Ronald L. Copeland, MD, FACS assumed leadership of the Ohio Permanente Medical Group (OPMG) on January 13 of this year. Dr. Copeland is determined to build upon the organization’s current strengths in order to secure its continued viability. His aggressive strategy calls for reorganization of OPMG as well as for restructuring the delivery system. According to Dr. Copeland, the upcoming year will challenge the organization’s “will.” However, he is determined to lead the Medical Group into a professionally superior and financially sound new century.

**OPMG’s New Head Seeks “Will” to Secure KP-Ohio Future**

With a determination to build upon the strengths that the Ohio Permanente Medical Group (OPMG) has established, Ronald L. Copeland, MD, FACS assumes leadership of the nearly 35-year-old organization as its new President and Medical Director. Stepping up from his previous position as Vice President and Associate Medical Director, Dr. Copeland is focused on making the Kaiser Permanente model work in the 21st century.

**Diversity and Opportunity**

As the first African-American medical director in the history of Kaiser Permanente, Dr. Copeland is a key player in the organization’s commitment to embrace diversity. While businesses and governments nationwide are reexamining affirmative action policies, Dr. Copeland says the ideal approach would be a new system that “creates opportunities based on talent, character, and performance, while eliminating barriers to success for women and minorities.” He is a member of the Kaiser Permanente National Diversity Council, which authored the “Strategic Plan for Diversity.” The Council spells out the bottom-line benefits and competitive advantages to be gained from diversity management. In order to be effective, Dr. Copeland advises that diversity management must pervade every level of the organization, even reaching senior management.

**Current Challenges**

Although the current model is responsible for making OPMG a leader in the area, Dr. Copeland warns, “In order to ensure our success in the future, we can not continue to operate in the same manner as we have for 30 years.” He prescribes a commitment toward active integration between the Health Plan and the Medical Group in the upcoming year. In addition, he is challenging the Medical Group to rise to the occasion and demonstrate true ownership of the delivery system. He is committed to maintaining the Health Plan’s nonprofit status, an interest aligned with the social purpose of the organization.

Currently, HMO’s are challenged with questions of ethics and interference with the traditionally inviolable patient-doctor relationship. Dr. Copeland wants to improve pervading public misconceptions about managed care by emphasizing and demonstrating that OPMG physicians’ primary commitment is to quality of care, not to cutting costs. Furthermore, Dr. Copeland notes the current nature of the health care industry sometimes sets up a nearly impermeable relationship between the patient, insurers/health plans, and employers to the exclusion of practitioners. He feels that publicly advancing the Medical Group’s meaningful contributions may be one significant way in which to gain entry into that relationship.

Kaiser Permanente’s size—about 29% of the managed care market in Northeast Ohio—makes it the largest in the region, next to Medical Mutual of Ohio (formerly Blue Cross-Blue Shield of Ohio).
Dr. Copeland feels that Kaiser Permanente’s size is a significant asset in an environment in which health care organizations will have to be part of an extensive network.

**Prescription for Turnaround**

By working in partnership with Health Plan leadership, Dr. Copeland’s two-part strategy calls for reorganization of OPMG and restructuring the health care delivery model, including facility-level modifications to reduce fixed costs and rapidly return the group to financial viability.

Another prospective goal of the partnership is to challenge the fee-for-service predominance in the local market through creation of a new value proposition focusing on quality.

One illustration of this would be integration of information technology into the care experience at levels that are palpable for physicians and patients.

Information technology is clearly part of our future and has the potential to add significant value in the areas of quality care, patient education, and outcome-based performance.

**The Year Ahead**

Dr. Copeland joined OPMG in 1988, and his position as an insider may serve as one of his greatest assets. He says the past 30 years have been less than maximally progressive because of the Medical Group’s tendency to look inward for solutions. His extended tenure in the organization sustains his belief that in 1998 and beyond, some solutions may lie outside the organization, and OPMG must have the courage to pursue them.

Like the physicians he will be overseeing, he sees the challenges that lie ahead as a glass half full. He asserts, “There is a solution in Ohio. In 1998, we need to find it, frame it, and execute it. As far as I am concerned, failure is not an option.”

❖