

Thanks to the extraordinary commitment and expertise of AHLA leaders, the American Health Lawyers Association continues to thrive and serve as the essential health law resource in the nation. The Association's strong foundation reflects a history that is vibrant, meaningful and worth sharing. Finding a way to preserve AHLA's history was especially relevant in light of the Association's 50th Anniversary, which was celebrated throughout 2017.

Conversations between AHLA leaders were conducted via audio interview as part of the Association's History Project. More than 60 of AHLA's Fellows and Past Presidents were interviewed. In addition, several were also videotaped. A documentary was prepared using content from the audio and video interviews and debuted on June 26 during AHLA's 2017 Annual Meeting in San Francisco, CA. This transcript is from a video interview conducted on x date.

March 28, 2017

Dennis Woltering (videographer) interviewing Almeta Cooper:

Dennis:	Tell us about your personal journey into health law. How did it begin? What did you do? Why did you go into health law?
Almeta:	When I graduated from law school I worked at a law firm in Chicago. I was very fortunate to do some work for a partner who at that time represented more physician associations than any other lawyer in the country. It was just very interesting work. When I decided that I wanted to do something else, I happened to be a graduate of Northwestern University Law School, and there was a position at the American Medical Association. I was selected for that position. I have been in health law ever since that time, since 1979.
Dennis:	How did you become involved with Was it the National Health Lawyers Association at that time?
Almeta:	I was on the academy side.
Dennis:	The academy side. How did you become involved with that?
Almeta:	Yes. I was very fortunate that BJ Anderson, she was the general counsel and she was the deputy general counsel, encouraged me to participate in the academy activities, otherwise I would not have really been informed about it. They encouraged me to go to meetings and to get involved. That's how I began.
Dennis:	What was your interest?
Almeta:	Well, I did a lot of work with graduate medical education when I was at the AMA. I was the legal council for the LCME, which is the undergraduate medical accrediting body and the ACGME, which is the accrediting body for residents in training programs. I just began volunteering with different activities, doing table topics, which was something that was kind of an entryway at that time to being involved with the association. After that, I just gradually became involved with other aspects of the association.
Dennis:	What does that mean, doing table topics? Presentations and that kind of thing?
Almeta:	Yeah. On the academy side we had subject matter discussions which were done at either lunchtime or breakfast time during the time of the annual meeting. People would be able to

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gather and talk about a very specific topic that they were interested in. That's what the table topics were at that time.

Dennis: You were there when the academy merged with the National Health Lawyers Association.

- Almeta: I was. I was actually the last board member to serve from the academy and then to serve on the merged board because after that I became president. It was a very exciting time. We were very fortunate to have the vision of the leaders who were in both associations at that time to recognize that we could be better as one association than as two.
- Dennis: On the academy side, what were the thoughts before the merger? As you approached the merger was there concern, anxiety, or was it just this is going to be a great thing for us?
- Almeta: Well, naturally lawyers as a group I think are a bit conservative, so everyone was concerned. Would we be able to sustain the values and the quality programming that we had had before? There was a lot of overlap already. Many people belonged to both the National Health Lawyers and the academy. In the end when the two cultures merged it wasn't quite as challenging as some people had concerns about. It was just a great idea. I think it's eliminated a lot of duplication and allowed us to be even better.
- Dennis: Talk to me about the culture of the academy. Before the merger, what was the ... How would you describe the culture?
- Almeta: Well, I think the main difference if you were to talk to people, we had a more ... A meeting that included families. At that time we had kind of a formal dance on the last night of the program, which was eventually eliminated. We had developed as a part of trying to give quality educational program, we had developed programs that were called special ... It was called , but I never can remember the entire acronym. The were another opportunity for people who had similar interests to gather around a common topic and really delve into that topic in-depth.

Mainly the other thing that we did with those special interest subject matter committees, which eventually have evolved into the practice groups, we also began at that time, which was considered very revolutionary, we had webinars and used the internet. Made education more accessible to people who couldn't get to meetings.

I think those were probably the two things. Our meetings were longer, it was more involved with our family, and we were able to make those changes. Some of the later presidents shortened the meeting and incorporated in a different way some of the social aspects.

- Dennis: It was more social than AHLA perhaps or not?
- Almeta: When I say social I just mean that there were in addition to the substantive meetings, there was an opportunity for more personal interaction than I guess it was perceived that there was on the AHLA side.
- Dennis: Okay. You became president. After the merger you were the first president then after the merger? Is that correct?
- Almeta: No, I wasn't the first president after the merger. I was the first president who was ... I was the last member of the merged board who became president.

Dennis: Okay.

Almeta:	There were others who proceeded me right after the merger.
Dennis:	Right. I believe it was 2003, 2004.
Almeta:	Right.
Dennis:	In that period some place.
Almeta:	Right.
Dennis:	You were the first African American woman president.
Almeta:	Yes.
Dennis:	That had to be a very special honor in some ways.
Almeta:	Absolutely. One of the things that I think is really a credit to the association, when I first started attending meetings there were literally about five African American healthcare lawyers who were attending the annual meetings. Gayle Hasbrook, Ed Robinson, Yvonne Bryant, Brent Henry. I could actually sort of name the people that I would see that meetings. Now I couldn't possibly begin to name all of the very diverse lawyers that we have in the association.
	One of the things, not only in AHLA but in any organization if you want to promote diversity, you really have to reflect it in your leadership. I think one of the positives about me having been president of the association is that that message was there in a very tangible way that our association could be inclusive and welcome very diverse individuals into the association.
Dennis:	When you were president what were the issues, what were the challenges, and what were the accomplishments?
Almeta:	When I was president fortunately we were in a fairly secure financial time. We were able to maintain a positive revenue balance. We worked on a strategic plan. One of the things that I'm proud of is that I was a person who appointed Beth Schermer to do the year in review. That was very, very successful.
	Also, one of the other activities that we had at that time were the public interest symposiums where we would focus on a particular area. That was very good. At that time we were really developing and refining our public interest mission and trying different avenues to promote public interest. I really enjoyed being able to be a part of that.
Dennis:	Tell me about some of the public interest issues that you dealt with and how you promoted or gave the public access to those.
Almeta:	In terms of public interest symposiums, we would take a particular topic, privacy for example, and get experts from around the country together in a room. Really spend a day focusing on that topic, then produce a white paper that we could make available to the general membership. People would be able to get kind of thought leadership on a particular area.
	Also, I think because we are lawyers, and part of being a lawyer in the profession is not just to do activities that enhance our professional expertise but also to be a part of the larger community, we wanted to always be sure that we had some activities which would also be helpful to our clients and to the public. In subsequent years we've had many publications that

we've done that were produced at no cost and on various topics that really were helpful to our clients and to our members.

Dennis:	As an example?
Almeta:	We've done emergency responsiveness, emergency preparedness. Right now I
Dennis:	Was it the death and dying? Was that in that same period?
Almeta:	Death and dying.
Dennis:	Okay.
Almeta:	I think we also had done that. There have been so many it's really kind of hard to list them all, but on a variety of topics like that where we could really get that message out and help people be able to be able to respond and to be able to see what the best practices are in the Currently.
Dennis:	Strategic plan was an issue that you dealt with as I understand.
Almeta:	Right. Well, one of the things about an association and about healthcare law, I think most of the times that people are focused on the fact that it's always changing, but even though it's always changing it's really important to have a direction and a pathway that you're going.
	We've always as an association tried to make sure that we did have some strategic goals to make sure that we were not stagnant, that we were responsive to the way healthcare is changing. That was part of the strategic plan.
Dennis:	You have promoted in your time with the association diversity.
Almeta:	Yes.
Dennis:	Bringing in different people and different points of view.
Almeta:	Well, to me I think what's really important is that our association has to be inclusive and diverse in every sense of the word. Sometimes it is more comfortable to have people who are like you and think like you, but I think what really advances the association is to have that diversity of ideas, to include individuals in leadership who have not taken perhaps a traditional path as some have in terms of working first in the practice groups and doing writing for the publications.
	If we have individuals who are either from small practices or who have been involved in different aspects of healthcare, all of those voices really make us a stronger and better association. I've really advocated for that. I also think it's important for us to have mentorship and to make sure that we are reaching out to new members and being accessible.
	That's one of the things that I personally have tried to do is to really encourage people, especially when I talk to young lawyers, to really tell them about the benefits of having the opportunity to interact with leaders in healthcare, with peers in healthcare, and to get out of your office and really get Know more about the larger community in healthcare because it makes you a better lawyer. The people that you meet along the way make you a better person.
Dennis [.]	You received the David L Greenberg Award

Dennis: You received the David J. Greenberg Award.

- Almeta: I was very excited and honored to receive the David J. Greenberg Award. There's probably nothing more rewarding than to be recognized by your peers. I didn't have the pleasure of knowing David J. Greenberg personally, but I do know I have a lot of colleagues and friends who did know him. To be able to be seen as someone who's made a positive contribution to healthcare law and to the association is really personally rewarding.
- Dennis: He was sort of a pioneer in this whole area.
- Almeta: David was a pioneer in the whole area of healthcare law. He was here in Washington, D.C. There are a lot of my peers who did have the opportunity to know him and work with him. He really literally gathered people in his home and encouraged them and talked about healthcare law at a time ... Now we kind of take it for granted because we're so evolved and sophisticated in terms of healthcare law, but at that time it was considered a relatively new area of the law.

When you would go to annual meeting you could literally see everyone at the meeting. Now, our meetings are very large and you don't always know who is there at the meeting. David really is to be commended. There are some other icons who were along with him who really had the vision to recognize and to see how healthcare law was going to become an integral part of the healthcare scene in the United States.

- Dennis: Looking back what are some of your more memorable important roles in the association and in healthcare law?
- Almeta: I have always enjoyed the graduate medical education side. Before I joined the board I was the chair of the teaching hospitals committee. That was very rewarding. I served as the public interest chair. That was very, again, very personally rewarding. We talked about some of the activities of the public interest group.
- Dennis: You were involved with the women's group, right? Promoting bringing women into the health law or into the association?
- Almeta: Yes. I've had the opportunity to participate in some of the panels. Some of the leaders like who have really taken, and Lois Cornell], have really taken a very prominent role in that advocacy, but I've been pleased to be able to be a part of that and to be in several activities that they've been involved in and promoted.

We've been very fortunate in, again, in healthcare that there are quite a few very talented women. A lot of those talented women have taken an interest in the association and been in leadership positions.

- Dennis: You were with the office of the general counsel with the American Medical Association. What perspective did that give you?
- Almeta: Well, one of the things that I think some of my colleagues have said, I think historically, particularly on the academy side, many of the lawyers were hospital lawyers first. Having someone who had a physician perspective, because my career has really been more focused on representing physicians either in associations or in medical schools, graduate and medical education, I think it helped to give a different perspective which wasn't always there.

Similarly, later on when the board began to have individuals from the government side, it also ... Same kind of concept where people were able to work together and kind of appreciate the different perspective. We didn't always agree, but at least it brought people closer together in terms of really being able to get a better understanding of another perspective.

- Dennis: We talked earlier about the culture of the academy and a little bit about the National Health Law Association, Lawyers Association. How would you describe the culture now of the American Health Lawyers Association?
- Almeta: Well, I think what we ... Our signature contribution is that we produce quality work, we give an opportunity for young lawyers to develop their skills, and we have really been promoting inclusion. I think those are three areas that I think we really have excelled in. In terms of the quality of the materials, it is just ... I think it's second to none in terms of any resource that a health lawyer can obtain.
- Dennis: How would you describe the milestones in health law?
- Almeta: Oh, I think that's a bit of a challenging one. I think in the early times .. The early part of my career I think people were more focused on kind of the traditional physician hospital relationships. As hospitals have evolved into health systems and integrated delivery systems there have been kind of ebbs and flows in transactional aspects of healthcare. It has expanded from being that very narrow, just representing physicians in hospitals. You have employment lawyers in healthcare, you have transactional lawyers in healthcare, IP lawyers in healthcare. It really covers the wide spectrum of any type of discipline, but with a focus on how healthcare impacts us.

Healthcare is probably the one aspect of the law that touches everyone. Sooner or later everyone has some kind of interaction with the health system, healthcare system. Because of that, it is a very ... It's a unique expectation on the part of the patients and clients who are ... Seek healthcare services because they really hold us as lawyers I think to a higher standard just because of the nature of what healthcare is.

- Dennis: You said that if you had a chance to ask you a question it would be why has the American Health Lawyers Association been so important in your professional career? Why?
- Almeta: It has been important to me because I think it has made me a better lawyer. The people who I have met along the way have been just phenomenal, both in terms of sharing their knowledge and just exceptional individuals who are more than health lawyers, but who have many, many other talents. I just feel privileged that I've been able to be a part of this group and to get to know people who have turned out to be really leaders in our field, and people who are so ... Lawyers who are so concerned, not just with their own personal, professional advancement, but really concerned about others.
- Dennis: The networking opportunities have been great for you.

Almeta: Networking is critical.

- Dennis: I'm sorry. Could you say that again? I sort of stepped on your word there.
- Almeta: Oh. Networking I think is a very great benefit as a part of the association. When I talk to young lawyers I always tell them it's great that you're doing a terrific job in your office, but you really need to get out and interact with other lawyers because it's going to make your perspective broader and stronger in terms of how you look and solve problems.

You may just also decide that you're not going to stay in the same place your entire professional career. It's nice to know people who are doing other things. It gives you an opportunity to think about where's my next opportunity? Where would I like to be? Oh, talk with people and you find out how interesting what they're doing is. You can't really put a value on that except that it's a

great resource. I really encourage young lawyers to take advantage of that aspect of the association. It's not enough just to go to the meetings, you really want to find out who that person who that person is who's sitting next to you.

- Dennis: You've been active in reaching out to young lawyers to bring them in.
- Almeta: Yes, I have. I have really enjoyed doing that. Wherever I've worked, or when I was president and subsequent to that, I always really tried to encourage young lawyers. One of the things that I'm excited that we have returned to doing as an association is really focusing on fully integrating young lawyers or new lawyers into the association and reaching out to them.
- Dennis: I wanted to ask you. You mentioned the year in review.
- Almeta: Yes.
- Dennis: That was a big thing, was it?
- Almeta: Yes.
- Dennis: Tell me why that was important and what it was exactly. Was that your idea?

Almeta: The year in review was not my idea, but it is one of the signature contributions of the association at not only the annual meeting, but some of the mid-year meetings in order to give the membership an overview of all of the important topics. We've had Kelly Clark, Jack Schroeder, Beth Schermer, Sydney Wizner. A variety of individuals who have been able to be very effective in capturing the highlights of the year.

It's kind of a two hour, nonstop review, but it helps the people in the audience to either become aware of something they may have missed or at least to say, "Oh, I am on top of what's going on in healthcare." It's been a really good, again, it's one of our signature contributions to healthcare.

- Dennis: On this 50th anniversary where do you see the American Health Lawyers Association? What has it achieved, what are the challenges, and what are the opportunities?
- Almeta: Well, when we began, when the association began, as I mentioned earlier it was a relatively small number of individuals who were involved. There really wasn't a lot of competition from either other organizations or law firms or state associations.

One of the things that AHLA is going to have to do is to continue to look at ways to be innovative, to keep a value-priced product available to its members, and to differentiate itself from now what are the many other opportunities that a healthcare lawyer has in order to obtain continuing legal education.

- Dennis: Well, along those lines, in this time of strident bipartisanship or political opposition what's the value of having a nonpartisan? Describe the value of having a nonpartisan medical association that can give you facts and truth.
- Almeta: What's really wonderful about the AHLA is that we have been able to make it an association where people with different ideas can come to the table and share them. It makes us accessible. In many ways a lot of what we do ... Healthcare is so heavily regulated. It's very important that healthcare lawyers are able to interact with their colleagues who are in the regulatory and

enforcement side, and for those individuals to feel comfortable that they can express their views and their position and communicate with the lawyers who are involved in healthcare.

Having a nonpartisan association allows us to always maintain that access and in that way to serve our members because they do get an opportunity to interact and to hear firsthand what the regulatory and enforcement folks are saying and how they're interpreting the law. Sometimes we even get the opportunity to help influence them in a positive way by sharing our views in an environment or in a setting where they have an opportunity to hear what some of the problems are for people who are on the front lines, who are actually having to try to comply with the laws of the regulations. I think it benefits both sides.

- Dennis: On this 50th anniversary what have been some of the key moments in the history of this association?
- Almeta: Oh my goodness. Well, there have been times where there have been kind of a change in healthcare. When we went to perspective payment, when DRGs were ... Became part of the regulatory scheme. A lot of times we thought that, oh, when this change comes along it's going to dramatically change healthcare. Hospitals are going to close or people will not be able to survive, but somehow we have always been able to adapt and figure out how to live with whatever the regulation is or whatever the change is.

I think the main thing that AHLA has done is be able to be responsive. I think one thing that I can kind of reach back and think about in my own experience, when the National Practitioner Data Bank was first enacted I was at the AMA at the time. We were just getting so many calls from around the country about how were people, how were physicians going to respond to this? How were hospitals going to be able to respond to this new concept?

At that time I reached out to AHLA. I suggested as a member that I felt that we ought to have a session at the annual meeting because this was going to be such a hot topic. It was brand new, no one really knew how it was going to be impact ... How it was going to impact us on a day-today basis.

The association leadership took a chance and said, "Okay, we're convinced that this sounds like it's something we need to do for the members. We'll add a session on. We have the program all planned, so the only place that we can really add it is on Wednesday at the last session."

We have a system at AHLA where you can sign up for sessions that you think you're going to attend. People just started signing up. First they had to get a larger room, then they had to get a ballroom. The thing about it is that responsiveness to recognizing that this is something, this is a topic that's important to the members and important to their clients. We've also done that through webinars and calls and white papers, but that ability to be able to be nimble and to respond to what needs to be addressed.

- Dennis: All right. That's all I have. Do you have anything you would like to add?
- Almeta: Just I think that AHLA is great because of the great people who have been involved and the willingness to be volunteers, and to really be concerned about other lawyers and about patients and about the public. I think I'm just really fortunate that I've been able to be a part of the association.

Dennis: All right. Thank you so much.