

We, the Physician Leadership of the medical staff at Hennepin Healthcare System (HHS), are writing to you in response to recent events and communications involving HHS organizational leadership, the HHS board, and their relationship with the Hennepin County Board, which have raised significant concerns within our physician/advanced provider group. **We are alarmed over false representations of our health system which are leading to a call for dissolution of our HHS Governing Board and removal of our CEO.** These public outcries and potential actions WILL threaten the mission and survival of Hennepin Healthcare as a premier academic Level 1 Trauma and safety net.

First and most importantly, know that we are passionate about what we do; the mission of HHS is felt deeply within the organization, and there is unity and shared purpose with respect to providing the very best care for all Minnesotans, but especially the most vulnerable in our local community. We are of one mind and purpose as frontline workers, and we are united with the nurses, social workers, environmental services staff and the 7000 humans who share this vital mission when we provide this care together.

Our 726 physicians and 414 Advanced Practice Providers are critically important to the function and ability of our health system to achieve our mission. While the delivery of health care is truly a team endeavor, physicians and advanced practice providers have a foundational role and responsibility to ensure the delivery of high quality medical care, in close/direct collaboration with our executive team and the HHS board.

We are a committed and highly skilled medical group; nearly 87% of our HHS physicians trained at HHS, and many have stayed with the organization for decades. We are the 3rd largest teaching hospital in the state; one of the largest medical research nonprofits in Minnesota; and rank in the top ten percent nationally of all institutions receiving research grants from the National Institute of Health (NIH.) Our physician practice group has some of the lowest turnover and highest engagement in the nation despite very challenging working conditions. Physicians and other providers come here and stay here because of the mission, despite more challenging working conditions and the fact that the moral distress of societal inequity is more evident here.

Our executive group also shares this work and this sense of mission. While healthcare delivery is highly complex, healthcare finance, regulation and community integration are also highly complex, and HHS functions in some of the least favorable conditions of healthcare delivery. We care for everyone who comes to us; we serve a population who often face significantly more challenges medically and socially than others, who often have less favorable financial/insurance status, and who often are more difficult to find homes or supportive/safe

environments for outside of the acute care setting. Because of this, Hennepin has faced greater financial challenges than other health systems throughout its existence; this year is no different in that regard. Changing governance and leadership will not change these facts.

Our history at HHS is noteworthy, and truly sets us apart from other public teaching hospitals. On January 1, 2012, Hennepin Faculty Associates, a Physician group practice who for decades provided medical care at HCMC, integrated with Hennepin County Medical Center to create a fully integrated public teaching and safety net hospital, one of the very few of its kind in the nation. This construct was the product of nearly 2 years of bimonthly steering committee meetings and co-creation by 6 HFA physicians and 6 Hennepin County/HCMC leaders. The vision was clear: *the talent and commitment that has made our organizations strong will now be woven together to create incredible strength as one health care system serving the health care needs of our community and region.* Our integrated system of care, with significant physician/provider involvement and strategic oversight by a skilled community Board of Directors in partnership with the County, sets us apart and positions us well to achieve our mission.

One of the critical tenets of this agreement was a dependence on a separate and distinct Hennepin Healthcare System Governing Board. The composition of the board was essential: 14 diverse community members *who possess a high degree of experience and knowledge in relevant fields and an interest in the organization and support for its mission.* Two board positions were assigned to physicians employed by the practice group, and two were assigned to elected Hennepin County Commissioners. There was wisdom to this composition– voices from our community should govern our strategy, while Physicians would bring a frontline voice to our sustainability and focus, and County Commissioners would gain deep expertise and provide a duty of loyalty to the organization. We continue to feel strongly that this configuration and the existence of this board is critical to our shared success.

On March 26, 2024, Irene Fernando, Hennepin County Commissioner/Board Chair and Hennepin Healthcare Board member, testified before a House Committee in support of HF4744. During this testimony, she implored that it is *“imperative that we listen to the people, to the workers who are the frontline of keeping our community healthy...we welcome any and all tools to exercise oversight that you might grant me and my colleagues on the Hennepin County Board.”* During the same testimony, Jeremy Olsen-Ehlert, the MNA HHS Co-Chair further commented that *“During the HHS budget conversations at the end of last year, nurses heard from commissioners that they had deep concerns about the budget and the lack of meaningful investment in workers.”* Shortly thereafter, MNA employee John Ewaldt wrote on the MNA

Facebook page: ***"HHS nurses are crushing it. We are demanding the dissolution of the HHS board and the termination of the CEO. Let's Go."***

It appears that HF4744 is a partnership between our County Commissioners and MNA. We fear this is a step towards complete dissolution of our diverse and dedicated community board, and removal of our CEO, who together through a pandemic and the murder of George Floyd, have provided fiduciary oversight with a focus on equitable, high quality outcomes for our community. This proposed action is a direct violation of a trusted agreement established in 2012, and a threat to our entire ecosystem that is Hennepin Healthcare.

We recognize that an elected county Commissioner has both a duty to one's constituents and a duty to one's role on the Board of Directors, and the two can be in conflict. What is difficult but critically important is that both elected officials and other board members (including physician members) function with integrity in the designated roles on the HHS board. While we recognize the significant difficulty this presents, we believe that not do so jeopardizes our mission and our function in this community and erodes trust from our patients. Two Hennepin County Commissioners have served on our HHS Board since its inception. As a member of the Board, each has a responsibility for the oversight of the hospital's financial health and sustainability. Moreover, they oversee the strategy of the organization and adherence to mission, vision and values. It is very concerning that Commissioners (one of whom served on the Finance Committee of the HHS board for all of 2023) attend these meetings monthly and carry a fiduciary duty of care expected of a Director, yet have expressed publicly a lack of transparency over decision-making.

The pursuit of the removal of Ms. DeCubellis as CEO and dissolution of our governing board puts real risk to the viability of this organization in the following ways:

1. Our mission to serve the underserved as a state-wide resource becomes jeopardized—modern healthcare is complex and in crisis. A County Commissioner is unlikely to have the time nor the expertise to shepherd us through financial and other structural challenges, maintaining and modernizing our campus, and recruiting top talent in leadership.
2. If our diverse, committed community board dissolves (either through resignation because of public disparagement or through dissolution) our complex health system becomes subject to politicized decision-making.
3. Our excellence as an academic institution is no longer preserved and protected. As recently as 2023, Commissioners have questioned our mission as a teaching hospital and research organization—both of which are critical to the health of our community.
4. Our ability to recruit or retain a highly qualified, highly committed mission-driven CEO to a financially challenged safety net is challenging if not impossible.

5. An integrated physician practice group is a strategic asset to HHS. It was created through trust and respect in 2012. Even the threat of board dissolution can lead to a loss of key specialists, thereby putting our leadership and excellence in key services at risk.

Healthcare is complex and the financial viability of a safety net institution is even more challenging. **We believe that the workforce is fragile and fostering cooperation and trust between a high performing Community Board of Directors, our CEO, and committed County Commissioners would most benefit our organization moving forward. We also believe that we must continue to support our colleagues, supporting a healthy work environment for everyone.** Open and inaccurate disparagement of our organization and its quality/safety is not productive and creates greater distrust of the care we provide to our community. Public commentary by elected officials should bolster and highlight the strengths of our organization. Our mission is vitally important, and we are concerned that it is currently being jeopardized by misrepresentation of our current conditions and inadequate collaboration within the oversight constructs currently in place.

**Who will be accountable** for the loss of the diversity, experience, and dedication of a carefully recruited community board if these actions continue?

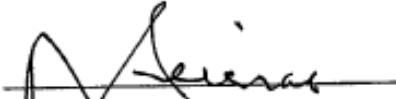
**Who will be accountable** for the loss of a committed integrated physician practice group who invests in our community every day, and believes in the organization?

**Who will be accountable** when irreparable injury happens to Hennepin and our patients as a product of stalled decisions, poor investment, and finger-pointing?

We invite Commissioner Fernando and other County Commissioners to meet with our Physician Leaders in the next two weeks.



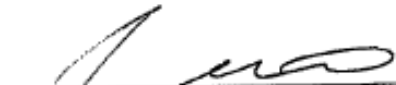
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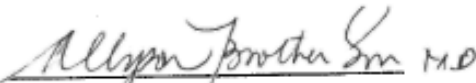
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Rick Odland, MD, PhD

Rick Odland, MD, PhD (Interim)  
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Chair, Department of Emergency Medicine



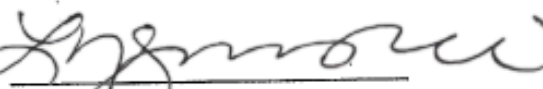
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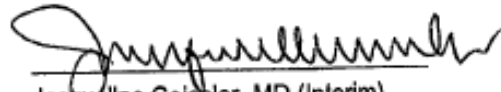
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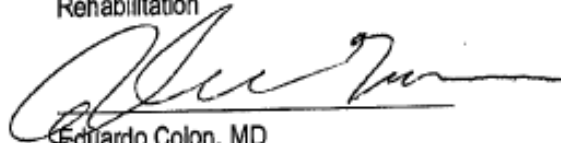
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