

NEWS RELEASE



Date: June 23, 2010

Contact: Nelsa Brodie, 503-945-5690

Oregon's Medicaid director selected for prestigious Medicaid Leadership Institute

Oregon's director is one of six selected nationally to enhance the leadership capacity of Medicaid directors to deliver high-quality, cost-effective health care services

Judy Mohr Peterson, Oregon's Medicaid director, has been selected by the Center for Health Care Strategies (CHCS) to participate as a fellow in the Medicaid Leadership Institute's 2011 class. Mohr Peterson also serves as an assistant director at the Department of Human Services/Oregon Health Authority.

Supported by the Robert Wood Johnson Foundation, the Medicaid Leadership Institute is designed to enhance the leadership capacity of Medicaid directors so their programs can serve as national models for high-quality, cost-effective care.

"This is a fantastic opportunity for Judy and a recognition of her leadership and commitment to Oregon's innovative approach to health reform," said Bruce Goldberg, M.D., director-designee of the Oregon Health Authority. "It's a great honor for Oregon and for Judy."

Between now and 2014, Medicaid will become the largest health care purchaser in the nation, with the addition of between 16 million and 20 million new beneficiaries. As the leaders of the program responsible for covering more than one-quarter of the nation's population, Medicaid directors will have tremendous opportunities to leverage their purchasing power to influence improvements in health care quality, delivery and value.

Other Medicaid directors selected to participate in the unique executive leadership development program are Thomas Betlach, Arizona; Theresa Eagleson, Illinois; Donna Frescatore, New York; Darin Gordon, Tennessee; and Michael Nardone, Pennsylvania.

"Each of these six Medicaid directors is essentially the CEO of one of the largest health insurers in his or her state. We are excited to work with these executives who are passionate about maximizing the value of their programs for millions of beneficiaries," said Melanie Bella, MBA, CHCS senior vice president. "They will bring a diverse array of experiences to the institute and will collectively spur each other to take full advantage of the opportunities for leadership presented by health care reform."

(more)

The Division of Medical Assistance Programs administers Oregon's Medicaid program. DMAP, formerly part of DHS, is now part of the new Oregon Health Authority (OHA), which combines all health and health-related public agencies. OHA is a leader in the effort to innovate for quality and affordable health care in Oregon, by putting the care back in health care and working to lower or contain the cost of care so it is affordable and accessible to everyone.

"State Medicaid programs are where the rubber meets the road when it comes to increasing health insurance coverage in this country. The directors of these programs play a vital role in turning policy into practice," said John Lumpkin, M.D., MPH, senior vice president and director of the health care group at RWJF. "We are proud to support the professional development of these dedicated leaders whose work will be increasingly in the spotlight as Medicaid takes on an expanded responsibility for insuring Americans."

Judy Mohr Peterson was appointed assistant director for the DHS Division of Medical Assistance Programs (DMAP) in September 2009. She has been at DHS since 1997, including eight years in DMAP as a manager of the Analysis and Evaluation Unit and in research. She also has administered the DHS caseload forecasting and actuarial services team. Before DHS, Judy was on a team that researched and reported on children's mental health in Texas. She received her doctoral degree in sociocultural anthropology from the University of Texas at Austin.

The Medicaid Leadership Institute is designed to enhance the strategic thinking, substantive knowledge, individual leadership and technical skills that directors need to effectively lead and foster innovation in their state Medicaid programs. The program is managed by CHCS and directed by Bella, former Indiana Medicaid director. The curriculum is designed to be dynamic and relevant to the participants' interests as well as the current environment at both the federal and state levels. It will focus on broad macroeconomic and political issues, data and analytical topics as well as leadership and organizational development.

The 2011 class of the Medicaid Leadership Institute is the second group of Medicaid leaders to participate in this prestigious executive training program. For more information about the Medicaid Leadership Institute and its 2010 inaugural class, visit www.medicaidleaders.org.

#

About the Robert Wood Johnson Foundation: The Robert Wood Johnson Foundation focuses on the pressing health and health care issues facing our country. As the nation's largest philanthropy devoted exclusively to improving the health and health care of all Americans, the foundation works with a diverse group of organizations and individuals to identify solutions and achieve comprehensive, meaningful and timely change. For more than 35 years the foundation has brought experience, commitment and a rigorous, balanced approach to the problems that affect the health and health care of those it serves. When it comes to helping Americans lead healthier lives and get the care they need, the foundation expects to make a difference in your lifetime.

About the Center for Health Care Strategies: The Center for Health Care Strategies (CHCS) is a nonprofit health policy resource center dedicated to improving health care quality for low-income children and adults, people with chronic illnesses and disabilities, frail elders, and racially and ethnically diverse populations experiencing disparities in care. CHCS works with state and federal agencies, health plans, providers and consumer groups to develop innovative programs that better serve people with complex and high-cost health care needs. Its program priorities are: improving quality and reducing racial and ethnic disparities; integrating care for people with complex and special needs; and building Medicaid leadership and capacity.

#