BOARD OF SUPERVISORS



COUNTYOFSANTACRUZ

GOVERNMENTAL CENTER

701 OCEAN STREET SANTA CRUZ, CALIFORNIA 95060-4069 (406) 4542200 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

11/10/98 AGENDA:

October 21, 1998

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

> AT-LARGE APPOINTMENT TO SANTA CRUZ-MONTEREY COUNTY MANAGED MEDICAL CARE COMMISSION (REPRESENTATIVE OF

A NON-GOVERNMENTAL COMMUNITY CLINIC)

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, in the category of representative of non-governmental community clinic, in accordance with County Code Chapter 7.59, Section 30, for a term of office to be determined by lot:

> Kathleen H. Morkert 102 Library Lane Santa Cruz, CA 95062 471-9303 (H) 425-1551, ext. 30 (B)

> > Sincerely,

MARDI WORMHOUDT, Supervisor

Third District

MW:ted

Kathleen Morkert cc:

Santa Cruz-Monterey County Managed Medical Care Commission

1169A3

APPLICATION FOR APPOINTMENT TO A COUNTY ADVISORY BODY

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.

COMMISSIO	N, COMMITTEE or BOARD		
<u>Name</u>		SANTA CRUZ-MONTEREY MANAGED MO CARE CON KATHLEEN H. MORKERT	
<u>Address</u>		102 LIBRARY LANE	
		SANTA CRUZ, CA 95062	
Phone	(Home)	471-9303	
	(Business)	425-1551 ×30	
Supervi so	rial District	Third	
Length of	Residence in Area	8 years	
Age	(Optional)	Circle one: Under 21	
		21-30	
		31-40	
		Over 40	
	901-59370V OD 901-5777		

PREVIOUS COMMISSION OR COMMITTEE SERVED (Please specify)

<u>Advisory Body</u>	<u>Term</u>
SCCHO-MANAGED MEDICAL CARE COMMISSION	1995 - current
SCCHO Mamber Services Advisory Committee	1 year
MCAH Advisory Board-San Francisco Cty	5 years

EDUCATION

<u>Institution</u>	<u>Maj or</u>	<u>Degree</u>	<u>Year</u>	
Golden Gate University	Health Services	MBA	1992	
Mundelein College	Psychology	BA	1975	
WORK/VOLUNTEER EXPERIEN	NCE			
<u>Organization</u>	Address	Position	<u>Year</u>	
Planned Parenthood Mar Mor	TLGI The Diamodi	Director of	Monaged Care	Current
	, .	_	iont Services	1995-1998
11 Santa Cru	12Cty, santa Cruz			1992-1995
" Alamedal	Sanfrancisco SF	ENOYST ASSO	c. Director	1982-1991
				991-CULYER
<u></u>	1,360 Kings Village Scotts Valky, CA	Mini	istry lemmitte	le
STATEMENT OF QUALIFICATIONS			J	
Please attach a brief statement				on
the advisory body in question a	and why you are quali	fied for the	appoi ntment.	
CERTIFICATION				
I certify that the above inform	mation is true and co	orrect and I a	nuthorize the	
verification of the information for the appointment.	n in the application	in the event	I am a finalis	st
Vallelan Mart of		ialdo	/	
KathlenMirhest		<u> 10 8 98</u>		
Signature		Da	te	

Kathleen H. Morkert 102 Library Lane Santa Cruz, CA 95062 (831) 471-9303 – Home (831) 425-1551 x30 - Work

Application for Appointment to the Santa Cruz – Monterey Managed Medical Care Commission

Statement of Oualifications

I am applying for the Commission seat to serve as the representative of a non-governmental community clinic. I currently sit on the SCCHO Commission in that same capacity. My application comes with the support of the Santa Cruz County Community Clinics Coalition.

I feel privileged that I have been able to serve on the SCCHO Commission during its start up phase and most recently during the planning for expansion into Monterey County. The advent of SCCHO has made a tremendous difference in the ability of Santa Cruz County Medi-Cal recipients to access health care. I'm proud to be part of a community that can boast of this accomplishment.

I have also had the opportunity to serve on the Monterey County Medi-Cal Managed Care Task Force and work with Monterey County providers to ensure representation of the voices of Monterey County providers. My current position as Director of Managed Care for Planned Parenthood Mar Monte gives me responsibility for Planned Parenthood work in Monterey as well as Santa Cruz County. I believe this unique perspective can add to my value on the Regional Commission.

I have worked with Medi-Cal patients in Planned Parenthood clinics for 16 years. I want to be part of creating a health care system that respects all people and is dedicated to developing systems that make it easy for them to access the health care they need. I believe SCCHO holds these same values and I look forward to continuing to do this important work.

BOARD OF SUPERVISORS



COUNTYOFSANTACRUZ

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 Pacific0 Aptos, CA 95003 662-0918 (H) 462-7504 (B)

> > Sincerely,

WALTER J. SYMONS, Supervisor

Walt Symons

Second District

WJS:ted

John Petersdorf cc:

Santa Cruz-Monterey County Managed Medical Care Commission

1250C2

APPLICATION FOR APPOINTMENT TO A COUNTY ADVISORY BODY

142 364

INSTRUCTIONS

If you are interested in serving on a County Advisory Sody 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 advfsory body. If a Supervisor is interested in naminating 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 C	county Government.
COMMISSIO	ON, COMMITTEE or BOARD	Regional County Organized Kentth System
<u>Nane</u>		John Petersdorf
Address		117 Camino Pacifico.
		Aptos CA 95003
P <u>hone</u>	(Home)	831 662 0918
	(Business)	83/ 462 7504
<u>Supervi so</u>	orlal District	Supv. Symons
Length of	f Residence in Area	9 yrs
Age	(Optional)	Circle one: Under 21
		21-30 .
		. 81-40
•	3	0ver. 40
PREVI OUS	COMMISSION OR COMMITTE	E SERVED (Please specify)
	Advisory Body	Term
SCCH	10 and producesson ,	planning committees 1994 -

1998 4:51PM #564 P.C

FDIC	ATION
LIDUU	TITL

365

Institution Mar Degree Yak College Economics Political Science BA	Year
1 0 1 0 1 0 10 11 15 0 AN	
YAK College Economics Political Science BA	<i>8</i> 3
Whaton School-UNIN offa. FINANCE / MENT MBA	୫ <u>୍</u>
WORK/VOLUNTEER EXPERIENCE	
Organization Address Position	<u>Year</u>
Coopers + Lybrand Los Anceles Munica	1985-1989
Dominican Hospital Sonta Cruz Chief Financial Office	CAL 1989_

STATEMENT OF QUALIFICATIONS

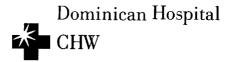
Please attach a brief statement indicating why you are interested in serving on the advisory body in question and why you are qualified for the appointment.

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

Date



October 7, 1998

Clerk of the Board of Supervisors County Of Santa Cruz 70 1 Ocean Street Santa Cruz, Ca. 95060 **Dominican Hospital** 1555 **Soquel** Drive Santa Cruz, CA 95065 408 462 7700 Telephone

Dominican Rehabilitation Services 610 Frederick Street Santa Cruz, CA 95062

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 pianning 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.

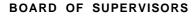
Moreover, while there is the promise that the increased membership from Monterey County will provide the critical mass required for the health plan, in my role as a Commission member, I will strive to ensure that the expansion will not put our current successful program at risk. Providers and beneficiaries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

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

John Pelersdorf

Senior Vice President/Chief Financial Officer

cc. Alan MacKay





COUNTYOFSANTACRUZ

GOVERNMENTAL CENTER

701 OCEAN STREET SANTA CRUZ, CALIFORNIA 95060-4069 FAX (408) 454.3262 ATSS 564-2200

(408) 454-2200

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

11/10/98 AGENDA:

November 2, 1998

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

> AT-LARGE APPOINTMENT TO SANTA CRUZ-MONTEREY COUNTY MANAGED MEDICAL CARE COMMISSION (REPRESENTING THE POPULATION OF BENEFICIARIES

TO BE SERVED BY THE COMMISSION)

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 representative of the population of beneficiaries to be served by the Commission, in accordance with County Code Chapter 7.59, Section 30, for a term of office to be determined by lot:

> Alvin Karp 4600 Hilltop Road Soquel, CA 95073 464-1781 (H)

> > Sincerely,

Superv JANET K. BEAUTZ.

First District

JKB: ted

Alvin Karp cc:

Santa Cruz-Monterey County Managed Medical Care Commission

1187A1

156

APPLICATION FOR APPOINTMENT TO A COUNTY ADVISORY BODY

368

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 advlsory 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 Santa Cruz- Monterey Manased, Medical Care Commission

Name

Alvin Karp

4600 Hilltop Road

Soquel, CA 95073-2314

Phone (Home) 464-1781

Length of Residence in Area 9 years

Age (Optional) Circle one: Under 21

21-30

Over 40

PREVIOUS COMMISSION OR COMMITTEE SERVED (Please specify)

	<u>Adv</u>	isory	<u>Body</u>		1	erm	
Member,	Santa	Cruz	County	Managed-Medica	Care C	ommia	sion (SCCHO)
					1993	to	Present

EDUCATION	^ ^	157369
------------------	-----	--------

<u>Institution</u>	<u>Maj or</u>	<u>Degree</u>	<u>Year</u>
UCLA	Political Science	AB	1946.
USC	Public Administration	MA'	1969

WORK/VOLUNTEER EXPERIENCE

<u>Address</u>	<u>Positio</u> n	Year
Services	Deputy Director Hospital Administ	1-55 82 tra8or
West L. A. B	d . nf Dir & V P	1978-84
ouncil L.A.	Bd. Member & Cha	air 1982-90
nte Santa Ci	cuz Bd. Member	1991-1998 .
1	Services West I. A B	Deputy Director Services Hospital Administ West I. A Bd nf Dir & V P Ouncil L.A Bd. Member & Cha

STATEMENT OFQUALIFICATIONS

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

CERTIFICATION

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

Signature

Date

Alvin Karp

Statement of Qualifications

I have served on the SCCHO Board since it's inception and am therefore knowledgeable about our County's needs and particular heath care requirements.

Being a Senior, I am expecially familiar with the needs of this growing sement of our citizenry.

My working years were in the field of health care administration. I worked for over 25 years in the Los Angeles County Department of Health Services. During that peiod I served as administrator of several L.A. County hospitals and when I retired, was a Deputy Director, of the department. I would like to serve on the new Santa Cruz County - Monterey County Commission because of my continuing interest in the health care field and desire to help improve the health status of a large segment of our population. This community has given a great deal to me and my wife and I feel that by serving on this new Commission I can pay something back.

BOARD OF SUPERVISORS



COUNTYOFSANTACRUZ

GOVERNMENTAL CENTER

FIRST DISTRICT

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

JANET K. BEAUTZ WA

WALTER J. SYMONS SECOND DISTRICT MARDI WORMHOUDT
THIRD DISTRICT

RAY BELGARD FOURTH DISTRICT JEFF ALMQUIST
FIFTH DISTRICT

AGENDA:

11/10/98

November 4, 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

(REPRESENTING THE POPULATION OF BENEFICIARIES

TO BE SERVED BY THE COMMISSION)

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 representative of the population of beneficiaries to be served by the Commission who is a past or present Medical beneficiary, in accordance with County Code Chapter 7.59, Section 30, for a term of office to be determined by lot:

> Michael Molesky 1440 Jose Avenue, #315 Santa Cruz, CA 95062 476-9770 (H)

> > Sincerely,

JANET K. BEAUTZ, Supervisor

First District

JKB:ted

cc: Michael Molesky

Santa Cruz-Monterey County Managed Medical Care Commission

1189A1

APPLICATION FOR APPOINTMENT TO A COUNTY ADVISORY BODY

INSTRUCTION- S

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 y	ou for your Interest i	n County Government.
COMMISSI	ON, COMMITTEE or BOAR	D. Managed Medical Commission
Name		MICHAEL MOLESKY.
<u>Address</u>	-	1440 JOSE AVE#315
		SANTACRUZ CA 95062
Phone	(Home)	(831) 476-9777
	(Business)	
<u>Supervi</u>	isorial District	15+
<u>Length</u>	of Residence In. Area	1440
Age	(Optional)	Circle one: . Under 21
		21-30 .
		31=40
	r.	Over 40
<u>PREVIOU</u>	US COMMISSION OR COMMIT	TEE SERVED (Please specify)
	Advisory Body	<u>Term</u>
Man	ased Medical	Commission (chair) Current
ED	O- TAC	Current
LTC	- 1455 EMERGAN	CYPRULIDER SUBCOM CULTENT
Alt	· Bildins + Ap	

7, 3

239

EDUCATION

Institution	Majo	<u>r</u>	<u>Degree</u>	<u>Year</u>	
Wright State UNIV	Rehab	litetion		1975-81	<u>.</u>
	· Cont		••	1973	
Cabrillo Colley	11	16		1944-91	

WORK/VOLUNTEER EXPERIENCE

Organization	. Address	<u>Position</u>	Year
Housing Authority	2160415+	ADA sell Exal	1992, 1993
Scarp Shifter A	KCESS SULUCY	site Inspection	1585
C. AN Com Access No	f		1984-92
S.C W/ Panks Ac	./ '' /	member	1991
Para Transit Stee		with Englished	1974

STATEMENT OF QUALIFICATIONS

Please attach a brief statement indicating why you are interested in serving on the advlsory 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

Signature

Signature

Date

Date

Date

Signature

Sign

Pear Board of Supursors, I am we him to ask for your consideration Organized Health System.

I have a long his tiry of circi envolvement in Santa Cruz; Chair Commission on Desebelitio, 1455 cours, Para transit, County Access cookes, etc. I was subsequently asked to Program to help identify woment human and health care Nesdo in our community I applied for the SCCHO Board (San to Cruz Co. Health Options) and was appointed as the Public Representation Probled / Past- Present Madi-CAL recipiont. I was E/Reted V.ce chair in which I served tell, then chen Fred Keeling was elated to state ASSembly. I then assumed the charilperson ship and was excepted to Chair the Commission (which Istill serve as chair) I have been very active on the commission and believe There a lot to appropriate expanding system This continuty coretal if we hater of to continue to imporore the health Care delivery systems of our two countres.

Again I would appreciate your consideration to this Now Board. It has been a privaly to sure my commenty in this excited New deliming of Health care, to improve and expand on this would be a welcome challings. Sincerely , Muchal Maloha Chair SCCHO

BOARD OF SUPERVISORS



COUNTYOFSANTACRUZ

GOVERNMENTAL CENTER

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(408) 454-2200

JANET K. BEAUTZ FIRST DISTRICT

WALTER J. SYMONS SECOND DISTRICT

MARDI WORMHOUDT

RAY BELGARD FOURTH DISTRICT **JEFF ALMQUIST** FIFTH DISTRICT

AGENDA:

11/10/98

November 4, 1998

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

AT-LARGE APPOINTMENTS TO SANTA CRUZ-MONTEREY

COUNTY MANAGED MEDICAL CARE COMMISSION

(PROVIDER REPRESENTATIVES)

Dear Members of the Board:

I recommend the at-large appointment of the following persons to the Santa Cruz-Monterey County Managed Medical Care Commission, as representatives in the category of 'providers," in accordance with County Code Chapter 7.59, Section 30, for terms of office to be determined by lot:

Arthur S. Dover, M.D. 243-B Green Valley Road Freedom, CA 95019 722-2806 (B)

Christine Griger, M.D. 2025 Soquel Avenue Santa Cruz, CA 95062 423-4111 (B)

Sincerely,

RAY BELGARD, Supervisor

Fourth District

RB:ted

Arthur S. Dover, M.D.

Christine Griger, M.D.

Santa Cruz-Monterey County Managed Medical Care Commission

APPLICATION FOR APPOINTMENT TO A COUNTY ADVISORY BODY

TD: 94579587

376

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 1% 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 C	ounty Government. MANAGEO
COMMISSION, COMMITTEE or BOARD	REGIONAL MEDI-CAL CARE SYSTEM
Nane	ARTHUR S. DOVER, MO
Address	243-B GREEN VALLEY RD.
	FREEDOM, CA 95019
Phone (Home)	(831) 7613922
(Business)	(831) 7722806
Supervisorial District	FIRST
Length of Residence in Area	Z3 YEARS
Age (Optional)	Circle one: Under 21
	21~30
	31-40
	Over 40
PREVIOUS COMMISSION OR COMMITTE	E SERVED (Please <u>specify)</u>
Advisory Body	<u>Term</u>
SANTA CRUZ COUNTY !	MANAGED 3 YGARS
MEDICAL COMMISS	SION
	3

377

EDUCATION _		
Institution (SEE ATT)	<u>Degree</u>	Year
<u> </u>		
	€ v ·	
ORK/VOLUNTEER experi ence		
Organization Address (SEE ATT)	<u>Position</u>	Year
		••
TATEMENT OF QUAL IFICATIONS		
Please attach ābrief statement indicat the advisory body in question and why you	ting why you are Interester are qualified for the a	d in serving on appointment.
PRIOR SECHO POMINIS	TASK FORCE, IT	HEN CURRENT
I certify that the above information is verification of the information in the appropriate the	true and correct and I a plication in the event	COMPIUNITY, uthorize the I am a finalist
Ath Som	. 10/	29/98
Signature	Dat	e
3223031-12,34		



CURRICULUM VITAE

246

Arthur Stuart Dover, M.D. Born 8-31-42 Chicago, Illinois U.S.A

Positions

1989-present 1996-present	: Private practice of pediatric : Medical examiner, Sexual Assa : Travel medicine consulting se : Pediatrician, Planned Parenth	ult Response Team, Santa Cruz rvice, Freedom, California
1995-1996:	Medical director, Central Coa	st Provider Association IPA
1973-1975:	Research Associate, Tulane Ur	niversity-ICMR, Cali, Colombia
<u>Education</u>		
1960-1963	B.S. (Microbiology)	University of Chicago Chicago, Illinois
1963-1964	M.S. (Microbiology)	University of Chicago Chicago, Illinois Thesis:Isolation and purification of deoxyribonucleic acid of the Psittacosis agent
1964-1968	M.D.	University of southern California Los Angeles, California
1968-1969	Intern in Pediatrics	Children's Hospital Los Angeles, California
1971-1972	Resident in Pediatrics	University of Iowa Iowa City, Iowa
1972-1973	Resident in Pediatrics	Los Angeles County - University of Southern California Medical Center, Los Angeles, California

Military Service

1969-1971	Medical Epidemiologist,	Center for Disease Control
	Epidemic Intelligence Service	U.S. Public Health Service
		Atlanta, Georgia

Faculty Appointments

1971	Staff Instructor in Pediatrics, Grady Memorial Hospital Emory University School of Medicine Atlanta, Georgia
1973-1975	Teaching Assistant, Pediatrics (Honorary), Universidad del Valle School of Medicine, Cali, Colombia

Certification

National Board of Medical Examiners, 1969
American Board of Pediatrics, October, 1974
Special Purpose Rxamination (SPEX), 1992
Pediatric Advanced Life Support, recertification exp. 1/99 , ,

Curriculum vitae
Arthur S. Dover, M.D.
Page 2

24-V--

Spe ial Training

1966 Fellow in epidemiology, Tulane University-Universidad del Valle,

ICMRT, Cali, Colombia

1967 Fellow in tropical medicine, Louisiana State University, ICMRT,

San Jose, Costa Rica

1970 Supervisor, serologic epidemiology project, Malaria

Eradication Program, Mato Grosso, Brazil

1987-1991 President, Central Coast Foundation for Medical Care

Medical Societies

Member: American Academy of Pediatrics

American Society of Tropical Medicine and Hygiene Santa Cruz County Medical Society. President, 1998-99

California Medical Association American Medical Association

Medical Licensure

California, 1972, #G-22675 active Georgia, 1970, #13382 active Iowa, 1971, #18387 active Nevada, 1993 #6785 inactive

Special Skills

Fluent in both written and spoken Spanish and Portuguese

Consultantships

1975 PRIMOPS health care project - Tulane University program evaluation, Cali, Colombia

Chairperson of Pediatric Services Committee, INTERPLAST, Inc. (charity reconstructive surgery), 1992 to 1997. Team pediatrician:

1985 Arequipa, Perú 1986 San Pedro Sula, Honduras

1987 Iquitos, Peru 1988 through 1996, Recife and Campo Grande, Brazil

Commissioner, Santa Cruz County Medi-Cal Managed Care Program, 1995 to present

- Participants' Report in Chicago Student Health Project, Chicago Student Health Project, Chicago, 1968, pp 53-65.
- Kallick, C. A., Brooks, G. F., Dover, A. S. et al.: A diphtheria outbreak in Chicago. Ill Med J May, pp. 505-512, 1970.
- Dover, A. S,, Western, K. A.: Fatalities due to malaria in the United States, 1966-1969, J Infect Dis 121:573-375, 1970.
- Dover, A. S.: Imported malaria in Virginia. Virginia Med Monthly 98: 271-375, 1971.
- Dover, A. S., Guinee, V. F.: Malaria transmission with leukocyte component therapy. JAMA 217:1701-1702, 1971.
- Dover, A. S., Schultz, M.G.: Transfusion-induced malaria. Transfusion 11: 353-357, 1972.
- Walzer, P. D., Dover, A. S., Schultz, M. G.: Malaria Surveillance in the United States and Puerto Rico 1970. J Infect Dis 125:194-196, 1972.
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rev. 10/2/98

ARTHUR S. DOVER, M.D. A PROFESSIONAL CORPORATION

243-B GREEN VALLEY ROAD ~ FREEDOM. CA 95019Phone (831) 722-2806 ~ Fax (831) **722-2830**

e-mail: ADOVER@PMGSCC.COM October 30, 1998

Board of Supervisors Santa **Cruz** County

Gentlepersons:

I have practiced pediatrics in south Santa Cruz County for over 23 years, including **staff** memberships at all hospitals in the county. I have cared for Medi-cal patients since beginning my practice here and continue to do so. Currently, I am the president of the Santa **Cruz** County Medical Society and am active in committee work of the Physicians Medical Group of Santa Cruz County, the county's larger Independent Practice Association **(IPA)**.

Also, I have worked in Monterey County as a locum tenens and a temporary IPA medical director. I participated in the failed Health Initiative. I maintain professional contacts with many physicians of the north Monterey County medical service areas and am familiar with the demographics, geographics, hospital situations and medical culture aspects of the area.

I became involved in the development of our current SCCHO program with the creation of the task force that led to SCCHO's creation, and I have regularly attended meetings of its commission as a representative of the provider community since its inception.

With the development of a regional managed care system for the Medi-cal recipients of both counties, I would bring a broad background of experience in the Medi-cal system, managed care concepts, and familiarity with the physician provider communities of both counties. I would continue to strive for conciliation of provider needs and concerns with the health system's basic mission of improving access and quality of care to those to be served.

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Thank you for your consideration.

APPLICATION FOR APPOINTMENT TO A COUNTY ADVISORY BODY

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 Santa mission to Monta Expansion. MD Name office: 2025 Sooue Address home: 105 Limest (Home) Phone (Business) Supervisorlal District Length of Residence in Area Circle one: <u>Age</u> (Optional) Under 21 21-30 31-40 Over 40 PREVIOUS COMMISSIONOR COMMITTEE SERVED (Please specify) Term Advisory Body current member of thes Commissio

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EDUCATION _			-201
Institution	<u>Major</u>	<u>Degree</u>	<u>Year</u>
see C.V.			
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	e en e		
MANU / MATTEMPER DESIGNATION			
YORK/VOLUNTEER EXPERIENCE			•
Organization	<u>Address</u>	<u>Position</u> .	<u>Year</u>
see CV			
. •			

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 authorfze the verification of the information -in the application in the event I ama finalist for the appointment.

Signature

Data

Application for appointment to a County Advisory Body Statement of interest/qualifications

Dear Members of the Board of Supervisors:

I would like to request reappointment to the Managed Medical Care Commission, in its new expanded form including Monterey County. As a practicing pediatrician, I have provided care to Medical eligible children in Santa Cruz for more than 18 years. I have knowledge about managed care systems through experience as the Santa Cruz Medical Clinic's Managed Care Medical Director. It has been my pleasure to serve on the Santa Cruz Managed Medical Care Commission for approximately one and a half years. I would like to continue to work with the Commission as it faces the new challenges of expansion into Monterey County. Thank you for your consideration.

Sincerely yours,

Christine Griger, M.D., F.A.A.P.

Curriculum Vitae

CHRISTINE GRIGER, M.D.

2025 Soquel Avenue Santa **Cruz**, CA 95062 (**408**) **423-4 111**

PERSONAL

Birth Date:

June 3, 1952

Birthplace:

Connellsville, PA

Social Security Number:

167-38-8910

EDUCATION

1969-70 Pennsylvania State University B.S., magna cum laude

University Park, PA

1970-74 Jefferson Medical College M.D.

Philadelphia, PA

RESIDENCY AND FELLOWSHIP

1974-77 St. Christopher's Hospital for Children Internship and Residency

Philadelphia, PA

1976-77 St. Christopher's Hospital for Children Chief Residency

Philadelphia, PA

1977-78 Children's Renal Center Clinical Fellowship

University of California,

San Francisco

1978-79 Children's Renal Center Research Fellowship

University of California,

San Francisco

380

POSITIONS HELD

1980 - present Pediatrician, Santa Cruz Medical Clinic

1992 - present Medical Director for Managed Care Programs

Santa Cruz Medical Clinic

1978-80 Pediatric Walk-In Clinic Physician, Kaiser Permanente

Santa Clara and San Francisco

OTHER PROFESSIONAL POSITIONS/COMMITTEES

1996 - present Medical **Staff** member, Department of Pediatrics

Sutter Maternity and Surgery Center of Santa Cruz

1980 - present Medical Staff member, Department of Pediatrics

Dominican Santa Cruz Hospital

1989-9 1 Chair, Department of Pediatrics

Dominican Santa Cruz Hospital

1980-90 Medical Staff member, Department of Pediatrics

AM1 Community Hospital, Santa Cruz

1989-90 Chair, Department of Pediatrics

AMI Community Hospital, Santa Cruz

1990 - present Quality Management Committee

Santa Cruz Medical Clinic

1992 - present Chair, Utilization Management Committee

Santa Cruz Medical Clinic

1990 - present Management Board

Santa Cruz Medical Clinic

1984 - present Executive Committee

Santa Cruz Medical Clinic

LICENSURE AND CERTIFICATION

License: California license G343 15

DEA Registration: AG7787039

LICENSURE AND CERTIFICATION (Cont'd.)

Board Certification: American Board of Pediatrics, 1979

Voluntary Recertification: American Board of Pediatrics, 199 1

200

OTHER EXPERIENCENOLUNTEER ACTIVITIES

Classroom volunteer, **Westlake** Elementary School

Child Care Council of Santa Cruz County

Board of Directors, Community Children's Center, Santa Cruz

Volunteer physician, Haight **Ashbury** Free Medical Clinic San Francisco

PUBLICATIONS/RESEARCH

"The Effects of Acidosis on Plasma Lysyl Oxidase Activity in Children with Renal Tubular Acidosis," C. Griger, R. Siegel & E. McSherry. Abstract presented at the 1 lth Annual Meeting of the American Society of Nephrology, New Orleans, November 1978.

Organized and began a clinical study of muscle protein and potassium levels correlated with total body potassium as an index of nutritional status in uremic children, 1978-79.

<u>REFERENCES</u>

Wayne Boss President/CEO

Santa Cruz Medical Clinic

Santa Cruz, CA

James Beckett, M.D. Medical Director

Santa Cruz Medical Clinic

Santa Cruz, CA

Ken Bloome, M.D. Department of Pediatrics

Santa Cruz Medical Clinic

Santa Cruz, CA

BOARD OF SUPERVISORS



COUNTYOFSANTACRUZ

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

11/24/98 AGENDA:

November 17, 1998

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

> APPOINTMENT TO SANTA CRUZ-MONTEREY COUNTY MANAGED MEDICAL CARE COMMISSION (REPRESENTING THE HEALTH SERVICES AGENCY ADMINISTRATOR OF SANTA CRUZ COUNTY)

Dear Members of the Board:

In accordance with County Code Chapter 7.59, Section 30, I recommend the appointment of Charles M. Moody, Health Services Agency Administrator, to the Santa Cruz-Monterey Managed Medical Care Commission for a term of office to be determined by lot:

Sincerely,

K. BEAUTZ, Chairperson

Board of Supervisors

JKB:lq

Charles M. Moody cc:

Santa Cruz-Monterey County Managed Medical Care Commission

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