



DALLAS-FORT WORTH
HOSPITAL COUNCIL

INTERLOCUTOR

WINTER 2026

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NEWS FROM THE DFW HOSPITAL COUNCIL

Be EXTRAORDINARY!

28th Annual
**Employee of the Year
Luncheon**

April 21, 2026
Hurst Conference Center

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Meet DFWHC's 2026
Board of Trustees

PAGE 6

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For over 55 years, Hall Render has been exclusively devoted to the health care industry. When faced with a challenge, you can be confident knowing we've likely seen it before. Our experience allows us to quickly and efficiently address today's issues and tomorrow's unknowns.



Christie Davis



Keith Dugger



Avi Kerendian



Brandon Kulwicki

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Miles Moody

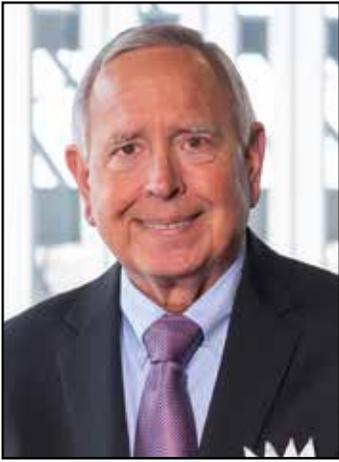


Chandani Patel



James (Mac) Stewart

Let's get started. Visit hallrender.com/dallas or call (214) 615-2000.



Steve Love

President/CEO
Dallas-Fort Worth
Hospital Council

Thankful for our rural hospitals

WE ARE BLESSED IN THE U.S. for the hospitals that serve our rural communities. Rural hospitals are the principal healthcare resources for 60 million Americans (approximately one-fifth of our population) providing essential medical care for our communities.

For many rural residents, the hospital might be the only healthcare provider within a 30-to-100-mile radius. In some cases, the distances stretch even further, especially for labor and delivery services. We are proud of the rural hospital members at the DFW Hospital Council.

I was born and raised in a rural community in Southern Virginia. Once when I was 15, I came home from school with a severe stomachache and fever. The local physician determined I had appendicitis, so my parents drove me 15 miles to the closest hospital. Luckily, the general surgeon removed the appendix before it burst. This small hospital was at capacity, and the only available room was on the maternity ward and yes, you guessed it – all of my friends brought me “gag” baby gifts during my two days of hospitalization.

On a serious note, Texas is blessed with more than 150 rural hospitals, but many face a severe financial crisis. Oftentimes, these hospitals have less than 10 days cash on hand, with over half having to cut services and an estimated 40 percent having to close their labor and delivery units.

The One Big Beautiful Bill allocated \$50 billion to rural hospitals over five years. Many were excited when Texas received the country’s largest total award at an estimated \$1.4 billion over five years. But let’s peel back the onion. Since Texas has the nation’s largest rural population (approximately 4.2 million) our per capita funding is the lowest in the nation. Some experts estimate Rhode Island will receive \$6,305 per capita while Texas will tally a mere \$66 per capita for rural communities.

We are thankful our Texas rural hospitals provide so much to our citizens including critical healthcare, emergency resources, economic support, jobs and in so many ways serve as the social fabric of rural life.

All of our rural hospitals need our immediate support as they are an integral part of the U.S. healthcare system. Please tell your state and federal legislators to support our rural hospitals. So many lives depend upon them. ■

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INTERLOCUTOR

EDITORIAL

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Managing Editor Chris Wilson
Cover photographs Jerry McClure

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ADVERTISING

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



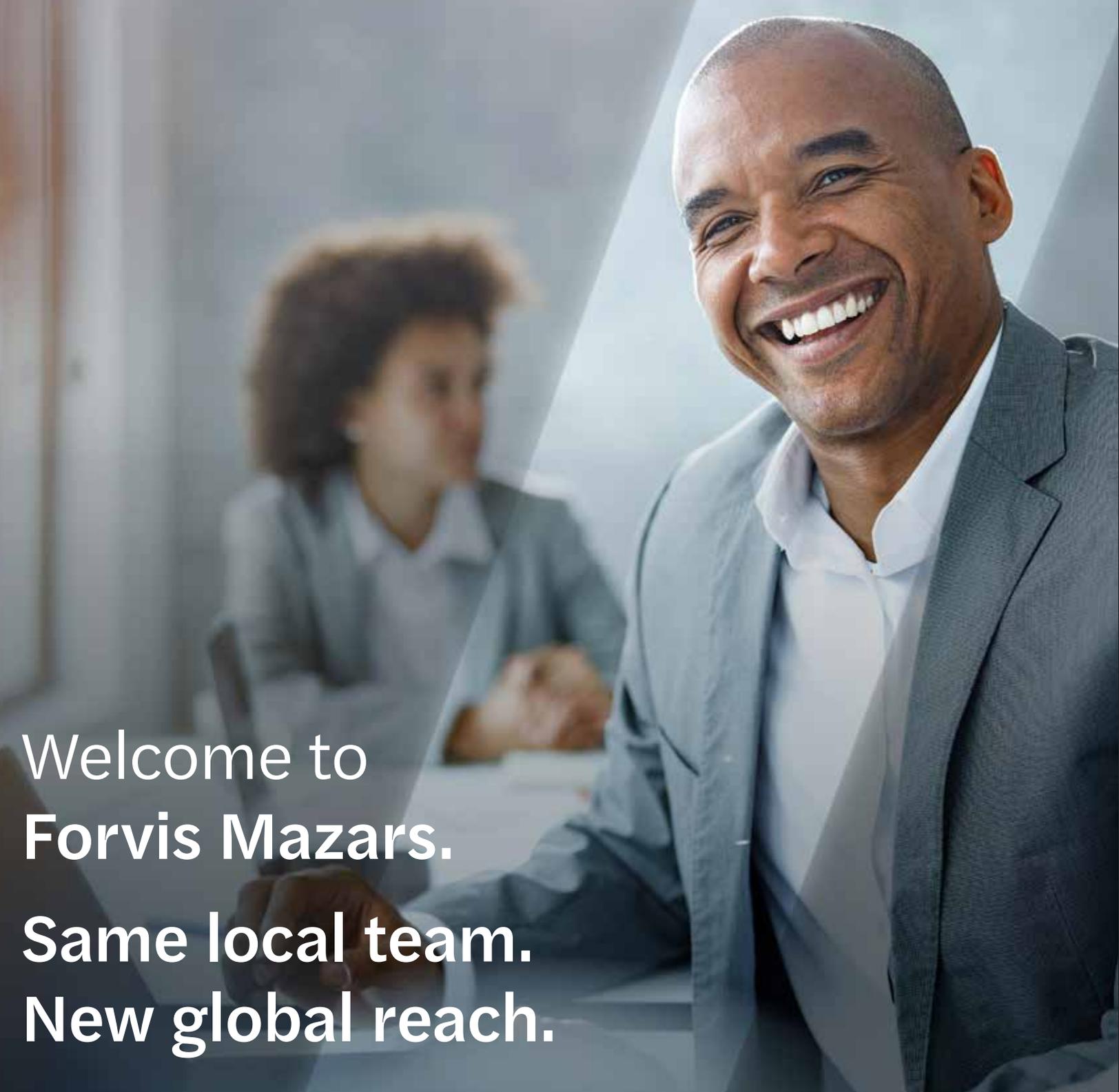
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INTERLOCUTOR

- 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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Juan Fresquez



Will Turner

THE DALLAS-FORT WORTH HOSPITAL COUNCIL (DFWHC) has announced its Board of Trustees for 2026. The Board of Trustees consists of the following individuals:

- Chair, **Juan Fresquez**, President, Methodist Mansfield Medical Center
- Chair-Elect, **Will Turner**, President, Baylor Scott & White Medical Center – Waxahachie
- Past Chair, **Vanessa Walls**, Chief Market Executive Northern Market, Children’s Health
- Trustee, **Christopher York**, President, Texas Health Presbyterian Hospital Dallas
- Trustee, **Edmundo Castañeda**, Executive VP, COO, Parkland Health
- Trustee, **Chris Rubio**, VP and COO, UT Southwestern Health System
- Trustee, **Shannon Fletcher**, Sr. VP, Chief of Staff and External Affairs, JPS Health Network
- Trustee, **Jared Shelton**, President, Texas Health Harris Methodist Fort Worth
- Trustee, **Ken Stevens**, CEO, Medical City Frisco
- Trustee, **Kevin Greene**, President, Cook Children’s Medical Center – Prosper
- Trustee, **Skyler Reed**, CEO, Medical City Children’s and Medical City Women’s Hospital
- Trustee, **Tim Bowen**, President, Baylor Scott & White Medical Center – McKinney
- Trustee, **Abiola Anyebe**, Market CEO, Kindred Hospitals North Texas Market
- Ex-Officio, **Matt Chance**, Senior VP, COO, Scottish Rite for Children
- Ex-Officio, **Christina Mathis**, CEO, Medical City Las Colinas

Completing their terms are **Natalie Wilkins**, VP Operations, Cook Children’s Health Care System; **Steve Edgar**, CEO, Medical City Denton; **Kyle Armstrong**, President, Baylor University Medical Center and Central Region; **Chris Richard**, COO, Kindred Hospital Dallas Central; and **Ryan Gebhart**, President, Baylor Scott & White Medical Center – Frisco at PGA Parkway.

“We’re looking forward to 2026 and working with Kevin Greene, Skyler Reed, Tim Bowen, Abiola Anyebe and Christina Mathis, new additions to our 15-member board representing an accomplished group of North Texas healthcare executives,” said **Stephen Love**, president/CEO of DFWHC. “They have an impressive range of talent allowing us to successfully continue our mission to improve quality healthcare and drive health access in the region. We would also like to thank Natalie Wilkins, Steve Edgar, Kyle Armstrong, Chris Richard and Ryan Gebhart for their dedicated work over the past year.” ■

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KILLIAN HEATH & LYMAN

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Hall Render and Forvis Mazars to serve as DFWHC Year-Round Sponsors in 2026

THE DFW HOSPITAL COUNCIL (DFWHC) is proud to announce **Hall Render** and **Forvis Mazars** will serve as Year-Round Sponsors for 2026. The designation allows the two companies to be the top sponsors at all major DFWHC events including the 28th Annual Employee of the Year Luncheon on April 21 and the 78th Annual Awards Luncheon on October 16. They will also host a series of complimentary webinars in 2026 for hospital members.

Hall, Render, Killian, Heath & Lyman, P.C. is a national health law firm with eight offices around the country. With more than 55 years of experience and over 160 attorneys, Hall Render provides full-service legal and advisory services to a broad spectrum of health care organizations. Our attorneys have represented more than 5,000 clients across the health care spectrum, including hospitals, health systems and other health care providers.

Hall Render's Texas office in Dallas serves the health care industry. Hall Render's team of health law attorneys is dedicated to serving its clients in the South and across the nation. Hall Render can be reached at **214-615-2000** and www.hallrender.com/office/dallas-office/.

Forvis Mazars is a leading global professional services network operating under a single brand with just two members: Forvis Mazars, LLP in the United States and Forvis Mazars Group SC, an internationally integrated partnership operating in more than 100 countries and territories.

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Contact the experts of Forvis Mazars at **972-702-8262** or www.forvismazars.us/about-us/locations/dallas-tx.

For information on Year-Round Sponsorships, please contact **Chris Wilson** at chrisw@dfwhc.org. ■

Around DFWHC



Back row, l to r, **Allen Harrison, Marcus Warren, Michael Boes, Jim Scoggin, Chris Durovich and Chris Rubio.**
Front row, l to r, **Julia Lothrop, Callia Cox, Karen Duncan, Stephen Love, Juan Fresquez and Matt Moore.**

Hospital executives meet at DFWHC offices for introduction to new HHS Deputy Director

NORTH TEXAS HOSPITAL REPRESENTATIVES met at the DFW Hospital Council (DFWHC) offices on February 19 for an introduction to **Michael Boes**, the new Deputy Director for the DFW region of the U.S. Department of Health and Human Services (HHS).

“We had an excellent meeting with Michael Boes,” said **Stephen Love**, president/CEO of DFWHC. “Many of our member hospitals participated in a very engaging and collaborative discussion regarding the future of healthcare in North Texas.”

At the HHS, Boes serves as Senior Advisor, contributing to the development and refinement of health care policy through strategic initiatives. His work emphasizes leveraging data-driven insights to enhance operational

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frameworks, aligning with organizational goals to improve outcomes.

“We had an energizing conversation with Steve Love, alongside leaders from health systems serving communities throughout North Texas,” Boes said. “We explored critical initiatives around chronic disease management, the role of whole food nutrition in patient outcomes, and how AI can enhance both patient care and clinician effectiveness. What stood out most: North Texas is fortunate to have exceptional health systems committed to advancing care for our region.”

Hospitals in attendance included **Children’s Health, JPS Health Network, Medical City Healthcare, Methodist Health System and UT Southwestern.** ■



DFWHC joins forces with CMHA



THE DFW HOSPITAL COUNCIL (DFWHC) announced in February that it has joined forces with the Conference of Metropolitan Hospital Associations (CMHA) to highlight national healthcare businesses that provide services to hospitals. The program will include monthly webinars in 2026.

The first webinar featuring **Warrior Centric Health** is set for Thursday, **February 26** from 11:00 a.m. to 12:00 noon. Titled **“Elephant in the Waiting Room: The Big, COSTLY Quality & Safety Issue You’re Overlooking,”** the event will detail issues when treating America’s military veterans, National Guard, Reservists and their families.

During the webinar, speakers **Evelyn Lewis, MD**, co-founder/CMO at Warrior Centric Health; and **Ron Steptoe**, co-founder/CEO, at Warrior Centric Health, will discuss how commercial healthcare systems can meet this healthcare challenge.

You can register at <https://meetinglab.zoho.com/meeting/register?sessionId=1011802619>. ■

Winter Educational Webinars

AS AN EDUCATIONAL SERVICE to our members, the DFW Hospital Council hosts monthly webinars with Associate Members.

December 4, 2025
“The Influence of the Social Determinants of Health (SDOH)”

– DFWHC/Herzing University
Speaker **Dr. Indira D. Tyler**, Faculty Development Specialist at Herzing University.

<https://www.youtube.com/watch?v=rGLjcdPGMm8>

January 15, 2026
“Don’t miss the moment: Workforce funding your Texas hospital can use now to solve critical staffing shortages”

– DFWHC/Texas Woman’s University
Speakers **Monica Christopher**, President, TWU Dallas; **Jason Aubrey**, Founder and CEO of Skilltrade.

<https://www.youtube.com/watch?v=YEhmrVQFG8E>

January 22, 2026
“Cybersecurity Awareness: Think Like an Attacker”
– DFWHC/Konica Minolta
Speaker **Jake Reynolds**, Offensive Securities Services Director at Depth Security.

<https://www.youtube.com/watch?v=BteX5cixQ4c>

The Influence of the **Social Determinants of Health (SDOH)**

Thursday, December 4
2:00 - 3:00 p.m., CDT





DON'T MISS THE MOMENT: Workforce funding your Texas hospital can use **NOW** to solve critical staffing shortages

Thursday, January 15
2:00 - 3:00 p.m., CDT

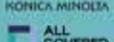




CYBERSECURITY AWARENESS: Think like an Attacker

Thursday, January 22
2:00 p.m. - 3:00 p.m., CDT

FREE WEBINAR


Upcoming

Feb. 26, 2026 - 11:00-12:00 noon, CT
“Elephant in the Waiting Room: The Big, Costly Quality & Safety Issue You’re Overlooking,”

– CMHA/Warrior Centric Health
Speakers **Evelyn Lewis, MD**, co-founder/CMO at Warrior Centric Health; and **Ron Steptoe**, co-founder/CEO, at Warrior Centric Health. ■

For info, contact **Chris Wilson** at chrisw@dfwhc.org.

Associate Members



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CMS solicits comments on potential approaches to American-made supply chain

ON JANUARY 26, 2026, the Centers for Medicare & Medicaid Services (“CMS”) issued an Advance Notice of Proposed Rulemaking (“ANPRM”) seeking public input on potential policies to strengthen the domestic supply chain for personal protective equipment (“PPE”) and essential medicines used by Medicare participating hospitals.

The initiative reflects lessons learned during the COVID-19 public health emergency and signals a possible

shift toward incentivizing or requiring greater reliance on U.S.-manufactured medical products within the Medicare program. This focus on domestic sourcing also aligns with the Trump administration’s broader trade policy agenda, including the April 2025 Executive Order 14257 establishing reciprocal tariffs to address non reciprocal trade practices and rebuild critical U.S. manufacturing capacity and supply chains deemed essential to national

and economic security, which may further affect the cost and availability of imported PPE and pharmaceuticals. CMS is seeking stakeholder feedback on a range of potential policy approaches, including:

- **Promoting American-Made Supply Chain Procurement:** CMS is exploring mechanisms to incentivize hospitals to procure American-made PPE and essential medicines, reducing reliance on foreign supply chains.
- **“Secure American Medical Supplies” Designation:** CMS is considering creating a voluntary designation that hospitals could earn by demonstrating commitment to domestic procurement of qualifying products. The designation could serve as a public quality signal and potentially be tied to future payment incentives or other support mechanisms.
- **Potential Payment Policy Support:** Recognizing that domestic sourcing may involve higher acquisition costs, CMS is seeking feedback on “new, streamlined payment policies” to reflect those added costs and support hospitals that choose to procure domestically made items.
- **Hospital Quality Reporting Framework:** CMS also seeks comments on whether to add a structural quality measure within the Hospital Inpatient Quality Reporting Program that would reflect hospital commitments to procure American-made PPE and essential medicines.

As noted above, the ANPRM reflects a growing emphasis from CMS and other federal agencies on domestic industrial capacity for critical medical supplies, especially in light of vulnerabilities revealed during the COVID-19 pandemic and subsequent supply disruptions. Chris Klomp, CMS Deputy Administrator and Director of the Center for Medicare, stated, “We want to hear from hospitals, manufacturers, suppliers, and the public on practical ways Medicare can support a stronger, more reliable domestic supply chain [. . .] our goal is to develop options that improve preparedness while giving providers workable, flexible policies that strengthen patient care.”

SUBMITTING COMMENTS

CMS is accepting public comments through March

We want to hear from hospitals, manufacturers, suppliers and the public on practical ways Medicare can support a stronger, more reliable domestic supply chain. Our goal is to develop options that improve preparedness while giving providers workable, flexible policies that strengthen patient care.

30, 2026. Comments may be submitted by mail, hand delivered or submitted electronically at [regulations.gov](https://www.regulations.gov). Commenters should reference file code “CMS-1516-ANPRM” in their submissions to ensure their comments are considered.

Hall Render is available to assist your entity in submitting comments to be considered by CMS. If you have any questions or would like assistance submitting a comment, please contact:

- **Jen Viegas** at jviegas@hallrender.com;
- **Abigail Kaericher** at akaericher@hallrender.com;
- **Jonathan Tarro** at jtarro@hallrender.com;
- **Caulin McGraw** at cmcgraw@hallrender.com; or
- Your primary Hall Render contact.

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Associate Members

hospitalpricingspecialists.com

HOSPITAL PRICING SPECIALISTS

receives national
healthcare tech award

HOSPITAL PRICING SPECIALISTS (HPS), a long-time DFW Hospital Council Associate Member, announced in February that it had been named the **Top Critical Access Hospital Price Transparency Solution for 2026**, an honor awarded by *Healthcare Tech Outlook*, a leading healthcare technology publication serving healthcare executives and decision-makers.

Our mission has always been clear: to help hospitals, particularly Critical Access Hospitals, navigate price transparency requirements with confidence, accuracy and practicality. We understand the operational realities you face, and our team works every day to deliver solutions that are compliant and aligned with your organization's needs.

According to HPS President **Rick Louie**, the recognition is especially meaningful because it is based on nominations from industry peers and customers, followed by an in-depth evaluation by an expert panel of C-level executives, healthcare thought leaders, and the Healthcare Tech Outlook editorial board.

"It reflects not just innovation, but trust—something we value deeply," Louie said. "At HPS, our mission has always been clear: to help hospitals, particularly Critical Access Hospitals, navigate price transparency requirements with confidence, accuracy, and practicality. We understand the operational realities you face, and our team works every day to deliver solutions that are compliant, sustainable and aligned with your organization's needs."

With over 60 years of combined expertise in healthcare pricing and reimbursement, HPS offers a fully outsourced software solution for price transparency. Their service includes the EZCOST® price estimator tool, designed to simplify price transparency for your patients.



Additionally, they provide complete outsourcing and hosting services for fully compliant machine-readable files, ensuring you meet all CMS price transparency requirements effortlessly.

HPS has been actively engaged in over 1,200 successful pricing projects, encompassing critical access hospitals and healthcare systems with over 3,500 beds. They provide state-of-the-art, fully managed, and hosted cloud solutions specifically designed to meet the needs of hospitals in today's challenging reimbursement environment and the intricate demands of CMS price transparency requirements.

"For our current clients, we extend our sincere thanks," said Louie. "Your partnership, collaboration and feedback drive our continued improvement and reinforce our commitment to excellence."

According to Louie, the recognition underscores HPS's role as more than a technology provider. They aim to be a trusted partner—one that reduces complexity, supports compliance, and allows healthcare teams to stay focused on serving patients and communities.

"We are honored by this award and remain dedicated to earning your trust every day," Louie said.

If you would like to learn more about the award or discuss how HPS can support price transparency efforts, please feel free to contact **Faye Openshaw**, VP of Sales, at **843-323-9206** or faye@hospitalpricingspecialists.com. ■

PERSPECTIVES

Designing Momentum: How Healthcare Brands Become Unstoppable

In healthcare, growth isn't accidental—it's designed.

Hospitals and health systems face rising competition, tighter margins, and more informed consumers. In this environment, campaigns alone aren't enough. To become truly unstoppable, brands must align intelligence with intention—and build momentum by design.

At Agency Creative, we help organizations shift from marketing activity to marketing architecture.

Intelligence is the foundation. Through advanced audience segmentation, predictive data, AI-powered creative testing, and precision media strategies, we identify where growth opportunity exists. Whether expanding cardiology, orthopedics, oncology, or other priority service lines, we pinpoint high-value patient segments and craft messaging that resonates.

But intelligence without intention is just information.

Our process begins with executive alignment around clear growth objectives. From there, we map the entire patient journey—from symptom search to appointment scheduling to post-visit engagement—ensuring every touchpoint is intentional, frictionless, and performance-driven.

Our core capabilities—brand positioning, precision campaigns, digital performance marketing, AI-enhanced testing, and measurable ROI reporting—work together as a scalable growth engine. We continuously measure and optimize to build sustained momentum over time.

The result: efficient service line growth, accountable investment, differentiated positioning, and patient engagement that drives conversion.

Healthcare organizations that design marketing systems with purpose gain a competitive edge. They don't chase trends—they build engines. They don't rely on chance—they create clarity.

When intelligence meets intention, momentum follows.

If your organization is ready to design momentum, let's talk.



About the author

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



The panel discussion included **Stephen Love** (l to r), President/CEO of DFWHC; **Dr. Fred Cerise**, President/CEO of Parkland Health; **Rick Merrill**, President/CEO of Cook Children’s Health Care System; and **James C. Scoggin, Jr.**, CEO of Methodist Health System.

Forvis Mazars hosts “Healthcare 2026” panel

A SOLD-OUT AUDIENCE OF 100-PLUS attended the Forvis Mazars and Healthcare Think Tank, LLC educational event “Sunrise 2026: What’s Next and How to Prepare” on January 20 at the Forvis Mazars offices in Dallas.

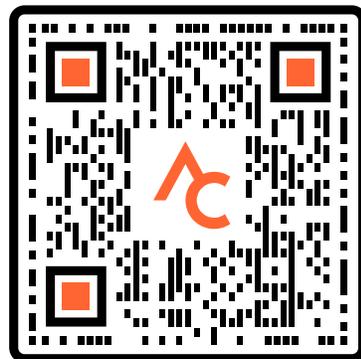
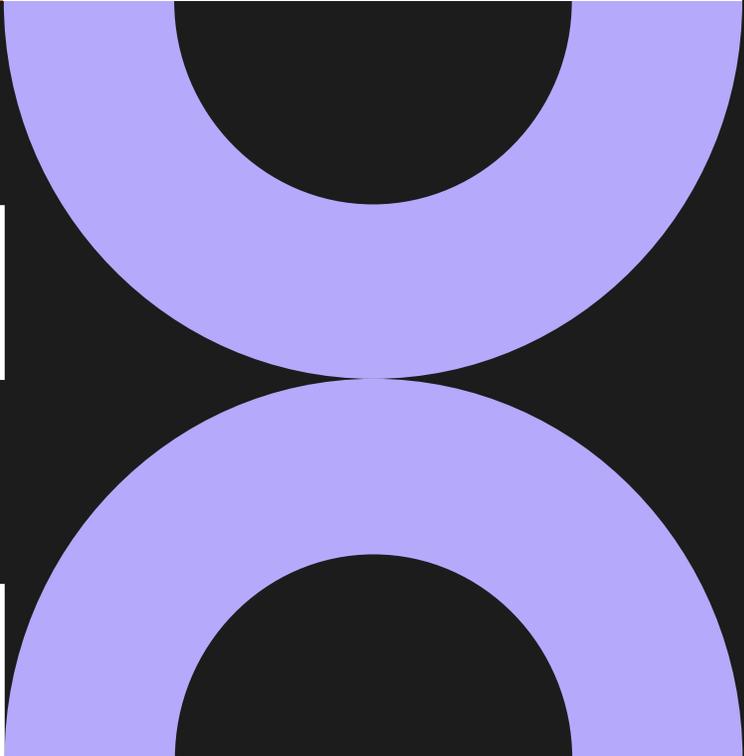
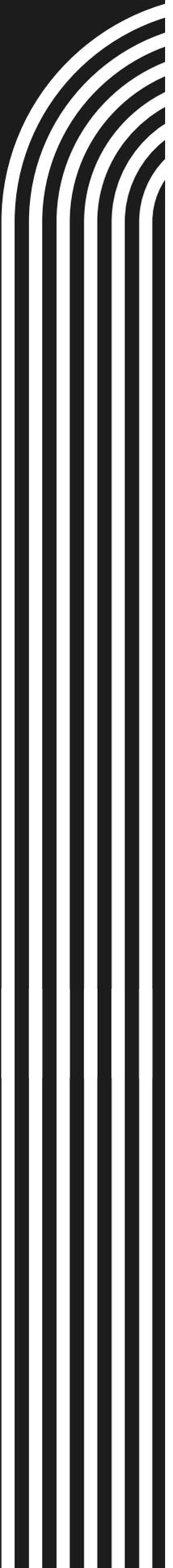
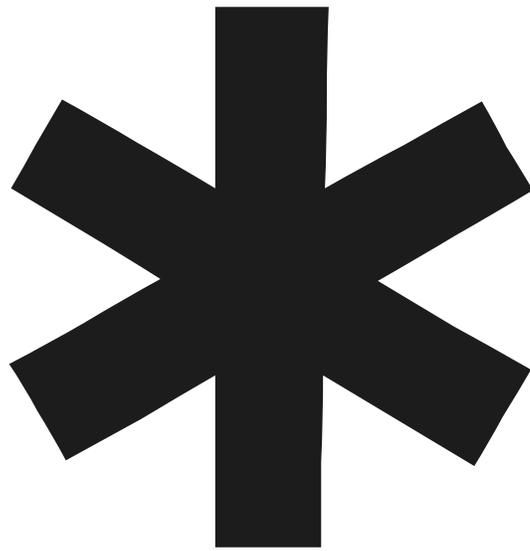
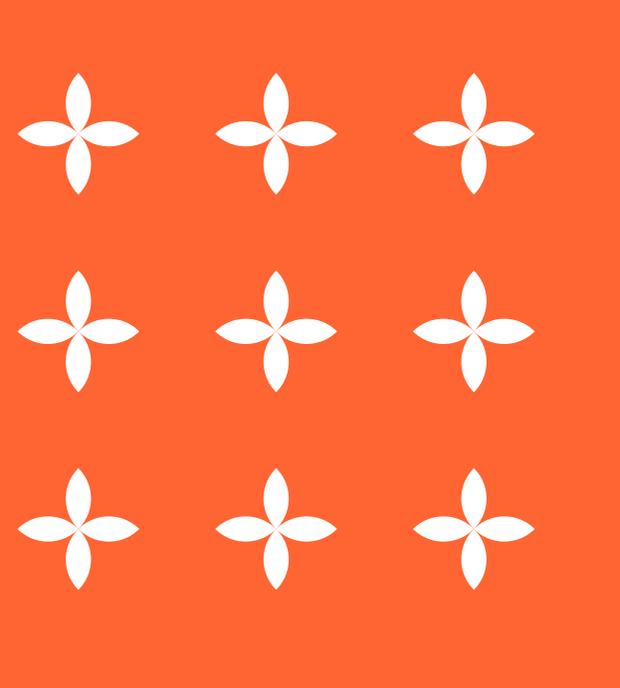
The panel discussion included **Dr. Fred Cerise**, president/CEO of Parkland Health; **Rick Merrill**, president/CEO of Cook Children’s Health Care System; and **Jim Scoggin**, CEO of Methodist Health System; with **Stephen Love**, president/CEO of the DFW Hospital Council serving as moderator.

The event served as a unique insiders look into what’s next for North Texas healthcare, to include candid predictions on workforce issues, reimbursement, technology, AI and system growth. The executives also “gazed into the crystal ball” to forecast what North Texas healthcare could look like by 2050.

“We were thrilled by the turnout,” said **Danielle Zimmerman**, Healthcare Partner at Forvis Mazars. “These healthcare executives shared insights about OBBBA, artificial intelligence, the 340B rebate model and other factors impacting healthcare in North Texas. We just wanted to thank everyone for spending time with us.”

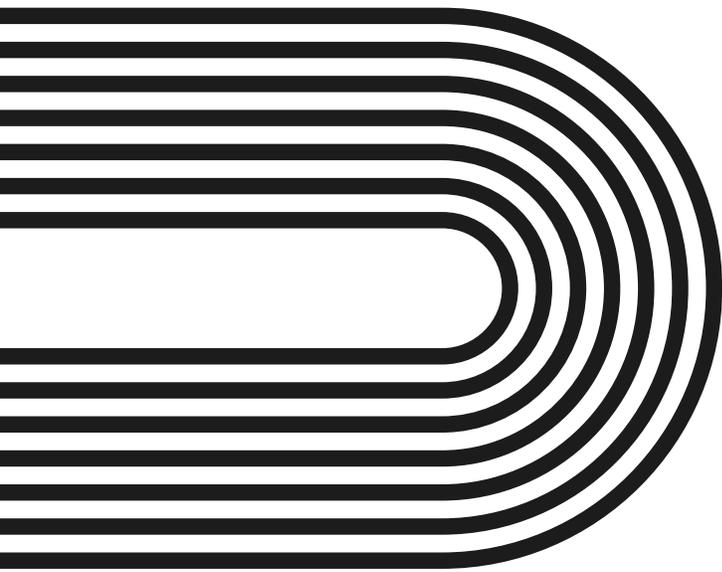
The panel discussion was followed by a networking session.

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Explore **Unstoppable**

Unstoppable. By design.



When intelligence
meets intention,
momentum follows.
Even in healthcare.



AGENCYCREATIVE



DFW HOSPITAL COUNCIL

education • networking • collaboration

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CHANGE



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90 BUSINESS MEMBERS
56 YEARS OF SUPPORT



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Jennifer Miff

President, DFWHC Foundation
Senior Vice President, DFWHC

New DFWHC Foundation Data and Analytics Highlights for 2026

THE DFW HOSPITAL COUNCIL FOUNDATION’S Information & Quality Services Center (IQSC) continues to expand its regional analytics infrastructure with several new capabilities in MyIQ Analytics and key advancements in trauma data.

First, a new beta Drive Time Analysis Dashboard, which maps estimated travel times to hospitals and service lines to identify geographic access gaps. Second, the Health Outcomes Variance Dashboard, which summarizes and visualizes neighborhood-level differences in hospital-based ED utilization, admissions, and readmissions, by disease category and geographic coverage, in order to support community focused interventions. Together, these tools offer hospitals and partners powerful new ways to assess need and inform strategic planning.

Trauma analytics saw major progress this year, driven by the formation of the new NCTTRAC Trauma Registry Data Metrics Workgroup, which helps align regional priorities and guide dashboard development. IQSC also began implementing a trauma flag within hospital discharge data using trauma registry matching to improve case identification and longitudinal analysis.

Additional advancements include a beta ED Length of Stay Dashboard and the release of the first ever Trauma Public Use Data File (PUDF) within MyIQ Analytics—both of which expand the scope of actionable trauma insights available to stakeholders.

These advancements were highlighted during the IQSC Data Summit 2025, which brought nearly 100 data and clinical leaders together for two days of collaboration at Texas Health Resources. Featuring a top rated keynote on AI in radiology by Parkland Health and PCCI, along with a highly impactful poster showcase, the summit reaffirmed the region’s commitment to innovation and data driven care improvement.

Looking ahead, IQSC will focus on refining clinical data collection—developing a prioritization survey, forming a dedicated workgroup, and engaging researchers and quality teams—and will explore a researcher focused, de identified public use limited data set to broaden responsible access to regional encounter level data. Organizations are encouraged to request demos, participate in workgroups, and provide feedback as these beta tools continue to evolve. ■

How to contact us

972-717-4279

info@dfwhcfoundation.org



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.

Foundation Trustees

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Methodist Mansfield Medical Center

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Vanessa Walls
Children’s Health

Andrew Masica
Texas Health Resources

Kyle Armstrong
Baylor University Medical Center

Christina Mathis
Medical City Las Colinas

Jennifer Miff
DFWHC Foundation

Around DFWHC Foundation

Foundation to host “Workplace Violence” event on April 9



THE DFW HOSPITAL COUNCIL (DFWHC) FOUNDATION

Workplace Violence Committee will host the in-person educational event “**Tackling the Epidemic of Healthcare Workplace Violence**” on Thursday, **April 9** from 8:00 a.m. to 12:30 p.m., CDT at the UT Southwestern Gooch Auditorium in Dallas.

Data from the American Hospital Association shows that 81% of healthcare workers face workplace violence and three nurses are assaulted every hour in the U.S. In addition, healthcare workers are five times more likely to be assaulted than in any other industry and workplace violence costs U.S. hospitals \$18.27 billion a year.

The agenda will include:

- Panel Discussion – “Workplace Violence in Healthcare – the Federal, State and Local Perspective,” with **John Creuzot**, Dallas District Attorney; **Jack Frazee**, Director of Government Affairs, General Counsel, Texas Nurses Association; **Dr. Joseph Chang**, CMO, Parkland Health; and Moderator **Stephen Love**, President/CEO, DFW Hospital Council;
- “American Hospital Association – Building Safer Workplaces and Communities: Strategies to Prevent and Address WPV in Health Care,” with **Elisa Arespacochaga**, MBA, Group VP, Clinical Affairs

and Workforce, American Hospital Association; and **Jordan Steiger**, MPH, MA, LSW, Director of Behavioral Health and Violence Prevention, American Hospital Association;

- “Behavioral Health – How It Can Inform Workplace Violence,” with **Dr. Mallory Cash**, Assistant Professor in the Department of Psychiatry, UT Southwestern;
- “Behavioral Threat Assessment Program,” with **Melissa Jones**, CHPA, HS-BCP, CADC, Director Workplace Violence Prevention, Children’s Health;
- “Threat Safety Science,” **Vicki King**, Former Assistant Chief of Police for Converged Threat/Risk Protection and Investigations, MD Anderson Cancer Center and UT Health Science Center.

Registration and breakfast begin at 7:30 a.m.

There will be 4.5 Contact hours provided by Terri Goodman & Associates, an approved provider of continuing nursing education credit by the California Board of Nursing (CEP16550). 4.5 CE’s will be available from ASHRM. In addition, CPHQ (CPPS) and HIMSS have been applied for.

You can register at <https://dfwhcfoundation.org/workplace-violence-event-2026/>.

For information, please contact **Patti Taylor** at ptaylor@dfwhcfoundation.org. ■

Be

EXTRAORDINARY!



28th Annual
**Employee of the Year
Luncheon**

April 21, 2026

Hurst Conference Center

Reception 11:00 a.m.
Luncheon/Awards 12 noon - 1:30 p.m.

**Honoring the best
hospital employees
of North Texas**

Nominee deadline – **March 3**

Sponsorship and ad deadline – **April 3**

28th Annual Employee of the Year Luncheon set for April 21

THE DFW HOSPITAL COUNCIL (DFWHC) FOUNDATION in January announced the date and location of its 28th Annual Employee of the Year Luncheon as Tuesday, **April 21** at the **Hurst Conference Center**.

Themed “Be Extraordinary,” this year’s event will honor 16 recipients from hospitals across North Texas. For over two decades, the DFWHC Foundation’s Employee of the Year Luncheon has honored more than 1,500 exceptional hospital employees. The luncheon is designed to be a memorable afternoon for hospitals and their nominees.

In the fashion of an awards show, recipients are announced at the event and asked to come to the stage to receive their honor.

“We try to make this an inspiring day for the nominees,” said **Jen Miff**, president of the DFWHC Foundation. “The Foundation is a strong proponent for workforce programs that make a difference in the quality of care for all North Texans. This Luncheon’s recognition is critical to boost staff morale, retain a strong workforce and honor the roles of every employee contributing to the successful delivery of patient care, whether on the front lines or behind the scenes.”

Awards this year will include:

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

Young Healthcare Executive nominees of North Texas and members of the ACHE of North Texas Board will judge the nominations. Individual and hospital names are removed and selections are based on the facts presented. Nominees are separated into four categories of hospitals between 1-99 beds, 100-250 beds, 251-499 beds and over 500 beds. Two recipients are selected from each category



and receive cash awards.

Deadline to submit nominees is **March 3, 2026**. One nominee is allowed in each category per hospital. Nominee forms can be found at <https://dfwhcfoundation.org/about/events/2026-employee-of-the-year/>.

Sponsorships and tickets went on sale in February and can be found at <https://dfwhcfoundation.org/about/events/2026-employee-of-the-year/>.

For information, contact EOY@dfwhcfoundation.org or 972-719-4900. ■



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Challenges facing the industry

THE CONSUMER REPORTING INDUSTRY is facing familiar hurdles that will increase the difficulty of processing timely background reports. Each component of our business is impacted by government policy as well as the increased emphasis on protecting private information. Here are some important elements to consider.

Sealing of criminal court information

Arizona, Missouri, West Virginia, Indiana, Florida, California, Washington and Texas have issued state legislation to limit county criminal court records by increasing the automatic expunction of non-violent criminal history. In addition, counties are redacting the date of birth, thus increasing the research of individuals who have a criminal history matched to their name. Our GroupOne investigators must ensure alignment with state guidelines.

Fraudulent qualifications

Today, the manipulation of online content requires additional validation. An increase of fraudulent qualifications in the form of employment credentials, education history and licensure falsification have multiplied significantly. The workforce today is transient, and licensure/accredited certificates have distinguishing characteristics that require review.

Use of AI

The popularity of AI in the workplace seduces those in the decision-making process to reduce expenses. However, this has been addressed by federal and state legislation to prohibit the use of AI for candidate assessment, hiring and onboarding. As a consumer reporting agency (CRA), it is our responsibility to ensure that AI generated content from vendors and primary reporting sources is manually reviewed to ensure accuracy.

Time crunch

The time to obtain content continues to increase. Many reporting systems are impacted by security breaches. Recently, at least three major systems in Kansas, Michigan and California suffered major downtime due to tech issues. Court reporting systems throughout the country are working to automate processes. The challenge comes when court reporting systems are hacked, shutting down systems and creating multiple “work arounds” to obtain criminal records. The added responsibility of removing date of birth content from court reports has also increased the hours and time needed to obtain these reports.

These trends are inspired by legal updates, progressive policies and the evolution of the modern workforce. Here at GroupOne, our business is to ensure compliance when meeting the background reporting expectations of our clients. ■



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Employee faked a reference check and got the job!

WE'VE ALL HEARD HORROR STORIES when it comes to checking verifications, but perhaps none quite as horrifying as this. By way of Reddit, an online social discussion platform, a user recently shared a personal story how they avoided an awkward employment gap by using a fake reference – and it worked! While the story may appear amusing, it exposes the challenges of obtaining the correct information on job candidates.

The Six-Month Gap

The Reddit user described his situation:

“I was stuck in a loop because of a six-month gap after a startup folded. Every time a recruiter asked for a supervisor contact from that era I panicked because the founder basically disappeared.”

In an attempt to overcome this dilemma, he made a strategic decision to have his cousin act as a former manager. His relative was prepped on projects he supposedly finished and what his weaknesses were. When the background check company called his cousin, he fooled the employer.

“The truth is that most HR people are just checking a box,” he posted. “They aren’t private investigators and they don’t have the time to cross reference every single person on LinkedIn to see if they actually worked at a specific company. If the company is gone, there is no paper trail anyway.”

Redditors Responses

Several Reddit users chimed in similar experiences, with one acknowledging they had never before used proper references for a job. Thankfully, others cited that using false references could be risky.

“Depending on what kind of jobs you’re applying for, this can be a very bad idea,” said one reply. “A lot of companies now use platforms that can pull up your work history and pay rates. I pulled mine recently, and not only did it have my work history for the past 15 years, but it



had my pay stubs from my current job.”

But the responses did not end there.

“If you can do the job well, who cares how you got the job?”, another poster stated.

One poster with HR experience stated:

“I used to do background checks for HR. You just want to tick the box and move on. With some employers, you can even lie about the time you worked there — three months on or off — and still pass. If you provide the contact info, they’ll use whatever number or email provided instead of looking for the real company.”

Even more alarming, one Redditor acknowledged monetizing fake references.

“I used to have a side gig being a reference for people,” the post stated. “There are so many people who need this service. The best part was when people called back or emailed that they got the job.”

Take Verifications Seriously

What is the moral of this frightening story? For one, take verifications seriously. Do your homework and have a consistent policy. At GroupOne Background Screening, we are staffed entirely with registered private detectives whose area of specialty is checking verifications.

In addition, we have a dependable system known as **WebVerify**, an automated and reliable platform providing instantaneous employment and salary history on current and previous employees.

This service conveniently provides an alternative for your staff having to verify the employment of current and previous staff members. This automated process saves you time and money, not to mention decreasing calls to potential cousins of candidates. ■

A real toothache – dental firm sued over background check

WE RAN ACROSS AN INTERESTING COURT CASE involving a dental firm and a mysterious background check. The company is facing a class action lawsuit for allegedly suspending an employee based on a background check she never saw.

The employee worked for dental staffing firm from 2022 to 2025, holding a perfect 5-star rating, according to court filings. Suddenly, in June 2025, her account was suspended. The reason was due to information in a background check she claims she was never given a chance to review.

The employee promptly filed suit in U.S. District Court, alleging the dental firm violated the Fair Credit Reporting Act (FCRA) when it took adverse action against her without providing a copy of her report or informing her of her rights under federal law.

The case puts a spotlight on general compliance issues that continue to cause problems for employers, no matter the industry. Simply put, the FCRA has strict guidelines involving background checks and adverse employment decisions.

Employers who use consumer reports for hiring and termination decisions must provide an employee with a copy of the report and a summary of their rights well before taking action. This gives people a chance to review the information and dispute any errors before losing a job opportunity.

The employee says this never happened. According to court files, she completed an authorization form for a background check through a consumer reporting agency. Two days later, she received an email stating her account had been suspended. The employee claims the report is inaccurate and creates a false picture of her. She learned how to obtain a copy only after hiring an attorney.

The dental firm is a large company, placing over



10,000 dental workers each month. It has not yet responded to the allegations.

The lawsuit represents three classes of workers. The first covers those who faced adverse action without receiving reports beforehand. The second includes employees whose reports were obtained without authorization. And the third includes employees the firm made false certifications to the background check agency about its intent to comply with the law.

The lawsuit could be costly, involving thousands of workers, with damages ranging between \$100 to \$1,000 per violation. The case is a reminder that FCRA requirements can become expensive liabilities when ignored. Such procedural mistakes are easily remedied with consistent policy. Remember, never skip the pre-adverse action notices and be patient before moving from background check to termination. Otherwise, you could have a real toothache on your hands. ■

The “Seven-Year Rule” – when does it apply?

WOW, WHAT A MESS. As reported in November, it appears the former superintendent of Des Moines Public Schools charged in a federal indictment with falsely claiming to be a U.S. citizen had multiple red flags that were unreported in his background check. Part of the problem was his background check only went back seven years. But since his salary was more than \$75,000, the background check could have gone back further.

The Fair Credit Reporting Act’s (FCRA) seven-year rule restricts the reporting of certain types of information for jobs paying less than a minimum salary threshold of \$75,000. Additionally, several states have seven-year restrictions on reporting criminal convictions. Our strict adherence to the FCRA’s seven-year rule and the rules for reporting convictions in every state make GroupOne Background Screening a valuable compliance partner.

The FCRA and Background Checks

The FCRA is a federal consumer privacy law that applies to employers in all 50 states. This law protects consumers’ privacy regarding the information consumer reporting agencies (CRAs) such as GroupOne can gather on credit reports and background checks.

What is the Seven-Year Lookback Period?

The FCRA’s seven-year lookback period restricts CRAs from reporting the following information on an employment background check when the job pays an annual salary under \$75,000:

- Arrests that didn’t end in a conviction;
- Chapter 13 bankruptcies (10 years for Chapter 7 bankruptcies);
- Debt collection accounts;
- Civil lawsuits and Civil judgments;
- Paid tax liens.

If a background check provider uncovers this type of



information while conducting a background check when the job pays less than \$75,000 per year, the provider will not report the information to the employer.

Exemptions

The FCRA exempts the following information from its seven-year rule:

- Jobs paying annual salaries of \$75,000 or more;
- Employment history;
- Educational attainment;
- Professional license information;
- Other relevant background information.

The Federal Trade Commission (FTC) considers education and employment information to be facially neutral, so they do not fall into the category of any other adverse information.

This means employers can ask for employment verification, education verification and professional licensure verification going back to when the applicant first turned 18. However, most employers generally only ask for three to seven years of employment verification for practical purposes.

Clear as mud? Please contact GroupOne should you have questions. For over three decades, we have complied with the FCRA and state laws when we conduct employment background checks and have helped our clients maintain comfortable compliance. ■



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bizhub C451i



bizhub C551i



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bizhub C751i (shown with optional finisher)

Contact **Whitney Hicks**, Senior Account Executive - Healthcare Specialist to find out more: whicks@kmb.konicaminolta.us





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