

Celebrating Sister Carol Keehan – A Career in Health Care Based in Faith – Hospitals In Focus Transcript

Chip Kahn: [00:11] Hello and welcome to Hospitals in Focus, where today I am very excited to be sitting across the table from one of the most influential people in healthcare policy, Sister Carol Keehan, President and CEO of the Catholic Health Association. I think our listeners are in for an interesting discussion today with Sister. She knows the hospital sector inside out. Unfortunately for all of us, she has recently announced that after a distinguished career of more than 50 years, she will be retiring this summer, so I thought this would be a real opportune time to bring her on to Hospitals in Focus and give us insights both into her long career and contribution to the field, as well as a feeling for all the policies she's worked on over time and the impact of those policies.

Let's start off, Sister, if we could, with you giving a sense of what you did before you went to the Catholic Health Association back in 2005. It's a lengthy time, but what were the highlights? What was important to you? What were the contributions you think you made?

Sister Carol K.: [01:22] Thank you so much, Chip for inviting me today. Well, I would say I started out as a nurse aide. Then the staff nurse. Then I was asked to open a children's hospital in Pensacola. We did that on April 1st, 50 years ago this April 1st. I'll return to Pensacola on April 1st this year for the dedication of the brand new children's hospital in Pensacola, which I had the honor of opening. That was a big thrill.

I also did a couple stints in several places as Vice President For Nursing and then CEO in two hospitals run by the Daughters of Charity. Then CHA, and it's been a joy for the last almost 14 years to be at CHA.

Chip Kahn: [02:15] That's great. Before we get into your career at CHA, tell us a little about CHA and how it's changed just as an organization since 2005 with your leadership.

Sister Carol K.: [02:28] Well, CHA is a membership organization that's a little over a hundred years old now. We started in 1915, so we're just a little older than a hundred. We are there to help our members succeed, because we believe the contribution Catholic health care has made to this nation, over many more than a hundred years, is incredible and is still something that is a treasure to this country. And so whether it is in education, or advocacy, or helping to develop policies, doing things that bring our organizations together to share their strengths, working with the bishops in the United States, working with the Vatican and the various officials over there who have anything to do with healthcare, CHA is there to represent the members in all of those areas. We talk about in our role is to facilitate what our members do, so we don't see ourselves as having something of a separate role, we're there to help make our members successful, because that's what really counts.

Celebrating Sister Carol Keehan – A Career in Health Care Based in Faith – Hospitals In Focus Transcript

- Chip Kahn: [03:46] Just to give a sense, what's the breadth of the number of Catholic hospitals today, and systems, and just sort of any in terms of describing the membership, how do you talk that?
- Sister Carol K.: [03:59] Well Chip, I have the same challenge you have. Every day there's a different number of hospitals. Right now, we're about 635 hospitals. We have about 1600 other things like clinics, nursing homes, PACE programs, surgery centers, et cetera. So it's fairly significant in size and we're in almost every state. We don't have a hospital in almost every state, and in some states we may have, say Mississippi, we'll have one hospital. In other states, we'll be 30% of the hospital beds available. So it's a very complex and varied group of hospitals, but united by a lot of things. As you know, we've, again, share this same phenomenon. We're largely made up of systems. Over 80% of our membership are now in systems. And as you know, two of those, well it's actually four, four of those systems merged to become two systems instead of for just this year.
- Chip Kahn: [05:15] Good. One of the things that's been a pleasure for me, working in the areas that we do, has been the tremendous cooperation between all of the hospital groups, but particularly my relationship that we've developed over the last many, many years, and working together, and working on so many important issues. What I'd like you to do for a moment is let's go back to 2005 and just sort of play the camera back and look over that time. What were the key issues that you thought were the most important? What do you look at as accomplishments? Maybe we can, as we proceed, and I may ask some other questions, get to some anecdotes that will come out of those accomplishments, because I have a feeling there are a few.
- Sister Carol K.: [06:03] Well, you know Chip, I think anytime we would look back in that timeframe, the biggest thing would have been the ACA. I have often said to people and to my many physician friends, that in the development of the ACA, physician voices were not as strong and as determinate as they should have been given their role in health care. But hospital voices, we were able to maintain our voice as one voice. That was because we agreed at the beginning that we would fight like tigers behind closed doors, but we would sing from the same song sheet when we were in public. And with one modest exception by one member, we did that to a T, and it really, really helped because we never got pitted against each other.
- We knew that certain things were more important to certain sectors of the healthcare community, but we respected each other's priorities and values, and on the things that were priorities for all of us, we focused very tightly and we tried to come to a position that was livable for all of us before we went into the public arena or before we went into a committee hearing. I think that you didn't get lots of different voices saying different things in different ways, and they

Celebrating Sister Carol Keehan – A Career in Health Care Based in Faith – Hospitals In Focus Transcript

were not able to pit us against each other, and many a good legislative program has been lost on pitting people against each other. We were able to prevent that, which I think, given the fact that we have such varied priorities, was a real credit, not only to the leadership of the associations, but what was behind that leadership. Our board's wanted us to focus on getting the job done, not triumphing over one other association. They wanted to get the ACA as right as we could get it.

Chip Kahn: [08:26] I appreciate that and I think one of the things about ACA is that we all entered it with, in a sense, one mission: we want to get as many Americans covered as possible because that was good for their health, that was good for those trying to provide care for them, and that was, in a sense trying to move for so many Americans, the finances aside so we could focus on the care. And that was what we achieved. Since then, it's been a little rocky road, but that was the what we were about. From that period, are there any anecdotes that sort of stick out for you? Obviously on some of the issues that the church was involved, with you are clearly a leader in helping move the legislation to a point where it could be acceptable.

Sister Carol K.: [09:15] Well, I know that you'll find this surprising, Chip, but sometimes people use misinformation to stir up opposition to a good cause, or the cause whether you think it's good or not, and in the case of those who oppose the ACA, one area they thought they could really use to undermine the Affordable Care Act and to prevent its passage was to say, "The Affordable Care act will be the largest expansion of abortion coverage by federal funds in the history of our country." Even though President Obama had spoken to a joint session of Congress, nationally televised, saying, "There will be no federal funding of abortion in the Affordable Care Act." Even though the Affordable Care Act explicitly said the same thing in the act itself, and even though the president had issued an executive order saying the same thing. And we had a congressional colloquium that Henry Waxman lead saying, "This is what Congress meant by the way it wrote this law."

So years later, if there was a challenge of what Congress meant, they had a colloquium that explicitly said it. There were people who misled the bishops of the United States who were a force and a lot of politicians who are part of large Catholic populations, as well as evangelical populations, looked very closely to what the bishops said, and they were misled by their staff. There is no other way to put it. They were misled by their staff and at the same time, we were going to lose. I can remember being with the people from the White House and talking about getting and visiting with members of Congress, which I did.

And then after visiting with a number of them and we talked it through, I happened to have a scheduled trip for a university board I was on that was

Celebrating Sister Carol Keehan – A Career in Health Care Based in Faith – Hospitals In Focus Transcript

going to go first to Paris and then to Rome to see their sites, where their university was. I'm in Paris at the Mother House taking calls from the White House. I'm calling back to this congressman, this congresswoman. At one point the president called my cell phone, and I'm pretty klutzy with my cell phone, I let the president go to voicemail. But anyway, at least he was kind enough to do that.

But it was really very, very difficult, because I've been a member of the Catholic church since I was born and I'm religious, and a lot of people really took great offense at that. I'm happy to say that in this last effort to destroy the Affordable Care Act, the bishops wrote several letters to Congress saying, "Please don't destroy it. It has been wonderful. It's done wonderful things. It can be improved and we've always said that, but don't destroy it because it's helped so many people." Actually at the high point, 20 million people that didn't have health insurance, got it.

Chip Kahn: [12:43] Well hopefully, we can get that number back up.

Sister Carol K.: [12:46] I would be right on that team.

Chip Kahn: [12:49] Let's go back, because you touched on it when you were defining the association. Let's go back to the consolidation issue for a moment because it's much discussed and the economists and some policymakers are always quick to point a finger at this trend, but my concern is, and I'd like to get your views on it, is that the world has changed, hospital operations have changed, hospital finances overall have changed, and the maintenance of access is really a question. Can you give us a sense for how you've seen, from your experiences as running hospitals as well as obviously running an association that represents hospitals, how the world has really changed in terms of what the hospital is and does, I mean, so that this consolidation actually is sort of the logical conclusion of that possibly?

Sister Carol K.: [13:44] Well you know, one of the things that, I think in terms of slippage, is we've done a really good job as providers and as educators at taking hospitals, from my time as a student nurse, where if you had a heart attack and you came to the emergency room, well, we'd give you pain medication, we'd give you oxygen, we'd do an EKG, maybe an echo, we would give you wonderful bedrest, but that was it, and the outcome statistics weren't good. Now, we have 30 minutes and you have to be cathed, and have clocked busters, or be ready to have a stent put in, and we've vastly improved not only the care, but the outcomes in many, many diseases, whether it's heart disease, or cancer, or even the simple thing that many people who are older would remember. If you had gallbladder surgery in the 70s, it was not any pleasant trip.

Celebrating Sister Carol Keehan – A Career in Health Care Based in Faith – Hospitals In Focus Transcript

You had a horrible incision, that every way you moved, hurt. And you were in the hospital for eight to 10 days. We made a fortune on it, but the truth of the matter is it was grossly uncomfortable. Now, we can have you out in a day, and you have this tiny little incision, and you're ready to go back to work before long. That's vast improvement in clinical care, but we haven't put the same efforts at looking at the delivery system and the financing system in this country. And so, we need to talk about how do we transform the delivery system and how should we transform that delivery system? What should hospitals be and what should healthcare facilities be? There's a huge difference between being a healthcare provider and simply a hospital, and I don't think most people can be just a hospital, so we need to look at being a healthcare provider.

And we also need to remember that we, as the people who've grown up with that and who will still be there for the trauma victim, the burn victim, some of the serious psychiatric things, the massive surgeries, the neuro surgeries, all of those kinds of things, we'll still be the place because you can't do that outpatient. You can't do that in a shopping center. But we also need to know that everybody that needs a CT scan for a back problem doesn't want to spend four hours sitting in our hospital and climbing through all that. We need to look at the best way. We need to look at telemedicine. We need to look at simpler ways of billing, more understandable ways of billing, not wasting so much time on our billing.

But we haven't really spent the time doing that, because most of the time we've been fighting battles up. You know, we finally got the ACA passed, we thought we would go forward and start to make the improvements. And guess what? We're now battling to save it. This country has got to grow up and we've got to join the other families of industrialized nations who at least cover everybody and have a system you can understand. You can disagree with it, but you can understand it.

Chip Kahn:

[17:32] That's so true and it is a bit demoralizing that over many years, we climbed that mountain in 2010 and had such expectations, and as you said we got to 20 million, but now we're watching it declined some and we need to figure out a way to get beyond this, and hopefully in the future we will. Let me, before we leave, go over a few other items, because you have not just spent many, many years working in hospitals and healthcare, you're also very engaged in a few other areas that I think our listeners might be interested in.

One, at our frequent lunches you've talked about your experiences in teaching in Japan and maybe you can fill us in a little bit. I don't know whether in your retirement you're going to continue that or not, but what's up with your frequent trips over 30 years to Japan?

Celebrating Sister Carol Keehan – A Career in Health Care Based in Faith – Hospitals In Focus Transcript

Sister Carol K.: [18:28] Well, it was an opportunity that started when I was the vice president for nursing at Providence Hospital in Washington, and one of my head nurses was a native born Japanese, and had been educated in Japan and come to the United States. She asked me just to visit with her sister, who was also a nurse in Japan, and a delegation of nurses in 1980 when they were visiting Washington.

I said, "Oh, sure." We had a cup of coffee, or tea I guess the Japanese had, and we had a lovely conversation. They said, "You must come to Japan." And so within a year, I was spending three weeks in Japan, and then I started bringing nurses from Japan to Washington. After a couple of years I got tired of going to Japan and they got tired of coming to Washington, so we started meeting in places like Ireland. And the Japanese, you know how polite, and reserved, and structured they can be, until they have a little Irish whiskey and then they want to step dance, so it's been a wonderful experience. I love the Japanese people. I probably won't continue to do too much with the Japanese. I will probably continue to do some work with the Daughters of Charity, and the Middle East, and in some other countries.

Chip Kahn: [19:51] One of the other issues that frequently comes up when I'm trying to set a lunch with you is, "Well, she could do it sometime in about two and a half weeks, but it all depends on whether that next Rome trip is going to be set up or not." So you're frequently in Rome. What's with these road trips? What happens over there? What's your role?

Sister Carol K.: [20:12] Well, there's certainly good food over there, as you well know, but actually Catholic hospitals in the United States, it's important for them to understand and I think they do well, that they are a mission of the church. They're responsible not only to the local bishop, but to the church in Rome for a major ministry of the church. The church sees healing is integral to its ministry, and so for that, it's important that they know you and you know them. There are a number of what Rome calls dicasteries, we'd call departments, at the Vatican that have to do with healthcare.

There was one specifically for the pastoral care of healthcare workers and it's been merged into one that also includes the family. There are ones that talk about migrants. There are ones that talk about justice and peace and look at health care from that perspective. And there ones that talk about the dignity of life. And so, we go over there, and the big one we deal with it because of the way hospitals in this country were set up and most, almost all of them, by religious women. So the dicastery or what they call it, the congregation for religious, they have a lot to say about the hospitals. The smart thing to do with a politician on Capitol Hill is to get to know him before you have a challenge, so it is really important to tell our story in peace when there are no big issues in

Celebrating Sister Carol Keehan – A Career in Health Care Based in Faith – Hospitals In Focus Transcript

various areas of the Vatican, and also to get their support and assistance, but at the same time, be sure that they understand what's going on.

And the health care system in the United States is like nothing in Europe. When you say we have so many million people who don't have health insurance and therefore don't have access, they don't understand that concept, and so making it clear that we really do need to make these facilities stronger and stronger, and we also do need to be active in advocacy because it's an injustice that so many of the citizens of this country don't have health care. And so helping them to understand the American healthcare system and also to look at the big numbers in debt service, and bond issues, and things like that, it's important that they understand us.

Chip Kahn: [23:02] I think I'm hearing themes now for my next question, which is you're retiring. You're probably not retiring from healthcare, but at least from the CHA. What would you like your legacy to be when people look back at it and what aspirations do you have for health care and hospital care, particularly in the future?

Sister Carol K.: [23:27] Well, I think that what would define success for me at CHA, and I do believe it is true that CHA best days are ahead of it, there's a strong team at CHA throughout the whole organization and I think the board is working hard to recruit a new competent leader, and there's a sense of cohesiveness among the members and the association, a lot of great work together. I think CHAs best days are ahead of it in helping in a tumultuous time, first of all, to hold as much ground as we can on the ACA, and then when there is an opportunity to revisit, and improve it, and extend its benefits to, you know. We still have states who haven't even expanded Medicaid, even though in several of them you've had voter referendums that overwhelmingly said do it.

And so it's going to be important that, together with our other colleagues in healthcare, that we look at transforming the delivery system, transforming the financing system. We know we're going through a political year where there are going to be a lot of people who have the silver bullet for healthcare, and if there was a silver bullet, I think we would have found it by now. It's a lot of day to day work and blocking and tackling, but it could be done much better than it's being done now. We've got to stop this nonsense of dismantling the ACA. We've got to stop this egregious behavior of all of a sudden saying, "If you're on Medicaid, you've got to be working." And scaring, look how many people were scared in Arkansas off of Medicaid, 18,000 in one blow. That is disgraceful. To take health insurance away from people and to take it away from their children is just really disgraceful. There is no valid excuse in the world why a child does not have good health insurance.

Celebrating Sister Carol Keehan – A Career in Health Care Based in Faith – Hospitals In Focus Transcript

And so, we've got to get that turned around and we've got to help this nation that provides police protection, fire protection, education to everybody, why it doesn't provide the basic health care service. I mean, I think that having played a small role in getting that started, I think the best success would be that CHA plays a major role in carrying that forward. I think they're poised to do that.

Chip Kahn: [26:27] Great. Sister, thank you so much for the conversation this afternoon. It was wonderful. It was both informative and inspiring, and all I can say is that I hope you won't be a stranger that I'm going to miss you from the hurly burly of our policy battles in Washington, but look forward to opportunities at least to get together for lunch, and to both reminisce, and talk about the wonderful things I'm sure you'll be doing into the future.

Sister Carol K.: [26:57] Thank you, Chip. I promise you can always buy me lunch.

Chip Kahn: [27:00] Thanks so much for listening and be sure to subscribe to Hospitals in Focus on Apple podcasts or Google play, or visit our website, FAH.org. It is so important that we get your feedback on our show. Please rate us and give us a review, and if you like what you hear, tell a friend. Until next time, This is Chip Kahn with Hospitals in Focus.