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JHAWK

forecast

The Jayhawk Healthcare Administrators Working for Kansas student organization promotes leadership, marketability, relationships, and knowledge for students pursuing a career in health services administration through personal and professional development activities.

Health Care and Social Policies in Sweden and Finland

Interview with Ellen Averett, PhD

1. How long has the program been in existence? The program has been in existence since 1991!

2. Which instructors/professors are involved in the planning and accompaniment of the trip? I have been part of this program for the last two years. Dr. Mary Zimmerman developed the program initially and has gone every summer but two. In 2010, I will be the lead instructor on the trip.

3. What rewards come from going on the trip (i.e. lessons learned)? It's a wonderful experience. It's very different to see another health care system in action than it is to merely read about or study one in the abstract. The reality is so much more impressive. You get to ask health care professionals and policy makers all kinds of questions about their system. As a result, you can more readily understand their perspective.

In 1980, both the U.S. and Sweden spent about the same percentage of their Gross Domestic Product on health care. Fast forward to the present, and



one sees the U.S. spending about 16% while Sweden spends only about 9%. That translates to about \$6400 per person per year in the U.S. and only about \$2900 per person per year in Sweden. Yet the health status of the Swedish population is much better than ours, that is, the Swedes are healthier. How does that happen? This trip gives you a chance to see for yourself what the similarities and differences are between our system and theirs, and to come to your own conclusions. We can learn a lot from looking at other systems.

Additionally you get to experience another culture which always broadens

one's views. I love learning about other parts of the world and seeing how others live. Sometimes one can get so focused on routines--be it job, school or family--that one can lose sight, so to speak, of the larger world. An experience like this brings the perspective of the larger world back into view. And, on a less serious note, the Swedes have some of the absolute best cinnamon rolls, chocolate pastries and strawberries in the world! Everyone there seems to take their coffee breaks very seriously, that is, they are sure to take their coffee breaks complete with sweets or fresh fruit.

4. How long do you stay and where do you stay? The course is an intense, packed two weeks. There is not much down time. Mostly we are in Sweden, though there are a few days in Finland as well. In Stockholm, we have typically stayed in a small, comfortable hotel in the central part of the city. Two nights are spent in sleeping cabins on a ferry traveling between Stockholm and Finland. (cont'd on pg. 2)

(cont'd from pg. 1)

5. How many students usually attend? Anywhere from a few up to 14, depending on interest and on the number of faculty going. Many of the students are from KU, but not all. We have had students from Tufts, Harvard, Swarthmore, Arizona State University, Kenyon College and others.

6. How many credit hours are obtained by going on this trip? Three credit hours of either graduate or undergraduate credit are granted by the University of Kansas.

7. What is the weather typically like when you go? Is it always the same time of year? We always go in the summer. The weather is typically wonderful—70's and sunny. Last year we experienced much rain and it was a little bit cooler. It seemed that everyone we visited apologized for the unusual weather.

8. What type of individuals do you meet and interact with on the trip (i.e. which healthcare professionals)? Here are highlights from last year's itinerary:

- Visits and lectures by Swedish officials and professionals at sites including: the national health and social welfare planning board, acute care hospital, geriatric hospital, nursing home, primary care clinic, hospital maternity unit, child day care center, psychiatric hospital, neighborhood social services office, immigrant assistance program, and national social insurance office.

- Daily lectures and discussions with Swedish officials, physicians, nurses, midwives, social workers, psychologists, physical therapists, government planners, childcare workers and politicians.



- Discussion with representatives of major political parties in Sweden.
- Presentation on Swedish history and the rise of the Swedish welfare state.
- Participation in Swedish cultural events.
- Opportunity to participate in the traditional Swedish summer celebration.
- A day-trip to Uppsala for additional facility visits.
- Weekend cruise and sightseeing tour to Helsinki, Finland.
- Visits to the Nobel Banquet Hall, the Vasa Museum, Skansen, Drottningholm Palace, and the Finnish Parliament

9. How different is the healthcare system from the system in place in the US? Their delivery systems are very, very different from ours. The quality and nature of the care, however, can be very similar to ours and is very state of the art. When we visited Karolinska University Hospital, we got to observe a cardiothoracic surgery that involved placing a high tech stent not yet available in the U.S.

10. How big are the hospitals there (i.e. bed size)? and what population do they serve?

Some are big with many beds and some are small. We had the opportunity to view the plans for a new Karolinska academic medical center that is being constructed and will be run as part of an innovative public-private partnership. Not only was the medicine to be very high tech, the building and medical activities had to have minimal environmental impact.

11. Do you travel all over Sweden or typically stay in one location? In Sweden, we visit mostly in Stockholm and Uppsala. In Finland, we stay in Helsinki.

12. Are there any language barriers when going? Not really. Swedes and Finns speak their native languages of Swedish and Finnish. However, most Swedes, especially younger ones, also speak English. And many Finns speak English as well.

Professor Spotlight

Meet a Professor

Marcia Nielsen, PhD, MPH

Recently returned to the University of Kansas Medical Center after serving as the executive director of the Kansas Health Policy Authority for the past three years.



She currently serves as vice chancellor for Public Policy and Planning and a faculty member within the Department of Health Policy and Management. Dr. Nielsen also serves as associate director of public policy at the Institute of Community and Public Health.

When the Kansas Health Policy Authority (KHPA) was established in 2005, Dr. Nielsen was appointed by Kathleen Sebelius to serve as the first chair of the authority and, in 2006, accepted the position as the authority's executive director. The KHPA is the principal health care agency for the state of Kansas and is tasked with developing and maintaining a coordinated health policy agenda that combines the effective purchasing and administration of health care with promotion-oriented public health strategies. It serves as the single state Medicaid agency in the state.

While at KHPA, Dr. Nielsen oversaw the administration of the medical portion of Kansas Medicaid, the State Children's Health Insurance Program, MediKan, which provides coverage for certain low-income disabled Kansans, the State Employee Health Program and the State Self-Insurance Fund that provides workers compensation coverage to state employees.

Dr. Nielsen's interest in health begins with her undergraduate days at Briar Cliff College where she received a bachelors of science degree in biology and psychology. She also holds a doctorate in health policy and management from Johns Hopkins School of Public Health (Phi Beta Kappa) and a master's degree in public health from George Washington University. Her interest in health and public health intensified during the years she spent as a Peace Corps volunteer working for Ministry of Public Health in Thailand. Prior to her time in Thailand, she also served for six years in the US Army Reserves.

Before coming to Kansas in 2002, Dr. Nielsen spent 10 years in Washington DC. During the debate over comprehensive health care reform in the 1990s, she worked as a legislative assistant to then U.S Senator Bob Kerrey D-Nebraska. After completing her PhD, she worked as a health lobbyist and then assistant director of legislation for the American Federal of Labor and Congress of Industrial Organizations (AFL-CIO).

She previously served KU Medical Center as assistant vice chancellor for health policy and assistant professor at the KU School of Medicine.

Marcia and her husband have twin eight year old daughters and live in Lawrence, Kansas.

Tom Bowser Presentation

By Brett Kollars

On September 14, JHAWK had the distinct privilege of listening to Tom Bowser give his take on health care reform. Tom Bowser has been the CEO and President of Blue Cross Blue Shield of Kansas City since 2001. He has been in the Blue Cross Blue Shield (BCBS) system for approximately 35 years including 8 years in the Kansas City system. Along with heading the Kansas City BCBS system, Bowser is also the chairman of the national BCBS system, the highest elected position in BCBS.



Bowser touched on the major issues of health care reform giving the audience an insight into his own beliefs and also the position of BCBS on certain topics. Bowser voiced support for issues of an individual mandate, guaranteed issue, and an out-of-pocket pay limit among others mentioned. Those attending re-

ceived a packet of information providing a comparison chart of health care reform bills, a couple articles, and a health care reform summary on terms.

Bowser predicted upcoming attacks on insurance companies and stood up for

the BCBS system stating, "We pay claims, not dividends."

As a prime figure in the Kansas City area, Bowser expressed concern among how Kansas City residents were feeling toward re-form. He brought attention to a recent poll he had analyzed of Kansas City residents, the poll illustrated health care costs as being the number one concern in the area.

Bowser also provided the audience with unique ideas of his own, one being the implementation of clinical pathways which, if followed by physicians, would provide immunity to malpractice claims.

Those in attendance had a great opportunity to hear from a prominent figure in the area as well as the national health care scene.

Alumni Notes

By: Laura Jones



Name: Laura Jones

Position Title: Manager, Finance and Accounting for Graduate Medical Education for the office of the Executive Dean, School of Medicine Finance and Administration
Graduated: May 2009

Accounting Manager for Graduate Medical Education.

Currently, I oversee the maintenance of all GME accounting information for all KUMC residents, including resident budgetary information, resident position allocation to departments for an estimated 400 to 500 residents, financial contract information, and assist in the supervision of rotation and time keeping information for all residency programs at KUMC. I manage monthly billing and accounts receivable for all GME Affiliated Institutions. This makes me accountable for invoicing affiliate sites at an approximate annual total of 7 million dollars and writing all financial contracts for residents.

This position has been great learning experience for me and a great networking position as well. I get to communicate with a variety of people such as physicians, faculty, residents, hospital administrators, internal chief executive officers, affiliate chief executive officers, and site directors. My position has advanced in the last couple of months. I have been working with internal and

external resources to design and implement an automated invoice system by integrating data from multiple sources. I have also had to become very attentive to the healthcare reform taking place. As Medicare becomes more exacting on their reimbursement, it is imperative that all Medicare compliance is reflected in our financial aspects to our affiliates.

Again, this position has provided me with a great learning experience. It has been nice to apply all of the things I have learned in class to the work place such as financial reports, work flow processes, data integration, reimbursement, and policy compliance. This position has allowed me to grow, challenge me, network, and expand my knowledge over a array of projects. My words of advice to all MHA students are to challenge yourself in the areas where you are weak in order to learn, grow, and make those around you take notice.

Before graduating, I took an intern position for the School of Medicine's Finance and Administration Department to strengthen my financial background. During the internship, I looked at work flow and financial processes. As the internship ended, I gave a presentation to the top executives at the school. They were very impressed and offered me the position as the Finance and

THE INTERN FILES

How the Internship Experience Worked for Me

By: Ryan Schoenfelder



Leavenworth Veteran's Administration Hospital

During the summer of 2009 I completed and Administrative Internship at the Eastern Kansas Veterans Administration in Leavenworth, KS. During this past summer, I was able to experience many aspects of health care. In this paper I will outline some of the activities that comprised my internship.

Each day I would observe a daily meeting including each member of the service line heads in a video-conference between the two campus facility, Topeka and Leavenworth. They would discuss key happenings in their respective facilities, complete bed counts, advise senior leadership of any issues or concerns that were present within their respective departments and assimilate key reports. This allowed me to see the reporting structure of the facility and understand the communication style of each of the service line managers.

I also had the opportunity to interview roughly 80% of the service line managers and executive leaders at the two campuses. To put this in perspective, I sat down with the Chief Medical Officer on three different occasions for about 2 hours each, just asking him any and all questions I thought relevant. He gave me very good feedback and completely immersed himself into my concerns so that I might understand how he and senior administration interact to create positive changes. Along with this gentleman, I interviewed Chiefs throughout the hospital system, as well as key members of the finance, business and auxiliary service departments.

While much of my time was spent learning, I was being paid and was given an assignment so to benefit the health system.

My job was to study the vehicle utilization of the various programs throughout the two campuses. The vehicle fleet comprised of nearly 200 vehicles, many that were not being adequately utilized. I studied discrepancies between the reporting structures of the various departments so to provide synergy of the knowledge gained by the successful programs. This may well reduce the leased vehicles, save money, increase user satisfaction and simplify the reporting process of vehicle usage.

Upcoming Events



October

October 2nd—Happy Hour

October 10th—Christmas in October

October 21st - JHAWK Lecture from Erin Wolfram

October 28th—JHAWK Board Meeting

Don't forget ... Registration for ACHE Congress begins November 18th (**You must first join ACHE as a student to register for Congress**)

Alumni:

Don't forget to check out the HP&M website from time to time. You can even update your own information through this website:

<http://www.kumc.edu/hpm/alumni.html>

Mark It!

Mark Your Calendars!

September

Sept. 30th — JHAWK meeting

October

Oct. 2nd— Happy Hour at Granfalloon in the Fireside Room

Oct. 10th — Christmas in October (see Becki Carl-Stutz for more information)

Oct. 21st — Lecture series: Resume Workshop with Erin Wolfram

Oct. 28th — JHAWK Board Meeting at Orr-Major 1025

November

Nov. 18th— 1st day to register for ACHE Congress

December

December 2nd — JHAWK meeting

December 12th — JHAWK Christmas Party at Charlie Hoopers

October Birthdays

Debra Livingood	10/3
Carrie Davidson	10/4