

Group Health Foundation Your Gift of Health report

● LETTER FROM LAURA

Every time I see someone wearing a bike helmet, I smile.



I smile because the humble bike helmet is a testament to what I love about Group Health. More than 20 years ago, we identified a problem, serious head injuries from common accidents, and then partnered, tested, refined, and retested. We teamed up with Harborview and said bike helmets are a must. No ifs, ands, or buts. The proven value of one small change, spread

around the world, is saving thousands of lives every year. A practical approach with profound impact.

We are bringing that same “identify it, test it, make it better” approach to the care of chronic illness, one of the most common and expensive care needs in the country. Approximately 125 million Americans now live with seriously compromised health because of diabetes, asthma, depression, and other chronic diseases.

Fortunately, people like Dr. Ed Wagner and his team at the MacColl Institute, part of the Group Health Research Institute, have been working to improve chronic illness care for almost 30 years. And the Group Health Foundation, with the guidance of our exceptional board, has consistently invested in their work. This means that you, as a donor, have directly contributed to improving the lives of those living with chronic conditions. Both here at Group Health and around the world.

In this issue we spotlight three important aspects of the Chronic Care Model—the medical home for patients, humanized care, and putting patients in the driver’s seat.

Group Health’s groundbreaking approach to managing chronic care might just be the bike helmet of our time. And that makes me smile.

Thanks for all you do,

Laura Rehrmann
President, Group Health Foundation



Eric B. Larson, MD, MPH, Executive Director of the Group Health Research Institute and Ed Wagner, MD, MPH, Director of the MacColl Institute for Healthcare Innovation—passionate pioneers for people living with chronic conditions.

Patients and patience

In health care, the word ‘patient’ is so pervasive, we rarely pause to reflect on what it means. Usually, it refers to “a person receiving or registered to receive medical treatment.” A noun. But it’s also used as an adjective, as in “the patient was being patient.” When you stop to think about this use of the word, it raises an interesting question: Is our health care system patient with patients?

Does it patiently support a child with asthma? Or a mom dealing with depression? Or a teenager living with diabetes?

With approximately 125 million Americans managing one and often several chronic conditions and 75 percent of medical costs going to managing their care, these are questions we must ask. And answer.

Luckily, Dr. Ed Wagner started blazing a trail to better health for people living with chronic conditions 28 years ago, when he joined Group Health as the founding director of the Group Health Research Institute.

Continued on next page

A happy home

Dr. Wagner was one of the principal architects of the Chronic Care Model, or CCM. CCM is more than just another medical acronym!

Katie Coleman, an accomplished researcher and scientist at Group Health Research Institute, speaks effusively about the CCM. “It’s difficult to overestimate its impact and importance,” she exclaims. “The sheer reach of the Chronic Care Model, especially internationally through our published research and collaboration with safety-net providers, is astonishing. Around the world, conversations among care providers about the most effective, cost-efficient way to care for patients with chronic illness are being shaped by work done at Group Health. Here in the United States, the Department of Veteran Affairs, the Bureau of Primary Health Care, and the Indian Health Service were among the first to implement the model. That’s very exciting!

One of the key concepts of the CCM is something called the medical home. Technically speaking, this refers “to a health care system that provides patients with timely, well-organized care, and enhanced access to providers.” Practically speaking, it means that all the information relevant to you and your health is available in one place. All of it. In one place. Readily accessible to you and your care team.

For a patient, a medical home can be life changing. Take Melany. She takes 14 pills a day, plus three insulin shots. Like many Americans managing multiple chronic diseases, she might interact with up to 16 care providers each year. As a Group Health patient, Melany has a medical home to turn to, and that makes all the difference.

The medical home model at Group Health means that everyone on Melany’s care team—doctors, nurses, pharmacists, therapists, specialists—

can access Melany’s care plan. Each knows exactly what the others have done, said, and prescribed. If the nurse practitioner was expecting to see Melany and didn’t, she’d pick up the phone to find out why.

This is care with a medical home. Organized, synchronized, and proactive. Medical or not, that’s a happy home.

Humanized health care

Group Health’s groundbreaking work on managing chronic care is making a very big difference in the lives of patients beyond Washington state. Los Angeles County’s Department of Health Services takes care of approximately 750,000 of LA’s poorest residents. Three million outpatient visits and 80,000 inpatient admissions per year are standard. And these patients receive exceptionally high quality care. How is this possible when so many are so poor?

Dr. Jeff Guterman knows the answer. He’s worked on the front lines of health care for many years, first in private practice and now in the public interest. As the Medical Director for Clinical Resource Management in Los

Angeles County, he sees the impact of the Chronic Care Model every day.

“Our patients all have a medical home. Because of the way we’re organized, doctors and nurses are rewarded for creating small, human moments,” Dr. Guterman explains. “If you focus on motivators rather than indicators, you get at what really matters to patients. For instance, you might talk to a patient about making it to his daughter’s wedding rather than reducing his hemoglobin A1c level. The A1c level is an important indicator for diabetes, but the wedding is what matters. That’s the motivator. Motivation is what gets our patients actively and sustainably engaged in their care.”

Taking the time for small, human moments. Practical and profound.

Patients as drivers

The driver’s seat is exactly where patients should be, according to Dr. Eric Larson, executive director of the Group Health Research Institute. “To effectively manage chronic care, the patient must be considered a central part of the care team and must have

Continued on next page

Leading by example

Group Health uses the medical home model in all of its medical centers. Across Washington state, other medical providers recognize the benefits.

The Patient-Centered Medical Home Collaborative is a joint project of the Washington State Department of Health and the Washington Academy of Physicians. In 2011, 32 teams will create patient-centered medical homes in Washington state. Visit them on the web at <http://doh.wa.gov/cfh/MH-Coll/>



“People want you to talk to them about how to live, not how they’ll be treated. They want to know if they’ll be able to walk their dog and take their laundry up the stairs.”

—Pat Justis, Manager, Washington’s Patient-Centered Medical Home Collaborative

Happiness for Hazel

Hazel Wakefield wanted a smart way to secure her finances during the balance of her retirement years. She also wanted to know that her money would make the world a better place once she passed away. When she learned about charitable gift annuities, she knew she'd found the right arrangement for her.



Kathi Willis, Director of Planned Giving, and Hazel Wakefield—all smiles about charitable gift annuities.

“Last year, I was pleased to establish a charitable gift annuity with the Group Health Foundation. It provides me with the comfort of receiving a regular stream of payments for the rest of my life,” explains Hazel. “Knowing that after I’m gone the remainder in the annuity would fund dementia research at the Group Health Research Institute, as well as support the Family Practice Residency, made it one of the easiest decisions I’ve ever made!”

If you’re over 60 and looking to use at least \$10,000 for something that will give you a steady cash flow for life and provide a meaningful benefit to others, please contact Kathi Willis at the Foundation. According to Hazel, you’ll be happy you did.

Call Kathi at 206-287-2502 or toll-free 1-866-389-5532, or visit ghc.org/foundation to learn more.

● Patients

Continued from page 2

the tools and knowledge to participate in that team,” he emphasizes. “We know that patients who are actively engaged in their care do better. They are the ones managing their care every single day. It makes sense that the more involved they are, the healthier they are.”

And Dr. Guterman agrees. Patient-centered teamwork is key to the success of the CCM. As part of a team, everyone is on an equal footing. “When patients come in, we know their names,” Dr. Guterman shares. “That’s huge because then they know we think about them as a person, not a number.”

Changing the way chronic care is managed throughout the world takes commitment. In Dr. Wagner’s view, “We have a commitment to practice transformation.” Transformation takes patience.

In the end, patience pays off for the patient.

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Make your donation go 100% further!

To honor Dr. Ed Wagner’s contributions to health care excellence, the Foundation established the Ed Wagner Endowment for Healthcare Innovation. Any gifts to the fund received in 2011 will be matched 1 to 1 by Group Health Cooperative to reach our first benchmark of \$500,000 by the end of the year. Think how good it will feel to double your impact!

Make your gift today at ghc.org/foundation.



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Your Gift of Health report

for donors and friends of the Group Health Foundation

Gift of Health WALL

“ The gift of health is knowing that my husband will be able to see his grandchildren grow. The wonderful and amazing physicians that caught his diabetic retinopathy in time to save his eyesight are a gift of health. Thank you.”

—Joan Johnson

THANKS to those of you who shared what the gift of health means to you on our on-line Gift of Health Wall. Here are a few that gave us a big dose of inspiration.

“ The gift of health means being able to live the life I want, being able to do the activities that I enjoy, capable of having a positive impact not only by the work I do, but also in the community I live in.”

—David Depner

“ My husband was given the gift of health (and life) by a Group Health consulting nurse who outreached to him by cell, urging an ER visit. That visit resulted in a triple bypass 5 years ago. We just celebrated 40 years of marriage. :) Thank you GH.”

—Cecilia Mizzoni

To see more or add your comment, visit grouphealthfoundation.org!