

**REPORT OF THE MEDICAL CARE COMMISSION MEETING HELD ON
NOVEMBER 29, 2006 9:30 A.M.**

I. CALL TO ORDER

Chairman Dennis called the meeting of the Medical Care Commission to order at 9:32 a.m. on Wednesday, November 29, 2006.

Chairman Dennis advised that the following members of the Commission were present: Chairman Michael Dennis, Vice Chairman Robert Friedman, Commission Member Richard Furlaud, Commission Member Norman Goldblum and Commission Member Norman Traverse. Commission Member Michael Stein arrived at 9:41 a.m.

II. PLEDGE OF ALLEGIANCE

All present recited the Pledge of Allegiance.

III. APPROVAL OF AGENDA

IV. APPROVAL OF COMMISSION REPORT FOR THE NOVEMBER 21, 2006 MEETING

In a voice vote, all voted unanimously to approve the November 21, 2006 minutes.

V. PLANNING SESSION WITH JUDY GOODMAN, P.A. REPRESENTING GOOD SAMARITAN/TENET HEALTHCARE.

Chairman Dennis stated he wished to establish the significance of this meeting. He stressed that the Medical Care Commission (MCC) did not waste any time pursuing solutions to current healthcare problems in the community. He spoke of the Good Samaritan Hospital (Good Sam) conference held the

previous week where the future role of the center was discussed. He stated that the MCC had raised the level of public awareness of current health care concerns. He felt the recent addition of Judy Goodman was an excellent choice as she was a corporate attorney who had the trust of the community and her colleagues.

Chairman Dennis spoke of ongoing criticism of conditions at Good Sam and stated that no one had come to the conference to represent its parent company Tenet Healthcare. He recalled that Good Sam officials had announced earlier this year that the hospital would hire a cardiology consultant to analyze the feasibility of performing angioplasties at the center. He questioned why the analysis had not been shared with the community earlier. With regard to conversations about the potential sale of the hospital, Chairman Dennis stated that the community wanted to be assured that Good Sam would never be anything but a medical facility. He stated that the best option was to work diligently with Ms. Goodman to create a climate to facilitate effective change. He stated that it would not hurt to look at alternatives simultaneously while negotiating with Good Sam. He stressed that the community wanted a modern, properly sized community hospital with first class services.

Ms. Goodman introduced herself to the Commission and spoke on behalf of Good Samaritan Hospital. Ms. Goodman commended the MCC on its efforts to raise public awareness over the past year and stated that Good Sam was ranked in the top 10 in Florida for quality. She stated that after reviewing Dr. Dennis' published list of items that the MCC wished to tackle this year, she specifically wished to discuss items 6 and 8.

Ms. Goodman read item 6 of Dr. Dennis' list verbatim as follows: "A top priority of our residents is to have immediate access to acute stroke and cardiac centers while surrounded by excellent centers to the north and south. We must also explore this possibility at Good Sam."

Ms. Goodman read item 8 of Dr. Dennis' list verbatim as follows: "We will pursue the work in bringing together the brightest minds to determine the best future for Good Sam."

In addressing item 6, Ms. Goodman stated that based on the small number of acute stroke incidents that met the emergency criteria the MCC was concerned about, it would seem simple for the Town to determine whether the time saved between ambulance transport versus helicopter transport made it worthwhile for the Town's EMS system to explore providing this method to its residents.

Ms. Goodman advised that Good Sam was in the midst of preparing to provide acute stroke and cardiac centers. However she stressed that this would not happen overnight. She advised that the hospital would apply for the angioplasty approval from the state and in order to get this, the activity had to be ramped up to reach the state threshold number of 300 cardiac catheterizations. She stated that several additional cardiologists would be willing to do cardiac catheterizations in the hospital starting in January. She added that cath lab equipment was being upgraded. She further stated that the hospital hoped to reach the 300 threshold number by the end of 2007 so that by mid-2008, the hospital would be providing this procedure.

Ms. Goodman suggested that the MCC could consider paying more to the excellent neurologists in the area to be "on call" at the hospital. She spoke of the specifics and limitations of Stark Law and stated that since foundations were not subject to Stark Law, they could hire neurologists to supplement what the hospital could pay. She explained that some foundations set up business entities that accounted for doctors as if they were employees.

Regarding item 8, Ms. Goodman advised that Tenet Healthcare had given its CEO, Paul Echlard, full responsibility and stressed that he was the individual to work with. She stated that it would be helpful to have contacts at major institutions speak directly with her and Paul Echlard to share any positive ideas or plans they might have regarding strengthening Good Sam.

Commissioner Friedman asked why the heads of Tenet had not come to visit the hospital after Dr. Dennis' invitation. Ms. Goodman stated that Tenet officials wanted Paul Echlard to deal with the problems at the hospital in his capacity as CEO.

Commissioner Furlaud stated that compared to other facilities in the community, Good Sam was perceived as worse in quality. He questioned how the hospital could be ranked in the top 10 based on the poor community perception. Ms. Goodman stated that much of the current perception was based on a painful period going back several years involving union uprisings and poor doctor morale. She added that millions of dollars in charitable donations were still being held back from the hospital. She further stated that the hospital applied yearly to the Attorney General and provided a status report on the hospital.

Commissioner Furlaud asked what Good Sam had to do specifically in order to become a first class hospital. Ms. Goodman spoke of the hospital's good reputation as a cancer care hospital and of continuing improvements in its surgery center. Ms. Goodman read aloud a letter from the Buchanan Ingersoll law firm which represented Intracoastal Health Systems Inc. regarding various efforts being pursued.

Commissioner Goldblum asked what foundations and hospitals could do together and asked if the hospital was willing to pay the ceiling approved by the state for specialty doctors. Ms. Goodman advised that the hospital did pay the figure provided by the independent appraiser.

A Commission member asked what would be the working relationship Foundation and the for profit hospital in terms of management. Ms. Goodman stated that with this model the foundation would manage the neurologist under the terms of an appropriate contract, with the neurologist functioning as an independent contractor.

Chairman Dennis acknowledged Commissioner Stein's arrival at the meeting.

Commissioner Stein stated that for the past six years Tenet Healthcare had done little to earn the trust of the community. He stated that he did not understand the "hybrid arrangement" being suggested and questioned how this system would be managed. He also questioned how patients with complicated health issues could be assured they would be safe in the hospital with an independent group of doctors who did not relate to each other. Ms. Goodman stressed the excellence of the staff at Good Sam.

A Commission member stated that most of the doctors were of middle age and spoke of the need to bring in younger doctors with newer training and ideas. He also spoke of the need for tort reform policy and pointed out that many younger doctors could not afford malpractice insurance and were reluctant to come into the area. He stated that other organizations subsidized portions of student loans of younger doctors as a recruitment program. Ms. Goodman summarized statistics on the ages of specialists at Good Sam.

A Commission member asked if there were neurologists on staff at Good Sam. Ms. Goodman stated there were neurologists in the community that the MCC could contact about being on call at the hospital.

Commissioner Friedman asked about the present occupancy rate at the hospital. He stated that he had learned recently that patient admissions were limited because of a shortage of nurses. Ms. Goodman stated that there was a national nursing shortage that the hospital and local foundations were aggressively trying to address. She spoke of the problem of the rising uninsured in the community and the fact that more than half of the hospital's admissions were government paid which did not attract many younger doctors. She stated that few doctors in the area wished to accept Medicaid and explained that this was a crisis in all communities.

Commissioner Furlaud asked how patients were stabilized. Ms. Goodman explained that the hospital used a fast track method using a doctor on call.

Stanley Rumbough asked about the threshold number needed for elective surgery in cardiology. Ms. Goodman stated that the state threshold was higher than 300 for this procedure. Mr. Rumbough questioned whether Tenet was losing money. Ms. Goodman stated that she had the financials for Good Sam. Mr. Rumbough stated that some corporations sold divisions that were losing money. Ms. Goodman stated that the decision was made not to sell Good Sam and added that the hospital did not lose money last year.

Dr. Conroy asked about the reaction of Good Sam to the recent proposal by the University of Miami which would eliminate the need for a neurologist in the emergency room. Ms. Goodman stated that the hospital was open to looking at this proposal but as yet it had not seen a business plan with the appropriate numbers.

Chairman Dennis summarized the discussion and stated that the Commission represented the voice of the people but was also the voice of reason. He stated that the goal was to achieve the highest possible level of success in working with Ms. Goodman and acknowledged the restrictions discussed.

VI. PLANNING SESSION WITH WEST PALM BEACH CITY COMMISSIONER, KIMBERLY MITCHELL

Chairman Dennis invited City Commissioner Kimberly Mitchell to address the Commission.

Commissioner Mitchell spoke of various individuals in the community who were interested in understanding the Commission's goal to elevate the level of health care at Good Sam. She stated that the City had identified the need to diversify its economic base and had hired a consultant to advise how this could be done. She advised that the overwhelming response had pointed to health care as the solution. She stated that she would plead with other Commissioners to address this issue at the Commission level at its next meeting. Commissioner Mitchell also spoke of a piece of property downtown referred to as the "tent site" which she believed was a potential site to bring a corporate entity. She stated that the Commission would be discussing the highest and best use of this property at its upcoming meeting.

Chairman Dennis asked what kinds of discussions were being held on the demographics which indicated the population growth was mostly to the north and south and not in the center.

Commissioner Mitchell introduced Pat Snead, Peter Burke, and Harvey Oyer. Regarding the discussion on demographics, Mr. Oyer stated that more growth was scheduled east of I-95 in West Palm Beach which would result over time in a higher patient population and bed nights at Good Sam.

A Commission member spoke of the arrival of a major biotech industry which would arrive in West Palm Beach. He felt this would be a good population that could be serviced out of Good Sam.

VII. COMMENTS FROM THE PUBLIC

VIII.

IX. DISCUSSION OF INFORMATIONAL BROCHURE

X.

Chairman Dennis temporarily adjourned the meeting.

Chairman Dennis reconvened the meeting and welcomed Carey O'Donnell.

Ms. O'Donnell stated that many residents did not understand all the health care resources at their disposal in the community. She agreed that a physical piece of literature to be distributed to all households on the island would be appreciated in the community. She stated that the brochure should be

professionally designed and easy to navigate. She spoke of the elevated level of the Palm Beach Historical Society based on the excellent graphic design used in its materials. She stated that the MCC should keep a specific graphic identity in all its literature for the public to easily identify.

General conversation ensued as to the specifics of design, layout, size and style of the brochure. Ms. O'Donnell indicated she would bring samples and general estimates for the Commission members to review.

Chairman Dennis stated he wanted to present a budget for this brochure by December 12.

Ms. O'Donnell stated that the MCC needed a logo to be used on every piece of its communication. A Commission member suggested using the Town of Palm Beach seal with "Medical Care Commission" printed underneath.

IX. NEXT MEETING DATE: DECEMBER 5, 2006

Chairman Dennis announced that the next meeting would be held on December 5, 2006.

X. ANY OTHER MATTERS

XI. ADJOURNMENT

There being no further business, the Medical Care Commission Meeting of November 29, 2006 was adjourned at 11:45 a.m.

APPROVED:

Michael Dennis, M.D.
Chairman