

Introducing the 2010 candidates

This year there are four trustee positions open for election.

Trustee candidates are nominated by the Standing Nominating Committee or by petition. This year there are no petition trustee candidates.

The three candidates elected in October with the highest vote counts will serve a three-year term, from Jan. 1, 2011 to Dec. 31, 2013. The candidate elected with the fourth highest vote count will serve a vacated term from Jan. 1, 2011 to Dec. 31, 2012.

Candidates have word limits for their biographical and candidate statements.

Statements are not edited for content. Minimal editing is done to correct grammar and spelling.

Board of Trustees candidates

- Susan Byington
- Porsche Everson
- Elizabeth (Bette) Hyde
- Jennifer Joly
- Dorothy (Dodie) Ruzicki

BOARD CANDIDATES



Susan Byington

Resides in Seattle | Member since 1972
sjbyington@hotmail.com

I am an experienced health care leader. For 20+ years I was a member of the senior leadership team and Vice President, Human Resources, for Providence Health & Services, a large, nonprofit, multi-state health system.

I also served as the Personnel Director for the City of Seattle, Harborview Medical Center, and University of Washington Medical Center. Currently I am Vice Chair, Group Health Foundation Board of Directors. I am also a volunteer mediator for local governments.

National health care reform is now a reality. How do you see this impacting the challenges Group Health faces, and what do you bring to the Board and the Cooperative to help us meet those challenges?

Group Health is well positioned to successfully implement health care reform with a solid foundation already in place. Our health care delivery model is nationally recognized for the quality of care provided and its ability to lower costs.

Even with a strong foundation, Group Health will be challenged to achieve its financial and growth objectives. From what is known now, there will be less money to pay for health care. Managing costs will be critical. Federal reimbursement for Medicare Advantage will be reduced and approximately 10% of our members have this coverage. Employers will seek the lowest cost plans to reduce the impact of the new law and we must respond. Our future requires that Group Health wisely reduce the costs of patient care and administrative expenses to cover the cost of operations, and to provide sufficient margin to purchase equipment and technology, and fund other capital needs.

Membership growth is a key strategy. Health care reform will greatly expand the availability of coverage in Washington. Aging baby boomers will increase the Medicare/Medicare Advantage population. The challenge is balancing growth and receiving adequate reimbursement for all members.

This is a time of transition. The law has been passed but most of the regulations have not been written. Group Health will be challenged to plan for a future that has many uncertainties.

To help Group Health meet these challenges I will bring an extensive background in health care and insight based on experience. I understand the complexities of leading and managing large health care organizations, their financial challenges, and the importance of quality.

I will also bring in-depth knowledge of the particular human resources challenges faced by health care organizations, compensation expertise, labor relations experience, and a working knowledge of insurance and the regulatory environment.

I am a collaborative team member, a good communicator, and, as a trained mediator, I have strong conflict resolution skills.

I believe in Group Health. I am a 38-year member. I currently serve on the Foundation Board. It would be an honor to serve on the Board of Trustees and I would sincerely appreciate your vote.



Porsche Everson, MBA

Resides in Seattle | Member since 1987
Porsche@RelevantStrategies.com

I avidly support cooperatives and have served on boards in the private, nonprofit, and public sectors for several years. Group Health is vitally important to me and I am committed to helping ensure its success. I'm a businesswoman (with an MBA in Technology/Innovation Management from Pacific Lutheran University), but began my career as a science and math teacher. I've also been the CEO of a national public-health software company. Now, I'm president of Relevant Strategies, helping organizations solve complex problems.

National health care reform is now a reality. How do you see this impacting the challenges Group Health faces, and what do you bring to the Board and the Cooperative to help us meet those challenges?

Most of the early reform will focus on financing, e.g., paying for quality and outcomes and ensuring access to health coverage. We are well positioned at Group Health to lead this transition, improve quality, and lower costs.

I believe that quality and cost are completely linked, and if we do it right and effectively the first time, we'll improve people's health and reduce costs. The great news is that our Board has been relentlessly focused on improving quality and keeping our costs as low as possible. We have the highest quality ratings among all northwest delivery systems and our costs are now consistently 8–10% lower than other health plans in the region.

My work on the Board for the past four years has been about the member. As chair of the Cooperative Development Committee, I led efforts to make consumer involvement more meaningful and relevant. As a member of the Quality Committee, I constantly pushed for improvement in clinical outcomes and administrative processes. As chair of the Audit Committee, I oversaw our compliance and monitored critical projects like the new practice management system that allows us to schedule our own appointments with our physician.

Several years ago, I participated in a group to define the medical home model. This approach reduces physician panel sizes so the clinical team can spend more time addressing all the person's medical issues and provide better care. It essentially pays for itself by reducing hospital and emergency room visits. All of our medical centers use this approach now, and published research has shown that it improves patient satisfaction, reduces costs, and strengthens the physician/team relationship with the member.

Even with these successes, we're not done yet. We can improve health outcomes and satisfaction while reducing costs. Having roots in the cooperative movement, public health, and business, I can balance the multiple goals of staying true to our cooperative values, ensuring we have a sustainable environment in which to operate, and building upon the innovation that makes us special.

See www.RelevantStrategies.com for more information about my experience and background.

BOARD CANDIDATES



Elizabeth (Bette) Hyde, PhD

Resides in Bremerton | Member since 1976
thyde@msn.com

Our family has been a member of Group Health Cooperative since we moved to Washington 34 years ago. My husband, Tom, and I have two adult children and one grandchild. Since moving to Washington, I have worked in public education in the Seattle, Vashon Island, and Highline School Districts, and most recently as superintendent of the Bremerton School District. Last year Governor Gregoire appointed me to be the Director of the Department of Early Learning for Washington State.

National health care reform is now a reality. How do you see this impacting the challenges Group Health faces, and what do you bring to the Board and the Cooperative to help us meet those challenges?

I am running for a trustee position because I believe in Group Health Cooperative and feel GHC is uniquely positioned to lead in national health care reform. GHC's emphasis on integrating coverage and care serves as a model nationally. National health care is about access, and GHC's partnerships with local providers and affiliate Kaiser Permanente offer needed choice. Health care is about quality, and the fact that GHC is a cooperative governed by its members with an accountable five-year strategic plan assures a watchful eye on quality. Clarity will be a challenge, so in order for members to understand benefits and services, GHC will need to continue its communication and outreach programs. Funding is always a challenge, but GHC's dedication to "affordable excellence" and preventive health care combine to contain costs. GHC has a market edge and is ahead of the curve in electronic records and 24/7 online access. Given GHC's success, a challenge we should experience is that of increased membership. The very fact that GHC wants to keep us healthy speaks well to the tenets behind the national health care reform movement.

I feel that my past experience in educational administration and state government will well serve the GHC Board. In my career, I have served on various boards, including the King County Commission for Children and Families, Kitsap YMCA, and Harrison Medical Center, and currently the Washington State Quality Education Council (QEC). I understand boardsmanship and the importance of people solving problems together. As a life-long educator, I have clearly seen the difference quality health care can make in children's learning and families' well-being. I have 34 years experience in balancing tight budgets, measuring and achieving quality outcomes for children, and leading constituents toward a common vision of success. I have worked closely with governmental and private sector organizations and foundations, and believe they are important partners in GHC's mission. I believe my emphasis on accountability, transparent communications, and the need to listen and learn from partners will be an asset, especially during the implementation of national health care reform. I would be honored to serve.



Jennifer Joly, JD

Resides in Tacoma | Member since 2004
jenniferjoly@nventure.com

Jennifer has held a variety of executive-level legal and policy positions, including General Counsel and Legislative Director to Governor Gary Locke. Currently, she is a member of the Public Disclosure Commission, our state's election watchdog agency. A Group Health trustee since 2008, Jennifer chairs the Cooperative Development Committee, and is on the Audit and Compliance, and Quality committees. Previously, she served on the Washington Health Care Facilities Authority. Jennifer is also a member of the YMCA Youth and Government Board.

National health care reform is now a reality. How do you see this impacting the challenges Group Health faces, and what do you bring to the Board and the Cooperative to help us meet those challenges?

With the passage of health care reform, Washington state will gain over 500,000 newly insured people. By increasing the insured population and improving access to primary and preventive care, our health care system will see improved health outcomes and more cost-effective care delivery, e.g., fewer costly emergency room visits. With our integrated delivery system and leading quality of care, Group Health is uniquely positioned to serve the newly insured.

However, this demand for care comes on the heels of unprecedented enrollment growth at Group Health. Our key challenge will be to ensure access and quality for both our existing members and the newly insured who join the Cooperative. As a trustee, I will oversee effective planning and approve the capital and labor force investments to meet this coming demand.

Because two-thirds of our clinical costs are from care received outside Group Health, we must continue to strengthen our integrated delivery system and extend our best practices to the larger community of providers. We must assure our partners share our values of patient-centered care.

These partners have a powerful new incentive under health care reform—the federal government will start paying entities that have qualified as Accountable Care Organizations, or ACOs. ACOs will be "accountable" for the overall quality and cost of care provided using aligned incentives, common quality goals, and physician-led care models. This type of clinical integration is well known to Group Health, but should be taken to the next level for sustainable cost savings for our members, particularly in the hospital setting.

My three years on the Board and my experience in public policy, executive management, and the law will prove invaluable as health care reform unfolds. As Governor Locke's Legislative Director, I worked with legislators, industry representatives, regulators, and the public to consider all viewpoints and craft compromise legislation. I bring this fair and collaborative approach to the Board of Trustees. Health reform will pose profound challenges, but with my help these challenges can become opportunities to further the Cooperative mission.

For leadership, experience, and strong member advocacy in these challenging times, please retain Jennifer Joly.

BOARD CANDIDATE



Dorothy (Dodie) Ruzicki, PhD, RN

Resides in Mead | Member since 1983
dodieruzicki@earthlink.net

As director of Educational Services for two Spokane Providence hospitals (966 beds), I provide leadership in staff development, chronic disease management, and related health care education. I served nine years on the Group Health Northwest Board (including chair) and am now privileged to serve as a Cooperative trustee. I hold a PhD (Washington State University) and a BS in Nursing (University of Wisconsin, Madison). In addition to professional publications, I co-authored a popular travel guide to Scotland.

National health care reform is now a reality. How do you see this impacting the challenges Group Health faces, and what do you bring to the Board and the Cooperative to help us meet those challenges?

As a recognized leader, Group Health is poised to influence national and state health care reform efforts in designing and developing effective, affordable systems of care. Our strengths include a focus on prevention and patient-centered care with a foundation in primary care, coordinated care systems, innovation, and evidence-based medicine.

The following challenges are also opportunities:

- Extending benefits of integrated care and innovation, like medical homes and electronic medical records, to all members across our diverse delivery system and organizing as an Accountable Care Organization with its quality and cost incentives. My perspective is rooted in 42 years of health care experience, giving me an excellent grasp of policy issues and the health care environment. For the past 21 years in leadership roles with broad organizational influence, I've participated in major initiatives and launched innovative programs, achieving results during times of tumultuous change.

- Managing lifestyle-related illnesses to achieve better outcomes and reduce costs. We must find ways to actively partner with chronically ill patients, who are ultimately responsible for managing their own care. I have research interests in patient-provider relationships, expertise in evaluation, and have been nationally recognized for patient education leadership. The law also funds grants to create evidence-based wellness strategies and reduce chronic disease rates—offering exciting opportunities for Group Health.

- Attaining ever greater quality targets. The new law provides financial incentives for achieving and maintaining top quality performance. My experience as a registered nurse gives me first-hand knowledge of the patient care world. I have practical experience in quality improvement and evidence-based care, and my academic training in research and statistics prepared me to provide guidance in this crucial area.

My Group Health governance journey began in 1984 with Board committee work, progressed to nine years on the Group Health Northwest Board, and led to my current trustee role. I thoroughly understand our historical context, philosophy, mission, and governance structure, and I have in-depth knowledge of health care delivery systems. I bring to Group Health extensive background in health care leadership, organizational savvy, and abilities in quality improvement and measurement that augment the Board's expertise.

YOUR HEALTH. YOUR VOTE. YOUR BOARD.

Current Board of Trustees

A nursing executive and a practicing pediatrician. Current and former consultants and business owners. A retired physician. Former chief financial officers. A retired economist and two attorneys.

Most importantly, our Board members are all Group Health members. Each trustee is elected by voting members, just like you, to set the strategic direction for the Cooperative.

What does the Board do? The Board oversees development and execution of the organization's strategic plan. It assesses the current health care environment, and sets and monitors key quality and financial indicators to ensure effective management and use of resources while adhering to Group Health's mission. Trustees work together to set policy for the organization. They also select, evaluate, and advise the Group Health president and CEO.

Trustees can serve a maximum of three consecutive three-year terms. They receive an \$8,500 annual stipend and the chair receives an additional \$4,000 annual stipend. Also, a small stipend is paid for attendance at Group Health Options, Inc. Board meetings. Group Health Options is a wholly owned subsidiary of Group Health Cooperative.

This year we're counting on you to elect four trustees. With your vote, you help choose who should guide Group Health in the delivery of relevant, responsive health care. Which candidates will contribute to a strong mix of trustees, helping the Board fulfill its legal and fiduciary responsibility to serve the interests of the Cooperative? Who will help Group Health thrive as it serves you, your family, and the community?

Your vote is important!



Rosemary Daszkiewicz, JD
Chair

Resides in Seattle | Member since 1993

Education: Law degree from the University of Virginia School of Law

Professional background: Senior director with Plum Creek Timber Co., with responsibilities in law and human resources. For 22 years she was an employment lawyer in private practice in Seattle.

Term ends: Dec. 31, 2012



Porsche Everson
Vice Chair

Resides in Seattle | Member since 1987

Education: Master's degree in business administration, specializing in technology and innovation management, from Pacific Lutheran University

Professional background: Owner and president of Relevant Strategies, a management consulting firm. Former chief executive officer of Starling Systems.

Term ends: Dec. 31, 2010; running for re-election



Phyllis Best

Resides in Colbert | Member since 2005

Education: Master's degree in business administration from the University of Tennessee

Professional background: Owner of Northwest CFO Advisory Services, a financial consulting business, and executive consultant with Jean Cunningham Consulting. Formerly served as chief financial officer of Buck Knives, Inc., and has more than 20 years experience in manufacturing.

Term ends: Dec. 31, 2011



Jerry Campbell

Resides in Seattle | Member since 1999

Education: Bachelor's degree in business administration from the University of Missouri

Professional background: Retired owner of an investment management firm and also had a 35-year career in U.S. and Canadian health and life insurance companies.

Term ends: Dec. 31, 2010; not eligible to run for re-election due to term limit requirements