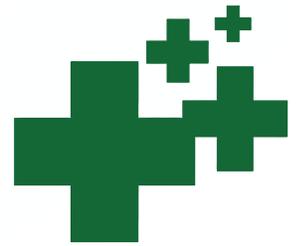


DFWHC INTERLOCUTOR

SUMMER 2017 www.dfwhc.org News from the DFW Hospital Council



DALLAS-FORT WORTH
HOSPITAL COUNCIL

Ann Curry

to serve as keynote speaker
at Annual Awards Luncheon

Larry James to receive
Distinguished Health
Service Award

Page 4

The 69th
**ANNUAL
AWARDS
LUNCHEON**

October 31, 2017
Arlington Convention Center



THE FUTURE OF HEALTH
CARE MAY BE UNCERTAIN.
**OUR EXPERIENCE CAN
GUIDE THE WAY.**

As the nation's largest health care-focused law firm, Hall Render is distinguished by its knowledge, experience and understanding of the evolving landscape of today's health care environment. Hall Render has represented the industry, including more than 1,500 hospitals and health systems, in general and special counsel matters. Put our singular focus to work for you.

HEALTH LAW IS OUR BUSINESS.
Learn more at hallrender.com.



■ ■ HALL
■ RENDER
KILLIAN HEATH & LYMAN

ANCHORAGE | ANNAPOLIS | DALLAS | DENVER | DETROIT | INDIANAPOLIS | LOUISVILLE
MILWAUKEE | PHILADELPHIA | RALEIGH | SEATTLE | WASHINGTON, D.C.



Steve Love

President/CEO
Dallas-Fort Worth
Hospital Council

The importance of our rural hospitals

WHEN I WAS IN 9TH GRADE IN RURAL VIRGINIA, I felt stomach cramps one morning while in class. As the day progressed, the cramps became so painful my parents had to take me to one of only two local physicians in my small hometown. Upon examination, he determined I had appendicitis and immediately sent me to the nearest hospital. This rural facility had three surgeons and the one on call performed the appendectomy at approximately 6:00 p.m. Incidentally, he was also the physician for the high school football team and needed to attend a game at 7:30 p.m.

The operation was successful, with a small six-inch incision followed by hospitalization for five days. Today, it would have been a quick outpatient procedure. This small but vitally important rural hospital played a key role in saving my life. On a side note, all beds were occupied except for a few in the maternity ward, so when my school friends visited they teased me for "having a baby."

The Washington, D.C. legislative discussion on repeal, delay and replace has created business turmoil for all hospitals no matter the location. Can you imagine running a business not knowing your revenue stream, expenses and regulations? North Texas hospitals have faced this business dilemma for many months. This uncertainty has been especially difficult for our rural facilities as more than 15 have closed over the past four years in Texas.

There are approximately 5,000 short-term acute care hospitals in America, half of which are in rural areas. Forty percent of rural hospitals are located within the southern part of the U.S. Over half of the rural facilities are Critical Access Hospitals (CAHs), which have 25 or fewer beds.

Both large health systems and rural hospitals alike are understandably concerned about modifications to the Affordable Care Act (ACA), Medicaid block grants and the Medicaid 1115 Waiver. Rural hospitals generally are reliant on governmental payments thus, reimbursement changes to Medicare and Medicaid could have a profound impact upon their operations.

Hospitals have served their communities since the beginning of history. Perhaps none more so than our vital rural providers who not only treat patients, but stabilize emergency situations for transfer to larger facilities for life-saving treatment. Our rural hospitals are key players in North Texas health care delivery and sadly, many are currently operating on thin margins without a clue as to what the political future holds. ■

SUMMER 2017 www.dfwhc.org

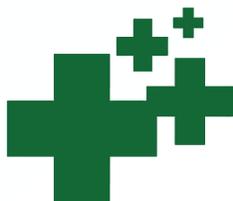
DFWHC INTERLOCUTOR

EDITORIAL

Executive Editor **W. Stephen Love**
Managing Editor **Chris Wilson**
Photography **Jerry McClure**

CONTACT

Chris Wilson
chrisw@dfwhc.org



DALLAS-FORT WORTH
HOSPITAL COUNCIL

ADVERTISING

Interlocutor reaches more than 5,000 healthcare professionals in North Texas. It is published four times a year.

FULL PAGE FOUR ISSUES

Color Inside Cover \$3,000
Color Inside Pages \$2,500

FULL PAGE ONE ISSUE

Color Inside Cover \$1,200
Color Inside Pages \$1,000

SEND TO

Chris Wilson
chrisw@dfwhc.org

PUBLISHED

Interlocutor is published by the DFW Hospital Council as a membership benefit providing information on healthcare issues and DFWHC activities. Material may be reprinted without permission, provided acknowledgement is given. Articles, news items and opinions are appreciated.

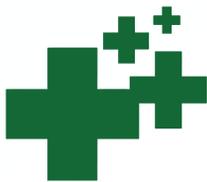
INTERLOCUTOR

1: one who takes part in dialogue or conversation

2: one in the middle of a line who questions the end people and acts as a leader

The 69th ANNUAL AWARDS LUNCHEON

October 31, 2017
Arlington Convention Center



DALLAS-FORT WORTH
HOSPITAL COUNCIL

**Tickets and
sponsorships to go
on sale in August.**

THE DFW HOSPITAL COUNCIL'S (DFWHC) 69TH ANNUAL AWARDS LUNCHEON has been set for Tuesday, **October 31** in the main ballroom of the **Arlington Convention Center**. The reception begins at 11:00 a.m. followed by the luncheon and awards from 12:00 noon to 1:30 p.m.

The Distinguished Health Service Award will be presented to **Larry James**, the chief executive officer of CitySquare, an inner-city non-profit that provides food and housing to the poverty stricken and the homeless. This year's keynote speaker will be **Ann Curry**, the award-winning journalist, long-time NBC News reporter and former co-anchor of the *Today* show.

James has been the chief executive at CitySquare since 1994. Under his guidance, the non-profit has grown into a broad community organization offering an array of social services that address four key areas related to the persistence

of poverty: hunger, health, housing and hope. He is also the author of "The Wealth of the Poor" published in 2013.

"Larry is well known within the North Texas community for his dedicated work serving those in need," Love said. "His life is an extraordinary example of service and he continues a long tradition of worthy recipients for this award. He's not just a committed servant to residents in need, he is a man who has spent his entire career improving the community in which he lives. We are proud we can honor him."

The Distinguished Health Service Award has been bestowed annually for 69 years. Since 1948, residents of the DFW area have been honored for their support of

CitySquare's Larry James to be honored, Ann Curry to serve as keynote speaker.



Larry James

He's not just a committed servant to residents, he is a man who has spent his entire career improving the community in which he lives.



David Turnely

Ann Curry

healthcare including **Margaret Jordan** (2016), **Dr. Merlyn Sayers** (2015), **Dr. Wright Lassiter, Jr.** (2014), **T. Boone Pickens** (2012), **Ray and Nancy Ann Hunt** (2009) and **Ross and Margot Perot** (2008).

Curry has won seven national news Emmys and numerous Edward R. Murrow awards, Gracie Allen Awards and National Headliner Awards. The NAACP honored her with an Excellence in Reporting award and the Women in Communications presented her a Matrix. Ann has also been given numerous humanitarian awards, including from Refugees International, Americares, Save the Children, and the Simon Wiesenthal Center, which awarded her a Medal of Valor for her dedication to reporting about genocide.

“I have been a big fan of Ann Curry’s work for years,” said **W. Stephen Love**, president/CEO of DFWHC. “From her

reporting on NBC to her upcoming PBS series ‘We’ll Meet Again,’ her journalistic work has been extremely impressive. We are looking forward to her presentation and anecdotes about her robust career.”

Curry carries on a long tradition of internationally known personalities gracing the Annual Awards Luncheon podium, with past speakers including **David Brinkley** (1989), **Henry Kissinger** (1993), **Dick Cheney** (1995), **Margaret Thatcher** (1997), **Buzz Aldrin** (2001), **Newt Gingrich** (2003), **Ted Koppel** (2011) and **James Carville/Mary Matalin** (2012).

Recipients of the Young Healthcare Executive of the Year and the Kerney Laday, Sr. Trustee of the Year awards will be announced in August. Sponsorships and tickets will also go on sale in August.

For questions, please contact **Chris Wilson** at chrisw@dfwhc.org or call **972-719-4900**. ■

Curry has won seven news Emmys and numerous Edward R. Murrow awards, Gracie Allen Awards and National Headliner Awards. The NAACP honored her with Excellence in Reporting.



Study reveals healthcare to be the second largest sector in North Texas

BASED ON EMPLOYMENT AND EARNINGS, HEALTHCARE HAS GROWN INTO THE SECOND LARGEST SECTOR in North Texas, according to a report released in June by the Dallas-Fort Worth Hospital Council (DFWHC). The economic impact of the 90 DFWHC-member hospitals on the North Texas economy is \$18.4 billion in labor income, a \$4.4 billion increase from an identical study conducted in 2013.

The studies were commissioned by the DFWHC Board of Trustees, made up of executive officers from North Texas hospitals, and created by **Dr. Gerald A. Doeksen**, a regents professor at Oklahoma State University.

“We were impressed by the significant increase over the past four years,” said **W. Stephen Love**, president/CEO of DFWHC. “Such a positive economic impact is extraordinary, especially with the current challenges facing hospitals today in healthcare reform.”

Healthcare was behind only the professional, scientific and technical services sector in North Texas earnings and the retail trade in numbers of employees.

Titled “**The Economic Impact of the Member Hospitals of the Dallas-Fort Worth Hospital Council on the State of Texas and the Dallas-Fort Worth Area,**” the study showed hospital expenditures on retail sales contribute \$5.7 billion, which produces \$356.9 million in state sales taxes. Additionally, the study reflected over \$1.4 billion in total state and local tax impacts. DFWHC-member hospitals generated 295,138 total jobs, an increase from 265,294 in 2013.

“These numbers show that North Texas hospitals do much more than just provide medical services,” said Dr. Doeksen. “The employment and income generated and the ripple effect in other businesses throughout the economy are enormous. The

study clearly demonstrates that member hospitals of DFWHC are major players in economic development in Texas.”

Hospital systems participating included Baylor Scott & White Health Care System, Kindred Healthcare, Hunt Memorial Hospital District, Medical City Healthcare, Methodist Health System, Texas Health Resources and Tenet Health Care System. Individual hospitals included Children’s Health, Cook Children’s, JPS Health Network, Parkland Health & Hospital System, Texas Scottish Rite Hospital for Children, UT Southwestern University Hospitals and other hospitals throughout the region.

Using a computer program developed specifically for the healthcare industry, Dr. Doeksen analyzed not only the direct economic contribution of hospitals and other providers, but also calculated how many jobs and how much payroll plus benefits (income) were created as a secondary effect. The jobs and income generated in other businesses are measured with employment and income multipliers derived specifically for Texas, Dallas-Fort Worth and different North Texas counties.

“Hospitals act as economic engines and generate huge financial impacts for the communities they serve,” Love said. “Economic developers frequently seek manufacturing and high technology industries that will create new jobs. The activities of the DFWHC-member hospitals are attracting these industries and must be recognized as a large contributor to the economy.”

Policies should be adopted to encourage the economic impact generated by hospitals to ensure continued economic growth for North Texas and the state, according to Love.

“The continuation of the Medicaid 1115 Waiver and Healthcare Reform to improve coverage, access and outcomes must be given careful consideration in Washington, D.C. and Austin so hospitals can continue this beneficial economic impact,” added Love. ■



Tim Ryan (l to r) and W. Stephen Love on FOX 4 TV's "Good Day."

DFWHC talks healthcare reform on **FOX 4 TV**

DFW HOSPITAL COUNCIL PRESIDENT/CEO W. STEPHEN LOVE was interviewed July 20 on the FOX 4 TV morning program "Good Day" to discuss the most recent updates on the lively topic of healthcare reform. Love was interviewed by anchor **Tim Ryan**.

"Parts of Obamacare definitely need improvement," Love said. "The one that is at a crisis stage is the health insurance marketplace. We need to stabilize that. But as far as other portions of the Affordable Care Act such as pre-existing conditions, helping people to not have lifetime maximums and having essential health benefits have been extremely helpful to people."

You can see the full interview at <http://www.fox4news.com/good-day/269088136-story>. ■



Around DFWHC

Hall Render, DFWHC partner for healthcare series



THE DFW HOSPITAL COUNCIL (DFWHC) AND HALL RENDER have teamed together to host a “Hot Topic Healthcare Educational Series” beginning July 26 at Texas Scottish Rite Hospital for Children in Dallas.

The four complimentary sessions will be from 7:30 a.m. to 9:30 a.m. with Hall Render, the nation’s largest law firm focused exclusively on healthcare, providing the speakers.

The series will include:

- July 26, **“Foreign Physician Recruitment and Green Card Options for Foreign Healthcare Employees,”** 7:30 a.m. to 9:30 a.m., Texas Scottish Rite Hospital for Children;
- August 16, **“Bullying & Workplace Harassment and Discipline & Discharge,”** 7:30 a.m. to 9:30 a.m., Texas Scottish Rite Hospital for Children;
- August 31, **“False Claims Act Litigation and Internal Investigation Matters,”** 7:30 a.m. to 9:30 a.m., Texas Scottish Rite Hospital for Children;



- September 20, **“Timeshare Arrangements for Visiting Physicians,”** 7:30 a.m. to 9:30 a.m., Las Colinas Country Club.

“These topics detail crucial issues all hospitals need to deal with in our rapidly changing industry,” said Love. “The objective is to provide complimentary education to North Texas hospitals while also providing opportunities to learn from national experts.”

According to **James “Mac” Stewart**, an attorney at the Dallas offices of Hall Render, the series will be a great opportunity for executives and students alike.

“When we’re able to bring together experts from across the nation to discuss topics such as these, it’s a rare opportunity for everyone involved in healthcare,” he said.

You can register at <https://dfwhc.org/hall-render-hot-topic-series-set-begin-july-26>. ■



**HALL
RENDER**
KILLIAN HEATH & LYMAN

The DFW Hospital Council
and Hall Render present...



**HOT
Topic**

**HEALTHCARE
EDUCATIONAL
SERIES**



**Four
complimentary
breakfast
events from
7:30 - 9:30 a.m.**

Attend one or attend all
(please register for each event
individually).

July 26, 2017

**"Foreign Physician Recruitment and Green Card
Options for Foreign Healthcare Employees"**

Texas Scottish Rite Hospital for Children
2222 Welborn St., Dallas, TX 75219

Register: <https://foreignphysician.eventbrite.com>

August 16, 2017

**"Bullying & Workplace Harassment and
Discipline & Discharge"**

Texas Scottish Rite Hospital for Children
2222 Welborn St., Dallas, TX 75219

Register: <https://workplacediscipline.eventbrite.com>

August 31, 2017

**"False Claims Act Litigation and
Internal Investigation Matters"**

Texas Scottish Rite Hospital for Children
2222 Welborn St., Dallas, TX 75219

Register: <https://falseclaimsactlitigation.eventbrite.com>

September 20, 2017

**"Timeshare Arrangements for
Visiting Physicians"**

Las Colinas Country Club
4400 N. O'Connor Road, Irving, TX 75062

Register: <https://timesharephysicians.eventbrite.com>

For information, please contact DFWHC Communications Coordinator
Jourdan Pruit at jpruit@dfwhc.org or 469-648-5116.

Around DFWHC



Record crowd turns out for July Speed Networking

MAKE CONTACT! A record crowd of 60-plus attendees turned out for the DFW Hospital Council's (DFWHC) summer edition of the Speed Networking event July 13 at Texas Scottish Rite Hospital for Children in Dallas. A fun opportunity to meet and greet healthcare executives, the event included representatives from:

- University of Texas Dallas;
- Sterling Barnett Little, Inc.;
- UnitedHealthcare;
- Baylor Scott & White Health;
- Methodist Health System;
- Texas Institute for Neurological Disorders;
- JPS Health Network;
- My Purple Folder;
- Parkland Health & Hospital System;
- and Pinnacle Relocation Services.

DFWHC President/CEO **W. Stephen Love** and DFWHC Foundation President **Kristin Jenkins** served as hosts of the networking event. DFWHC has plans to host its next Speed Networking in the fall. Details soon to follow. ■



Lee steps down as DFWHC Chair

BRETT LEE, CHAIR OF THE DFW HOSPITAL COUNCIL (DFWHC) BOARD OF TRUSTEES and the chief executive officer of the North Texas markets of Tenet Healthcare Corporation overseeing five hospitals in a joint venture with Baylor Scott & White Health, will step down as DFWHC chair after accepting a position at Capital Senior Living Corporation effective August 14.

One of the country's largest operators of senior living communities, Capital Senior Living Corporation announced Lee would join the company as executive vice president and chief operating officer. Lee had served on the DFWHC Board since 2013 and as chair since January.

"We are thrilled to hear of Brett Lee's new role and we wish him great success," said W. Stephen Love, president/CEO of DFWHC. "We can't begin to say enough about his service to DFWHC and the healthcare community and especially in his role as chair in 2017. Brett will be missed."

Headquartered in Dallas, Capital Senior Living Corporation's operating strategy is to provide value to residents by providing quality senior housing at reasonable prices. The company operates 129 senior housing communities in geographically concentrated regions with an aggregate capacity of approximately 16,500 residents. ■

Webinar hosted with ELEVATE340B

THE DFW HOSPITAL COUNCIL (DFWHC) AND TEAM MEMBERS of ELEVATE340B hosted the webinar “340B: Landscape, Compliance and Optimization” on June 29. The event was attended by 49 registrants associated with hospitals participating in the 340B drug-pricing program.

The webinar was introduced by DFWHC President/CEO **W. Stephen Love**. ELEVATE340B representatives included **Jeff Norman**, senior manager, **Cory Aubuchon**, director and **Jamie Pennington**, marketing manager.

Topics included the hundreds of audits conducted by ELEVATE340B, challenges when controlling WAC, GPO and Orphan drug spending and savings opportunities available. ■



Participants in the June 29 webinar included **Jeff Norman** (l to r), **W. Stephen Love**, **Jamie Pennington** and **Cory Aubuchon**.



Vaniacy Nwigwe

Attendees learn “HIPAA Enforcement”

MORE THAN 120 ATTENDEES TURNED OUT for the DFW Hospital Council’s (DFWHC) “Hot Topic” meeting “HIPAA Enforcement” on June 8 in the main auditorium at Texas Scottish Rite Hospital for Children in Dallas. **Vaniacy Nwigwe**, JD, MSA and **Valerie Montoya**, MSCJ of the Office of Civil Rights served as speakers and received the highest approval ratings of the year from attendees.

“These educational events are a service we attempt to provide for our hospital membership,” said W. Stephen Love, president/CEO of DFWHC. “Vaniacy Nwigwe and Valerie Montoya did a terrific job and provided us with a great presentation. I am still receiving compliments on the information they provided.”

Highlights included a discussion on the recent flurry of HIPAA activity, shared best practices and advice for handling HIPAA requests. ■

Growing Little Minds receives national awards

THE DFW HOSPITAL COUNCIL’S (DFWHC) “GROWING LITTLE MINDS” infant brain development campaign was awarded a Gold and Merit award by the **Healthcare Marketing Report** on May 15. The campaign received a Gold Award for Social Media and a Merit Award for Advertising without TV. The video, website and social media campaign were created by DFWHC and Agency Creative and can be found at www.growinglittleminds.com. ■



Around DFWHC



McCanna joins Baylor Scott & White Health as president

BAYLOR SCOTT & WHITE PRESIDENT/CEO JIM HINTON

announced on July 10 the creation of a new Office of the President to serve the organization. He also announced **Pete McCanna**, who has been serving as executive vice president and chief operating officer at Northwestern Memorial Healthcare in Chicago, will assume the new role in September 2017. Hinton has been serving as both president and CEO since he joined Baylor Scott & White in January 2017 following the retirement of **Joel Allison**. With the addition of the new position, he will transition some responsibilities. McCanna has more than 30 years of experience in health care management. During his 15-year tenure at Northwestern, the organization's revenue grew from \$700 million to more than \$5 billion, while exceeding patient experience, employee engagement and quality goals, and maintaining an AA+ bond rating. ■

Sims named CEO of Medical City FW

JYRIC SIMS WAS NAMED CHIEF EXECUTIVE OFFICER (CEO) at Medical City Fort Worth beginning July 24. Sims brings more than 17 years of experience to the role. Since 2014, he has served as senior vice president and chief operating officer at Hospital Corporation of America's (HCA) Tulane Health System, where he was responsible for daily operations of two acute care hospitals with over 500 beds and 35 clinics. He led more than \$50 million in construction and capital improvements over the past two years and exhibited a commitment to the community, having served on the Louisiana Chapter of the American College of Healthcare Executives. ■



HCA acquires Weatherford Regional MC

HCA HEALTHCARE ANNOUNCED JULY 11 AN AGREEMENT to acquire **Weatherford Regional Medical Center** from Community Health Systems, Inc. Weatherford Regional Medical Center, a 103-bed hospital 30 miles west of Fort Worth, will become part of HCA's **Medical City Healthcare**. With 13 hospitals, more than 7,000 active physicians and 14,000 employees in North Texas, HCA's Medical City Healthcare is one of the region's largest and most comprehensive provider networks. The transaction, subject to regulatory approvals, is expected to close by the fall of 2017. ■

New JPS Medical Home to open in NE Tarrant County

WHEN A JPS HEALTH NETWORK PATIENT IN BEDFORD needs an ultrasound, it often means a trip to the emergency room — an expensive trip that will soon be avoidable with construction of a new clinic for northeast Tarrant County. **JPS Medical Home Northeast Tarrant** will include ultrasound among its all-inclusive services.

JPS broke ground July 7 on the new clinic at 3200 W. Euless Blvd. The medical home is scheduled to open in the summer of 2018 to replace JPS Northeast Health Center, about two miles away in Bedford.

“For all the talk about the Affordable Care Act, what we know is that providing access is the best way to reduce cost,” said JPS President/CEO **Robert Earley**, who was joined at Friday’s groundbreaking by regional leaders who have worked for years to expand accessible healthcare in northeast Tarrant County.

Said former Euless City Manager **Gary McKamie**, “As a



city, when we came to look for a community clinic that we needed badly out here, particularly to serve our underprivileged population, there was no greater group to turn to than JPS.”

The 35,000 square-foot health center will provide primary care, women’s health, behavioral health, dental, optometry, laboratory, radiology and pharmacy services. Combining services encourages coordination of care among providers and engagement by patients. ■

DFWHC and Coker Group detail the transition from “Volume to Value”



Dr. Ellis “Mac” Knight

A GREAT CROWD TURNED OUT FOR THE JULY 21 DFW HOSPITAL COUNCIL (DFWHC) “Hot Topic” event “Enabling the Successful Transition from Volume to Value” at Texas Scottish Rite Hospital for Children.

Co-hosted by DFWHC partner the **Coker Group**, speakers included **Stefan Werdegarr**, vice president of leadership development/executive search at the Coker Group; **Dr. Ron Strieker**, principal at the Strieker Group, LLC; and **Dr. Ellis “Mac” Knight**, senior vice president and chief medical officer at the Coker Group.

Kristin Jenkins, president of the DFWHC Foundation, hosted the event and Q&A.

Speakers discussed how the “Volume-to-Value” movement will redesign the healthcare marketplace from the patient’s perspective — with a focus on improving patient value.

Coker Group has a mission to assist providers in their pursuit of a sound business model and an enhanced patient experience. Service areas include strategy, operations, finance, technology and executive searches. They have more than three decades of experience working with hospitals. You can check out their website at <http://cokergroup.com/>. ■

Around DFWHC



Attendees at the DFWHC June 9 Board Meeting included Sara Grenier (l to r), Delinda Bailey, Kristin Jenkins, David Berry, Nancy Cychol, John Phillips, Jerri Garison, W. Stephen Love, Brett Lee, Lillie Biggins, Clay Franklin, Jeanette Verrelli and Bob Walker.

DFWHC Board makes a stand against violence

IN HONOR OF THE NATIONAL DAY OF AWARENESS ON JUNE 9 for “Hospitals Against Violence,” the DFW Hospital Council (DFWHC) Board of Directors stood for a photograph to display unity with U.S. hospitals.

The campaign was the brainchild of the American Hospital Association (AHA) with a goal to focus national attention on ending all forms of violence through digital media to include tweets, photos and other online efforts.

“Today we welcome health providers, community organizations, clergy, law enforcement, clinics and other volunteer organizations to participate,” said **W. Stephen Love**, president/CEO of DFWHC.

DFWHC shared its photo online at <http://www.aha.org/advocacy-issues/violence/join.shtml>.

Photos and messages were shared on social media at **#HAVhope**. ■

Highest-ranked pediatric care in North Texas.

Children's Medical Center Dallas, the flagship hospital of Children's HealthSM, is proud to be the highest-ranked pediatric provider in North Texas by *U.S. News & World Report*. With renowned pediatric physicians, innovative medical science, and an academic and clinical affiliation with UT Southwestern Medical Center, we're committed to continuing our 100-year legacy of making life better for the children of Texas and beyond.

**BEST
CHILDREN'S
HOSPITALS**

U.S. News & WORLD REPORT

RANKED IN 9 SPECIALTIES

2017-18

Learn more at childrens.com/excellence



children'shealth[®]
Children's Medical Center

Associate Members

WALK LIKE MADD!

Two North Texas
events scheduled
for September
and October



On the road of life, **Mothers Against Drunk Driving (MADD)** wants every family to be safe without the threat of drunk or drugged driving. And we want every family to stay whole without the danger and consequences of underage drinking. Our hope for the future is that there will be **No More Victims**. It's the reason we exist today.

Interlocutor is publishing articles submitted by Associate Members. This was provided by **MADD**. For guidelines, contact Chris Wilson at chrisw@dfwhc.org.



On September 5, 1980, MADD was incorporated and its mission was “to aid the victims of crimes performed by individuals driving under the influence of alcohol or drugs, to aid the families of such victims and to increase public awareness of the problem of drinking and drugged driving.”

Today, MADD has evolved to become the premiere nonprofit on a mission “to end drunk driving, help fight drugged driving, support the victims of these violent crimes and prevent underage drinking.”

Drunk driving deaths are 100% preventable. Sadly, more than 300,000 innocent people are killed or injured on our roadways every year. Countless more are changed forever. Many find comfort and eventually hope through our free victim services.

MADD’s prevention and advocacy efforts have

- Cut drunk driving deaths by 53%;
- Saved the lives of 350,000 people;
- Served 820,000 victims.

MADD won’t stop fighting to make the roads safer until drunk driving stops – because one empty seat at the table is one too many. We need your help to create a world where drunk driving ends and lives don’t. Help us advocate for change. Donate to support our programs. Join us as we pay tribute to lives lost or survivors of a drunk driving crash.

Walk Like MADD is the signature event designed to help victims turn pain into purpose and raise funds to support the mission to end drunk driving. Annually, 90 cities across the U.S. host Walk Like MADD events raising over \$1 million. This year, MADD North Texas will host two walk events in Dallas and Tarrant Counties.

Here’s how you can make a difference as a Walk Like MADD corporate sponsor, team or runner. Event funds will support local programs and services.

Register now as an individual runner, walker or join a team here:

- Saturday, Sept. 16 – Dallas Walk Like MADD: www.walklikemadd.org/dallas;
- Saturday, Oct. 21 – Fort Worth Walk Like MADD: www.walklikemadd.org/fortworth.

For corporate sponsor opportunities, please call **Cynthia Thompson** at **214-637-0372**. ■

MADD’s
impact since 1980:

**Drunk Driving
Deaths cut
by 53%**

**350K lives
saved**

**820K victims
served**

www.walklikemadd.org/dallas

www.walklikemadd.org/fortworth

Associate Members

Alzheimer's Disease

Creating a safety net through collaboration

By Dr. Stephanie Woods,
Texas Woman's University
Conclusions drawn from
Community Conversations (2017)



THE COMMUNITY CONVERSATIONS HEALTH CARE SERIES ON ALZHEIMER'S DISEASE is a community stakeholder driven initiative designed to promote collaborative, solution minded dialogue. Created by Eli Lilly and sponsored by the Alzheimer's Association Greater Dallas Chapter and Texas Woman's University, community leaders representing the diverse constituency and unique organizational landscape of Dallas convene on the topic of

current healthcare practices for individuals with Alzheimer's disease, the limitations of those practices and solutions for connecting clients with resources.

The ultimate goal of this intellectual collaboration is the advancement of timely detection and diagnosis of Alzheimer's disease in order to improve the care coordination for these individuals and their care partners.

I am an experienced nurse and nursing educator.



Dementia has been a common challenge for nurses, but it has been largely accepted as inevitable and often unmanageable. Representing Texas Woman's University in these Community Conversations about Alzheimer's has completely changed my perspective.

During my education, there was little covered on dementia. It was a foregone conclusion that old people get confused. I can remember pleasantly confused patients, one in particular who was still able to call square dances but couldn't remember his wife. I had one elderly male who was convinced there were kittens under his bed. I concocted a great plan. I went to get a broom from the housekeeping closet and made great show of sweeping out those kittens. The patient seemingly bought my ruse, and asked how many were there. I told him there were 3! Nope he replied, there were 4. Note to self, don't enter into other's delusions!

Alzheimer's frightens us. We debate with our friends what is better to have a sound body or a sound mind, as if we can actually choose the outcome. Fear only motivates us temporarily. My specialty is cardiac nursing. I cannot tell you how many patients I have cared for who when faced with cardiac surgery will commit to a healthy diet and frequent exercise. However, after they live through the surgery the fear abates, their wives tire of trying to get them to do the right thing, and life returns to pre-surgery habits.

This is not about fear. It is about knowledge, accessing best in class care and support. It is about creating a safety net for those facing dementia, whether due to Alzheimer's or other causes through community collaboration.

Sadly, our education has not prepared current practitioners or future caregivers to effectively manage the patient with dementia. While I am an academic administrator for nursing, I am not just concerned with the ability of nurses to treat dementia patients. Patient care is a team sport. There are many disciplines on the team.

Community Conversations in Dallas has shown a bright light on the numerous resources available in our area. It has also helped us to pinpoint the interventions that can make the greatest difference. We are failing miserably in areas of early diagnosis. It begins with all healthcare practitioners doing the Mini-Cog assessment during patient's annual visit. Mini-Cog stands for the mini-cognition test. It is a simple but effective tool to assess dementia and can be administered by anyone trained to do so. Once cognitive impairment is identified, getting that patient to caregivers who are expert in this area is imperative.

It is my commitment to help the nursing students at Texas Woman's University understand how to assess and manage patients with dementia. TWU also trains nurse practitioners, and they are pivotal in creating a safety net for patients with dementia. The curriculum for both new nurses and for nurse

practitioners must focus on early diagnosis. Understanding the pathology of Alzheimer's is also key. All nurses do history and physical assessments of their patients, but other key diagnostics including neuroimaging must be covered.

The most powerful role a nurse can play is that of advocate for the patient and family. When dementia is being assumed as a natural part of aging, when testing is not being done, the nurse can emerge as a partner to the patient and family, initiating conversations with their physician peers. A nurse or nurse practitioner can advocate for consultations, more effective drug regimens and point the family to available resources.

If you hear nothing else in my remarks, please hear this. Undiagnosed dementia is not being kind, or sensitive, or supportive. Hiding your own symptoms, or hiding those of someone you love is putting you and others into danger. A person with undiagnosed dementia is not safe.

During this series, I learned an astounding fact. In one scientific study, dementia is the best predictor that a patient with heart failure will be admitted to the hospital. The best predictor! Higher in predictive ability than your weight, your oxygenation or even fatigue. A person with dementia cannot effectively take their medications, understand their disease, or manage their health. They may not be safe drivers and they can jeopardize their own financial futures through poor decisions.

Technology also plays a huge role in the care of patients with dementia. At TWU we are training nurses how to use telehealth. Telehealth uses your phone, your tablet or computer to allow access to healthcare. The challenges of getting a person with dementia to their healthcare provider can be overwhelming, particularly if the caregiver is elderly. But imagine being able to see your nurse practitioner from the comfort of your favorite chair. Imagine a time where a rural resident can go to their local clinic and be seen by an expert physician in Dallas without ever getting onto a major highway.

For the citizens of Dallas, the resources are absolutely astounding. But if no one helps the patient and family access these resources, what is the benefit? We cannot be well-meaning people doing amazing work, unaware of other well-meaning people doing the same work. It takes a community. The challenge of dementia is great but our greatest opportunities lie in accessing care from experts. Prevention and early assessment are key, care overseen by experts will ensure best outcomes and support of caregivers must be relevant to their needs. Be part of the solution.

Join our next Community Conversation Checkup on Aug. 4, 2017. For information, contact the Alzheimer's Association at **1-800-272-3900** or **www.alz.org/greaterdallas**. ■

discover...

go to:
ELEVATE340B.COM

ELEVATE340B



NEXT-LEVEL OPTIMIZATION FOR YOUR 340B PROGRAM



HOSPITALS FACE
CHALLENGES CONTROLLING
DRUG SPENDING



WE HAD AN IDEA....



PRICING BASED ON CLIENT
SUCCESS



POWERED BY TWO
EXPERIENCED COMPANIES

SO YOU CAN FOCUS -  - ON PATIENT CARE



A CONSULTATIVE MONITORING PROGRAM THAT IDENTIFIES OPPORTUNITIES TO
OPTIMIZE YOUR 340B PROGRAM DRUG PURCHASES IN A COMPLIANT MANNER.



go to:

WWW.ELEVATE340B.COM

A JOINT VENTURE POWERED BY:
SOUTHWEST CONSULTING ASSOCIATES & TURNKEY PHARMACY SOLUTIONS
JEFF@ELEVATE340B.COM | 972-732-8100

Business Advisors for the Healthcare Industry



For more than 30 years, Coker Group has been a trusted advisor to prominent healthcare organizations on a broad range of strategic, financial, transactional, and operational solutions. Given the tenor of the industry at this time, healthcare organizations are struggling to do more with less. Knowing this, Coker works with clients to develop customized solutions in four main service areas: Strategy and Operations, Finance, Technology, and Executive Search. These diverse and complementary service areas provide a full continuum of expertise to the healthcare industry.

Aimed at creating value for our clients, Coker provides advisory services to all types of healthcare organizations, including hospitals, health systems, accountable care organizations, clinically integrated networks, ancillary service providers, and physician-owned entities. Our mission is to customize an approach for each client that ensures strategic differentiation in the marketplace and achievement of every goal across all performance areas.

Coker Services

- Strategy and Operations
- Finance
- Technology
- Executive Search

For further information or to learn more about Coker Group, please visit our website at www.cokergroup.com, or call us at 800-345-5829 x2021.

Associate Members

340B

Drug Pricing Program

- *what is it?*



The law can insulate you from drug-price increases

THE 340B DRUG PRICING PROGRAM WAS ESTABLISHED IN THE VETERANS HEALTH CARE ACT OF 1992.

It provides discounted prices on covered outpatient drugs to eligible covered entities. The intention of the program is to “stretch scarce federal resources as far as possible, reaching more eligible patients and providing more comprehensive services.” The law insulates covered entities from drug-price increases by giving them access to drugs at a discounted price.

Pharmaceutical manufacturers who participate in the Medicaid program are required to offer discounts on covered outpatient drugs to covered entities. Discounts typically range from 30% – 50% below the average wholesale price.

Qualified Covered Entities

Only state/governmental and nonprofit hospitals are eligible for the 340B program. In order to qualify for the 340B program, the hospital must meet one of the following qualification thresholds:

- Disproportionate Share Hospitals (DSH) – Medicare DSH adjustment percentage > 11.75%;
- Children’s Hospitals (PED) – Medicare DSH adjustment percentage > 11.75%;
- Freestanding Cancer Hospitals (CAN) – Medicare DSH adjustment percentage > 11.75%;
- Sole Community Hospitals (SCH) – Medicare DSH adjustment percentage ≥ 8%;
- Rural Referral Centers (RRC) – Medicare DSH adjustment percentage ≥ 8%;

- Critical Access Hospitals (CAH) – No DSH adjustment percentage requirement.

Hospitals that initially qualify for the program must register with the Health Resources and Services Administration (HRSA). Upon approval from HRSA, covered entities will be entered into the program on calendar year quarterly increments. Participating covered entities that fall below the qualification threshold must inform HRSA in order to be terminated from the program.

In addition to the hospital-covered entities, there are also numerous HRSA grantee qualified covered entities (e.g., FQHC and look-alikes, Ryan White, Family Planning clinics, STD clinics, TB clinics, Hemophilia Treatment Centers, Black Lung, Native Hawaiian Health Centers, Urban Indian Health Centers).

Orphan Drugs

Drugs designated as “orphan drugs” for a rare disease/condition by the Food and Drug Administration are not classified as covered outpatient drugs; thus manufacturers are not required to offer 340B pricing. However, manufacturers do have the discretion to offer 340B pricing on their classified orphan drugs (i.e., 340B-like pricing). This exclusion applies to CAH, RRC, SCH and CAN hospital types.

GPO Prohibition

Covered entities may not purchase “covered outpatient drugs” through a group purchasing organization (GPO) for outpatients, unless the patient is an inpatient or meets a qualified exclusion. This applies to all 340B eligible outpatient locations of the “parent” and all registered “child sites.” The GPO prohibition applies to DSH, PED and CAN hospital covered entity types.

Accumulations - Purchasing

Covered entities are responsible for maintaining auditable records of their 340B activity to ensure compliance with the program rules. Most hospitals implement a replenishment model, using split-bill software vendor, to track drug dispensing characteristics. The split-bill system identifies a combination of qualifying drugs, locations, providers and/or payers in order to categorize the drug



dispense in the appropriate accumulation group (340B, GPO or WAC).

The pharmacy then replenishes/purchases the drug based on the available accumulation volume available. It is during this complicated process where problems often occur, which can result in missed savings opportunities and potential compliance risk.

ELEVATE340B

ELEVATE340B offers consulting services for covered entities currently participating in the 340B program with a pricing structure that doesn’t burden you with budget heavy fees, but instead, incentivizes success under a contingency-based structure because there are no upfront costs. Our service reviews historical purchases, accumulations and medical record data in order to identify savings opportunities the covered entity is legally entitled to, but is currently missing.

The covered entity implements our detailed corrective action plan and begins to realize the additional savings on a go-forward basis. Our role is to be an additional tool in your 340B toolbox. We act as another set of eyes monitoring your program. Our goal throughout your engagement is to work in the background, out of sight, until a savings opportunity arises, so you can focus on patient care.

For more information on how ELEVATE340B can be an additional tool for your 340B program, please contact **Jeff Norman** at jeff@elevate340b.com or visit www.elevate340b.com. ■

Associate Members



Service line-specific **CLINICAL INTEGRATION PROGRAMS**

Re-tooling some of your higher profile service lines

AS HOSPITALS PREPARE TO OPERATE SUCCESSFULLY UNDER VALUE-BASED REIMBURSEMENTS such as bundled payments, they need to consider re-tooling some of their higher profile service lines. Orthopedics and cardiac care service lines are particular targets for the Centers for Medicare & Medicaid Services' (CMS) latest round of bundled payment programs, some of which are mandatory. Actions to consider include:

- I. Engaging physician providers to help identify service line expenses that can be eliminated without jeopardizing quality and patient safety.
 - a. Clinical co-management agreements with service line providers can serve as a suitable way to do this, and shared savings can be utilized to reward physicians and other providers for their efforts. (NOTE: Gainsharing arrangements of this type need to be set up with the assistance of experienced legal counsel, who can ensure that these agreements are compliant.)



2. Targeting expenses that free up savings to the hospital or healthcare system and not necessarily the payers.
 - a. Examples of “low-hanging fruit” in most hospitals that may offer opportunities to trim costs include the OR supply chain, blood utilization, implant costs, and antibiotic stewardship.
3. Co-marketing of integrated services to traditional and non-traditional purchasers.
 - a. One of the advantages of setting up a service line-specific clinical integration program that meets the definition of clinical integration as determined by the Federal Trade Commission and others is that the hospital and providers can then jointly contract for services, especially for bundled services specific to the service line.
 - b. Target markets for these clinically integrated services include CMS, commercial payers, large self-insured employers, and other clinically integrated networks or accountable care organizations that are looking to fill in specialty-specific gaps in their networks.

Coker Group has assisted small, medium and large hospitals and healthcare systems with the development of service line-specific clinical integration programs.

If you are interested in learning more about how Coker can help your organization with these initiatives, call **678-832-2021** to speak with **Dr. Ellis “Mac” Knight**. ■



DFW HOSPITAL COUNCIL

THE ONLY HOSPITAL COUNCIL IN TEXAS

90 HOSPITAL MEMBERS

90 BUSINESS MEMBERS

47 YEARS OF COLLABORATION



www.instagram.com/dfwhospitalcouncil/



www.facebook.com/DFWHospital



[@DFWHCouncil](https://twitter.com/DFWHCouncil)



www.linkedin.com/company/dallas-fort-worth-hospital-council

WWW.DFWHC.ORG



DALLAS-FORT WORTH
HOSPITAL COUNCIL

DFWHC ASSOCIATE MEMBERS

For information, contact Chris Wilson at chrisw@dfwhc.org.

Acadian Ambulance	DHG Healthcare, LLP	Pinnacle Partners in Medicine
Adreima	El Centro College	Polsinelli
Agapé Healthcare Partners	ELEVATE340B	Priority Power Management
Agency Creative	Envision Advisory	ProPath
Allied BioScience	First3Years	Protiviti
Alzheimer's Association	Fisher & Phillips LLP	PwC
American Cancer Society	Fresenius Kidney Care	Regent Services
American Diabetes Association	Gerber	Resa Realty
American Heart Association	Hall Render	Risk Consulting Partners
AstraZeneca	HASA	Rogers-O'Brien Construction
Atlas Lift Tech	HCCA International	Sigma Technology Solutions
Bank of America	Hospital Recruiting.Com	Southern Methodist University
Best Receivables Management	H-Source	Southwest Transplant Alliance
BKD, LLP	InLight Risk Management	Strasburger & Price LLP
Blue Cross Blue Shield of Texas	The Inline Group	Supplemental Healthcare
CallisonRTKL, Inc.	Juliette Fowler Communities	Tarrant County College District
CampbellWilson, LLP	Kaplan College	TCU – Harris College of Nursing & Health Sciences
Cantey Hanger LLP	Konica Minolta	TCU - Neeley School of Business
CareCycle Solutions	KPN Health, Inc.	Texas Woman's University - College of Nursing
CareFlite	Leukemia/Lymphoma Society	University of Phoenix
Carter BloodCare	MADD North Texas	U.S. Army Medical Recruiting
Chamberlain College of Nursing	Magnet HR Group, LLC	UT Dallas
Children at Risk	March of Dimes	Vestagen
Coker Group	Maxim Healthcare Services	VITAS Healthcare
Collin College	Mary Crowley Cancer Research	West Coast University
Community Hospital Corporation	MD News DFW	Wilson Elser, LLP
The Concilio	MEDCO Construction	Winstead PC
Core Scientific North America	Metrocare Services	Witt/Kieffer
Crowe Horwath LLP	Metromark Market Research	Xenex Disinfection Services
DCCCD	Metropolitan Anesthesia	YMCA of Metropolitan Dallas
DFW Business Group on Health	Multicultural Alliance	
Dallas Regional Chamber	NCTTRAC	
Denitech - a Xerox Company	Norton Rose Fulbright	
Dentons US LLP	Oncor Electric Delivery	
	Perkins + Will	



Kristin Jenkins

JD, MBA, FACHE

President, DFWHC Foundation
Senior Vice President, DFWHC

AHA event - great start for patient safety goals

IT WAS AN HONOR TO ATTEND THE AMERICAN HOSPITAL ASSOCIATION (AHA) Leadership Conference July 27-29 in San Diego. I attended with **Patti Taylor**, the DFW Hospital Council (DFWHC) Foundation’s director of quality and patient safety. We were there as a team representing our local Health Research and Educational Trust (HRET) Hospital Improvement Innovation Network (HIIN).

If you’ve not heard, an estimated 125,000 fewer patients died in hospitals and approximately \$28 billion in costs were saved due to reductions in hospital acquired conditions. These impressive numbers occurred during a period of concerted attention by U.S. hospitals to reduce adverse events, including the work of the DFWHC Foundation and hospitals participating in the Hospital Engagement Network (HEN) and HEN 2.0.

Today, the HRET HIIN has over 1,600 hospitals and 32 state hospital associations participating. A big team indeed. The HRET HIIN will pursue the ambitious new goals of reducing inpatient harm by 20 percent and readmissions by 12 percent by 2019.

We attended the conference with **Jan Compton**, vice president of patient safety and quality for Baylor Scott & White Health; **Karen Grant**, quality analyst at Baylor Scott & White Health Hillcrest Medical Center; **MonaLiza Gaw**, executive director of quality at JPS Health Network; and **Wanda Peebles**, chief nursing officer at JPS Health Network.

This year’s AHA event was themed “The Journey Ahead: Advancing Health in America.” The purpose was to join with healthcare leaders from across the country to plan these important patient safety goals. We are grateful to our HIIN hospitals, the AHA and the Center for Medicare and Medicaid Innovation in working with us to improve care for our patients.

The teamwork and cooperation displayed was astounding - everyone sharing their successes and challenges. We still have a long way to go, but this was a great start. ■

How to contact us

972-717-4279

info@dfwhcfoundation.org



www.dfwhcfoundation.org

Foundation Mission

To serve as a catalyst for continual improvement in community health and healthcare delivery through education, research, communication, collaboration and coordination.

Foundation Vision

Act as a trusted community resource to expand knowledge and develop new insight for the continuous improvement of health and healthcare.

28 dfwhc interlocutor

Foundation Trustees

Ruben Esquivel

UT Southwestern Medical Center

Harvey Fishero

Chair of the Foundation Board

Carol Gregory

Medical City Healthcare

Dr. Baron Hamman

TX Health Heart & Vascular Hospital

W. Stephen Love

DFWHC

Chuck Lyles

Board Member

Dr. Matthew Murray

Cook Children’s Health Care System

Steven R. Newton

Baylor Scott & White Health

Dr. Irving Prengler

Baylor Scott & White Health

Dr. Merlyn Sayers

Carter Bloodcare

Dr. Mary Stowe

Children’s Health System of Texas

Pamela Stoyanoff

Methodist Health System

Dr. Ferdinand T. Velasco

Texas Health Resources

Karen Watts

Parkland Health & Hospital System

Dr. Stephanie L. Woods

Texas Woman’s University

Around DFWHC Foundation



10th Annual Patient Safety Summit

Aug. 9-10 event to focus on Ebola impact and shooting incident safety

TICKETS ARE SELLING FAST to the DFW Hospital Council Foundation's **10th Annual Patient Safety Summit** on **August 9-10** at the Marriott Las Colinas in Irving.

This year's Summit is being held in coordination with the Texas Department of State Health Services' 2017 TDSHS Healthcare Safety Conference.

Titled "Stand Up for Safety!," the event will be highlighted by **Dr. Abdusalam Nasidi**, director of the Nigeria Center for Disease Control, discussing "Ebola: The impact from international and local perspectives" on August 9. **Britt Berrett**, author of "Patients Come Second," will serve as the keynote speaker on August 10.

The event is from 12:30 p.m. to 5:00 p.m., followed by a reception from 5:00 – 6:30 p.m. on August 9; and 8:00 a.m. to 4:30 p.m. on August 10.

Additional topics and speakers will include:

- "DSHS Support of Ebola Preparedness Efforts and Role of the Designated Infection Control Officer for EMS," **Thi Dang**, HAI Epidemiologist, **Keri Cain**, State Hospital Preparedness Program Coordinator and **Joseph Schmider**, State EMS Director;

- "The New Economics of Health Care: A Mandate for Patient Safety," **Leah Binder**, President/CEO, The Leapfrog Group;
- "A Systems Approach to Safety and Security," **William Adcox**, Chief of Police, The University of Texas MD Anderson Cancer Center and **Raymond J. Gerwitz**, Director of Risk Strategy and Operational Excellence, The University of Texas Police at Houston.

You can see the full agenda at <https://dfwhcfoundation.org/wp-content/uploads/2017/07/PSS2017Agendax7.pdf>.

You can register at <https://www.eventbrite.com/e/patient-safety-summit-tickets-34917000689>.

TDSHS is offering Expense Reimbursement (registration, travel, lodging) for this event. Eligibility and instructions can be found on the registration site.

Block rooms available at the Marriott Las Colinas and Holiday Inn Express Suites. Please see registration site for details.

For additional information, please contact **Patti Taylor** at ptaylor@dfwhcfoundation.org or **469-648-5023**. ■

Around DFWHC Foundation



Foundation can now provide HIPAA compliance

HIPAA REGULATIONS CHANGED SUBSTANTIALLY after the passage of the **2013 Omnibus Rule** to protect ePHI – patient information in electronic form. HIPAA compliance provides a solid cybersecurity foundation, but most physician offices are, on average, only 14-15 percent compliant with the new regulations.

The DFW Hospital Council Foundation has now partnered with **Third Rock (<http://thirdrock.com/>)** to provide a complete, easy, affordable HIPAA solution that decreases the administrative burden of compliance while helping you safeguard your practice against cybertheft and daunting Office of Civil Rights (OCR) fines. How well does your practice measure up?

If you are not in full compliance, contact **Jordania Lilly** at **469-648-5122** for a referral to Third Rock for your Rx for HIPAA compliance and cybersecurity. ■



Kristin Jenkins (l to r), Lori Millner and Sushma Sharma.

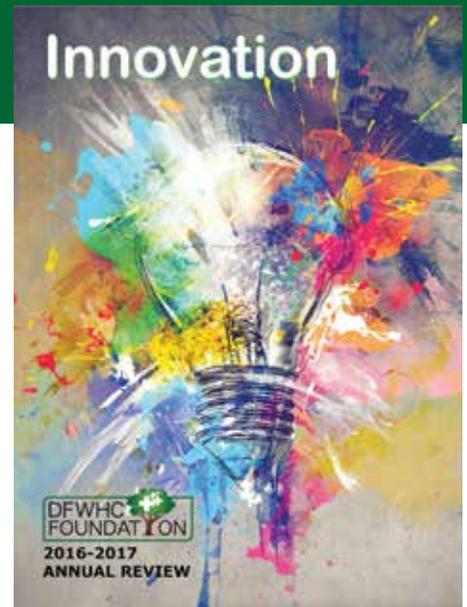
Millner honored at CHC event

LORI MILLNER, THE LONG-TIME CHAIR of the DFW Hospital Council (DFWHC) Foundation's Community Health Collaborative (CHC) and executive director of the DFW Area Health Education Center (DFW AHEC), was honored July 11 for her leadership and upcoming retirement in August.

Millner was acknowledged during the CHC's monthly meeting at the DFWHC Foundation offices in Irving. She was presented flowers and gifts for what would be her final meeting with the collaborative.

"Lori has been such a great leader of the CHC since its inception," said Sushma Sharma, director of public and population health research at the DFWHC Foundation. "We have been able to make great strides under her guidance and she will be sorely missed. We wish her the best of luck in her future adventures." ■

Innovation



Annual Report 2016-2017

THE DFW HOSPITAL COUNCIL (DFWHC) FOUNDATION

RELEASED its 2016-2017 Annual Report on July 14. The 20-page document details the activities of each department to include research papers, awards and final numbers on the Hospital Engagement Network (HEN). The DFWHC Foundation's participation in the HEN concluded in 2017, with 24 hospitals participating, 887 "patient harms" avoided and \$5 million in hospital savings. Themed "Innovation," the report details each DFWHC Foundation department to include Research, Workforce, Patient Safety/Quality, Data and the Texas Quality Initiative. Hard copies were distributed to members in July. ■

Record turnout for "Falls Prevention"



A RECORD NUMBER OF 298 REGISTRANTS participated in the educational webinar "Redesigning Patient Education: Patient Engagement and Autonomy and how to use these techniques to decrease patient falls" on July 11. The DFW Hospital Council (DFWHC) Foundation event detailed innovative techniques to engage hospital employees in "falls prevention."

Patricia Quigley, PhD, ARNP, CRRN, FAAN, FAANP, served as a guest speaker by way of Florida. The webinar was hosted in the DFWHC Foundation offices. Topics included:

- The differentiation of the domains of adult learning (cognitive, psychomotor skills and affective) to prioritize patient education content emphasis;
- The redesign of patient education to fully engage patients as full partners in care;
- The consideration of patient autonomy as a primary factor to examine patient education content and process;
- And the examination of post fall practices as a key intervention to educate patients in fall prevention.

The activity was submitted to the Texas Nurses Association for approval to award contact hours. For information, contact **Patti Taylor** at **469-648-5023** or **ptaylor@dfwhcfoundation.org**. ■



TQI launches innovative programs for surgeons

AN INNOVATIVE PROGRAM proposed by the Texas Quality Initiative (TQI) Committee has been launched for cardiac surgeons to access summary reports on their cases and patient outcomes. Comparison with national data from the Society of Thoracic Surgeons provides a standard for gauging improvement. Do you need a partner for cardiac surgery research or quality improvement? We have 50,000 Society for Thoracic Surgeons cardiac database cases matched with hospital claims-level data. Our wealth of data can be accessed by contacting **Dr. Judy Bezanson** at **jbezanson@dfwhcfoundation.org** or **469-648-5032**. ■

Around DFWHC Foundation



Domestic violence survey to be conducted

WORKING WITH THE DFW INTIMATE PARTNER DOMESTIC VIOLENCE COALITION, the DFW Hospital Council Foundation will conduct a survey in August of North Texas hospitals to review the screening criteria for violence reporting. According to the **World Health Organization**, there is a growing recognition of the health burden of intimate partner violence (IPV). Given that IPV is an important risk factor for many health issues, there is a need for healthcare providers to recognize and respond to such violence. The Coalition was formed as a subcommittee of both Tarrant and Dallas Counties' Fatality Review Teams. A brief survey was developed to determine how often victims are screened. Results will be shared with hospitals as soon as tallied. For information, contact **Dr. Sushma Sharma** at ssharma@dfwhcfoundation.org or **469-648-5031**. ■



HICATT grant attracts over 1,000 participants

THE HEALTH INFORMATICS CURRICULUM AND TRAINING FOR TRANSFORMATION (HICATT) grant was funded by the Office of the National Coordinator (ONC) to support the clinical workforce in transforming patient care. The DFW Hospital Council Foundation worked with UT Health School of Biomedical Informatics with partners from Texas, Oklahoma, Louisiana and New Mexico. Training was offered in five areas including: Interoperability of Health IT Systems, Health Care Data Analytics, Patient-Centered Care, Population Health Management and Value-Based Care Purchasing. Four tracks were offered for business, provider, IT/IS and clinical support. Training was provided through multiple webinars and classes from 2016-2017, with a final total of 1,073 participants. For information, contact **Sally Williams** at workforce@dfwhcfoundation.org. ■

Educational Session

Emergency Preparedness

Regulation Implementation

The Centers for Medicare & Medicaid Services (CMS) posted the final rule *Emergency Preparedness Requirements* to establish emergency preparedness consistency, increase patient safety during emergencies and establish a coordinated response to community disasters.

Regulations must be implemented by Nov. 15, 2017.

This is a presentation from CMS to discuss the new rule and to answer questions. Please send questions for CMS in advance to ptaylor@dfwhcfoundation.org. Questions are due by July 20.

This event has been provided by the DFWHC Regulatory Committee.

TUESDAY, AUGUST 1, 2017

10:00 A.M. - 12:00 NOON

TEXAS SCOTTISH RITE HOSPITAL FOR CHILDREN

2222 Welborn

Dallas, TX 75219

Target Audience: Hospital Executives, Emergency Preparedness
and Regulatory Leadership

Complimentary. Register: <https://emergencypreparedness8-1.eventbrite.com>

PRESENTED BY:



Healthcare Marketing Doesn't Have To Be Hard.

You Just Need The Right Ad Agency.

The healthcare landscape is constantly evolving. At Agency Creative, the healthcare sector is an area in which we are truly passionate and experienced. We understand the shifting landscape, your rapidly changing needs and can share your organization's unique story with the right people at the right time. That's because our proprietary strategic process fuels our thinking, resulting in highly-effective strategy and messaging, from PR and social media to broadcast, digital, print and experiential – and everything in between.

Let's Make Healthcare Marketing Easy. | HealthcareisHard.com | 972.488.1660

AGENCYCREATIVE
branding with passion

Proudly supporting DFWHC

A FEW HEALTHCARE BRANDS WE'VE IGNITED





▶ HOW MUCH COULD YOUR HOSPITAL SAVE?

In the H-Source marketplace, hospitals save money on inventory by buying and selling with each other.

H-Source is a marketplace platform that enables hospitals to sell slow-moving and unused devices, equipment, and pharmaceuticals that they don't need or can't use—so they can recover a portion of those costs.

With H-Source, members simply use their current purchase orders to buy supplies in the marketplace. It's an easy way to recover costs, purchase inventory for less, and improve sustainability by reducing waste.

Learn more and start saving
at [H-SOURCE.COM](https://www.h-source.com) >



WHERE PROFESSIONAL SCREENING MEETS QUALITY RESULTS



**BACKGROUND
SCREENING**



**POST-EMPLOYMENT
SCREENING**



**DRUG
SCREENING**



**STUDENT
SCREENING**

Group1ne

BACKGROUND SCREENING

www.gp1.com • 1-800-683-0255 • sales@gp1.com



Danny Davila

Executive Director
GroupOne Services

LinkedIn

<https://www.linkedin.com/pub/danilio-davila-lpi/1/7b9/962>

E-mail

ddavila@gp1.com

Value of your background report

EMPLOYERS CONTINUOUSLY REMIND US the most important resource in their company is employees. The financial commitment to acquire, develop and retain talent is more critical than ever before. A key component is the background report. The governance of the report is conducted by the **Fair Credit Reporting Act (FCRA)**, and companies such as GroupOne should uphold these regulations.

A recent survey by **The National Association of Professional Background Screeners** (of which GroupOne is a member) was issued by HR.com to over 1,528 HR professionals across the U.S. The survey's intent was to report how companies approach background screening. Outcomes of the survey provide an insight into today's trends.

A candidate's criminal history is at the forefront. At least 83 percent of respondents indicated they request some type of criminal history. Most requests are from national and county databases producing conviction records and court decisions. Consumer reporting agencies such as GroupOne receive raw data in several reports, and they are studied so multiple identifiers match to ensure accuracy.

Employers recognize the importance of a report being accurate. However, they are continuously looking for methods to reduce the time it takes to produce the report. Consumer reporting agencies are also exploring practices to reduce time, yet not accuracy. A recent trend is to remove identifying information such as addresses and birth dates from public records. Censoring identifiers adds time, increases uncertainty and impacts the onboarding period of the candidate.

Your consumer reporting agency brings a valuable service to your HR office. Background reports provide independent research and verification. Employees conducting the requests are state-licensed professional investigators and utilize the latest technology to attain a wide array of records. Ultimately, our primary objective is to ensure clients can hire candidates with confidence they are hiring a safe workforce. ■



GroupOne Services

Created by a board of hospital CEOs in 1989, GroupOne was the nation's first healthcare pre-employment screening program. Today, GroupOne provides convenient web-based solutions, automated employment verification and student background checks. It has grown into one of the most dependable human resource partners in the healthcare community.

- **GroupOne Trustees**
- **Janelle Browne**
Texas Health Resources
- **Queen Green**
HR Strategic Business Partner
- **Jeremy Howell**
Texas Scottish Rite Hospital for Children
- **David Knowles**
At Large
- **James O'Rielly**
Methodist Health System
- **Danielle Tarver**
Supplemental Staffing/Clinical Magnet

Contact us

GroupOne Services

300 Decker Drive,
Suite 300
Irving, TX 75062

972-719-4208

800-683-0255

Fax: 469-648-5088

Danny Davila:

ddavila@gp1.com

Kim Hines:

khines@gp1.com



GroupOneREPORT



Survey of background screening methods conducted by NAPBS

IN 2016, THE NATIONAL ASSOCIATION OF PROFESSIONAL BACKGROUND SCREENERS

(NAPBS) commissioned **HR.com** to conduct an unprecedented national survey of 1,528 HR professionals to gauge their views on background screening. Results were released this year.

What was discovered was nearly all human resources (HR) professionals now utilize background screening, citing public safety as a top priority. Employers of all sizes and locations report using screening as part of their onboarding process, typically after an interview or job offer. The number one challenge reported is the length of time to get results.

Nearly all the employers surveyed – 96 percent – stated their organization conducts one or more types of employment screening. A total of 83 percent of respondents screen all full-time employees.

Overwhelmingly, employers cited public safety as the top reason they conduct background screens. A full 89 percent stated they conduct screens for safety reasons. In a time when workplace shootings and other violence are news topics, employers are responding by implementing screening programs to protect employees, customers and communities. Other top reasons cited for screening: improving quality of hires (52 percent), protecting company reputation (45 percent), law/regulation (44 percent).

HR professionals highlighted the need for accuracy in their

screening, with 98 percent responding they believe it is “very important.” At the same time, nearly two in three (62 percent) stated the length of time to get results is the most significant challenge facing their organization. With states increasingly removing identifying information, such as address and dates of birth from public records, the challenge is expected to remain. Redacting identifiers can lead to delays in hiring or applicants losing out on a job while the search for identifiers is ongoing.

More than half of the respondents surveyed represented companies with fewer than 99 employees (52 percent) with nearly a quarter (24 percent) of all respondents coming from companies with fewer than 24 employees. Nearly half of respondents (46 percent) represent privately held companies with 37 percent representing non-profits. Most wait to conduct a background screen until after a job interview or conditional job offer. A full 86 percent conduct a background screen after the job interview, including 55 percent that wait until after a job offer is made.

The vast majority of respondents report including some form of criminal history check in screening (97 percent). On the other hand, 77 percent of employers currently do not use social media in their screening process, and only five percent use social media for all candidates.

You can find the report at <http://pubs.napbs.com/pub.cfm?id=6E232E17-B749-6287-0E86-95568FA599D1>. ■

GroupOneREPORT

A person in a white shirt and blue tie is shown from the chest up, with their hands held out in a gesture of presentation. The background is dark and filled with several semi-transparent icons of a person in a suit, arranged in a grid-like pattern. The overall image conveys a sense of professional service and human interaction.

GroupOne's Accio Data system tops competitors' market share

GROUPONE'S BACKGROUND REPORTING SYSTEM REMAINS on the cutting edge thanks to **Accio Data** (<http://www.acciodata.com/>). It was learned in July the system is flexible enough to integrate with 70 percent of the applicant tracking systems on the market.

A great achievement, no doubt, as the closest competitor is only compatible with 61 percent of the market.

"This is great news for GroupOne and ultimately for our clients," said **Danny Davila**, executive director of GroupOne. "Our philosophy is similar to Accio Data's in that we are trying to stay ahead of our competitors by

addressing our client's needs for software to be easily adaptable to their expectations."

In the coming months, GroupOne will announce exciting new Accio Data integrations which should put the background screening company even farther ahead of the competition. GroupOne understands the most important integration is the one clients need.

Accio Data was chosen by GroupOne in 2014 as its screening platform provider for background checks, screening solutions, student screening, faculty screening, volunteer screening and drug screenings for hospitals across the nation. ■



GroupOne partners with MCAG to provide class action settlement recovery

GROUPONE IS PLEASED TO ANNOUNCE it has teamed with **Managed Care Advisory Group, LLC (MCAG)** to offer clients access to its Class Action Settlement Recovery Service (SRS). The strategic agreement with MCAG will assist clients in identifying and recovering significant funds from class action settlements.

MCAG has worked closely with thousands of physician practices, hospitals, healthcare systems and businesses to assist in the management of class action opportunities. Healthcare organizations are frequently the most eligible entity for these settlements. To date, MCAG has distributed more than \$300 million to thousands of customers.

MCAG (<https://www.mcaginc.com/>) is a nationally recognized leader providing services to improve cash flow through class action settlements recovery and revenue enhancement solutions. Owned and managed by experienced, senior industry consultants and professionals, MPAG's client base includes public and privately held companies ranging from entrepreneurial businesses to major corporations; hospitals and major healthcare systems; nonprofit organizations; and schools and universities.

Through the GroupOne partnership, MCAG will track relevant settlements on behalf of hospital clients, identify meaningful opportunities and assist in filing claims for payment. MCAG can also review settlement notices sent directly to an organization. The Settlement Recovery Service is provided on a contingency fee basis so there is no risk to enroll. GroupOne clients will not receive

invoices and MCAG only receives payment when an organization recovers cash.

Upcoming settlements include:

- **Lithium Ion Battery Settlement, \$64 Million;** Deadline – Sept. 30, 2017
Healthcare facilities that purchased Lithium Ion Battery Products including, but not limited to, laptops, notebook and tablet computers and mobile phones can receive cash from the settlement;
- **Menactra Antitrust Litigation Settlement (Sanofi Vaccine), \$61.5 million**
Any healthcare entity that purchased Menactra from Sanofi or its subsidiaries between March 1, 2010, and when the alleged illegal conduct stopped is potentially eligible to receive funds;
- **Blood Reagent Antitrust Litigation, \$22 Million**
Any healthcare entity that purchased Blood Reagents directly from Ortho or Immucore from November 2000 – October 2015 is eligible to receive funds.

You can visit the Settlement Recovery Service website for GroupOne clients at <https://settlements.mcaginc.com/partners/groupone/GROUP1>.

For additional questions, please contact **Adam T. Schmidt**, vice president, Settlements Division at **800-355-0466 x2406** or aschmidt@mcaginc.com. ■



CampbellWilson[®]

Making a *Difference* in **Healthcare**

CampbellWilson, LLP is a proud sponsor of the Dallas-Fort Worth Hospital Council!

Serving Hospitals and **Healthcare** leaders for over 30 years.

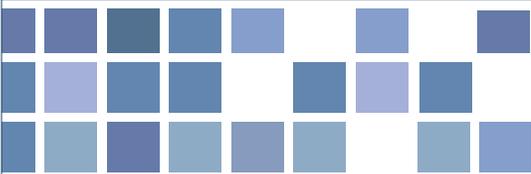
- *Medicare/Medicaid Reimbursement*
- *Regulatory Services*
- *Medicare Cost Report Preparation and Appeals & other Regulatory Reporting*
- *Strategic Planning*
- *Financial Forecasting*
- *Time Study Software Solutions*
- *Regulatory Compliance*
- *Licensing & Applications*

Follow us on:



www.campbellwilson.com

15770 North Dallas Parkway, Suite 500, Dallas, TX 75248



Introducing the New MFP HEALTHCARE SOLUTION



Access from Anywhere

Securely coordinate patient care anywhere... from your PC or Mac®, mobile device, your EMR and any Kno2-enabled device, such as the Healthcare MFP.



Centralized Exchange

Simplify your care coordination by centralizing all patient document exchanges into a single solution, eliminating the need for fax machines, fax servers, direct messaging solutions and logins to third-party patient portals.



Connect with Others

Unable to locate a provider in the healthcare network? No problem. Broaden the network by inviting others to join in the movement, and begin sharing their patient information... electronically and securely.



Share Patient Information

Electronically share any information critical to a care plan, a referral or an entire transition of care, improving your care coordination workflows, which result in a better experience for your patients.



Information On Demand

Electronically query records from other providers, retrieving patient information on demand. No longer wait on error-prone, manual release of information processes.



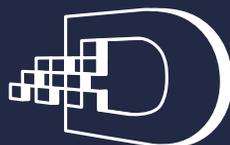
Route Patient Information

Easily deliver patient information to and from your patient charts — whether in folders or an EMR, removing the burden of unnecessary manual faxing and filing processes.

This new Healthcare MFP Solution, connected by Kno2, is a clinical document exchange cloud service that helps healthcare professionals access, search & route patient information to millions of providers across the country. This cloud solution allows healthcare providers securely share electronic & paper patient information using a HIPPA compliant workflow from their ConnectKey MFP.

Visit Denitech.com for more information

Provided by



Denitech

A Xerox Company



Preferred Pricing available to Dallas-Fort Worth Hospital Council Members

Denitech

- Corporate Office
820 W. Sandy Lake Rd
Suite 100
Coppell, TX 75019
- Dallas Office
8350 North Central Expwy
Suite 350
Dallas TX 75206
- Fort Worth Office
500 E 4th St
Suite 100
Fort Worth, TX 76102
- Contact
Healthcare Representative:
Larry Holland
972-831-2000

DFWHC's 2017 Board of Trustees



Brett Lee
Chair
Baylor Scott & White
Lake Pointe



Lillie Biggins
Past Chair
Texas Health Harris
Methodist FW



Scott Peek
Chair-Elect
Baylor University
Medical Center



Nancy Cychol
Trustee
Cook Children's
Health Care System



Clay Franklin
Trustee
Medical City
Fort Worth



Bill Whitman
Trustee
JPS Health
Network



Jerri Garison
Trustee
Baylor Scott & White
Plano



Joseph DeLeon
Trustee
Texas Health Harris
Methodist SW FW



John Phillips
Trustee
Methodist Mansfield
Medical Center



David Berry
Trustee
Children's Health
System



Jeffrey Cellucci
Trustee
Kindred
Healthcare



Charles Gressle
Trustee
Medical City
Plano



Robert Walker
Ex-Officio
Texas Scottish Rite
Hospital for Children



Dr. Fred Cerise
Ex-Officio
Parkland Health &
Hospital System



Clint Abernathy,
Ex-Officio
Texas Health Harris
Methodist Alliance