

# Washington Healthcare News

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Articles, Interviews and Statistics for the Healthcare Executive

VOLUME 2, ISSUE 9

SEPTEMBER 2007

## Carrier and Administrator Choices Abundant in Washington State

By David Peel

Principal

David Peel & Associates

The major components of the Washington State health care system include:

- Purchasers
- Providers
- Carriers and administrators

Purchasers include consumers, employers, government, insurance brokers and agents as well as others. These are the people and organizations that negotiate payment and/or pay for health care services.

Providers include hospitals, clinicians, pharmacies, ancillary providers and others. These are the people and organizations that provide health care services.

Carriers and administrators include plans, third party administrators, insurance companies and others. These are the people and organizations that provide financial and administrative services to the health care industry.

This edition will focus on the prominent carriers and administrators that serve the Washington State health care system.

The three types of carriers and administrators that have the larg-

est impact on our system include:

- Health plans
- Third party administrators
- Insurance companies

Health plans are those companies that receive premium from purchasers, provide administrative services and pay providers for health care services. Generally, health plans either retain the profit or incur the loss if the premium is different than the cost of administrative and health care services. KPS Health Plans, Group Health Cooperative, Premera, Washington Dental Service, Vision Service Plan and Regence are examples of health plans.

Third party administrators (TPAs) provide administrative services to purchasers. They generally don't retain the profit or incur the loss if funding is different than the cost of administrative and health care services. Most TPAs offer insurance to purchasers, through separate insurance companies, for large claim coverage. Health Management Administrators (HMA), First Choice Health and Great West Healthcare are examples of third party administrators.

Insurance companies provide

large claim coverage or coverage to providers for malpractice, professional liability and other types of business insurance. Examples include Washington Casualty Company (WCC) and Physicians Insurance a Mutual Company.

Many of these companies have made Washington State their headquarters. We hope this issue provides you information to know them better.

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**LETTERS TO THE EDITOR**

If you have questions or suggestions regarding the Washington Healthcare News and its contents, please reply to [dpeel@wahcnews.com](mailto:dpeel@wahcnews.com). We will be happy to answer your questions in future newsletters.

**Letter from the Editor**

This month we begin our second full year publishing the Washington Healthcare News.

The first edition was four pages, printed on a small color printer with 12 page per minute capacity and distributed to 200 people.

This issue is twenty-eight pages, printed on a Konica-Minolta "Bizhub" digital printer with 66 page per minute capacity and distributed to over 1,800 leaders of the Washington State healthcare system.

Over the last year we've learned more about the topics that are of greatest interest to our readers. For example, the 2007 editorial calendar had only one edition devoted to the hospital sector of healthcare. We've learned how vast the hospital sector is in Washington State and to cover it thoroughly requires two editions; one for rural hospitals and one for urban hospitals. The 2008 editorial calendar, presented on page 25, shows when these editions will be published.

We received tremendous interest from our request for healthcare opinion articles. To this end, our goal for the November 2007 and future editions is to publish at least two healthcare opinion articles each month.

We look forward to the second year providing you the Washington Healthcare News. Feel free to send an e-mail or letter to let us know your thoughts, comments, concerns or questions.

*David Peel, Publisher*

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Recipients of the news are "C" level healthcare executives, health insurance brokers and agents, elected legislators and other business people that have great influence over the Washington State healthcare system.

The distribution by industry is:

Industry	Number
Insurance Agency	510
Hospital	468
Health Plan	179
Government	154
Medical Clinics	122
Other Providers	59
All Other	317
<b>Total</b>	<b>1,809</b>

Recipients of the News tend to read the entire publication over several sittings and share its contents with their staff for educational purposes.

Advertising rates, specifications and due dates are posted on the website at [www.wahcnews.com](http://www.wahcnews.com).

For further information contact David Peel at [dpeel@wahcnews.com](mailto:dpeel@wahcnews.com).

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# Healthcare Company Profile

## HMA's *Enhanced Consumer Services* Sets Benchmark for TPAs

Health Management Administrators (HMA) takes the concept of "choice" seriously. A client can choose between two preferred provider networks and eight different traditional administrative services. However, the number of choices doesn't stop there.

HMA recently rolled out their *Enhanced Consumer Services* solutions. These services are offered in three packages-

- **Enhanced Decision Support Tools**
- **Total Health Management**
- **Personal Health Account Administration**

The **Enhanced Decision Support Tool** package allows enrollees to access a tremendous amount of information that includes:

- Plan document information
- Links to PPO networks and pharmacy vendors
- Claim look-up
- EOB viewing and printing

- Online customer service requests
- Health information provided by Health A-Z™
- Health risk appraisal and personalized health records
- Personalized E-Health dashboard
- Health promotion and lifestyle management
- Facility quality information provided by Subimo™

The **Total Health Management** package provides clinical support and engagement for enrollees. Companies choose various programs for their employees ranging from Disease Management, 24 Hour Nurse Line, Health Coaching and a Maternity Newborn program. The programs provide a range of clinical support and engagement for enrollees.

The **Personal Health Account** package includes a selection of Tax-deferred account vehicles

that enable members to manage their healthcare expenditures. Flexible spending accounts, healthcare reimbursement accounts and healthcare savings accounts are options available in this package and are all integrated with the employer's core health plan.

HMA can bring this wide spectrum of choices to the market by providing an integrated package of TPA services locally and partnering with well-known organizations locally and nationally. Some of HMA's partners include:

- For pharmacy benefit management services: Caremark, Regence RX and Express Scripts
- For PPO networks: First Choice, Regence, CCN and Beech Street
- For vision services: Vision Service Plan

To learn more visit the HMA website at [www.accesshma.com](http://www.accesshma.com).

### Company Snapshot

Description	Company information
Key executives	David Snodgrass, President & CEO; Clay Ellis, SVP & COO
Number of covered lives	120,000
Number of employees	200
Service area	Washington and Oregon with network coverage through the U.S.
Targeted market	Commercial employers, Unions and Trusts
Contact information	<a href="mailto:david@hma.regence.com">david@hma.regence.com</a>   1-425-289-5112   <a href="http://www.accesshma.com">www.accesshma.com</a>

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# Healthcare Company Profile

## Washington Casualty Company Retains 100% of Clients in 2006

Washington Casualty Company offers medical professional liability coverage to Washington hospitals and community health care centers and recently announced it had retained 100 percent of its clients for 2006.

Mike Rutz, managing director of Washington Casualty Company, explains the reason for the high retention rate, “Our affordable, high-quality products and attentive customer service show that our clients are our priority.”

Washington Casualty Company was originally established as the Washington Hospital Liability Insurance Fund, a nonprofit mutual insurance company, and has historically provided services to Washington hospitals and community health care centers.

In 2006, Washington Casualty Company was acquired by FinCor Holdings Inc. of Lansing, MI, and recently received a B+ (Good) rating from A.M. Best Company. Now solidly capitalized, Wash-

ington Casualty Company is poised to take on new business and is expanding its market into Idaho.

Washington Casualty Company is a customer-focused company. According to Mr. Rutz, “Washington Casualty Company has the ability to customize coverage to each client. In addition, our risk management and claims areas offer exceptional expertise and customer service. We are an organization that is willing and able to meet face to face on short notice. Above all, Washington Casualty Company is an active listener when determining our client’s needs.”

Mr. Rutz adds, “Our local advisory board, made up of health care and insurance leaders in Washington, provides valuable counsel and advice to management and the Washington Casualty Company ownership group.”

Every Washington Casualty Company client receives a risk man-

agement package with their policy. Education materials and expert advice help their clients understand and reduce risk exposure. Through its sister company FinCor Solutions, Washington Casualty Company clients can purchase other insurance products such as:

- ✦ Workers’ compensation
- ✦ Employee benefits
- ✦ Crime
- ✦ Fiduciary
- ✦ Property
- ✦ Automobile

Customers can also purchase additional risk management products from the nationally known Risk Management and Patient Safety Institute, including facility high-risk evaluations, education programs, vacancy management services and more. To learn more about Washington Casualty Company, contact Mike Rutz at (800) 772-1201.

Company Snapshot	
Description	Company information
Key executives	Rick Helgren, President & CEO; Michael Rutz, Managing Director
Number of employees	17
Service area	Washington State and Idaho
Targeted market	Hospitals, Community Health Centers, Ancillary Health Care Facilities
Contact information	Michael Rutz   <a href="mailto:mruz@wacasualty.com">mruz@wacasualty.com</a>   (800) 772-1201   <a href="http://www.wacasualty.com">www.wacasualty.com</a>

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# Healthcare Company Profile

## Great-West Healthcare Focuses on Creative Solutions

Great-West Healthcare provides coverage to 2.2 million people in the United States through a national network of 4,275 hospitals and 578,000 physician and ancillary providers. In Washington State, the company covers 60,000 people and offers self-funded plans for employers with as few as 25 employees.

Great-West Healthcare has over twenty five years administering self-funded plans. Outlier claims are managed through Stop-loss protection. Reports are based on actual experience to allow employers to make informed decisions about the health benefits offered to employees.

In addition to helping employers understand their health care costs, Great-West Healthcare has focused on educating and supporting employees in making wise health care decisions that impact both their and their employers' bottom lines.

To this end, products and services are structured to play a critical role in driving member behavior.

Through plan designs, online tools, and ongoing communication, Great-West Healthcare educates and motivates employees to become better informed and take control of their health care experience. Examples include:

- Consumer Advantage<sup>SM</sup> – a national consumer-driven PPO that provides comprehensive coverage for primary and preventive care as well as catastrophic care. For services that are elective in nature or where employees have time to make decisions, employees share in more of the cost.
- Treatment Navigator<sup>SM</sup> – an online tool available to members, the Treatment Navigator allows employees to learn the cost of 15 common treatments BEFORE care is received.
- Driver's Ed<sup>SM</sup> – distributed to members eight times per year, this ongoing communication educates employees on the true costs of health care through a quick-to-read newsletter, as well as posters and flyers that em-

ployers can distribute.

- Healthy Frontiers<sup>SM</sup> – through this new wellness program based on proven behavior change techniques, employees take incremental steps to learn, practice and adopt healthy lifestyles through fun, interactive tools

By educating employees on health care costs and helping them make informed decisions, both employees and employers can potentially reduce health care costs.

Great-West Healthcare also offers an HRA and HSA, as well as traditional managed care plans, a three-tier pharmacy program and ancillary products such as dental and vision, long and short-term disability, group life insurance and COBRA administration. In addition, the company is one of Washington State's largest administrators of self-funded benefit plans.

To learn more, contact John Casper at [john.casper@gwl.com](mailto:john.casper@gwl.com) or visit the website at [www.greatwesthealthcare.com](http://www.greatwesthealthcare.com).

### Company Snapshot

Description	Company information
Key executives	Richard F. Rivers, Executive Vice President; John Casper, Vice President of Sales
Number of employees	6,600 including its parent, Great West Life & Annuity Insurance Company
Service area	Nationwide
Targeted market	Employers from 25 to 100,000 employees
Contact information	John Casper, Vice President of Sales   <a href="mailto:john.casper@gwl.com">john.casper@gwl.com</a>   (425) 827-2282



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## An Interview with Steve Brown of Evergreen Healthcare

*Steve Brown is the Chief Executive Officer of Evergreen Healthcare (Evergreen). The Evergreen Campus is located in Kirkland, WA. This July 2007 interview was held in Kirkland.*

**Editor:** What is your background and how did you come to take the CEO position at Evergreen?

**Brown:** I have a graduate degree in Public Administration in Health Care Services from Pennsylvania State University. I am a Fellow in the American College of Healthcare Executives (FACHE).

Prior to Evergreen, I was the CEO of Fairfax Hospital and Fairfax Hospital for Children in northern Virginia. These two hospitals are now situated on a 900-plus bed campus and are part of the Inova Health System.

The Inova Health System also includes Alexandria Hospital, Fairfax Oaks Hospital, Loudon Hospital, Mount Vernon Hospital, the Inova Heart and Vascular Institute and is affiliated with Potomac Hospital. In addition to my CEO position at Fairfax, I was a System Vice President for Inova.

I am a “people person” and am very active in the Kirkland Community. I am the past President of the Kirkland Rotary Club, am a member of the Steering Committee of the Eastside Business

Roundtable and the Kirkland Business Roundtable, and on the boards of the Kirkland Performing Arts Center and the Cascadia Community College Foundation.

**Editor:** What is the Mission and Vision of Evergreen?

**Brown:** The Mission of Evergreen is to advance the health of the community it serves through its dedication to high quality, safe, compassionate, and cost effective health care. The Vision of Evergreen is to create an inclusive community health system that is the most trusted source for health care solutions.

**Editor:** What services are offered at Evergreen?

**Brown:** Evergreen opened in 1972 and offers a broad range of primary and specialty services ranging from our level III neonatal intensive care unit to the Booth Gardner Parkinson’s Center.

In April of this year we opened our new emergency department and patient facility. Evergreen will provide emergency services to over 50,000 patients this year. The facility seats 55 people comfortably and includes 475 complimentary parking spaces. Additional amenities include a children’s play area, Wi-Fi access and a refreshment area.

This new facility can handle mass trauma and has direct elevator access to our Helipad for patients arriving by Medivac.

In addition to the new emergency department facility, we added the capability to increase our number of inpatient beds.

**Editor:** Swedish recently received approval by the Washington State Department of Health (DOH) to build a 175 bed hospital in Issaquah. Evergreen has gone on record in opposition. Why would Evergreen oppose the new hospital if Issaquah is outside of the Evergreen service area?

**Brown:** Evergreen is not opposed to healthcare services or even a new hospital for Issaquah. What we are opposed to is the fact that the Department of Health’s current plan leaves no room to add beds to our hospital, or any other eastside hospital for that matter. That would clearly not be in the best interests of the communities we serve. In short by granting Swedish 175 beds, the state eliminates the ability for any other Eastside hospital to grow and meet the needs of their respective communities for the foreseeable future. We would oppose any proposal that does not allow an equitable distribution of beds in East King County.

**Continued on next page**

**Continued from prior page**

**Editor:** Overlake Hospital is a major acute care facility and is located within ten miles of Evergreen. Both hospitals offer similar services. How have your organizations worked together to minimize overcapacity and redundancy of services?

**Brown:** I started with Evergreen in the first week of January 2002. That same week, Ken Graham, then the CEO of Overlake, called me about a proposal they were working on. That conversation was the start of our very fruitful relationship working together on the issues of overcapacity and redundancy of services. Over the years we successfully collaborated to minimize overcapacity and redundancy in Level III nursery, cardiac care and several other services.

**Editor:** What do you see as the future of the Washington State healthcare system?

**Brown:** In many respects, Washington isn't different than other

states. Reimbursements aren't going up. Costs aren't going down.

I see at least four areas we should focus on and correct if we are going to improve the future healthcare system.

*Nursing shortage*

There continues to be a nursing shortage. However, there's an equal need for nurse educators. The UW nursing program is a fine program and nationally known yet they aren't able to fully fund the training program to educate every person who wants to become a nurse.

*Technology*

Like most things, there is both good news and bad news. The good news is obvious; we are able to provide better care. On the not so good news side, it's becoming increasingly difficult financially for hospitals to keep up with the pace of developing technology. For example, a hospital buys a 32 slice CT scanner and

shortly thereafter a 64 slice CT scanner is introduced. Shortly after that a 128 slice CT scanner may be introduced. These are millions of dollars we're talking about. Technology is costly and constantly changing.

*Litigation*

A challenge that is facing all hospitals is an increase in litigation and the cost that goes along with it. The premiums for malpractice insurance continue to rise.

*Physician shortage*

The aging of our society is a very large issue, and probably one of the top issues hospitals face for several reasons. First, we are keeping people alive much longer, but those people are going to get sick. When they do, their illnesses will be more acute and likely chronic. Also, fewer and fewer physicians are accepting Medicare, even as the population insured by Medicare increases. Finally, there are simply fewer people going into medicine.



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# Healthcare Real Estate

## Washington State Medical Office Building Listings

Property Name	City	Size (sf)	Rate (NNN)	Class	Location/Features
Fairview Research Center	Seattle	94,700	Negotiable	B	South Lake Union
Evergreen Plaza	Kirkland	60,133	\$22.50	B	Adjacent to Evergreen Hospital
Olympus Medical Building	Tacoma	48,000	\$28.00	B	Downtown Tacoma, near Allenmore
Fed Way Center	Federal Way	43,500	\$25.00	A	Adjacent to St. Francis Hospital
M Street	Seattle	41,129	\$32.50	A	On First Hill near hospitals
Bothell Professional Building	Bothell	36,774	Negotiable	B	Fall 2007 completion
Mill Creek Commons	Mill Creek	30,000	\$23.00	B	Near Mill Creek Town Center
Gig Harbor Urgent Care	Gig Harbor	30,000	\$24.70	B	Built in 1990
Puyallup Medical Center	Puyallup	28,000	\$26.00		Near Good Samaritan Hospital
720 Olive	Seattle	26,713	\$24.00	A	Downtown Seattle
14818 179th Avenue SE	Monroe	26,104	Negotiable	B	Near Kelsey Place Retail Center
McMurray Medical Office Bldg.	Seattle	25,123	\$26.00	A	Near Northwest hospital
Lynnwood Financial Center II	Lynnwood	20,875	\$16.50	B	Near Alderwood Mall
1717 Building	Everett	20,000	\$25.00	A	On Providence Colby campus
Canterwood Business Park	Gig Harbor	19,000	\$20.00	B	Near St. Antony's hospital
Medical Dental Building	Seattle	18,793	\$34.50	B	Downtown Seattle near Westlake
Alderwood Professional Building	Lynnwood	18,317	\$14.25	B	Near Alderwood Mall
The Pathways @ Newcastle	Newcastle	17,552	\$26.00	B	Proposed. Breaks ground in April
Jefferson Tower	Seattle	16,278	\$23.00	B	On Swedish campus
Newcastle Professional Center	Newcastle	16,000	\$26.00	B	
Stevens Pavillion	Edmonds	13,934	\$23.50	A	On Stevens hospital campus
Commons Professional Center	Bellevue	13,369	\$23.75	B	Renovated project near Overlake
Meridian South Prof. Center	Kent	10,905	\$26.00	A	East Kent/Covington area
Union Avenue Medical Building	Tacoma	10,600	\$23.00	B	Near Allenmore hospital
Silver Lake Pavillion	Everett	9,085	\$22.00	B	
Baze Professional Center	Renton	7,550	\$28.00	B	New construction
Oakesdale Center - Bldg E	Renton	7,536	\$15.00	B	Freeway access
Bel-Red Medical/Dental Center	Bellevue	6,999	Negotiable	A	Planned and permitted
138-206 S. 3rd Place	Renton	6,427	\$11.00		1/2 Block off Ranier Ave S.
Providence Rockefeller Bldg.	Everett	5,000	\$22.00	A	On Providence Colby campus

Source: Grubb & Ellis Company, Commercial Broker's Association and Costar. Includes both completed, under construction and proposed properties.

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**KPS**  
health plans

# List of Domestic Carriers and Administrators

Organization Name	Type <sup>2</sup>	Chief Executive	2006 Revenues (000's)	Primary Products
Premera Blue Cross	HCSC	Gubby Barlow	\$2,334,037	Commercial, Medicare, ASO, LTC
Group Health Cooperative	HMO	Scott Armstrong	\$2,301,743	Commercial, Medicaid, BHP, Medicare
Regence BlueShield	HCSC	Mary McWilliams	\$1,967,975	Commercial, Medicaid, Medicare, ASO
Molina Healthcare of WA	HMO	Dale Ahlskog	\$612,313	Medicaid, Medicare, BHP
Pacificare	HCSC	Steven Schmidt	\$514,720	Commercial, Medicare
Community Health Plan of WA	HCSC	Darnell Dent	\$464,786	Medicaid, Medicare, BHP
Group Health Options	HCSC	April Golenor	\$403,207	Commercial, ASO
Washington Dental Service	HCSC	Jim Dwyer	\$357,624	Dental
LifeWise Health Plan of WA	HCSC	Darryl Price	\$180,708	Commercial
KPS Health Plans	HCSC	Richard Marks	\$137,973	Commercial, Medicare, ASO
Asuris Northwest Health	HCSC	Mary McWilliams	\$131,635	Commercial, Medicaid, Medicare, ASO
Physicians Ins. A Mutual Co.	P&C	Mary-Lou Misrahy	\$82,215	Malpractice, Provider Excess, Multi-Peril
Arcadian Health Plan	HCSC	John Austin	\$80,026	Medicare
Columbia United Providers	HCSC	Ann Wheelock	\$70,851	Medicaid, BHP
LifeWise HP of AZ.	LIFE	Clifford Klima	\$43,788	Commercial
Washington Employers Trust	MEWA	Daniel Devin	\$40,155	Commercial
Aetna Health, Inc.	HCSC	Phil Haas	\$36,157	Commercial
Timber Prod. Manuf. Trust	MEWA	James Peterson	\$28,473	Commercial
Vision Service Plan	LHCSC	Rob Lynch	\$24,200	Vision
Willamette Dental	LHCSC	Stephen J. Petruzelli	\$22,681	Dental
Washington State Auto Ins.	MEWA	James Booth	\$7,164	Commercial
Washington Casualty Company	P&C	Richard Helgren	\$5,149	Malpractice
Dental Health Services	LHCSC	Godfrey Pernell, DDS	\$4,864	Dental
Pacific Visioncare Washington	LHCSC	Debbie Eldredge	\$280	Vision
Puget Sound Health Partners	HCSC	Larry Loo	\$0	Medicare
Health Mgmt. Administrators	TPA <sup>1</sup>	David Snodgrass	DND <sup>3</sup>	ASO, Med. Mgt., HSA, HRA
Great West Healthcare	TPA <sup>1</sup>	Richard Rivers	DND <sup>3</sup>	ASO, Med. Mgt., HSA, HRA
First Choice Health	TPA <sup>1</sup>	Ken Hamm	DND <sup>3</sup>	ASO, Med. Mgt., PPO, HSA, HRA, EAP
Healthways	TPA <sup>1</sup>	Ben R. Leedle, Jr.	DND <sup>3</sup>	Complimentary Provider Network Svcs.

All information from the Washington State Office of Commissioner website ([www.insurance.wa.gov](http://www.insurance.wa.gov)). Other notes are as follows:

1. Third Party Administrators do not report public information. Those listed responded to a request for information from the News.
2. HCSC is a Health Care Service Contractor, HMO is a Health Maintenance Organization, P & C is a Property Casualty Insurance Company, LIFE is a Life Accident and Health Company, MEWA is a Multiple Employer Welfare Arrangement, LHCSC is a Limited Health Care Service Contractor, TPA is a Third Party Administrator.
3. DND means the company did not disclose this information.



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# Healthcare Company Profile

## Physicians Insurance A Mutual Company - Serving Its Physician Owners Since 1982

Physicians Insurance A Mutual Company, a Washington State domestic carrier, recently celebrated its 25th year in business. At year-end 2006, Physicians Insurance provided insurance for 5,541 physicians and 508 clinic entities, making it the largest Washington State provider of professional liability and other insurance coverage to physicians and clinics. Physicians Insurance estimates that it provides coverage to approximately 65% of the available physician market in Washington.

Physicians Insurance offers the following types of insurance policies and coverages:

- .Professional Liability
- .Corporate/Partnership Professional Liability
- .Health Care Facility (designed for larger clinics)
- .Employment Practices Defense Coverage
- .Provider Excess and Medical Stop-Loss

The following are offered through Physicians Insurance Agency:

- .Business Owners Policies
- .Upgrade for Employment Practices Liability
- .Disability (individual and group)
- .Life (individual and group)
- .Long-Term Care
- .Bonds

Additionally, policyholders may be eligible to receive premium discounts based on size, practice

hours, good loss experience, and membership in the Washington State Medical Association.

To meet the needs of various entities that need professional liability insurance yet are not the classic physician/clinic arrangement, the company created three volume-rated programs: full-time equivalency, per patient, and slot position coverage. Full-time equivalency coverage serves the needs of practices comprised primarily of part-time physicians so the premium can be based on full-time equivalencies instead of the number of physicians. Per patient visit rated coverage is offered for emergency and urgent care physicians. Slot position coverage facilitates situations in which the number of physician employees or contractors in a clinic remains relatively constant despite a high turnover rate. In addition to the new volume rated programs, the company is able to provide insurance to hospital employed specialists, known as hospitalists. In each case, the company's flexible, innovative coverages can provide the best possible protection at a reasonable price.

A mutual insurance company is owned by its policyholders. Physicians Insurance's physician policyholders and owners work alongside management in an effort to help keep rates stable. Physicians serving on the com-

pany's board of directors, armed with information from their actuary, annually review recommendations for any changes in rates. Physicians and staff at the company know it is essential that rates remain fair and reserves remain adequate, year after year.

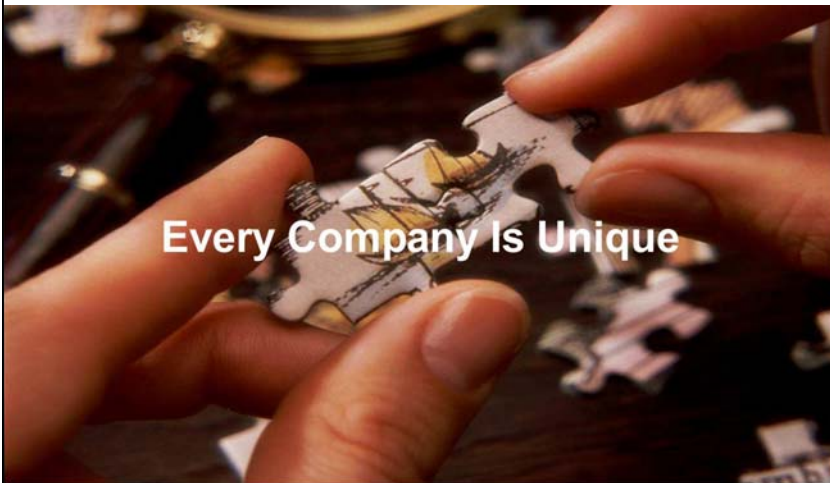
Physicians Insurance believes defending a physician properly is important for every physician and for the medical professional as a whole. Ronald Hofeldt, MD, Director of Physician Affairs at the company, contacts every physician involved in a lawsuit. Dr. Hofeldt provides facts about the trial process, suggestions for coping with the stress of litigation, and emotional support.

The company's claims experts use innovative methods—focus groups, private trials, trial consultants, and more—to resolve cases. In recent years, over 85% of the cases taken to public trial received verdicts favorable to the physician or clinic.

The company publishes a quarterly newsletter, the *Physicians Report*, to update its clients on trial results, claim procedures, insurance limits, government relations, reporting of practice changes, policy enhancements, patient safety information, and member benefits information.

To learn more, visit the Physicians Insurance Web site at [www.phyins.com](http://www.phyins.com).





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# Healthcare Company Profile

## First Choice Health Continues PPO Dominance in the Northwest

Boasting over 1,000,000 members, 1 in 6 people in Washington State access First Choice Health's PPO network for their medical care.

First Choice Health's PPO network includes over 42,000 contracted and credentialed providers in Washington, Oregon, Idaho, Montana and Alaska. In 2005, average discounts from billed charges for inpatient services were 35% and were 30% for physician services.

In addition to the network, an Employee Assistance Program (EAP), Third Party Administration (TPA) and Medical Management Services are offered.

With 150,000 members, the EAP program is one of the largest in the Northwest. With support products including Right Referral, First Time Software and Advanced Internet Technology, patients are only referred to providers covered under their employer's benefit plan. Other EAP services include:

- Unlimited access to internet training tools
- Secure and confidential on-line training tools
- Work Life Programs like Eldercare, Debt/Financial Assessment, Child Care, Legal Consultation, ID Theft and Fraud Prevention and Nurse Line services

First Choice Health's Third Party Administration was the first TPA to administer Consumer Driven Health Plans in the Pacific Northwest. Integrated information systems and work processes ensure that First Choice Health clients are provided with innovative solutions and cost containment along with best in class benefit administrative services. Some of the features provided include:

- Customized plan designs (CDHP, HDHP)
- Integrated Health Reimbursement Arrangement account solution
- Health Saving Account solu-

tions - Debit Card

- myFirstChoice-Participant web-based tool

First Choice Health's Medical Management program also covers 150,000 members and offers a full range of health management services to include:

- Utilization and case management
- MH/CD management
- Disease management
- Maternity management
- 24/7 nurseline
- Health risk assessment
- Lifestyle modification
- Workplace wellness
- Pharmacy benefit mgmt.
- Decision support tools
- Clinical appeals and external review
- Easy-to-understand reports

To learn more about these products and services contact Curtis Taylor, Chief Marketing Officer, at [ctaylor@fchn.com](mailto:ctaylor@fchn.com).

### Company Snapshot

Description	Company information
Key executives	Ken Hamm, President & CEO; Curtis Taylor, Chief Marketing Officer
Number of covered lives	1,000,000 PPO network members, 150,000 EAP members, 150,000 members under medical management programs
Service area	Washington, Idaho, Oregon, Alaska and Montana
Targeted market	Commercial employers, Unions and Trusts
Contact information	Curtis Taylor   <a href="mailto:ctaylor@fchn.com">ctaylor@fchn.com</a>   206-268-2491   <a href="http://www.fchn.com">www.fchn.com</a>

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# Healthcare Company Profile

## KPS Healthplans Offers Choice, Service and Flexibility

KPS Healthplans (KPS), a Washington State domestic health insurance company, is well known in far Western Washington for superior customer service. Established in 1946 with a preferred provider network (PPO) type care delivery model, KPS serviced Kitsap, Jefferson, Clallam and Mason Counties *only* until earlier this decade.

In 2000, KPS contracted with First Choice Health Network to provide service throughout Washington State and over the next few years expanded the service area of several of its products. KPS was acquired by Group Health Cooperative in 2005 and now has the capital necessary to offer all its products to customers throughout the state of Washington.

### Choice

The KPS product line includes:

- Individual and family health insurance
- Small group (2-50) health insurance
- Large group (51+) health insurance

- Health insurance for Federal employees
- Medicare supplement insurance
- Administration of self-insured benefits

KPS was one of the first Washington State carriers to offer benefit plan designs that meet Federal Health Reimbursement Account (HRA) and Health Savings Account (HSA) federal requirements. The KPS individual, small group and large group plans all offer HSA compatible products.

Between the KPS direct contracted network in Kitsap, Jefferson, Clallam and Mason Counties and the statewide First Choice Health Network customers have a wealth of providers to choose from. Additional providers include the Providence network in Southwest Washington and a national network, Multiplan, for those members requiring service outside of Washington State.

### Service

The KPS reputation for service is

supported by the many years it has been ranked number one by the federal government. Each year all carriers that provide service to federal employees are ranked through patient satisfaction surveys. From 1995 through 2005 KPS was ranked number one in Washington and continues to receive high ratings.

Satisfied employees frequently translate to satisfied customers. KPS was named one of Washington State's "Best Companies to Work For" by Washington CEO magazine in 2006 and 2007.

### Flexibility

KPS is committed to helping large employers with benefit plan flexibility. This is particularly important when a large employer needs to meet the diverse needs of its workforce. Benefit plan flexibility, coupled with the broad KPS network, reduce the number of transition issues inherent when changing carriers.

To learn more visit the KPS website at [www.kpshealthplans.com](http://www.kpshealthplans.com).

## Company Snapshot

Description	Company information
Key executives	Richard Marks, Interim President & CEO; Ty Tabor, Director of Marketing
Number of covered lives	45,000 insured PPO network members, 3,000 self-funded PPO network members
Service area	Washington State
Targeted market	Commercial employers, Individuals, Medicare Supplement
Contact information	<a href="mailto:info@kpshealthplans.com">info@kpshealthplans.com</a>   1-800-628-3793   <a href="http://www.kpshealthplans.com">www.kpshealthplans.com</a>



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## Best Practices in Web Design

By **Don Morgan**

*Director of Marketing  
Palazzo Intercreative*

A few months ago, I reported on a survey of hospital web sites by Forrester Research, Inc. (“Hospital Web Sites Still Not Up To Par”, June, 2007). Since then, I’ve received e-mails from readers asking me to be more specific in how to improve the usability of their sites. So here are some things to keep in mind as you look for ways to improve your site.

**1. Know who is visiting your site, and why they came.** Good web design starts with knowing your user base and understanding why they have come to your site. You should always keep in mind that web users are goal-driven. They visit sites because there’s something they want to accomplish. The ultimate failure of a website is when it doesn’t provide the information that users are looking for.

**2. Consider using separate landing pages if you have multiple audiences.** Many healthcare sites have more than one key audience. For example, healthcare insurance providers must cater to Members and Visitors – two distinct audiences with two different information needs. Your goal should be to make each of these different audiences feel that the site is particularly designed and suited for their individual needs.

If you are using a search engine optimization service, you should consider the keywords these different audiences might use and link them directly to the page that is more relevant to their goals.

**3. Make it easy to find what they are looking for.** Sounds simple enough, but how many times have you visited a site and had trouble understanding the navigation. Or had to make several clicks before you finally got to the information you were seeking? When we design a site, we always apply what we call “intuitive logic” to our navigation. And then we test that logic with employees or family with varying Internet skills and comfort levels to make sure our logic isn’t affected by our knowledge of the site schematic, or our own comfort with surfing the web.

**4. Use language that your audience understands and identifies with.** Again, this sounds simple enough. But we’ve seen too many sites that use formal or internal language that does nothing but confuse the average user. The best sites are written in plain English, with a conversational tone and “voice” that invites the user to appreciate, and spend time with, that site.

**5. Offline marketing is about getting attention; online marketing is about giving attention.** I heard that in a speech several

years ago, and I’ve never forgotten it. When someone comes to your website, you’ve already got their attention. So most marketers don’t really need Flash Intros or extra pages to draw them in. They are already here. Get to the point. People can get very impatient on the web, especially if they are accustomed to a high speed connection at work but have a slower connection at home. Try to avoid byte-heavy graphics elements and pdf documents that take a long time to download.

**6. Simplify your homepage.** Ideally, viewing your entire homepage shouldn’t require any scrolling. In a split second it should be pretty clear what you offer, and to whom you offer it. When reviewing hospital sites for my previous article, I noted one site that had forty-six click options on the home page.

**7. Make your Search function easy to find and use.** And put it on every page so that I can always move faster to find the specific information I am looking for. Part of simplifying your homepage can be to eliminate all but the most relevant data and options, and make your Search function more prominent. Oh, you don’t have a Search function on your home page? Pity.

**8. Get out your blue pencil and edit your copy.** Too many people

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spend most of their effort on graphic design and give too little thought to the copy. How many times have you looked at a web page or article and said “no thanks, that is just too much copy to read”. I wonder why the very foundation of the web, written text, has taken a strategic back seat to design. Take a hard look at your copy and cut out all of the unnecessary words and phrases. Your audience will appreciate your efforts.

**9. Keep it fresh, I may come back tomorrow.** Good web design and management is an ongoing task, not a one-time project. Too many marketers in all categories make the mistake of designing a site without thinking about how to keep their content fresh and meaningful to the user. “By The Numbers”, a 2005 Benchmarking Study by American Hospital Association reported that the average hospital allocated only 4% of their marketing budget to web site management. I’m sure that figure has increased since then, but I still visit too many sites that feature their latest press release from 2003. My advice is to invest in a Content Management System and have a single, senior level “owner” for web site management.

**10. Make it readable for all ages.** Advertising art directors are fond of using very small type with extra space (they call it leading) between the lines. It looks modern and contemporary, and works fine on a written page in a magazine. It doesn’t work as well when read-

ing from a monitor, especially with reverse white type on a dark background. That can be hard for anyone to read, but don’t forget that the fastest growing age segment of new Internet users is 55 years and older.

**11. Spell check is important, but don’t forget to use a human proofreader.** One typo is to many, and not all typos are misspelled words as this sentence demonstrates.

Since this month’s article is focused on healthcare insurance providers, I did a quick review of five corporate sites:

- [www.regence.com](http://www.regence.com)
- [www.kpshealthplans.com](http://www.kpshealthplans.com)
- [www.phyins.com](http://www.phyins.com)
- [www.premera.com](http://www.premera.com)
- [www.ghc.org](http://www.ghc.org)

For the most part their home page passed the test of being logical and inviting, but two seemed to be more inviting to Members than to Visitors.

As a Visitor, I did have some trouble with some of the sites when I tried to find out more about the plans they offered individuals and families. One site made it very cumbersome for me to compare the various options they offered by requiring multiple clicks on each plan but no easy to compare side-by-side comparison chart. Another site asked for too much personal information before they would reveal the details of the plans they offered and seemed more interested in giving me a quote than in giving me the infor-

mation I needed to decide if I wanted a quote.

With the growing emergence of consumer-directed health plans, insurance companies need to make sure they are addressing the needs of Visitors who are shopping for a new plan as well as current Members.

One concern I had with all of these sites is too much page/copy redundancy. Too many times, I needed 3 or 4 clicks to get to the information I needed. When I click Individual Plans on the navigation bar, I’m looking for information on the plans, not another page that tells me I’ve reached Individual Plans.

I was particularly impressed with the myregence.com blog. I visited the blog just to see what it was about and ended up spending almost an hour there. By the way, congratulations to Bob, a Regence member who recently completed an Ironman Triathlon and raised \$200,000 for leukemia research.

I will be writing more about blogs in a future article. For now, I will just say that if you aren’t considering adding a blog to your site, you should. Blogs will soon be one of those Best Practices I’ve been talking about in this article. Have a great day.

*Don Morgan is Director of Marketing for Palazzo Intercreative, a full-service Seattle advertising agency that specializes in health-care. All material is protected by copyright, and cannot be reproduced without the written permission of the company. For more information, contact Don via e-mail at [don@palazzo.com](mailto:don@palazzo.com).*

## Health care solutions will require a collaborative effort

By Joe Wilczek

President and CEO

Franciscan Health System

Americans rightly expect and deserve access to quality medical care, whether that care is provided at a physician's office, in a medical clinic or at a hospital.

But a number of issues prevent the health care system in Washington State and the nation from operating at maximum capacity and optimum efficiency. The top three issues are:

- ✦ The increasing number of uninsured and under-insured individuals;
- ✦ Inadequate Medicare and Medicaid reimbursements to providers;
- ✦ A shortage of nurses, physicians and other skilled health care professionals.

These are complex challenges. Each will require that federal and state governments, health care providers, businesses, insurance companies, medical schools and consumers work together if we are to develop workable, affordable, sustainable solutions. A purposeful national dialogue is needed; everyone has something to lose by inaction.

This summer, Michael Moore's controversial film "Sicko" placed health care squarely in the public spotlight. My hope is that health care will remain a top issue in the U.S. presidential cam-

paings and through the national elections next year.

Approximately 48 million Americans have no health insurance, while another 30 million people are under-insured. These alarming figures have risen steadily in the past decade. At the Franciscan Health System, for example, we provided more than \$12 million in charity, or free, care in fiscal year 2006. Charity care provided by Franciscan *quadrupled* since 2002 as the number of uninsured and under-insured individuals in our market has grown.

Hospitals in the U.S. provide more than \$27 billion in *uncompensated* care annually, according to the American Hospital Association. Medicare reimburses about 81 cents for every dollar of cost incurred by providers, while Medicaid pays only 74 cents. This forces hospitals to charge higher rates to insurance companies (and their enrollees) and to self-pay patients. I agree with those who call this a "hidden tax." But cost-shifting is an unfortunate fact made necessary by the inequitable reimbursement climate.

What's needed? A simplified system that ensures health care access and basic coverage for all legal residents.

How would this work? A serious national dialogue must determine the best answer to this question. Under one scenario, funding

would be supported by federal taxes. The federal government would act as the bill-paying agent to reimburse hospitals and other health care providers, just as it does now through Medicare. Some studies indicate that changing the current billing structure could save our nation's health care system \$286 billion in paperwork alone.

Isn't universal health coverage socialized medicine? No. Under socialized medicine, doctors and hospitals work for the government. The single-payer format I am describing could be a private-public partnership: Hospitals and physicians remain private but they would be paid by the U.S. government and private insurance companies.

To become reality, this plan would require federal and state governments to significantly increase their spending for health care. Revenues to support this higher spending would likely come from tax increases or through new, health care-focused spending priorities for existing tax revenues.

Labor accounts for approximately 50 percent of health care's operational costs. By comparison, labor represents 15 to 25 percent of costs in the manufacturing sector. Not only are our labor costs high and getting higher, health care is

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bedeviled by a shortage of nurses, neurosurgeons, radiologists, anesthesiologists and other specialists even as our nation's population is aging and needing medical services longer. Competition among hospitals to recruit from this limited labor pool is intense and drives labor costs beyond normal inflationary levels.

What's the solution? One strategy is to increase the number of nurses and physicians graduating from our colleges, universities and medical schools. The University of Washington recently expanded its available medical school slots. In the South Sound,

our organization has partnered with several colleges to increase the number of nursing-school graduates. Also, efforts are underway to establish a college of osteopathic medicine in Yakima. These are important steps, but additional initiatives are needed in light of existing and predicted labor shortages.

Our state and nation have a health care system that is focused on medical quality and patient safety. But the system is strained and stretched thin. It's the responsibility of government, business, health care, insurance, education and consumers to work together, with determination and a sense of

urgency, to protect and improve upon what we have.

*Joe Wilczek is president and chief executive officer of the Franciscan Health System, a private, non-profit organization that includes St. Joseph Medical Center in Tacoma; St. Clare Hospital in Lakewood; St. Francis Hospital in Federal Way; Enumclaw Regional Hospital; and Franciscan Medical Group clinics in Kitsap, King and Pierce counties.*

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*Healthcare Opinions expressed by Mr. Wilczek are not necessarily the opinions of the Washington Healthcare News.*

## Washington Healthcare News 2008 Editorial Calendar

Month and Year	Theme of Edition	Space Reservation	Distribution Date
January 2008	Healthcare Public Policy	December 3, 2007	December 21, 2007
February 2008	Urban Medical Clinics	January 7, 2008	January 25, 2008
March 2008	Rural Hospitals	February 4, 2008	February 22, 2008
April 2008	Insurance Carriers	March 3, 2008	March 21, 2008
May 2008	Healthcare Information Technology	April 7, 2008	April 25, 2008
June 2008	Rural Medical Clinics	May 5, 2008	May 23, 2008
July 2008	Ancillary Services	June 2, 2008	June 22, 2008
August 2008	Healthcare Human Resources	July 7, 2008	July 25, 2008
September 2008	Community Health Centers	August 4, 2008	August 22, 2008
October 2008	Third Party Administrators	September 8, 2008	September 26, 2008
November 2008	Insurance Brokers and Agents	October 6, 2008	October 24, 2008
December 2008	Urban Hospitals	November 3, 2008	November 21, 2008

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  - **Manager of Public Relations**
  - **IT Manager** – Project Management Office

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Renton, WA EOE



## **KPS** health plans Senior Staff Accountant

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Employees at KPS Health Plans enjoy a casual, balanced work environment, served with a generous benefits package. Based in Bremerton, housing prices are still affordable, schools are great, and you know your neighbors. Plus, KPS has been named one of the Best Places to Work by Washington CEO magazine.

Qualifications required include a BS degree in Accounting or Finance and at least three years accounting experience. Familiarity with the healthcare insurance industry a plus.

Send cover letter, resume and salary requirements to [hr@kpshealthplans.com](mailto:hr@kpshealthplans.com). To learn more about KPS visit [www.kpshealthplans.com](http://www.kpshealthplans.com). EOE

## The Do's and Don'ts of Interviewing: Dressing "One or Two Up"

By Joanna Lueck

There is great truth in the old adage, "You never get a second chance to make a good first impression." The first impression you make may be the only one you make, so take it seriously. Here is advice that will help you create that all-important positive first reaction.

First and foremost, dress "one or two up". Appropriate dress is critical. If the interviewer will be wearing a suit, then you should wear one. If they will be dressed

business casual, be sure to dress at least one level up with a tie and/or jacket. Unless you have been requested not to wear a suit, or if you have been warned that the corporate culture is opposed to wearing suits (such as in some high-tech companies), I always recommend doing so. You can always apologize for being overdressed. Iron, press, clean, and shine everything. No jeans, wrinkles, stains, outdated ties, scuffed shoes, or high-water pants. No cleavage, short skirts, open-toed shoes, or bare legs.

Dressing professionally not only creates a good first impression but it helps you to feel more self-confident and thus more comfortable during the interview. So long as it doesn't appear to be arrogance, self-confidence is very appealing to the employer.

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*Joanna Lueck is a Recruiter and Writer living in Washington State. Her book "The Job Interview Preparation Pocket Handbook" is available at [www.amazon.com](http://www.amazon.com). Joanna can be reached at [joannalueck@hotmail.com](mailto:joannalueck@hotmail.com).*

# Plan and Hospital Financial Information

## YTD Net Income and Members through 06/30/07 for the Largest Health Plans in Washington State<sup>1</sup>

Plan Name	Net Income	Members	Plan Name	Net Income	Members
<b>Health Plans:</b>			LifeWise Health Plans of AZ.	(\$9,231,510)	31,046
Regence BlueShield	\$29,565,755	881,930	Arcadian Health Plan <sup>2</sup>	(\$3,817,207)	56,422
Premera Blue Cross	\$48,171,581	721,478	Timber Prod. Manuf. Trust	\$377,251	9,891
Group Health Cooperative	\$53,974,606	408,288	Washington Employers Trust <sup>3</sup>	(\$1,185,294)	8,995
Molina Healthcare of WA	\$20,446,537	287,170	Aetna Health, Inc.	\$2,235,760	6,848
Community HP of WA	\$1,544,901	234,213	Washington State Auto Ins.	\$1,169,085	2,218
Group Health Options	(\$364,979)	99,525	Puget Sound Health Partners	(\$527,339)	0
Asuris Northwest Health	(\$166,260)	89,364	<b>Vision or Dental Plans:</b>		
LifeWise Health Plan of WA	\$20,773	85,562	Washington Dental Service	\$6,793,546	900,255
Pacificare	\$21,434,547	52,723	Vision Service Plan <sup>3</sup>	\$1,813,757	522,914
KPS Health Plans	(\$1,452,940)	45,383	Willamette Dental	\$320,844	69,624
Columbia United Providers	(\$1,472,764)	35,893	Dental Health Services	(\$661,030)	25,390

## YTD Margin and Days through 03/31/07 for the Largest Hospitals in Washington State<sup>4</sup>

Hospital Name	Margin	Days	Hospital Name	Margin	Days
Sacred Heart Medical Center	\$8,504,127	38,228	St. Joseph Hospital Bellingham	\$4,422,963	15,067
Swedish Medical Center	\$13,583,043	36,087	Good Samaritan Comm. Health	\$12,803,617	14,110
Harborview Medical Center	(\$1,841,000)	33,547	Valley Medical Center	\$6,846,596	13,535
Providence Everett Med Ctr.	\$9,738,570	25,758	Yakima Valley Memorial	\$2,373,048	12,698
University of WA Med Ctr.	\$4,928,142	23,544	Highline Community Hospital	\$5,407,816	11,590
St. Joseph Medical Center	\$16,170,050	23,149	Swedish Cherry Hill Campus	(\$3,233,612)	10,871
Virginia Mason Medical Ctr.	\$5,365,713	21,983	Northwest Hospital	\$901,542	10,562
Southwest WA Med Ctr.	\$3,158,879	21,914	Holy Family Hospital	\$1,292,926	10,491
Tacoma General Hospital	\$14,136,029	21,182	Central Washington Hospital	\$3,037,997	10,341
Providence St. Peter Hospital	\$7,251,992	21,019	Kadlec Medical Center	\$4,349,182	10,308
Deaconess Medical Center	\$681,977	17,518	Peacehealth St. John Med Ctr.	\$7,669,017	9,734
Children's Hospital	\$6,112,002	17,101	Stevens Healthcare	\$1,553,271	8,871
Harrison Medical Center	\$8,396,843	16,447	Auburn Regional Medical Ctr.	(\$33,617)	8,293
Overlake Hospital Med. Ctr.	\$3,459,795	15,336	Legacy Salmon Creek Hospital	(\$3,123,279)	8,156

<sup>1</sup> Per filings with the WA State Office of Insurance Commissioner. <sup>2</sup> Potential enrollment reporting error. <sup>3</sup> Figures from 1st qtr. as Plan had not filed 2nd qtr. at publication date. <sup>4</sup> Per filings with the WA State Department of Health.

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