

TIDINGS!

Newsletter of the Catholic Health Association of Minnesota

MARCH 2014

Believing in the worth and dignity of the human person made in the image and likeness of God, the Catholic Health Association-Minnesota assists its members to fulfill the healing mission of the Church.

Mark Your Calendar

March 12, 2014

CHA-MN Board of Directors
FFI: 651.503.2163

March 28-29, 2014

Curatio Rediscovering Joy
SCU / UST, St. Paul
www.rediscoveringjoy.com

June 22-24, 2014

Catholic Health Assembly
Chicago Marriott Downtown
www.chausa.org

Our Legislative Priorities in 2014

By Toby Pearson, CHA-MN Executive Director

On December 5, 2013, state officials from the Department of Minnesota Management and Budget (MMB) announced that the November budget forecast shows a projected budget balance for fiscal year 2014-15 of \$1.086 billion. More recently, with Minnesota's strengthening economic recovery, the projected budget surplus has taken a dramatic jump to \$1.23 billion.

Current law directs any forecast balance to repay the K-12 shifts. The first \$246 million of the balance will be used to complete repayment of the K-12 school property tax recognition shift. Additionally, \$15 million is transferred to the state airports fund, restoring money originally borrowed in 2008. This forecast completes repayment of accounting shifts from prior budget solutions, reducing the forecast balance to still nearly \$1 billion with the revised projections.

It appears the new forecast number will change some of the dynamic at the Capitol this year, given that this year will be a bonding year and has been billed an "un-session". However, things will change as the session begins and the election cycle dynamics kick in. With all of the House members, as well as the Governor up for election, there will be increasing pressure put on pent up demands.

Gov. Dayton and state lawmakers will use this forecast to make any supplemental budget proposals leading up to the next legislative session. With the revised surplus projections from the end of February, significant pressure will be applied to the lawmakers by many as the decision-making begins.

Rooted in our core values, the Catholic Health Association of Minnesota will advocate for the following priorities at the 2014 Legislative Session:

ENHANCING MEDICAID AND ENSURING A STRONG SAFETY NET

The Catholic health ministry is committed to serving those in need, young and old, throughout every stage of life, and to advocate on their behalf. We support policies to:

- Improve access and care coordination in Medicaid, Medicare and other safety net programs.
- Provide adequate and sustainable financing to ensure the ability of health care providers to maintain quality and compassionate care.

IMPLEMENTING AND IMPROVING THE AFFORDABLE CARE ACT

CHA MN advocates a health care system that serves everyone. The Affordable Care Act takes a significant step toward expanding access to health insurance coverage and improving our delivery system. During 2014, we will work to:

- Ensure adequate funding for implementation of the health care law in accordance with CHA MN's Vision.
- Support policies to improve the current delivery system and reduce costs, including health technology; telemedicine; care coordination; and prevention and wellness.
- Continue to expand health care access and coverage, including coverage for undocumented immigrants.
- Strengthen the health care workforce to ensure the availability of primary care services in underserved areas, including rural and urban communities.
- Ensure that Minnesota's health insurance exchange achieves the promise of coverage and high-quality integrated care for millions of uninsured individuals through outreach, enrollment, education, as well as accountability for those who run the exchange.

STRENGTHENING AGING AND CHRONIC CARE SERVICES

CHA MN strongly supports efforts to coordinate and integrate person-centered health care services along the contin-

Rediscovering Joy in Health Care – The Call to Virtue & Holiness

Inspired by the religious sisters who founded Catholic healthcare, Dianne Johnson, a self-described ‘burnt out nurse’ set out to understand what drove and sustained the sisters. Pursuing her Masters in Medical Ethics at UST, she looked through archives in convents, read notes written by the Mother Superiors, and even hand-written letters from novices in order to discover the secret for their inspiration, their foundation in Christ. She found very little in the writings of those who began health

care in America besides statements such as, ‘I can lift 12 pounds of flour without complaining,’ ‘I can wake up in the middle of the night and be of good cheer,’ and so on. Disappointed, she found nothing about the love of Christ, nothing about the Church. Nothing.

Johnson eventually concluded that in these early days of Catholic healthcare the sisters did not need to talk about their love for Christ and the

purpose for their service, but rather it was in the very air they breathed. Considering the times we live in now, she resolved that we needed to rediscover the joy and purpose of healthcare, we needed to turn back to Christ.

In this spirit, Dianne Johnson founded Curatio in 2009, an Apostolate for Catholic Health Care Professionals, which will be sponsoring an important and timely Bioethics Conference on March 28-29 on the St. Paul Campuses of St. Catherine University and University of St Thomas. The featured speaker will be Father Nicanor Austriaco, O. P., associate professor of microbiology and genetics, and theology at Providence College (RI), and author of the recently published book, “Biomedicine and Beatitude.”

The conference, appropriately entitled, *Rediscovering Joy in Health Care – The Call to Virtue & Holiness*, is intended for all health care professionals. This includes physicians, nurses, therapists, social workers, pharmacists, administrators, and others who work in health care; chaplains and members of the clergy, faculty who teach in the health professions and supporting disciplines; students in the health professions and supporting disciplines; policy makers; those who provide

Bioethics Conference

March 28-29, 2014
St. Catherine University
University of St. Thomas

care for others, including family members; and the general public.

As Catholic healthcare professionals, those within Curatio strive to bring God’s healing presence to their patients, to every human interaction because they understand that it is His healing that sees and loves the

whole person, entirely and completely, body and spirit. They strive to see as Christ sees, to love as Christ loves. Regarding their mission, Johnson states, ‘our work then is not only a technical activity but one of dedication to the love of God, neighbor and self. What is different about Catholic healthcare is the animating principle of our compassion and caring, which is Curatio ex Corde Christ: Healing from the Heart of Christ!’

Described as an opportunity to learn how to joyfully bear witness to the surpassing dignity of the human person in the midst of escalating challenges and threats to human life in health care, the conference provides an array of topics and speakers. Included in the program is Dr. Michael Cady, MD, from the Minnesota Institute for Minimally Invasive Surgery; Dianne Johnson, RN, MA, OCN from Radiation Oncology at Abbott Northwestern; Rev. Thomas Knobloch, Consultant for Health Care Ethics for the Diocese of St. Cloud; and Dr. Mary Paquette, MD, Family Practice at AALFA Family Clinic in White Bear Lake.

The Bioethics Conference is sponsored by Curatio, in cooperation with: St. Catherine University Myser Initiative for Catholic Identity and Henrietta Schmoll School of Health, University of St. Thomas Center for Catholic Studies, The Archdiocese of St. Paul and Minneapolis, and The Catholic Medical Association Twin Cities Chapter: Catholic Physicians Guild.

Continuing Education Credits will be provided for all attendees, including doctors. To register or obtain further information on the conference, visit www.rediscoveringjoy.com Curatio’s website is www.curatioapostolate.com. Pre-registration must be completed before March 14, 2014. ■

What is different about Catholic healthcare is the animating principle of our compassion and caring, which is Curatio ex Corde Christ: Healing from the Heart of Christ!



FATHER NICANOR AUSTRIACO, O. P.

PRIORITIES *cont. from page 1*

uum of care, to ensure the best outcome for everyone. CHA MN supports policies that:

- Provide adequate and sustainable financing to ensure the ability of long-term care facilities and services to provide quality and compassionate care.
- Promote improved coordination of care for those with chronic or serious illness.
- Provide the elderly and persons with disabilities options to receive long-term care services in the most appropriate care setting, whether at home, in the community or in a facility.
- Improve access to palliative care for all.

ENSURING CONSCIENCE PROTECTION

We support measures that allow us to maintain our Catholic identity and protect and defend human life from conception to natural death. We will work to:

- Preserve existing provider conscience protections and other measures to allow the ministry to provide care consistent with our faith.
- Advocate health care programs and policies that acknowledge our religious, ethical and moral values. ■



The Lenten Season
Ash Wednesday, March 5

"Each year, Lent offers us a providential opportunity to deepen the meaning and value of our Christian lives, and it stimulates us to rediscover the mercy of God so that we, in turn, become more merciful toward our brothers and sisters. In the

Core Values of CHA-MN

The Catholic Health Association of Minnesota (CHA MN) is the statewide leadership organization of the Catholic health ministry, Catholic health care organizations providing acute care, skilled nursing and other services including hospice, home health, assisted living and senior housing. Our members include Catholic Charities offices as well as Catholic Universities. By pursuing the priorities of the ministry, CHA MN is working to create health care that serves everyone.

CORE VALUES

Our advocacy is grounded in the core values that form our Vision for Health Care:

- **Human Dignity:** Because each person is created in the image of God, each life is sacred and possesses inalienable worth. Health care is essential to promoting and protecting the inherent dignity of every individual from conception to natural death.
- **Concern for the Poor and Vulnerable:** The moral measure of society is how it treats the poor and vulnerable, who are particularly marginalized by a lack of access to health care.
- **Justice:** Health care is a basic human right alongside food and shelter, all of which are necessary for individuals to participate fully in society.
- **Common Good:** The health and well-being of each person is intertwined with the health and well-being of the broader community. Access to health care is an essential element contributing to the common good alongside others such as education, employment and a safe environment.
- **Stewardship:** Our societal resources are finite, and we must make wise choices for how they are allocated. Health care resources should focus on the well-being of the community and be structured to deliver the care that is most medically beneficial and promotes public health.
- **Pluralism:** The health care system should allow and encourage involvement of the public and private sectors including voluntary, religious and not-for-profit organizations, and it should respect the religious and ethical values of patients and health care providers alike. ■

Lenten period, the Church makes it her duty to propose some specific tasks that accompany the faithful concretely in this process of interior renewal: these are prayer, fasting and almsgiving."

-Pope Benedict XVI

The CHA-MN invites you to consider visiting our website (www.chamn.org), where the daily readings from the Mass and Office of Readings are conveniently provided for spiritual reflection during this Lenten Season, and throughout the year. ■

Mary F. Heinen, CSJ, Health Care Visionary and Leader

By Mary Kraft, CSJ

It was always hard to keep up with Mary Heinen, CSJ. Going back to her high school days, it was evident that she was not going to wait for someone to do something. “No,” she said, “Let’s do it now.” That attitude accompanied her throughout life as she exhibited leadership, especially within her life-long ministry of health care. At the time of her death on Jan. 1, 2014, Mary was serving as director of advocacy and public

policy for St. Mary’s Health Clinics, a network of eight clinics serving uninsured and underserved people in the Twin City metropolitan area. She was 80 years old.

Mary recognized that good health is a gift and that it was the responsibility and moral imperative of the health care community to do all it could to help people maintain health throughout life. “Health care is basic human right,” she said over and over again, “and those of



MARY F. HEINEN, CSJ

us involved in providing health care need to commit ourselves every day to this ministry.”

Long before the Affordable Care Act made headlines, Mary was promoting a common societal vision for health care based on such tenets as universal access, freedom of choice, cost containment, equitable financing, health promotion and illness prevention, cultural diversity options, and, above all, respect for the continuum of life. She frequently quoted former Minnesota senator and U.S. vice president Hubert H. Humphrey, “The moral test of government is how it treats those who are in the dawn of life, the children; those who are in the twilight of life, the aged; and those who are in the shadows of life – the sick, the needy, and the handicapped.”

And Mary was always proud to wave the Minnesota banner because she considered it to be a “great state of health,” often setting a national challenge for others to follow such as being the first state to fund programs for reducing tobacco use among its citizens.

Mary’s ministry in health care began somewhat inconspicuously in 1954, three years after she joined the Sisters of

St. Joseph of Carondelet, St. Paul Province. Her first assignment was that of a nurse’s aide at the former St. Michael’s Hospital in Grand Forks, ND. She returned to North Dakota a number of years later, this time to St. John’s Hospital in Fargo where her leadership as associate professor and director of the school of nursing was critical as the school of nursing curriculum was incorporated into associate and baccalaureate degree programs at North Dakota State University.

Later, while at St. Mary’s Junior College, Mpls., Mary helped develop programs in nursing, physical therapy, occupational therapy, and other allied fields. Such focused course work served as an educational model and was among the earliest two-year health associate degree programs in the United States. Mary went on to serve as executive secretary for the Sisters of St. Joseph Health Care Network, and as vice president for mission for the CSJ (Congregation of St. Joseph) Health Care Corporation in St. Louis. Her work in this position, established the foundation for today’s Ascension Health Network bringing together three major religious congregations.

In 1988, Mary was elected director of the St. Paul Province of the Sisters of St. Joseph of Carondelet. This position included responsibility for the province’s ministries in

“The moral test of government is how it treats those who are in the dawn of life, the children; those who are in the twilight of life, the aged; and those who are in the shadows of life – the sick, the needy, and the handicapped.”

HEINEN *cont. on page 5*



ANDREA LEE, SR. CAROL KEEHAN AND SR. MARY HEINEN

HEINEN *cont. from page 4*

education, health care, and social services. During this time, St. Mary's Hospital, Mpls., was sold to Fairview and the groundwork was established for the St. Mary's Clinics.

The clinics opened in 1992. As director of advocacy for the clinics, Mary brought to this ministry the same untiring enthusiasm and commitment that characterized all of her work. She carefully tracked health care legislation, especially bills pertaining to programs for medically underserved and uninsured people in Minnesota and made frequent contacts with legislators before, during, and after legislative sessions.

Mary's success throughout life was made possible through continual professional networking and ongoing research and study based on earlier educational degrees -- a bachelor of science from the College of St. Catherine, a master of science in nursing and nursing education from the Catholic University, and a doctorate in philosophy from the University of Minnesota.

That Mary was a well-respected and recognized leader is evidenced, in part, by appointments to various boards, commissions, and committees. Up until the time of her death, Mary was a member of the St. Catherine University and Minnesota Center for Health Care Ethics boards and the St. Joseph Hospital Reserved Powers Working Group. Especially

as regards the latter, Mary's ability to ask challenging questions and to establish benchmarks for success was critical to maintaining the Catholic commitment to St. Joseph's and Woodwinds/St. Joseph's hospitals, members of the HealthEast System.

Earlier, Mary had served on other boards including the Catholic Health Association of Minnesota, Minnesota Board of Nursing, St. Paul Seminary School of Divinity at the University of St. Thomas, HealthEast Care System, CommonBond Communities, Catholic Charities, St. Therese Southwest, Carondelet Health System, and the Henrietta Schmoll School of Health Advisory Council at St. Catherine's University, and the Commission for Pastoral Health Care in the Archdiocese of St. Paul and Minneapolis.

She was also the recipient of many awards such as an Honorary Doctorate from St. Catherine University, the University of Minnesota Outstanding Achievement Award, and the Joint Religious Legislative Coalition's Lawrence D. Gibson Interfaith Social Justice Award.

Professional colleagues joined Mary's family, friends, and the Sisters of St. Joseph of Carondelet on January 6th in honoring her life at a visitation service and a Mass of Christian Burial celebrated for her in Our Lady of the Presentation Chapel at St. Joseph's Provincial House, St. Paul. ■

St. Francis Health Services, Morris



Since its origins in 1963, St. Francis Health Services has provided services to the aging. Sponsored by the Diocese of St. Cloud, the services of this non-profit organization include assisted living, home health care, a full range of therapies, senior housing, skilled nursing care, and community and residential services to people with developmental and mental disabilities and mental illness issues.

As a mission they are committed to express Christ's message of love and hope by providing for health, residential, community and allied services in a holistic, competent and caring manner that recognizes the value and dignity in every human life.

Many baby boomers have adopted the phrase: "It takes a community to raise a child", at SFHS they have taken that concept to the next level, "it takes a community to feel alive." The idea of inter-connectivity of individuals with community is behind their architectural transformations of nursing

homes and the design of new construction at many SFHS living communities. Their hope is that some day they can delete the terms "facility", "nursing home", and "group home" from our vocabulary. Because within each of their communities are many facilities and homes which are part of the greater community.

LOCATIONS AND FACILITIES:

Aitkin Health Services, Aitkin
 Browns Valley Health Center, Browns Valley
 Heritage Manor Health Center, Chisholm
 Viewcrest Health Center, Duluth
 Trinity Care Center, Farmington
 West Wind Village, Morris
 Franciscan Health Center, Morris
 Renvilla Health Services Campus, Renville
 Suncrest Senior Living Center, Scanlon
 Thief River Care Center, Thief River Falls
 Zumbrota Health Services, Zumbrota

For more information visit www.sfhs.org.

MEMBER PROFILE

Ethics Matters

Evangelii Gaudium

John A. Gallagher, Ph.D., Ethicist, New Buffalo, Mich.
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Pope Francis' apostolic exhortation, *Evangelii Gaudium*, is a clarion call to the people of God and to the leadership of the Catholic health care ministry. In this document, the Pope calls the Church to a recommitment to the task of evangelization, by which he means the cultivation within the Church and within society and culture of the significance and meaning of brotherly love. The Pope "dreams of a missionary 'option', that is a missionary impulse capable of transforming everything so that the Church's customs, ways of doing things, times and schedules, language and structures can be suitably channeled for the evangelization of today's world rather than her self-preservation." (27) For Pope Francis the unity of the love of God and neighbor, brotherly love are the centerpiece of the kerymga, the message of the Gospel.

This call to evangelization should not be confused with proselytization, nor should it be confused with the task of childhood learning of catechism. Evangelization, as Pope Francis envisions it, is the task of discerning the meaning of brotherly love so that it has significance for women and men engaged in the tasks of supporting a family, contributing to a domestic economy and shaping a world which is reflective of a socially and culturally appropriate enactment of the common good. Evangelization is not about theories.

Evangelization is about the manner in which the Gospels, particularly love of neighbor, can be relevant in the day-to-day lives of persons within and outside of the Church.

Evangelization is about how Christians live and the witness that their lives can be to the many others with whom they are joined by bonds of culture and social structures.

And what is the role of the Catholic health care ministry in the task of evangelization? No section of *Evangelii Gaudium* is directed explicitly to the Church's health care ministry, nor to any other specialized ministry such as education or social work. However, Pope Francis does speak about other Church institutions "as a source of enrichment for the Church, raised by the Spirit for evangelizing different areas and sectors." (29) The area or population served by the American Catholic health care ministry can, perhaps, best be defined as the vulnerable. Persons present themselves to the

ministry because they are vulnerable, they are sick, they are dying, they are victims of trauma. Persons come to the ministry because to some extent and in some manner they are losing control of a dimension of their being. They are frightened and afraid. In an era in which the model of care is focused on wellness and the prevention of mortality and morbidity, the ministry should not lose sight of the fact that the focus on wellness is defined over and against mortality and morbidity. The best preventive care imaginable must ultimately yield to the inevitability of mortality.

The task of evangelization associated with the Church's health care ministry is to engage the vulnerability, the morbidity and mortality associated with life.

The task of evangelization associated with the Church's health care ministry is to engage the vulnerability, the morbidity and mortality associated with life. In some ways this is not a new task. Compassion, respect for human dignity and the sanctity of human life are each traditional efforts to engage the vulnerability of patients. But I think Pope Francis is calling the ministry to something new and something more challenging. The call is first to articulate what the meaning of brotherly love entails, what the unity of love of God and love of neighbor means in the context of this ministry. This is a daunting task for leaders of the ministry. The task is daunting because it is not

about talking about love of God and love of neighbor, but rather it is about shaping the engagements of patients with caregivers so that love is mediated in these engagements. Evangelization is about meaning. Thus the litmus test of the success of evangelization in the health care ministry rests with the experience of patients and families. Evangelization is not about theory, but about creating meaning that can sustain the faith and well-being of the vulnerable.

Evangelization may appear to be a very explicitly Christian, even Catholic concern. However, brotherly love and the unity of love of God and neighbor are not uniquely Christian or Catholic tenets of faith. The good deeds of our Jewish colleagues and the role of the fifth pillar of Islam for our Muslim colleagues all converge in a common element shared by these three faith traditions. The ministry brings together an array of women and men of a variety of religious faiths. The bond that holds all of us together in a common ministry is not simply the clinical and professional skills that we bring to the ministry, as important as these skills are, but rather our shared commitment to provide meaning to the vulnerable who come to us for care. ■

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NEWS and NOTES

- Joseph Blonski, MD, a family medicine physician at **CentraCare Family Health Center**, was honored February 5 with the St. Cloud Hospital Physician of Excellence award. Dr. Blonski played a key role in developing Project H.E.A.L., a program that reaches out to underserved people throughout the communities of St. Cloud, Melrose, Long Prairie and Sauk Centre. The Physician of Excellence award was created for physicians, nurses and other staff to recognize a St. Cloud Hospital Medical Staff member who has an exemplary work ethic and lives the healing mission of the St. Cloud Hospital, providing Care Above All.
- Opening day was January 13 for the new two-level transitional care unit at **Cerenity Senior Care - White Bear Lake**. The TCU features 40 private rooms, with their own bathroom and roll-in shower, sun rooms, sitting rooms with a balcony, and a dining room with a fireplace. Other special features include a beauty/barber shop for TCU patients, a spa with whirlpool bath and a laundry room on each floor for families. The original Care Center is now being renovated to create more single rooms with showers and bathrooms, family gathering spaces, a large chapel and neighborhood dining rooms.
- The **Benedictine Health System** has successfully implemented seamless electronic health information exchanges between MatrixCare, the electronic health record system for its Participating Organizations, and Epic, which is the electronic health record used by Allina Health, a hospital partner of BHS. This interoperability project was funded by an e-health connectivity grant for health information exchange from the Minnesota Department of Health. BHS was awarded this grant for their work with partners MDI Achieve and Allina Health to expand health information exchange capabilities among health care providers and other trading partners to support care and public health.
- Benedictine Health System (BHS) welcomed **Regina Senior Living, Hastings**, as its newest member organization as of January 1. "We are pleased that we have been given the opportunity to continue the ministry of Catholic healthcare for seniors in the Hastings community, and look forward to working closely with Allina Health to provide a high quality, continuum of care to those we serve," said Rocklon "Rocky" Chapin, BHS president/CEO. Since September 1, 2013, Regina Senior Living has been managed by BHS under the ownership of Allina Health. On January 1, BHS formally acquired ownership of Regina Senior Living. On January 1, Regina Medical Center was renamed as a result of a new partnership to strengthen health care and senior services for the community. Regina Medical Center is now **Allina Health - Regina Hospital**. Regina Medical Center's Senior Living is now Regina Senior Living, a Member Organization of the Benedictine Health System.
- **St. Joseph's Area Health Services, Park Rapids** was recently recognized by WomenCertified as one of America's Best Hospitals for Patient Experience in Obstetrics. Hospitals qualify for this honor based on a national survey of patient perspective of care reported by the U.S. Department of Health and Human Services and an analysis that weighs criteria identified as the most important to women for patient satisfaction.
- Senior Administrative Leader Christy Brinkman, who works at **Essentia Health-St. Mary's, Detroit Lakes**, has just been awarded the 2014 Kal Michels Outstanding Leadership Award from Aging Services of Minnesota. It's among the highest honors for the state's aging services professionals. Brinkman joined Essentia Health St. Mary's in 1999. She serves as administrator for Oak Crossing, which includes a 23-bed transitional care unit and three long-term care neighborhoods. She also is responsible for senior housing and assisted living as well as a variety of hospital and clinic-based services.
- **CentraCare Bariatric Center** continues to uphold its commitment to quality and patient safety for all bariatric surgery patients. The CentraCare Bariatric Center has received three-year reaccreditation as a Bariatric Surgery Center of Excellence by the American Society of Metabolic & Bariatric Surgery. This designation is given to facilities who have demonstrated their center's commitment to multidisciplinary, high-quality, patient-centered care. ■



Catholic Health Association of Minnesota

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from our
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