



BOARD OF SUPERVISORS

COUNTY OF SANTA CRUZ

GOVERNMENTAL CENTER

701 OCEAN STREET SANTA CRUZ, CALIFORNIA 95060-4069  
(408) 454-2200 ATSS 564-2200 FAX (408) 454-3262 TDD (408) 454-2123

JANET K. BEAUTZ  
FIRST DISTRICT

WALTER J. SYMONS  
SECOND DISTRICT

MARDI WORMHOUDT  
THIRD DISTRICT

RAY BELGARD  
FOURTH DISTRICT

JEFF ALMQUIST  
FIFTH DISTRICT

AGENDA: 11/10/98

October 21, 1998

BOARD OF SUPERVISORS  
County of Santa Cruz  
701 Ocean Street  
Santa Cruz, CA 95060

RE: AT-LARGE APPOINTMENT TO SANTA CRUZ-MONTEREY  
COUNTY MANAGED MEDICAL CARE COMMISSION  
(HOSPITAL REPRESENTATIVE)

Dear Members of the Board:

I recommend the at-large appointment of the following person to the Santa Cruz-Monterey County Managed Medical Care Commission, as a hospital representative, in accordance with County Code Chapter 7.59, Section 30, for a term of office to be determined by lot:

John Petersdorf  
117 Camino Pacifico  
Aptos, CA 95003  
662-0918 (H)  
462-7504 (B)

Sincerely,

*Walt Symons*

WALTER J. SYMONS, Supervisor  
Second District

WJS:ted

cc: John Petersdorf  
Santa Cruz-Monterey County Managed Medical Care Commission

1250C2

APPLICATION FOR APPOINTMENT TO A COUNTY ADVISORY BODY

142

INSTRUCTIONS

If you are interested in serving on a County Advisory Body please complete the following application and return it to the Board of Supervisors, 701 Ocean St., Room 500, Santa Cruz, California. If you are interested in being considered for more than one advisory body a separate application should be submitted for each appointment you are seeking.

Upon receipt, your application for appointment will be routed to each Board member and then filed for further consideration by Board members when there is a vacancy on the advisory body. If a Supervisor is interested in nominating you for appointment, the Supervisor will contact you and discuss the appointment, the appointment process, and requirements for the advisory body in question.

Please specify below the Commission/Committee or Board to which you are seeking appointment and provide the requested information.

Thank you for your interest in County Government.

COMMISSION, COMMITTEE or BOARD Regional County Organized Health System

Name

John Petersdorf

Address

117 Camino Pacifico

Aptos Ca. 95003

Phone

(Home)

831 662 0918

(Business)

831 462 7504

Supervisory District

Supv. Symons

Length of Residence in Area

9 yrs

Age

(Optional)

Circle one:

Under 21

21-30

31-40

Over 40

PREVIOUS COMMISSION OR COMMITTEE SERVED (Please specify)

Advisory Sody

Term

SCCHO and predecessor planning committees

1994 -

EDUCATION

<u>Institution</u>	<u>Major</u>	<u>Degree</u>	<u>Year</u>
Yale College	Economics / Political Science	BA	83
Wharton School - Univ of Pa.	Finance / Mgmt	MBA	85

WORK/VOLUNTEER EXPERIENCE

<u>Organization</u>	<u>Address</u>	<u>Position</u>	<u>Year</u>
Coopers + Lybrand	Los Angeles	Manager	1985 - 1989
Dominican Hospital	Santa Cruz	Chief Financial Officer	1989 -

STATEMENT OF QUALIFICATIONS

Please attach a brief statement indicating why you are interested in serving on the advisory body in question and why you are qualified for the appointment.

CERTIFICATION

I certify that the above information is true and correct and I authorize the verification of the information in the application in the event I am a finalist for the appointment.


  
Signature

 10/7/98  
Date



Dominican Hospital

**Dominican Hospital**  
15.55 Soquel Drive  
Santa Cruz, CA 95065  
408 462 7700 Telephone

October 7, 1998

**Dominican  
Rehabilitation Services**  
610 Frederick Street  
Santa Cruz, CA 95062

Clerk of ~~the~~ Board of Supervisors  
County Of **Santa Cruz**  
701 Ocean Street  
Santa Cruz, Ca. 95060

Dear Ladies and Gentlemen:

I would like to submit my application as the Santa **Cruz County** hospital representative to the Regional County Organized Health System governing body. ~~There~~ are **several** reasons ~~that~~ I am interested in continuing my role with the County Organized Health System.

Along with a few other provider representatives, I was present during the planning phase for Santa **Cruz County** Health Options. It is important that some of this institutional knowledge be continued.

Additionally, while the County Organized Health System has **several** objectives, including member access and provider satisfaction, the health system must live within the budget. It is **important that** the Commission have members with financial expertise, I have served as the financial resource to the Commission over the past four years.

As SCCHO explores the expansion into Monterey County, these financial issues will be paramount. Ultimately, the success of the Monterey **County** expansion will be dependent in ~~the~~ often contentious rate negotiations with the State of California. I was involved in the rate negotiations three years ago, and I would be happy to play a role.

Moreover, while there is the promise that the increased membership ~~from~~ Monterey County will provide the critical mass required for the health plan, in my role as a Commission member, I will strive to ensure that the expansion will not put our current successful program at risk. Providers and beneficiaries in Santa **Cruz** must be protected.

I would be happy to discuss these issues further with the Board of Supervisors if they are interested.

Sincerely,

John Petersdorf  
Senior Vice President/ Chief Financial Officer

cc. Alan MacKay