Artificial intelligence or machine learning is becoming mainstream in healthcare marketing. You can also use machine learning to expertly target consumers who may need our services now and in the future.

It truly is all about the digital space in marketing to consumers right now. We are continually evaluating our advertising platforms to maintain a true omni channel approach, updating our web site content for search engine optimization (SEO) and search engine marketing (SEM) and maintaining a consistent social media presence. Many traditional advertising methods are still effective, and in fact, we just added billboards in our more rural areas because of the ability for consistent reach to a wide audience.

Marketing is more in a flux than ever before. Now so much depends on the audience you are trying to reach in the behavioral health landscape, finding resonance with clients will always be the most effective strategy. However, connecting with clients to build trust is unique in the healthcare market. Broadcast, print, social media, web site development strategies are only effective when an individual or families entrust their well-being to your organization.

In the behavioral health landscape, the best strategy is a comprehensive digital strategy (pay per click, organic search engine optimization, social media, re-targeting, geo-fencing) combined with field marketing. We know that over 80 percent of healthcare engagement begins with online research. Healthcare marketing needs to be geared toward winning at the point of engagement.

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Medical News: What is the most effective marketing strategy or trend you are seeing in healthcare marketing?

We talked to marketing and PR folks across the state to hear how they are working to effectively utilize social media to engage patients and consumers. Below are the highlights.

Medical News: Strategies around improving access, customer experience and transparency. A great experience, with every interaction – obtaining appointments, handling regulatory and insurance paperwork, waiting times, caring of all staff and making payment simple and easy – is key to the customer's assessment of value and a key factor in the highlights.

Medical News: Artificial intelligence or machine learning is becoming mainstream in healthcare marketing. You can also use machine learning to expertly target consumers who may need our services now and in the future.

Medical News: Market is more in a flux than ever before. Now so much depends on the audience you are trying to reach in developing an effective marketing plan. The first question a marketer must ask is, “What age groups are we trying to reach?”

Medical News: Reaching someone 45 and older is much different than reaching someone 34 and younger. The younger demo is less likely to listen to broadcast radio or TV, many of them have or are cutting the cord when it comes to watching cable. This makes getting your message to them much more difficult than that of 45 and older population. Marketing in quickly moving from mass marketing to micro-targeted marketing.

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Ray & Kay Eckstein Regional Cancer Care Center completes renovation

The $19.1 million Ray & Kay Eckstein Regional Cancer Care Center, which opened to patients a year ago, celebrated completion of its final phase – renovation of the adjacent 12,000-square-foot radiation therapy center – at Baptist Health Paducah.

Baptist has offered radiation therapy since 1987 in the H. Earl Feezor Radiation Therapy Center. It is the only radiation therapy service in Paducah and surrounding counties.

The project began in 2015 and the center opened in July 2017, consolidating a variety of cancer services, including lab, pharmacy and chemotherapy, into one location.

Lacuna Health expands post-acute management solutions

Lacuna Health, a wholly-owned subsidiary of Kindred Healthcare, announced that it is expanding its partnerships with hospitals, health systems and other providers to support patients' transitions from hospital to home and to bridge gaps across the care continuum.

Lacuna Health is the evolution of Kindred's Contact Center, a toll-free, 24/7, registered nurse staffed resource created in 2014 to serve Kindred patients and their families seeking ongoing support and assistance navigating the healthcare system. It has been very successful in improving the core performance of Kindred's operations and has also reduced hospital readmissions by addressing patient needs after hospital discharge.

Lacuna Health's branded and white-labeled care engagement services address the gaps in care that many patients face, offering clinically-tailored patient engagement services, physician support and patient discharge planning and placement services. The nurse-led engagement creates positive and personal experiences for patients and enables coordinated, integrated care across the continuum of care. Lacuna Health’s four product categories include nurse hotline services, clinical after care services, physician practice support and hospital placement solutions.

UofL Hospital pilots effort for follow-up care for stroke patients

The University of Louisville Hospital – Comprehensive Stroke Center is piloting a new effort to provide follow-up care for stroke patients after they leave the hospital. UofL Hospital’s U Care is designed to support continued recovery for patients following their inpatient stay.

U Care was developed in partnership with Lacuna Health, a subsidiary of Kindred Healthcare, to follow up with patients after they leave the hospital. Registered nurses with U Care reach out to patients by phone on a regular schedule to monitor the patients’ recovery progress, check their medications, ensure they have made appropriate follow-up appointments and answer any questions or health concerns that arise.

The nurses have access to the patients' health records and can escalate any concerns to hospital staff or physicians if a patient requires further clarification or intervention. The program pilot, which began in June, will follow 250 stroke patients for 45 days after discharge, whether they went home or to a rehab facility for recovery.

Dean Dorton Technology recognized for exceptional growth

Dean Dorton Technology has achieved membership in the 2018 Sage Intacct President's Club. This sales and customer satisfaction award is given annually by Sage Intacct to its top-performing channel partners. The list recognizes value added resellers (VARs) and Sage Intacct Accountants Program firms (SIAPs) for their success in helping clients migrate to Sage Intacct's cloud Financial Management Solutions. This is the second consecutive time Dean Dorton Technology has made Sage Intacct President's Club since becoming a Sage Intacct VAR in 2016.

Markey earns renewal of five-year National Cancer Institute designation

The University of Kentucky Markey Cancer Center announced that the National Cancer Institute (NCI) renewed its national cancer center designation for the next five years. The UK Markey Cancer Center remains one of only 70 NCI-designated centers in the country and the only one in Kentucky.

Markey's renewal as an NCI-designated cancer center includes a five-year grant projected at $10.8 million to support research, recruitment of faculty, education and clinical trials. The previous five-year grant from NCI helped Markey recruit dozens of new researchers and clinicians, pilot new research projects targeted at Kentucky issues and launch precision medicine initiatives poised to change the standard of cancer care in the state.

ResCare Inc. changes name to BrightSpring Health Services

ResCare, a home and community-based health services providers to complex populations, has a new name. BrightSpring Health Services is the new name for Kentucky-based ResCare, the parent company of an existing family of brands and services that provides both clinical and nonclinical habilitative services for people of all ages, health and skill levels, across home and community settings.

BrightSpring's new “house of brands” approach repositions it as the parent of a family of brands and services that share important linkages. Its family of brands today includes: ResCare HomeCare, ResCare Community Living, ResCare Workforce Services, SpringHealth Behavioral Health and Integrated Care, Rehab Without Walls, Pharmacy Alternatives, Rest Assured, Adoration Home Health and Hospice and Gateway Pediatric Therapy.
NEWS IN BRIEF

UofL Physicians expands access to Humana’s Medicare Advantage

University of Louisville Physicians, a multi-specialty physician practice in Louisville, and Humana Inc., a health and well-being company, have signed an agreement that expands in-network access for Humana Medicare HMO members at UofL Physicians primary care and specialty clinics in Kentucky.

Best Lawyers in America honors Stites & Harbison attorneys

The Best Lawyers in America 2019 has recognized 72 Stites & Harbison attorneys as selected by their peers in 49 areas of practice. Forty-two of those attorneys selected have been honored for 10 consecutive years or more.

The Best Lawyers in America is a nationally recognized referral guide to the legal profession that has been published since 1983. Attorneys selected for the publication are reviewed by professional peers through an extensive survey.

Kindred Healthcare, UC Davis plan for inpatient rehabilitation hospital

Kindred Healthcare and the University of California, Davis announced that they have signed a definitive agreement to create a joint venture to construct and operate a 40-bed inpatient rehabilitation hospital in Sacramento. The hospital will be located on the UC Davis Sacramento campus at Aggie Square, its newly announced technology and innovation campus.

Baptist Health Louisville ranks high in U.S. News & World Report

Baptist Health has two of Kentucky’s top three hospitals — Baptist Health Lexington, ranked second, and Baptist Health Louisville, ranked third — in the 2018-19 U.S. News & World Report Best Hospitals rankings. Baptist Health Louisville was also named No. 1 in Metro Louisville — the sixth time in seven years that it has been either No. 1 or tied for No. 1. Both hospitals are listed as being “Recognized in the Bluegrass Region” which encompasses Louisville and Lexington.

Organ donors honored

UK HealthCare and Kentucky Organ Donor Affiliates (KODA) honored donors at their annual Gift of Life Celebration. This year, nearly 300 donor family members and friends attended the celebration, while the names of 83 individuals were read aloud during the official ceremony and unveiled on the Gift of Life wall, located inside Pavilion A adjacent to the Gill Heart Institute. This year’s group was the largest honored since the wall was first unveiled in 2012. To date, more than 480 donors have been memorialized.
Baptist Health
Patrick Falvey was named chief operating officer.

Cabinet for Health and Family Services
Eric Clark has been named commissioner of the Kentucky Department for Community Based Services.

Kentucky Education and Workforce Development Cabinet
Josh Benton was appointed deputy secretary.

KVC Behavioral HealthCare Kentucky
Elizabeth Croney was appointed executive vice president of clinical advancement for KVC Health Systems.

Caywood
Elizabeth Caywood is the new deputy commissioner of the Kentucky Department for Community Based Services.

KentuckyOne Health
Kathryne Blair joined KentuckyOne Health Surgical Associates in London, Ky.

BrightSpring Health Services
Robert Barnes is now the executive vice president and president of the intellectual and developmental disability (I/DD) services business segment.

Chapman Offutt Hospital
Chapman Offutt, RN, has been named neuroscience coordinator for Baptist Health Paducah.

Clark Memorial Hospital
Shane Kibbe, MD, joined Orthopedic Surgeons of Southern Indiana.

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Kentuckiana Health Collaborative
Randa Deaton, co-executive director, has been elected to the National Alliance of Healthcare Purchaser Coalitions Board of Governors.

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Gayla Donnell
President and CEO of KentuckyOne Health, Gayla Donnell, has been named to the ACHA (American College of Healthcare Architects) Board of Directors.

Baptist Health Richmond
Greg Gerard was named president of Baptist Health Richmond.

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UK College of Medicine

Roberto Cardarelli, MD, has been named chair of the Department of Family and Community Medicine.

University of Louisville Physicians

Dule Ding, MD, has joined the University of Louisville Department of Neurological Surgery.

DING

University of Louisville Physicians

Emily Payne Sieg, MD, has joined the University of Louisville Department of Neurological Surgery.

SIEG

UK HealthCare

Joseph Fink III, with the UK College of Pharmacy, was recognized by the American Association of College of Pharmacy.

FINK

University of Louisville Physicians

Norberto Andaluz, MD, has joined the University of Louisville Department of Neurological Surgery.

ANDALUZ

UofL School of Nursing

Sonya Hardin, PhD, was appointed dean of the University of Louisville School of Nursing.

HARDIN

PHYSICIAN SPOTLIGHT

Meet Lawrence Edward Mason, Jr., MD, with Baptist Health Louisville

Medical News

Why did you become a doctor?

Lawrence Mason, Jr., MD: I became a doctor due to a combination of positive childhood exposure to pediatricians (I had recurrent tonsillitis/pharyngitis as a child) and an inquisitive nature regarding health sciences, as my favorite TV character was Mr. Goodbody and I enjoyed nature and the game ‘Operation’.

MN: Why did you choose this particular specialty?

LM: I chose radiology because I excelled at the physical sciences (college tutor in physics and math, and electrical engineering major) and it is an aspect of medicine with a physical science foundation. I also have family members who are high risk for acquiring breast cancer and that encouraged me to go into women’s imaging.

MN: Tell me about the impact of breast MRI.

LM: Breast MRI employs the use of nonionizing (nonharmful) radiation to image the breast for enhancing lesions that may represent breast cancer. Very rarely will it not show an abnormality when breast cancer is present. However, a mixture of normal and abnormal findings usually show enhancement. The key in detecting a breast cancer on a breast MRI is being a skilled enough radiologist to tell the difference between normal tissue or a benign mass and breast cancer.

MN: What is the Real Mean Wear Pink initiative and why did you get involved?

LM: Real Men Wear Pink is an American Cancer Society initiative that invites the support of men in raising the awareness of breast cancer through fundraising. I got involved to help inform the community about the effectiveness of breast MRI as a problem-solving tool and its importance in the detection of breast cancer.

MN: What’s one thing your colleagues would be surprised to learn about you?

LM: I think there is a relationship between being a good breast imager and being good with probability and statistics.

MN: What’s the best advice you ever received? Who gave it to you?

LM: My father passed on an axiom of truth from my great grandfather years ago that has stuck like glue – “All you do, do with your might. Things half done are never done right.”

MN: What’s your motto? Why?

LM: My motto is “See your future. Be your vision.” This helps create a forward-looking mindset and energize your efforts as well as provide direction.

MN: Who are your heroes in healthcare?

LM: My heroes include Arthur Fleischer, MD and Ellen Mendelsohn, MD. These are my mentors in radiology who have helped train me.

MN: How do you go the extra mile, above and beyond your daily tasks to improve patient care, community health or hospital operations?

LM: By sharing information openly but with discretion with my patients I both inform them of pertinent imaging findings that require attention but also insulate them from unnecessary and unhealthy worry.

KNOW SOMEONE WHO IS ON THE MOVE?

Email sally@igemedia.com

SIGN UP FOR THE MEDICAL NEWS ENEWSLETTER AT WWW.MEDICALNEWS.MD
### Gold Standard for Optimal Aging Award Ceremony

**Time:** 11:30 am to 1:30 pm  
**Location:** Crown Plaza Hotel, 830 Phillips Ln., Louisville, Ky. 40209  
**Info:** Celebrates and honors older adults who embody the Institute's vision for a world where all older adults lead engaged and flourishing lives. More information can be found at optimalaginginstitute.org.

### Question, Persuade, Refer. (QPR) Suicide Prevention Training

**Info:** Free community wide training event to end suicide in Louisville organized by the Louisville Health Advisory Board's (LHAB) behavioral health committee. To learn more about this initiative, visit QPRLou.com.

### CMS Hospital Conditions of Participants Made Easy

**Time:** 8 to 11:30 am  
**Location:** Hilton Garden Inn Northeast, 9850 Park Plaza Ave., Louisville, Ky. 40241  
**Info:** If a CMS surveyor showed up in your hospital tomorrow, would you be prepared? More information can be found at kyha.com.

### Hosparus Health Dancing with our Southern Indiana Stars

**Time:** Doors open at 5:30 pm; event starts at 7 pm  
**Location:** Huber's Orchard and Winery, 19816 Huber Rd., Borden, Ind. 47106  
**Info:** All proceeds benefit patients and families in Clark, Floyd, Harrison, Scott, Washington, Dubois, Perry, Orange and Crawford counties in Indiana. More information can be found at hosparushealth.org.

### StAMINA's Mental Health Research on Youth

**Time:** 7:30 to 10 am  
**Location:** UofL Clinical & Translational Research Building, 505 S. Hancock St., Louisville, Ky. 40202  
**Info:** Hear StAMINA founder Allison Tu reveal the findings of her new, rigorous qualitative research that evaluated unique youth perspectives on mental health, as well as those of adult allies. For more information, contact Michele Ganote at mganote@khcollaborative.org or 502-238-3603.

### Kentucky Rural Community Health Coding & Billing Bootcamp

**Info:** More information can be found at kypca.net.

### Kentucky Health Law Institute

**Location:** Marriott Griffin Gate Resort, 1800 Newtown Pike, Lexington, Ky. 40511  
**Info:** Pre-registration is recommended at ukile.com.

### Healthcare Transformation Survival Seminars

**Time:** 9 am to 3 pm  
**Location:** Frazier History Museum, 829 W Main St., Louisville, Ky. 40202  
**Info:** An in-depth look at the Medicare Access and CHIP Reauthorization Act (MACRA) legislation and the Quality Payment Program.

### Kentucky Coalition of Nurse Practitioners & Nurse-Midwives Annual Leadership Retreat

**Location:** Barren River Lake State Resort Park, 1149 State Park Rd., Lucas, Ky. 42156  
**Info:** More information can be found at kcnpm.org.

### Healthcare Coalition Conference

**Location:** Owensboro Convention Center, 501 W. 2nd St., Owensboro, Ky. 42301  
**Info:** Educational content, continuing education credits and opportunities to discuss emerging issues and best practices. More information can be found at kshe.site-ym.com.

### Understanding Employer Challenges, Goals, and Needs for Opioid Use Disorder

**Time:** Breakfast at 7:30 am; Round Table from 8:00 to 10:00 am  
**Location:** Louisville Gas & Electric Cane Run Power Plant, 3252 Cane Run Rd., Louisville, Ky. 40216  
**Info:** The challenges, goals and needs in addressing opioid use disorder (OUD) in the current and future workforce. More information can be found at khcollaborative.org.

### American Cancer Society Hope Gala

**Time:** 6 to 11:30 pm  
**Location:** Omni Hotel Commonwealth Ballroom, 400 S. 2nd St., Louisville, Ky. 40202  
**Info:** The American Cancer Society will honor ten Cure Champions for their contributions to the community.

### GLMS Foundation Scholarship Golf Tournament

**Location:** Hurstbourne Country Club, 9000 Hurstbourne Ln., Louisville, Ky. 40222  
**Info:** More information can be found at kyma.org.

### Howard L. Bost Memorial Health Policy Forum

**Time:** 9 am to 4:30 pm  
**Info:** Kentucky's Substance Use Epidemic: A Solutions Update. Keynote speaker is Barry Meier, author of Pain Killer: An Empire of Deceit and the Origin of America’s Opioid Epidemic. More information can be found at kypca.net.

### MGMA Kentucky Fall Conference

**Location:** Marriott East, 1903 Embassy Square Blvd., Louisville, Ky. 40202  
**Info:** Focus on tackling leadership challenges. More information can be found at kmgma.com.
UK HealthCare No. 1 in Kentucky, nationally ranked in four adult specialties

UK HealthCare’s University of Kentucky Albert B. Chandler Hospital remains the No. 1 hospital in Kentucky for the third consecutive year, according to the 2018 U.S. News & World Report’s Best Hospitals Rankings released recently.

In addition, four major healthcare areas have achieved top 50 national rankings. UK HealthCare national rankings include 33rd in diabetes and endocrinology, 38th in cancer and 45th in both ear, nose and throat and orthopaedics.

Along with the top 50 rankings, UK HealthCare is ranked as high-performing in five other adult specialties – geriatrics; nephrology; neurology and neurosurgery; pulmonology; and urology.

Additionally, the healthcare system was designated high-performing in six common adult procedures and conditions: heart bypass surgery, heart failure, colon cancer surgery, hip replacement, knee replacement and lung cancer surgery.

Community-wide initiative to end suicide coincides with National Suicide Prevention Week

A community-wide coalition focused on suicide prevention organized a broad-based community effort centered around National Suicide Prevention Week from September 9 to 15.

The Louisville Health Advisory Board (LHAB) Behavioral Health committee sought to help Louisville set a world record by training the most individuals in one week in the technique of Question, Persuade, Refer (QPR), a nationally known suicide prevention framework.

Similar to CPR, QPR is a 90-minute training course designed for laypersons to feel comfortable to have a conversation with someone who is showing some risk of suicide, persuade them to seek help and to refer them for help in order to help save a life.

This training is targeted for individuals over the age of 18, and is free to attendees. Each person who completes the training is considered a gatekeeper, whose future actions could help save a life.

According to recently published data from the Centers for Disease Control and Prevention (CDC), suicide rates are on the increase, and more than half of people who died by suicide did not have a known mental health condition.

For the years 2008-2014, Jefferson County ranked 11th out of 50 peer counties in terms of highest rates of suicide, and rates of suicide had increased from the prior reporting period. These statistics, coupled with the many reports of community members whose lives have been lost to suicide, inspired a cross-sector of community partners to come together and set an objective to design and implement a community-wide, evidence-based and data-driven program to eliminate suicides in Louisville.

More information about this initiative can be found at www.QPRLou.com.
Nine Kentucky counties “Bright Spots” in Appalachian Health

Nine Appalachian Kentucky counties have been labeled “bright spots” in health because they scored much better than expected across an array of health measures given the economic, resource and other challenges they face. The Kentucky counties comprise a third of the 27 rural bright spot Appalachian counties identified by research released by the Foundation for a Healthy Kentucky, the Appalachian Regional Commission and the Robert Wood Johnson Foundation.

Another 15 metropolitan counties also were labeled as bright spots in the project, for a total of 42 Appalachian counties that significantly exceeded researchers’ predictions on 19 health outcome measures. The outcomes include mortality rates, mental health issues, child health, chronic disease and substance abuse.

Identifying Bright Spots in Appalachian Health: A Statistical Analysis examines the region’s 420 counties in terms of 29 different “health driver” measures, and then predicts how those counties would fare in the 19 health outcomes measures. The drivers include environmental factors, health behaviors, healthcare systems, certain screening measures and social determinants measures. The nine Kentucky counties that exceeded predictions are: Pulaski, Green, Russell, Lincoln, Adair, Lewis, Wayne, McCreary and Morgan.

A second report, Exploring Bright Spots in Appalachian Health: Case Studies offers a deep dive into 10 representative bright spots counties, including Wayne and McCreary Counties in Kentucky. The reports are online at healthy-ky.org.

UofL meeting behavioral health needs in rural Kentucky

Rural areas in the United States face a shortage of behavioral health practitioners. A new study in the American Journal of Preventive Medicine found that 47 percent of non-metropolitan counties don’t have access to a psychologist. The shortage extends to psychiatrists, nurse practitioners and a cadre of behavioral health resources including shelters, hospitals and community support groups.

The Institute for Sustainable Health & Optimal Aging at the University of Louisville is working to meet this need in rural Kentucky. This fall, the institute will place 38 students specializing in behavioral health into a dozen rural healthcare sites across 10 rural and underserved communities.

A primary goal of this program is to increase the geriatrics behavioral health workforce in rural communities. Both undergraduate and graduate students across multiple disciplines are involved. Many of the masters and doctoral-level students are participating in the institute’s Flourish Behavioral Health Graduate Internship. The internship, funded by a four-year federal grant, is part of the institute’s Flourish Network, a program focused on team-based care coordination for older adults.

Experience and knowledge are the best medicine.

The health care industry is rapidly changing and under increased scrutiny. You deserve legal counsel that has the experience, understanding and agility to help you successfully navigate challenging situations. Whether you need advice on mergers and acquisitions, regulatory compliance, HIPAA, clinical trials, antitrust issues, or other key areas, Stites & Harbison has the health care attorneys capable of handling your most complex matters.

For more information about how we can help, visit stites.com.
Meet the 2018 MediStar Award Nominees

The A.O. Sullivan Award for Excellence in Education
Presented to an organization that takes creative approaches to developing and implementing programs, which enhance the level of knowledge, education and career opportunity in healthcare.

- Baptist Health Floyd
- Gastroenterology Health Partners
- Health Careers Collaborative of Greater Louisville
- Kentucky Physicians Leadership Institute
- One Anesthesia
- UofL Hospital

The Bingham Greenebaum Doll Leadership in Healthcare Award
Presented to a progressive and entrepreneurial individual who is not afraid to take risks and whose job performance is considered exemplary by providers, patients and peers.

- James Long, Humana
- Ken Marshall, UofL Hospital/James Graham Brown Cancer Center
- Phil Marshall, Hosparuss Health

The Centerstone Kentucky Healthcare Advocacy Award
Presented to an individual who has worked to raise awareness of health challenges in our region and worked to affect change.

- Gwen Cooper, Hosparuss Health
- Kim Denzik & Annabelle Pike, UofL Hospital Pivot to Peace/Stop the Bleed Program
- Martha Hasselbacher, Doctors & Lawyers for Kids
- Angela Leet, Louisville Metro Council, District 7
- Bryan Loy, MD, Humana & Sarah Moyer, MD, Louisville Metro Department of Health and Wellness / Louisville Health Advisory Board
- Cory Meadows, Kentucky Medical Association
- Daphne Matthews, Sickle Cell Association of Kentucky
- Shannon McCracken, ResCare Community Living & Daryn Demeritt, BrightSpring Health Services
- Olivia Mittel, MD & Jennifer Middleton, PhD, UofL Sex Trafficking Team
- Don Rogers, Bluegrass.org

The Hosparus Health Innovation Award
Presented to an organization that has developed a new procedure, device, service, program or treatment that improves the delivery of care.

- Kentucky Homeplace
- Lexington Clinic
- Louisville Health Advisory Board
- Louisville Hospitalist Associates
- Smoketown Family Wellness Center
- The Thrive Center
- UofL Department of Pediatrics and UofL Physicians

The Bluegrass Care Navigators Aging Care Award
Presented to an organization that has advanced the level of care for the senior community through innovative methods resulting in reduced costs and improved quality of life.

- CNOnline.com
- UofL Institute for Sustainable Health and Optimal Aging

The Dickinson Wright Nurse of the Year Award
Presented to a nurse who has gone above and beyond their normal responsibilities to improve best practices and contribute to patient education.

- Stephanie Alvey Banks, Hosparuss Health
- Ruth Carrico, PhD, UofL Physicians
- Leslie Scott, PhD, UK College of Nursing

The Dean Dorton Physician of the Year Award
Presented to a physician who has shown outstanding leadership and vision and has contributed to their workplace leaving a lasting legacy.

- Muhammad Babar, MD, Kentuckiana Geriatric and Palliative Services
- Alan Beckman, MD, Baptist Health Lexington
- Bill Bryant, MD, Owensboro Health
- Alexander Digenis, MD, Digenis Plastic Surgery Institute
- Darryl Kaelin, MD, University of Louisville
- Cory Lucas, MD, Hosparuss Health
- Arif Nazir, MD, Signature HealthCARE
- Chuck Scoggin, MD, University of Louisville
- Sandra Shuffett, MD, Baptist Health Lexington
- Ryan Stanton, MD, StantonMD / Everyday Medicine
- Jeffrey Tuvlin, MD, KentuckyOne Health

Applications have been sent and returned, judging concludes on September 12 and honorees (winners) will be announced on September 26. Join us as we celebrate the seven honorees in person at the:

12th Annual MediStar Awards
The Muhammad Ali Center, Louisville, Ky.
TUESDAY, OCTOBER 30
4:30 pm • Registration & Cocktail Reception
5:30 pm • Award Ceremony

SPONSORED BY:

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Now with more ways to care. Hospice care continues to be a focus, yet we now guide and provide expert care long before life’s final months. Our services include palliative care for symptom relief, skilled nursing, homemakers and nursing assistants, in-home primary care, an adult day center, and more.
Marketing and social media in the healthcare industry

Emily Schott, Director of Communications, Kentucky Medical Association:
The most effective strategy in healthcare marketing is to meet people where they are. For that reason, social media has been incredibly effective for healthcare. It has allowed patients to connect with providers on a more personal level and that connection has been valuable on both sides.

You will see a great deal more of reviews online for physicians, hospitals and procedures that will begin to impact selection. I also see more retail-type advertising and promotion. Co-branding will continue, especially in the Medicare Advantage space, whether it is with a provider or with a trusted nonprofit such as AARP. It will get more specialized by provider or with a trusted nonprofit such as AARP. It will get more specialized by provider or with a trusted nonprofit such as AARP. It will get more specialized by provider or with a trusted nonprofit such as AARP. It will get more specialized by provider or with a trusted nonprofit such as AARP.

Gwen Cooper, Hsoparus Health: Healthcare consumer marketing is about emotion, conveying a message that resonates with a patient or loved one to move them to act on what we are selling.

In addition to the emotional aspect of our marketing campaigns, we are also selling our healthcare brand. Educational marketing, on the other hand, is for our B2B (business-to-business) audiences. We must create materials that educate our referral sources on what we offer, how we can help them meet their goals of care for their patients and why our brand of care is better than the competition.

Bethany Langdon, Bluegrass.org: All marketing begins with storytelling. In that sense, healthcare marketing mirrors the efforts of other industries. As a nonprofit provider of behavioral health, our strategies at Bluegrass center around our mission. Serve those with limited resources to meet their healthcare needs is the center of all marketing messages at Bluegrass.

Emily Schott, Kentucky Medical Association: While there are still more similarities than differences, healthcare marketing is unique in that the subject is sometimes literally life and death. You must keep that front of mind in everything you do. Health is the most important thing we have, so building and maintaining the trust of your audience is crucial when you're attempting to sell them on something.

Richmond Simpson, Vimarc: Healthcare marketing is in a transformation based on the changes in the healthcare industry. Because it is one of the few products that continues to escalate in cost, most carriers and employers are providing cost and quality data to employees, empowering them to make better buying decisions. This is why you are now seeing more product and price advertising on procedures such as MRIs or hip replacements.

The unique difference lies in the compliance factor. For example, Medicare Advantage advertising is highly regulated by Centers for Medicare and Medicaid Services (CMS), as is Medicaid communications by the Department of Medicaid Services (DMS), and the regulations continually change. Our job as marketers is to not only understand the product, but to be compliance experts.

Medical News: Give an example of a successful marketing campaign you have implemented. Why did it work?

Debbie Cagle, Centerstone: Our recent national policy campaign identified the top priorities in our healthcare sector to gain congressional support. We provided support of a comprehensive clinical approach to addiction and opioid treatment with appropriate quality measures and funding.

In addition, to help impact the workforce shortage of mental health providers, we supported CMS (Medicare) recognition of licensed master’s clinicians that have equivalent clinical training and expertise and so that more clinicians could participate in the pool of approved providers. Using data and science, we became trusted resources for congressional representatives and decision makers.

Bethany Langdon, Bluegrass.org: I'm excited about our current campaign at Bluegrass to address the opioid crisis in Kentucky. The key message of this campaign is, “Everyone plays a role in preventing addiction.” The campaign focuses on what brings us together as Kentuckians and motivates anyone, everyone, to get involved in the solution to the crisis.

Medical News: What marketing trends outside of healthcare do you think will enter the healthcare marketplace?

Mandy Brajuha, Bluegrass Care Navigators: Digital marketing continues to be important simply because of the incredibly intricate and specific ways you can target consumers. For a company like ours, the key here becomes knowing who our audiences are for our various service lines and finding the places where they are consuming digital content.

In a field where word of mouth is paramount, it will become more important for healthcare agencies to have those consumer “public displays of affection” or testimonials.

Gwen Cooper, Hosparus Health: Short sound bites of information that are impactful and convey our message regardless of the advertising vehicle will be effective for both B2B (business-to-business) and B2C (business-to-consumer) audiences. But for SEO and SEM optimization we also need quality content, blogs, case studies and even white papers about our type of healthcare so that when people are seeking the information they need, they will find us first.

Bethany Langdon, Bluegrass.org: Online chat is everywhere. Spend a short time on any web site and a pop-up asking if you need assistance via chat is live. This trend is one healthcare market needs to adapt, especially the behavioral health market. The stigma associated with mental health and substance abuse persists and pushes clients away from seeking treatment. Online chat is a powerful tool to break down barriers and engage clients at the very moment they are seeking services.

Emily Schott, Kentucky Medical Association: There’s a good chance healthcare will start to see some of the influencer marketing that’s become popular with more traditional brands. Consumers are questioning the things they see and hear more and more, and since healthcare really needs that element of trust to connect, influencing seems like it would be a logical fit for this space.
KMA’s Beyond the White Coat gallery showcases physician talents

The 2018 Kentucky Medical Association (KMA) Annual Meeting, held in late August at the Louisville Marriott East, featured a unique, interactive gallery celebrating the talents and hobbies that physicians engage in to reduce stress and combat burnout.

The Beyond the White Coat gallery contained exhibits from more than 30 physicians from across the state. Submissions on display included a hot air balloon, woodworking, pottery, handmade jewelry, photography, painting, music, dance, horticulture, beekeeping, martial arts and the published works of three physician authors. A ‘theater’ area previewed the work of physician film producer David Ciochetty, MD, and attendees also enjoyed live performances by physician rock band The Fabulous Goatmen and pianist James Borders, MD.

Beyond the White Coat was inspired by the work of Paducah surgeon Shawn Jones, MD, whose book, Finding Heart in Art: A Surgeon’s Renaissance Approach To Healing Modern Medical Burnout, uses Renaissance paintings as a framework to explain how medical professionals can manage fatigue. Jones was a featured speaker during the Kentucky Physicians Leadership Academy.
Social media and employers
Five common mistakes and how to avoid them.

By Sara Jodka

When most employers think about social media in the workplace, they tend to think solely in terms of the high-profile social media firing cases where employers have terminated employees for posts made on social media. While social-media based discipline is certainly an issue for employers, there are a number of other social-media related issues that employers should be aware of.

1. Disciplining/Terminating Employees for Social Media Posts

Social media-based discipline concerns two issues: employer policy and content. In many circumstances, private employers may discipline an employee for social media posts, including for posts that may negatively impact the employer’s business, goodwill or that disclose confidential information.

Discipline: Prior to disciplining an employee for violating a social media policy, employers should look at the entire content of the conversation at issue, not just an isolated post, and determine if any part of the conversation discusses a protected topic or could otherwise be construed as concerted activity prior to taking any disciplinary action.

Communications that discuss work conditions or that register as complaints for discrimination or harassment would most likely be viewed as protected. Posts that: (1) disclose an employer’s confidential information or trade secrets; (2) constitute hate, harassing or threatening speech; (3) constitute discriminatory, harassing or obscene speech; (4) admit criminal or unethical conduct; (5) are in violation of the employer’s anti-discrimination or anti-harassment policies; (6) that threaten the employer’s goodwill or reputation by complaining about customers; or (7) that indicate that the individual is not suited for their position, are not protected.

2. Following Employees

A host of issues can arise when supervisors/following subordinates also arise to a certain extent when employers use social media and, similarly, when co-workers become friends or follow other co-workers.

In the event an employer disciplines an employee, the employee could claim the reason for the discipline was because of the protected information the employee’s superior saw on via social media, regardless of whether the supervisor actually did.

The other issue is with co-worker/co-worker social media connections. Not only can these types of connections pit co-workers against each other due to the sharing of family information, political views, religious affiliation, and personal views, but co-workers are typically the first to turn social media content (typically screenshots) to an employer to get co-worker in trouble.

3. Using Social Media in the Vetting Process

The same issues that arise when supervisors friend or follow subordinates also arise to a certain extent when employers use social media.
to vet applicants for employment. A manager gets the name of an applicant/interviewee, and does an internet search on the person. Plenty of interesting and legally-viewable information will likely surface, but there is a possibility that some protected information will pop up as well, including the applicant’s race, ethnicity, national origin, religious affiliation, genetic information, etc.

Even if the employer does not use any of the information to make an employment decision, the fact that a social media search was performed and protected information became available to a decision maker provides the applicant a colorable argument that protected information was used as an exclusionary barrier to employment.

To avoid some of these issues, employers can affirmatively put policies in place regarding social media vetting prohibiting anyone in the interview process from conducting social media background searching on employees.

Alternatively, employers may conduct social media background screens legally by setting up a documented process of review.

Communications that discuss work conditions or that register as complaints for discrimination or harassment would most likely be viewed as protected."

4. Responding to Workplace Complaints Made on Social Media

Federal and state law protects employees from being subjected to a discriminatory, retaliatory, or harassing environment. These register in the form of hostile work environment, sexual harassment, and retaliation cases, but they do not necessarily always manifest or originate in the physical workplace.

Employers must remain vigilant and cannot ignore an issue once they become aware of it, even if it occurs purely in social media.

If an employer becomes aware of inappropriate conversation on social media between employees, or if the employer becomes aware that an employee has complained about workplace harassment or discrimination on social media, the employer should respond just as if the conversation had occurred in the physical workplace.

5. Failing to Preserve Evidence

Lastly, if a workplace issue arises on social media or if communications regarding a potentially illegal issue are made over social media platforms, those posts/communications are relevant evidence. As soon as the employer has any anticipation that there could be litigation and that social media evidence may be relevant, the employer must preserve it.

The easiest way to do this is to send a litigation hold to all relevant employees instructing them not to destroy, modify, or otherwise affect any social media post, communication, or message to/from/between relevant individuals or regarding certain subject matters.

— Sara Jodka is an attorney with Dickinson Wright in Columbus, Ohio.
Masonic Communities Kentucky launches new brand

New name better reflects mission and growth of organization.

By Nicole Candler

After 150 years, it was time for Masonic Homes to adopt a name and branding that better reflects our mission. Our organization continues to shift and grow, from a home for widows and orphans to one that serves a wide range of people of all ages. Masonic Homes is now Masonic Communities, as we continue to provide our residents, employees and visitors a true feeling of community, all the while looking to the future.

‘Community’ is a powerful word. Communities bring people together and are open, inclusive and supportive.”

The Case for Rebranding

Masonic Communities is an aging care organization that also offers services in one place – everything from independent and assisted living, to memory care and rehabilitation. Residents have the benefit of not changing their address as their needs change with age. We also have three campuses – Louisville, Northern Kentucky and Shelbyville.

The case for our effort to rebrand our organization and services was made as we wrapped up our 150th anniversary celebrations. We had been commemorating how much we’ve grown and thought it was a good time for us to look at our future direction.

Several new developments at Masonic Communities were a catalyst in the decision to create a new brand including:

- Meadow Active Lifestyle Community, featuring 122 independent living apartment-style residences designed for those 62 and older.
- Grove Point Assisted Living Community which offers 48 private senior apartments with personalized plans for daily assistance.
- A new full-service Care Clinic located next to Grove Pointe Assisted Living Community.
- FirstLight Home Care which offers companions care, personal care and more.
- The expansion of Sproutlings Pediatric Day Care & Preschool, serving children with complex medical diagnoses.

Rebranding Process

In August 2017, the rebrand was proposed, and focus groups were completed by the end of that year. The focus groups were made up of internal stakeholders: staff, board of directors, current residents and key leadership and external stakeholders: potential residents, their families and healthcare professionals from whom many referrals come.

It took about six months for all buy in to be earned. We learned to never underestimate the attachment and personal connection that stakeholders can have to a brand. Then, creation of the materials began. July 2018 marked the successful launch of the new brand.

Logo and Design

Our new logo includes an image of a tree made up of many leaves of various colors – the leaves symbolize our communities that come together to form one unit.

The words in our new name are also important. “Community” is a powerful word. Communities bring people together and are open, inclusive and supportive. “Masonic” is also important. From the Masons who established the home to care for widows and children, to the incredible Masons today who continue to give back to the community, it is a key part of who we are.

Implementing the Brand

Implementation of the new brand was a meticulous process. It began at a corporate level with a three-pronged audit and extended to each community:

- Print materials were reviewed to ensure we had a consistent look, language and tone.
- Digital materials received the next

‘Masonic’ is also important. From the Masons who established the home to care for widows and children, to the incredible Masons today who continue to give back to the community, it is a key part of who we are.”

— Nicole Candler is chief marketing officer at Masonic Communities Kentucky.
Murray State students participate in Rural Community Health Scholars program

Five students from Murray State University recently spent a month participating in the Rural Community Health Scholars program.

The program is a four-week endeavor that gives pre-med students an opportunity to work with professionals in rural communities such as those present in western Kentucky. Shanna Burgess, outreach coordinator for the Purchase Area Health Education Center, provided some information on the program and its aims.

Given that the program is set within counties in western Kentucky — Ballard, Calloway, Carlisle, Crittenden, Fulton, Graves, Hickman, Livingston, Lyon, Marshall, McCracken and Trigg counties — students from the area are given the opportunity to see what healthcare challenges the region is facing.

Activities ranged from shadowing professionals at rural and regional hospitals to assisting with summer health screenings in Fulton and Hickman counties to provide free school and sports physicals.

The Rural Community Health Scholars Program has been offered since 2007, and in that time, it has provided real life experiences for students wanting to pursue a career in healthcare.

Kentucky Core Healthcare Measures set announced

Kentucky now has an agreed upon set of healthcare measurement priorities. The Kentucky Core Healthcare Measures Set (KCHMS) was developed through a public-private partnership between the Kentucky Department for Medicaid Services (KDMS), within the Cabinet for Health and Family Services (CHFS) and the Kentuckiana Health Collaborative (KHC). The Commonwealth becomes one of the first states in the nation to enact a healthcare measurement set.

The purpose of this effort is to get Kentucky’s health plans and employers to reward primary care and pediatric providers on a shared set of relevant measures to drive improved health, quality of care and value, to reduce administrative complexity and to align healthcare organizations to have a shared focus.

For the last year, over 70 experts that provide, pay, purchase, and consume healthcare across Kentucky met as members of the Kentucky Performance Measures Alignment Committee (PMAC). They identified Kentucky’s current measurement situation is as follows:

- Insurers and government programs define quality differently and are often unaligned in scope and focus.
- Primary care providers are incented on too many quality measures, 89 in 2018.
- Providers and their teams are overwhelmed with the burden of state, federal and commercial measurement requirements.

The new core measures set contains 32 measures, less than half of the number of 89 currently incented measures in Kentucky by various state and national programs. Measures are focused in the areas of prevention, pediatrics, chronic and acute care management, behavioral health and cost/utilization. The PMAC team is currently requesting letters of support from key healthcare organizations.

News in Brief continued on page 16
New center established to address Kentucky health disparities

At the University for Kentucky, understanding and addressing the health needs of the people of the Commonwealth is the goal of many faculty, staff, clinicians and researchers. As a step toward improving health equity, the University of Kentucky Center for Health Equity Transformation (CHET) was established and recently approved by the UK Board of Trustees.

Kentucky has the highest national rates of cancer incidence and mortality as well as high rates of cardiovascular disease, diabetes, substance abuse and other diseases. These burdensome health conditions disproportionately impact rural, racial/ethnic minorities, sexual minorities and those from lower socioeconomic backgrounds.

Health equity research examines health and healthcare for underserved populations and looks at the causes of inequity, develops and evaluates interventions and disseminates findings into community and healthcare settings to improve health outcomes.

Frontier Nursing University earns accreditation

The Board of Commissioners of the Accreditation Commission for Education in Nursing (ACEN) has granted continued accreditation to Frontier Nursing University (FNU) for its master of science in nursing and post-graduate certificate nursing programs. ACEN also affirmed continuing accreditation of FNU’s newly implemented psychiatric-mental health nurse practitioner specialty track. ACEN is the leading authority in nursing accreditation.

The accreditation covers all specialties offered in FNU’s master of science in nursing and post-graduate certificate programs through 2025, including nurse-midwifery, family nurse practitioner, women’s healthcare nurse practitioner and the new psychiatric-mental health nurse practitioner option. FNU’s programs have been accredited continually by ACEN since 2006, demonstrating its ability to meet the standards of quality specific to nursing education.

McBrayer attorneys named to U.S. News Best Lawyers

19 attorneys from McBrayer law offices in Lexington and Louisville have achieved a 2019 listing in U.S. News Best Lawyers in America. Founded in 1981, Best Lawyers highlights the extraordinary accomplishments of those in the legal industry. For the 2019 edition, 7.8 million votes were analyzed.
A true value-based provider living in a payer world

By Gwen Cooper

The recent American’s Health Insurance Plans (AHIP) conference in San Diego was full of insights and opinions. In our ever-changing healthcare system, providers must understand the mindset of payers to stay ahead of the new value-based care curve. I came away with the validation that hospice providers have had it right from the beginning.

We are value based, person centered care personified. Enacted in 1983, the Medicare hospice benefit was the first capitated (value-based) payment model embraced by Medicare, paying providers a single rate to provide complete, integrated, multi-disciplinary care for patients until the end of their lives.

When payers discussed how they are working to build a system designed to meet patient’s needs, I thought, “Hellooo, it’s already created, just tap into the proven method of patient care and imagine how many lives we could improve and imagine how much money we can save the system.”

It’s right under the nose of literally every payer in the country are nonprofit hospice and palliative care providers whose mission has always been to wrap our value-based services and complete interdisciplinary teams around patients and families to provide the most compassionate person-centered care until their very last breath.

And now, we continue to wrap our services around patients and families but upstream from hospice care. Many hospice providers have begun to roll-out their own innovative models of advanced care upstream from the hospice palliative care programs as part of their service menu and in partnership with local hospital systems and payers that see the value in providing person centered care to the most seriously ill.

We also know that introducing the same care approach much earlier in one’s chronic illness journey will have lasting quality outcomes for both the patient and their family, not to mention also lowering healthcare costs.”

Advanced illness care/palliative care is shown to reduce hospital readmission rates and frequent ER visits for disease symptom management.

While hospice is not a substitute for advanced illness care, these programs can feed into a quality hospice program that provides compassionate care at the end-of-life. By providing the same model of care to patients with an advanced illness while they continue treatment, we are better able to manage their pain and progression of their illness much earlier.

While we know that providing hospice care is not about giving up but about compassionate pain and symptom management, respite care, grief counseling, spiritual care and so much more, we also know that introducing the same care approach much earlier in one’s chronic illness journey will have lasting quality outcomes for both the patient and their family, not to mention also lowering healthcare costs.

It was nice to see that the payer industry is beginning to embrace our model of person centered care. A broader understanding of the benefits of interdisciplinary medicine as early as possible to help manage a chronic illness is the healthcare game changer that we’ve been practicing for 40 years. I am hopeful that organizations like ours will have a seat at the table with payers nationwide ready to engage hospice providers in the design of this new payment model.

— Gwen Cooper is the senior vice president of marketing and business development and chief external affairs officer at Hosparus Health.
State sets rates for federally subsidized health insurance

The state Department of Insurance has approved the 2019 rates for federally subsidized health-insurance plans under the Patient Protection and Affordable Care Act, setting a slightly higher average rate for the state’s leading insurer than the company requested.

Rates for Anthem Health Plans of Kentucky will increase an average of 4.3 percent. The company had filed requests for rates averaging an increase of 3.5 percent.

CareSource of Dayton, Ohio, which is partnering with Louisville-based Humana Inc., will get the average 19.4 percent increase it requested.

“Since the actual premium charged will vary by individual and the plan level selected, some individuals may see a decrease in rates,” the Insurance Department said in a news release. More detailed 2019 rate filing information is at http://insurance.ky.gov/ratefil.

Anthem will expand its coverage area into 34 counties it once served. Those counties will have a choice between Anthem and CareSource. However, in 16 of those counties, the only Anthem plans will use a narrow provider network, Anthem Pathway Transition HMO. In Hardin County, both Anthem networks will be available.

“Kentuckians in these specific 16 counties should take special notice before ultimately selecting their plan,” Insurance Commissioner Nancy Atkins said in the release. “The provider network has been narrowed significantly, so individuals may find their preferred medical provider is not within the allowed network. We recognize that provider availability is a crucial factor in plan selection and want to make sure everyone is aware of this change.”

Announcements and helpful tips will be posted on Facebook.com/KentuckyDOI. Consumers with questions can find contact information at insurance.ky.gov/contact.

— Kentucky Health News

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