

PROFESSIONAL Connection

A Word From **President Lowthers**

Health Care Reform Affects Us All

It is impossible to turn on the television or open a newspaper without seeing coverage of the health care reform debate that has been rolling across our nation these past few months. From President Obama's town hall meetings to the discussions on the floors of the House and Senate to left wing and right wing pundits dominating cable news programs, the President's health care reform plan is shaping up to be the biggest social issue our leaders have tackled in decades. But, how does this affect you, Local 400 members who already receive excellent health care benefits?

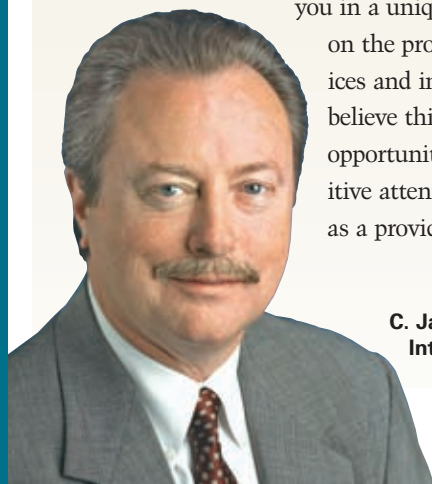
First of all, on a very broad level, it affects all of us simply because we are Americans. It is shocking that the United States, one of the wealthiest countries in the world, has more than 100 million people who are either uninsured or underinsured, many of them children. Our friends and neighbors are literally dying because they cannot afford adequate, preventative health care, let alone expensive life saving procedures or prescription medication. Even many of those who are currently healthy, are living on a hope and prayer that they don't get sick as they would face financial ruin should they accumulate steep medical bills.

Furthermore, every insured American essentially pays for the uninsured through out-of-control medical costs and insurance premiums. Although we have our own health care coverage, we bear the burden for all those who do not, who rely on hospital emergency rooms for much of their care and whose medical costs are ultimately spread among every paying patient.

As medical professionals, the health care debate affects you in a unique way. All eyes are now on the providers of health care services and insurance companies. I believe this could be the perfect opportunity to draw even more positive attention to Kaiser Permanente as a provider of truly quality health

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**C. James Lowthers, President
International Vice President**



Stewards Seminar Addresses Internal Changes and New Protocols

Health care, which has found itself at the epicenter of political debate on Capitol Hill, is of utmost concern to all Americans. As a result, health care providers, such as Local 400 represented Kaiser Permanente, have taken a hard look at their business model in order to remain competitive and perhaps more importantly, effective, as they strive to meet the health care needs of our nation. Kaiser Permanente of the Mid Atlantic States (KPMAS) has been diligent about staying at the forefront of the industry by both embracing new technologies and by self-evaluating the programs and initiatives serving our patient members and our health care professionals. Local 400 members have proven to be important partners with Kaiser Permanente.

At the Stewards Seminar held at the end of May, Judy Brittain, vice president of Health Plan Delivery Systems Operations for KPMAS, gave a review of our region, noting that despite the tough economic climate, KPMAS is positioned well and holding its own. In fact, she added that KPMAS is being considered as a health plan option for Congress and that it will be an honor and a challenge to promote Kaiser Permanente to Congress. She went on to note the five priorities for 2009: improving primary care, improving access to specialty care, investing in radiology, promoting minor injury care clinics and promoting our ambulatory surgery centers.

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Stewards' Seminar

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Brittain stated that in order to improve primary care, the goal is for patients to be able to book an appointment with a doctor in one phone call and have 80 percent of all appointments booked through the contact center. With regards to specialty care, Kaiser Permanente is making a big push to internalize care and reduce the wait time for a specialist to 10 days or less by the end of 2010. Brittain added that there has been a sizeable investment in radiology equipment as well as a goal of offering 10-day access to radiology. Finally, Kaiser Permanente is striving to promote its Minor Injury Care Centers (MICC) as a means to treat such things as sprains, bumps and lacerations and to better utilize its Ambulatory Surgery Centers in order to keep cases in house that might otherwise be sent out. The bottom line, according to Brittain, is to keep as much patient care internalized as possible and make people think there is no other place they would want to go to fulfill their health care needs.

Addressing the rollout of Kronos 6.0 was David Hendrix, project manager in Human Resources for KPMAS. Kronos has long served as the program that manages the "time clock" for Kaiser's health care professionals. An upgrade to Kronos 6.0 became necessary when our vendors no longer supported the 5.0 version. However, with the new version have come many improvements and additional features for those who use it. As of June, Kronos has been live with its time keeping feature while other features of the program, such as using it to request a leave of absence, went live in late summer.

Hendrix noted that everyone in the mid-Atlantic region was required to switch to Kronos 6.0 and web-based training through KP Learn which was offered and will continue to be offered at all Kaiser centers. Additionally, there are Facility Champions—people who have been trained in the new version and are available to answer questions regarding clocking in—at each center.

As explained by Hendrix, Kronos 6.0 will allow employees to clock in and out at their workstations as well as view their up-to-date accrual balances. Once the leave of absence feature is up and running, employees will also be able to request a leave of absence electronically and track that request electronically through the



approval process using Kronos. Kronos 6.0 will be able to be accessed from any workstation by using a login id and password; however, time clocks and kiosks will still be available for those without a workstation.

One presentation of particular interest to the stewards was the pension update by Jack Weberski from the Coalition of Kaiser Permanente Unions. With so many Americans facing economic uncertainty these days, the pension presentation was timely for our stewards who will be able to take this information back to their workplaces and better inform all of our members of the changes to our pension rules and how to best plan for their retirement.

Weberski discussed the different types of pension plans—defined benefit and defined contribution—and how each plan is funded. With our defined benefit plan, the company makes a contribution and the pension grows through investments. Due to the unpredictability of the stock market over the last few years, Weberski noted that the Kaiser pension fund is still faring reasonably well, all things considered.

He also noted the changes to our pension fund that have resulted from the Pension Protection Act of 2006 (PPA). Most notably, the PPA now bases lump sum calculations on corporate bond rates, versus the Treasury Bill, resulting in lower lump sum



UBTs Credited for Success of Diabetes Out

By all accounts, our unit based teams (UBT) are a unique approach to addressing workplace concerns that, if unaddressed, could affect our ability to serve our patients and work productively. Our UBTs are a means of self-management and improvement and have served our company and our workplaces well. Most importantly, UBTs have enabled our health care professionals to work to the best of their ability, ultimately improving the quality of care we are able to deliver to our patients.

At our Woodlawn facility, utilization of UBTs is being taken to the next level in an effort to address one of the biggest health issues affecting the patients who use the Woodlawn center—diabetes. Woodlawn's staff, which consists of doctors, nurses and clinical assistants, has collectively decided to improve their diabetes outreach to their patients in much the same way they have been tackling internal workplace challenges—through the UBT approach. And, much of the credit for the success of this outreach is due to the clinical assistants and UFCW Local 400 represented nurses.

rates. Weberski warned everyone that if they want to take a lump sum payment when they retire, as about 75 percent of retirees opt to do, and they want that sum calculated at a more favorable rate, they must retire by November 25, 2009 to avoid being affected by the changes from the PPA.

Additionally, effective January 1, 2010, there will be a new 100 percent joint and survivor monthly annuity with a 15-year certain period and pop up provisions if the retired employee's joint annuitant dies first. That is, there will now be a fixed annuity option for employee and spouse/domestic partner, a guaranteed payment of 15 years to a beneficiary if both employee and spouse/domestic partner die, and a pop up will go up to the payment of the level of a single life annuity if the joint annuitant dies first.

Sharon Cunningham, RN, with the Regional Contact Center, also addressed the seminar and discussed the new protocols that went live in the beginning of July. The goal for the new protocols is simple—to address patients' needs as quickly and effectively as possible. Cunningham highlighted some of the new protocols such as ob/gyns now taking telephone appointments, nurse practitioners at call centers offering telephone treatment plans (TTP),



the implementation of Call Center Medical Doctors (CCMD) who will be dedicated to the nurses exclusively in an effort to reach a resolution for the patient in just one phone call, and the reduction of hot transfers, to name a few. She noted that these protocols are dramatically different from protocols in the past because unlike previous protocols, they were not written by doctors who were fee-for-service whose goal was to have every patient come in for treatment.

Closing out the day were the delegates who attended the meeting in San Jose, CA, in April—Kathleen Schmidt, RN; Jaki Bradley, MSN, CRNP; Jan Nelson-Drake, Au. D. and Sharon Cunningham, RN. The delegates gave a brief report on the meeting. Schmidt remarked that the message she took away from the meeting was that our greatest investment is in our people and working through UBTs will pull us out of these tough times. Bradley spoke about the breakout sessions she attended on UBTs and afterhours care and impressed upon everyone to consider just how involved Local 400 is with President Obama from health care to organized labor issues. She added that she especially liked learning about what was going on in other regions and came away from the meeting more confident than ever that the mid-Atlantic states region has the best relationship with management of all the Kaiser regions. Nelson-Drake relayed to the stewards what she learned about getting our success stories out there, not just the simple before and afters, but people's stories as that gets people's attention as much as saving money. Finally, Cunningham presented the information she learned in the breakout session she attended on the value compass and urged everyone to be proud of what they do.

It was another information-packed seminar for the dozens of stewards in attendance. The information they took back to their workplaces will prove valuable to the success of our individual health care professionals as well as the success of Kaiser Permanente, specifically the mid-Atlantic region. Working together—company and union—Kaiser Permanente is securing its position as a truly cutting-edge health care provider and Local 400 members are proving to be key players in the company's success.

Outreach Program at Woodlawn

In the first quarter of 2008, only 34.8 percent of Woodlawn's diabetic patients over age 55 were taking aspirin, which is part of a regular diabetes management regimen. By the end of 2008, after utilizing UBTs to connect with the diabetic patients, that percentage increased to 70.1 percent. To achieve this success, the nurses and clinical assistants of the UBTs were used to connect with diabetic patients and inform them of the education programs that Kaiser offers its members so that these patients could gain a better understanding of the medications they must take and the lifestyle changes they must make to manage their disease.

It was decided that nurses and clinical assistants would greatly benefit Woodlawn's attempt to reach out to diabetic patients because oftentimes nurses have a more personal relationship with patients and can better connect with them. Clinical assis-

tants can recognize early warning signs during the initial screening process and can flag these signs for the medical staff. As part of the outreach initiative, all nurses and clinical assistants at Woodlawn's internal medicine department were required to refresh their knowledge of diabetes by taking Kaiser's three-hour introductory diabetes class.

As is the case with any new program, the challenges have been many, including finding the time to call the patients. Nurses and clinical assistants have had to call in the few spare minutes they may have in between patients. Additionally, it has been difficult to get the UBT together to meet and maintain communications. Despite the challenges, the numbers prove that using UBTs as part of an outreach program works and as a result, the doctors at Woodlawn are looking at using UBTs to help manage other chronic diseases and health issues including smoking cessation.

Your Local 400 Stewards

Stewards play a very important role in the workplace, serving as a liaison between the employees and the union and the employees and the employer. Your steward is your first line of defense on the job. Each of our stewards is committed to making their workplace fair and efficient. In order for our stewards to be successful in their jobs and serve every Local 400 Kaiser Permanente member to the best of their ability, they must receive full cooperation and support from those they represent. Getting to know your steward may be the best thing you can do to ensure your protection on the job.



Ilene Aiken



Kathy Allen



Keva Matthews Bailey



Stephanie Beatty



Gwen Berger



Jaki Bradley



Terrence Campbell



Margaret Canning



Gail Cavallo



Linda Cox



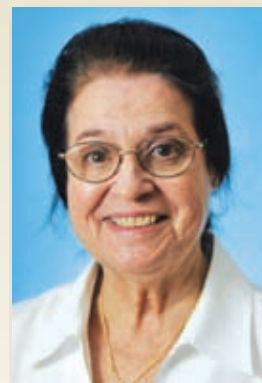
Sharon Cunningham



Kathryn de Vocht



Jacqueline Edwards



Carolyn Granger

Your Local 400 Stewards

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Deborah Grinder



Richard Herbison



Tracy Javador



Linda June



Marcy Marcus



Deborah Messenger



Dawn McKenna



Mary Beth Minch



Linda Palmer



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A Message from Kathleen Schmidt, KP/LMP contract specialist

Labor leaders at Kaiser Permanente are being called upon to help guide changes in the mid-atlantic region in ever increasing numbers. We are all aware of changes in our workplace. Our mission is to be the driver of these changes, instead of being driven by them. We must not allow these changes to just "happen" to us.

The economy is the impetus for a great many of these changes. We are challenged to do more with less, or, in the parlance of our last Delegates Convention, to "Give Care Better, Give Better Care." In every medical center we have UBTs working to do exactly this.

We also have UFCW labor leaders involved in planning the new D.C. medical office building, the Complete Care Initiative, and the RN to BSN program. We were also drivers of the newly completed Kronos changes and the Clinical Contact Center protocol revisions.

Other compelling reasons for our continued improvement include the National Health Care Reform Initiative and the new direction the medical group is taking. While it is exciting to see all the positive changes going forward, we must not lose sight of the Value Compass, which puts the patient where they belong, in the center of all we do.

To all of you who struggle daily with changes and new "initiatives," thank you. To the UBT leaders who are helping to guide these changes, thank you. I believe we are continuing to strive to be what we all want to be—the best provider of seamless, cradle-to-grave health care that is efficient, cost effective, caring and professional. Local 400 stands ready to support all of your endeavors, now and in the future.

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care. We could be, as we should be, looked upon as a leading example within the health care industry, now is our time to shine. Kaiser has long been ahead of the curve by performing careful self-examinations to improve the delivery of health care for patients while at the same time working to further elevate the company. Unlike other health care providers, Kaiser and its medical professionals have been working all along to improve services and control costs for patients, long before the health care debate took center stage.

As a union, reeling in health care costs will likely make a huge difference for us at the bargaining table. Health care costs are usually what cause the most heated debates during negotiations, as employers often look to cut benefits anyway they can, citing the expense of health care coverage. By lowering the cost of health care, be it through government intervention or by leveling the playing field, we will have more bargaining power with our employers and this will certainly serve us well.

Unions have historically worked to improve the lives of all Americans, not just those within the rank and file. Making health care coverage affordable and accessible for all is simply the right thing to do. I know that you know this all too well while you work to improve the health of all of us each and every day.