NATIONAL CENTER FOR HEALTHCARE LEADERSHIP
2015 HUMAN CAPITAL INVESTMENT CONFERENCE
& GAIL L. WARDEN LEADERSHIP AWARD DINNER
SOFITEL CHICAGO WATER TOWER | NOVEMBER 17–18, 2015

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FOLLOW THE CONVERSATION AT #HCIC2015
HUMAN CAPITAL INVESTMENT CONFERENCE EVENT COMMITTEE

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Healthcare Institute

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Carilion Clinic

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Tom Main
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GAIL L. WARDEN LEADERSHIP EXCELLENCE AWARD SELECTION COMMITTEE

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America’s Essential Hospitals

Glenn D. Steele, Jr, MD, PhD
Geisinger Health System

Thomas E. Vaughn, PhD
University of Iowa

Gail L. Warden
Henry Ford Health System

ABOUT NCHL

MISSION
To be an industry-wide catalyst to ensure that high-quality, relevant, and accountable health management leadership is available to meet the needs of 21st century healthcare.

VISION
Improve the health of the public through leadership and organizational excellence.

Follow us at
@ NCHL_Leadership

NCHLeadership

Recordings of the conference and Gail L. Warden Leadership Excellence Award Dinner will be made available shortly following the conference.
Dear Friends and Colleagues,

We are pleased to welcome you to NCHL’s 2015 Human Capital Investment Conference and Gail L. Warden Leadership Excellence Award event. We hope during the next two days you will find the opportunity to explore new thinking through our challenging panel discussions and Leadership Challenge presentations, and that you have the chance to connect with colleagues.

Our theme this year, Leading Together, Shaping the Future, will focus on collaborations that are sprouting up throughout the country as leaders throughout the health ecosystem seek true and lasting solutions to improving the health of our communities. Former Canadian Ambassador to the United Nations, Stephen Lewis, who is also the author of Race Against Time, will be our lead-off speaker as he examines the critical role of leadership in achieving real change in healthcare in the US and throughout the world. His commitment to building a healthier future has earned him numerous accolades and his talk is certain to be thought provoking.

Every conference needs a panel discussion on technology to understand what the future holds for healthcare; ours will explore technological innovations that improve patient access and engagement from the perspective of companies that are making that change happen, from the management of chronic conditions at Livongo Health to the delivery of care through retail medicine or telemedicine.

Getting to a healthier population may be done through different strategies, but the goal is the same: how, as a society, can we create equitable healthcare for everyone that results in improved and sustained health outcomes across communities? A panel on creating a new roadmap for health equity, which will include local government officials and private initiatives, will examine how to address the social determinants of health. A panel on leading community collaborations to improve health will respond to the NCHL white paper that calls to action the need to leverage collective impact to achieve sustained population health through a concept called the Chambers of Health. Included in that discussion will be the American Hospital Association’s Past President and CEO, Rich Umbdenstock, who is also this year’s recipient of the Leadership Award. His leadership style has been marked by his ability to build consensus, which proved extremely valuable during the contentious debate over the Affordable Care Act.

For those who are working to shape the future, you will be inspired by the on-the-ground work that is being done by eight leading organizations—who are being recognized as part of NCHL’s 2015 Leadership Challenge. These leaders will share their experience with successful inter-organizational leadership collaborations to improve population health. You will find their work innovative and exciting.

Collaboration, leading together, and shaping the future of healthcare have been the engines driving NCHL since our inception. Thank you for your continued support; it has helped to spur our success. We look forward to working with you in 2016.

Sincerely,

R. Timothy Rice  
National Center for Healthcare Leadership  
President & Board Chair

Andrew N. Garman, PsyD  
CEO, NCHL  
Professor, Health Systems Management  
Rush University
Congratulations to the 2015 LEADERSHIP CHALLENGE, LEADING TOGETHER

RECOGNIZED INITIATIVES

Dr. Chiledum Ahaghotu | Howard University Urban Health Initiative
Carilion Clinic
Get Healthy Live Well | Tanner Health System
Healthy Community Alliance of Delaware and Blackford Counties
Healthy Cottage Grove Community
Interprofessional Student Team Hotspotting Learning Collaborative
Texas Health Harris Methodist Hospital Azle
Kimberlydawn Wisdom, MD, MS
Tuesday, November 17, 2015

Leading Together, Shaping the Future | Day 1

11:30 AM – 12:30 PM  NCHL Board-Sponsored Lunch  Cannes Room
Sponsor Guests, Speakers, LENS & Council Members only

12:30 – 12:40 PM  Opening Remarks  Grand Ballroom
R. Timothy Rice, CEO Emeritus, Cone Health and President & Board Chair, NCHL
Andrew N. Garman, PsyD, CEO, NCHL

12:40 – 1:20 PM  Leading to Create a Lasting Legacy
The challenges facing US healthcare today are both abundant and immense. No doubt how leaders respond will create a ripple effect on the health of future generations. Drawing upon his extensive political and global health experience, Mr. Lewis will provide a long-term perspective on our work and the importance of leadership in creating a safer, healthier world.

Stephen Lewis, former Canadian Ambassador to United Nations, Co-Director of AIDS-Free World, and Author, Race Against Time

1:20 – 2:05 PM  Connectivity: Improving Access and the Consumer Experience
Technology is quickly evolving how we interact every day, and is accelerating ways we address some of healthcare’s biggest challenges. Hear from top leaders how virtual connections, technology, and innovation will improve efficiency, cost, access, and satisfaction.

Moderator: Leslie Wainwright, PhD, Chief Strategy Officer, AVIA
Gail B. Croall, MD, Chief Medical Officer, HealthSpot
Henry DePhillips, MD, Chief Medical Officer, Teladoc
Patrick Carroll, MD, Chief Medical Officer, Healthcare Clinics, Walgreens
Glen Tullman, Chairman & CEO, Livongo Health

2:05 – 2:25 PM  Break & Leadership Challenge Poster Showcase

2:25 – 3:15 PM  Creating a New Roadmap for Health Equity
Experts say that our ZIP code is more predictive of our health outcomes than our genetic code. Limited resources and the lack of coordination across sectors challenges our ability to achieve equitable care for all. Join our panel in examining ways we can address the social determinants of health, create a sustainable path to advance equitable care, and improve the health outcomes of individuals and communities. Learn from leaders who have devoted their work to forging a healthier future.

Moderator: Rolddy Leyva, Vice President, Market Diversity, Sodexo
Dora Anim, Senior Vice President, Programs & Services, The Health Collaboration
Toni Preckwinkle, President, Cook County Board
Raj C. Shah, MD, Associate Professor, Rush University & Principal Investigator, CaPriCORN
Leana Wen, MD, Commissioner, Baltimore City Health Department

3:20 – 4:20 PM  Leading Community Collaborations to Improve Health
In virtually every US community today, there are countless initiatives underway to improve population health; however, the lack of coordination, integration, and sharing of best practices threatens the ultimate sustainability of these efforts. This executive panel and audience members will respond to a white paper that calls to action the need to break down silos within our communities and build bridges across diverse stakeholders to leverage a collective impact to better the health of our communities.

Moderator: Robert G. Riney, COO, Henry Ford Health System
Marvin Avilez, COO, HICcup
Emily Friedman, Independent Health Policy and Ethics Analyst
Richard J. Umbdenstock, Past President & CEO, American Hospital Association
Jay Warden, Senior Vice President, Hammes Company
Anne F. Weiss, Director, Robert Wood Johnson Foundation

4:25 – 4:45 PM  The Year in Reflection
A year has passed since Dr. Glenn Steele, one of healthcare’s transformational leaders, received the Gail L. Warden Leadership Excellence Award. We will conclude our first day by hearing his reflections on the conference proceedings and thoughts on the field’s future leadership roles.

Interviewer: Jeffrey D. Selberg, Executive Director, Peterson Center on Healthcare
Glenn D. Steele, Jr., MD, PhD, Past President & CEO, Geisinger Health System and Chairman, xG Health Solutions
**AGENDA | HUMAN CAPITAL INVESTMENT CONFERENCE**

**WEDNESDAY, NOVEMBER 18, 2015**

**LEADING TOGETHER, SHAPING THE FUTURE | DAY 2**

<table>
<thead>
<tr>
<th>Time</th>
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<tbody>
<tr>
<td>7:30 – 8:30 AM</td>
<td>BREAKFAST &amp; LEADERSHIP CHALLENGE POSTER SHOWCASE</td>
<td>Pre-Function</td>
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<tr>
<td>7:45 – 8:30 AM</td>
<td>MORNING WORKSHOP PERFORMANCE SNAPSHOT: A RADICALLY SIMPLE MEASURE</td>
<td>Cannes Room</td>
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*Learn about Deloitte’s redesigned performance management system that was recently published in Harvard Business Review to better drive employee engagement and high performance. This workshop will discuss ways to gain simplicity, speed, agility, personalization, and constant learning in your performance management.

Erica Bank, Performance Management Leader, Deloitte*

**LEADERSHIP CHALLENGE: LEADING TOGETHER**

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<thead>
<tr>
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<tr>
<td>8:35 – 8:40 AM</td>
<td>WELCOME</td>
<td>Paris Ballroom</td>
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*R. Timothy Rice, CEO Emeritus, Cone Health and President & Board Chair, NCHL*

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<tr>
<td>8:40 – 9:10 AM</td>
<td>FIVE COMMON PITFALLS OF CO-LEADING HEALTH TRANSFORMATION AND HOW TO OVERCOME THEM</td>
<td>Paris Ballroom</td>
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*Ambitious health transformation efforts require the right leaders, working across boundaries and interests, who together are planning and acting toward a radically better future. As motivated leaders strive to move from our fragmented systems to health ecosystems that are effectively integrated and contributing to thriving communities, they face common challenges along the way. This talk will prepare you for the journey by illustrating the five most common pitfalls such collaborations face, and offer real solutions for addressing them and sustaining your momentum over time.*

Ruth Wageman, PhD, Senior Scholar & Advisor, ReThink Health and Author, Senior Leadership Teams, What It Takes to Make Them Great

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<tr>
<td>9:15 – 10:05 AM</td>
<td>LEADERSHIP CHALLENGE SESSIONS</td>
<td>Paris Ballroom</td>
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**PARIS BALLROOM**

- **HEALTHY COMMUNITY ALLIANCE: LAUNCHING COMMUNITY PARTNERSHIPS TO SERVE THE COMMUNITY**
  - John D. Disher, Community Outreach Project Manager, Indiana University Health Ball Memorial Hospital Foundation
  - Work with your partners to be advocates, community leaders, contributors, and stakeholders in your community’s health. Indiana University Health Ball Memorial Hospital is leading a community partnership that emphasizes accountability from community partners who agree to align organizational work with one or more of the three coalition goals: increase physical activity, improve nutrition, and decrease tobacco use.

- **HEALTHY COTTAGE GROVE COMMUNITY: FORGING COLLABORATIVE LEADERSHIP TO RESTORE A THRIVING COMMUNITY**
  - Verna Torain, President, Cottage Grove Neighborhood Association
  - Kathleen Colville, Director, Community Outreach, Cone Health
  - Challenge traditional leadership roles to improve the health of vulnerable communities. Healthy Cottage Grove Community is a community-centered, shared leadership platform tasked with the responsibility of rehabilitating a once healthy community and to inform decision-making about “upstream” community-level interventions.

**CHICAGO BALLROOM**

- **HOWARD UNIVERSITY URBAN HEALTH INITIATIVE: SHIFTING THE PARADIGM TO COMMUNITY-CENTERED HEALTHCARE DELIVERY**
  - Chile Ahaghotu, MD, Dr. R Frank Jones Professor & Chair of Urology, Howard University Health Sciences
  - Explore how to build a multidisciplinary collaborative to tackle health issues that disproportionately affect underserved communities. Howard University and key community players have devised a system that organizes and directs resources in a way that maximizes community health benefits. Phase one of the Urban Health Initiative addresses the need of behavioral and substance abuse support in their community with later phases will focus on diabetes management and prevention.

- **HEALTHY EDUCATION AND LIFESTYLES PROGRAM (HELP): TRANSFORMING HEALTHCARE THROUGHOUT THE COMMUNITY**
  - Bob Ellzey, President, Texas Health Harris Methodist Hospital Azle
  - Discover ways a healthcare system can maximize community health improvement while reducing costs by building strong community partnerships. The HELP initiative provides the Azle community with better chronic disease management by providing self-management education, access to clinical care, peer-support systems, and access to community-based outpatient support.
## WEDNESDAY, NOVEMBER 18, 2015

**LEADING TOGETHER, SHAPING THE FUTURE | DAY 2**

### 10:05 – 10:20 AM
**BREAK**

### 10:20 – 11:10 AM

<table>
<thead>
<tr>
<th>PARIS BALLROOM</th>
<th>CHICAGO BALLROOM</th>
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<tbody>
<tr>
<td><strong>LEADERSHIP CHALLENGE SESSIONS</strong></td>
<td><strong>SEW UP THE SAFETY NET FOR WOMEN AND CHILDREN: LEVERAGING COMMUNITY SERVICES TO PROMOTE BETTER HEALTH</strong></td>
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<td><strong>HEALTHIER HOSPITALS: CREATING A HEALTHY ENVIRONMENT FOR HEALTHY COMMUNITIES</strong></td>
<td>Build a community safety-net system to better care for at-risk women and increase infant survival. Henry Ford Health System will discuss how they connected a loose net of medical and social services to build a comprehensive program that promotes good health prior to and during pregnancy.</td>
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<td>Sara Wohlford, Efficiency and Sustainability Officer, Carilion Clinic</td>
<td>Kimberlydawn Wisdom, MD, Senior Vice President &amp; Chief Wellness Officer, Henry Ford Health System</td>
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<td>Aaron Harris-Boush, Community Outreach Manager, Carilion Clinic</td>
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<td>Examine ways that you can reduce your impact on the environment in order to better the health of the communities you serve. Carilion Clinic will discuss how they used the Healthier Hospitals Initiative, an initiative developed by 12 of the largest healthcare systems, as a guide for their hospitals and community partners to develop a successful and sustainable plan to keep their communities healthy.</td>
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<td><strong>HOTSPOTTERS: UNDERSTANDING SOCIAL CAUSES TO IMPROVE POPULATION HEALTH</strong></td>
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<td>Clese Erikson, Director, Center for Workforce Studies, Association of American Medical Colleges</td>
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<td>Find out more about how your organization can help eliminate root causes of high health care utilization in your community through hotspotting. Drawing from the experiences of a student learning collaborative, this session will aim to show the value in developing local interprofessional teams to identify and deeply understand the narrative story of “super-utilizing” populations in each community and subsequently leverage those experiences to advance specific goals in public health, education reform, and delivery innovation.</td>
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<tr>
<td><strong>GET HEALTHY, LIVE WELL: ENGAGING PEOPLE, IDEAS, AND RESOURCES TO DEVELOP AND IMPLEMENT COMMUNITY HEALTH STRATEGIES</strong></td>
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<td>Gina Brandenburg, Program Manager, Get Healthy, Live Well, Tanner Health System</td>
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<td>Learn how a health system can spearhead a large community network that focuses on decreasing health disparities. The Get Healthy, Live Well initiative includes 24 task forces consisting of more than 550 volunteers and 160 local, state, and national partners who develop community health strategies to achieve both comprehensive and targeted population impact to reduce chronic disease risks in their community.</td>
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### 11:15 – 11:55 AM

**PREPARING FUTURE LEADERS TO IMPROVE COMMUNITY HEALTH**

How do we prepare future leaders who can collaboratively create healthier communities and shape the future of our health ecosystem? This panel will address current initiatives to improve how we prepare leaders. They will address the challenges and opportunities available to create leaders who can move community agendas, collaborate across silos, and innovate for a better future.

**Moderator:** Ruth Wageman, PhD, Senior Scholar & Advisor, ReThink Health and Author, Senior Leadership Teams, *What It Takes to Make Them Great*

**Panelists:**

- Philip M. Alberti, PhD, Senior Director, Health Equity Research & Policy, Association of American Medical Colleges
- Laura Rasar King, Executive Director, Council on Education for Public Health
- Christy Harris Lemak, PhD, Department Chair, University of Alabama at Birmingham and Board Chair, Association of University Programs in Health Administration
- Susan M. Swider, APHN-BC, PhD, Professor, Community, Systems and Mental Health Nursing, College of Nursing, Rush University

### 11:55 – Noon

**CLOSING REMARKS**

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2015 HUMAN CAPITAL INVESTMENT CONFERENCE AND LEadership Award
Congratulations, Rich Umbdenstock.
You’re an inspiration to us all.

Presbyterian is happy to congratulate
Rich Umbdenstock, Past President and
CEO of the American Hospital Association,
for receiving the 2015 NCHL Gail L. Warden
Leadership Excellence Award.

Yale-New Haven Hospital
congratulates
Richard Umbdenstock, Past President and CEO,
of the American Hospital Association
on receiving the National Center for
Healthcare Leadership 2015 Gail L. Warden
Leadership Excellence Award.

Baylor Scott & White Health

Congratulations
Rich Umbdenstock,
Past President & CEO,
American Hospital Association

on receiving the
Gail L. Warden
Leadership Award

Advocate Health Care
congratulates
RICHARD UMBDENSTOCK
recipient of the
2015 Gail L. Warden
Leadership Excellence Award
AMERICA’S ESSENTIAL HOSPITALS

We salute you.

Thank you Rich Umbdenstock for your leadership and commitment to improving the health of our communities.

Richard Umbdenstock
Past President and CEO
American Hospital Association

The nation’s essential hospitals honor Mr. Umbdenstock for his leadership and distinguished career as a champion for health care excellence and equity.

AMERICA’S ESSENTIAL HOSPITALS

Access and Quality for All

CONGRATULATIONS

to one of health care’s leading minds

Rich Umbdenstock

Recipient of NCHL’s 2015 Gail L. Warden Leadership Excellence Award

Thank you for your commitment to quality and leadership.

UHC and its members honor:

Rich Umbdenstock

Recipient of NCHL’s 2015 Gail L. Warden Leadership Excellence Award

Thank you for pointing the way to a better future.

155 North Wacker Drive
Chicago, Illinois 60606
312 775 4100 uhc.edu

CONGRATULATIONS

2015 Gail L. Warden Leadership Excellence Award Recipient

Thank you for pointing the way to a better future.
TUESDAY, NOVEMBER 17, 2015

GAIL L. WARDEN LEADERSHIP EXCELLENCE AWARD DINNER

Music provided by the Arlen Music Production

4:45 – 5:40 PM AWARD RECEPTION Pre-Function

5:45 PM WELCOME Grand Ballroom
Christy Harris Lemak, PhD, Department Chair, University of Alabama at Birmingham
Fawn Lopez, Publisher & Vice President, Modern Healthcare

5:50 PM INTRODUCTION OF 2015 AWARD RECIPIENT
Irene Thompson, Vice Chair, Board of Managers, AMC Networks, VHA-UHC Alliance NewCo, Inc.

6:00 PM AWARD RECIPIENT’S REMARKS
Richard J. Umbdenstock, Past President & CEO, American Hospital Association

6:20 PM DINNER

7:25 PM CLOSING REMARKS
Jonathan B. Perlin, MD, PhD, Board Chair, American Hospital Association

7:35 – 8:30 PM POST-DINNER RECEPTION | cash bar Le Bar | Sofitel

NATIONAL CENTER FOR HEALTHCARE LEADERSHIP
GAIL L. WARDEN LEADERSHIP EXCELLENCE AWARD

NCHL named the award in honor of Gail L. Warden, founding chairman of the NCHL Board, President Emeritus of Henry Ford Health System, and one of healthcare’s foremost leaders. This distinction is made in recognition of his remarkable accomplishments as an innovator in healthcare delivery, community wellness, and health policy, and as a mentor and inspiration to future generations. Gail has truly been a force for change in healthcare. This enduring tribute is in recognition of his legacy of leadership.

PAST LEADERSHIP AWARD RECIPIENTS

2014 Nancy Schlichting
CEO, Henry Ford Health Systems
Glenn D. Steele, Jr., MD, PhD
former President & CEO, Geisinger Health System

2013 John W. Bluford III
President Emeritus, Truman Medical Centers

2012 Mitchell H. Katz, MD
Director, Los Angeles County Department of Health Services
Margaret E. O’Kane
President, National Committee for Quality Assurance

2011 Michael J. Dowling
President & CEO, North Shore-LIJ Health System

2010 Robert H. Brook, MD, ScD
Distinguished Chair, RAND Health, Professor of Medicine & Health Services, UCLA, Director, UCLA/Robert Wood Johnson Clinical Scholars Program

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Retired CEO, Denver Health

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Retired President, American Hospital Association
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Retired President & CEO, Northwestern Memorial HealthCare

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Gary A. Mecklenburg
Retired President & CEO, Northwestern Memorial HealthCare

1965 William H. Nelson
Former President & CEO, Intermountain Healthcare
The Board of Trustees of the
American Hospital Association
and its 5,000 member hospitals
and health systems salute

Rich Umbdenstock

on receiving the 2015
Gail L. Warden Leadership Excellence Award

We applaud Rich’s commitment to helping hospitals transform and improve health care for all patients and communities across America. Throughout his career, Rich has worked tirelessly on performance excellence, transparency, equity and good governance.

Congratulations!
The National Center for Healthcare Leadership is honored to present the 2015 Gail L. Warden Leadership Excellence Award to Richard J. Umbdenstock for his tireless work to transform and improve healthcare and unparalleled leadership in breaking through the divisive debate on health reform to help drive change in the nation’s healthcare system.

LEADING THROUGH TUMULT: THE VALUE OF LISTENING, BRINGING PEOPLE TOGETHER, AND FINDING COMMON GROUND

Richard J. Umbdenstock
Gail L. Warden Leadership Excellence Award Recipient

Rich Umbdenstock’s healthcare career finished where it started. The immediate past president and CEO of the American Hospital Association (AHA) began working at the AHA in 1975—one year after receiving his master’s degree in health services administration—as a special assistant to the president. And then, step-by-step, he carefully moved through his next series of roles as if he knew all along he was preparing to return to lead the AHA through one of the most crucial and conflicted eras of its 116-year history. His consulting career, his focus on governance, and his experience enabling collaboration, building consensus, and navigating healthcare’s complexity all came together as the tumult of the Affordable Care Act unfolded into headline news—and stayed headline news—for the entire eight years that Rich headed the organization.

Q. What has inspired you as a leader throughout your career?
A. It’s fair to say that my parents inspired me. My parents were both hospital volunteers; they always made time for others. So I think about them when I think about leadership and mentoring. Rather than trying to figure out how to develop leadership skills, I have tried to be open and accessible to others, just like my parents. I don’t think so much about formal mentoring, but I have never been shy to offer my advice and I am always willing to continue the conversation. Mostly it’s a matter of liking people and liking to stay in touch and being available. When you have a big job people automatically assume you don’t have time to be accessible. That has not been true for me.
Q. Did your parents influence your choice of healthcare for a career?

A. I grew up around a lot of hospital talk and events, so I always had the interest. Medicare was exploding—and there was tremendous concern about access for seniors and cost for the nation. Initially, I was focused on the business side but I came to realize the importance of the social good. In my first job I organized and conducted seminars for the member hospitals, including educational sessions for hospital board members to help them understand their role, even though many hospital administrators did not always want them more involved. Over time, I developed a specialty of interpreting the business of healthcare to community leaders so they could better understand the field, and importantly, understand why they were in a business that competes for non-paying customers.

Q. What have you learned about your leadership style and how did that equip you to lead the AHA?

A. My big learning is that I am always better at moving large blocks of a puzzle than the small, finer ones; I am good at taking the broader view, seeing the interplay between things in a dynamic situation, and bringing diverse opinions together towards a common goal. Fundamentally, I am a facilitator, which is why I think I did well in consulting. I know my strength—it's listening to different sides of the conversation and bringing people together to reach consensus. I have used that skill throughout my professional life.

Q. Passage of the ACA was a major event during your tenure. How did you work with your members, especially with all the opposing views?

A. During healthcare reform, I had to carefully listen to and engage with our 5,000 AHA members. We did a lot of work tracking what our members were thinking as the debate progressed: 70 percent favored our actions, about 20 percent were neutral, and the final 10 percent were opposed, so we felt we had strong support. Opinions were varied, even after the ACA passed. Some in that final 30 percent against it were vocal; some threatened and a few did drop their membership. But as the AHA leadership, both board and staff, we were clear—change was needed and this was our best opportunity to lead and do what was best for patients and communities. We could see that mergers and acquisitions would create integrated delivery systems that would be better for patients; hospitals would need to prepare for more financial risk because the fee-for-service payment system would not last indefinitely; providers would be dinged for readmissions and other complications; and there would be more accountability as patients and their families would insist on more public reporting of outcomes, satisfaction ratings, and costs in order to make better decisions.

Q. When did you begin to see that change was afoot?

A. As early as 2006 we understood that healthcare would be part of the 2008 presidential race and that cost would be the big driver. We sought input from our members; we were constantly talking, discussing, refining, and looking for ways to get buy-in as we moved forward with a plan for change. We understood this would be enormous, that it would be a huge campaign issue, and we knew it could be a political firestorm. Everyone would be challenged—pharma, providers, insurance—everyone would have to change the way they did business if we were to achieve real reform. By 2008, we were ready. Our platform was “Health for Life—Better Health, Better Health Care,” the AHA’s five-point system was designed to be a balanced and comprehensive framework for health reform.

Q. What surprised you the most about the ACA conflict?

A. ACA created such a political schism that after it was passed no one tried to fix the problems in the bill to make it better. So we had to focus on ACA’s real purpose: rise above the politics and go about the hard work of improving access and creating better healthcare. But we always struggled with the fact that our members didn’t have a uniformity of views.

Q. How would you sum up the battle?

A. It’s been amazing in a bunch of different ways. First, it’s remarkable that we were able to extend healthcare coverage to so many people so quickly, which hopefully improves access and then improves health, which is the goal of just about everybody in the healthcare sector. We continue to move in the right direction on that goal. Then there is the substantial restructuring of the healthcare system on both the insurance side and the provider side. I would say from the provider side we are closer to getting it right than ever before—we are working on the right things to make healthcare more connected, more user friendly, and more accountable for quality, outcomes, and safety. And the financing side is moving in substantive ways as well. However, it’s also incredible—a different kind of incredible—that after five years of implementing ACA, some people are still trying to repeal ACA. They think we can wind back the clock and start all over based on their
ideology. And, most surprising, there even are citizens who have benefited directly from the ACA who feel this way.

Q. You have talked about finding common ground and leading to consensus. How do you get there?

A. Transparency with reality. I learned some important lessons from Alex McMahon (AHA’s president from 1972-1986) who said when you are faced with difficult choices, lay all the cards out face up and then challenge people to pick the ace of spades. Amazingly, they always get it right! So the huge leadership lesson is to give everybody all the viable options. Don’t try to tell them your right option; even more important, don’t let them pick a bad one. As a leader, you will likely have your preferred “best choice.” Yet, when you lay it out with full transparency, and people can compare the choices, they will usually pick the right one.

The corollary part is that the primary leadership principle is to be able to assess the choices in the first place; the reality factor is the key thing. As a leader you have to be knowledgeable and clear and help people see how issues, the practical and political, fit within the vision of the larger puzzle. And, as the leader, you also have to be judicious and transparent if you take a stand to direct the decision—as opposed to facilitating the decision—to get buy in.

Q. What’s an example of how your role as a facilitator played out?

A. Just think about how each state faces different issues with regard to healthcare—different kinds of hospitals and different constituencies—from payers to providers and consumer representation, to say nothing of politics and cultural norms. So we facilitated conversations among our state association colleagues and acted as the translator allowing the group to find common themes that everyone could agree on. I would like to think that is my hallmark—the ability to find common themes and consensus while also being transparent about our own challenges and our need to improve.

Q. Now, as we move forward, what must providers do to improve the way they work with their patients?

A. Healthcare customers think about healthcare the way they think about other things in their lives, so they want some kind of continuing personal connection; the mobile world makes that personalized connection possible and hospitals need to be part of that. Providers have to earn their customers’ trust and loyalty every day, and relate to them in the way they want to relate to you. Social media demands ease of access and pushing out of information in a way where everything is integrated and easily accessed. Providers need to bring a new type of service to their customers.

Q. Is that being done anywhere?

A. A few years ago when CVS, Walmart, and Rite-Aid all decided they wanted to get into healthcare delivery, some established providers dismissed them. But truthfully, people go to the pharmacy more regularly than they go to the hospital or the doctor’s office. And when they do go, the parking is right there, not down the block in a parking garage. And usually it’s free. So that’s a good example of how the pharmacy companies are meeting people where they are—connecting with them as part of an ongoing relationship.

Q. What do you think is healthcare’s biggest obstacle?

A. It’s a fiercely independent profession. And while independence is a great strength, complete independence in the provision of care is no longer affordable. The financial pressures can be a great benefit that force tough decisions. Boards and executives are now assessing the cost of independence versus joining a larger system; of siloes of care versus coordinated systems and processes of care; of independent clinical practice versus evidence-based care. This is where we hope real change and improvement can occur.

Q. And next?

A. We have a way to go to get our integrated networks to be coordinated, adequate, and transparent. If you are part of an integrated and closed system, like a Kaiser or parts of a Geisinger, there is no question what is in or out of network. In the non-integrated, fee-for-service world, it’s very hard to standardize and coordinate across entities, much less be able to tell the patient what is or is not in network. With the array of products and the level of quality across these products, hospitals, and insurance plans look more like shopping malls rather than a single coordinated store.

Q. What competencies will the next generation of leaders need to keep moving healthcare forward?

A. First, systems thinking and management. All of healthcare, including clinical processes, will be organized and managed in systems of care. Once the low hanging fruit is gone, continued improvement will only come through systems engineering and improvement. Second, risk management. Assuming risk turns the compass around from a revenue orientation to a cost orientation;
growth will move from facilities and overhead to membership (the risk pool) and strategic investments in care management and member satisfaction. Lastly, healthcare leaders will need to be entrepreneurial and the ability to collaborate will be essential. Being a skilled and effective business partner will be highly valued.

Q. How well is healthcare addressing diversity?

A. The healthcare system is representative of the broader culture. Biases and barriers have not been eradicated across society and the same is true for healthcare. In a pay-for-performance world, if different groups of people relate to the healthcare system differently and have different outcomes, you have to determine why. Is it cultural or something else? Everyone should get the same standard of care, but the way consumers interact with the system, such as following through on protocols, could be cultural and could affect outcomes. If we are going to succeed in delivering affordable accessible healthcare, providers will need to understand how care inside the formal system combines with what happens in the external world of different cultures.

Q. How would you sum up your outlook for healthcare in America?

A. I am more optimistic now than ever because we are working on more of the right things than we have in the past. We are still trying to figure it out, but we are connecting parts to more of a system with greater accountability, both financially and with respect to quality of care. We are making decisions that will help the system be more accessible and responsive, utilizing mobile technology and providing care through digital portals, and increasing access. I think that is terrific. But then we have to determine what do we really need in terms of physical infrastructure?

Q. And how would you answer that question?

A. Your home has to become your medical home, which underscores the importance of working in the community and across social service agencies. For instance, you want to make sure that people even have homes; housing is more important earlier on than things they get in the hospital. Secondly, using the number of beds to describe hospital size and, presumably success, is an outdated measure. It doesn’t tell the story anymore. Hospitals may like their buildings but can they successfully be in real estate and patient care and food service and everything else? I would say hospitals should look ahead and focus on doing something unique to better understand how to keep people well and how to standardize the delivery of medicine using the lowest overhead model possible. I think it is coming.
SPEAKER BIOS

CHILEDUM AHAGHOTU, MD
Chile Ahaghotu is the R. Frank Jones Endowed Professor & Chair of Urology at Howard University College of Medicine and Hospital in Washington, DC. Dr. Ahaghotu has served as the associate dean for clinical affairs and holds adjunct academic appointments in the departments of family and community medicine as well as obstetrics and gynecology. Dr. Ahaghotu received his medical degree at the University of Nigeria and completed his urological residency at the University of Iowa Hospital and Clinics. In the past, Dr. Ahaghotu served as president of the Howard University Hospital medical and dental staff, chairman of the Faculty Practice Plan Physicians Advisory Council, president of the Washington Urologic Society, chair of the urology section of the National Medical Association, and president of the R. Frank Jones Urologic Society. Dr. Ahaghotu also served as one of the nine physician members of CMS’s Practicing Physicians Advisory Council (PPAC) and currently sits on the American Urologic Association’s Health Policy Council.

PHILIP M. ALBERTI, PHD
Philip Alberti is senior director of health equity research and policy at the Association of American Medical Colleges. Dr. Alberti supports the efforts of academic medical centers to build an evidence base for effective programs, protocols, policies, and partnerships aimed at eliminating inequities in health and healthcare. Previously, Dr. Alberti led research, evaluation, and planning efforts for a Bureau within the New York City Department of Health and Mental Hygiene that works to promote health equity between disadvantaged and advantaged neighborhoods. In that capacity, he developed research partnerships between government, academic, and local institutions, helped design policies and interventions targeting local inequities, and evaluated these and other efforts. Dr. Alberti holds a BA in psychology and a PhD degree in sociomedical sciences from Columbia University and was a National Institute of Mental Health fellow in the psychiatric epidemiology training program.

DORA ANIM
Dora Anim is senior vice president of programs and services at The Health Collaborative in Cincinnati. Ms. Anim is responsible for oversight and strategy development for the organization’s programs and membership services including care transitions, advanced care planning, disaster preparedness, patient safety, and quality improvement. Ms. Anim plays an integral role in the management of the Southwest Ohio Community Care Transitions Collaborative, a partnership that formed a comprehensive system joining hospitals, physicians, health information technology, and community-based programs to address specific factors that contribute to hospital readmissions in the frail and elderly population. Ms. Anim received a master’s degree in public administration and a bachelor’s degree in political science and economics from the University of Cincinnati.

MARVIN AVILEZ
Marvin Avilez is the chief operating officer of HICCup, a nonprofit working to strengthen local leadership coalitions, align stakeholders, and prepare communities for large-scale launches of innovative health solutions. Mr. Avilez is a serial entrepreneur, operations expert, and consultant in the development of numerous startups including his role as founder and CEO of VisualOps. Prior to his role at HICCup, Mr. Avilez was CPO at Social Amp and IN2, and led new media and product roles at Oracle, Apple, and Macromedia. A former US Marine Corps sergeant, Mr. Avilez is an active volunteer for a number of organizations, including Team Rubicon which unites the skills and experiences of military veterans with first responders to rapidly deploy emergency response teams.

ERICA BANK
Erica Bank is a performance management leader of leader development and performance at Deloitte. Ms. Bank has devoted her career to designing and implementing talent management strategies, processes, and technologies. She joined Deloitte’s human capital consulting practice in 2000, where she spent 10 years making this impact on behalf of Deloitte’s clients, and has since pursued similar efforts on behalf of Deloitte’s people. In her role, Ms. Bank provides strategic direction on the management and continuous improvement of current performance management processes, and has been a key leader of the firm’s performance management reinvention efforts. She holds in bachelor’s degree in industrial psychology from the University of Pennsylvania.

GINA BRANDENBURG
Gina Brandenburg has been at Tanner Health System for 19 years in a variety of positions related to community health. Ms. Brandenburg currently serves as program manager for the hospital’s Get Healthy, Live Well initiatives. She is the lead on several task forces including volunteers, youth, diabetes and healthy food access, which includes the West Georgia Food Collaborative, farmer initiatives, cooking matters nutrition Education, restaurants and community gardens task forces. Gina is a certified health education specialist and has a master’s degree in health education from California State University at Long Beach and a bachelor’s degree from the University of California at Irvine. She has worked in the wellness field for more than 30 years, coming to Tanner Health from California where she developed and implemented comprehensive wellness programs for several corporations.
PATRICK CARROLL, MD

Pat Carroll is the chief medical officer of the Walgreens' healthcare clinics and oversees matters pertaining to provision of care, clinical outcomes, patient safety, healthcare information systems, strategic initiatives, and programs that impact the healthcare clinics. Prior to Dr. Carroll's role at Walgreens, he was the chief medical officer and vice president at Integrated Care Partners at Hartford HealthCare where he was responsible for value-based plans for 1800 provider organization. Dr. Carroll developed and lead care coordination team for Integrated Care Partners comprised of care coordinator RN's, health coaches, and social workers, as well as oversight of all quality programs. He earned a bachelor's degree from College of the Holy Cross and his medical degree from Dartmouth Medical School.

KATHLEEN COLVILLE

Kathleen Colville is the community outreach director for Cone Health in Greensboro, North Carolina. Ms. Colville leads Cone Health’s efforts to participate in key community-based and health-related coalitions, and convenes local leaders to assess the community’s health and develop action plans for improvement. Ms. Colville joined Alamance Regional Medical Center in 2008, after serving as an educator in public health and public education agencies. Ms. Colville received a bachelor’s degree from Brown University and master’s degrees in social work and public health, both from the University of North Carolina at Chapel Hill. She is currently pursuing a PhD in public administration from North Carolina State University. Her research interests include network governance issues arising from the Affordable Care Act and the ethics of emergency management planning and response.

GAIL B. CROALL, MD

Gail Croall is an experienced healthcare executive and comes to HealthSpot with over 12 years of leadership roles in managing population health for large national managed care companies and statewide health plans for commercial, healthcare exchange, and Medicaid populations. Previously, Dr. Croall has served as senior vice president and chief medical officer for Anthem, Inc., chief medical officer at OptumHealth, and national medical director for CareSource. Dr. Croall has expertise ranging from innovation, strategy, operations, and implementation to healthcare analytics, and has achieved significant success in population health management outcomes with the reduction of medical trend costs for national employer groups and improvement in quality of care outcomes for all segments of the population across the continuum of care. Dr. Croall earned a BS from William & Mary and her medical degree from Virginia Commonwealth University.

HENRY DEPHILLIPS, MD

Henry DePhillips is chief medical officer of Teladoc. In addition to practicing family medicine early in his career, Dr. DePhillips' experience includes serving as senior medical director for Independence Blue Cross and several medical technology companies, and head of business development for McKinsey Health Systems Institute. He is an expert on use of informatics to influence personal and clinical decision-making. At Teladoc, Dr. DePhillips is responsible for the overall delivery of high quality clinical care and the supervision and expansion of the physician network. Dr. DePhillips received a bachelor of science degree in biochemistry from Trinity College and his MD at Hahnemann University School of Medicine. He performed his residency in family and community medicine at the Medical Center of Delaware.

JOHN D. DISHER

John Disher has spent the last 30 years engaged in community relations and project management at IU Health Ball Memorial Hospital in Muncie, IN. Mr. Disher currently serves as the organization’s community outreach project manager and is responsible for conducting community health needs assessments and strategically developing community-based partnerships and projects to address the most pressing health concerns in the community. Mr. Disher is currently leading the development of the Healthy Community Alliance of Delaware and Blackford Counties; a collective impact model health coalition designed to promote increased physical activity, improved nutrition, and reduced tobacco use. He also is an adjunct faculty member at Ball State University where he received his BS in radio and television and MS in information and communication. Mr. Disher serves on the boards and committees of several local organizations including the Whitely Neighborhood Association, Cardinal Greenways, Roy C. Buley Community Center, Living Healthy Council, Delaware County Tobacco Free Coalition, Rotary Park, and Muncie Symphony Orchestra.
SPEAKER BIOS

BOB ELLZ Ey
Bob Ellzey joined Texas Health Resources in 2011 as president of Texas Health Harris Methodist Hospital Azle, a 36-bed acute care community hospital. Mr. Ellzey began his healthcare career at Hendrick Medical Center in Abilene, Texas in 1991. Since that time he has served as CEO and COO of Texas hospitals in Del Rio, Bellville, and Kilgore. He has intentionally focused his career on improving health in rural communities through rural hospitals, networks, telehealth, and collaborative partnerships. Mr. Ellzey received his bachelor’s degree in business administration from Baylor University in Waco, and later earned his master’s in healthcare administration from the University of Houston–Clear Lake. Mr. Ellzey is a board certified fellow in the American College of Healthcare Executives, past president of the East Texas chapter of ACHE, and a former vice president of the Arkansas Health Executive Forum.

CLES E ER IKSON
Clese Erikson is the senior director of the Center for Workforce Studies at the Association of American Medical Colleges. Ms. Erikson is responsible for overseeing the Center’s research strategy, which is currently focused on understanding how workforce needs are evolving under new payment and delivery models, monitoring the health workforce supply and demand, and regularly convening workforce researchers to enhance methods and dissemination of findings. She is currently helping to lead a student learning collaborative on hotspotting with the Camden Coalition and Primary Care Progress. Prior to joining the AAMC, Ms. Erikson was director of research for the American Medical Group Association where she focused on patient safety and quality improvement initiatives and patient and provider satisfaction studies. She received her BA in French and her Master of Public Affairs from the Lyndon B. Johnson School of Public Affairs at the University of Texas.

EMILY FRIEDMAN
Emily Friedman is an independent health policy and ethics analyst based in Chicago. Among her areas of interest are trends in healthcare; healthcare reform; healthcare quality improvement initiatives; the social ethics of healthcare; leadership in healthcare; health policy and how it works (or doesn't); the impact of demographic change on healthcare; insurance and coverage issues; lessons from international health systems; and the relationship of the public and society with the healthcare system. She is a multiply-honored adjunct assistant professor at the Boston University School of Public Health, and an honorary life member of both the American Hospital Association and the American Medical Association. Ms. Friedman writes a regular column for Hospitals and Health Networks Daily, contributes to many other publications, and is the author or editor of several books on ethics, healthcare history, and other topics. Ms. Friedman has been named one of the “100 Most Powerful People in Health Care” and one of the “Top 25 Women in Health Care” by Modern Healthcare. She received a BA in English, with honors, from the University of California at Berkeley.

ANDREW N. GAR MAN , PSYD
Andy Garman is CEO of the National Center for Healthcare Leadership and is a professor in the Department of Health Systems Management at Rush University. He is coauthor of three books, Exceptional Leadership: The Healthcare C-Suite: Leadership Development at the Top; and The Future of Healthcare: Global Trends Worth Watching (Health Administration Press). Dr. Garman is a three-time recipient of the American College of Healthcare Executives’ Health Management Research Award, and has received support from the Agency for Healthcare Research and Quality. His professional experience includes roles at the Federal Reserve Bank of Chicago, Institute of Technology, University of Chicago, and Illinois Department of Mental Health. Dr. Garman received a PsyD in clinical psychology from the College of William & Mary / Virginia Consortium, an MS in human resource development from the Illinois Institute of Technology, and a BS in psychology from Pennsylvania State University.

CHRISTY HARRIS LEMAK , PHD
Christy Lemak is program chair of the University of Alabama Birmingham’s Department of Health Services Administration and board chair of the Association of University Programs in Health Administration. Formerly, Dr. Lemak was associate professor and director of the Griffith Leadership Center at the University of Michigan. Dr. Lemak’s teaching, research, and practice focus on how leadership and organizational structure can lead to high performance in healthcare. She is a past chair of the Academy of Management Health Care Management Division. Dr. Lemak was previously the Michael O. and Barbara Rice Professor of Health Services Research, Management and Policy at the University of Florida and a director at the Sachs Group. Dr. Lemak holds a PhD in health services organization and policy from the University of Michigan, MHA and MBA from the University of Missouri-Columbia, and a BS in health planning and administration from the University of Illinois.
AARON HARRIS-BOUSH

Aaron Harris-Boush is a community outreach manager at Carilion Clinic, Roanoke, Virginia where he oversees Carilion’s system-wide community health needs assessment projects, community benefit, and health education programs. Mr. Harris-Boush also serves as chairman for the data collection and tracking committee and a member of the coordination of care and wellness action teams for Healthy Roanoke Valley, a partnership of over 50 community partners working to create a shared vision and evidence-based strategies that tackle the issues plaguing the health of the Roanoke Valley. He is passionate about local food movements and was fundamental in starting the Fresh Foods Rx Prescription Program, the Carilion “Farmshare” program, and Carilion’s signing of the Healthy Food in Health Care Pledge. Mr. Harris-Boush graduated from James Madison University with a Bachelor of Science in health service administration and received his Master of Healthcare Administration from Jefferson College of Health Sciences.

STEPHEN LEWIS

Stephen Lewis is the co-founder and co-director of AIDS-Free World, an international advocacy organization that exposes injustice, abuse, and inequality, the social ills that underpin and continue to sustain HIV. Stephen Lewis’ work with the United Nations spanned more than two decades and included UN Secretary-General’s special envoy for HIV/AIDS in Africa, deputy executive director of UNICEF at the organization’s global headquarters in New York, and Canada’s Ambassador to the United Nations. Mr. Lewis is the co-founder and board chair of The Stephen Lewis Foundation in Canada, and he is a Senior Fellow of the Enough Project. Stephen Lewis is a Companion of the Order of Canada, Canada’s highest honor for lifetime achievement. In 2005, Mr. Lewis was named by TIME magazine as one of the ‘100 most influential people in the world’ in the category that included The Dalai Lama, Bill Gates, Oprah Winfrey, and Nelson Mandela. Mr. Lewis is the author of the best-selling book, Race Against Time. He holds 40 honorary doctorates: 38 from Canadian universities, plus degrees from Dartmouth College and Johns Hopkins University in the United States.

ROLDDY LEYVA

Rolddy Leyva is the vice president of market diversity for Sodexo’s corporate services and education market segments. In this capacity, Mr. Leyva provides diversity counsel and leadership to the executive teams of these market segments and is responsible for developing and implementing comprehensive, fully integrated diversity solutions that drive Sodexo’s workplace and marketplace diversity plans. Prior to this position, he contributed to Sodexo’s global diversity initiative by leading the organization’s diversity function in Latin America. He developed highly customized diversity plans in collaboration with country leaders to enhance talent and business development in the region. Mr. Leyva joined Sodexo from Capital One Financial Services where he was director of human resources and diversity. Mr. Leyva is a graduate of the University of Central Florida in Orlando, Florida.

FAWN LOPEZ

Fawn Lopez is publisher and vice president of Modern Healthcare and Modern Physician. Ms. Lopez’s previous work includes, associate publisher to Modern Healthcare, national advertising director of Crain’s Chicago Business, and advertising director of the Kansas City Business Journal. Ms. Lopez received a bachelor’s degree in business administration with an emphasis in marketing from the University of Missouri and participated in graduate studies at Webster University in Kansas City. Currently, Ms. Lopez serves as a board member of The Asian Health Care Leaders Association (AHCLA), The American Heart Association-Chicago, The Heartland Alliance, and the Dean’s Advisory Board at DePaul University, School of Communication. Additionally, Ms. Lopez is a member of the Women Business Leaders of the US Healthcare Industry Foundation, Chicago United, Executives Club of Chicago, and the Economic Club of Chicago. She has served as board president of the Kansas City Consensus, executive committee board member of the Don Bosco Center, board member of the Central City School Fund, as a consultant for Junior Achievement, chaired the sponsorship committee for the American Cancer Association, and was a chair member of the luncheon committee of the Kansas City Chamber of Commerce.

JONATHAN B. PERLIN, MD, PHD

Jonathan Perlin is president of clinical and physician services and chief medical officer of Hospital Corporation of America (HCA). In his role, Dr. Perlin provides leadership for clinical services and improving performance at HCA's 166 hospitals and more than 800 outpatient centers and physician practices. Current activities include implementing electronic health records throughout HCA, improving clinical “core measures” to benchmark levels, and leading patient safety programs to eliminate preventable complications and healthcare-associated infections. Before joining HCA in 2006, Dr. Perlin was under secretary for health in the US Department of Veterans Affairs. As the senior-most physician in the federal government and CEO of the Veterans Health Administration (VHA), Dr. Perlin led the nation’s largest integrated health system. Dr. Perlin has served previously on numerous boards and commissions including the National Quality Forum and the Joint Commission, and currently on the boards of the American Hospital Association, National Patient Safety Foundation, and Meharry Medical College. He chairs the US HHS Health IT Standards Committee. Dr. Perlin has a Master of Science in health administration, and received his PhD in pharmacology (molecular neurobiology) with his MD as part of the physician scientist training program at the Medical College of Virginia of Virginia Commonwealth University.
TONI PRECKWINKLE
Toni Preckwinkle is the Cook County board president and has been a dedicated community leader for over two decades. President Preckwinkle has worked with the Cook County Board of Commissioners, elected officials, and county employees to implement major reform and reshape county government through fiscal responsibility, innovative leadership, transparency, accountability, and improved services. President Preckwinkle has developed a broad policy agenda—focusing on critical public safety reform, working to strengthen the County’s healthcare system, and increasing the capacity and capability of their economic development efforts. Before being elected Cook County board president, President Preckwinkle served 19 years as Alderman of the 4th Ward. During her tenure she worked to improve our local public schools and increase the amount of affordable housing sponsoring two Living Wage and Affordable Housing ordinances. Her independent and progressive leadership earned her the M-IPO Best Alderman Award six times as well as two Leon Despres Awards. She holds a bachelor’s degree and master’s degree from the University of Chicago.

LAURA RASAR KING
Laura Rasar King has served as executive director of the Council on Education for Public Health (CEPH) since 2004. Her career spans nearly 20 years in public health, most of which has focused on quality assurance in higher education in public health and related professional fields. In her current role, she is responsible for managing the work of CEPH and supporting its board of directors. She assists universities interested in establishing a public health degree program and pursuing accreditation both nationally and internationally, and maintains relationships with governmental and private sector organizations that share common interests in higher education, accreditation, academic public health, and public health workforce issues. She received an MPH in health promotion and disease prevention from George Washington University School of Public Health and Health Services and a BA in psychology from American University.

R. TIMOTHY RICE
Tim Rice serves as CEO emeritus for Cone Health and is the president and board chair of NCHL. He previously served as COO of Cone Health from 2001-2004, when he was responsible for the network’s five acute care hospitals. Prior roles also include executive vice president of Moses Cone Memorial Hospital and executive vice president of the health services division. Mr. Rice serves on the boards of the North Carolina Hospital Association, North Carolina Agricultural and Technical State University, Greensboro Partnership, Piedmont Triad Partnership, and the GTCC Foundation. Nationally, he serves on the boards of The Joint Commission, the National Center for Healthcare Leadership, the VHA Central Atlantic, and the Southern Atlantic Healthcare Alliance. He is a fellow of the American College of Healthcare Executives. Mr. Rice received the Thomas Z. Osborne Distinguished Citizen Award for 2011 from the Greensboro Partnership and Distinguished Service Award for 2012 from the North Carolina Hospital Association. Mr. Rice received a degree in pharmacy from Washington State University and a graduate degree in health administration from Duke University.

ROBERT G. RINEY
Bob Riney serves as COO of Henry Ford Health System. In this role, Mr. Riney oversees all hospital and service operations for the six-hospital health system consisting of more than 60 clinical locations, 23,000 employees and annual revenues of $4 billion. Mr. Riney, a graduate of Wayne State University, joined HFHS in 1978 and has had the privilege throughout his career to work in almost every business unit in the system. Mr. Riney is a passionate contributor to the overall quality of the community as well as his profession, and he is often sought out for input on major community strategic issues. His current board and community roles include: board president, Dominican Healthcare Board; vice chair, National Center for Healthcare Leadership; board member, Nemours Foundation, Wayne State University School of Business Administration, Michigan Health & Hospital Association, Detroit Metro Convention and Visitors Bureau, ACCESS, Greater Detroit Area Health Council, and Parade Company.

JEFFREY D. SELBERG
Jeff Selberg leads healthcare efforts as the executive director of the Peterson Center on Healthcare. His key responsibilities include shaping and overseeing a growing program of initiatives and grants aimed at fostering improvements in the US healthcare system. Mr. Selberg previously served as the executive vice president and COO for the Institute for Healthcare Improvement, where he worked closely with the leadership team to develop strategic partnerships, innovate new models of care, and develop and spread new definitions of patient safety. Prior to IHI, he served as president and CEO of Exempla Healthcare in Colorado, and has served in several other executive leadership roles with healthcare institutions, including as president and CEO of Southwest Washington Medical Center, and executive vice president for Good Samaritan Hospital and Medical Center in Oregon. Mr. Selberg currently serves on the board of the National Center for Healthcare Leadership, and previously served on the boards of the Health Research and Educational Trust and the American Hospital Association. Throughout his career, Mr. Selberg has focused on improving patient safety and clinical outcomes in patient care through the combination of effective public policy, system principles, and the development of highly functioning teams. Mr. Selberg received his BS degree from Oregon State University and his master’s degree in hospital administration from Washington University.
RAJ C. SHAH, MD

Raj Shah is an associate professor in family medicine at the Rush Alzheimer's Disease Center at Rush University Medical Center. He received his MD degree at the University of Illinois at Chicago College of Medicine. Dr. Shah is the co-director of the Center for Community Health Equity, an initiative jointly led by DePaul University and Rush University Medical Center that is designed to reduce hardship and improve health outcomes in Chicago. Dr. Shah also is the Rush University Medical Center site principal investigator for the Chicago Area Patient-Centered Outcomes Research Network (CAPriCORN), a consortium of 10 health systems and other partners committed to working together to develop, test, and implement strategies to improve care for diverse residents in the metropolitan Chicago region in order to improve health care quality, health outcomes, and health equity. He also is the community engagement and outreach co-leader and education and research training leader of the Rush Center of Excellence on Disparities in HIV and Aging (CEDHA) funded by the National Institution of Minority Health and Health Disparities.

GLENN STEELE, JR., MD, PHD

Glenn Steele serves as chairman of xG Health Solutions, an independently operated venture launched by Geisinger Health System to help healthcare organizations create value and improve quality, leveraging Geisinger intellectual property and expertise on issues such as population-health data analytics, care management, and health IT. Dr. Steele is the former president and CEO of Geisinger Health System. Prior to joining Geisinger Health System, Dr. Steele served as Richard T. Crane professor in the department of surgery at University of Chicago, vice president for Medical Affairs, and dean of the division of Biological Sciences and the Pritzker School of Medicine. Prior to that, he was the William V. McDermott professor of surgery at Harvard Medical School, president and CEO of Deaconess Professional Practice Group, and chairman of the Department of Surgery at New England Deaconess Hospital. Dr. Steele received his bachelor’s degree in history and literature from Harvard College and his medical degree from New York University School of Medicine. He earned his PhD in microbiology at Lund University in Sweden. Dr. Steele is the 2014 recipient of the Gail L. Warden Leadership Excellence Award from the National Center for Healthcare Leadership.

SUSAN SWIDER, APHN-BC, PHD

Susan Swider is a professor in the department of community, systems and mental health nursing at Rush University. Dr. Swider has practiced nursing in acute care, home health care and public health settings. Her research has focused on program development and evaluation of community health worker interventions, and engaging urban communities in health promotion efforts. Her current work includes being part of a team developing and testing an interprofessional care coordination model to address the social determinants of health in a primary care setting. In 2011, Dr. Swider was appointed by President Obama to the advisory group on prevention, health promotion, and integrative public health, a group designed to advise on the development and implementation of the National Prevention Strategy. She is currently addressing issues of prevention locally by working with a coalition of hospitals and health departments on joint community assessment and planning activities across Chicago and Cook County. She is a fellow of the American Academy of Nursing and of the Institute of Medicine of Chicago.

IRENE THOMPSON

Irene Thompson serves as the vice chair of the Board of Managers of UHC Academic Medical Center Network, a subsidiary of VHA-UHC Alliance NewCo, Inc. In this role, Ms. Thompson fosters engagement of academic medical centers that facilitate and support networking councils and meetings among peers to further their common goal of delivering world-class patient care in the most effective and efficient manner. Prior to the UHC/VHA merger in, Ms. Thompson served as the president and CEO of UHC. Ms. Thompson oversaw corporate operations and performance, formulated and executed the organization’s strategy, and represented UHC to the business and health care communities and the media on issues that demonstrate AMC leadership. Before joining UHC in 2007, Ms. Thompson served as president and CEO of The University of Kansas Hospital Authority for 11 years. Ms. Thompson serves on the boards of directors for America’s Essential Hospitals and the National Center for Healthcare Leadership. She holds a bachelor of science degree in business from State University of New York and has participated in master’s studies in organizational management at the University of Pennsylvania. In 2013 and 2007, Irene was named one of Modern Healthcare’s Top 25 Women in Healthcare.

VERNA TORAIN

Verna Torain is the founding president of the Cottage Grove Neighborhood Association in Greensboro, North Carolina. Ms. Torain purchased her home in Cottage Grove 25 years ago and has been an active neighborhood leader for a quarter century. Verna graduated from Central High School in Hillsborough, North Carolina and was employed by Cone Mills from 1969 to her retirement in 2012. Verna works part-time at the Greensboro News and Record, the daily newspaper in Greensboro.
SPEAKER BIOS

GLEN TULLMAN
Glen Tullman is the chairman and CEO of Livongo Health. He is also a co-founder and managing partner of 7wire Ventures, a Chicago-based investment firm focused on healthcare and education. Mr. Tullman most recently served as CEO of Allscripts, the leading global provider of electronic health records, practice management, and electronic prescribing systems. Prior to joining Allscripts, Mr. Tullman was CEO of Enterprise Systems, a leading healthcare-information services company providing resource-management solutions to large, integrated healthcare networks. Mr. Tullman has founded or co-founded a number of ventures including one of the country’s leading solar energy companies, SoCore Energy, and a digital education company, digedu, and holds investments in several ventures focused on mobile and cloud-based health solutions. A strong proponent of philanthropy, he serves as a Chancellor to the International Board of the Juvenile Diabetes Research Foundation (JDRF). Mr. Tullman holds undergraduate degrees in economics and psychology from Bucknell University.

RICHARD J. UMBDENSTOCK
Rich Umbdenstock is the past president and CEO of the American Hospital Association (AHA) and this year’s Gail L. Warden Leadership Excellence Award recipient. Mr. Umbdenstock’s career includes 11 years as an independent consultant for voluntary hospital governing boards in the United States and Canada. His prior positions with the AHA include serving as a member of the AHA board of trustees and its executive committee, chairing the operations committee, and serving as an ex-officio member of Regional Policy Board 9. He also served on the Circle of Life committee and chaired the Task Force on Coverage & Access. Before joining AHA, Mr. Umbdenstock was executive vice president of Providence Health & Services and president and CEO of the Past Providence Services in Spokane. Mr. Umbdenstock received a Master of Science degree in health services administration from the State University of New York at Stony Brook and a Bachelor of Arts degree in politics from Fairfield University. Mr. Umbdenstock was awarded a doctor of laws honorary degree from Gonzaga University.

RUTH WAGEMAN, PHD
Ruth Wageman is a senior scholar and advisor who directs ReThink Health’s research and evaluation activities, provides expertise related to work with multi-stakeholder leadership teams, and conducts empirical research to explore and define the conditions that enable communities to achieve systemic stewardship practices in health. An expert in collaborative leadership processes, Dr. Wageman has published prolifically in the field of organizational behavior. For the last 15 years, Dr. Wageman has focused on understanding and creating the critical conditions that enable teams of people to accomplish collective purposes and to grow in capability over time. She earned a PhD from Harvard’s joint doctoral program in organizational behavior and a BA in psychology from Columbia University.

LESLIE WAINWRIGHT, PHD
Leslie Wainwright is the chief strategy officer of AVIA, a healthcare innovation collaborator. Dr. Wainwright is an experienced leader focused on healthcare strategy and innovation who is a frequent speaker on the future of healthcare, enabling technologies, and emerging health care business models. Prior to joining AVIA, she served as a senior executive at Sg2. Leslie holds a PhD from Northwestern University and fellowship training from the University Maryland School of Medicine. Leslie is passionate about healthcare because it is the ultimate puzzle. Looking at the individual pieces from all angles and trying to put them together is gratifying and provides an awesome professional challenge.

JAY WARDEN
Jay Warden is senior vice president of the Hammes Company’s Advisory Services group. He specializes in strategic planning, facility and business planning, and growth strategy. He has almost 25 years of experience in diverse healthcare consulting and business development. Prior to joining Hammes Company, Jay served in various capacities and leadership roles with several leading healthcare consulting firms and other startup organizations including most recently The Camden Group, Kaufman Hall Associates, SG2 LLC, and Tiber Group, now Navigant Consulting. Jay earned a Bachelor of Arts in government from Dartmouth College and his Master of Business Administration and Master of Health Services Administration from University of Michigan.
SPEAKER BIOS

ANNE F. WEISS
Anne Weiss is a director at the Robert Wood Johnson Foundation and leads the Foundation’s efforts to achieve the highest possible value from our nation’s investments in improving health and healthcare. Ms. Weiss joined the Foundation in 1999, after a distinguished career in healthcare policy at both the federal and state level. She served as senior assistant commissioner of the New Jersey Department of Health, where she directed the state’s oversight of the quality of care delivered by healthcare providers and health plans. Ms. Weiss also served as executive director of New Jersey’s blue-ribbon health reform panel, the Essential Health Services Commission, where she directed implementation of a subsidized health benefits program for the working uninsured. Previously, Ms. Weiss spent 10 years in Washington, DC, as professional staff to the Senate Committee on Finance and as a senior examiner with the office of management and budget. She also has served as a program analyst in the Office of the Assistant Secretary for Planning and Evaluation, was a member of the steering committee of the National Academy for State Health Policy, and served on the board of the National Association of Health Data Organizations. Ms. Weiss received her MPP from the Kennedy School of Government, Harvard University, and a BA in history and political science from Wellesley College.

LEANA WEN, MD
Leana Wen is the Baltimore city health commissioner. Since her appointment in January 2015, Dr. Wen has led implementation of the citywide opioid overdose prevention and response plan, which includes “hotspotting” and street outreach teams to target individuals most at risk, training family/friends on naloxone use, and launching a new public education campaign. In the wake of the civil unrest this past April, she directed the city’s public health recovery efforts, including ensuring prescription medication access to seniors after the closure of 13 pharmacies and developing the Mental Health/Trauma Recovery Plan, with 24/7 crisis counseling and healing circles, and group counseling in schools, community groups, and churches. Most recently, Dr. Wen has been an attending physician and director of patient-centered care in the Department of Emergency Medicine at George Washington University. She graduated summa cum laude with a Bachelor of Science degree in Biochemistry from California State University and earned her MD at Washington University. As a Rhodes Scholar, she studied public health and health policy at the University of Oxford, and worked as a community organizer in Los Angeles and St. Louis.

KIMBERLYDAWN WISDOM, MD
Dr. Kimberlydawn Wisdom is the senior vice president of community health & equity and chief wellness and diversity officer at Henry Ford Health System. She is a board-certified emergency medicine physician, the chair of the Gail and Lois Warden Endowment on multicultural health, and Michigan’s and the nation’s first state-level Surgeon General. In 2012 she was appointed by President Obama to serve on the advisory group on prevention, health promotion, and integrative and public health. Since 1987 she has been on the faculty of University of Michigan Medical School’s Department of Medical Education and adjunct professor in the School of Public Health. Dr. Wisdom focuses on health disparities/health care equity, infant mortality/maternal and child health, chronic disease, unintended pregnancy, physical inactivity, unhealthy eating habits, and tobacco use. She founded the award-winning African American Initiative for Male Health Improvement (AIM-HI) and most recently, the Women Inspired Neighborhood (WIN) Network, which aims to improve access to healthcare and reduce infant mortality in neighborhoods in Detroit. Dr. Wisdom has a bachelor’s degree from the University of Pennsylvania and a medical degree from the University of Michigan.

SARA WOHLFORD
Sara Wohlford is the efficiency and sustainability officer for Carilion Clinic, Roanoke, Virginia, where she facilitates and coordinates programs for the healthcare system that reduce inefficiencies and waste, and promote environmental sustainability. After receiving a master’s degree in public health from Virginia Tech, Ms. Wohlford conceptualized and proposed her current position, created a sustainability work structure for Carilion’s seven hospitals, developed the Carilion Clinic Environmental Stewardship Council, and is currently developing a program to donate thousands of pounds of excess medical supplies to support medical education as well as local and international missions. She mobilized dozens of sustainability champions, green teams, and workgroups from multiple nursing units and departments within the system to help actualize the projects and goals for sustainability. Ms. Wohlford’s projects will increase recycling, decrease energy utilization, decrease natural resource consumption, and divert tens of thousands of pounds of waste from Virginia landfills annually.
Modern Healthcare

CONGRATULATES

2015 Gail L. Warden Leadership Excellence Award Recipient:

Richard J. Umbdenstock
Past President & CEO, American Hospital Association

Thank you for your commitment to driving change and improvement in our nation’s healthcare system.

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Recently celebrating its first year, the National Council on Administrative Fellowships (NCAF) was officially established by the National Center for Healthcare Leadership, in collaboration with the Association of University Programs in Health Administration and the Commission on the Accreditation of Healthcare Management Education. NCAF is an organizational membership of administrative fellowship programs and graduate programs participating in an ongoing national dialog about how to continuously improve fellowship opportunities. Administrative fellowships are widely viewed as a critical stepping stone for many early careerists who aspire to senior leadership roles.

As of November 2015, NCAF’s membership included 55 administrative fellowship and 33 graduate programs, who have put much effort into the success of this extraordinary initiative.

The first step that NCAF members took to improve the current fellowship process was the establishment of a Code of Good Practice, which outlines the roles and responsibilities of each stakeholder group as well as a uniform date for fellowship application deadlines, offer dates and an offer acceptance timeframe. In 2016, NCAF will be implementing the first-ever centralized application system for administrative fellowships. This is a big step towards a more streamlined and effective fellowship application and recruitment process.

If you are interested in learning more about NCAF or your organization is interested in supporting NCAF’s work, please contact Marie Rowland at mrowland@nchl.org.
CHAMBER OF HEALTH: A NEW ORGANIZING FRAMEWORK FOR SUSTAINABLE US HEALTH IMPROVEMENT

In virtually every community today, there are countless initiatives underway to improve population health, however, the lack of coordination, integration, and sharing of best practices threatens the ultimate sustainability of these efforts. Our country does not have an action issue: it has a leadership and a sustainable business-model issue. The National Center for Healthcare Leadership and Hammes Company will be releasing a white paper on the Chamber of Health™ concept. This effort will include voluntary leader engagement at the community, city, regional (and ultimately national) levels, bringing together the business community, healthcare providers of all types, public health services, community organizations, government entities, and other public and private stakeholders responsible for the health and well-being of community members.

Our goal is for these not-for-profit, membership- and grant-funded organizations to create a durable, mission- and metrics-driven, leader-to-leader exchange to develop and support sustainable health improvement. A key element of the Chamber of Health™ mission will be to create a collaborative/partnership/leadership mentality in communities that transcends competition between stakeholders for the betterment of community health.

We look forward to working across the field to make this concept a reality. If you are interested in participating as a partner community or in supporting this effort at a national level, please contact Jay Warden at jwarden@hammesco.com or Joyce Anne Wainio at jwainio@nchl.org.

BEST ORGANIZATIONS FOR LEADERSHIP DEVELOPMENT (BOLD), 2016 EDITION

For over 10 years, the National Center for Healthcare Leadership has conducted industry-wide surveys of leadership development practices in healthcare settings. In 2014, NCHL launched a national awards program—Best Organizations for Leadership Development (BOLD)—to recognize health systems that were making industry-leading investments in the next generation of healthcare leaders. This winter, NCHL will once again offer this signature recognition program to all health systems.

While the BOLD program provides recognition to a select few health systems, it provides much more to all who participate. Every health system completing the survey is eligible to receive a customized benchmarking report, providing detailed information about how their leadership programs compare to their peers nationally in 11 key dimensions. This information can help guide wise investments in developing new programs as well as evolving existing ones.

For a sample copy of the benchmarking report and to receive notice when the survey opens, please contact Cassia Carter at ccarter@nchl.org.
EXPANDING GLOBAL ACCESS TO US EXPERTISE IN HIGH-QUALITY HEALTHCARE

Formally established in 2010, the US Cooperative for International Patient Programs (USCIPP) is an organizational membership association that supports US hospitals, health systems, and academic medical centers in their work expanding global access to US expertise in high-quality health care. As of November 2015, USCIPP’s membership included 61 Full and Associate organizations.

An important part of USCIPP’s work involves conducting annual benchmarking surveys of international patient programs to evaluate provider services offered, financial metrics, operational metrics, volumes, and the nature of international patient flows into the US. The collection and standardization of these data allow members to benchmark their programs’ operations against programs at peer institutions. USCIPP members also support a portfolio of research activities through a sponsored projects fund (SPF). Recent projects of SPF have included predictive modeling for healthcare markets; an assessment of international activities members are pursuing outside of inbound patient care; and systematic staffing and compensation analyses for international patient care positions.

Coupled with the robust networking opportunities provided by membership, USCIPP’s data and research capabilities offer leaders in international healthcare access to an important set of tools. In particular, membership affords executives both an understanding of the industry’s major trends and a mechanism to inform internal decisions regarding operations and program growth. Access to this unique forum of knowledge, networking, and collaboration allows for the development of data-driven strategies that align with initiatives at the institutional level more broadly, particularly as international healthcare represents an increasingly significant portion of hospitals’ business. As the international mission roles of US healthcare providers continues to grow in education and management as well as direct care, the continued exchange of new ideas and the availability of reliable data are crucial for senior leaders seeking to integrate international services into their organizations’ long-term strategic planning.

If you are interested in learning more about USCIPP, please contact Jarrett Fowler at jfowler@nchl.org.

### USCIPP MEMBERS

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** Representing Abbott
Northwestern Hospital, Children’s Hospital and Clinics of Minnesota, Gillette Children’s Specialty Healthcare, North Memorial Medical Center, Phillips Eye Institute, Regions Hospital, University of Minnesota Masonic Children’s Hospital, University of Minnesota Medical Center

*** Representing Brigham & Women Hospital, Dana Farber Cancer Institute, Massachusetts General Hospital, McLean Hospital, Spaulding Rehabilitation Network, teaching affiliates of Harvard Medical School

**** Representing Chase Cancer Center, the Renfrew Center, Temple University Hospital, Thomas Jefferson University Hospital

† Associate Member
LEADING IN THE FUTURE: REFRESHING THE NCHL HEALTH LEADERSHIP COMPETENCY MODEL

Ten years ago, NCHL’s Health Leadership Competency Model was completed and included the behavioral and technical characteristics that leaders must possess to be successful. This groundbreaking research was intended to serve as the basis for identifying training and development initiatives for health leaders from graduate education through the course of their careers.

Since that time, healthcare has gone through tremendous change and leaders are required to develop new competencies. For example,

- Innovation to support consumer-oriented service delivery changes, such as retail, virtual visits, urgent care, and do-it-yourself healthcare
- Culture change leadership to successfully lead mergers and acquisitions and other partnerships across sectors
- Resiliency to manage the organization’s success in conjunction with significant changes in payment incentives, including value-based purchasing and bundled payments
- Operational ingenuity to respond to increased cost sharing and price sensitivity and less consumer choice, including higher deductibles and narrower networks of care
- Boundary-spanning collaborations beyond the walls of a hospital or healthcare system to create a culture of health
- “Big data” strategies to utilize EHR data and other data sources to create a learning organization
- Empathy to build teams that better serve patients, families, and caregivers

To this end, NCHL is looking to refine and revalidate an NCHL Health Leadership Competency Model 3.0 by conducting research—including interviews, focus groups, and survey research—to validate leadership competencies of leaders more broadly across the health ecosystem (healthcare delivery, community health, public health), and convening expert panels to obtain consensus on leadership competencies needed to be successful leaders in the emerging health ecosystem.

NCHL has gathered together a wonderful Competency Model Advisory Council, and we look forward to working with them over the coming year to do this important work.

For more information about this research, contact Cassia Carter at ccarter@nchl.org.

COMPETENCY MODEL ADVISORY COUNCIL MEMBERS

Gina Cronin, Cleveland Clinic
Joan Evans, Cone Health
Randa Hall, University of Alabama at Birmingham
Craig Loundas, PhD, University of Pennsylvania Health System
Cheryl Lulias, Medical Home Network
Mary Nash, PhD, Rush University Medical Center
Kathy Oswald, Henry Ford Health System
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Alice Sapienza, DBA, Simmons College, School of Management
Edward Walker, MD, University of Washington
Tara Wiedeman, Carilion Clinic
Michael Wright, EdD, North Shore-LIJ Health System
RUSH UNIVERSITY

Rush is a not-for-profit academic medical center comprising Rush University Medical Center, Rush University, Rush Oak Park Hospital, and Rush Health.

Rush University is home to one of the first medical colleges in the Midwest and one of the nation’s top-ranked nursing colleges, as well highly-ranked graduate program's health systems management and allied health. Rush’s Department of Health Systems Management operates under a practitioner-teacher model, in which the majority of courses and internships are led by practitioner faculty members who are leaders at Rush and other major healthcare institutions. Practitioners work in close partnership with a team of academic faculty and staff who oversee day-to-day operations and set direction for the department’s program of scholarly activity. The department’s MS-HSM program is CAHME-accredited and recognized as a top five program by U.S. News & World Report.

The Rush Center for the Advancement of Healthcare Value in Health Systems Management is dedicated to strengthening the evidence base for transformational improvements in healthcare value. The Center is unique, because of its deep integration with the practice community, with results directly informing improvements in quality and safety, efficiency and the patient experience.

UNIVERSITY OF MICHIGAN

The mission of the University of Michigan (U-M) is to serve the people of Michigan and the world through preeminence in creating, communicating, preserving and applying knowledge, art, and academic values, and in developing leaders and citizens who will challenge the present and enrich the future. Its School of Public Health (SPH) seeks to create and disseminate knowledge with the aim of preventing disease and promoting the health of populations in the United States and worldwide. SPH is especially concerned with health equity and thus has a special focus on disadvantaged populations who suffer disproportionately from illness and disability. SPH serves as a diverse and inclusive crossroads of knowledge and practice, with the goal of solving current and future public health problems.

U-M’s Department of Health Management and Policy (HMP) seeks to cultivate academic and healthcare leaders who create and apply evidence-based knowledge to enhance the health of individuals and communities. HMP offers graduate programs in health services management, health policy, and health services research. U-M’s graduate program in health management and policy has been ranked #1 by U.S. News & World Report since 1993, confirming the contributions that its 4,000+ graduates are making as leaders in health care, public health, and policy throughout the world.

The Griffith Leadership Center (GLC) in Health Management and Policy was established in 2004 to cultivate exceptional leaders who will transform health and healthcare for a changing world. The GLC works to strengthen and catalyze connections among research, teaching, and practice in health management and policy.
WHEN WE LOOK FOR THOSE WHO INSPIRE, ENCOURAGE AND LEAD, WE SIMPLY TURN TO THOSE AROUND US.

CONGRATULATIONS TO THE 2015 GAIL L. WARDEN LEADERSHIP EXCELLENCE AWARD RECIPIENT

Rich Umbdenstock
We applaud the
National Center for Healthcare Leadership
for their work to ensure that high quality leadership is available to meet the challenges of delivering quality patient healthcare in the 21st century.

And we congratulate this year’s honoree

Richard Umbdenstock
Past President and Chief Executive Officer
American Hospital Association

Mark L. Claster
Chairman, Board of Trustees

Michael J. Dowling
President & Chief Executive Officer