

Why the Emeritus Group?

An opportunity for retired senior health center executives to informally share knowledge and experience with today's health center and PCA managers.

In what areas can the Emeritus Group provide assistance?

Emeritus Group members work with today's health center and PCA managers – *primarily through confidential phone dialogues* – in areas that challenge them, e.g., board relations, financial crises, human resource management issues, succession and retirement planning.

Peer-to-peer relationships designed to discuss specific issues and challenges.

Who We Are

About Us

A cadre of senior health center executives who are available to work with current health center and PCA executives.

Contact Us

Contact individuals directly (see reverse).
For general information about the Emeritus Group, contact:

Dick Bohrer – 301-347-0400 x 2006 or
dbohrer@nachc.com

Darline DeMott – 301-347-0400 x 2014 or
ddemott@nachc.com

A NACHC member service that comes without a charge to today's executives.



FREE AND CONFIDENTIAL

retirement and succession
planning * board and staff
relationships * executive
compensation * growth
planning * strategic
partnerships

SHARING KNOWLEDGE

DECADES OF EXPERIENCE

GIVING BACK TO THE MOVEMENT

**EMERITUS
GROUP**

*Retired Senior Health
Center & PCA Executives*

JACK CRADOCK 617-719-8900
CEO Emeritus, East Boston Neighborhood
Health Center (MA) jack@cradock.com

My health center career started in my own neighborhood in Boston in 1970 when I was hired to start a new CHC. After that, I spent 2 years in Boston's Chinatown assisting their move to a new expanded site. In 1978, I started at the East Boston Neighborhood Health Center where I served as President/ CEO until the end of 2014. Today, the center provides over 300,000 visits to 75,000 users.

My areas of expertise include working closely with Community Boards in starting and expanding services to those most in need, planning and building state of the art facilities, starting CHC-based PACE (Program of All Inclusive Care for the Elderly) programs, starting an Education and Training Institute, operating a licensed Emergency Room, and implementing electronic health/medical record systems.



My current interests are to help other CHC Execs and Boards and provide advice where I can. I have lived through the best and worst of times, worked through difficult financial times and built a motivated and dedicated staff and would be pleased to share my experience with others in a confidential manner.

GRETA STEWART 405-760-8512
Former Executive Director, Oklahoma Primary
Care Association gretashep@aol.com

I served for over 21 years at the helm of the Oklahoma Primary Care Association. Prior to my work with the PCA, I worked at a community health center. During my tenure at the PCA, I was active in both the Oklahoma and American Societies of Association Executives.



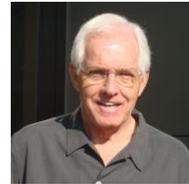
My areas of expertise include: (1) legislative strategies, (2) policy analysis, (3) board development, (4) executive leadership development, and (5) community development.

My current interests are in board training, network development, health center program compliance, and implementing effective advocacy strategies. I am very familiar with working with a broad range of safety-net provider organizations, including working on effective primary care/behavioral health integration strategies.

HARRY FOSTER 559-730-6433
Former President & CEO of Family Healthcare
Network, Visalia, CA hfooster730@gmail.com

I served for thirty one years as CEO of a large migrant and community health center, retiring in 2013. Prior to serving as a CHC CEO, I held various executive positions for fifteen years in hospital administration, as well as planning and resource development organizations.

Over the years, I gained a great deal of experience with board management, strategic and operational planning, as well as the myriad of responsibilities associated with operating a CHC. I also was involved in the creation of, and policy making for numerous organizations, including an insurance company, a regional consortium of CHC's and the largest state primary care association in the nation. I also have experience in development and oversight of a very successful AT Still University Medical School site



At the current time, my professional interests lie in work associated with Health Center Boards, succession planning and retirement planning. I also have interests in the further development of integrated health care in a health home environment.

PETE LEIBIG 303-931-4118
Former CEO, Clinica Campesina Family Health Services
Lafayette, CO pete.leibig@gmail.com

I retired in 2013 after serving as CEO of Clinica Campesina for 26 years. Prior to that, I worked as a health planner for regional organizations and at the Colorado Department of Public Health and Environment. During my tenure, Clinica grew from one site with seven total staff serving fewer than 2,000 people per year and an annual budget of \$300,000, to a five site FQHC with nearly 400 staff providing care to 42,000 people and a budget of over \$35 million.



My work experiences include forming a health insurance / managed care company, partnering with local Mental Health Centers to create an integrated medical / behavioral health care system, chairing a state Primary Care Association, and engaging in state and national level policy making.

My current interests are in Team Based Primary Care and Population Based payment reform. Over my career I have faced many challenges including significant financial crises and nearly every embarrassing situation a CHC CEO could imagine. I made my share of mistakes. I learned from each challenge and am glad to share those lessons with other providers of care to underserved populations.

KATHERINE GRANT-DAVIS 267-994-8072
Former President & CEO of New Jersey Primary Care
Association kathydeedavis@gmail.com

I served for 22 years as the President and CEO of the New Jersey Primary Care Association (NJPCA). In addition to my work with the NJPCA, I was Chief of Staff for the NJ Department of Health, State WIC Director, and Medicaid/Medicare Legislative lead for the Pharma industry.

My areas of expertise include: (1) legislative strategies, (2) policy analysis, (3) Accountable Care Organizations (ACOs); (4) board training, (5) Medicaid Managed Care contracting and (6) hospital/FQHC affiliations.



My current interests are in board training, ACO development, health center program compliance, and managed care. I am very familiar with hospital and FQHC affiliations – particularly the community benefit model; I am very interested in looking at current/pending policy to determine impact on FQHCs; and I can be helpful with statewide strategic planning.

WILLIAM (BILL) HOBSON 310-743-9353
Former President & CEO, Watts Healthcare Corp.
Former Deputy Associate Administrator, HRSA
Los Angeles, CA williamdhobson@gmail.com

Starting as a community organizer for the first health centers in the Cincinnati area in the 1960s, my health center career has included stints with the federal government, serving as a top administrator of both a health center network and of a Section 330 grantee, and providing technical assistance to health centers. In addition, I have been on a state Medicaid Advisory Committee and served as the vice president of a health center owned managed care organization.



My work with managed care began in 1971 and resulted in experience negotiating managed care contracts and improving the performance of health centers in a managed care network. As a founding member of primary care associations, I helped organize diverse health centers into functioning coalitions. I have formed mutually-

beneficial affiliations with hospitals and other private healthcare organizations. Collectively, these experiences have produced a solid understanding of federal grants management policies.

My current interests include the implementation of and improvement of managed care operations. I feel comfortable providing advice on resolving issues health centers face, including the development of both compliance plans and corrective action plans. In addition, I can provide advice on the strategic positioning of a health center in the current health care marketplace.