HEALTHCARE ROUNDTABLE
An Informative Q&A with OC’s Top Healthcare Professionals

Barry Arbuckle, Ph.D.
President and Chief Executive Officer
MemorialCare

Sunny Bhatia, MD, MMM, FACC, FSCAI
CEO, Region I and Chief Medical Officer
Prime Healthcare

Robert T. Braithwaite
President and CEO
Hoag Memorial Hospital Presbyterian

Ray Chicoine
President
Monarch HealthCare

Mark E. Costa
Senior Vice President
Kaiser Permanente

Kimberly Chavalas Cripe
President and CEO
CHOC Children’s

Janeen Hill, Ph.D.
Professor, Founding Dean
Crean College of Health & Behavioral Sciences
Chapman University

Chad T. Lefteris
CEO
UCI Health

Jennifer Mitzner, MPA, CPA
Chief Executive Officer
Hoag Orthopedic Institute

Meghan Newkirk
General Manager, Southern California
UnitedHealthcare

Gene Rapisardi
Market President, Southern California and Nevada
Cigna

Annette M. Walker
President
City of Hope Orange County

Erik G. Wexler
Chief Executive Officer
Providence, Southern California
HEALTHCARE Roundtable Participants

Chapman University – Crean College of Health and Behavioral Sciences
Chapman College of Health and Behavioral Sciences at Chapman University combines extraordinary research, education and clinical practice to educate tomorrow’s healthcare professionals. At the heart of its mission is Crean College’s deep commitment to engaging diverse faculty, students and staff in community outreach, learning, research and evidence-based practice. The college emphasizes an ethical, interdisciplinary approach to understanding health across the lifespan. Crean College offers a variety of undergraduate and graduate degree programs aimed at preparing students for careers in healthcare and human services settings. Each program connects classroom learning to real-world applications in order to foster interpersonal skills, knowledge and practical expertise.

CHOC Children’s
Illness or injury shouldn’t put childhood on pause. That’s why CHOC Children’s has built a growing pediatric healthcare community of premier facilities and compassionate experts focused on keeping kids happy and healthy. Children and families in the region have access to CHOC’s hospital campuses in Orange and Mission Viejo, as well as many primary and specialty care centers, more than 100 programs and services and four centers of excellence: The CHOC Children’s Heart, Neuroscience, Orthopaedic and Hyundai Cancer Institutes. The Research Institute at CHOC offers access to clinical trials that can’t be found anywhere else. There, scientists translate the latest advances to meet the individual needs of patients at each stage of their lives. CHOC’s commitment to pediatric mental health includes an inpatient center that is the only facility in the region to offer specialty programming for children ages 3 to 12, and outpatient services. Learn more at choc.org.

Cigna
Cigna Corporation is a global health service company dedicated to improving the health, well-being and peace of mind of those we serve. We deliver choice, predictability, affordability and access to quality care through connected, personalized solutions that advance whole person health, both in body and mind. With more than 170 million customer and patient relationships in more than 30 countries and jurisdictions, we harness actionable insights that drive better health care results. Our global workforce of more than 70,000 employees are dedicated to living our mission and being champions of our customers and communities each and every day.

City of Hope
City of Hope is an independent biomedical research and treatment center for cancer, diabetes and other life-threatening diseases. Founded in 1913, City of Hope is a leader in bone marrow transplantation and immunotherapy such as CAR T cell therapy. City of Hope’s translational research and personalized treatment protocols advance care throughout the world. Human synthetic insulin and numerous breakthrough cancer drugs are based on technology developed at the institution. A National Cancer Institute-designated comprehensive cancer center and a founding member of the National Comprehensive Cancer Network, City of Hope is ranked one of America’s “Best Hospitals” in cancer by U.S. News & World Report. Its main campus is located near Los Angeles, with additional locations throughout Southern California. For more information about City of Hope, follow us on Facebook, Twitter, YouTube or Instagram.

Hoag Memorial Hospital Presbyterian
Hoag is an approximately $1 billion nonprofit, regional health care delivery network in Orange County, California, that treats more than 30,000 inpatients and 480,000 outpatients annually. Hoag consists of two acute-care hospitals – Hoag Hospital Newport Beach, which opened in 1952, and Hoag Hospital Irvine, which opened in 2010 – in addition to nine health centers and 13 urgent care centers. Hoag is a designated Magnet® hospital by the American Nurses Credentialing Center (ANCC). Hoag offers a comprehensive blend of health care services that includes five institutions providing specialized services in the following areas: cancer, heart and vascular, neurosciences, women’s health, and orthopedics through Hoag’s affiliate, Hoag Orthopedic Institute, which consists of an orthopedic hospital and two ambulatory surgical centers. Hoag has been named one of the Best Regional Hospitals in the 2019 - 2020 U.S. News & World Report.

Hoag Orthopedic Institute
Hoag Orthopedic Institute is celebrating its 10th anniversary in November 2020. Our mission has never wavered to be the premier musculoskeletal system of care in Orange County, sought for our superior outcomes and value. We at HOI are proud to be ranked nationally by U.S. News & World Report for orthopedic care, and value. We at HOI are proud to be ranked nationally by U.S. News & World Report for orthopedic care, which demonstrates our level of expertise in orthopedics, and by CMS for our 5-star patient experience. Through our hospital to our 4 surgery centers and clinics, our dedicated orthopedic specialist physicians and staff are committed to quality clinical outcomes and patient centered care.

Kaiser Permanente
Kaiser Permanente is committed to helping shape the future of health care. We are recognized as one of America’s leading health care providers and not-for-profit health plans. Founded in 1945, Kaiser Permanente has a mission to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve. We currently serve 12.3 million members in eight states and the District of Columbia. Care for members and patients is focused on their total health and guided by their personal physicians, specialists and team of caregivers. Our expert and caring medical teams are empowered and supported by industry-leading technology advances and tools for health promotion, disease prevention, state-of-the-art care delivery and world-class chronic disease management. Kaiser Permanente is dedicated to care innovations, clinical research, health education and the support of community health. For more information, go to kp.org/share. For information about Kaiser Permanente Irvine Medical Center, visit kp.org/orangecountyand follow us on Twitter @KPPOrthrive.

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More than ever, Hoag is here to help.

As Orange County’s highest-ranked hospital, Hoag is the place to turn to for timely information, reassurance and care in these uncertain times.

Our dedicated physicians, nurses and staff stand ready to safely deliver world-class care, just as we have for nearly 70 years.

This is what we do. We are here for you. And we will overcome this, together.

To access Hoag for all of your health care needs, visit

hoag.org/trust
MemorialCare
MemorialCare, a nonprofit Southern California integrated delivery system and innovator in evidence-based medicine, has more than 200 locations in Orange and Los Angeles Counties; 14,000 employees; affiliated physicians and volunteers; top hospitals – Orange Coast Medical Center in Fountain Valley, Saddleback Medical Center in Laguna Hills, Long Beach Medical Center and Miller Children’s & Women’s Hospital Long Beach; award-winning physician groups MemorialCare Medical Group and Greater Newport Physicians; Seaside Health Plan; and Southern California’s largest high-value ambulatory care network with convenient, cost-effective health centers, outpatient surgery, imaging, dialysis, urgent care and breast centers. MemorialCare is one of the most well-regarded health systems in Southern California. In the last year alone, MemorialCare Orange Coast Medical Center was named the top hospital in all of Orange County by the Orange County Register. MemorialCare Saddleback Medical Center was number two in the same survey. U.S. News and World Report ranked MemorialCare Long Beach Medical Center in the top 12 in Los Angeles County, and the top 22 in California. Integrated Healthcare Association, one of the leading professional organizations in the healthcare industry, awarded MemorialCare Medical Group & Greater Newport Physicians with the Excellence in Healthcare Award and AMP Medicare Advantage 4.5 Star Recognition.

Monarch HealthCare
Monarch HealthCare, part of OptumCare, is an Independent Practice Association (IPA) caring for patients since 1994. Monarch is a leading health care delivery organization that is helping transform health care through best-in-class quality care and an improved experience through a “patient-first” philosophy of healthcare. With more than 2,500 private-practice physicians and 220,000 Orange County and Long Beach residents, Monarch has been recognized by health plans and business groups for providing high quality care and excellent service. We aspire to be the solution for affordable quality care for all patients in the communities we serve. For more information about Monarch, please visit www.monarchhealthcare.com.

Prime Healthcare
Prime Healthcare is an award-winning national hospital system with 45 acute-care hospitals and more than 100 outpatient locations providing nearly 40,000 jobs in 14 states. Fifteen of the hospitals are not-for-profit and members of the Prime Healthcare Foundation, a 501(c)3 public charity. Based in Ontario, California and one of the largest hospital systems in the country, Prime Healthcare and its hospitals have been recognized as among the “100 Top Hospitals” in the nation 47 times and among the nation’s top health systems several times according to IBM Watson Health. Prime Healthcare stands apart due to its unique ability to save and transform community hospitals, and has been named the “fastest-growing hospital system” in the country by Modern Healthcare. Prime Healthcare continues to grow and fulfill its mission of “saving hospitals, saving jobs and saving lives” and remains committed to delivering exceptional quality care and creating a legacy that will improve community healthcare. Visit www.primehealthcare.com.

Providence, Southern California
Providence, Southern California, has 13 award-winning hospitals, more than 150 physician offices and numerous outpatient centers across Orange and Los Angeles counties and the High Desert. We employ a total of 35,000 caregivers. In Orange County, Providence operates St. Jude Medical Center, Fullerton; St. Joseph Hospital, Orange; and Mission Hospitals in Mission Viejo and Laguna Beach. Hoag Hospitals in Newport Beach and Irvine are affiliates. Providence Southern California is a region of Renton, Wash., and Irvine-based Providence, with 51 hospitals across seven Western states. We are a mission-centered, values-based ministry, committed to outreach to the poor and vulnerable in the traditions of our founding orders of religious sisters. In Orange County in particular, we focus on partnering to care for those who are homeless and those who suffer mental health issues.

UCI Health
UCI Health comprises the clinical enterprises of the University of California, Irvine. As Orange County’s only academic health system and tertiary/quaternary care center, UCI Health plays a unique role in serving the health and wellness needs of our community. Patients can access UCI Health at physician offices throughout Orange County and at its main campus, UCI Medical Center in Orange. U.S. News & World Report has listed the 417-bed acute care hospital among America’s Best Hospitals for 19 consecutive years. UCI Medical Center features specialty ambulatory care clinics, Orange County’s only National Cancer Institute-designated comprehensive cancer center, high-risk perinatal/infant neonatal program, combined Level I trauma center and Level II pediatric trauma center and is the primary teaching hospital for UCI School of Medicine. UCI Health serves a region of nearly 4 million people in Orange County, western Riverside County and southeast Los Angeles County.

UnitedHealthcare
UnitedHealthcare is dedicated to helping people live healthier lives and making the health system work better for everyone by simplifying the health care experience, meeting consumer health and wellness needs, and sustaining trusted relationships with care providers. In the United States, UnitedHealthcare offers the full spectrum of health benefit programs for individuals, employers, and Medicare and Medicaid beneficiaries, and contracts directly with over 1.3 million physicians and care professionals, and more than 6,000 hospitals and other care facilities nationwide. The company also provides health benefits and delivers care to people through owned and operated health care facilities in South America. UnitedHealthcare is one of the businesses of UnitedHealth Group (NYSE: UNH), a diversified health care company. For more information, visit UnitedHealthcare at www.uhc.com or follow @UHC on Twitter.

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WE’RE IN THIS, TOGETHER.

Cigna and our provider partners in Southern California thank our heroes working on the front lines to care for all of those in need, and for helping to improve the health in our community. We are here for our customers to offer support and resources such as virtual medical and behavioral services. Together with our provider partners, we share the common goals of improving health and affordability, now more than ever.

For more information, contact your broker. To speak with a Cigna representative, call 855.210.5765.

Offered by Cigna HealthCare of California, Inc.

Product availability may vary by location and plan type and is subject to change. All group health insurance policies and health benefit plans contain exclusions and limitations. For costs and details of coverage, contact a Cigna representative.

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Public health crises continue to fill the headlines. Whether it’s novel coronavirus, opioids, superbugs or the ongoing epidemic of healthcare-associated infections, how does your health system show leadership in protecting patients and the community?

Chad T. Letteris, UCI Health:
Advancing knowledge to protect our patients and the community in the face of new and existing public health threats is part of the UCI Health mission. Our infectious disease and epidemiology experts are leaders in the fight to control COVID-19 in Orange County. UCI Health launched Southern California’s first National Institutes of Health therapeutic COVID-19 trial with the drug remdesivir and our medical center’s operations team has helped institutions around the county to prepare to meet expected surges of sick patients. Though the opioid crisis no longer dominates headlines, it is still with us. UCI Health continues its leadership role with the SafeRx OC coalition. In December, UCI Health was named to the California Hospital Compare Opioid Care Honor Roll recognizing our efforts to improve healthcare response to the opioid crisis and support patients with opioid use disorder.

Kimberly Chavalas Cripe, CHOC Children’s:
First and foremost, our health experts rely on and share evidence-based best practices that are continually evaluated. These practices are incorporated into organizational-wide goals for which our leaders are held accountable. Our population health division collaborates with primary and specialty care physicians, as well as our schools, to help them better coordinate care for patients and patient families to improve outcomes, with the ultimate goal of advancing the health of our community’s children. Our Sharon Disney Lund Medical Intelligence and Innovation Institute brings experts from around the globe together to address pediatric health problems collaboratively and advance care and medicine for children.

Meghan Newkirk, UnitedHealthcare:
The COVID-19 outbreak is an unprecedented time in our country and one that calls for an unprecedented industry response. UnitedHealthcare and UnitedHealth Group are addressing these unique needs by expanding access to care, developing innovations to support and protect the healthcare workforce and providing funds to support the needs of vulnerable populations nationwide. UnitedHealthcare is waiving member cost-sharing for the treatment of COVID-19 through May 31, 2020 for its fully-insured Commercial, Medicare Advantage and Medicaid plans. This builds on the company’s previously announced efforts to waive cost-sharing for COVID-19 testing and testing-related visits. Additionally, a recent UHG study demonstrated that a simple, self-swab test is as effective in identifying COVID-19 infections as the clinician-collected test. Widespread adoption of this less invasive test will reduce exposure for health care workers and improve overall testing efficiency across the country. UnitedHealth Group has also announced an initial $25 million commitment to support those most directly impacted by the public health emergency nationwide, including health care workers, hard-hit states, seniors and people experiencing food insecurity or homelessness.

What are some lessons learned from the coronavirus pandemic for health care and government?

Erik Wexler, Providence, Southern California:
The world was caught off guard by this pandemic and all are doing everything possible to respond. To be clear, I am not placing blame. A clear lesson is we simply must be better prepared with strategic stockpiles of personal protective equipment and equipment needed to deliver care in emergencies. These stockpiles should be regionally located for quick distribution to areas most in need and should be regularly inventoried to ensure it meets population needs and has not expired. Secondly, coordinating universal health care protocols for use of PPE, staff deployment and other such policies should be enhanced. A statewide central command center that can be activated urgently with specified expert staffing would be useful to manage this for the health care delivery system. Lastly, diagnostics (e.g. lab testing) must be deployed quickly or left to the CDC. We must design systems for health care systems to expedite testing capability.

Mark E. Costa, Kaiser Permanente:
Hospitals and Health Systems across the Country have always prepared and trained for emergent situations (Floods, Earthquakes, Active Shooters, etc.) however COVID-19 has challenged us in many unforeseen ways. I believe that we are seeing this across the nation and world. Many of us are hearing about the four “S” approach (Staff, Stuff, Space and Systems) on the news. In order to best prepare for any situation all four must be working in coordination. When the current situation lessens, we all will have strong lessons that have been learned. The importance of ongoing coordination and collaboration between Health Systems and Government entities being the most important. We are learning that we must have facilities that are flexible as well as the necessary inventories of equipment and supplies that are available when demand surges. Kaiser Permanente Orange County is proud of the active role it is playing in responding to community demand associated with this pandemic. We are equally proud of our Physicians, Nurses and all staff members who are on the front-lines providing life-saving care.

Annette Walker, City of Hope Orange County:
The COVID-19 pandemic impacted nearly every aspect of health care. As an institution that solely focuses on cancer and serious illness, City of Hope’s first priority was ensuring the safety of our patients - who are particularly vulnerable – and the safety of our physicians and staff. Protecting our patients meant implementing a no-visitor policy, which was a hard but necessary decision. We also learned that we can anticipate requisite action and move swiftly. For example, our teams began working from home before mandates were put into effect. As health care providers, we all saw the importance of working together to tackle a pressing medical issue. We’d like for this spirit of collaboration to continue because, frankly, cancer and other serious illnesses aren’t going away after COVID-19.

Sunny Bhatia, Prime Healthcare:
There were clear warnings of a potential pandemic that went unheeded by the government. The world, including the United...
CITY OF HEROES

To the doctors and nurses everywhere, tirelessly sacrificing
To the caregivers going above and beyond
To the researchers in their relentless pursuit of answers
To the patients and families remaining courageous
To the supporters giving their time and more
To the communities coming together

Thank you.
HEALTHCARE ROUNDTABLE

States, was ill-prepared to handle the enormous responsibilities required to combat this pandemic. Funding for pandemic preparedness has been reduced and was de-prioritized. The U.S. Government did not recognize the gravity of the situation in a timely manner or rely on the best available evidence to inform decision-making. Many of the states within the U.S. approached the pandemic with different intensity and strategies. This led to an inconsistent and ineffective national message regarding the magnitude of this crisis. The constraints on supply chain, such as personal protective equipment (PPE), ventilators and medications are impeding the ability for hospitals and health care providers to deliver needed therapy while also adequately protecting themselves. The dependence on international manufacturing, especially from Asia, has made procurement of needed supplies extremely challenging. The nation and health care system were simply not prepared, at all levels, to handle this crisis.

Janeen Hill, Chapman University:
A major lesson is a realization that cutting funding for basic science research and for multi-national disease monitoring has very different implications for understanding and responding to disease.

Outpatient care is still trending upwards as both a convenience and cost-saving focus for consumers, employers and health plans. Have you addressed this transition and how has the growth of outpatient care advanced value in health care?

Barry Arbuckle, Ph.D., MemorialCare:
With COVID-19 impacting how healthcare is delivered, MemorialCare’s transformation from a hospital system to an integrated healthcare network provides advantages to consumers, employers and health plans, thanks to convenient, easily accessible and lower cost outpatient services. With over 200 health centers, outpatient surgery, imaging, urgent care, breast care and dialysis centers throughout Orange County, Long Beach and the South Bay complementing our four hospitals, we can offer the best in health, wellness, prevention, disease management and treatment in the right location with substantial savings for employers, health plans and patients.

Technological advances, for example, mean many surgical patients spending days in a hospital will receive care in convenient, lower cost outpatient centers without overnight hospital stays. Unlike most health systems, our ambulatory centers are not operating as Hospital-Based Outpatient Departments which receive higher reimbursement, but instead as high quality, lower priced Ambulatory Care Centers. And we’re unveiling more health centers, innovative programs, progressive partnerships and comprehensive services where people live and work.

COVID-19 has upended healthcare and exposed fundamental weaknesses in our healthcare system. Lessons we learn from this pandemic will set new trends.

Janeen Hill, Ph.D., Professor, Founding Dean Crean College of Health & Behavioral Sciences Chapman University

Ray Chicoine, President Monarch HealthCare

COVID-19 has upended healthcare and exposed fundamental weaknesses in our healthcare system. Lessons we learn from this pandemic will set new trends.

What are the current challenges impacting health care? What major trends do you expect in the next 3-5 years? Will the landscape be much different than what we see now? How will virtual care affect the delivery of health care in the community in the next 3-5 years?

Gene Rapisardi, Cigna:
One of the biggest challenges is the affordability of care, with the medical rate of inflation continuing to far outpace the general rate of inflation. This puts a financial strain on the health care budgets of employers who sponsor health plans for their employees and who pay the lion’s share of the bill. Likewise, it puts cost pressure on individuals themselves who see their medical expenses rising year after year. There will be much more focus on keeping down the cost of care and more collaboration among stakeholders to achieve it — and it will happen much sooner than 3–5 years. It absolutely has to. Virtual care will undoubtedly play a bigger role as patients grow more familiar and comfortable with it. Cigna recently expanded its relationship with MDLIVE for behavioral health virtual visits, and now, during the COVID-19 crisis, virtual care is proving to be vitally important.

Janeen Hill, Chapman University:
COVID-19 has upended healthcare and exposed fundamental weaknesses in our healthcare system. Lessons we learn from this pandemic will set new trends. These will likely include a more inclusive healthcare system valuing access to care for all to ensure we as a region are healthy; funding mechanisms for hospitals and healthcare facilities to ensure their infrastructure is robust; inclusion of robust epidemiological data to inform decision-making; emphasis on more effective healthcare teams to deliver care; reliance on telehealth and other remote technologies to reduce cost and improve access to care; and technologies such as 3D printing to customize care.

Meghan Newkirk, UnitedHealthcare:
One of the most important emerging healthcare trends and technologies taking hold — particularly over these last several months — is the use of telehealth. Virtual visits enable you to connect 24/7 with a health care provider on their smartphone, tablet or personal computer. This is especially valuable to anyone with a chronic continued on page B-38
Healthcare Heroes. Our Community.

Thank You.

We extend our heartfelt thanks to every one of our 12,000 employees and more than 2,000 physicians for their extraordinary dedication to providing the very best care for our patients, not only in the midst of a pandemic, but each and every day. And to our community, thank you for your generous donations of supplies, food for our employees, and most of all, your beautiful words of appreciation that are pouring in each day.

For community. For crises. We’re here.

memorialcare.org
For many years we’ve been hearing how data and analytics can improve the quality of patient care. What type of data collection and analytics takes place during a doctors’ office visit, in-hospital stay or in other settings? How are data used to improve health and prevent people from getting seriously ill? How will the use of AI and virtual reality in medicine benefit patient safety, and what will it mean for diseases that are currently incurable or difficult to treat?

Robert T. Braithwaite, Hoag Memorial Hospital Presbyterian: The use of artificial intelligence, virtual reality and augmented reality in medicine is not some distant future; it is our current reality. Hospitals like ours are harnessing the power of AI to optimize the accuracy and performance of mammographic screening for breast cancer, as well as utilizing the technology in cardiac and thoracic surgeries. And Hoag is one of the first hospitals in Orange County to use VR/AR in complex brain surgeries. Our neurosurgeons now fit patients with VR goggles prior to surgery to perform a “fly through” of their brains, see their tumors and get a better understanding of what their surgeons plan to do. We are using similar technology to enhance physical therapy, and we plan to use it for addiction treatment and to offer guided meditations prior to and during medical infusion procedures. We find that these advanced tools, in the hands of well-trained experts, give patients more agency in their treatment, lower anxiety and improve outcomes.

Meghan Newkirk, UnitedHealthcare: Data and analytics are crucial to a high-performing health care system, helping health care providers better respond to people’s needs, encourage positive health decisions, and empower employees to take charge of their health. As an example of how effective efforts like this can be, a self-funded national retailer used it to analyze out-of-network claims for back surgeries, isolating the area and factors contributing most to these costs, and then launched an educational campaign that achieved estimated savings of nearly $1 million.

Jennifer Mitzner, MPA, CPA
Chief Executive Officer
Hoag Orthopedic Institute:

Hoag’s surgeons, anesthesiologist and medical team members worked cohesively to create our enhanced recovery program’s (ERP), which is designed to support our joint replacement patients that are ready to go home within hours after surgery.

Jennifer Mitzner, Hoag Orthopedic Institute:

The conditions of those who seek the immediacy and convenience of consulting a doctor without braving Southern California traffic to get there. In the light of the recent COVID-19 outbreak, telehealth has become a crucial way to connect patients with health care providers who can answer initial questions and guide them to a local care provider or public health authority for testing. While telehealth may have the potential to help treat many health issues, the technology is most widely used to address minor and nonemergency medical conditions. These virtual patient-provider visits are now being embraced by physicians nationwide and may over time become a method of choice by consumers.

Ray Chicoine, Monarch HealthCare:

We gather data from our provider visits, claims, pharmacy, and more. This data is vital to understanding the needs of our patient. While we have designed our own patented systems to understand data and create customized outreach for our patients, we’re also fortunate to be part of Optum, which is one of the largest healthcare analytics companies in the world. We are able to use many Optum resources to further help identify patients and get more care they need.

Medicare care is moving toward much less invasive diagnostic and treatment procedures benefiting patients with shorter hospital stays, speedier recoveries, less complications and lower costs. What advances is your organization making in this arena?

Jennifer Mitzner, Hoag Orthopedic Institute:

Hoag Orthopedic Institute has been a leader in reducing the length of stay for our patients while maintaining a great patient experience since 2015. HOI’s surgeons, anesthesiologist and medical team members worked cohesively to create our enhanced recovery programs (ERP), which is designed to support our joint replacement patients that are ready to go home within hours after surgery. Before the program, our average length of stay for a joint replacement patient was 2.1 days and today, many of our same-day joint replacement patients leave as early as two hours post-surgery. Patients who undergo outpatient hip or knee replacements report a high degree of satisfaction (as indicated by our U.S. News ranking for those procedures) and they are happy to be able to get back to their now-mobile lives pain free.

Ray Chicoine, Monarch HealthCare:

We work closely with our provider partners, like OptumCare Medical Group and Surgical Care Affiliates, to ensure open communication and speedy access to high-quality, low-cost care. One of the things we’ve noticed is the important role the health plan also plays in getting better care. Patients who are on a Medicare Advantage plan have better outcomes and stronger coordination of care across all their access points, compared to patients who are on Original Medicare or a supplement. This is due to...

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“It’s been my dream to be part of medicine and give back to the community around me,” says Katie Cornella (MMS ’18), a graduate of Chapman’s Physician Assistant Program now working in cardiology.

BRINGING CARE TO CALIFORNIA AND BEYOND.

As the need for primary care throughout California increases, we imagine a healthier community. The Crean College of Health and Behavioral Sciences at Chapman University is a place where research, technology and inter-professional collaboration intersect to educate tomorrow’s health professional.

Chapman.edu/creangradprograms
to better clinical coordination from the health plans. While each patient should choose a type of Medicare that’s best for their needs, for many there is a true advantage to the Medicare Advantage plans.

**How are you addressing the health and wellbeing of your employees?**

**Kimberly Chavalas Cripe, CHOC Children’s:** Through CHOC’s employee wellness program, our employees have access to full biometric screenings, mindfulness and stress reduction courses, weight management classes, nutrition guidance, maternity and parenting counseling, muscular skeletal exercise programs, and diabetes and hypertension health coaching. For financial wellness, our retirement plan provider offers onsite and virtual retirement and investment counseling. CHOC also provides a diverse platform of benefits plans that include insurance for medical, dental, vision, accidents, hospital admissions, critical illness, life and disability, legal, mental health, pet care, emergency child and elder care, education reimbursement and company paid student loans, as well as a retirement plan with company matching contributions. During the current pandemic, we have provided additional resources for our staff, from free onsite childcare to healthy grab and go meals for their families. We are also providing stress management tips and resources, and we are giving our front-line staff access to telehealth consults with psychologists.

**Ray Chicoine, Monarch HealthCare:** Monarch has always had a strong employee culture. We have weekly health classes, like Zumba, for employees. There are always fun events going on at our offices in Irvine, from food trucks to our annual Halloween costume contest and trick-or-treating for employees’ children. More importantly, our employees come together to give back to the community in a myriad of ways. Our Employee Engagement Committee is a powerful entity within Monarch, and the leaders are constantly finding new avenues for all of us to give back to our communities. Coming together to serve our community is a way for us all to embrace and live our mission.

**With its start-ups and academic centers, Orange County is a hub for innovation. How do we harness this energy and become more innovative when it comes to health care? What aspects of our region’s health care models do we need to disrupt right now, and what should we be doing to transform for next-gen care?**

**Annette Walker, City of Hope Orange County:** Orange County’s thirst for innovation is inspiring and should move health care leaders to embrace more transformational thinking.

**Annette M. Walker**  
President  
City of Hope Orange County

**Janeen Hill, Chapman University:** COVID-19 may be the impetus we need to consider significant disruption in healthcare. The virus is upending the economy, healthcare infrastructure, government role, access to care, political intransigence of the left and right, and multiple other players comprising a healthcare system. We are now forced to innovate, collaborate and compromise to address a pandemic. We need to take advantage of the current disruption and pull together, in an apolitical environment, a team of creative thinkers who are entrepreneurs and leaders in healthcare thought from business, industry and universities. The charge of this group is to imagine a transformation of healthcare that can emerge from the current disruptive crisis.

**Chad T. Lefteris, UCI Health:** Orange County benefits from the innovation and discovery that occurs daily at UCI. UCI Health and colleagues across the UCI Susan and Henry Samuel College of Health Sciences comprise a powerhouse of innovation whose faculty received a record $180 million in research funding for fiscal year 2019. Efforts during the COVID-19 crisis reflect this. Through early April, UCI Health and partners at UCI Beall Applied Innovation have created thousands of face shields for caregivers at UCI Medical Center and other local hospitals. UCI Medical Center launched the region’s first National Institutes for Health clinical trial of a promising therapeutic drug that attacks the virus’s genetic structure. Dr. Phil Felgner, director of UCI’s Vaccine Research and Development Center, is developing tests to determine which COVID-19 survivors’ blood offers the most effective antibodies to generate a robust immune response in victims. Innovation at UCI is leading the way in this fight.

**What do you feel is the effectiveness of social distancing?**

**Sunny Bhatia, Prime Healthcare:** Rather than use the term social distancing, I prefer the term physical distancing. Social isolation during these challenging times can have notable psychological consequences. Physical distancing, 6 feet or more, can reduce COVID-19 transmission rates significantly. The sooner physical distancing measures are introduced and strictly adhered to, the slower infection rates will be and hopefully prevent an unmanageable peak of cases; thereby “flattening the curve.” Such strategies have been extremely effective in other parts of the world, including Asia. Physical distancing, along with other behavioral practices such as hand-washing, covering your coughs and sneezes with a tissue, cleaning frequently touched surfaces and objects daily using a regular household detergent and water, are currently the most effective public health measures to reduce the risk of transmitting COVID-19. Prime Healthcare has created and distributed literature to its patients, providers and communities. We have also implemented a robust telehealth platform to facilitate remote patient care in a safe and effective manner.

Robert T. Braithwaite, Hoag Memorial Hospital Presbyterian  
Our message to the community through this crisis has been, “We show up for you, stay home for us.” Our industry is on the frontlines of this pandemic, and we ask people to cooperate with important social distancing measures.

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A moment of truth

With the uncertainty brought on by the coronavirus, this simple truth remains:

Our gratitude for our caregivers, physicians and donors, as well as the first responders, essential workers, and greater community is unwavering. We thank all of you for your collective efforts to flatten the curve and combat COVID-19.

As we continue to do all we can to save lives and care for each other, we will meet the challenges of the present and look to the future together with dedication, optimism and love.

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Unfortunately, we have several models that show just how effective social distancing is to “flattening the curve” and reducing COVID-19 deaths. I say “unfortunately,” because the states, cities and countries that have taken a more relaxed approach to social distancing have seen more deaths from this pandemic than those that have adhered to strict guidelines. Sweden is held up as an international example of a country that has soft restrictions, and its total number of deaths and its infection rate is greater than its three Nordic neighbors combined. Social distancing works, we are safer at home, and adhering to these guidelines will save lives.

Erik Wexler, Providence, Southern California: It is extremely critical and effective. Society now has learned how important social distancing is and how we do this. Starting early, as California did for COVID-19, is how we quickly bring the spread of these viruses under control and save lives. Some have not taken this as seriously as needed, putting many at risk, even their own loved ones. I fear this is not the last pandemic we will see in our lives and it will be important for us to consider how we can more effectively implement social distancing. Further, protocols for businesses that remain open (grocery stores, restaurants, pharmacies and others) should be developed to help these establishments implement proper efforts to prevent the spread of a virus, including for their own critical workforces.

Employers in Orange County are significant stakeholders in the health care system, seeking high quality and value-based care for their employees. How does your organization engage with corporate entities and what results do those efforts have on patient care, costs and access?

Gene Rapisardi, Cigna: Consulting with employers is an important part of the work we do every day. For example, we advise employer clients on how to create a culture of health within their organization and how to implement a successful wellness program. We also help them determine what type of funding arrangement to choose, and evaluate different health benefits plans that will best meet their needs and the needs of their employees, such as HMO, open access, high-deductible plans, etc. Do they want to offer a very broad network at a higher cost or do they prefer a high-performing network that’s smaller but offers access to quality care at a better price? There are dozens of decisions that employers need to make that affect their health benefits budget as well as the health, wellness and productivity of their employees. It’s our job to help them make choices that are right for them.

Jennifer Mitzner, Hoag Orthopedic Institute: Today, Orange County employers have an ever-increasing stake in the decisions they make on behalf of their employees’ health care. Hoag Orthopedic Institute was an early leader in the development of commercial bundled payments, which provide business with one fixed cost for an episode of care, such as a knee or hip replacement, with a warranty pledge, which accommodates the business’ desire to reduce health care costs while receiving the highest quality care. Patients with employer-based direct contracting programs come to HOI from all over the U.S., have surgery and recover here before returning home, all at a fixed, predictable fee. HOI engages a patient navigator to manage all of the details of each corporate travel patient, which makes the process seamless and stress-free. Our bundled corporate patients – and their employers – report a high degree of satisfaction with this program.

Barry Arbuckle, Ph.D., MemorialCare: With the economic impact of coronavirus, we believe employers will be seeking better value in the care they provide. With the rapid development of commercial bundled payments, our organization has long advocated for this approach and believes it is a critical strategy for employers. As we have seen in the health care system to deliver quality and affordable choices for consumers.

Gene Rapisardi, Cigna: Consulting with employers is an important part of the work we do every day. For example, we advise employer clients on how to create a culture of health within their organization and how to implement a successful wellness program. We also help them determine what type of funding arrangement to choose, and evaluate different health benefits plans that will best meet their needs and the needs of their employees, such as HMO, open access, high-deductible plans, etc. Do they want to offer a very broad network at a higher cost or do they prefer a high-performing network that’s smaller but offers access to quality care at a better price? There are dozens of decisions that employers need to make that affect their health benefits budget as well as the health, wellness and productivity of their employees. It’s our job to help them make choices that are right for them.

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Peace of mind is only a phone call away.

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There has been an increased focus on the need for mental health services in the last few years. Is there a need for more mental health services now than before in Orange County, and if so, what is being done to address this need? Why is it important to treat mental illness at the same time as a substance use disorder, and how does integrated behavioral health treatment help to address both conditions?

Mark E. Costa, Kaiser Permanente:
As the stigma of Mental Illness decreases and the awareness of how important our mental health is along with our Physical Health, the demand for services is certainly increasing in Orange County. This seems to be particularly true when viewing trends related to our younger and senior populations where the incidence of Mental Illness is higher than in the state of California overall. There is also increased awareness of the interrelationship between mental illness and substance use disease. These trends provide Kaiser Permanente and all health care providers and related community organizations the challenge to improve our systems of care. Within Kaiser Permanente Orange County we developed a combined Dual Diagnosis Behavioral Health - SubSTANCE Disease Program within our Laguna Hills Office. Through integrated programs and services, we believe our patients can be better served.

Robert T. Braithwaite, Hoag Memorial Hospital Presbyterian:
As with physical health, the sooner a mental health concern is identified and addressed, the better the outcome. Nationwide, the suicide rate has increased, and it is difficult – and daunting – to predict what the mental health fallout will be from the current COVID-19 pandemic. Hospitals have an obligation to treat mental illness head-on and to recognize the mental health issues that might be underlying other diseases, such as addiction. For teens and their families, the Pickup Family Neurosciences Institute at Hoag launched ASPIRE (After School Program: Intervention and Resiliency Education), an outpatient program for 13- to 17-year-olds with primary mental health disorders and possible co-occurring substance abuse challenges. Mental health also plays a critical role in our adult addiction treatment centers. Our team recognizes addiction as a “family disease,” one in which all members of a family develop their own mental health issues by virtue of living with an addict. At Hoag, we work to address these together offering resources for the whole family.

Kimberly Chavalas Cripe, CHOC Children’s:
CHOC continues to develop mental health programming in response to the rising needs identified in the community. Through a robust training program, training young professionals in psychology, many of whom stay and practice at CHOC or in our community. Last year, CHOC was among the first pediatric health systems to open an in-patient mental health unit with 18 beds. Yet, even with our growth, we cannot adequately address all mental health issues in children in Orange County, as an estimated 750,000 youth in our community can use services. Therefore, we also work closely with community partners and schools to coordinate efforts, share new evidence-based treatments and provide educational opportunities. These activities will help to continue to expand the capacity to provide

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excellent mental health services for children and adolescents in Orange County. Generally speaking, substance use disorders occur along with mental health problems, especially in children and adolescents. Often, children or teens start using substances such as alcohol or marijuana to “treat” anxiety or depression because they aren’t sure how else to manage their feelings. The opposite can happen as well, once teens start using drugs, they can develop more severe anxiety or depression. When only the substance use problem is treated and the underlying mental health issue is not, teens can more easily relapse because the root problem has not been addressed. Likewise, if the substance use dependence is not treated, even with mental health problems addressed, the teen may relapse. We applaud the Department of Health Care Services who is moving to further integrate the treatment of both mental health issues and substance use dependence/addiction as this has been shown to lead to more lasting change.

Gene Rapisardi, Cigna:
One way to improve access to mental health treatment is with virtual care, as Cigna is covering through MDLIVE. Even in densely populated areas like Orange County, virtual visits make it easier and more convenient to access treatment. Sometimes people hesitate to visit a mental health professional in person due to the stigma that unfortunately still remains. Virtual visits can help people overcome that barrier. Cigna is a strong proponent of whole person health where all of an individual’s needs are met holistically. Rather than compartmentalizing mental illness and substance use disorder, it makes sense (generally, as each case is unique) to treat the whole person, because depression may be influencing the substance use, or vice versa. At the same time, it’s important to treat any underlying medical conditions that might be a factor. This approach becomes more efficient and effective when medical, behavioral and pharmacy benefits are integrated.

There is concern across the U.S. that access to quality healthcare is limited. This is true for access to specialists, primary care, care for the uninsured and under-insured and quality care for residents of rural areas. What are hospitals doing to ensure access for residents?

Chad T. Lefteris, UCI Health:
UCI Health is committed to expanding access to academic-based primary and specialty care across Orange County. While the COVID-19 crisis dominates healthcare today, we are moving forward with plans to open new centers and expand existing ones, both physical and virtual. Launched earlier this year, UCI Health OnCall is an app-based telehealth service created to increase convenient access. Our Video Visits program, accelerated to safely meet the needs of patients during the current crisis, is expanding to include nearly two dozen specialties. We are also responding to the state’s shortage of care providers by creating the UCI Health Advanced Practice Providers program to harness the expertise of nurse practitioners, physician assistants and certified registered nurse anesthetists to deliver care where needed and complement the world-class care provided by UCI Health physicians and nurses.

Sunny Bhatia, Prime Healthcare:
Prime Healthcare has long recognized the need to improve healthcare access in rural communities. This is clearly exemplified in Prime Healthcare’s mission to save and improve hospitals so they can deliver compassionate, quality care to patients and better healthcare for communities. In the face of this pandemic, that mission means more than ever. Prime has a long history of saving financially distressed hospitals, many of which are in underserved areas of rural America. In order to further expand access to care in underserved areas and promote education of future physicians, Dr. Prem Reddy, Founder and Chairman of Prime Healthcare, founded the California University of Science and Medicine (CUSM). CUSM created an innovative curriculum and inspires, motivates and empowers students to become excellent and caring physicians. CUSM provides opportunities for medical education to promising minority and disadvantaged students, especially from California. In addition, since 2010, Prime Healthcare hospitals across the country have provided nearly $6.2 billion in charity and uncompensated care.

Improving the “patient experience” is a relatively new concept in medical care, aiming to add more value to patients you serve, such as improving consumer service, staff and accommodations to be more consumer friendly. How has the “consumerism” of healthcare affected your organization and guided your decisions regarding partners and technology investments?

Jennifer Mitzner, Hoag Orthopedic Institute: Since our founding 10 years ago, Hoag Orthopedic Institute (HOI) recognized that patients have a choice in their health care, and we built a model to compete – earning our business one patient at a time with exceptional outcomes at a competitive price through bundled plans. Our HOI Signature experience provides patients with a premier hotel-like stay with the commitment to getting each patient back to doing what they love more quickly and safely, which meets the desires of our patients. The decisions we make to continually improve patient care at HOI are based on providing our consumers with the highest quality healthcare experience coupled with a convenient bundle price. The result: HOI is to date, the only 5-Star CMS rated hospital in Orange County for patient experience.

Mark E. Costa, Kaiser Permanente: Member Centered and Consumer Centered care continues to be our priority at Kaiser Permanente. Just as consumers have driven how services are provided in other industries, such as retail, financial services and hospitality, consumerism is here to stay within our Health Care Industry. This is a good thing.
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members want it, where they want it and how they wish their care to be provided. Our mail pharmacy service is another example of convenient care. These programs and services are not only responsive to those we serve but are many times more cost effective for our insured members and for our organization overall.

Through the continued focus on innovation and optimal use of technology we believe Kaiser Permanente is perfectly positioned to meet today’s and future consumer demands.

Meghan Newkirk, UnitedHealthcare:
Improving patient experience means addressing what’s most important to consumers: receiving quality care at a lower cost, accessible where and when they need it. This was the impetus behind the creation of UnitedHealthcare’s SignatureValue Harmony Network plan in 2019. Harmony provides access to quality, affordable, patient-focused health care for people with employer-sponsored health coverage across five counties in Southern California: Los Angeles, Orange, Riverside, San Bernardino and San Diego. This plan is the result of a unique collaboration between UnitedHealthcare and area care providers, offering access to care at 60 hospitals and more than 9,200 providers. Participants may see potential savings of up to 20 percent on premiums as compared to other HMO plans available in Southern California. It is a clear example of the ways in which the healthcare system can evolve to address consumer interests and offer better care and lower costs.

Youthful Orange County isn’t so young anymore. Roughly 14 percent of the population is over 65, and that number is expected to soar within the next 20 years. As a result, Orange County’s population will be at higher risk for serious illness, including cancer. What impact does the aging population have on local health care?

Janeen Hill, Chapman University:
By 2030, 25% of Orange County residents will be 65+. Seniors are more apt to have one or more major diseases: hypertension, diabetes, cancer. In addition, with aging comes higher incidence of Parkinson’s, Alzheimer’s, stroke, concussion and the neurologic deficits associated with these. The impact of an aging county on local healthcare is enormous. Frankly, we are not prepared to address geriatric care. We are not educating a healthcare workforce adept at geriatric care. Educating future healthcare providers (example: physicians, physician assistants, and physical and speech language therapists) with expertise in the diseases of aging is critical. Forging partnerships with public and private universities with graduate health professional programs (Chapman University being one) to ensure a robust healthcare workforce ready to treat seniors must be considered. However, local hospitals, healthcare organizations and physician groups have an obligation to provide clinical rotations to students. Without these, the new workforce cannot emerge.

Mark E. Costa, Kaiser Permanente:
As our population continues to age it has never been more important to understand the changing health needs and then design a caring, compassionate and responsive delivery system. Kaiser Permanente continues to develop new components of our continuum of care and to strengthen existing Primary Care, Mental Health, Home Care, Long Term Care and Hospice/Palliative Care Services. We also see great opportunity in developing stronger relationships with existing or new community providers of health and social services. In response to our growing elderly population, this may be supportive services related to daily meals, transportation, day care and support for dementia. The bottom line is that no health care provider can alone meet all the health care needs of our communities. We believe we must charter and collaborate with others to create strong systems of care.

Annette Walker, City of Hope Orange County
As more adults reach retirement, they encounter a host of new challenges –economic, social, and of course, health. As a community we need to plan for these changing needs and make sure the required health care resources are available. At City of Hope, we recognize that aging increases the risk of cancer, and other health care concerns often complicate these cases. Our plans to bring highly specialized cancer care to this community is a direct response to present needs and future projections. We aim to be in a position to ensure that all members of our community, including seniors, have access to cancer health care services and expertise they need.

Here we are, two decades into the 21st century, and we are still lacking women in the health care C-suites. What can we do to effectively move more women and minorities into leadership roles so that we can have senior teams and boards that reflect the diversity of our communities?

Kimberly Chavalas Cripe, CHOC Children’s:
I have been at CHOC for over 25 years and I am proud to say that as a mission-driven organization, we attract talented women. Because women are well represented in the C-Suite at CHOC, we are modeling what is possible for the younger female and male leaders within the organization. It has always been our goal to attract and retain the best talent. At CHOC, we know that in order to attract the best candidates, we must demonstrate a culture of inclusion across gender, race, religion, age and point of view. I genuinely believe that the more traction inclusivity gains within an organization, the greater the potential is for that organization to thrive. A commitment to diversity means staff training in screening and interviewing candidates, as well as providing mentorship opportunities. At CHOC, this is a commitment we believe is critical for our future.

Annette Walker, City of Hope Orange County
The interesting thing about health care is that we have no shortage of women working in our field, and while they are often highly represented in the executive ranks they, like all minority groups, are still underrepresented in the C-suite. I believe transformation starts at the top, which means we must seek out diverse candidates for our boards who truly represent the communities we serve. Additionally, it’s up to today’s leadership to invest in sponsoring and mentoring emerging leaders who are still several layers removed from the C-suite. These actions require commitment—and especially sponsoring, which means actively advocating and guiding a future leader. It’s not an easy fix, but ensuring great future leadership for our organizations is an exceptionally worthwhile legacy.
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HEALTHCARE ROUNDTABLE

In what ways are hospitals incorporating fitness, nutrition, stress-reduction and other aspects of care into the larger healthcare picture?

Robert T. Braithwaite, Hoag Memorial Hospital Presbyterian:
People trust their hospitals and doctors. I believe hospitals can leverage that trust to guide healthful behaviors in innovative and meaningful ways. For example, the new Hoag Health Center Foothill Ranch clinic integrates health and wellness into the patient care journey. This means we offer traditional clinical services, like primary care, urgent care, pediatrics, women’s health, sports medicine, imaging and labs. But we also have an onsite health coach, a fitness facility, a “smart tech” bar and other wellness services under the same roof. Instead of a doctor telling a patient to “eat well and exercise,” the doctor can walk the patient down the hall and say, “This is Lori Mueller, she’s a certified wellness coach, and she is going to work with us to achieve your nutrition and fitness goals.” To keep people engaged, informed and active, Hoag Health Center Foothill Ranch is live streaming classes on YouTube focusing on fitness, nutrition, stress-reduction and more. This holistic approach to wellness has been happening gradually, and I predict more hospitals will take an active role in complete-body health in the coming years.

Gene Rapisardi, Cigna:
Cigna offers a robust suite of health coaching programs designed to help people make lifestyle changes to improve their physical and mental health, including programs to help people increase their physical activity, eat healthier, manage stress, quit smoking, maintain a healthy weight and manage chronic conditions such as diabetes. Our health coaches include exercise physiologists, registered dietitians, nurses, behavioral health clinicians, and certified health education specialists. They are experts at helping individuals identify their motivation and set goals for making healthy behavioral changes, and then engaging with them to achieve them. Cigna’s health coaching programs are one aspect of our focus on whole person health, which recognizes that to be truly healthy we need to take care of our bodies and our minds, the physical and the emotional.

Discuss the value of consistent policies from health system to health system (visitation, PPE, etc)?

Erik Wexler, Providence, Southern California:
We have been pleased with information sharing and connectivity among health systems and through regular contact with the California Hospital Association and government agencies. During crises, we would support common required standards for use of PPE and deployment of certain types of equipment. For example, when one health provider expands use of surgical masks, the other systems must quickly consider whether to follow. Access to PPE might prevent the ability to implement such a policy and could create confusion among caregivers about requirements. The requirement should be to do what is best to protect caregivers and patients, based on science. Ideally, all health care providers would simultaneously implement systems to move strategic stockpiles of PPE or equipment to those who need the supplies. This will reduce confusion and unnecessary competition. In the current situation, even without a formal system, we should be grateful for collaboration that results in thoughtful response.

Southern California has a critical shortage of inpatient psychiatric and behavioral healthcare, and a rising need. How do we move forward to meet that demand?

Sunny Bhatia, Prime Healthcare:
Many counties in Southern California, including Orange, are in dire need of hospital beds for mental healthcare. The national target is a minimum of 50 beds per 100,000 residents. Los Angeles County has fewer than 23, and Orange County faces a more notable shortage (14 beds per 100,000 residents). The increasing shortage of inpatient care beds for behavioral health patients was the primary reason Prime Healthcare recently converted the former Glendora Community Hospital to the Glendora Oaks Behavioral Health Hospital. The new hospital opened in 2019 with a focus on general and senior psychiatric care for people with high-risk psychiatric conditions. Prime Healthcare has expanded behavioral health services in our Southern California hospitals, notably in Orange County. We have supplemented our inpatient Behavioral Health programs with a telehealth platform and have been implementing outpatient and partial hospitalization programs to provide psychiatric care across the entire continuum of care.

Mark E. Costa, Kaiser Permanente:
Awareness of the need for improved Mental Health Services within Orange County has greatly increased. Through the effort of schools, faith-based organizations, health care providers and many community-based organizations such as Be Well OC and NAMI, we anticipate even more improvements to our system of care in the years ahead. As is true with our overall Physical Wellness, early identification of Mental Illness is essential. Reducing all stigma associated with mental illness, putting in place prevention programs, as well as improving access to needed outpatient mental health care will reduce the number of individuals who face a mental health crisis and require inpatient care. That is certainly our hope. Before the end of this year we will also see the opening of the first “Be Well Mental Health Campus”, which will receive paramedic and law enforcement transports for individuals in crisis. This will reduce the burden on Orange County Hospital Emergency Rooms leaving greater capacity for other needed services. Within our Kaiser Permanente system of care we continue to expand our ambulatory access to needed behavioral health services. We are also seeing an increase in use of our behavioral health services and the use of Kaiser Permanente Mental Health Wellness apps. When inpatient care is needed, we continue to develop and maintain a strong network of inpatient hospital providers.

What is the best way to streamline credentialing and privileging to easily deploy physicians to other than their “home” hospital?

Janeen Hill, Chapman University:
I would like to expand the question to include mid-level healthcare providers like physician assistants and nurse practitioners. The state
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already does not have enough physicians so one focus has been on increasing the number of well-trained mid-level providers. Thus, what steps might be employed to streamline their credentialing. One might be to license PAs who have completed at least 6 months of clinical experience in one or a combination of the following: emergency room, internal medicine (in-patient), internal medicine (out-patient), and family practice.

Erik Wexler, Providence, Southern California:
The current system for credentialing and privileging requires approval from each hospital’s Medical Staff Executive Committee and its Board of Directors. It is an excellent process that validates expertise and quality outcomes before a physician can admit or treat a patient in a hospital. Even a streamlined process can take 30 days or more. During a severe patient surge, an urgent approval process is needed to allow physicians to move among hospitals without delay. Providence has developed a physician personnel tool that can quickly place physicians at other than their “home” institution. We are finalizing a Special Situation Crisis Approval process that allows credentialed physicians in good standing at one of more of our Southern California hospitals to treat patients at our other hospitals. We will follow accreditation and regulatory requirements, but this action will be essential if we see a surge similar to New York City’s experience.

Technology and data continue to drive innovation in the delivery of medicine to all patients – both young and old. These advances include smartphones, telemedicine, remote patient monitoring devices, etc. How have you leveraged today’s technological advances to improve the health and wellbeing of the patients you serve?

Barry Arbuckle, Ph.D., MemorialCare:
Technology is increasingly allowing us to reach patients anywhere and everywhere. In addition to social distancing, hand washing and staying at home, telemedicine and virtual care between MemorialCare physicians and consumers via video, limit unnecessary exposure to COVID-19 and provide timely, convenient access to care. There are options for text messaging, artificial intelligence-enabled chats and other ways to access and expand what we’re able to treat virtually without having to go to a doctors’ office or health facility. We’re using technology to connect primary care physicians, specialists and other clinicians. Wearable technology is enhancing care and enabling MemorialCare to monitor patients with chronic health conditions, so physicians can intervene early to address emerging issues before patients even realize they are a concern. Exciting technologies adopted by MemorialCare are translating into new realms of hope and health—coming together to deliver more efficient care, reaching patients where they are and ensuring best-in-class healthcare becomes a more seamless part of daily life.

Mark E. Costa, Kaiser Permanente:
Kaiser Permanente continues to be on the cutting edge of innovation – a point of pride since our founding. Through the research and design efforts at our Innovation Studio in Tustin and partnering with some of the most technically advanced companies in the world, we are working on technology to assist patients in improving and maintaining their personal health. For instance, Kaiser Permanente has implemented Virtual Cardiac Rehab across our Southern California Region. The results show that 82% of participants had a successful completion rate using Virtual Cardiac Rehab. The program is a home-based program utilizing a wearable device, a mobile app and a clinical dashboard that provides data points in real time. Additionally, our successful Telephone Appointment Visits currently account for approximately a quarter of all visits. We recognize that at the end of the day, care should be accessible everywhere and at any time.

As the healthcare industry transforms, in many ways like other industries, will this lead to greater collaboration or increased competition between Health Systems and Hospitals?

Gene Rapisardi, Cigna:
There absolutely will be more collaboration among health plans, providers, employers and all other stakeholders because it’s absolutely essential. Constantly rising costs that threaten affordability, technological advances, an aging population and many other factors are making healthcare more complex. The best way to ensure that the right care gets delivered to the right people at the right time – affordably and with laser focus on quality – is through collaboration.

The amount of medical science and clinical research funded by the National Institutes of Health and other government sources continues to decline. How does the lack of public funding impact us locally and what affects will it have in the future? What is your healthcare system doing to fill this gap in medical research and how can the public support these efforts?

Chad T. Lefteris, UCI Health:
While UCI Health provides world-class patient care, it is also in the knowledge business. We stop at nothing to advance scientific discovery and clinical innovation that benefits patients and often gives Orange County’s residents access to treatments they can’t get elsewhere. The volume of NIH funding awarded UCI researchers and physician/scientists is a testament to the caliber of discovery and innovation home right here in Orange County. Unfortunately, public research funding has decreased in real dollars over the past 30 years, endangering these advances and threatening an uncertain future. UCI has made continued on page B-54
THANK YOU to our Heroes

You come to work every day dedicated to fulfilling the mission of delivering compassionate, quality care to patients. And never has Prime Healthcare’s mission of saving hospitals and saving lives been more important than it is today. Thank you for working tirelessly to save lives on the front lines of the COVID-19 pandemic.

We salute you for your brave service when we all need it most.

45 Hospitals saved
14 States
312 Quality Awards in 2019 for Patient Safety & Excellence
2.5 Million+ Patients Served Annually

Quality, Community, Compassion.

Prime Healthcare
Saving hospitals. Saving jobs. Saving lives.
HEALTHCARE ROUNDTABLE

Kimberly Chavalas Cripe, CHOC Children’s:

As public funding has become more difficult to obtain, particularly for young investigators or for high-risk innovative ideas, we have looked to additional sources, including industry and philanthropic sources. The pipeline for development of new treatments often starts with publicly-funded basic science, but as discoveries are turned into therapies, there is increasing interest from private donors who appreciate and encourage us to produce near-term treatments for children who need them today, as well as from pharmaceutical and device corporations or startups who have the business expertise to bring products to market in a way that has widespread clinical impact. Our healthcare system recognizes the full pipeline, and we and our university partners are ideally positioned to facilitate not just the fundamental basic science, but also the clinical trials and technology transfer that are essential for promising ideas to impact our community’s health.

State OSHPD data shows that many Orange County residents continue to leave the area to seek complex care. How is your health system providing easier access to life-saving and comprehensive care in their community?

Robert T. Braithwaite, Hoag Memorial Hospital Presbyterian

Improving patient outcomes drives our every decision. This means introducing the latest technologies to Orange County and expanding beyond our walls to give patients access to clinical trials and life-saving treatments that would otherwise only exist in prestigious academic institutions. As an example, the Hoag Family Cancer Institute is one of the few community hospitals in the nation to conduct Phase I Clinical Trials for recently discovered drugs, and we are a leader in precision medicine, an approach to cancer care that designs targeted therapies based on the genetic makeup of an individual’s tumor cells. Designated a Center of Excellence in Robotic Surgery (COERS), Hoag also remains a national leader in robotic-assisted surgeries. In February, Hoag Hospital Irvine became the first in Southern California to perform a robotic prostatectomy using the new da Vinci single port (SP) system, a cutting-edge technology that few hospitals in the world have yet acquired.

Chad T. Lefteris, UCI Health:

As Orange County’s only academic health system, UCI Health is committed to being the region’s leading provider of complex care. The UCI Health Comprehensive Brain Tumor Program is California’s second largest and offers the widest range of therapies available anywhere. UCI Health launched the county’s first ECMO program last year for patients suffering from severe, life-threatening illnesses that damage proper heart or lung function. We are the county’s leading center for kidney/pancreas transplants. UCI’s H. H. Chao Comprehensive Digestive Diseases Center has a decades-long record of advancing clinical innovations, including breakthroughs in the treatment of GERD and esophageal cancer and the use of artificial intelligence to improve colonoscopies. Experts have recently developed therapies to manage certain damaging effects of liver cirrhosis, the country’s leading cause of liver transplantation. The Chao Family Comprehensive Cancer Center, Orange County’s only National Cancer Institute-designated comprehensive cancer center, offers residents access to the county’s largest clinical trials portfolio.

What is your opinion on state or federal mandates on emergency actions hospitals or providers must take?

Erik Wexler, Providence, Southern California:

The use of mandates should be reserved for the most extreme situations and the right experts absolutely must be involved in determining these requirements. As mandates are being developed, medical experts, health system leaders and government officials must collaborate on decisions. In some states, there may be requirements rolled out without diversity of expertise, a dangerous situation for the stability of the health system, providers and patients. We would support state and federal mandates in the most extreme spread of this virus and during patient surges for determination of equipment use, patient triaging to special facilities and testing. The federal, state and local strategic stockpiles of resources will be essential to effectively implement mandates. When COVID-19 is behind us, there will be many lessons to learn. We must do a root cause analysis with an action plan ready to go in case another situation like this presents.

Are wellness programs worthwhile investments for employers?

Meghan Newkirk, UnitedHealthcare:

Many employers in California and nationwide are investing in well-being programs. In fact, a U.S. Chamber of Commerce study found 87% of employers are committed to workplace well-being efforts, and nearly three-quarters offer a program. According to employees, these efforts are producing results. According to a recent UnitedHealthcare survey, 57 percent of people with access to employer-sponsored well-being programs said the initiatives had a positive effect on their health. Among those, 82 percent said they were motivated to pay more attention to their health; 83 percent said they increased their physical activity; 59 percent improved their diet; and 30 percent reported improved sleep. UnitedHealthcare’s Motion program gives eligible people access to wearable devices and, in some cases, employees can earn more than $1,000 per year by meeting certain daily walking goals. The combination of personal benefit and incentives has shown results. Enrollees have collectively walked more than 4.3 billion steps and earned $51 million in rewards.

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