VISION
To be the preeminent professional society for healthcare executives dedicated to improving health.

MISSION
To advance our members and healthcare management excellence.

VALUES
As members of the American College of Healthcare Executives, we are committed to:

Integrity: We advocate and demonstrate high ethical conduct in all we do.

Lifelong Learning: We recognize lifelong learning is essential to our ability to innovate and continually improve ourselves, our organizations and our profession.

Leadership: We lead through example and mentoring and recognize caring must be a cornerstone of our professional interactions.

Diversity and Inclusion: We advocate inclusion and embrace the differences of those with whom we work and the communities we serve.
LEADING WITH INTENT

In today’s evolving healthcare environment, it is easy to lose sight of the impact we have as leaders. That is why it is so important to lead deliberately. Healthcare leaders must be purposeful in setting their visions for their organizations, identifying the steps needed to make change and engaging the workforce to drive toward success. Intentional leaders are conscious of how they act and behave because they know what they do and say matters. They are defined by a commitment to high ethical conduct in their work, and they realize that their actions speak louder than words.

As the professional society for healthcare leaders, ACHE is committed to helping healthcare executives address important challenges to ensure the delivery of safe, high-quality care. To do that well requires a diverse profession that reflects the communities we serve and represents our clinical partners across the continuum of care—who share a commitment to providing the best care possible.

That is why the ACHE Board of Governors continues to boldly set our vision to be the preeminent professional society for healthcare executives dedicated to improving health with steadfast vigilance, and tirelessly works toward achieving our mission of advancing our members and healthcare management excellence.

The board has established key priorities to fulfill our vision and mission—a select few of which are highlighted here.
Advancing the practice and community of leadership through partnerships. Healthcare leaders are required to understand the needs of the patient population their organization serves and identify new ways to structure and partner with others to solve the issues and break down the barriers currently experienced in delivering and receiving care.

Because a diverse healthcare workforce is best equipped to recognize and address gaps in care, we are helping to lead the way in advancing executive diversity and inclusion by forming sustainable partnerships, engaging stakeholders and offering resources to help diverse executives succeed.

For example, ACHE has made important strides in increasing the pipeline and pool of diverse executives through our partnership with the Institute for Diversity in Health Management to promote its Summer Enrichment Program. In 2017, 47 hospitals, health systems and other healthcare organizations committed to hosting an intern through the program. We hope to grow the program significantly in 2018.

We also know that diverse professionals do not always have the support and resources needed to advance their careers. We are proud of the great work of the combined efforts of our diversity partners—IFD, the National Association of Health Services Executives and the National Association of Latino Healthcare Executives—and our two newest forums for healthcare executives from the Asian and LGBT communities to increase the ability of diverse executives to find their path to success. In 2017, together we launched the Executive Diversity Career Navigator to help diverse candidates plan their careers.

While much has been achieved to improve healthcare, more can be done. ACHE is well-positioned to convene new partnerships to capture and export leadership practices necessary to tackle persistent challenges to ensure our organizations are safe and ready to take on payment reform.

Keeping the people we serve safe is our most important calling as executives. Although our healthcare organizations help millions of people, many also are harmed. That is why one of the top issues for healthcare executives is patient safety, including engaging others in making healthcare safe. For leaders, building and structuring a culture of safety is key.

Creating a culture of safety in healthcare settings has proven to be a challenging endeavor, partly because of competing agendas and the complexity of our work. However, we know that culture is critical to making healthcare safer.

In 2016, the ACHE Board of Governors partnered with the Institute for Healthcare Improvement/National Patient Safety Foundation Lucian Leape Institute to help leaders develop the kind of culture needed to advance patient and workforce safety. By convening thought leaders and experts, we have developed a guide, Leading a Culture of Safety: A Blueprint for Success, which assists leaders in creating, shaping and sustaining a culture of safety where everyone is empowered to speak up when an error or a near miss has occurred. This document, released in May 2017, is available at www.npsf.org/cultureofsafety. We hope this work serves as a call to action to eradicate safety problems from our organizations. ACHE knows that our profession benefits from strong collaborations, and we are proud of our strategic alliance with the IHI/NPSF.

A newer alliance with Leavitt Partners, a healthcare intelligence business founded by former Gov. Michael O. Leavitt, leverages the most relevant and credible expertise and resources available for driving to value-based care. Together, ACHE and Leavitt Partners are working on several initiatives, including a roundtable series for CEOs that will be held at ACHE’s Congress on Healthcare Leadership from 2017 through 2020. You can learn more about key takeaways that emerged from a CEO roundtable discussion held during the 2017 Congress in the article “Leading for Value: A CEO Roundtable Discussion With Gov. Michael O. Leavitt,” published in the July/August 2017 issue of ACHE’s magazine, Healthcare Executive.
ACHE’s 10 Premier Corporate Partners play a vital role in supporting ACHE’s vision of improving health. These corporations provide funding that helps us develop relevant, timely programming and enhances networking experiences nationally and locally.

We also are grateful for the donors who contribute to the Fund for Healthcare Leadership. In revitalizing our voluntary giving efforts, the Fund is renewing its focus on developing leaders—positioning the Foundation of ACHE as a vehicle to help our members contribute to the field by giving back to the profession.

To date, the Fund has provided a total of 202 scholarships to outstanding leaders in the healthcare field who seek resources to acquire the needed skills and training to effectively lead today and tomorrow. This includes 24 Thomas C. Dolan Executive Program scholars and 178 Senior Executive and Executive Program scholars.

These programs prepare leaders for higher-level leadership roles through a specialized curriculum, intensive educational sessions and peer support.

Since its inception in 2006, more than 2,800 individuals and organizations have donated to the Fund, with contributions and pledges totaling more than $3.7 million. Thirty-eight leadership gifts of $25,000 or more support the important work of the Fund, and 18 individuals have demonstrated their commitment to the future of healthcare leadership by including the Foundation of ACHE in their estate plans.

Examples of new seminars include “Optimizing Business and Clinical Outcomes Through Physician-Executive Collaboration” and “Developing Leadership Competencies That Build Effective Teams and Create Extraordinary Physician Engagement,” which you can learn about at ache.org/Education. Additionally, three new two-day seminars designed for physicians are under development and will debut in winter 2017.

More and more, we see the emergence of group practice managers joining our ranks, with a 5 percent growth in group practice managers in 2017 from the previous year. Additionally, there are more than 5,300 nurses within ACHE’s ranks. Equally important, 31 percent of our new members are racially diverse—the most in our history—indicating that our efforts in diversity and inclusion are paying off.

In addition to our premier professional development programs, ACHE’s hallmark is its ability to connect people to people and people to ideas—inspiring others to greater heights.

ACHE’s forums provide the doorways to invite more executives into our professional home. Our two newest
communities, the Asian Healthcare Leaders Forum and the LGBT Forum, offer value-added benefits developed specifically for members interested in the issues these groups face.

You know better than anyone that ACHE has a strong history of supporting healthcare executives on their leadership journeys. We’re privileged to be your credentialing organization for setting the standards of excellence in healthcare leadership. To continue fulfilling that important responsibility, ACHE took steps in 2016 to review the FACHE® credential to ensure its continued relevance to the field. Findings from research conducted by the Board of Governors-appointed Credentialing Task Force indicate that 75 percent or more of Fellows agree that because of the FACHE credential, they are better prepared to cope with the challenges of the evolving landscape of healthcare management.

Through the work of the task force, and with the approval of the Board of Governors, ACHE strengthened the value of the credential by modernizing the definition of healthcare management and streamlining the application process. We anticipate that implementing these changes will encourage more Members to apply to advance to Fellow, and will encourage leaders of different backgrounds and positions to apply to become board certified in healthcare management. Increasing awareness of the FACHE credential among employers and the healthcare field as a whole will be a significant priority going forward. You can learn more about how to maximize your professional potential by advancing to Fellow status by visiting ache.org/FACHE.

We strive to create value for our members by delivering relevant, high-value educational programs, products and services. Developing your leadership intent requires awareness, reflection and dedication, and ACHE has good resources to help, including one of our newer offerings—ACHE CareerEDGE®, a tool that helps you navigate your career through assessment and self-exploration.

More than 3,200 professionals have taken advantage of CareerEDGE since its launch in May 2015. A student version of the resource, ACHE CareerEDGE SE, was fully launched in the third quarter of 2016 with nearly 500 students benefiting from guided career planning. Furthermore, 10 chapters are participating this year in the CareerEDGE Navigator Program, which enhances CareerEDGE locally through chapters by providing them with a trained CareerEDGE adviser. The five chapters that participated in the program in 2016 have implemented new programs or services using CareerEDGE, extending its impact to local communities.

The ACHE Interview Prep Tool, also unveiled last year, offers users an assortment of tools and resources to improve their effectiveness in the job-search process. Users can choose from a self-directed version or an enhanced version.

Overall, the Career Resource Center helped nearly 3,000 individuals last year through various programs, including mentoring, job preparation and providing resources for those in transition. In addition, each month an average of 3,600 job seekers availed themselves of ACHE’s Job Center to advance their careers.

To help you stay ahead of the curve, ACHE conducts year-round research in the field of healthcare management, such as the 2016 CEO Survey of Top Issues Confronting Hospitals, the 2017 Hospital CEO Survey on Executive Employment Contracts and Evaluations and computation of 2016 hospital CEO turnover rates. In 2016, ACHE produced two groundbreaking white papers titled How Senior Leadership Teams Are Structured Within Health Systems: A Survey of Hospital CEOs Within Health Systems and What Healthcare Leaders Should Know About Recruiting Senior Executives: Lessons From Executive Search Firms, which covered important insights from a total of 35 executive search firms.
Our book publishing division, Healthcare Administration Press, remains a renowned publisher in the industry, having published 12 titles in 2016 alone on topics vital to your success.

Last year Healthcare Administration Press also began a partnership with Wolters Kluwer, an international leader in academic publishing with more than 300 health-related journals. Through this partnership, ACHE members now receive online access to both of ACHE’s journals, Journal of Healthcare Management and Frontiers of Health Services Management, while continuing to receive their choice of journal in print. This benefit to you, our members, will be realized in 2017 and beyond.

Additionally, ACHE produces Healthcare Executive, which has a circulation of nearly 42,000 and provides timely, relevant information to our readers. Each issue addresses one of healthcare’s great challenges, such as leading across the continuum of care and streamlining operations.

Lifelong learning is essential to our ability to continually improve ourselves, our organizations and our profession. No matter where you are in your career, you will need tools and insight to serve our profession with expertise. Through our national and local networks, ACHE has the opportunity to create a community of learners that will transform healthcare.

In 2016, ACHE facilitated more than 85,500 hours of Face-to-Face Education at the national level, providing numerous opportunities for our members to learn and network with key thought leaders in the field and their peers. The 2017 Congress on Healthcare Leadership alone drew more than 4,000 leaders and provided over 48,000 hours of continuing education and opportunities to network and advance careers.

Our expert faculty taught 150 educational programs both in person and through distance learning, including a new webinar series developed for 2017. This three-part series is a first for ACHE and is focusing on legislative updates at different intervals throughout the first year of the new presidency and the resulting impacts on healthcare.

Lastly, our On-Location Programs offer a full roster of relevant seminars taught by expert faculty in locations suited to your needs. These programs provide customized learning and in-depth information, use proven problem-solving techniques to address the issues facing healthcare executives and their organizations, and reduce training expenses for healthcare organizations by eliminating travel costs and minimizing participants’ time away from the office.

ACHE continues to strive for excellence by improving our organizational performance, agility and value to better support you in a dynamic healthcare environment. Strong leadership is built on strong relationships and partnerships. The strength of ACHE’s relationships is best reflected through the work of our 78 chapters. Last year, they offered nearly 1,300 education and networking events that delivered more than 310,000 attendee hours to more than 97,000 attendees.

The quality of leadership and service demonstrated by chapter leaders speaks highly of their dedication to members. In 2016, ACHE bestowed one Award for Chapter Excellence, eight Awards for Chapter Distinction, 27 Awards of Chapter Merit and 19 Awards for Sustained Performance on deserving chapters.

In our commitment to improve, ACHE will examine how our partnerships with chapters can evolve, as we look to find opportunities to drive consistency, provide more value to those served close to home and engage with our members.

ACHE also is accelerating technological advancement to better serve you. Through planning for and adopting relevant innovations, we hope to provide new features and functions for members and chapters.
Upgrades to our legacy association management system, which is the backbone of our data and technology infrastructure, enhances the customer experience.

Additionally, ACHE and local chapters are working together to implement new chapter website design enhancements that will improve the efficiency of chapter operations.

To help fulfill our commitment to delivering higher value to our field and our members, ACHE is using Baldrige practices to ensure we are doing our best to serve you.

In 2016, ACHE received the highest level of recognition possible at the state level—the Gold Award for Achievement of Excellence. The award process offers us the opportunity to hold ourselves accountable to the outcomes desired and the discipline of systematic improvement. ACHE submitted its application to the National Baldrige Performance Excellence Program in spring 2017.

**Committed to Helping Healthcare Executives Lead With Intent**

The opportunity to lead is an incredible privilege—a doorway to bring about positive change.

Leadership, however, can be difficult, and you will need a partner along the way. ACHE is proud to support your efforts to improve the health of the communities you serve, and we welcome the opportunity to tackle the important challenges of today’s healthcare environment with you.

The process of developing as a leader is a continuous one, and ACHE is committed to providing you with the opportunities, tools and resources to serve our profession with mastery. As leaders, we must stay abreast of the latest developments and proven strategies for improving safety and quality and keeping communities healthy and well.

Although we live in challenging and uncertain times, we are confident that together we can make a difference in a world where leadership is key to making healthcare safer, more affordable and accessible for all.
MEMBER PROFILES

Mario J. Garner, EdD, FACHE
Vice President/COO
Memorial Hermann Southeast and Pearland Hospitals
Houston

To succeed in the 21st century and set a foundation for organizational adaptability, healthcare leaders must espouse a transformational leadership style. Transformational leaders identify opportunities for change, create a vision to guide the change through inspiration and effectively execute the change with their teams.

These leaders navigate the dynamics of the marketplace, including the changing paradigm from volume to value, the rise of consumerism in healthcare, the leadership of four generations in the workplace, and the delivery of culturally competent care in the increasingly diverse and global communities we serve. The ability of a leader to bring fresh and innovative approaches to different health sectors will help transform our industry.

ACHE helps leaders stay ahead of the curve. I have met many great healthcare leaders locally, nationally and globally through ACHE during the last 15 years who have helped advance my career. In return, I have given back by serving as a mentor, professional and personal reference, and network contact for fellow colleagues.

In addition to the contacts I’ve made, I attend the Congress on Healthcare Leadership to gain new perspectives on health policy and operations from experts in the field.

ACHE also helps me lead with intent, by which I mean to lead in a manner that is transformational and proactive. Healthcare executives who lead with intent negotiate uncertainties in the market and the ever-changing healthcare environment and proactively commit time and energy to executing new and innovative healthcare delivery strategies.

Karin M. Larson-Pollock, MD, FACHE
Senior Director, Value Analytics and Care Systems
Providence Regional Medical Center Everett (Wash.)

Optimizing value in a complex, ever-changing and often fragmented environment presents a great challenge for healthcare executives. As a Peace Corps volunteer in Kenya, I saw very early in my career the critical connection between social determinants and the health and well-being of people and communities. In the United States, our systems often are fragmented, and we tend to focus on our specific piece of the care continuum. Yet, circumstances outside our organizations’ four walls often can be the greatest barriers to optimal outcomes.

As we increasingly move toward value-based models, partnership inside and outside our walls is critical for success. We need to work collectively to improve the health of our patients and communities and learn from others—including other industries—about how to think differently.

To me, leading with intent means understanding a problem, being thoughtful and intentional about the course you choose for solving it, and being mindful of all those affected. Two examples of how we achieve this in our organization are listening to the “voice of the patient” through methodologies such as Design Thinking and listening to the “voice of the caregiver” through High Reliability.

ACHE has helped me lead with intent through leadership development opportunities, mentoring and the opportunity to interact with the best minds in healthcare. Educational offerings are always inspiring, and the networking has enabled me to build on valuable professional relationships while fostering sharing of best practices.

Member, ACHE—SouthEast Texas Chapter
Member, National Association of Health Services Executives—Houston Chapter
Assistant Adjunct Professorship Appointment, Tulane University School of Public Health and Tropical Medicine
Annual Guest Lecturer, Louisiana State University College of Science

Board Member/Co-Chair, Membership and Programs, Washington State Healthcare Executives Forum Chapter, ACHE
Member, ACHE’s Physician Executive Forum Committee
Member, Seattle Children’s Star Guild
Kolby T. Redd, PhD  
Administrator, Clinical Research  
Department of Neurology, University of South Carolina School of Medicine  
Columbia, S.C.

Today’s healthcare executives are challenged with navigating a landscape of treating patients with the care they want, when they want it and how they want it, while patients continue to present with increased comorbidities. Instances of chronic conditions are at an all-time high, and health systems are working to determine how to address this while ensuring their costs are covered in an environment of ever-declining reimbursement.

The most important characteristic required today of an effective healthcare leader is the ability to operate in an ever-changing environment. To be competitive in today’s market, leaders must be able to adapt to change on a regular basis while planning for the future.

Leading with intent means having a specified purpose behind your leadership. I personally lead with a servant leadership style and the intent to provide the best possible care to all patients. When starting a new project or service, research study or clinical trial, I work to ensure patients’ safety and care outcomes are the main focus.

ACHE has helped me achieve my career goals through the networking and educational opportunities it offers. I first became involved in my local ACHE chapter while I was completing my master of health administration degree. Following receipt of my MHA, I completed a postgraduate administrative fellowship I found on the ACHE directory. I remain involved and active in various leadership roles. ACHE helped launch my career and has increased my connections in immeasurable ways.

Elected Director, Board of Directors, South Carolina ACHE Chapter  
Programs and Education Committee Chair, South Carolina ACHE Chapter  
Midlands Local Programming Chapter Chair, South Carolina ACHE Chapter  
Member, American Heart Association National Stroke Committee

Jose Rojas Jr., MD, FACHE  
CMO/Senior Managing Partner  
New Jersey Center for Pain & Rehabilitation LLC  
Elizabeth, N.J.

Uncertainty in the healthcare field has required many healthcare leaders to reinvent themselves and their institutions to comply with new mandates. Many professionals are wondering whether they will have to develop a whole new set of skills and knowledge base to remain financially sustainable. While there is no one characteristic required today to be an effective healthcare leader, there is an ensemble of traits that tends to foster success: patience, accountability and compassion.

Personally, I feel the compassion component of healthcare is getting lost. We’re living in an increasingly diverse society—both culturally and socially—so leaders must make a concerted effort to go out and appreciate the wants and needs of the population. The challenge is to understand those requirements and desires and then bring healthcare to the community.

ACHE helps healthcare leaders meet these challenges because it’s such an education-focused environment. In addition to providing opportunities to meet colleagues, ACHE gives professionals an appreciation for healthcare and a unique perspective. ACHE has helped me, a physician, appreciate the executive component of the field and see healthcare from the other side of the table, so to speak.

The best leaders are those who lead with intent. To me, that means leading in a way that encompasses the mission and vision of a healthcare environment. You have to lead with vision; you have to believe you’re going to get the best outcomes for your community; and you have to create buy-in around that vision. To do that, you need to be patient; you need to be accountable; and you need to come to the table with compassion.

Mentorship Chair, ACHE – NJ  
Former Board Member, National Association of Latino Healthcare Executives  
Member, National Hispanic Medical Association  
Member, American Society of Anesthesiology
Hailey Schepp  
*Director, Meaningful Use/Senior Strategy Advisor*  
Sanford Health  
Fargo, N.D.

Healthcare leaders today must possess fluidity, so they can move proactively with change. Given recent legislation changes, we must focus on operational efficiencies, cost improvement efforts, care quality, and the overall patient and guest experience in an increasingly transparent environment. As reimbursement stakes increase, healthcare leaders must stay ahead of the curve while successfully meeting the needs of their organizations and patients. We must ensure the overall values and visions of our organizations continue to be the foundation of our work.

To stay ahead of the curve, healthcare leaders must have a continuous improvement mindset and stay abreast of proposed changes in healthcare reimbursement and industry trends. Innovation also will allow organizations to rise above the competition, stand out to patients and guests, and remain financially viable.

ACHE, the premier organization for healthcare leaders, can help healthcare leaders stay ahead by providing lifelong learning, connections with over 40,000 healthcare leaders and the opportunity to become board certified in healthcare management. Being a member of ACHE has allowed me to excel in healthcare management and develop relationships with professionals striving to overcome similar challenges in today’s healthcare environment.

Leading with intent involves establishing a sound strategy, inspiring our teams and challenging ourselves. This leadership style focuses on innovation and purpose. As we face challenges with daily operations and long-term strategic planning, we can—and should—empower each other to lead with intent and purpose. Those who lead with intent will make a greater impact on the field.

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John D. Shevock, FACHE, FACMPE  
*Senior Director of Operations, Oncology Service Line/Executive Director, Bayhealth Cancer Institute*  
Bayhealth Medical Center  
Dover, Del.

The accelerated pace of research and development of new treatments are some of the biggest challenges healthcare executives and their clinical partners face. As innovative clinical options become available much faster today than in the past, clinicians and executives must rapidly absorb this information and work together to balance innovation with patient safety.

Healthcare leaders also must be flexible and willing to listen to the clinical team. Leaders’ ability to provide a compassionate ear to clinicians engages the clinical team in striving for the best possible outcomes while growing the relationship between leaders and clinicians.

We are all working toward the same goal: meeting the needs of patients and their families through clinical plans of care. Leading with intent starts with a personal drive to serve the community and patients in their time of need. This drive for quality of care and community service underlies every interaction, decision and goal within the organization.

ACHE provides the foundational elements for all types of leaders—from early careerists to senior executives—to serve patients and their communities and meet their organizational missions and visions. Continuing education and networking opportunities are diverse and plentiful. ACHE members also have access to their local chapters and events tailored to members’ community-specific challenges and opportunities. The FACHE credential is a nationally-recognized symbol of achievement and accountability in the industry. Finally, the opportunity to partner with an ACHE mentor is invaluable.

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President, North Dakota Healthcare Executives Forum  
Membership Chair, North Dakota Rural Health Association  
Former Board Member, North Dakota Hospital Association  
Member, MN Rural Health Association

Chair, Delaware Local Program Council, ACHE  
Board Member, HLNDV Chapter, ACHE  
Member, Delaware Cancer Registry Advisory Committee
Anthony R. Tersigni, EdD, FACHE
President/CEO
Ascension
St. Louis

With the ongoing changes in our industry, I see tremendous opportunities. Ascension is transforming from a system of systems to a healthcare organization with a shared identity focused on supporting the long-term health of individuals and communities. We have a legacy of caring for the “whole person”—their body, mind and spirit. We must make it easier for people to access our services and receive high-quality, safe, coordinated care.

To grow a vibrant healthcare industry and transform care delivery, we must empower tomorrow’s leaders. I am passionate about Ascension’s work to develop the next generation of leaders through our Ascension Leader Institute. We are creating a platform of integrated programs and resources that combine formative development with practical and experiential learning.

For Ascension, our intent is our mission, and our mission is at the heart of all we do. To me, leading with intent as an ACHE Fellow means doing my part to ensure Ascension’s 150,000 caregivers are living our mission every day. Leading with intent also means looking to the future, so we can sustain and grow our healthcare ministry for years to come through the provision of compassionate, personalized care for all.

ACHE plays an important role as the preeminent professional society for healthcare executives. I am pleased to be part of an organization that focuses on continuing education and serves as a conduit for leaders navigating an evolving healthcare landscape.

Col Andrea C. Vinyard
U.S. Air Force
San Antonio, Texas

Healthcare executives today face a wide range of issues in a dynamic environment, both in the military and civilian settings. To help overcome our challenges, we can empower our organizations and support workforce initiatives and creativity in order to deliver high-quality, safe patient care. In addition, leaders at all levels need to encourage the use of evidence-based decisions, eliminate wasteful activities and standardize operations.

The most important characteristic required today to be an effective healthcare executive is to be a strong, accountable leader who can guide his or her organization through today’s dynamic issues into tomorrow. We also need leaders who can form relationships, build trust at all levels across the organization, take risks to move forward and be humble enough to learn from their mistakes.

ACHE has provided me with the opportunity to continue learning and developing as a healthcare leader, and it also has allowed me to gain a better understanding of the local healthcare environment and to meet peers and mentors across the country. As the healthcare industry is constantly changing, active participation is essential to personal and professional growth.

For me, leading with intent means having a purpose that allows the organization to focus, create effective change and achieve our goals. Leading is a privilege and a humbling experience I learn from every day.

ACHE Management Series Editorial Board
ACHE CEO Roundtable
Air Force Medical Service Senior Council and Developmental Team Member, 2015–2016
Treasurer, International Association of Emergency Managers, IAEM Region 10 (2011–2013)
**SELECTED FINANCIAL DATA**

Consolidated Statements of Financial Position as of Dec. 31, 2016 and 2015

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<thead>
<tr>
<th>Assets</th>
<th>2016</th>
<th>2015</th>
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<tr>
<td><strong>Current assets:</strong></td>
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<tr>
<td>Cash and cash equivalents</td>
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<td>Accounts receivable, less allowance for doubtful accounts</td>
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<th>Liabilities and Net Assets</th>
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<td><strong>Current liabilities:</strong></td>
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<td>71,485,493</td>
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| Total liabilities and net assets | 91,479,378 | 87,375,336 |

* For a complete copy of ACHE's audited financial statements or other financial information, please contact the vice president of Finance and Administration at (312) 424-9330.
### Consolidated Statements of Activities and Changes in Net Assets, Years ended Dec. 31, 2016 and 2015

#### Revenue

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<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
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<tr>
<td>Membership dues and fees</td>
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<td>$ 8,136,215</td>
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<td>Educational programs</td>
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<td>10,330,553</td>
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<td>5,818,846</td>
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<tr>
<td>Contributions, grants and net assets released from restrictions</td>
<td>1,666,143</td>
<td>1,276,280</td>
</tr>
<tr>
<td>Royalties and fees for service</td>
<td>448,142</td>
<td>1,227,161</td>
</tr>
<tr>
<td><strong>Total revenue</strong></td>
<td><strong>26,720,883</strong></td>
<td><strong>26,789,055</strong></td>
</tr>
</tbody>
</table>

#### Functional Expenses

**Program expenses**

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educational programs</td>
<td>6,064,906</td>
<td>5,967,601</td>
</tr>
<tr>
<td>Books and journals</td>
<td>4,920,419</td>
<td>4,997,992</td>
</tr>
<tr>
<td>Professional development and other</td>
<td>3,763,772</td>
<td>3,698,940</td>
</tr>
<tr>
<td><strong>Total program expenses</strong></td>
<td><strong>14,749,097</strong></td>
<td><strong>14,664,533</strong></td>
</tr>
</tbody>
</table>

**Supporting services**

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support activities</td>
<td>11,754,082</td>
<td>10,324,367</td>
</tr>
<tr>
<td>Fundraising activities</td>
<td>240,455</td>
<td>212,416</td>
</tr>
<tr>
<td><strong>Total supporting services</strong></td>
<td><strong>11,994,537</strong></td>
<td><strong>10,536,783</strong></td>
</tr>
</tbody>
</table>

**Total expenses**

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>26,743,634</td>
<td>25,201,316</td>
</tr>
</tbody>
</table>

#### Revenue in excess of expenses from operations

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(22,751)</td>
<td>1,587,739</td>
</tr>
</tbody>
</table>

#### Non-operating:

- Net investment income: 5,108,852 (1,090,739)
- Gain on fixed asset disposal: -625
- Board designated funds: uses: (274,318) (287,554)

#### Change in unrestricted net assets

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Change in unrestricted net assets</td>
<td>4,811,783</td>
<td>210,071</td>
</tr>
</tbody>
</table>

#### Change in temporarily restricted net assets

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Change in temporarily restricted net assets</td>
<td>193,318</td>
<td>(327,088)</td>
</tr>
</tbody>
</table>

#### Change in total net assets

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Change in total net assets</td>
<td>$ 5,005,101</td>
<td>$(117,017)</td>
</tr>
</tbody>
</table>

### Consolidated Statements of Cash Flows, Years ended Dec. 31, 2016 and 2015

#### Cash flows from operating activities

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Change in net assets</td>
<td>$ 5,005,101</td>
<td>$(117,017)</td>
</tr>
<tr>
<td>Adjustments to reconcile change in net assets to net cash provided by operating activities</td>
<td>(4,169,877)</td>
<td>441,593</td>
</tr>
<tr>
<td><strong>Net cash provided by operating activities</strong></td>
<td>835,224</td>
<td>324,576</td>
</tr>
</tbody>
</table>

#### Cash flows from investing activities

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net cash used in investing activities</td>
<td>(1,422,574)</td>
<td>140,117</td>
</tr>
<tr>
<td>Change in cash and cash equivalents</td>
<td>(587,350)</td>
<td>464,693</td>
</tr>
</tbody>
</table>

#### Cash and cash equivalents, beginning of year

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and cash equivalents, beginning of year</td>
<td>8,037,596</td>
<td>7,572,903</td>
</tr>
</tbody>
</table>

#### Cash and cash equivalents, end of year

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and cash equivalents, end of year</td>
<td>$ 7,450,246</td>
<td>$ 8,037,596</td>
</tr>
</tbody>
</table>
2017 PREMIER CORPORATE PARTNERS
The American College of Healthcare Executives is proud to recognize and thank our 2017 Premier Corporate Partners. The funding ACHE receives from our Partners helps support our high-quality programs. Please thank our Partners for their commitment to ACHE and for helping us advance healthcare management excellence. For more information, please visit ache.org/CorporatePartners.
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Charles D. Stokes, FACHE
President/CEO
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Term ends: 2018

CHAIRMAN-ELECT
David A. Olson, FACHE
Chief Strategy Officer
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Term ends: 2018

IMMEDIATE PAST CHAIRMAN
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President/CEO
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Columbus, Ohio
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Term ends: 2018

PRESIDENT/CEO
Deborah J. Bowen, FACHE, CAE
President/CEO
American College of Healthcare Executives
dbowen@ache.org
BOARD OF GOVERNORS

Anthony A. Armada, FACHE
Managing Partner/CEO
AA Armada Associates
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anthonyaarmada@aol.com
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John Botsko Jr., FACHE
Owner/President
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botsko@brightstarcare.com
Term ends: 2019

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Term ends: 2018

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Term ends: 2019

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Term ends: 2020

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Health Partners Plans
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Term ends: 2020

Carrie Owen Plietz, FACHE
Executive Vice President/COO, Hospital Division
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Valerie L. Powell-Stafford, FACHE
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Term ends: 2018

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Term ends: 2018

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Term ends: 2018

David L. Schreiner, FACHE
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Term ends: 2019
DISTRICT 1
Canada, Connecticut, Delaware, Maine, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, Vermont

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Term ends: 2020

REGENT FOR CONNECTICUT
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Term ends: 2019

REGENT FOR DELAWARE
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Term ends: 2020

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Term ends: 2019

REGENT FOR NEW YORK—NORTHERN & WESTERN
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Term ends: 2020

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Term ends: 2020

REGENT AT-LARGE FOR DISTRICT 1
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Term ends: 2020
DISTRICT 2
District of Columbia, Florida, Georgia, Maryland, North Carolina, Puerto Rico, South Carolina, Virginia, West Virginia

REGENT FOR DISTRICT OF COLUMBIA & NORTHERN VIRGINIA
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COO
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Term ends: 2018

REGENT FOR FLORIDA—EASTERN
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Term ends: 2019

REGENT FOR FLORIDA—NORTHERN & WESTERN
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Term ends: 2020

REGENT FOR GEORGIA
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Term ends: 2018

REGENT FOR MARYLAND
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Term ends: 2020

REGENT FOR NORTH CAROLINA
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Cirra inc.
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Term ends: 2020

REGENT FOR PUERTO RICO
Pedro F. Barez, FACHE
COO
Hospital Episcopal San Lucas
Ponce, Puerto Rico
pedro.barez@ssepr.org
Term ends: 2018

REGENT FOR SOUTH CAROLINA
Adam Allen, FACHE
Executive Vice President/COO
PHT Services Ltd.
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aallen@phts.com
Term ends: 2020

REGENT FOR VIRGINIA—CENTRAL
John P. Harding, FACHE
COO
Children’s Health System
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Term ends: 2020

REGENT FOR WEST VIRGINIA & WESTERN VIRGINIA
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Vice President, Ambulatory Services/President, CAMC Physicians Group
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jeff.goode@camc.org
Term ends: 2019

REGENT-AT-LARGE FOR DISTRICT 2
Suzanne B. Jackson, FACHE
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HCA/CareNow
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suzanne.jackson@hcahealthcare.com
Term ends: 2018
DISTRICT 3
Illinois, Indiana, Iowa, Kentucky, Michigan, Minnesota, Nebraska, North Dakota, Ohio, South Dakota, Wisconsin

REGENT FOR ILLINOIS—CENTRAL & SOUTHERN
Daniel L. Perryman, FACHE
Healthcare Executive
Term ends: 2020

REGENT FOR ILLINOIS—METROPOLITAN CHICAGO
Rupert M. Evans Sr., DHA, FACHE
Professor/Chairman/Program Director
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Term ends: 2020

REGENT FOR ILLINOIS—CENTRAL & SOUTHERN
Daniel L. Perryman, FACHE
Healthcare Executive
Term ends: 2020

REGENT FOR ILLINOIS—METROPOLITAN CHICAGO
Rupert M. Evans Sr., DHA, FACHE
Professor/Chairman/Program Director
Governors State University
University Park, Ill.
revans@govst.edu
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REGENT FOR IOWA
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Mercy Health Network
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Term ends: 2019

REGENT FOR KENTUCKY
Carl R. Whittenburg, FACHE
Assistant Vice President, Primary Care
St. Elizabeth Physicians—Corporate Office
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carl.whittenburg@stelizabeth.com
Term ends: 2019

REGENT FOR NORTH DAKOTA
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Valley City, N.D.
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Term ends: 2020

REGENT FOR OHIO
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Site Administrator/Director of Business Development
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twashienko@gmail.com
Term ends: 2020

REGENT FOR SOUTH DAKOTA
Mark Schulte, FACHE
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mschulte1@regionalhealth.org
Term ends: 2019

REGENT FOR WISCONSIN
Andrew M. Hillig, FACHE
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Ascension Wisconsin
Glendale
andrew.hillig@ascension.org
Term ends: 2019

REGENT-AT-LARGE FOR DISTRICT 3
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Term ends: 2018

REGENT FOR MINNESOTA
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Term ends: 2020

REGENT FOR NEBRASKA & WESTERN IOWA
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nizar.wehbi@unmc.edu
Term ends: 2020

REGENT FOR MINNESOTA
Mark A. Sonneborn, FACHE
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msonneborn@mnhospitals.org
Term ends: 2020

REGENT FOR NEBRASKA & WESTERN IOWA
Nizar K. Wehbi, MD, FACHE
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Term ends: 2020
DISTRICT 4
Alabama, Arkansas, Kansas, Louisiana, Mississippi, Missouri, New Mexico, Oklahoma, Tennessee, Texas

REGENT FOR ALABAMA
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REGENT FOR ARKANSAS
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Term ends: 2019

REGENT FOR KANSAS
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Term ends: 2018

REGENT FOR LOUISIANA
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suttonm@northoaks.org
Term ends: 2018

REGENT FOR MISSISSIPPI
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dmcelmurray@glh.org
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REGENT FOR MISSOURI
Katherine Nowak, FACHE
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Mercy
Chesterfield, Mo.
katherine.nowak@mercy.net
Term ends: 2020

REGENT FOR NEW MEXICO & SOUTHWEST TEXAS
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Term ends: 2019

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REGENT FOR TENNESSEE
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Term ends: 2020

REGENT FOR TEXAS—CENTRAL & SOUTH
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Term ends: 2019

REGENT FOR TEXAS—NORTHERN
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University of North Texas Health Science Center
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Term ends: 2018

REGENT FOR TEXAS—SOUTHEAST
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Clear Lake Regional Medical Center
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Term ends: 2020

REGENT—AT-LARGE FOR DISTRICT 4
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Term ends: 2018
DISTRICT 5

REGENT FOR ALASKA
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REGENT FOR ARIZONA
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REGENT FOR CALIFORNIA—NORTHERN & CENTRAL
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Term ends: 2019

REGENT FOR CALIFORNIA—SOUTHERN
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Term ends: 2020

REGENT FOR COLORADO
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REGENT FOR HAWAII/PACIFIC
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Term ends: 2018

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Term ends: 2020

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Term ends: 2018
ACHE DISTRICTS AND COUNCIL OF REGENTS

ACHE members are assigned to one of six administrative districts based on where they work. Five of these districts are geographic segments of the United States, Canada and U.S. territories. The sixth district is for the members employed by the uniformed services or Veterans Affairs.

These administrative districts serve as the mechanism by which your elected leaders come together to discuss important issues that affect ACHE members and to provide advice and counsel to the Board of Governors.

This map shows the geographic division of the administrative districts.
DIRECTORY OF SERVICES

AMERICAN COLLEGE OF HEALTHCARE EXECUTIVES
One North Franklin Street, Suite 1700
Chicago, IL 60606-3529
(312) 424-2800
Fax: (312) 424-0023
Email: contact@ache.org
Website: ache.org

ACHe/HAP ORDER FULFILLMENT CENTER
P.O. Box 75145
Baltimore, MD 21275-5145
(301) 362-6905
Fax: (240) 396-5907

Executive Office
President/CEO .................................. Deborah J. Bowen, FACHE, CAE ... (312) 424-9493

Programs and Services
ACHe Employment Service
Job Center .................................... Belinda Contreras .................. (312) 424-9446
ACHE-news ................................... Rody Abdelrahman .......... (312) 424-9425
ache.org ..................................... Rody Abdelrahman .......... (312) 424-9425
Annual Report and Reference Guide ........ John M. Buell .............. (312) 424-9424

Awards
ACHe Recognition Program ............. Gerard J. Berish, CAE ...... (312) 424-9323
Article of the Year ....................... Gerard J. Berish, CAE ...... (312) 424-9323
Book of the Year ......................... Gerard J. Berish, CAE ...... (312) 424-9323
Gold Medal ............................... Gerard J. Berish, CAE ...... (312) 424-9323
Lifetime Service ......................... Gerard J. Berish, CAE ...... (312) 424-9323
Young Healthcare Executive of the Year .... Gerard J. Berish, CAE ...... (312) 424-9323

Board of Governors Examination in Healthcare Management
Information ................................... Julianna Kazragys, CAE .. (312) 424-9377
Registration ................................... Customer Service Center .. (312) 424-9400
Career Resource Center .................. Michael A. Broscio, CMF .. (312) 424-9444
CEO Circle .................................. Tammy L. Dillard-Steels, CAE (312) 424-9328

Chapter Support .......................... Desmond J. Ryan, FACHE, CAE (312) 424-9325
Field Services and Support for Regents and Chapters
Districts 1, 5 .............................. Gerard J. Berish, CAE ...... (312) 424-9323
Districts 2, 4 .............................. Terra L. Levin, FACHE, CAE .. (312) 424-9329
Districts 3, 6 .............................. Tammy G. Dillard-Steels, CAE .. (312) 424-9328

Communications and Marketing ........... Eva Chess, JD ................ (312) 424-9420

Congress on Healthcare Leadership
Logistics Information .................... Alec S. Rosofsky, CMP, CAE .. (312) 424-9352
Programming Information ............... Angela M. Worlds ........ (312) 424-9351
Registration ................................... Customer Service Center .. (312) 424-9400
Corporate Partnership Program ........... Timothy R. Tlusty .......... (312) 424-9305
Diversity and Inclusion .................. Cie Armstead ............... (312) 424-9306
Dues, Fees and Billing .................... Alex Soto ..................... (312) 424-9335
Ethics ...................................... Cynthia A. Hahn, FACHE, CAE (312) 424-9371
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