Commitment to "Diversity"

Naette L.K. Judd, RN, MPH
Director, Imi Ho’ola Program and
Satoru Itzutsu, PhD, Associate Dean
John A. Burns School of Medicine

For twenty-five years, the University of Hawaii John A. Burns School of Medicine (JABSOM) has successfully conducted an affirmative-action program known as Imi Ho’ola (Those Who Seek to Heal). This Program’s efforts have contributed to the promotion of diversity within JABSOM’s student population by providing opportunities in medicine for Native Hawaiians, Filipinos, Samoans, residents of the US-Affiliated Pacific Islands (Marshallese, Pohnpeians, Kosraean, Yapese, Chamorros, Palaunans) and South-East Asian immigrants. In 25 years, 337 have been accepted into the Program. Seventy-four percent or 123 students have graduated from JABSOM. Others have become nurses, public health workers, medical technologists and other health specialties.

A primary feature of the Program is to train physicians who will serve the socially, economically, and educationally disadvantaged populations. There is a desperate need for physicians who identify themselves with these populations to deliver culturally competent and effective health care. This is not only evident in the Pacific but in our entire nation. At the 1996 Annual Meeting of the Association of American Medical Colleges (AAMC), Dr Jordan J. Cohen, President of the AAMC, stated, “Learning how to deliver culturally competent health care means learning medicine ... from faculty who are themselves emblematic of society’s diversity. Textbooks alone just won’t cut it” (1996, p 4). A sequel to this goal is the development of programmatic leaders who will not only contribute to the total welfare of those people who find themselves in those communities, but become leaders in medicine.

Students have also been trained as faculty at JABSOM. They teach in the classrooms and also in the community hospitals and clinics. Imi Ho’ola graduates comprise 2 percent of the compensated faculty at JABSOM. Two graduates from Imi Ho’ola are Chairpersons for the Department of Psychiatry and the Department of Family Practice and Community Medicine. In addition, Imi Ho’ola alumni participate in recruitment activities at the high schools and university levels for students who will augment their numbers as well as replace them in the vital role of serving those less represented ethnic groups in Hawaii.

Dr. Philip Reyes, the Co-Medical Director for the Molokai General Hospital. Born and raised on the island of Molokai, Dr Reyes provides needed primary care services to the people of Molokai. In addition, he works in partnership with the schools in promoting health careers among the youth.
Finally, the Program is mindful that it must not lose sight of the need to recognize their most important resource and responsibility, the community which the graduates serve. Currently, sixty-two percent of the Imi Ho'ola graduates are practicing in rural areas of Oahu and the Neighbor Islands. To ensure the relationship with the community, a community advisory committee has functioned since the inception of the Program in 1973 to guide the Program. Committee members include lawyers, psychologists, bankers, teachers and graduates of the program.

Imi Ho'ola is fulfilling the mission of the John A. Burns School of Medicine by teaching and training high quality physicians for Hawaii and the Pacific, thereby promoting diversity in the medical profession.

Reference

Public Service Announcements

American Cancer Society Seeking Volunteers.— Volunteers with medical knowledge needed to staff and man the library and a call-in telephone information line. These people will be responsible for giving cancer information to walk-ins and callers. For further information call Susan Jacobs at the American Cancer Society, 595-7500 ext. 202.

Volunteers needed for Angel on Wheels, drivers to take cancer patients to and from their doctor/cancer therapy appointments. To volunteer, contact the American Cancer Society office in your area.

Volunteers needed at all American Cancer Society offices to assist in clerical duties. Call to volunteer: Windward 262-5124, Leeward 486-8404, and Honolulu 595-7544.

Seeking Helpline Volunteers.—The Honolulu Chapter of the Alzheimer’s Assn. is seeking caring individuals to provide information and referrals and emotional support to callers needing assistance in coping with Alzheimer’s disease. Volunteers will answer the telephone Helpline a minimum of 3-4 hours a week at our friendly Honolulu chapter office, Monday-Friday, between the hours of 9 and 4 p.m. Orientation and training will be provided. For further information or to receive a volunteer application, please contact the Honolulu Chapter at 591-2771.

Hospice Hawaii Volunteer Training.— 20-hr course at Hospice Hawaii office. Wednesday, Sept. 9, 8-9 p.m.; Saturday, Sept. 12, 8-5 p.m.; Saturday, Sept. 19, 8-5 p.m. Call 924-9255, ext. 219 for more information.

Music Therapy Lectures Aug. 22.—Open to the public, held at Hospice Hawaii office, call Barb Shitland, 924-9255 ext. 209. Featuring: Dr. Deforia Lane and Daniel Koblak. The Music Therapy Program involves both listening and participation and provides benefits in many areas including: physical, psychological, social and spiritual. Founded in 1979, Hospice Hawaii is a non-profit organization that offers medical, social, emotional, and spiritual support for patients and families facing a terminal illness.

President’s Message

Managed Care Concerns
Leonard Howard MD
President, Hawaii Medical Association

There are many advantages for the physician to participate in the various managed care entities in our state. However, there are also some problems at the root of all managed care participation. The problems present themselves in subtle ways, that are sometimes not recognized as problems by physicians. These problems are the result of various Sections and Provisions of the Participating Provider Agreement that is signed in order to participate in a managed care organization (MCO).

Time and time again in reviewing MCO contracts the same land mines are found present in the contracts. It is necessary that all physicians carefully read the contracts received from an MCO, and understand what commitment is being made by your signature on the contract. There are several common clauses that might be found in a proposed agreement which are likely to cause trouble in various ways. When these clauses are identified in managed care agreements, consider asking whether the subject matter contained in these clauses is really necessary to address in the managed care relationship. If not, they need not be in the agreement and should be removed before the agreement is signed. Seven areas of concern that are often found in many contracts which can be problematic include:

1. General Offsets and Adjustments. Provider agrees to authorize Company to deduct monies that may otherwise be due and payable to Provider from any outstanding monies that Provider may, for any reason, owe to Company. Provider agrees that Company may make retroactive adjustments to the payment schedule outlined in the agreement. This provision gives the MCO a free hand to do whatever accounting it desires and deduct monies from a physician or physician group in its sole discretion without a requirement to account to the physician or physician group and explain such deductions.

2. Litigation. In the event of any litigation between the parties arising out of or related to this Agreement, the prevailing party shall be entitled to recover from the other party its reasonable attorney’s fees and cost of litigation, including, without limitation, any expert witness fees. This clause seems designed to appeal to the unsophisticated physician who abhors litigation and has not stopped to consider that he or she is already greatly disadvantaged in any potential controversy with the company, since the MCO has far more to spend in legal fees. This clause would simply up the ante by potentially doubling (at least) a physician’s cost and further chill any prospect for the physician to obtain relief in a court of law.

3. Noninterference with Members. During the term of this Agreement, Provider and its Qualified Physician shall not advise or counsel an Enrollee to dis-enroll from Company’s Plan and will not directly or indirectly solicit any Enrollee to enroll in any other MCO or similar Health care service plan or insurance program. No matter how it is dressed up, provisions