



DALLAS-FORT WORTH  
HOSPITAL COUNCIL

WINTER 2023

# INTERLOCUTOR

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**PAGE 30**

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DFWHC radio program "The Human Side of Health Care" comes to an end

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**Steve Love**

President/CEO  
Dallas-Fort Worth  
Hospital Council

# What is the status of health equity?

I RECENTLY TOOK AN OLD PAIR OF SHOES that I loved to a shoe repair shop, otherwise known as a cobbler. And yes, there are still a few cobblers plying their trade in our community. I loved this pair of shoes because they were so comfortable however, they were scuffed, needed new heels and would require quite a bit of repair. After three weeks, I called the cobbler and asked if he could give me a status report. His curt reply was, “I can’t give you a status report, but I can tell you they’re not ready.”

I had to laugh. I considered that question as I was working on a Dallas-Fort Worth Hospital Council (DFWHC) Board of Trustees’ request to drive health equity in North Texas. I asked myself, “What is the status of health equity in North Texas?” Well, I can’t provide a status report, but I do know we do not have health equity in North Texas.

At the beginning of 2023, the DFWHC Board revised our mission statement to include “driving health equity in our region.” This means we must inspire improvement in healthcare outcomes, diversity and inclusion. We must remove the barriers that compromise opportunities for quality healthcare and integrate this vision into all aspects of delivery. We must transform our actions into culturally appropriate patient care. We can achieve this by adopting new policies inspired by the collection and analyzation of data. We must also continue our efforts to encourage diversity in the leadership of our hospital executives and boards of trustees.

This will be a marathon rather than a sprint. As we research healthcare outcomes not only by zip code but detailed even further to the block level within a community, we plan to analyze the data to help us create clearly defined goals. The social drivers of health like education, transportation, food security and income have an enormous impact on health equity. But race, gender and culture play an equally important role.

We have an enormous task ahead, but the people of North Texas are up to the challenge. We will need the assistance of all stakeholders including our legislative leaders. This state legislative session must address the end of a potential public health emergency where 1.3 million Texans could lose Medicaid coverage. We must determine a way to soften the blow that could occur after May 11, 2023.

We should note Texas has one of the highest maternal mortality rates in the nation, especially among African-American women, and we must increase postpartum coverage to 12 months. Additionally, Texas leads the nation with the highest medical uninsured rate and the time has come to expand Medicaid coverage. We are standing with only a handful of states that have rejected this valuable tool to increase healthcare coverage for our most vulnerable residents.

Achieving health equity will not be easy, but if we work together through positive collaboration and actions, then North Texas could become a role model for the country. Perhaps then, we could truly offer a status report. ■

WINTER 2022 WWW.DFWHC.ORG

## INTERLOCUTOR

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**INTERLOCUTOR**  
**1: one who takes part in dialogue**  
**2: one in the middle of a line who questions end people and acts as leader**

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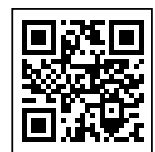


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Dallas-Fort Worth Hospital Council's awards honorees.**

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DALLAS-FORT WORTH  
HOSPITAL COUNCIL



**Becky Tucker**



**Jessica O'Neal**



**Kyle Armstrong**

## DFWHC announces 2023 Board of Trustees

**THE DALLAS-FORT WORTH HOSPITAL COUNCIL (DFWHC) HAS ANNOUNCED** its Board of Trustees for 2023. The Board of Trustees consists of the following individuals:

- Chair, **Becky Tucker**, Senior VP of Channel Integration, Texas Health Resources;
- Chair-Elect, **Jessica O'Neal**, CEO, Medical City Las Colinas;
- Past Chair, **Blake Kretz**, President, Texas Health Arlington Memorial Hospital;
- Trustee, **Dr. Roberto de la Cruz**, Exec. VP, Chief Clinical Officer, Parkland Health;
- Trustee, **Dr. Seth Toomay**, Associate VP, CMO, UT Southwestern Medical Center;
- Trustee, **Bill Masterton**, Chief Operating Officer, JPS Health Network;
- Trustee, **Natalie Wilkins**, Chief of Staff to President/CEO, Cook Children's;
- Trustee, **Juan Fresquez**, President, Methodist Mansfield Medical Center;
- Trustee, **Will Turner**, President, Baylor Scott & White Medical Center - Waxahachie;
- Trustee, **Vanessa Walls**, Executive Vice President Northern Market, Children's Health;
- Trustee, **Steve Edgar**, CEO, Medical City Denton;
- Trustee, **Kyle Armstrong**, President, Baylor University Medical Center;
- Trustee, **Chris Richard**, CEO, Kindred Hospitals;
- Ex-Officio, **Matt Chance**, Chief Operating Officer, Scottish Rite for Children;
- Ex-Officio, **Patrick Brown**, VP of Operations, Methodist Charlton Medical Center.

Completing their terms are **John Phillips**, President, Methodist Dallas Medical Center; **Michael Sanborn**, President, Baylor Scott & White All Saints Medical Center – Fort Worth; **Dr. Karen Duncan**, President/CEO, JPS Health Network; **Sharn Barbarin**, CEO, Medical City Arlington; **Audra Early**, Senior VP Strategy and Development, Kindred Hospitals; and **Dr. Christopher McLarty**, Associate VP/CNO Ambulatory Services, UT Southwestern Medical.

"We're excited about the new additions to our 15-member board representing a talented group of North Texas healthcare executives," said **Stephen Love**, president/CEO of DFWHC. "They have a broad range of talent so valuable to our mission to improve quality healthcare and drive health equity in the region. We would also like to thank John Phillips, Michael Sanborn, Dr. Karen Duncan, Sharn Barbarin, Audra Early and Dr. Christopher McLarty for their dedicated board work over the past year." ■



# Hall Render and FORVIS announced as DFWHC Year-Round Sponsors for 2023



**THE DFW HOSPITAL COUNCIL (DFWHC) IS PROUD** to announce **Hall Render** and **FORVIS** will serve as Year-Round Sponsors for 2023. The designation allows the two companies to be the top sponsors at all major DFWHC events including the 25th Annual Employee of the Year Luncheon on April 19 and the 75th Annual Awards Luncheon in October. They will also host a series of complimentary webinars in 2023 for hospital members.

**Hall, Render, Killian, Heath & Lyman, P.C.** is a national health law firm with offices around the country. With more than 50 years of experience and nearly 150 attorneys serving clients, Hall Render is recognized as one of the nation's preeminent health law firms. Clients include large and small business entities from a variety of industries and major health care providers.

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For information on Year-Round Sponsorships, please contact **Chris Wilson** at **[chrisw@dfwhc.org](mailto:chrisw@dfwhc.org)**. ■

# RADIO FAREWELL

*The Human Side of Health Care*

set to conclude on March 26



**EPIISODES**  
**166**



**GUESTS**  
**350**



**TOPICS**  
**290**



DALLAS-FORT WORTH  
HOSPITAL COUNCIL





In January, 2020, Thomas Miller (left) and Stephen Love (right) interview Senator Nathan Johnson for the first episode of “The Human Side of Health Care.”

## DFWHC concludes radio program, podcast

**THE DALLAS-FORT WORTH HOSPITAL COUNCIL (DFWHC) ANNOUNCED** in February the conclusion of its radio program and podcast “**The Human Side of Health Care**,” a weekly broadcast airing every Sunday since its debut on January 5, 2020 on **NewsRadio 1080 KRLD AM**. The program’s final broadcast is scheduled for Sunday, March 26.

“This was a decision made by our DFWHC Board of Trustees,” said **Stephen Love**, president/CEO of DFWHC and host of the program. “We believed the program had run its course and served as a great sounding board during the COVID-19 pandemic to create awareness in North Texas. After the conclusion of the show, we will begin focusing our resources on driving improvement in healthcare outcomes, health equity, diversity and inclusion in North Texas.”

“The Human Side of Health Care” ran for three-plus years to include 166 hour-long episodes, with more than 350 guests interviewed.

“The show wasn’t just about the pandemic,” Love said. “What we attempted to do was inspire community awareness on the many programs provided by our area hospitals. This was a unique way of giving back to the community by hosting the radio show and podcast to effectively communicate how hospitals, clinicians and healthcare professionals not only treat diseases, but are partners within the communities they serve.”

The idea was inspired by DFWHC’s participation in the national broadcast “I’m Listening” on September 8, 2019. Sponsored locally by DFWHC, the program was an attempt

to create community awareness on depression while highlighting National Suicide Prevention Week.

“Our experience with ‘I’m Listening’ was so positive, we thought it would be a great idea to spread the word on the many projects of our North Texas hospitals,” said Love. “We planned for the radio program to touch on such topics as chronic illness, social drivers of health and children’s healthcare. The sky was the limit.”

The home base of “The Human Side of Health Care” was KRLD 1080 AM, an Audacy, Inc. station serving the DFW Metroplex and North Texas with a news/talk radio format. It is a Class A station broadcasting at 50,000 watts, with a listening range covering a 30-county area of North Texas, Central Texas and Oklahoma.

“On behalf of the DFWHC Board of Trustees, we would like to thank the Audacy radio network and the team at KRLD including **Paul Davis**,” Love said. “We would especially like to thank **Thomas Miller** who not only hosted every program with me, but did an outstanding job editing and producing the show.”

All 166 episodes of “The Human Side of Health Care” will be available on Spotify, Apple Podcasts, Google Play, Stitcher, YouTube and iHeart Radio.

“It was a great run, especially during the rise of the pandemic when we worked so hard to create awareness and spread the word on safety issues,” said Love. “While the final episode on March 26 will mark the end of the radio and podcast program, it will also mark the beginning of our new plans to drive health equity and culturally appropriate patient care for everyone.” ■



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**1080**



DALLAS-FORT WORTH  
HOSPITAL COUNCIL

*Sunday's at  
1:00 and 7:00 pm, CST*

# *The Human Side of Health Care*



*with Stephen Love (left) and Thomas Miller.*





**Dr. Alla Al-Habib**



**Dr. Johanna Bayer**



**Patrick Rohan**



**Natalie Wilkins**

**THE DFW HOSPITAL COUNCIL (DFWHC) RADIO** program “The Human Side of Healthcare” has been broadcast on a weekly basis since 2020 on **KRLD 1080 AM**.

Hosted by DFWHC President/CEO **Stephen Love** and KRLD’s **Thomas Miller**, the program has showcased the activities of North Texas hospitals while providing crucial COVID-19 updates.

Past broadcasts are posted online at Spotify, Apple Podcasts, Google Play, Stitcher, YouTube and iHeart Radio.

Guests during the winter have included:

- **Dr. Tasneem Ahmed**, Texas Health Digestive Specialists;
- **Dr. Alla Al-Habib**, Texas Health Presbyterian Plano;
- **Dr. Aiyanna B. Anderson**, Texas Health Harris Methodist FW;
- **Dr. Johanna Bayer**, Baylor Scott & White All Saints – Fort Worth;
- **Dr. Scott Bloemendal**, Texas Health Harris Methodist Fort Worth;
- **Dr. Christopher Cottrell**, Medical City Frisco;
- **Matt Dufrene**, Blue Zones Project North Texas;
- **Dr. Tonya Fuqua**, Cook Children’s;
- **Cathy Glenn**, Texas Health Presbyterian Dallas;
- **Dr. Gary Gross**, Texas Health Presbyterian Dallas;
- **Dr. Lara Gross**, Texas Health Presbyterian Dallas;
- **Dr. Steven Hudak**, UT Southwestern Medical Center;
- **Dr. Tulika Jain**, Texas Health Presbyterian Dallas;
- **Dr. Bradley Leonard**, Wise Health System;
- **Dr. John Marcucci**, Baylor Scott & White – Plano;
- **Dr. Andrew Miller**, Texas Health Harris Methodist Fort Worth;
- **Dr. Ranjit Nair**, Medical City Fort Worth;
- **Dr. Theresa Patton**, Methodist Dallas Medical Center;
- **Dr. Scott Perry**, Cook Children’s;
- **Jason Piecek**, PHI Air Medical;
- **Dr. James Ralston**, Medical City McKinney;
- **Dr. Shawn Riley**, CareNow Urgent Care;
- **Patrick Rohan**, Medical City Frisco;
- **Michael Sanborn**, Baylor Scott & White All Saints – Fort Worth;
- **Dr. Alexander Satin**, Medical City Frisco;
- **Dr. Michael Tolle**, Texas Health Presbyterian Dallas;
- **Dr. Amelia Tower**, Texas Health Harris Methodist Fort Worth;
- **Becky Tucker**, Texas Health Resources.;
- **Vanessa Walls**, Children’s Health;
- **Krister White**, Parkland Health;
- **Natalie Wilkins**, Cook Children’s. ■

**Your feedback is welcome. For information, please do not hesitate to contact [radio@dfwhc.org](mailto:radio@dfwhc.org).**

# Around DFWHC

## Durovich receives Earl M. Collier Award at THA conference

THE TEXAS HOSPITAL ASSOCIATION (THA) named **Christopher Durovich**, FACHE, president and CEO of **Children's Health**, as the recipient of its 2022 Earl M. Collier Award for Distinguished Health Care Administration in recognition of his dedication to the health care industry. The award was presented in February at THA's 2023 Annual Conference and Expo.

The Earl M. Collier Award is the highest honor bestowed by THA. It recognizes outstanding executives who have distinguished themselves through their contributions to the health care industry and their profession.

For the past 20 years, Durovich has led Children's Health as president and CEO, guiding the organization through extensive growth and transformation, evolving from a single local children's hospital to a nationally recognized, award-winning and market-leading pediatric health system. Today, the system serves more than 300,000 patients annually across 800,000 separate patient



**Christopher Durovich**

encounters and contributes \$3.3 billion to the North Texas economy.

"I am honored and humbled to receive this recognition," said Durovich. "I would not be here without the extraordinary work and passion of all those at Children's Health who fulfill our mission to make life better for children. I am proud to serve with and among them." ■

## Texas Health receives award for Blue Zones Project

TEXAS HEALTH RESOURCES WAS HONORED with the Texas Hospital Association's 2022 Excellence in Community Service Award in February for the accomplishments of Blue Zones Project® Fort Worth, a well-being initiative in Tarrant County implemented by North Texas Healthy Communities (NTHC), the nonprofit arm of Texas Health Resources. The award recognizes hospitals and health care systems that distinguished themselves through contributions to their communities.



**Barclay Berdan**

communities adopt the Power 9® principles of a healthy lifestyle. Those include moving naturally, eating more plant-based foods, living with purpose, putting family first and reducing stress. In Fort Worth, that has meant working with area schools, businesses, neighborhoods, grocers, restaurants, non-profits, faith-based organizations and residents to make healthier choices.

"Blue Zones Project Fort Worth is a testament to the power and effectiveness of collective impact," said **Barclay Berdan**, FACHE, CEO, Texas Health Resources. "We have seen tremendous improvement in the health and well-being of our community and its residents."

Blue Zones Project's efforts have yielded substantial improvements in Fort Worth. Between 2013 and 2018, Fort Worth raised its national well-being ranking to 31st from 185th on the list of 190 reported metro areas in the Gallup National Health and Well-Being Index (WBI). ■

# Erol Akdamar promoted to HCA America Group President

**MEDICAL CITY HEALTHCARE ANNOUNCED** in November its President **Erol Akdamar** was being promoted as president to oversee a larger region of the Hospital Corporation of America (HCA), to include the Gulf Coast, San Antonio, North Texas, Central West Texas and Continental Divisions. A Nashville-based healthcare system, HCA is made up of 182 hospitals and 2,300 ambulatory care sites around the country. The promotion was effective January 1.

Akdamar will be replacing **Jon Foster**, who is rising to the role of executive vice president and chief operating officer of HCA, where he will oversee the growth and operational support areas.

The current president of HCA's San Antonio division **Allen Harrison** will be promoted to the North Texas



**Erol Akdamar**

Division president to oversee Medical City Healthcare. In addition, Medical City's new chief financial officer will be **Kristin Dyer**, currently the CFO for HCA's North Florida Division. The two will be part of the team overseeing Medical City's 16 area hospitals.

Akdamar has been the president of HCA's North Texas Division (branded as Medical City) since 2013, having run Medical City Dallas and Medical City Children's hospitals. He joined HCA in 1993 as an administrative resident. ■

## Dr. Warner accepts position at The Ohio State University

**IT WAS ANNOUNCED IN JANUARY** that **Dr. John Warner**, executive vice president for health system affairs and health system CEO at **UT Southwestern**, had accepted a new position at The Ohio State University. He will serve as Chief Executive Officer of The Ohio State University Wexner Medical Center, and Executive Vice President at Ohio State. The Wexner Medical Center is an academic medical center and health care system that encompasses seven hospitals, with more than 24,000 employees.



**Dr. John Warner**

Dr. Warner has worked at UT Southwestern for 20 years. After leading UT Southwestern University Hospitals since 2012, he was appointed executive vice president for health system affairs in 2018 to oversee the UT Southwestern clinical enterprise.

During his tenure, Dr. Warner played a crucial role in the planning and construction of UT Southwestern's William J. Clements Jr. University Hospital, which is consistently named the best in Dallas.

Dr. Warner also served as the medical director of the Doris and Harry W. Bass, Jr. Clinical Center for Heart Lung and Vascular Disease at UT Southwestern. Between 2017 and 2018, he was president of the American Heart Association. In 2015, Dr. Warner served as the chair of the DFW Hospital Council Board of Trustees. ■

# Around DFWHC

## Baylor Scott & White hospital planned for Frisco

**BAYLOR SCOTT & WHITE ANNOUNCED PLANS** to start construction in March of a new hospital in Frisco, minutes away from the Omni PGA Frisco Resort and the future site of a new Universal Parks and Resorts theme park.

The 339,988-square-foot facility, to be located at the northeast corner of PGA Parkway and the Dallas North Tollway, is expected to be completed by May 2025.

The early estimated cost of the structure is \$265 million, with Dallas' HKS Inc. listed as the design firm.



Baylor Scott & White bought the property from Dallas Cowboys owner Jerry Jones' Blue Star Land in June 2021.

Collin County's population is expected to double to 2.4 million by 2050. Between 2010 and 2020, Frisco grew from 116,989 to 200,509 residents. ■

## Methodist expanding into Celina in Collin County



**METHODIST HEALTH SYSTEM ANNOUNCED IN JANUARY** plans to build its newest hospital in the Collin County city of Celina. Approved by the system's Corporate Board of Directors, Methodist Celina Medical Center will be a \$200 million project on 46.7 acres of land at the southeast corner of the Dallas North Tollway and FM 428.

"For nearly a century, it has been our honor to provide compassionate, quality healthcare to North Texas

families," Methodist Health System CEO **James C. Scoggin, Jr.**, said. "And we are excited to extend that mission to an area where DFW is growing most: northern Collin County and, specifically, Celina."

Methodist plans to break ground later this year on the five-story, 200,000-square-foot project, with an expected opening date in early 2025. When opened, Methodist Celina Medical Center will initially bring over 220 jobs to Celina, whose population has tripled in the past decade.

"The City of Celina is thrilled to welcome Methodist Health System to our community," City Manager **Jason Laumer** said. "Methodist has provided exemplary care for generations of North Texas families, and I know their new medical center on the Dallas North Tollway will serve countless Celina families for many generations to come."

Methodist Celina Medical Center will feature 30 medical-surgical beds; 10 post-partum beds; eight intensive care unit beds; 12 emergency department beds; three operating rooms; and four labor and delivery rooms.

The hospital will also include a professional office building and shell space for future expansion.

"Expanding into new markets is a large part of our vision to be the trusted choice for health and wellness across North Texas," said **Pam Stoyanoff**, MBA, CPA, FACHE, President and Chief Operating Officer of Methodist Health System. ■



# Harrison named president of Medical City Healthcare

**MEDICAL CITY HEALTHCARE ANNOUNCED** in January **Allen Harrison** would serve as its new president. He joins the division after former President Erol Akdamar was promoted to the parent company HCA Healthcare's American Group region.

Prior to joining Medical City Healthcare, Harrison served for four years as president and CEO of Methodist Healthcare in San Antonio. Previously, he served as CEO at Methodist Hospital and Methodist Children's Hospital in San Antonio, CEO at St. David's North Austin Medical Center, and COO of Presbyterian/St. Luke's Medical Center in Denver, Colorado. Harrison started his career as a clinical engineer, responsible for overseeing a service line delivering custom medical equipment to persons with disabilities.

"Providing the highest level of quality, safe and compassionate care is our top priority," said Harrison. "I am honored to work alongside and build on the excellence



**Allen Harrison**

created by the many dedicated professionals who are already providing outstanding care in every action, every patient, every time."

Harrison holds a Master of Business Administration from the University of Colorado at Denver, a Master of Engineering and Biomedical Engineering from the University of Virginia and he graduated magna cum laude from Oral Roberts University with a Bachelor of Science in Biomedical Engineering. ■

# Karlix named CEO of Medical City Green Oaks

**MEDICAL CITY GREEN OAKS ANNOUNCED** in February **Krysla Karlix** would serve as its new CEO. A leader and administrator in North Texas behavioral healthcare for over two decades, Karlix joined the executive team at Medical City Green Oaks as COO in December 2016.

Since then, Medical City Green Oaks has expanded its ECT and telepsychiatry services, earned HCA Healthcare's Unit of Distinction award for inpatient services and been ranked No. 1 within Medical City Healthcare for employee engagement and physician "Place to Practice."



**Krysla Karlix**

"Krysla has a proven track record of strategic leadership and focus on growth, physician collaboration, and a mission-driven commitment to delivering life-improving behavioral healthcare to patients and families," said **Allen Harrison**, president of Medical City Healthcare. "I'm confident that Krysla will help lead Medical City Green Oaks to the next level of excellence."

As CEO, Karlix will be responsible for all inpatient and outpatient operations related to Medical City Green Oaks, including the 124-bed inpatient hospital serving adolescents (12 and above) and adults, two outpatient clinics located in Dallas and Plano, 24-hour psychiatric crisis stabilization services and telepsychiatry services across the Medical City Healthcare system of care.

Karlix is an active volunteer with the National Alliance on Mental Illness. She earned a Master of Science in Social Work from the University of Texas at Arlington. ■

# Associate Members

## DEA RULES: Telemedicine controlled substance prescriptions



*By Christopher Eades  
and Todd Nova,  
Hall Render Attorneys*

**ON FRIDAY, FEBRUARY 24**, the Drug Enforcement Administration (DEA) proposed new regulations that would permanently allow for telemedicine-controlled substance prescriptions, including induction of medication assisted therapy (MAT) using buprenorphine.

These long-awaited rules will be subject to an accelerated, 30-day notice and comment period that ends March 31 to allow for implementation prior to May 11, when the Federal Public Health Emergency (PHE) is set to conclude.

The DEA in fact issued two proposed rules: one that addresses telemedicine prescribing generally and another specifically related to telemedicine prescribing of buprenorphine. The proposed rules can be accessed at <https://public-inspection.federalregister.gov/2023-04248.pdf> and would amend DEA regulations to create additional telemedicine flexibilities post-PHE.

We use the term “additional” since these proposed

rules do not simply adopt the DEA’s current exception for telemedicine prescribing due to the pandemic. They actually offer greater and permanent telemedicine prescribing flexibility while incorporating strict parameters for telemedicine prescribing. These parameters include limitations on the type and quantity of controlled substances that can be prescribed.

Interested stakeholders will have until March 31 to submit comments to the DEA. Given the impact of these regulations, interested stakeholders, including health care systems, prescribers and pharmacies, should review the guidance and consider submitting comments to address any unforeseen impacts. Relative to prescribers, questions exist regarding referrals from practitioners who have conducted in-person visits. Relative to pharmacies, note that the telemedicine prescribing standards do not appear to alter a pharmacist’s “corresponding responsibility” to ensure that a course of treatment is properly prescribed.



*These long-awaited rules will be subject to an accelerated, 30-day notice and comment period that ends March 31.*

**DETAILED DISCUSSION**

Current DEA regulations require that a patient receive at least one in-person physical examination by the prescribing practitioner before the provider may prescribe a controlled substance. The Ryan Haight Online Pharmacy Consumer Protection Act makes an exception for certain cross-coverage scenarios, as well as certain instances in which the prescriber is engaged in the “practice of telemedicine.”

These telemedicine exceptions, however, are quite narrow. These exceptions do not, for example, generally include the ability to prescribe to a patient who is at home when participating in a telemedicine encounter.

This requirement was softened temporarily as a result of the COVID-19 pandemic PHE when the DEA invoked its emergency authority to permit telemedicine prescribing of controlled substances without an in-person physical examination.

Specifically, during the PHE that terminates on May 11, DEA-registered practitioners may issue prescriptions for controlled substances to patients for whom they have not conducted an in-person medical evaluation provided:

- The prescription is issued for a legitimate medical purpose by a practitioner acting in the usual course of professional practice;
- The telemedicine communication is conducted using an audio-visual, real-time, two-way interactive communications system; and
- The practitioner is acting in accordance with applicable federal and state law.

If the above three conditions are met and documented,

the practitioner may issue the prescription using any of the methods of prescribing currently available and in the manner set forth in the DEA regulations.

With this exception having been in place for nearly three years, many health care entities and providers have operationalized an approach to telemedicine that effectively relies upon this exception.

These providers have anxiously awaited clarification regarding these rules with the PHE set to expire. While the DEA’s proposed rules would permanently expand the ability to prescribe through telemedicine, these proposed rules are more restrictive than the current COVID-19 exception.

**PRACTICAL TAKEAWAYS**

Health care providers should review and consider the impact of the significant concepts contained in the DEA’s proposed rules.

Similarly, health care entities including both prescriber and pharmacy-oriented organizations should address these rules as part of a comprehensive virtual care compliance plan or policy. Interested stakeholders will have until March 31 to submit comments to the DEA.

A failure to adjust clinical pathways to comply with these new rules, if finalized, may result in significant compliance and professional liability risk for both prescribers and dispensers.

For more information about the DEA’s proposed rules, please contact:

- **Chris Eades** at (317) 977-1460 or [ceades@hallrender.com](mailto:ceades@hallrender.com);
- **Todd Nova** at (414) 721-0464 or [tnova@hallrender.com](mailto:tnova@hallrender.com); or
- Your primary Hall Render contact.

*Hall Render blog posts and articles are intended for informational purposes only. For ethical reasons, Hall Render attorneys cannot give legal advice outside of an attorney-client relationship. ■*

# MUDDY MARKETING?



# TURN AC ON

When it comes to healthcare marketing, we'll show you the way. At Agency Creative, we elevate brands with clear strategy that help create authentic connections.

Let's make a splash together.



# PERSPECTIVES

INSIGHTS & INSPIRATION IN HEALTHCARE MARKETING



## 5 important marketing trends for 2023

We wanted to share a few forecasts on what the year holds for your brand.

### 1. Video Marketing Content Will Increase

With the advancement of smart phones little wonder 2023 is forecasted to increase the amount of video content on the full suite of social platforms. Why? Statistics tell the story: brands utilizing video content get 66% more qualified leads each year. Plus, they achieve a 54% increase in brand awareness. You can post patient testimonials, product demos, live webinars, user reviews, vlogs and more. If you aren't utilizing video content to promote your brand, 2023 is the year to begin.

### 2. User-Generated Content Will Overcome Customer Cynicism

User-generated content is essentially word-of-mouth advertising you can Google—it creates a connection and tells a story through personal recommendations. Social media will continue to reshape our news consumption, brand consideration,

and marketing. Established brands are increasingly leveraging user-generated content to raise audience engagement. A lot of customers simply don't trust advertisers or businesses. But volunteer reviews on social and other venues are relatively trustworthy.

### 3. New Targeting and Re-Targeting Solutions Will Expand

Broadcast TV commercials perform well for brands wanting to cast a wide net and it will continue in 2023. But if you want to reel in quality rather than quantity, focus on ad options that target engagement-based audiences. This aims for people who have already interacted with your healthcare business. As an example, 96% of those seeing a display ad are simply not ready to buy. Therefore, today's businesses use retargeting to create frequency and mindshare. Geo-targeting is another effective tool. It targets an individual's mobile device detecting their location and serving up relevant ads.

### 4. Agile Marketing Will Continue to Have an Impactful Role

Agile marketing is a fairly recent and economical marketing tactic. As its name suggests, it leverages the talents of highly

skilled marketers to collectively identify high-value audiences and then produce marketing methods that allow them to quickly track, assess, and tweak to increase the performance of the campaign. Look for this new methodology to become more widely recognized and adopted in 2023.

### 5. AI's Role in Future Trend Casting also known as machine learning, is growing by leaps and bounds.

We predict AI will play a continued role in marketing. Why do we say this? Well, because it is already begun. It improves the accuracy, speed, efficiency and personalization of your target audiences.

These are just a few essential targeting methods that we predict will continue to expand in 2023. It's a brave new world. Embrace it.



About the author

**Mark Wyatt** Founder & CEO, Agency Creative  
mwyatt@agencycreative.com



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# Associate Members

A brass padlock is positioned on a laptop keyboard. The padlock is closed and has a silver metal shackle. The text is overlaid on the padlock and the keyboard.

**FORVIS**  
WEBINAR

**Internal  
Controls  
for Fraud  
Prevention**

**March 21,  
2023**



# FORVIS

**FORVIS WILL BE HOSTING** the complimentary webinar “Internal Controls for Fraud Prevention” on Tuesday, **March 21** from 2:00-3:00 p.m., CT. Presenters include **Dr. Jamie Amos**, PMP, CFE, manager of risk advisory services at FORVIS; and **Randy Sherrod**, a senior manager of advisory services at FORVIS.

This informative webinar will provide insight on red flags that may indicate the possibility of fraud, the fraud triangle, fraud stats and how fraud is detected. In addition, the speakers will share some fraud cases and identify internal controls that can help limit the opportunity for fraud.

Learning objectives include:

- Explain elements of the fraud triangle;
- Describe red flags that indicate the possibility of fraud;
- Identify internal controls that can help limit the opportunity for fraud.

This event will potentially benefit healthcare, hospitals and health systems, community health centers, financial services, higher education, nonprofits, senior living and long-term care facilities, community health centers and the public sector.

The ideal audience would include accounting staff, accounting management, fiscal technicians, CFOs, audit staff, audit supervisors and internal audit directors.

There will be one CPE credit in the Auditing field of study to be awarded upon verification of participant attendance during live broadcast.

You can register at:

<https://event.on24.com/wcc/r/4111099/D16243D6DF7934117DE34FF0EEDD1123>.

For information, please go to:

<https://www.forvis.com/webinar/2023/03/internal-controls-fraud-prevention>.



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# Associate Members



Ribbon cutting at new University of St. Augustine campus in Irving/Las Colinas.

## Education with **Real-World Impact:** *USAHS Rehabilitative Sciences Programs reenergize healthcare*

By Dr. Ashley Bourque Meaux, Dr. Keith McWilliams, Dr. Meghan Savage and Dr. Thomas P. Werner

**IN AN EVER-CHANGING HEALTHCARE LANDSCAPE**, we evolve. The COVID-19 pandemic brought about a dramatic shift and essential reimagining. It asked all of us to adapt in the name of public health. It required health education to reexamine its approach, to reinvent and to revive. **The University of St. Augustine for Health Sciences (USAHS)** responded.

USAHS focuses on clinical excellence through graduate education. Its mission is “the development of professional healthcare practitioners through innovative, individualized and quality classroom, clinical and distance education.”

The health sciences institution prides itself on the ways it pioneers — through state-of-the-art technology, a dynamic blended learning model, a national network of expert faculty and more. The university continually uncovers new ways to respond to the needs of today’s

health sciences graduate students — and to our global community.

The rehabilitative sciences programs in occupational therapy (OT), physical therapy (PT) and speech-language pathology (SLP) prepare students for advanced roles in patient-centered care. Since the onset of the pandemic, these programs have been tailored to meet the needs of people of all ages across the country.

How are these niche programs reenergizing healthcare?

USAHS offers two professional OT programs: Master of Occupational Therapy (MOT) and Doctor of Occupational Therapy (OTD).

“We want our graduates to bring innovation into communities of need, better address disparities in healthcare and go where OT hasn’t gone before,” said Dr.



**Keith McWilliams**, OTD, OTR/L, DRS, Assistant Professor and Program Director, USAHS OT program.

During the pandemic, OT cohorts gained field experience by working with individuals with disabilities in local domestic violence shelters. Students were introduced to a new real-world application and brought occupational therapy to a different population.

The university has five campuses across Florida, California and Texas, and recently moved into a larger 55,050 square feet of classroom, laboratory and administrative space in Irving-Las Colinas.

The school is located in the VariSpace building, which previously served as the longtime headquarters for Zale Corp. The modern learning space boasts state-of-the-art tools that build clinical competence — from anatomage tables and a driving simulator, to assistive technology and an immersive clinical simulation lab. “The role of simulation in our curricula is to give students direct, hands-on practice that simulates any type of clinical experience prior to practicing in our community,” shared **Dr. Ashley Bourque Meaux**, CCC-SLP, Dallas Campus Director, Associate Professor and Assistant Program Director, USAHS MS-SLP Program.

Like OTs, physical therapists (PTs) focus on empowering people to live healthier, longer lives. According to the American Physical Therapy Association (APTA), PTs strive to build “a community that advances the profession of physical therapy to improve the health of society.”

Doctor of Physical Therapy (DPT) students are trained to promote optimal movement. COVID-19 left individuals with physical challenges, including compromised cardiopulmonary, musculoskeletal, nervous and endocrine systems. USAHS has enhanced the physical therapy (PT) coursework to prepare students to meet the needs of patients with post-COVID symptoms. Its graduates are equipped to examine, assess and assist in the restoration of movement and function.

“Our graduates will be a force for good and are poised to make a lasting impact in society now, and post-pandemic,” **Dr. Thomas P. Werner**, PT, MA, Associate Professor, USAHS DPT program, explained.

COVID-19 demonstrated a critical need for well-rounded clinicians who can meet the diverse needs of the communities they serve. The profession of speech-

language pathology (SLP) is expected to grow 21% in the next 10 years, according to the U.S. Bureau of Labor Statistics May 2021 National Occupational Employment and Wage Estimate (BLS).

USAHS’ Master of Science in Speech-Language Pathology (MS-SLP) program prepares graduates to identify and manage a full range of communication conditions across the lifespan.

The pandemic presented a learning opportunity for speech-language pathologists (SLPs) — patients with unique cognition, voice, fluency and swallowing issues. USAHS MS-SLP faculty sought training to better prepare students to treat these conditions. Students partnered across professions to use advanced technology to increase the accuracy of diagnoses and create evidence-based treatment plans.

With an enhanced focus on critical thinking, cultural competency, ethical standards and compassionate patient care principles, USAHS MS-SLP graduates are committed to promote quality of life.

With USAHS’s collaborative, team-based approach to learning, students partnered across professions to use advanced technology to increase the accuracy of diagnoses and create evidence-based treatment plans.

“We train speech-language pathology students to meet the complex needs of patients today and in the future,” said **Dr. Meghan Savage**, PhD, CCC-SLP, F-NAP, Associate Professor and Program Director, USAHS MS-SLP.

No matter the health care challenge, USAHS graduates are committed to transforming lives. They are prepared to energetically influence their profession — all while enjoying a rewarding and promising career. The pandemic called on health care professionals to pivot — to recognize the unique needs of patients and to meet them where they are. It reminded us of the demand for quality clinicians who can make an impact in the world.

That demand has been compounded by the pandemic, but the University is committed to build a talent pipeline for the healthcare industry. We’re one university and one community, and we pledge to fill the homes, businesses and hospitals with our graduates, who are all USAHS at heart.

Ready to join USAHS’ dynamic, collaborative community? Visit [usa.edu](http://usa.edu) to learn more about USAHS’s immersive OT, PT and SLP programs, and apply today. ■



**Jennifer Miff**

President, DFWHC Foundation  
Senior Vice President, DFWHC

# Thank you for 20 years of service

AT THE DFW HOSPITAL COUNCIL (DFWHC) FOUNDATION, we are so grateful to be planning and preparing for our first in-person Employee of the Year (EOY) Event since 2019! This is also our 25th EOY celebration and we cannot wait to recognize those healthcare employees who make such an enormous difference for our hospitals each and every day.

This event has also made me take an extra moment to think about our own staff at the DFWHC Foundation. We have two employees who reach their 20-year anniversary with our team this year. **Theresa Mendoza**, our director of data services and research, started with the Foundation in 2003 and reached the 20-year service milestone in January. **Sally Williams**, our director of workforce, started the same year and reaches her 20-year work anniversary in April. I asked Theresa and Sally to highlight what they love most about working at the DFWHC Foundation and serving the hospitals of North Texas. Here’s what they had to say.

Theresa said “I am grateful for the privilege to work with over 100 North Texas Hospitals and academic partners to ensure our valuable data resources are used to impact the improved health of all North Texans. Being part of the Foundation for the last 20 years has been an honor, especially the way our work has helped improve lives – whether it’s reducing hospital-acquired infections across North Texas or reducing readmissions due to environmental issues. I believe data can save lives and the DFWHC Foundation strives to be the trusted source of insight that can drive innovation and help our community improve.”

Sally told me “What makes my job great is the people – our customers and partners that I have worked with over the years from across the hospitals, schools, community organizations. My heart has always been in service and I appreciate the opportunity to make a difference in people’s lives. I’ve spent most of my career working in non-profits and I love being able to make our customers’ lives easier and to help grow our healthcare workforce in North Texas with bigger and better opportunities for all.”

Please join me in thanking Theresa and Sally for their exceptional service to the DFWHC Foundation and our hospital members over the past 20 years. And thank you to the entire DFWHC Foundation team for helping to make us the trusted source for healthcare insight and improvement across our North Texas community. ■

**How to contact us**

972-717-4279

info@dfwhcfoundation.org



[www.dfwhcfoundation.org](http://www.dfwhcfoundation.org)

**Foundation Mission**

Inspire continuous improvement in community health and healthcare delivery through collaboration, coordination, education, research and communication.

**Foundation Vision**

As the trusted “go to” resource, inspire collective improvement of health and healthcare outcomes.

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DFWHC Foundation

# Around DFWHC Foundation

## EXTENDED TO 2023!



## Mental Health First Aid availability is now extended thru August 2023!

**DID YOU KNOW COMPLIMENTARY** Mental Health First Aid Training Classes are still available in North Texas?

The DFW Hospital Council Foundation has a renewed Texas Department of State Health Services (DSHS) Grant that extends thru **August 31, 2023**. This grant provides the opportunity for employees, community members, healthcare workers or church groups to receive complimentary training in Mental Health First Aid.

Training is virtual with some live classes. You can find the latest class listings on our website at [www.healthyntexas.org](http://www.healthyntexas.org). Join an existing class or form a group

of a minimum of 10 for a private session. Class is six hours long with two hours of prep work prior. Once you take the class, you are certified for three years.

The class covers common signs and symptoms of mental illness and substance use; and how to interact with a person in crisis and connect them with help.

Counties where the class is available includes Ellis, Erath, Grayson, Hood, Hunt, Johnson, Kaufman, Navarro, Parker, Rockwall, Somervell and Wise.

To find a course or contact an instructor in your area, email [mhfantx@dfwhcfoundation.org](mailto:mhfantx@dfwhcfoundation.org). ■



# Celebration of Service!



**Christine  
Cashen**

## 25th Annual **Employee of the Year Luncheon**

*Honoring the best hospital employees of North Texas*

**April 19, 2023 • Hurst Conference Center**

Reception 11:00 a.m. • Luncheon/Awards 12 noon - 1:45 p.m.



# It's back - Employee of the Year Luncheon returns on **April 19!**



**IT'S BACK! AFTER A THREE-YEAR ABSENCE**, the DFW Hospital Council (DFWHC) Foundation's 25th Annual Employee of the Year Luncheon is set to return on Wednesday, **April 19**, at the Hurst Conference Center. This year's event, themed "Celebration of Service!", will honor hospitals employees from across North Texas with 16 recipients to be announced.

**Christine Cashen**, an energetic and lively motivator, will serve as this year's keynote speaker. For more than 20 years, Cashen has shared her expertise on conflict resolution, stress management and cultivating a happier and more productive workplace, a crucial message that could not come at a better time. Cashen comes highly recommended to the DFWHC Foundation specifically for this event.

For over two decades, the DFWHC Foundation's Employee of the Year Luncheon has honored more than 1,250 hospital employees. In the fashion of an awards show, the luncheon serves as a salute to the North Texas hospital workforce with recipients announced at the event and asked to come to the stage to receive their honor.

"Each year we make a request for nominees from member hospitals and are amazed by the quality of

employees submitted," said **Jen Miff**, president of the DFWHC Foundation. "This luncheon is designed to be a memorable afternoon for these nominees, and we hope the recognition makes a direct, positive impact on the morale of our North Texas hospital workforces."

Awards to be presented include:

- Employee of the Year;
- Volunteer of the Year;
- System Employee of the Year;
- Physician of the Year;
- Preceptor of the Year;
- the Rex McRae Scholarship.

Nominees are separated into four categories including hospitals with 1-99 beds, hospitals with 100-250 beds, hospitals with 251-499 beds and hospitals with more than 500 beds. Two recipients are selected from each category.

Sponsorships and tickets are now available. You can find them at <https://dfwhcfoundation.org/2023-employee-of-the-year/>.

For information, contact [EOY@dfwhcfoundation.org](mailto:EOY@dfwhcfoundation.org) or **972-719-4900**. ■

# Around DFWHC Foundation

## More than **100 attendees** talk data at **6th Annual IQSC Data Summit**



**MORE THAN 100 ATTENDEES** participated in the DFW Hospital Council (DFWHC) Foundation's **6th Annual Information and Quality Services Center's (IQSC) Data Summit** held January 25-26.

Themed, "The Powerful World of Data," the virtual event was highlighted by Keynote Speaker **Dr. James Zimring**, author of "Partial Truths." Dr. Zimring argued that many mistakes the human mind makes boils down to misperceiving fractions. He explored the reason these flaws benefit us, demonstrating individual error can be advantageous to problem solving.

Additional topics included:

- "Conundrum of Imperfect Data" panel presentation with **Dr. Brandon Pope** of Baylor Scott & White Health, **Janet Burkhard** of Christus Health System, **Norwin Espiritu** of Conduent and **John Vo** of Methodist Health System;
- "Use of Multiple Data Points to Gauge Interventions to Address Workplace Violence" with **Karen Garvey** of Parkland Health;
- "The Magic of Storytelling with Data" with **Kim**

**Collette** of Mnemosyne Solutions;

- "South Carolina's Social Determinants Collaborative" with **Aunyika Moonan** of the South Carolina Hospital Association;
- "Compassionomics to Address EHR Provider and System Burden" with **Dr. Mari Tietze** of UT Arlington;
- "Data in Action" panel presentation with **Dr. Linda Perna** from MHMR Tarrant County, **Chrystia Johnson** of JPS Health Network and **Alisa Botello** of Baylor Scott & White Health.

The Summit was sponsored by **Resultant** and the **Iowa Hospital Association**.

Posters were submitted by **Baylor Scott & White Health**, **JPS Health Network**, the **Texas Nurses Association**, **Texas Organization for Nursing Leadership**, the **Michigan Nurses Association** and the **Michigan Organization of Nursing Leadership**.

To see the posters and presentations, please go to <https://dfwhcfoundation.org/about/events/iqscdatasummit/>. For information, please contact Theresa Mendoza at [tmendoza@dfwhcfoundation.org](mailto:tmendoza@dfwhcfoundation.org). ■



# REDUCING 30-DAY Readmissions by Improving Care Transitions



## TWO-PART WEBINAR

March 2 – 1:00-2:00 p.m., CT

April 18 – 1:00-2:00 p.m., CT

### SPEAKER:

Jackie Conrad, MBA, BS, RN  
Improvement Advisor at Cynosure Health

### OBJECTIVES:

- Review your hospital data on All Cause Readmissions (data provided by DFWHC Foundation)
- Compare your hospital data to regional average
- Learn how to interview a readmitted patient using Discovery tool
- Learn best practices
- Learn from peers and have open dialogue

### WHO SHOULD ATTEND:

- Case Managers
- Quality
- Bedside caregivers
- CNOs
- Anyone interested in reducing readmissions



In support of improving patient care, this activity has been planned and implemented by the University of North Texas Health Science Center at Fort Worth and DFW Hospital Council Foundation. The University of North Texas Health Science Center at Fort Worth is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

**Nursing (ANCC) Designation:**

This activity provides up to 2.0 contact hour(s).

### INFORMATION:

Patti Taylor at [ptaylor@dfwhcfoundation.org](mailto:ptaylor@dfwhcfoundation.org)

[HTTPS://EVENTS.ZOOM.US/EV/  
AJ3GILQR4HXNUR\\_U-B10FHUX47HGNFX9NQ7  
UUCKH53DASO7XEGG8~AGGLXSR32QYFJQ8BLYLZ5I06DG](https://events.zoom.us/jv/AJ3GILQR4HXNUR_U-B10FHUX47HGNFX9NQ7_UUCKH53DASO7XEGG8~AGGLXSR32QYFJQ8BLYLZ5I06DG)



## Danny Davila

Director, FCRA Regulatory Risk & Consumer Compliance Advisor  
GroupOne Background Screening

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### E-mail

[ddavila@gp1.com](mailto:ddavila@gp1.com)

# Did your new employee graduate?

**IN THE 1980S, THERE WAS A RISING STAR** in the Texas House of Representatives. Although a popular politician, it was learned she falsified her graduation from the University of Texas in Austin. Once the media and her peers realized her résumé was false, her political career ended in 1992. This was my first exposure to the potential harm caused by false credentials. The times have not much changed. Flash forward to 2023 and a news story involving the healthcare industry.

In January, the U.S. Department of Justice charged 23 individuals with conducting a scheme that funneled more than 7,600 fraudulent healthcare degrees from three Florida colleges. Thankfully, these institutions are now closed, but the fallout is reverberating across the healthcare industry damaging the trust placed in higher education.

A comment issued by **Serena Bumpus**, CEO of the Texas Board of Nursing, states, “The reports that some of the indicted individuals are in the state of Texas is deeply disturbing. A degree in nursing is one of the most difficult to obtain due to the rigorous coursework required. The fact that a group of individuals chose to disregard the importance of this training is shocking, especially since nurses have been the most trusted profession for more than two decades.”

This troubling occurrence is reflective of a growing trend of circumventing laborious methods of attaining credentials. Please note, this is not limited to higher education. Fraudulent systems also exist in work-training programs that create “fast tracks” to “graduate” medical assistants and other hospital personnel. These programs are not validated by independent accreditation sources and produce individuals who require additional training upon hiring.

Talent acquisition teams should reexamine their policies when accepting candidate-provided credentials as “proof of education.” There should be gatekeepers, assisted by background screening companies, to expose these fake degrees to ensure compliance.

We get it. It’s a tough market and the workforce shortage can be overwhelming. But methodical practices requiring the validation of college degrees can significantly prevent bad hiring decisions. At GroupOne Background Screening, we utilize every method available to ensure we are providing our clients the most reliable education verification available. Please do not hesitate to contact us for more information. ■



## 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.

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[www.gp1.com](http://www.gp1.com)



## HR Surveys are here!

### *February participation complete*

**FEBRUARY WAS SURVEY TIME AT GROUPONE**, with three annual HR surveys conducted from **February 1-29**.

The annual **Pay Practices Survey** and **Benefit Practices Survey** provide valuable benchmarking data from across Texas. Participation was free and reports are available for \$225 a survey. For those who chose not to participate in the surveys, they may still purchase them for \$625. Survey links were sent to GroupOne clients and other healthcare entities on February 1.

The third survey is the **Annual Vacancy & Turnover Survey** for North Texas. This provides benchmarking information for hospitals and education partners. The survey is usually completed by the employment or nursing department.

All North Texas hospitals received a link to participate. You will receive the Vacancy & Turnover results free of charge. Details of the surveys include:

- **PAY PRACTICES SURVEY** – key compensation measures, certification pay, differential and shift pay, call pay, charge and preceptor pay, critical shortage pay plans;
- **BENEFITS PRACTICES SURVEY** – time off, retirement plans, medical, dental, vision, prescription plans, wellness programs, short and long-term disability, life insurance, tuition assistance, and professional development;
- **VACANCY & TURNOVER SURVEY** – (North Texas only; results free) – vacancy rates for nursing and allied health positions; turnover for staff, nursing and PRN.

To participate or purchase a copy of the salary surveys, please contact **Stephen Dorso** at **469-648-5014** or [stephend@gp1.com](mailto:stephend@gp1.com). ■



## Just how *FAR* back do background checks go?

**BACKGROUND CHECKS CAN VARY** in how far back they go, depending on the type of check, its purpose, and the laws that apply. For instance, a background check for a job usually looks into your criminal history from the past seven years.

The “**seven-years rule**” refers to the standard that many background check companies follow of only reporting criminal convictions that are less than seven years old.

Please note, this rule is not a federal law, but rather a guideline followed by many background check companies.

The purpose of the seven-years rule is to strike a balance between providing relevant information to employers or landlords and giving individuals a chance to move on from past mistakes. However, it’s worth noting that some states have laws that restrict the reporting of criminal records for a certain period of time, so the seven-years rule may not apply in all cases.

In addition, some employers may dig deeper and check your record from further back in time. Keep in mind, rules and regulations around background checks can be different from one place to another.

To make sure you’re up to speed, it’s a good idea to

research the specific requirements for your area.

Remember, there are laws such as the Fair Credit Reporting Act in the U.S., which limit the information that can be included in an employee background check and how it can be used.

### **What states follow the “seven-years rule?”**

In general, the following states follow the seven-years rule for pre-employment background checks:

- California;
- Colorado;
- Kansas;
- Maryland;
- Massachusetts;
- Montana;
- Nevada;
- New York;
- Texas;
- Washington.

Please do not hesitate to contact us at GroupOne Background Screening should you have questions. ■

# Can you be **FIRED** for social media posts?

**HERE'S A QUESTION.** Can an employer terminate an employee for social media posts that violate internal policies? The Third Circuit, in a nonprecedential opinion, recently determined a major airline acted properly in firing an employee for sharing offensive social media posts.

The airline employee sued her former employer, alleging retaliation and gender and disability discrimination. In 2016, she requested a disability accommodation so she would not need to engage in “excessive walking.” Her employer denied her accommodation but provided a different accommodation.

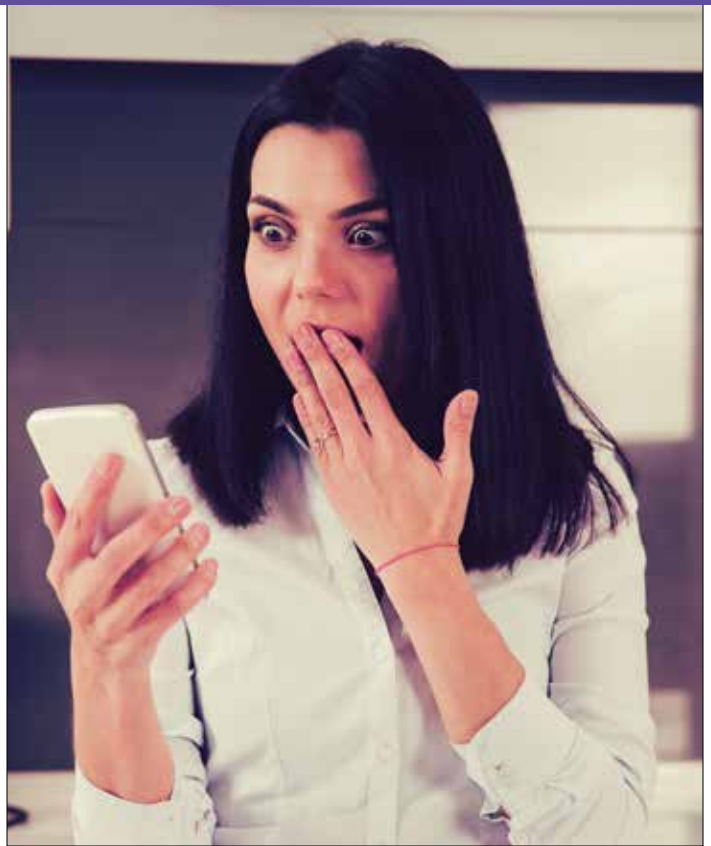
In 2017, the employee again requested the original accommodation, which was granted after she appealed.

That same year, said employee posted several comments on social media having nothing to do with her medical condition or accommodation. Her posts included racist statements about “blue-eyed people” and “brown-eyed people,” stating “blue-eyed people” should “unite.” And there were other posts which we will respectfully not reprint here.

Sadly, the employee’s posts went viral, and other airline employees complained internally, stating they did not want to work with her because of the racist posts. Additionally, people posted collages of the employee’s posts to the airline’s social media pages.

In response to the distracting mayhem, the airline suspended her, and later she was terminated. She filed complaints with the EEOC for failure to accommodate her disability. She then brought suit against her former employer in federal court, alleging the social media posts were a pretext to fire her due to gender and disability.

The district court judged in favor of the employer, and the Third Circuit affirmed. It was determined the employee failed to provide evidence the social media



posts were a pretext to fire her. There was a two-month gap between her second request for accommodation and when she was fired, which the court concluded was too long a period to assume retaliation.

The court also noted no evidence supported a connection between the plaintiff’s accommodation requests and her reason for termination — the offensive social media posts.

As the employee presented no evidence of a pretextual firing, the Third Circuit concluded her termination was proper. She was terminated for violating company policies and generating an outcry from both customers and coworkers.

## **Takeaways**

It’s important for companies to have extensive social media and electronic communication policies and communicate these policies to employees. You should make it clear discrimination and harassment extend to electronic communications. While employers may not stop employees’ right to engage in concerted activity by discussing terms and conditions of employment, this case makes clear such rights do not extend to racist or otherwise discriminatory conduct. ■

## Court issues **positive ruling** for employers involving background screening violations



**AS YOU WELL KNOW**, employers are frequently faced with class-action lawsuits brought by current or former employees. There has been an uptick in suits claiming violations of state and federal background check laws, to include those for seemingly minor technical errors.

In a rare ruling, a California Court of Appeal recently delivered good news for employers. The court affirmed a decision to dismiss a former employee's class action, claiming a convenience store chain's background check forms were defective.

Keep in mind, the court did not actually decide the forms were defective, but dismissed the case because the

worker could not show he suffered harm or injury. This is significant. The decision could reduce class actions that simply assert technical violations unaccompanied by any harm to consumers or employees.

### **THE CASE**

Participating in a job interview for a convenience store national chain, a candidate received a set of disclosure forms and authorized the store to conduct a background check. There were no background check issues and the man was hired. Nevertheless, after his employment ended, he sued the national chain for alleged violations of the **Fair Credit Reporting Act (FCRA)**.

The FCRA requires employers to provide a "clear and conspicuous disclosure," which cannot be combined with other documents or be loaded with irrelevant information. The ex-employee alleged the store violated this provision during the interview. The federal court dismissed his claims, stating he failed to establish actual harm as a result of the store's alleged violations.

The ex-employee promptly re-filed his claim in state court, and California also dismissed the case on similar grounds. This decision was a rarity, as California state courts have historically permitted such claims to proceed based on statutory violations alone, even without the worker showing harm or injury.

The court determined holding the national chain liable for a violation that caused no injury would not align with the act's purpose.

### **IN CONCLUSION**

This decision provides California employers with a helpful defense against similar claims. California or not, it's important to have your background check disclosure and authorization forms reviewed by legal counsel, even forms that are supplied by your background check vendor. This is the most effective way to avoid similar claims. In addition, multistate employers should note background check laws vary significantly from state to state, with additional steps necessary than what is required under the FCRA. ■

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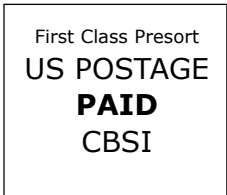
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