degree in agricultural biology from CSU Pomona in 1996. She works full-time as a Public Information Officer for the Greater Los Angeles County Vector Control District. In that role, Stephanie manages the distribution of information regarding vector-borne diseases¹ for this government agency that services 4.8 million individuals in 35 cities.

Stephanie's first job with the District was as a Vector Control Specialist, conducting property inspections and consulting with owners on vector abatement. Stephanie's accomplishments since assuming the Public Information Officer position in 2001 include revamping the District's 11-

year-old community outreach program to make it more relevant, user-friendly and cost-effective. She also updated the Employee Injury and Illness Prevention Manuals to meet current laws, published the District's first and subsequent annual reports, developed a training video and handbook for new members of the Board of Trustees, and created the nation's first Mobile Education Unit to teach elementary school students about vector-borne diseases.

Although Stephanie's current occupation involves vector-borne diseases and public relations, a career in health administration is her passion. Upon completing her education, Stephanie's goal is to transition from her position at the District to the hospital human resources arena, acknowledging that the cross-over will likely require her to start at the entry level and work her way up. Her willingness to take this step demonstrates a level of dedication that is worthy of recognition. Stephanie's initiative and leadership skills will serve her well in her chosen field, and WHA is delighted to be able to provide her with some assistance along the way. Please join the WHA Scholarship Committee in congratulating Stephanie on her achievements and wishing her well

SPONSOR SPOTLIGHT**Bronze Sponsor: USC Executive MHA Program***Submitted by Sharon Hirose, USC Executive MHA Health Management & Policy Program Coordinator*

USC's innovative new Executive Master of Health Administration (EMHA) has been created especially for working clinical and management professionals. Launched in 2005, the executive program complements USC's highly regarded traditional MHA and provides a focused and flexible option for full-time mid- to senior-level professionals who have demonstrated capabilities, yet who will benefit from expanded skills and competencies that will enable them to advance or transition their careers.

The EMHA offers a 34-unit customized educational experience that is unique among executive health degree programs. Each participant sets the pace for completion, most often about two years. To minimize time away from work, the 24 core units are offered in a conveniently structured executive intensive format, meeting on alternating weekends from 1:00 p.m. to 9:00 p.m. on Fridays, and 9:00 a.m. to 5:00 p.m. on Saturdays. The learner-centered curriculum also provides for ten elective units. This gives experienced healthcare professionals an opportunity to gain skills or knowledge in areas that are most relevant to their career goals, ranging from physician practice management and new venture development to leadership and health policy.

Classes are taught by both senior faculty and seasoned adjunct practitioners. A team teaching approach contributes to a practical learning environment that stimulates

rapid integration of concepts with real-world experiences and develops skills that can EMHA participants can immediately apply on the job.

The opportunity to interact with healthcare's leading thinkers, policymakers and practitioners is an essential component of the EMHA program. Enriching the classroom experience are a mentoring initiative, special speakers and workshops, and numerous avenues to expand essential business relationships.

The EMHA cohort reflects the healthcare field and is diverse by design. Slightly more than half of the current class is female. Averaging 11 years of work experience, the group ranges in age from the late 20s to early 60s, and is ethnically mixed, a reflection of the program's commitment to cultural competency in healthcare leadership. EMHAs are engaged in hospitals, health plans, medical groups, health law, medicine and pharmaceuticals, among other professions.

Because EMHA applicants must have at least five years of relevant work experience to be considered for admission, GREs are not required. Applications are being accepted now for the Fall 2006 EMHA cohort. For more information visit the EMHA website at www.usc.edu/sppd/emha or contact Lois Green or Sharon Hirose at emha@usc.edu or 213.740.2984.. ☒

Correction:

The Kaiser Permanente Sponsor Spotlight in the Jan-Mar 2006 issue of Executive Forum was submitted by Brandi Bodnar from Public Affairs, Communication staff for Kaiser Permanente in Southern California, not Patricia Cordova Vellanoweth as noted.

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MEMBERS ON THE MOVE & NEW MEMBERS**New Members:****Megan Bioletto** is an Associate Consultant at Kaiser Permanente.**Susana Gallardo** is a student at Cal State Northridge.**Navneet Gill** is an MPH student at UCLA.**Mari Hoidal** is a Senior Consultant at Medical Development Specialists, Inc.**Yaldi Rahimi** is a student at Cal State Northridge and works at Functional Restoration Medical Center, Inc.**Mona Snyder** is Coordinator, Managed Care at White Memorial Medical Center.**Lydia Welton** is a Principal at McKenzie Coaching Group.**Lizzie Vinluan** is a student and works at Healthcare Partners Medical Group.**Renee Voll** is an Engagement Manager at Kaiser Permanente.**Members on the Move:****Gretchen Brickson** is Director of Technical Assistance at On Lok, Inc.**Sue Brilliant** is now a Project Director with Kaiser Permanente Health Connect.**Zan Dubin Scott** is a Marketing Manager at Centinela Freeman Regional Medical Center**Jacqueline Tran** is now Program Manager at California State University, Fullerton Auxiliary Services Corp.**Khanh Vu** is a Business Development Executive at SCAN Health Plan.