SPEAKERS: Bios and Abstracts

KEYNOTE SPEAKERS

Chuck Milligan, J.D, MPH –

BIO - Charles Milligan became executive director of the Center for Health Program Development and Management (Center) at the University of Maryland, Baltimore County (UMBC) in March 2004. Mr. Milligan oversees the delivery of the Center’s services to its clients, which include the Maryland Medicaid program, other state and local agencies in Maryland, the federal government (including the Leavitt Medicaid Commission), other state Medicaid agencies, and private foundations. Mr. Milligan also coordinates the Center's work with academic departments and research centers at UMBC.

Before joining the Center, Mr. Milligan was vice president at The Lewin Group, where he provided consulting services to twenty states and other clients, primarily involving the Medicaid program. Prior to that, he was Medicaid and SCHIP director for the state of New Mexico. He practiced as a health law attorney earlier in his career.

Mr. Milligan holds a J.D. from Harvard Law School, an M.P.H. from the University of California at Berkeley, and a B.B.A. from the University of Notre Dame.

Information about the Center may be found at www.chpdm.org.

ABSTRACT – Lead author of 'Turning Medicaid Beneficiaries into Purchasers of Health Care: Critical Success Factors for Medicaid Consumer-Directed Health Purchasing,' Chuck Milligan will discuss various models that state policymakers have used in applying the concepts of consumer-directed care to the Medicaid program. Attention will be given to the continuum of approaches that is emerging from innovative reform efforts across the nation, from limited-purpose health spending accounts coupled with traditional Medicaid benefits delivered through the state to the insurance model. Milligan will examine Florida's reform effort in the context of the four critical success factors for states discussed in his issue brief:
* Protect access to care for beneficiaries
* Develop policies that anticipate the effects on insurers, providers, and employers
* Reformulate the roles of state agencies
* Develop new 'risk management' approaches

According to Milligan's January 2006 'State Coverage Initiatives' report, Medicaid consumer-directed health accounts have the potential to incentivize preventive care and slow the growth in state Medicaid spending, but they remain untested.

**Lok Wong, MHS –**
Senior Health Care Analyst, Quality Measurement, National Committee for Quality Assurance

**BIO** - As Senior Health Care Analyst in Quality Measurement, Ms. Wong is responsible for managing clinical advisory groups in the development and maintenance of clinical quality measures at the National Committee for Quality Assurance (NCQA), for example the Geriatrics Measurement Advisory Panel, the Women’s Health Measurement Advisory Panel. Currently she is leading projects to develop new performance measures in several areas, including medication management, appropriate antibiotic use, care for vulnerable populations such as the chronically ill, elderly, women and children. She is also currently working on research around cultural and linguistic competency and health care disparities.

Prior to her current role in Quality Measurement at NCQA, Ms. Wong was Health Care Analyst in Product Development where she worked on developing NCQA’s Disease Management Accreditation program. Her interest in quality measurement, health services research and public accountability was fostered at Johns Hopkins School of Public Health where she gained her Masters of Health Science in Health Policy and Management. She has a bachelor of science in Politics from Bristol University, United Kingdom.

In addition to her professional experience, Ms. Wong has community experience in patient advocacy and outreach, dealing with issues from access for minority populations to oncology care and HIV education in the local Washington D.C. metropolitan area.

**ABSTRACT – ‘Health Care Disparities: Searching for Potential Solutions in Health Plans and Medical Practices’**

Medicaid patients face multiple challenges in navigating a complex health care system – due to language communication barriers, systems barriers for low-income, low literacy and ethnically diverse patients as well as limited resources in health care providers who care for this population. NCQA – a leading evaluator of health care quality in managed care organizations and medical practices will share its research findings on disparities in the quality of health care and describe current activities to engage health care organizations to improve care for minority and underserved patient populations, from an awards for health plans with innovative practices in
multicultural health care, developing patient-centered care programs to a demonstration grants program for small primary care practices who serve minority patients. This session will highlight concepts of importance for policy-makers and health care stakeholders interested in the health of underserved Medicaid patients and what are potential solutions for improving care.

Neil Izenberg, MD –
Chief Executive/Founder, KidsHealth

BIO - Dr. Izenberg has had a career-long focus developing media to help families better understand children’s health issues. In 1992, Izenberg founded the Nemours Foundation’s Center for Children’s Health Media, which creates online, print, and video media aimed at parents, kids, and teens. The Center’s KidsHealth.org website (of which Dr. Izenberg is the Editor-in-Chief) is the most visited online site about children’s health and parenting, with over 100 million visits yearly. KidsHealth content is licensed by dozens of children's hospitals and hundreds of other health-related organizations. KidsHealth received the Webby Award as Best Family/Parenting site on the web, the Webby Award as Best Health site, the Gold Parent’s Choice Award, and the Gold Teacher’s Choice Award. KidsHealth was recently rated as Excellent by Consumer Reports Webwatch (one of only 6 health sites to be so rated). KidsHealth works with such companies as Cheerios, Kmart, MSN, and Albertson’s to bring reliable, understandable health and parenting information to America’s families.

Dr. Izenberg edited the multi-volume Human Diseases and Conditions (Charles Scribner’s Sons) for middle and high school students; was co-author of KidsHealth Guide for Parents: Pregnancy to Age 5 (McGraw-Hill) and co-author of Fit Kids, a guide to raising healthy, active children (DK). Izenberg has written and produced 20 nationally distributed video programs for families concerning a range of medical and emotional topics. Dr. Izenberg is a recipient of the prestigious Education Award of the American Academy of Pediatrics.

Dr. Izenberg is a pediatrician at the Alfred I. duPont Hospital for Children in Wilmington, DE, and a professor of pediatrics at Jefferson Medical College in Philadelphia.

ABSTRACT – Dr. Izenberg will discuss the development of a website aimed to increase patient education, challenges faced in its implementation, and impact on patient empowerment.

TRACK 1 – DAY 1

Vicki Bertoch – ACS Government Solutions

BIO – Ms. Bertoch has more than 30 years of diverse experience in the healthcare field. She brings what is perhaps a unique combination of qualifications and experience, including an MSW, Academy of Healthcare Management, as well as Professional Project Manager. During her career in Oklahoma she provided services as a Licensed Clinical Social Worker, Licensed Marriage and Family Therapist, Approved Supervisor of the American Association of Marriage and Family Therapist, and was designated as Board Certified Diplomat in Social Work. In 1999, she moved to Florida to provide leadership in the implementation of Choice Counseling in Florida. Since that time she has worked under the supervision of the Agency for Health Care
Administration in reaching, educating and motivating Medicaid recipients to actively choose their healthcare plans and to assure the continuity of their healthcare. Currently she serves on the Board of Directors of the Tallahassee Chamber of Commerce on the Government Relations Committee and the Board of Directors of TalTech.

**ABSTRACT** – Ms. Bertoch will provide an overview of the plans for implementation of the Choice Counseling portion of Florida Medicaid Reform. The presentation will focus on the Outreach aspects of the plan.

**Paulette Geller – Winter Park Health Foundation**

**BIO** - A nationally-recognized pioneer in the development of community-based services for older adults, Paulette Geller joined the Foundation in 1995 as Executive Director of Older Adult Services to help lead the design and development of the Elinor & T. William Miller, Jr. Center for Older Adult Services, including the operation and expansion of its Day Break Adult Day Care Program. She's in charge of Foundation programs aimed at improving the physical and mental health and well-being of older adults through projects that support vital living and create a community for a lifetime.

Formerly Director of Day Services for the Jewish Home of Rochester, New York, from 1974 to 1995, where she helped establish the first adult day program in western New York, Ms. Geller is a champion for bringing the Pioneers for Culture Change in Long-Term Care and the replication of the Independent Transportation Network to Florida, and she coordinated the implementation of the AdvantAge Initiative for Orange County.

Some of her many professional affiliations include membership on the governing council of the American Society on Aging's Forum on Spirituality Religion and Aging, Program Committee for the 2005 national Grantmakers in Aging Conference, Chairperson of the Senior Resource Alliance Advisory Committee and member of the Delta Leadership Council. In addition, she is advisor to the Orange County Commission on Aging and a member of the Orlando Mayor's Committee on Aging, and serves as Co-Chairperson for the Heart of Florida United Way’s Service to our Seniors Panel and a member of the HFUW Fund Distribution Committee. She also serves as a member of the Board of Directors for Congregation Ohev Shalom.

**ABSTRACT** – Paulette Geller’s presentation on understanding the new Medicare Prescription Drug Benefit is focused on inspiring community action. She will address Medicare law changes and the federal and state government role in helping older adults make the right decision through choice counseling.

Ms. Geller will discuss the activities of the Winter Park Health Foundation and the community’s response, including the formation of the Central Florida Medicare Rx Coalition. She will detail the Coalition’s action plan, its three primary strategies of community outreach, information and referral and public education and will explain the results of their endeavors.
Lisa Margulis – Florida CHAIN

**BIO** - Lisa Margulis is the Executive Director of Florida CHAIN (Community Health Action Information Network). While she has lead this statewide effort to affect change in health care policy for only a short time, Lisa has had extensive experience in advocacy. Lisa is a graduate of Tulane University and received her Masters in Social Work from Boston University. Her extensive studies also include a year of international study at Israel's Hebrew University. Drawn to the issue of domestic and international poverty, Lisa has traveled to such countries as Indonesia, Nepal, and India in search of answers and solutions. Lisa received a Fellowship from Community Campus Partnerships for Health and also won a Student Choice Award for Preceptor of the Year from Nova Southeastern University where she assisted advanced degree students with their off campus studies as a Clinical Affiliate Instructor. She has also served as the Director of Programs and Communications for The Cooperative Feeding Program in Ft. Lauderdale, Florida and as an officer on the Board of Love Thy Neighbor, a provider of emergency services for the homeless. Lisa coordinated Broward County's homeless census, spearheaded its first hunger analysis survey, and coordinated several community wide Hunger Banquets. She is the recipient of a number of awards and honors for her commitment to the issues of hunger and poverty. Lisa was honored with a Heart of the Community award from Volunteer Broward, inducted into the World Homeless Union’s Hall of Honor, and has received several Speakers Awards from United Way.

**ABSTRACT** - Lisa Margulis from Florida CHAIN will discuss the importance of tailoring outreach and service provision to meet the needs of the demographic population being served so as to foster higher enrollment and participation rates. Attention will be given to promoting an understanding of the challenges and barriers that are/will be faced by consumers accessing health care. Finally, effective medical service models will be highlighted. In the spirit of consumer empowerment, several consumers will be joining the session in the audience and will be available to answer questions.

*Facilitated by Lisa Portelli – Winter Park Health Foundation*

**BIO** - Lisa Portelli has been involved in non-profit programs since 1986 and has a background that gives her a unique perspective on issues affecting the working poor. Ms. Portelli was executive director of Shared Housing for Single Parents, Inc., a United Way agency that merged with the Coalition for the Homeless in 1992. Next she was vice president for housing at the Coalition for the Homeless of Central Florida, then executive director of the I.M. Sulzbacher Center for the Homeless in Jacksonville and director of the Workforce One-Stop Career Center before coming to the Foundation in 2002.

Ms. Portelli has served on the Governor's Commission on Homelessness, the board of the Central Florida and NE Florida WAGES program, the Florida Coalition for the Homeless, the Florida Housing Coalition and the Orlando Neighborhood Improvement Corporation. She was founding chairman of the Board for Healing the Children of Florida Inc. She now serves on the boards of the Winter Park/Crosby YMCA, the Dental Care Access Foundation, the Primary Care Access Network and the Winter Park High School Foundation.
She was awarded the Celebration of Leadership--Tribute to Outstanding Women award in 1997 and has a degree in journalism from University of Wisconsin and a Master of Arts degree in Public Administration from the University of Central Florida.

TRACK 2 – DAY 1

David Chiriboga – University of South Florida, Florida Mental Health Institute

BIO – David A. Chiriboga is a professor in the Florida Mental Health Institute, University of South Florida. He completed his doctoral work at the University of Chicago, where his thesis consisted of a three wave study of elders before and after they relocated (1) to a long term care facility, (2) from one facility to another, or (3) from a facility to the community. His ongoing research has four overlapping themes. The first, a longitudinal study conducted between 1968 and 1997, involves the long term influence of stress exposure for mental health. The second, beginning in 1976, involves the longitudinal study of stress, acculturation and mental health issues in minority and majority populations. The third, beginning in 1995, involves use of distance technologies for health care and training. The fourth involves use of large administrative data sets like Medicare and Medicaid to study health disparities in mental health service utilization.

ABSTRACT - ‘Behavioral Health Disparities: What We Know and What We Need to Know’

In 2001 the Surgeon General published a report on mental health disparities, one of the earliest alerts as to the need to consider mental as well as physical disparities. This presentation will first examine national data on mental health disparities, and then present results from an ongoing study. The first set of findings deal with a successful effort to correct a systematic coding problem in the Medicaid race/ethnicity variable. The second set of findings report the prevalence of 11 different disorders for three groups of Medicaid beneficiaries: children up through age 18, 18-64 and 65 and over. Comparisons are made between non-Hispanic Whites, African American/Blacks, and Hispanics/Latinos. One conclusion is that, in contrast to physical health disparities, ethnic/racial minorities generally have a lower prevalence of mental health problems than do the non-Hispanic Whites. Exceptions include behavioral conduct disorders in African American children, schizophrenia in African American adults, and Major Affective disorders in Hispanics age 18 and over. For the third set of findings, Per User monthly costs are then reviewed for adults aged 18-64, with findings suggesting greater use of psychotropic medications among Hispanic beneficiaries in the adult years. Overall behavioral health and physical health costs were consistently higher for African Americans.

In the absence of more detailed information, these results suggest the importance of recognizing the existence of a behavioral health problem, as well as the operation of access and utilization factors such as such as stigma, health literacy, and language difficulties. Existing guidelines such as the 14 culturally and linguistically appropriate standards set by the HHS Office of Minority Affairs provide guidance for better if not best practice. Future research by the collaborative team will examine activities at actual sites, as well as complete a survey of beneficiaries.
Ed Feaver – Lawton and Rhea Chiles Center for Healthy Mothers and Babies, USF

**BIO** - Edward A. Feaver is the Director of the Tallahassee Office of the Lawton and Rhea Chiles Center for Healthy Mothers and Babies, and Project Director of the Whole Child Project for the Lawton Chiles Foundation. Mr. Feaver has over thirty years of experience in the human services arena, including four years as Secretary of the State of Florida’s Department of Children and Families. As Secretary, Mr. Feaver provided policy direction and leadership for most of the human service programs in the state, including child and adult protection, economic assistance eligibility, developmental services, mental health and substance abuse services, aging and adult services, and domestic violence. As a project director at the Chiles Center, Mr. Feaver is engaged in strategic planning, program management, grant development, and outcome measurement. Mr. Feaver is also the principal investigator for a series of projects related to maternal and child health outcomes.

**ABSTRACT** - ‘Maternal and Child Health Outcome Disparities: What and Why’
This presentation will highlight persistent disparities in birth outcomes for African American women in Florida based on five years of population-based analysis linking vital statistics, Medicaid eligibility, WIC, and Healthy Start participation data. It will further describe a three year qualitative study that began July 1, 2005 that will attempt to understand the root causes of these disparities from the perspective of African American women, and the role that the perinatal health care system contributes to their existence and potentially can contribute to their elimination or reduction. Recommendations for a model perinatal health care system, with possible local implementation, will be the final output of the project. This work is a partnership between The Lawton and Rhea Chiles Center at the University of South Florida and the Maternal and Child Health Education and Research Data Center at the University of Florida.

Betty L. Smith – Office of Minority Health, Department of Health

**BIO** - Ms. Smith is a Government Analyst with the Florida Department of Health, Office of Minority Health. She is responsible for the statewide activities of the Reducing Racial and Ethnic Health Disparities: “Closing the Gap” grant program, the Florida Healthy People 2010 program, and provides leadership to the State Partnership Grant program. Ms. Smith also oversees the Reducing Racial and Ethnic Health Disparities Advisory Committee and serves as a contract manager. She received her graduate degree from Florida State University and her undergraduate degree from Cal East/Bay in Hayward, California.

**ABSTRACT** - Florida’s racial and ethnic populations continue to increase in size, correlating with the persistent and often increasing health disparities among minority groups. Despite notable progress in improving the health status of Floridians, there are continuing disparities in the burden of illness and death experienced by Blacks, Hispanics, Native Americans, and Asian/Pacific Islanders when compared to the state’s population as a whole. Section 381.7351 – 381.7356, Florida Statutes, established the Reducing Racial and Ethnic Health Disparities: “Closing the Gap Act to facilitate the improvement of health outcomes and elimination of health disparities in racial and ethnic populations. It is designed to eliminate racial and ethnic health disparities through broad-based participation by public and private entities, and faith-based organizations.
BIO - Richard Lottenberg, M.D. Professor of Medicine, Division of Hematology/Oncology, University of Florida College of Medicine, currently serves as the Director of the University of Florida Adult Sickle Cell Disease Clinical Program. Previous administrative positions have included Chief, Division of Hematology/Oncology (1995-2000), Medical Director, Hemapheresis Service, Civitan LifeSouth Blood System (1993-2000), and National Marrow Donor Program, Donor Center Medical Director (1996-2000). From July 2000 to June 2001 he was a visiting fellow at the Cecil G. Sheps Center for Health Services Research at the University of North Carolina-Chapel Hill. Dr. Lottenberg is a member of the Florida Center for Medicaid and the Uninsured advisory committee. He is the Medical Advisor for the Florida Sickle Cell Disease Association. Dr. Lottenberg is the mentor for post-doctoral fellows and students performing clinical research in sickle cell disease at the University of Florida. From 2000-2002, he was a member of the American Society of Hematology Committee for Optimization of Hematologic Care. He is currently a member of the Committee on Government Affairs and in 2005 served as the Society’s representative at the Health Resources and Services Administration Sickle Cell Disease Program planning meetings. Dr. Lottenberg has been recognized for excellence in teaching by the University of Florida Internal Medicine Residents in 1998, 1999, and 2000. He was honored by the College of Medicine as an exemplary teacher in 2005.

Recent educational projects include co-authoring an American Society of Hematology-sponsored web-based evidence-based medicine curriculum for hematology trainees drawing upon sickle cell disease published literature and co-authoring the section on hemolytic red blood cell disorders in the 2002 and 2005 American Society of Hematology Self Assessment Program. He has participated in international, national and regional continuing education programs and workshops addressing clinical and programmatic issues pertaining to patients with hemoglobinopathies. Previous research efforts have included serving as the principal investigator for a NIH Training Grant in Cancer Biology (T32; 1996-2000) and as a recipient of investigator-initiated grant funding from the National Institutes of Health and the American Heart Association. During his 23-year tenure on the faculty at the University of Florida, Dr. Lottenberg has maintained an active clinical hematology practice with emphasis on patients with sickle cell disease. Dr. Lottenberg has become recognized as a hematology consultant for clinicians throughout the state.

ABSTRACT - Sickle cell disease (SCD) represents a group of disorders characterized by an inherited abnormality in the hemoglobin molecule. The presence of sickle hemoglobin as a homozygous condition or in association with other hemoglobin abnormalities results in anemia and vaso-occlusion. Frequent disabling pain is the most common clinical manifestation, however any organ system can be affected leading to complications such as stroke, lung disease, and kidney failure. In addition to the substantial morbidity there is increased mortality. The identification of newborns with SCD and timely implementation of treatment modalities to prevent life threatening complications has markedly improved the survival rate. The majority of children receiving care through comprehensive programs can now survive to adulthood. A lack of a sufficient number of SCD specialists and resources has created challenges in meeting the
needs of the growing adult population. The ethnic and geographic diversity of the SCD population in Florida pose additional problems in providing adequate ongoing medical care leading to an increased reliance on hospital emergency department and inpatient services. There is an opportunity to address the current deficits in disease management. In this presentation a framework for a Florida Medicaid SCD disease management initiative will be provided. The design of the program focuses on the development and implementation of site-specific clinical guidelines, health care transition from pediatric to adult-oriented health care, enhancement of the use of evidence-based interventions, and targeted case management.

*Facilitated by Carl W. Patten – Blue Cross / Blue Shield*

**BIO -** Carl Patten is a senior policy analyst for Blue Cross Blue Shield of Florida in Jacksonville, Florida. Carl is responsible for informing key personnel about certain public policy issues – including health disparities and cultural competency. Carl also serves as chair of the Public Affairs Group Diversity Business Council.

Prior to joining Blue Cross and Blue Shield of Florida, Carl served as a staff attorney for Community Catalyst in Boston, Massachusetts. In this role, Carl assisted and represented advocates for the medically underserved to protect charitable assets where non-profit health plans and hospitals were in the process of converting to for-profit status.

Carl is a graduate of the University of Chicago Law School and the Harvard School of Public Health and is licensed to practice law in Massachusetts.

**TRACK 3 – DAY 1**

Bob Constantine – University of South Florida, Florida Mental Health Institute

**BIO -** Robert Constantine is a Research Associate Professor in the Department of Mental Health Law and Policy at the Louis De La Parte Florida Mental Health Institute, University of South Florida. He received a Ph.D. in Sociology from Florida State University and more recently a Masters in Public Health from the University of Connecticut. During his more than 30 years in the mental health field Constantine managed behavioral health care services at a wide variety of levels. His early years were spent in Florida’s Department of Health and Rehabilitative Services where he managed a state forensic hospital, served as the Director of Mental Health and Substance Abuse Services on two different occasions and as District Administrator responsible for all state supported health and human services in southwest Florida.

More recently Constantine served as the CEO of the Florida Council for Behavioral Healthcare, a trade association of community based behavioral health care providers. In this capacity he helped frame state policy and advocated for the resources needed to improve the performance of Florida’s mental health system. In his current capacity at the FMHI, Dr. Constantine has served as the principal investigator for two large pharmacy management projects for behavioral health designed to improve the quality of prescribing practices for psychotherapeutic medications.
ABSTRACT – The Medicaid Drug Therapy Management for Behavioral Health (MDTMP)
The MDTMP is designed to improve the quality of prescribing of psychotherapeutic medications. The program includes the adoption of evidence-based guidelines for the treatment of major mental illnesses and the implementation of a variety of interventions designed to increase guideline consistent practices. The presentation will focus on the technological strategies used to accomplish this. These include the following:

- Retrospective review of pharmacy claims against a series of guideline consistent quality edits
- Interventions with targeted prescribers identified through this analysis that are designed to enhance their understanding and use of guidelines at a patient specific level
- Interventions with targeted patients identified through this process designed to educate patients about continuance and the use of multiple prescribers
- Use of PDA’s and eMPOWERx to facilitate guideline consistent prescribing at the point of care

In addition, the presentation will review web-based strategies for exposing prescribers to emerging research on effective prescribing practices and some thoughts about how we might communicate directly with consumers of mental health services.

Jeff Loomis – University of Florida

BIO – Jeff is the Associate Director and Research Coordinator of the UF Center for Telehealth and Healthcare Communications. The Center for Telehealth facilitates collaborative and multidisciplinary research on distance approaches to healthcare services, and education.

Mr. Loomis holds a Masters of Health Administration from the University of Florida, and has over 25 years experience in healthcare delivery. He came to the University of Florida after serving 20 years in the U.S. Navy as a Chief Hospital Corpsman. His primary responsibility was in the area of Laboratory Medicine, and Healthcare Operations and Administration. His last tour was at the National Naval Medical Center as the Director of Telemedicine. The Navy Telemedicine Project was responsible for integrating the use of telemedicine into clinical practices, and to deliver healthcare to remote areas throughout the world. As America's baby-boom generation grows older, the chronically ill will need increased access to more healthcare services. With this in mind, Jeff's interests include using his twenty-five years of healthcare experience to show how the use of telecommunications technology can increase access to healthcare, increase quality, and reduce cost.

ABSTRACT - Alzheimer’s disease is Florida’s epidemic. More than 465,000 Floridians currently have mild to severe dementia, the most common form being Alzheimer’s disease. Approximately 75% of persons suffering with dementia are cared for in the home. Because of the time and stress related to caring for elders with Alzheimer’s disease and related disorders, it is often difficult to find time to access education and support services.

As the number of persons suffering from dementia increases, innovative way must be made available for accessing health information at lower cost must be sought. Alzheimer’s Caregiver Support Online (AlzOnline) provides Internet and telephone-based support, health information,
education, and support to caregivers of persons with progressive dementia. The AlzOnline is housed in the University of Florida’s Center for Telehealth, a national leader in providing technology-based resources and services.

**Lisa Simpson – The Florida Initiative for Children’s Healthcare Quality, University of South Florida**

**BIO** – Lisa Simpson is the ACH Guild Endowed Chair in Child Health Policy at the University of South Florida where she has launched the Florida Initiative for Children’s Healthcare Quality and is conducting numerous quality and outcomes projects focused on health care quality and disparities, health information technology (HIT) and regional and national improvement. She also serves as the National Director for Child Health Policy for the National Initiative for Children’s Healthcare Quality and was recently elected to the Board of the Ambulatory Pediatrics Association as the chair of the Public Policy Committee. Examples of current projects include a needs assessment of Florida child health provider HIT capacity, surveying children’s hospitals nationally for their adoption of HIT, and leading a national workgroup to develop pediatric sensitive HIT standards in partnership with the Agency for Healthcare Research and Quality.

Dr. Simpson, a board-certified pediatrician with training in public health, health services research and health policy, was formerly the Deputy Director at the Agency for Healthcare Research and Quality at the US Department of Health and Human Services (DHHS). During her seven years as AHRQ’s Deputy Director, she spearheaded numerous initiatives to increase the quality and quantity of child health services research sponsored by the Agency.

She received her Master of Public Health degree from the University of Hawaii at Manoa School of Public Health and completed her medical degree at Trinity College in Dublin, Ireland. Dr. Simpson received postgraduate training and fellowships from Harvard University’s John F. Kennedy School of Government, the Institute for Policy Studies at the University of California, San Francisco’s School of Medicine, and the University of North Carolina at Chapel Hill’s Department of Community Medicine and Pediatrics. Dr. Simpson publishes and speaks frequently on the quality and outcomes of care for children. She has received numerous awards including the Excellence in Public Service Award from the American Academy of Pediatrics, the Senior Executive Service Meritorious Presidential Rank Award, and the DHHS Secretary’s Distinguished Service Award. She has also been listed in “Who’s Who in Health and Medicine”, “Who’s Who in America” and “Who’s Who since 1996.

**ABSTRACT – Technology and Children’s Healthcare: Provider and Consumer Dimensions**

This presentation will focus on current trends and issues in making health information available to providers and consumers. It will first present findings from a recent survey of Florida child health providers' adoption of various health information technology platforms (including EHRs, email, PDAs, and websites for patients) and how these profiles vary by the volume of Medicaid patients served. It will also highlight findings related to provider perceptions of patient information needs and the emerging penetration of pay for performance initiatives. Next, two particular approaches being used to promote consumer/patient engagement will be discussed - web-based personal health records and public reporting of quality information.
BIO - Associate Professor, Department of Epidemiology and Health Policy Research; Associate Professor, Department of Pediatrics; Affiliate Associate Professor, Department of Psychology; Associate Director, Institute for Child Health Policy.

Dr. Youngblade’s research has three foci: (1) contexts of child and adolescent socio-emotional development, health, and well being, especially in the contexts of family and peer relations; (2) access to healthcare for vulnerable youth such as children with special healthcare needs and adolescents, particularly those engaging in risky behaviors; and (3) analysis of developmental processes in applied contexts, such as low-income families, child abuse, homelessness, childcare and maternal employment, and community systems of healthcare. Dr. Youngblade has worked on several state-wide research projects related to children and adolescents with special health care needs, and children and adolescents’ access to and utilization of health care. She is the Principal Investigator of two four-year demonstration projects funded by the Maternal and Child Health Bureau. In this research, she partners with multiple agencies in Florida to develop a “medical home” for children in the safety net, especially those with multiple service needs owing to their chronic health conditions. These projects link community health centers to healthcare services using telemedicine, and evaluate the impact on children and families from increased access to needed services. She recently completed a study funded by the Agency of Healthcare Research and Quality about the predictors, contexts, and healthcare costs of adolescent risky behavior. She has published over 40 peer-reviewed papers and co-authored a book on the effects of maternal employment on children’s well being.

Areas of expertise: child and adolescent health; development in context; health-care access for vulnerable youth and families; program evaluation; health services research and policy.

Education: BS, Psychology, University of Oregon; MS, Human Development and Family Studies, Penn State University; PhD, Human Development and Family Studies, Penn State University.

ABSTRACT - Telehealth Connections Project

Telehealth Connections is a project of the Institute for Child Health Policy at the University of Florida. The project is funded by two grants from the Maternal and Child Health Bureau (MCHB), Health Resources and Services Administration, within the Department of Health and Human Services (H93MC 00073 and H02 MC02619). In addition, the project receives generous match support from the Florida Department of Health, Children’s Medical Services (CMS).

The purpose of this project is to link Florida’s Title V program (CMS) and local Community Health Centers to:

- Reach and identify uninsured children with special health care needs in Florida and enroll them in insurance
- Focus on underserved communities that traditionally have faced numerous barriers to care, particularly those in the black and Hispanic communities, and children living in rural areas
- Use telemedicine to facilitate enrollment in CMS, care coordination, and access to specialty care
• Work with trusted community elders -- grandmothers -- as lay health partners to facilitate health-related outreach and support to children with special health care needs and their families.

In short, the project seeks to build a sustainable medical home for children with special health care needs in the safety net.

*Facilitated by* Bob Brooks – Florida State University, School of Medicine

**BIO** – Robert G. Brooks, M.D. is Associate Dean for Health Affairs and Professor of Family Medicine and Rural Health at the Florida State University College of Medicine (Sept, 2001 – present). A native “Michigander” he received his B.A. and M.D. degrees from Wayne State University in Detroit. He is trained and Board-certified in Internal Medicine and Infectious Diseases and practiced medicine from 1984 through 1999 in Orlando, Florida. During that time he served as Assistant Director of the Internal Medicine Residency Program (1984-1990) and Chief of Infectious Diseases (1987-1994) at the Orlando Regional Medical Center. In November of 1994, Dr. Brooks was elected to the Florida House of Representatives where he served until appointed Secretary of the Florida Department of Health by then newly-elected Governor Jeb Bush in late 1998. In September of 2001, Dr. Brooks joined the academic team at Florida State University involved with establishing the first new allopathic medical school in the U.S. in over 20 years. Since joining the medical school, he has established four separate Centers of Excellence including Centers on Terrorism and Public Health, Patient Safety, Rural Health, and Medicine and Public Health. He has published over 60 articles on healthcare-related topics.

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**TRACK 1 – DAY 2**

Betsy Shenkman – University of Florida, Institute for Child Health Policy

**BIO** – Betsy Shenkman, PhD; Professor of Epidemiology and Health Policy Research and Pediatrics; Chair, Department of Epidemiology and Health Policy Research; Director, Institute for Child Health Policy; College of Medicine, University of Florida

Dr. Shenkman is a professor in the College of Medicine at the University of Florida and Director of the Institute for Child Health Policy. Her areas of specialization include assessing the relationship between health plan organizational characteristics, provider practice setting characteristics, and provider reimbursement on the quality and outcomes of care for children and adults, including those with chronic conditions. Dr. Shenkman is a nationally recognized expert related to examining children’s quality of care, particularly for public insurance programs such as Medicaid and the State Children’s Health Insurance Program. She is the Principal Investigator on five state projects including evaluations of: 1) the Texas Medicaid and Children’s Health Insurance Program, 2) the Florida KidCare Program, 3) the Florida Title V Program, 4) a special waiver project designed to provide palliative care for children with life limiting conditions, 5) and the children with chronic condition component of Florida’s Medicaid reform pilot project. Dr. Shenkman is also the Principal Investigator on a HRSA funded project examining financing strategies for health plans and providers caring for children with chronic conditions. She has publications related to financing and quality of care in journals such as
ABSTRACT - Adolescents with Chronic Conditions and Health Care Decision-Making
Authors: Caprice Knapp, PhD, Elizabeth Shenkman, PhD, I-Chan Huang, PhD; Affiliation: Department of Epidemiology and Health Policy Research, College of Medicine; Institute for Child Health Policy, University of Florida

As the number of children with special health care needs (CShCN) that survive to adulthood rises, addressing adolescent health care needs as they transition to the adult health care system becomes increasingly important. Several national agencies and government organizations have emphasized the need for transition planning standards and widespread implementation of those standards. Healthy People 2010, an initiative from the U.S. Surgeon General, has 207 objectives for people with disabilities, one of which is to improve adolescent transition to the adult health care system. Parents and adolescents need to participate in these very important discussions about transition with their physicians. Measuring satisfaction with physician communication regarding participation in decision-making and preparedness for health care transition from both the perspective of the parent and adolescent can provide valuable information for health policy practice and relevant research.

Tim Buehner – Florida Center for Prevention Research, Florida State University

BIO - Dr. Buehner is currently the senior analyst with the Florida Center for Prevention Research at Florida State University. His primary responsibility is the evaluation of the Center’s MediRITE Project (Medicaid Reform Information Training and Evaluation), which provides information, training, and evaluation support to the Choice Counseling aspect of Florida Medicaid Reform. Dr. Buehner has previously conducted research and evaluation projects in the areas of tobacco prevention, HIV prevention, community capacity building, student involvement in public health initiatives, health promotion, health education, and psychological aspects of people with cancer. Prior to coming to FSU in 2006, he worked at the University of Miami School of Medicine in the departments of Psychiatry and Epidemiology, and the Florida Department of Health. Dr. Buehner received his Ph.D. in Counseling Psychology from the University of Florida and is a licensed psychologist.

ABSTRACT - The MediRITE Project, conducted by the Center for Prevention Research (FCPR) at Florida State University (FSU), will provide information and training to support the choice process of Florida’s Medicaid Reform initiative. MediRITE also includes evaluation activities specific to the training and choice processes. The MediRITE project will develop a Choice Counselor on-line training course as well as informational materials for beneficiary use before and during the choice process. These materials will include a printed flyer containing important information about choice and enrollment process, a website with more detailed information, and a brief video (DVD) presentation. Evaluation activities will be conducted to meet two primary objectives: (1) an examination of the process and outcomes of the choice process, including available materials and resources as well as interactions with the Choice Counselor; and (2) an examination of the utility of the certification course for Choice Counselors.
Chuck Corley – Department of Elderly Affairs

BIO - Charles (Chuck) Corley is the Director of Statewide Community Based Services for the Florida Department of Elder Affairs. He has worked in the health care field for over 27 years as a direct service provider and health care administrator. Mr. Corley has been a Hospital administrator and a consultant in the area of hospital and nursing home certificates of need. For the past 20 years, he has been involved in the direct administration of health and human services programs funded primarily through Title XIX (Medicaid). Mr. Corley’s experiences include the development and implementation of managed care plans serving specialized populations and he has been extensively involved in the expansion of home and community based programs as an alternative to nursing home placement in Florida since 1985. Mr. Corley has more recently been responsible for the administration of Florida’s CDC+ consumer directed care program that serves individuals in the Aged/Disabled Adult, Developmental Disabilities, and Traumatic Brain Injury Medicaid Waivers.

ABSTRACT - The presentation will explore the difficulties encountered by consumers as employers and the ways in which entities such as the IRS, U.S Dept. of Labor, Florida Department of Labor and Employment Security et.al. have expectations of consumer and/or employers. Additionally, the difficulties of consumers administering the numerous ministerial responsibilities associated with being a consumer/employer and some ways of relieving that burden will be considered.

Rick Smith – University of South Florida, Florida Mental Health Institute

BIO - Dr. Richard Smith is Assistant Professor of Economics in the College of Business at USF St. Petersburg. He earned his Ph.D. in 2001 from the University of Connecticut, and completed post-doctoral training in health services research and health economics at UC Berkeley in 2003. His interests are on the role of the consumer in health care markets and the economics of publicly-funded health services.

ABSTRACT - ‘The Effect of Consumer Health Knowledge and Literacy on Mental Health Service Outcomes in an Adult Medicaid Population’
As consumers become more directly involved in the maintenance and promotion of their own health, as well as in determining the kinds of health care services they receive, it is important to understand how their knowledge influences behavioral health-care outcomes (e.g. utilization and service quality), and ultimately affects the quality of their health and life. To that end, the researchers have embarked to define and create psychometric measures of behavioral health knowledge and literacy, as well as to develop an analytical model to assess their impact on behavioral health utilization, service quality, and patient quality of life. This work presents initial findings of a pilot study of the analytical model, using 2003 data on Florida adult Medicaid recipients in AHCA Area 1.

Facilitated by Kate Morgan – Health Management Associates

BIO - Kate Morgan has 20 years of experience working on health care issues including Medicaid, managed health care, health care financing and reform, trauma and indigent health
care. Ms. Morgan was the chief of managed health care and has been responsible for health care provider certification of commercial HMOs, as well as Medicaid HMO contracting and monitoring. She has served as chief legislative analyst on health care issues in Florida's House of Representatives. Having managed Florida's Bureau of State Employees' Health Insurance, Ms. Morgan has experience in the development of health insurance benefits, limitations and exclusions. She has experience in state procurements, including the contracting and oversight of Florida's first enrollment broker contract.

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**TRACK 2 – DAY 2**

Betsy Wood – Department of Health

**BIO** – Betsy Wood is the director of the Maternal, Infant, and Reproductive Health unit at the Department of Health. She received her MPH from the University of South Florida and her BSN from Florida State University. Prior to her current position, Betsy worked with Children’s Medical Services, the HIV/AIDS program office and before that, implemented the Community Care for the Elderly Program in Leon County. She received the Florida Public Health Maternal and Child Health Leadership award in 2005.

Betsy is the principal investigator for a HRSA grant to integrate comprehensive women’s health into state MCH programs. She promotes the lifespan approach to women’s health and is committed to helping create a comprehensive and holistic health care system that is sensitive to cultural differences and is available to all women.

**ABSTRACT** - *Perinatal Health Disparities: Status and Response*

Even during periods of perinatal health improvements, significant disparities in birth and infant health outcomes between Florida’s Black and White populations have always been present. Examples of these disparities can be seen in the primary indicators of overall population health, the rate of infant mortality (deaths < 365 days) and low birth weight deliveries (< 2500 grams). In Florida, the rate of Black infant mortality is and historically has been over two times higher than the rate of white infant mortality. Florida Black infants consistently have low birth weight rates that are nearly double the rates of low birth weight of their White counterparts. Unfortunately, these two examples of perinatal disparities between Florida Black and White infants are representative of the disparities that exist for virtually all of the Maternal and Child health and risk factor indicators.

To investigate the origins of disparity and to develop effective strategies to address disproportionate health outcomes, the Florida Department of Health (DOH) conducts research and strategizing processes with local communities, MCH experts and partners. DOH realizes that for effective identification and reduction of adverse multi-origin determinants that influence health disparities among our populations, the active involvement of local communities is critical. Historically a component of the law that governs Florida’s maternal and child health systems, the function of community involvement is further becoming institutionalized as a required part of the programmatic operations and activities in MCH-oriented programs. The implementation and sustenance of community-based efforts to eliminate racial/ethnic health disparities is further
supported by DOH through the provision and support of funds and funding streams to community-based and community-implemented projects. DOH also provides data, analytical and evaluation assistance to support the creation of evidence-based practices that assure our collective efforts to eliminate perinatal disparities are effective and appropriate for our diverse Florida populations.

Cheryl Clark – Florida State University, Department of Health

BIO – Cheryl Clark received a Bachelors Degree in Health Information Management at University of Wisconsin - Milwaukee in 1987 and for the next 9 years worked as a Coding/Abstractor at a children's hospital, a Records Technician at a city municipality and a student health center program manager at the University of Wisconsin-Milwaukee. In 1996, she moved to Tampa, Fl to attend the University of South Florida for a Masters Degree of Public Health, which she received in 1999. Before the completion of her Masters, she moved to Tallahassee and became a Program Administrator of the Inpatient Hospital and Nursing Home Data Collection at AHCA's State Center for Health Statistics where she was employed from 1997-2000. Since 2000, she has been employed at Florida State University's Center for Early Prevention and Intervention Policy and contracted to the Florida Department of Health Infant, Maternal and Reproductive Health Unit as a data/research consultant. In 2005, Ms. Clark was accepted into the inaugural doctorate class of Florida A & M Institute of Public Health for studies in Applied Epidemiology and Biostatistics. Ms. Clark was invited and became a member of the Golden Key International Honour Society in the Fall 2005 for her doctorate studies' GPA.

ABSTRACT – Addressing Perinatal Health Disparities through Community Involvement Initiatives

Even during periods of perinatal health improvements, significant disparities in birth and infant health outcomes between Florida’s Black and White populations have always been present. Examples of these disparities can be seen in the primary indicators of overall population health, the rate of infant mortality (deaths < 365 days) and low birth weight deliveries (< 2500 grams). In Florida, the rate of Black infant mortality is and historically has been over two times higher than the rate of white infant mortality. Florida Black infants consistently have low birth weight rates that are nearly double the rates of low birth weight of their White counterparts. Unfortunately, these two examples of perinatal disparities between Florida Black and White infants are representative of the disparities that exist for virtually all of the Maternal and Child health and risk factor indicators.

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Robert Weech-Maldonado – Health Services Research, Management and Policy, University of Florida

**BIO** - Dr. Robert Weech-Maldonado is associate professor of health services research, management and policy, College of Public Health and Health Professions, University of Florida. He joined the faculty at the UF in 2004. Prior to this he was a faculty member at Penn State University. He currently teaches in both the MHA and PhD programs at UF, and has taught courses in health care management, strategic management, finance, and quality and outcomes. Dr. Weech-Maldonado’s research examines the impact of organizational and market factors on access, quality, and costs of care for vulnerable populations, particularly the elderly and racial/ethnic minorities. His research appears in journals such as *Health Services Research*, *Health Care Management Review*, *Journal of General Internal Medicine*, *Health Services Management Research*, and *Journal of Health Care Finance*.

He currently has a contract with RAND/DHHS Office of Minority Health to develop a cultural competency assessment tool for hospitals (CCATH). He is also a member of RAND’s Consumer Assessments of Healthcare Providers and Systems (CAHPS II) research team, where he is analyzing racial/ethnic differences in patient experiences with care and evaluating the cultural adaptation of the CAHPS surveys and reports of care. He was recently funded by the Commonwealth Fund to examine the relationship between hospitals’ cultural competency activities and diverse patient experiences. Dr. Weech-Maldonado and colleagues were the recipients of the 1999 American College of Health Care Executives (ACHE) Health Management Research Award for their study on diversity management of hospitals in Pennsylvania.

Dr. Weech-Maldonado also studies quality and cost issues in long-term care. He currently has a contract with USF/Administration on Aging to examine the relationship of quality and financial performance of Florida nursing homes. In addition, he is co-investigator in a VA-funded project examining quality of care for veterans in community nursing homes funded by the VA per-diem program. In a NIA-funded project, he studied the impact of nursing home quality on costs and financial performance.

**ABSTRACT** - ‘Cultural Competence and Patient Experiences with Care’
Patient assessments of health care, such as the standardized surveys developed in the Consumer Assessments of Health Providers and Systems (CAHPS®) are increasingly being used as an indicator of the quality of care provided by health plans and health care providers. These evaluations provide important information about how well providers meet the needs of the people they serve. How well health care providers serve different racial/ethnic subgroups is of interest since it reflects how well the health care system treats those who are at a relative socioeconomic disadvantage. Furthermore, this is an important topic given the demographic shifts occurring in the U.S.
This presentation will discuss evidence from recent studies using the National CAHPS® Benchmarking Database on racial/ethnic and language differences in reports and ratings of care. CAHPS 2.0 contains 17 items (reports) measuring 5 domains of health plan performance: getting needed care (access to care), timeliness of care (promptness of care), provider communication, staff helpfulness, and plan service. In addition, CAHPS 2.0 includes four global rating items: personal doctor or nurse, specialists, health care, and health plan.

Cultural competence has been defined as an “ongoing commitment or institutionalization of appropriate practices and policies for diverse populations” (Brach and Fraser, 2000:183). We will present evidence on the potential role of cultural competence in reducing the observed disparities in patient experiences with care. Finally, we discuss present efforts to develop measures of cultural competence from both the patient and organizational perspectives.

Kathy Jackson – Access Health Solutions

BIO - Kathy B. Jackson, PhD., LHCRM - Senior Vice President, Access Health Solutions; is also a nurse practitioner. She received her nursing education at Monroe Community College and the University of Rochester in Rochester, New York. She received her advance nursing degree while working for the World Health Organization. Dr. Jackson has undergraduate and graduate degrees in Health Care Administration, Health Care Risk Management and Health Care Law. She has a Doctorate of Philosophy in Health Care Administration.

Dr. Jackson has held several senior management positions in the managed care industry, including Director of Customer Services and Government Relations for Humana Medical Plans, Director of Statewide Operations for PCA Health Plans of Florida and Vice President of Operations and Government Relations for PhyTrust. In 2004, Dr. Jackson was the author and architect of the SB 1178 (Healthy People 2010) that addresses Health Care disparities, this bill was signed into law (statue) in June of 2004. It is the only legislation in the United States that addresses Minority Health Issues, making the Agencies that are given stewardship of minority health programs accountable for outcomes in reducing Health Care disparities.

ABSTRACT - Introduction: Although the Medicaid program is one of the most technologically advanced health care systems in the United States and the Medicaid beneficiaries have access to high standards of health care, the health disparities continue to exist. Racial and ethnic standards of health care are lower quality health care even when access related factors such as medical insurance are controlled.

Statement: The preponderance of evidence of health care disparities was so compelling that the Institute of Medicine (IOM) and the National Institute of Health (NIH) implemented Healthy People 2010, a directive to eliminate health care disparities.

Problem:

- “Eliminate” was unattainable. “Reduce” was a more realistic goal.
- The Problem is systemic- The model of health care that evolved is one of discounting rates by volume. Therefore, the independent provider cannot compete. Typically, the independent provider is a minority provider.
- The system inadvertently disenfranchises the minority provider who has traditionally and historically taken care of underserved and under-represented populations.

Solutions:
• Florida Statute, Section 381.736, requires the Agency of Health Care Administration to contract with Minority Physician Networks to deliver culturally competent, cost effective, quality care and to collaborate with the Department of Health to reduce health care disparities.
• The Medicaid Reform Application requires Cultural Competency Programs for all plans.
• The Medicaid Reform Application allows plans to be reimbursed for extended services such as community education, community collaboration, health education & screening, interpreter services and other services that address lifestyle behaviors.

Conclusion: By radically increasing patient access to culturally competent care, outcomes are improved and money is saved because patients will become more compliant with prescribed treatments, will avoid unnecessary hospitalizations, will experience improved health outcomes, will avoid complications of their diseases, and will, in short, stay healthier; thus reducing health care disparities.

Carol Weys – American Cancer Society, Florida Division

BIO - A Florida resident since 1998, Carol N. Weys serves as the American Cancer Society, Florida Division’s Director of Health Initiatives. She is responsible for the early detection and prevention programs and services and the Division’s cancer disparity initiatives, which includes a statewide grant program for community based organizations.

The American Cancer Society is a nationwide, community based voluntary health organization, dedicated to eliminating cancer, and diminishing suffering from cancer, through research, education, advocacy and service. Ms. Weys has been with the American Cancer Society since 1998, serving in a variety of capacities including manager of pilot program to increase access to cancer screening services among medically underserved women and the Health Policy Analyst.

Ms. Weys came to the American Cancer Society after working in the not-for-profit public health field for more than 10 years. Her experience is in government based and non-government based organizations where she has focused primarily on the disparate public health issues of medically underserved and other minority identified populations. A 1989 graduate of the University of Lowell in Lowell, Massachusetts, she earned a Bachelors of Arts degree in Psychology. Ms. Weys continued studies at the University of Massachusetts at Lowell to earn a Master of Arts degree in Community Social Psychology in 1992.

ABSTRACT - ‘Partnering with the American Cancer Society to Reduce Cancer Burdens’ This program will review the cancer disparities experienced in the state of Florida, especially among African Americans and other adults of African descent. Participants in this program will be introduced the American Cancer Society’s community-based resources designed to make cancer related health care easier while increasing cancer awareness and reducing risks of the disease. Participants will learn how to access and use these proven educational tools and resources which can improve communications between patients and health care providers.

All major cancer sites will be discussed and colorectal cancer will be highlighted as a cancer that could be prevented through regular use of early detection screening tests. The correlation
between colorectal cancer rates among medically underserved populations, especially African Americans, and the rate of colorectal cancer screening usage will be explored.

*Facilitated by* Rosebud Foster – NOVA Southeastern University

**BIO** - Dr. Rosebud Lightbourn Foster, Ed.D, Master of Science, is currently serving as Special Assistant to Chancellor, Nova Southeastern University, Health Professions Division, Professor of Public Health and an AHEC Program Administrator. She formerly served as Dean, Associate Vice President for Academic Affairs, Vice Provost and Professor of Health Services Administration at Florida International University. She was previously an Associate Professor at the University Of Miami College Of Nursing.

Dr. Foster completed a ten year appointment by the Miami-Dade County Board of County Commissioners to the Public Health Trust of Miami-Dade County, which operates the Jackson Health System/Public Countywide Health System. During her tenure she served as Vice Chairman of the Trust and Chairman of the Executive Committee. She is an appointee on the Governor's Gold Seal Panel on Excellence in Long-Term Care, which is administered by the Agency for Health Care Administration (AHCA). In addition, Dr. Foster serves as a member and former Chairperson of the Department of Health (DOH) Advisory Council on Closing the Gap: Reducing Racial and Ethnic Disparities in Florida; and, previously held appointments which include the Governor's Council on Diabetes and the Advisory Council to the Department of Elder Affairs (DOEA).

Currently, Dr. Foster serves on the Department of Health and Human Services (DHHS), Health Resources and Services Administration (HRSA), National Advisory Committee on Interdisciplinary and Community-Based Programs. She has played leadership roles in various communities and provided direction in the implementation of the Alliance for Aging (Area Agency on Aging of Miami-Dade and Monroe Counties). Dr. Foster is the recipient of numerous awards, including the Dade Women's Historic Coalition Women of Impact Award, and the Miami-Dade County Days in Tallahassee: Florida Legislation Session 2004, Sherman Winn “I Care” Award 2004. Other awards include the Greater Miami-Dade Chamber of Commerce Health Industry Group, Health Care Heroes: AXA Advisor's Lifetime Achievement Award, and the Florida Statewide Area Health Education Centers President's Award.

Dr. Foster was a Florida Delegate to the White House Conference on Aging, and she chaired the Surgeon General Hispanic Latino Regional Workshop: Southern Regional Conference on Hispanic Health Care Access to Health Care in Miami. Presently, she continues to provide leadership in the development of organizations and systems and maintains an important role at the forefront of Health Policy, Planning and Management on local, state, and national levels.

**ABSTRACT** - Today racial and ethnic disparities in health and access to health care continue to occur at an alarming rate, thereby increasing mortality and morbidity among the nation's most vulnerable populations and communities. The elimination of health disparities among minorities is a compelling national health objective, as indicated in *Healthy People 2010*. A 2002 IOM Report on racial and ethnic health disparities documented the persistent problems and inadequacy of minority health care which most likely result in worst outcomes for many at risk
cases. Health disparities are further highlighted in the report, "In the Nation's Compelling Interest" (2004), which outlined ways to improve and maintain diversity in the national health care workforce. The Closing the Gap: Reducing Racial and Ethnic Health Disparities in Florida Regional Community Health Survey of 2005 recognized that substantial gaps continue to exist in the health status of racial and ethnic groups in the state, and under existing conditions, these groups are more likely to be less healthy than their non-minority counterparts. Among the key recommendations for reducing racial and ethnic disparities in Florida, as identified in the survey, include promoting the delivery of culturally competent care, increasing the level of public awareness of disparities, and recognizing persistent barriers among patient providers and the current health care system in general to reducing, and eventually eliminating, health disparities among ethnic and racial minorities.

**TRACK 3 – DAY 2**

**Paul Gionfriddo – Palm Beach Health Access Project**

**BIO** - Paul Gionfriddo was named Executive Director of the Palm Beach County Community Health Alliance in April, 2005. He has had over twenty-five years of experience in a variety of public health and health care policy and administrative roles, nonprofit management, and state and local government.

Prior to accepting the position at PBCCHA, he served as Executive Director of the Indigent Care Collaboration of Austin, TX, from 2001 to 2005. In that role, he oversaw the development of a unique community health alliance that resulted in some of the most extensive implementation of shared health records, integrated eligibility processes, and primary care expansions for uninsured patients in the nation. Under his leadership, the ICC was recognized by both the Robert Wood Johnson Foundation and Ascension Health for its accomplishments. While at the ICC, he was a member of the Board of Directors of Texans Care for Children, a statewide child advocacy organization.

From 1995 until 2001, he was Executive Director at the Connecticut Association for Human Services, a statewide health, human services, and child advocacy organization. While at CAHS, he was co-chair of the Annie E. Casey Foundation's KidsCount Grantee Steering Committee, and was a member of the Board of Directors of the National Association of Child Advocates (now Voices for America's Children). From 1991 to 1995, he was a public health and health care policy consultant, with a variety of local, state, and national clients, including the National Conference of State Legislatures, the National Governors Association, the Agency for Health Research and Quality, and the National Center for Health Statistics. From 1989 through 1991, he served as Mayor of Middletown, CT, a city of 45,000 with a strong-mayor form of government. From 1978 through 1989, he was a member of the Connecticut House of Representatives, where he served in a variety of leadership roles, including Chair of the Public Health Committee, Chair of the Health and Hospitals Subcommittee of the Appropriations Committee, and Deputy Majority Leader. He has taught graduate level courses in Public Policy and Health Care Policy at both Trinity College (Hartford CT) and Wesleyan University. He is a 1975 graduate of Wesleyan University.
ABSTRACT - What uninsured and other low income patients often lack is a medical home. When they do gain access to care, often they must use any provider who happens to be available – a hospital emergency department or outpatient clinic, a free clinic, a federally qualified health center, or a volunteer physician, for example. As a result, they use a wide variety of health and mental health providers, and the care they receive is often discontinuous and episodic. Quality suffers, and because providers cannot access information from other sources or providers who may already have diagnosed and be treating the patient’s condition, costs go up.

The Palm Beach County Community Health Alliance (PBCCCHA) was organized to improve access to health care by developing and implementing collaborative strategies that facilitate the development of a “virtual” system of care in the County. At the core of the virtual system of care are strategies that employ technical solutions to link providers to one another and patients to programs that help them. The PBCCHA “All-Care” shared electronic health record system and the PBCCHA Common Eligibility Program are primary among these solutions, and both will be described in the session.

The All-Care shared electronic health record is being built via direct electronic interfaces to existing safety net health and mental health provider data systems. When it is completed, it will house in a Master Patient Index/Clinical Data Repository (MPI/CDR) longitudinal health care data for all uninsured and Medicaid patients in Palm Beach County. When patients sign authorizations, the system will allow treating clinicians to look up individual shared health records in the system, using the Web, and obtain both demographic information and a basic set of encounter data for patients, including dates of services with locations and providers, diagnosis and procedure codes, pharmacy, lab results, and other patient-specific data. It is being launched with the completion of the first interfaces in June 2006, and, when completed by 2008, will include interfaces to all county hospitals, clinics mental health providers, volunteer physicians, and others. This will provide a more complete health history for patients and providers, and the record will be used in the development of appropriate patient and disease management programs.

The Common Eligibility Program, fully operational as of May 2006, is tying together three separate tools that allow all uninsured patients to be screened systematically, have their eligibility for medical assistance, prescription drug assistance, charitable, income support, and social services assessed, and obtain enrollment assistance (and, shortly, language access assistance) through PBCCHA partners.

Rob Glueckauf – Florida State University

BIO - Dr. Glueckauf received his B.A. in Psychology from the University of Florida and his Ph.D. in clinical psychology from Florida State University (FSU). Prior to returning to FSU, he served as Professor and Director of the Center for Research on Telehealth and Healthcare Communications at the University of Florida. Earlier in his career, he was Director of Clinical Training in the Department of Psychology at the Purdue School of Science at Indianapolis. Dr. Glueckauf is also former President of the American Psychological Association’s Division of Rehabilitation Psychology and a fellow of the American Psychological Association. He has authored over 75 empirical and theoretical articles, books and chapters in the fields of telehealth and rehabilitation psychology. He has had continuous federal grant funding since 1992 from the
National Institute on Disability and Rehabilitation Research, National Institutes of Health, Department of Veterans Affairs, and the Robert Wood Johnson Foundation. Dr. Glueckauf’s current interests lie in the development and evaluation of eHealth delivery systems for individuals with severe disabilities and their family caregivers, outcomes measurement, and family system's interventions for children and adults with chronic illnesses.

**ABSTRACT** – Rural family caregivers are faced with a variety of emotional and psychosocial challenges in providing care for older family members with Alzheimer’s disease and closely related conditions. They are likely to experience considerable frustration in obtaining adequate attendant care and respite services, gaining access to cognitive-behavioral programs that enhance stress management and problem-solving skills, and receiving guidance in managing their finances. Although professional and governmental organizations have called for the creation of rural, community-based education and support programs, most rural dementia caregivers continue to receive little or no formal assistance in responding effectively to these challenges. Dr. Glueckauf’s presentation begins with an overview of the typical stressors faced by rural family caregivers in providing daily care to their loved ones with dementia, and in obtaining psychoeducational and support services to enhance their caregiving and coping skills. Second, the rationale for cognitive-behavioral (CB) intervention for caregivers of older adults with progressive dementia will be provided, followed by a discussion of the initial findings of Glueckauf et al.’s (2004, 2005) Byrd Alzheimer’s Institute-funded, telehealth-based CB intervention with Floridian rural caregivers. Special attention will be given to the need for a priori evaluation of perceived utility, desirability, and ease of use of telehealth-based CB interventions by rural dementia caregivers, health care providers, as well as church and community leaders.

Francie Dear – Florida Health Care Coalition

**BIO** - Francie Dear currently serves as Project Director for the Central Florida Regional Health Information Organization (RHIO), under the auspices of the Florida Health Care Coalition. She is responsible for the overall management of the CFRHIO project, coordinating the tasks of the six operating committees (Clinical, Technology, Legal, Finance & Governance, Consumer & Provider Education, and Research & Evaluation) and providing project management support.

Prior to her current position, Ms. Dear was a Software Engineer for fifteen years with the Walt Disney Company, designing, implementing, and maintaining monitor and control systems across the Walt Disney World property. Ms. Dear received her Master of Science degree in Engineering Administration and her Bachelor of Science degree in Computer Science from the University of Central Florida. She is the immediate past President of Florida Executive Women.

**ABSTRACT** - ‘Central Florida Regional Health Information Organization: Exploring Common Ground’

A Regional Health Information Organization (RHIO) is a regional entity that supports the development, implementation, and application of secure information exchange. The Central Florida RHIO will demonstrate that connectivity among health care providers will improve efficiency, lower costs, provide data necessary to improve the health status in our region, and advocate patient safety. Health care providers can use technology to “fetch and view” (with
permission) a patient’s data from multiple sources. The development of the CFRHIO also includes establishing the core information that will be accessed. This presentation will provide an update on the efforts of the CFRHIO initiative.

Lisa Rawlins – State Center for Health Statistics

**BIO – Lisa Rawlins** is the Bureau Chief for State Center for Health Statistics, Florida Agency for Health Care Administration. Ms. Rawlins heads up the contract management for several contracts with the private and public sectors. She directs and manages 40 staff members in the planning, development, organization, implementation and evaluation of health information systems related to data collection, research, analysis and dissemination. Ms. Rawlins directs the operations associated with data collection, quality measures, audits, data analysis, data integrity and all aspects of data and information security. Ms. Rawlins provides leadership locally and nationally in the collection, use and dissemination of health data and works to ensure that health data collection and other activities throughout the bureau are coordinated and responsive to the needs of public programs and health policymakers. She directs the development, planning, maintenance and improvement of FloridaHealthStat.com, Floridacomparecare.gov and MyFloridaRX.com, the Agency’s consumer health information websites. Ms. Rawlins also serves as the spokesperson on data matters to the Legislature, the Executive Office of the Governor, health care providers, other federal, state and local agencies, and with statewide and national health forums. Ms. Rawlins coordinates the development of uniform and modern standards and rules for facilities, agencies and organizations subject to regulation by the State Center for Health Statistics.

Ms. Rawlins also serves as the Project Manager for the Governor's Health Information Infrastructure Advisory Board.

From 2000 – 2004, Ms. Rawlins served as the Senior Analyst for the Committee on Health Care for the Florida House of Representatives and has advised the Legislature on a broad scope of health policy issues relating to transparency, health insurance, Medicaid, CON, hospital licensing and many other public health issues. And, from 1995-2000, Ms. Rawlins was a Legislative Assistant for the Florida House of Representatives.

From 1994-1995 at Elden Enterprises in Ocean Reef, FL, Ms. Rawlins was the Director of Corporate Accounts, managing and coordinating all duties of the Ocean Reef Business Council. From 1988-1994, Ms. Rawlins was the Manger of Admissions Emergency Department at Grady Hospital in Atlanta, GA, and then at Shands Teaching Hospital, University of Florida in Gainesville, FL. Ms. Rawlins graduated from Georgia State University in 1983 as a Biology Major.

**ABSTRACT** – ‘Transparency Initiatives for the State of Florida’

BIO - Mr. Henderson is a Phi Beta Kappa graduate from the University of Florida, where he also earned a Master of Arts Degree. Mr. Henderson has worked in a number of supervisory research and management positions, including administering the Current Population Survey, the American Housing Survey and Special Place Operations for the Census Bureau. More recently, Mr. Henderson was Director of Research and Planning at the Palm Beach County Health Care District, from 1995 through 1997, where he directed Palm Beach County’s School Health and the Healthy Kids (insurance) Programs. As Vice President for Programs at the Quantum Foundation, Mr. Henderson leads the Foundation’s grant-making efforts, including developing new projects and evaluating existing ones. Some of the projects that Mr. Henderson has helped to develop at the Quantum Foundation include a collaboration of funders and providers of indigent health care services, a comprehensive school nursing program, a school-based behavioral health initiative, and a senior visitation program.

Finally, Mr. Henderson has been appointed to serve on the newly created Hurricane Katrina Fund Advisory Committee, to support the relief and recovery efforts of organizations serving older adults on the Gulf Coast.

ABSTRACT – The Quantum Foundation was formed in 1995 with net proceeds from the sale of a non-profit hospital, JFK Medical Center in Atlantis, Florida, to Columbia/HCA. Quantum began its grant making in 1997, and its most noteworthy initial grant involved improving school health services in Palm Beach County. These improvements included placing registered nurses in all 135 public schools in the County. With the creation of this massive school health program emerged the need to efficiently manage it, and specific management issues included patient tracking, resource allocation, evaluation and billing.

A technological solution was sought and found through the Welligent School Health Information System. This web-based application was developed with input from school nurses and other health professionals and is presently utilized in all Palm Beach County public schools. Because information is available to decision-makers at the Health Care District of Palm Beach County, which operates the program, on a real-time basis, manpower responses to outbreaks, such as head lice or the flu, are immediate and effectual. This would be especially valuable if there were to be a public health crisis, such as an avian flu epidemic in the County.

Some other investments Quantum has made in technology to improve management of large systems of care include:

- a web-based behavioral health management system for psychologists and social workers in schools to track student progress, and evaluate the effectiveness of referrals to community providers;
- a web-based maternal and child health information system to track children through the County’s prenatal and postnatal systems, assisting also in resource allocation and reporting;
- a web-based information management system for providers of hungry and homeless services, including client tracking and billing;
- a web-based health information system for the County’s free clinics, enabling client tracking, resource allocation and reporting – and enabling, ultimately, electronic data from these
clinics to be shared with other health care providers, including other clinics, hospitals, the health department and private providers.

All these grants have required patience and buy-in from the providers in these health and human service systems, but they all have been successful in adding significant management capacity to these systems – and they clearly indicate how foundations can use technology to improve their communities.

**PLENARY SESSION SPEAKERS:**

**Robert G. Frank, University of Florida**

Dr. Frank founded the Florida Center for Medicaid and the Uninsured in 2000, and serves at the FCMU Director. He is Dean of the College of Public Health and Health Professions at the University of Florida where he also is a professor in the Department of Clinical and Health Psychology. He was a Robert Wood Johnson Health Policy Fellow in 1991-92 and worked with Senator Jeff Bingaman (D-NM). After completing the Fellowship, Dr. Frank returned to the University of Missouri where, as assistant to the Dean for Health Policy, he worked on issues related to federal and state health policy. He continued to work with Senator Bingaman and managed Missouri's state health reform effort, the 'ShowMe Health Reform Initiative.' Dr. Frank has a doctorate in clinical psychology from the University of New Mexico. He currently serves as vice chair of the Executive Committee, chair of the Human Resources Committee, and the Health Care Task Force for the Florida Developmental Disabilities Council.

**Allyson Hall, University of Florida**

Dr. Hall is the Research Director for the Florida Center for Medicaid and the Uninsured and is an Associate Research Professor in the Department of Health Services Research, Management, and Policy at the University of Florida. Prior to joining the University of Florida, Dr. Hall worked for the United Hospital Fund (UHF) of New York and was an adjunct assistant professor at New York University. At UHF she was a senior health services researcher and served as the principal investigator on a project that examined the quality of primary care in New York City. Dr. Hall also served as a program officer at the Commonwealth Fund where she was responsible for managing grant programs related to access to care for vulnerable populations. Dr. Hall holds a Ph.D. in Health Policy from the Johns Hopkins School of Hygiene and Public Health and a Masters degree in Health Administration from the University of Florida. She earned her Bachelors of Business Administration from the University of Miami. Dr. Hall's main research interests are in access to care for vulnerable populations.

**Roberta Kelley, Agency for Health Care Administration**

Ms. Kelley is the Bureau Chief of Health Systems Development at the Agency for Health Care Administration, the single state agency for Florida Medicaid. In this capacity, she administers Florida’s Medicaid managed care programs as well as the State’s Disease Management Initiative. Managed care programs include 12 Medicaid HMOs, MediPass, a Statewide Primary Care Case
Management Program, and alternative managed care systems such as enhanced primary care case management programs, provider service networks and specialty plans. Prior to joining the Agency, she worked for the Atlanta Regional Office of the Centers for Medicare and Medicaid. In this role, she worked on all aspects of Medicaid and also worked on Medicare Fraud and Abuse Issues.

Carol Gormley

Carol Gormley is Deputy Chief of Staff to Governor Jeb Bush. She has held this position since September, 2005, and is responsible for advising the Governor on health and human service as well as criminal justice issues. She serves as the Governor’s liaison to seven state agencies.

Prior to her appointment as deputy chief of staff, Carol was the Policy Coordinator for Health and Human Services in the Governor’s Office of Policy and Budget. In this position she supervised a 12-person unit responsible for the following departments: Children and Families; Health; Elder Affairs; Agency for Persons with Disabilities; Veteran’s Affairs; and, the Agency for Health Care Administration. While serving Governor Bush, Carol played a leadership role in the development of Governor’s proposal for Medicaid reform.

Before joining the Bush administration, Carol was employed by the Florida Hospital Association as the Director of Government Relations. She also served as Executive Director of the North Central Florida Health Planning Council, Inc. for 15 years from 1983 to 1999. Carol holds a master’s degree from the University of Florida and a bachelor’s degree from the University of Illinois.

Paul Duncan, University of Florida

Dr. Duncan has been a member of the faculty in the Department of Health Services Research, Management, and Policy at the University of Florida since 1979. He is a nationally prominent health services researcher, best known for his studies of access to various forms of medical and dental care. In recent years, much of his work has focused on health insurance and the uninsured. Between 1999 and 2001, he served as Principal Investigator for three major surveys examining health insurance circumstances in Florida, Indiana, and Kansas. Dr. Duncan has published widely, including articles in such prominent journals as Medical Care, and Health Affairs. In 1996, 1997, and 1998, Dr. Duncan was selected "Teacher of the Year" by the department's graduate students. His current research includes an evaluation of Florida’s Medicaid Provider Service Network Demonstration Project, ongoing studies of dental care utilization, and a study of the characteristics of high-cost hospital patients.

David Shern, University of South Florida

Dr. David Shern is Professor and Dean of The Louis de la Parte Florida Mental Health Institute, University of South Florida. As a college of the University of South Florida, the de la Parte Institute is one of the largest research and training Institutes in behavioral health in the United States. Governor Bush appointed Shern to the Florida Commission on Mental Health and Substance Abuse in 2000. He was elected Chair of the Commission by his fellow Commissioners
and spearheaded an effort to develop a new statewide focus on, and governance model for, behavioral health across all human service agencies and settings.

Prior to moving to Florida, Shern was the founding Director of the National Center for the Study of Issues in Public Mental Health - an NIMH funded services research center located in the New York Office of Mental Health (OMH) where he also directed the OMH’s Evaluation and Services Research efforts. Dr. Shern has held academic positions at the State University of New York at Albany, New York University and the University of Colorado. He currently serves on the advisory board for several national organizations devoted to mental health services research and development. He has served as chair of the Mental Health Section and a member of the Governing Council of the American Public Health Association which honored him with its Mental Health Section Award in 1995.

Dr. Shern has been the principal or co-principal investigator on research projects funded by the National Institute of Mental Health, the Robert Wood Johnson Foundation, the National Alliance for the Mentally Ill, and the Substance Abuse & Mental Health Services Administration with support totaling over $16 million dollars. His work has spanned a variety of mental health services research topics including epidemiological studies of the need for community services; the effects of differing organizational, financing and service delivery strategies on continuity of care and client outcome and the use of alternative service delivery strategies such as peer counseling and self help on the outcomes of care. Along with his colleagues, he is currently completing research on the effects of Medicaid managed behavioral health care on access, cost and quality of services as well as on the outcomes experienced by consumers and their families.

His current interests focus on the needs of individuals diagnosed with severe mental illness and the role of state and local services systems in meeting these needs. He is interested in the impacts of current system reform efforts on the processes of recovery from severe mental illness and the problems of translating research findings into effective practice and policy.

Anne Hogan, Florida State University

Anne E. Hogan, Ph.D., Florida State University, Director, Harris Institute for Infant Mental Health Training; Center for Prevention and Early Intervention Policy. Dr. Hogan is an applied developmental psychologist who received doctoral training at the University of Miami, and postdoctoral training at the University of Denver. She has been on the faculty at the University of Miami (both in Pediatrics and in Psychology), and visiting faculty at the University of Wisconsin and University of Hawaii. Publications have included co-editing the Handbook of Disruptive Behavior Disorder (with H. C. Quay), and empirical work on social assessment in young children. She co-developed the Early Social-Communication Scales, and the Adaptive Social Behavior Inventory (as a part of the Infant Health and Development Program). She has served as the faculty coordinator for the FSU Infant Mental Health Therapist Training programs, which have been conducted in Palm Beach, Miami-Dade, and Broward Counties, as well as the FSU/LSU training that began in 2003.
Glenn Mitchell is a Faculty Administrator and the Director of the State Data Center on Aging, a part of the Florida Exchange Center in the School of Aging Studies at the University of South Florida. Previously, Dr. Mitchell was the Section Head for Methodology and Special Studies in the State Data Center for Health Statistics at the Florida Agency for Health Care Administration and also an Assistant Professor of Political Science at Florida State University. He received his Ph.D. from the University of Iowa.