By Ben Keeton

Each year, Medical News talks with healthcare leaders from across the Commonwealth to get their perspective on the changing landscape of healthcare. This year, we wanted to focus on the organizations and groups that help bring together than many different aspects of the healthcare community.

Specifically, we interviewed the healthcare professionals that lead the various industry groups and trade associations. Their insights, both from the professional roles as well as leadership within their organization, help give us a better understanding of the work that goes on behind the scenes to make our industry tick.

“While change is inevitable, it also highlights the important role these associations have in helping their members continue to thrive (or survive) in today’s healthcare sector.”

Common Themes

With so many different industry groups represented, the responses were varied, but there were a few consistent themes. The first theme was, of course, is the desire for healthcare professionals to focus on delivering healthcare.

As the environment continues to change, many healthcare professionals are asked to do more and more administrative tasks, taking them away from direct patient care. Most leaders commended efforts to reduce “red tape” and other administrative burdens, but still see plenty of opportunity to continue to improve on this front.

Another common topic was the healthcare environment itself. From consolidations and mergers, to the incentives and reimbursement models, most leaders talked about the impacts the changing environment has on the way they deliver care. While change is inevitable, it also highlights the important role these associations have in helping their members continue to thrive (or survive) in today’s healthcare sector.

Social determinants of health are also a hot topic this year, with a focus on improving the health outcomes for the community, not just the individual. Most leaders continue to point to data that indicate that groups of people that have less access to resources like healthy food, consistent housing and transportation automatically have higher risks of poor health outcomes. Most providers mentioned the need to work together to build coalitions to help address these concerns to improve the overall health of the community.
2018 Kentucky KIDS COUNT County Data Book released

The 2018 Kentucky KIDS COUNT County Data Book offers the latest data on 17 measures of child well-being, showing whether outcomes for children across the Commonwealth have improved, worsened or stayed the same over a five-year period.

The 2018 County Data Book allows users to investigate areas in which Kentucky and its counties are making progress and those needing focused attention for improvement. It highlights data in four domains of child well-being: economic security, education, health and family and community.

Data highlights from the 2018 County Data Book:
- Kentucky has made progress in the percent of children living in poverty with improved rates in 93 out of 120 counties. And yet, nearly one in four Kentucky kids still live in poverty.
- A high school diploma is essential to achieve economic self-sufficiency, and in 119 of 167 school districts, the rate of high school students graduating on time has increased. Progress is still needed to improve graduation rates in the 46 school districts that worsened.
- After decades of progress, Kentucky's rate of insured children has reached an all-time high at 96.7 percent. All 120 counties have improved rates in children having health coverage.
- Kentucky has improved overall in the percent of low-birthweight babies with 73 out of 120 counties seeing improvements, yet 45 counties are still going in wrong direction.
- The rate of children in out-of-home care continues to rise in 92 counties, fueled by parents struggling with addiction. The number of Kentucky children being raised by relatives outside of the foster care system also continues to rise with a 75 percent increase between 2012-2014 and 2016-2018.
- More children in approximately half of Kentucky's counties are living in high poverty areas (where at least 20 percent of residents are poor), which are much more likely to have high rates of crime, violence, unemployment, and lack access to high-performing schools, quality healthcare and safe outdoor spaces.

This year's edition also takes a deep dive into the impact of trauma, specifically abuse and neglect, on children's short- and long-term health and well-being. Detailed data is available for every Kentucky county at kyouth.org/kentucky-kids-count.

Family Allergy acquires Kentuckiana Allergy

Louisville-based Family Allergy & Asthma acquired Kentuckiana Allergy, as well as Louisville-based Louisville Allergy & Asthma and Cincinnati-based Alleviate Allergy & Asthma. The acquisitions give Family Allergy 27 allergists operating in more than 35 offices in Kentucky, Indiana and Ohio, with more than 300 employees companywide.

Partnership to use data to curb opioid crisis

A new partnership between the University of Kentucky College of Public Health, the Kentucky Injury Prevention and Research Center (KIPRC), UK College of Pharmacy, the UK Institute for Pharmaceutical Outcomes and Policy and UK HealthCare will use data analytics for “Action Research to Reduce Opioid Supply and Demand.” The work will be supported by a $1 million grant from the U.S. Department of Justice.

UK HealthCare will develop and pilot targeted interventions. A multidisciplinary team of UK HealthCare physicians will collaborate with additional specialists to develop diagnosis-specific educational materials to address opioid pain management options post-discharge, non-opioid pain management alternatives and information on safe opioid use, storage and disposal.

UK HealthCare will incorporate the developed educational materials into the standard inpatient discharge protocols. The UK analytical team will track and analyze the duration and dosage of opioid prescriptions filled by patients who received the training intervention at discharge as compared with a historical cohort.

Additional interventions will focus on prescribers, providing specialty and sub-specialty groups with opportunities to discuss pressures they feel to prescribe and better ways to educate patients and other clinicians on the benefits and risks of taking opioids as well as strategies to reduce the risk of misuse, abuse and addiction.

Federal grant to launch trauma resilient community initiative

Louisville has been awarded a $5 million, five-year federal grant to launch an initiative to promote resilience and equity for Louisville families and young people most affected by trauma, inequality and violence.

The Mayor’s Office for Safe and Healthy Neighborhoods will manage the Trauma Resilient Community Initiative, funded by the U.S. Department of Health and Human Services’ Substance Abuse and Mental Health Services Administration, in partnership with UofL’s Kent School of Social Work and Centerstone Kentucky.

The initiative will use a community-based approach to build a trauma-informed system of care and services to children and families exposed to violence. The effort is meant to increase the knowledge and skills of people who respond to, make referrals for and provide services to youth and families affected by violence, trauma and racial inequity.
United Health, UK address oral cancer rates in eastern Ky.

A $1 million grant from the United Health Foundation will enable the University of Kentucky College of Dentistry (UKCD) to launch its “Eradicate Oral Cancer in Eastern Kentucky” project.

The three-year project will raise public awareness of the symptoms of oral cancer and its links to heavy alcohol and tobacco use, provide approximately 1,000 oral cancer screenings at local health departments, and help connect patients who need additional care to cancer specialists in Lexington.

The grant was awarded to address the high prevalence of oral cancer in Harlan, Letcher and Pike counties in Eastern Kentucky, as well as the lack of access to local healthcare providers who specialize in oral cancer treatment. The three-year grant enables UKCD to lead an integrated outreach and care program delivered to residents through their local health departments.

Humana Foundation to invest in Family Scholar House

Family Scholar House announced an investment from the Humana Foundation, to launch the HEROES program. HEROES is an acronym for Health-Education-Resilience-Opportunities-Economic Success.

This investment will allow the Family Scholar House to expand existing programming and will provide the opportunity to reach more individuals, families and senior citizens in the community to assess and address barriers including social isolation, food insecurity and lack of post-secondary educational attainment. The goal is achieved as participants enhance their well-being and realize their full human potential.

This investment is part of the Humana Foundation’s new Strategic Community Investments work. Through the program, the Foundation will invest $7 million in 2018 in nonprofit organizations operating in seven communities: San Antonio, Texas; Louisville, Ky.; Baton Rouge, La.; Knoxville, Tenn.; Tampa Bay, Fla.; Jackson­ville, Fla.; and Broward County, Fla.

In each of these communities, Humana is pursuing its Bold Goal to improve the health of the communities it serves 20 percent by 2020.

UK Center of Excellence in Rural Health, Kentucky Homeplace recognized

University of Kentucky Center of Excellence in Rural Health (UK-CERH) and Kentucky Homeplace have been recognized as “Community Stars” by the National Organization of State Offices of Rural Health (NOSORH).

UK CERH and Kentucky Homeplace will be featured in the 2018 book of Community Stars that will be available on the PowerofRural.org web site, the official hub for National Rural Health Day and the Power of Rural movement.

At the state level, Governor Matt Bevin signed an official proclamation to designate November 15 as Kentucky Rural Health Day to recognize rural providers and community stakeholders in the Commonwealth who play distinct and critical roles in leading efforts to address unique health needs of rural citizens.
Alvarado Medical Services
Sen. Ralph Alvarado, R-Winchester, has been named the new chairman of the Senate Standing Committee on Health & Welfare.

Apellis Pharmaceuticals
Adam Townsend was named chief commercial officer.

Baptist Health
Baptist Health Paducah has named Jena Flood as the LabCorp TSA (technical services agreement) regional manager for the west region.

BKD
Joanie Duckworth has been promoted to director and will provide audit services to universities and healthcare providers.

Centerstone
Abby Drake was selected as Centerstone Kentucky’s regional CEO, replacing Anthony “Tony” Zipple who retired from the position in November.

Family Allergy & Asthma
Steve Klasskin was named chief financial officer.

Kentucky Organ Donor Affiliates
Brian Roe was hired as vice president and chief clinical officer.

Kentucky Office of Rural Health
Director Ernie Scott received the 2018 James D. Bernstein Mentoring Award from the National Organization of State Offices of Rural Health.

PharmaCord
Patrick Lee was promoted to chief financial officer.

McBrayer Law
Anne-Tyler Morgan has returned to her legal practice as a member in the Lexington office.

Middleton Reutlinger
Patrick Shane O’Bryan has joined the litigation group.

Norton Healthcare
Sudha Alankar, MD, has joined Norton Children’s Medical Associates – Preston.

UK HealthCare
UK Orthopaedic Surgery & Sports Medicine recently hired Austin Stone, MD.

University of Kentucky
Kathryn Cardarelli, PhD, was named director of the Community Leadership Institute of Kentucky (CLIK).

ZIPPLE
DUDLEY
DUCKWORTH
DRANE
KLASSKIN
MORGAN
MORGAN
O’BRYAN
SNIDER
TOWNSEND
UGLY
LEEU
MCBRAYER
STONE
CARDARELLI
APPELIS
UK

Mary Lou Lampe
Medical News 
Editor 
mmayl@miamisports.com

Sign up for the Medical News eNewsletter at www.MedicalNews.md

Hosparus Health
Vice president and Chief Medical Officer Bethany Cox Snider, MD has been named a Fellow of the American Academy of Hospice and Palliative Medicine.

Kentucky Organ Donor Affiliates
Brian Roe was hired as vice president and chief clinical officer.

McBrayer Law
Peter Rosene has joined the Intellectual Property team.

McBrayer Law

PharmaCord

PharmaCord
New patient navigator program for veterans

Norton Healthcare launched a new service to help veterans navigate options for healthcare. A patient navigator dedicated to serving veterans will be available to assist them in getting the care they need.

The U.S. Department of Veterans Affairs reports there were 295,390 veterans in Kentucky in 2017; however, only 143,032 were in the VA healthcare system. The navigator is available to any veteran — with or without VA benefits.

The navigator also can help those with benefits through the Veterans Choice Program, which allows veterans who are part of this program to receive care in a private setting if wait times through the nearest VA medical facility are more than a month.

Additionally, the veterans’ patient navigator can help veterans who are new to the area find a primary care provider, as well as assist veterans who have multiple health insurance plans determine where they can get the care they need or assist veterans who have health concerns not addressed by VA services.

Cincinnati Children’s to acquire Children’s Heart Specialists

Cincinnati Children’s Hospital will purchase a downtown Louisville medical practice that cares for children and adults with congenital heart disease.

Children’s Heart Specialists treats patients in clinics in Louisville, Elizabethtown, Danville, Bardstown and Shelbyville, Ky. Children’s Heart Specialists is led by Juan Villafane, MD. He and his seven-person staff speak fluent Spanish, and families in the Hispanic community make up a large portion of his practice.

Lucina Health reduces early delivery rates

Lucina Health, a women’s maternity analytics platform, announced they were able to significantly impact preterm birthrates for Passport Health Plan. Identifying and communicating with at-risk mothers as soon as possible is critical to reducing preterm birth rates in the United States.

Reducing preterm birth, a national public health priority, can be accomplished by implementing strategies that target modifiable risk factors and provide access to care with potentially high social and financial impact. Critical care for infants is one of healthcare’s most expensive service lines, with some stays lasting months and costs running over one million dollars per year.

By utilizing the Lucina Health platform, Passport Health Plan saved millions of dollars in just six short months.

Lucina Health was able to identify 85 percent of pregnant mothers within the first two trimesters for Passport Health Plan by aggregating and analyzing individual patient and population data daily to improve outcomes. The health plan indicates a 13-percent reduction in early deliveries within the first six months of using the platform.

Murray-Calloway Hospital receives award

Murray-Calloway County Hospital is 5-star rated for Total Knee Replacement outcomes according to a study released by Healthgrades, the leading online resource for comprehensive information about physicians and hospitals. This achievement is part of new findings and data featured in the Healthgrades 2019 Report to the Nation.

Lucina Health

Lucina Health operates a women’s maternity analytics platform that aggregates and analyzes individual patient and population data to support strategic decision making, improve outcomes and reduce cost. By identifying, diagnosing and communicating with at-risk mothers as soon as possible, Lucina Health is helping healthcare organizations reduce preterm birth, one of healthcare’s most expensive service lines.
Leadership of the Business of Medicine—Healthcare Economics

<table>
<thead>
<tr>
<th>Date</th>
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<tbody>
<tr>
<td>Dec 1</td>
<td>8 am to noon</td>
<td>UK Gatton College of Business and Economics, 550 South Limestone, Lexington, Ky. 40507</td>
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Info: For more information visit lexingtondoctors.org.

Community Health Forum: The Path to Affordable Healthcare

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Info: For more information visit kbcollaborative.org.

Suicide: Across All Ages and Stages Conference

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Info: For more information visit kyha.com.

Population Health Summit

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<tbody>
<tr>
<td>Dec 8-9</td>
<td>Day 1: 8 am to 4:30 pm; Day 2: 8 to 11:30 am</td>
<td>The Kentucky Center for African American Heritage, 1701 West Muhammad Ali Blvd., Louisville, Ky. 40203</td>
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Info: For more information visit healthy-ky.org.

Next Generation Tobacco: The Impact of E-Cigarettes on Kentucky’s Future Health

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<td>Foundation for a Healthy Kentucky, 1640 Lyndon Farm Court, Louisville, Ky. 40223</td>
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Info: For more information visit healthy-ky.org.

BDG Legislative Conference

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<td>Dec 12</td>
<td>7:45 am to 4:45 pm</td>
<td>Indiana Convention Center, 100 S. Capitol Ave., Indianapolis, Ind., 46225</td>
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Info: For more information visit bgdlegcon.com.

National Diabetes Prevention Program: An Urgent Intervention for Kentucky

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<td>Dec 13</td>
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<td>Register for the webinar at kypca.net.</td>
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Capitol Connection: 2019 Legislative Agenda Unveiling

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<td>335 West Broadway, Louisville, Ky. 40202</td>
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Info: For more information visit greaterlouisville.com.

EVERYONE HAS A ROLE TO PLAY IN PREVENTING OPIOID ADDICTION.

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Saint Joseph Berea celebrates anniversary

Saint Joseph Berea is celebrating 120 years in the community, serving residents of Madison, Estill, Garrard, Jackson and Rockcastle counties. Founded in 1898, the facility has grown over the years to offer services, resources and healthcare expertise in more than 200 locations across the state. Saint Joseph Berea hosted a celebration event for employees in November.

Saint Joseph Berea was first named Berea College Hospital. Today, the facility is a 25-bed critical care access hospital that offers a full array of inpatient and outpatient services.

Tree of Life Family Birth Center hosts ribbon cutting

Founded by the physicians and midwives of WomanCare, the Tree of Life Birth Center, in Jeffersonville, Ind., aims to provide a warm, home-like atmosphere for expecting mothers. The center features private birthing suites equipped with tubs for hydrotherapy and designed for comfort.

Humana ranked first in customer service

Humana Inc. has been recognized by Newsweek as Best in Customer Service among health insurance companies in the magazine’s new “America’s Best Customer Service 2019” rankings.

In compiling its study, Newsweek and global research firm Statista collected and analyzed surveys from more than 20,000 U.S. consumers who have used services, made purchases, or gathered information about services or products in the past three years.

Company rankings then were determined based on feedback regarding the company’s Net Promoter Score – the likelihood of customer recommendation – as well as on five consumer evaluation criteria: Quality of Communication; Technical Competence; Range of Services; Customer Focus; and Accessibility.

Baptist Health Kentucky expanding

Baptist Health Kentucky is planning two major Lexington expansions. Plans for a new building for primary care and endocrinology in the Beaumont area off Harrodsburg Road and for 43 cardiac beds at the hospital at 1740 Nicholasville Road, have been approved through the Kentucky certificate of need process. The original plan was announced in February.

KASPER partners with Owensboro Health

Kentucky’s prescription drug monitoring program is collaborating with Owensboro Health to enhance the state’s capacity to share information with healthcare providers, allowing the delivery of timelier and more up-to-date reports on prescriptions dispensed to patients in the Commonwealth.

The Kentucky All Schedule Prescription Electronic Reporting system (KASPER) and Owensboro Health are piloting a new program that integrates the healthcare system’s electronic record system with KASPER data. The partnership, which launched Nov. 1, dramatically expedites the time it takes to access a KASPER report, and enables simplified access to prescription reporting data.

“In the fight against opioid abuse every second matters, particularly at the point of care when providers have to make healthcare decisions quickly and accurately,” said Cabinet for Health and Family Services (CHFS) Secretary Adam Meier. “The integration of KASPER and Owensboro Health’s record system puts information into the hands of providers almost immediately. This is a dramatic step forward for our program and we look forward to the integration of other healthcare systems across Kentucky, along with the Kentucky Health Information Exchange (KHIE).”

KASPER tracks controlled substance medications dispensed in the state. Allowing practitioners simplified and timelier access to KASPER data is a key component of efforts to address substance use disorder and the opioid epidemic in the Commonwealth of Kentucky.

This integration allows an authorized user to submit a request for KASPER data directly from Owensboro Health’s electronic health record system, Epic, and delivers the KASPER report directly into the patient’s medical record.

“We are saving five to ten minutes on each KASPER query. The accuracy of the data is also significant because we now have real time updates rather than old printed reports,” said David Danhauer, MD, Chief Medical Information Officer at Owensboro Health. “As we move forward with several Opioid Crises initiatives, this helps lay down the foundation for better management of patients and their long-term needs. The speed and accuracy of the data helps providers more easily manage this complex problem. Our health system can now truly improve the health of our community.”

This pilot project is co-sponsored by the U.S. Bureau of Justice Assistance (BJA) and the Centers for Disease Control and Prevention (CDC). The project is one of three integration pilots, along with the Illinois and Utah prescription drug monitoring programs (PDMPs), utilizing the BJA sponsored RxCheck Hub. RxCheck provides free access to a secure data technology hub that facilitates interstate data sharing among state PDMPs, and PDMP integration with healthcare and pharmacy system partners within the states.

“I am very pleased with the success of this pilot, and the assistance of Owensboro Health as collaboration partners,” said Steve Davis, CHFS Inspector General. “Integrating KASPER into practitioner workflows makes it easier to meet their responsibility to review KASPER data, but more importantly it helps them make more timely and appropriate controlled substance treatment decisions that are in the best interest of the patient’s health and safety.”

LifePoint, RCCH merger completed

LifePoint Health and RCCH HealthCare Partners have completed their merger and will now begin operating as one, united company under the LifePoint Health name.

As part of the LifePoint network, Clark Memorial Health is now connected to an even stronger network of community hospitals, regional health systems, physician practices, outpatient centers and post-acute facilities that spans 30 states.
Faith-based men’s treatment home opening

A Hopkinsville woman, Candice Tucker Groves, who has worked in residential treatment her entire career, will open Redeemed and Restored faith-based, residential treatment facility for men in January.

The facility at 2010 Cadiz Road in Hopkinsville hosted an open house in December for the community to tour the facility and hear about their mission.

Groves said the idea began because she realized there wasn’t a faith-based treatment facility for men — the way Grace and Mercy serves women — in town.

Redeemed and Restored is licensed as an Alcohol and Other Drug Entity and a Behavioral Health Services Organization, meaning they can provide substance abuse and mental health services. However, part of the program will include participation in faith-based activities.

Redeemed and Restored is housed inside the former Master Builders and Bad Boy Mowers building. It has been remodeled and redecorated to house 16 men for short-term, or 30-day, treatment. There are spaces for offices, recreation, a lunch and break area, showers and bathrooms.

NKU’s Institute for Health Innovation receives grant

Northern Kentucky University’s Institute for Health Innovation (IHI) recently received a $200,000 federal grant to address the opioid epidemic in rural Kentucky. The Health Resources and Service Administration’s (HRSA) grant will support expanding interventions for opioid misuse in Owen County, Ky.

The IHI will also use the funds to develop innovative approaches for health-related workforce development in Owen County which could serve as a blueprint for other rural communities. Owen County has one of the highest risk rates for drug overdoses in the region — combined with very limited treatment facilities and multiple barriers to accessing them.

Additional partners for the project include Northern Kentucky Office of Drug Control Policy, Three Rivers Health District, Owen County Schools, Owen County Drug Prevention Coalition and NorthKey, Owen County’s designated community mental health center.

The IHI opened earlier this year to develop pioneering solutions to the health challenges facing the region. It drives change that directly addresses urgent unmet health needs. It is housed in NKU’s newest building on campus, the Health Innovation Center.

UK College of Nursing hosts antibiotics conference

University of Kentucky College of Nursing, in collaboration with Kentucky Department of Public Health, HAI Prevention Program and Atom Alliance hosted a conference in aimed at healthcare providers to address best practices in prescribing antibiotics, as well as provide information and guidelines for implementation of Antimicrobial Stewardship programs within healthcare settings.

Featured speakers addressed the challenge healthcare providers face in trying to reduce microbial resistance. Infections caused by bacteria, parasites, fungi and viruses are becoming increasingly resistant to antibiotic therapies. Multidrug resistant organisms have the potential to be transmitted from one person to another resulting in costly infections that are difficult to treat. In the United States, at least 2 million people each year acquire serious infections with bacteria that are resistant to at least one or more of the antibiotics designed to treat those infections.

UK part of new Kentucky commercialization initiative

The University of Kentucky will assist Kentucky’s other colleges and universities in how to translate intellectual property and innovations into market-ready products and startups. UK is partnering with the University of Louisville in the new Commonwealth Commercialization Center (C3) that has been announced by Gov. Matt Bevin. C3 is being partially funded by a $1.2 million grant from the Cabinet for Economic Development’s KY Innovation office, which will lead the new effort.

The idea behind the center is to have one place for Kentucky schools, their faculty and students to find ideas and support for commercializing their inventions with much of the expertise coming from UK and UofL. There is also hope that companies looking to invest in Kentucky will reach out to C3 to find research or innovation help.
After successfully launching an oncology training program for Appalachian undergrads in 2016, the University of Kentucky Markey Cancer Center is expanding the program to include high school students.

The Appalachian Career Training in Oncology (ACTION) Program – formerly known as CTOP – is funded through a nearly $2.3 million grant from the National Cancer Institute.

Since its inception, ACTION has been designed to train and educate students to help them make a difference in their own communities – and to ultimately become prepared to pursue a cancer-focused career. Beginning next year, high school students from Appalachian Kentucky will have the opportunity to join this transformative program.

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CMS reapproves Kentucky HEALTH

The Kentucky Cabinet for Health and Family Services (CHFS) announced that the federal Centers for Medicare and Medicaid Services (CMS) has approved the Commonwealth’s Section 1115 Medicaid waiver known as Kentucky HEALTH (Helping to Engage and Achieve Long Term Health). CMS provided guidance that the newly approved program can begin as soon as April 1, 2019. Accordingly, the PATH (Partnering to Advance Training and Health) Community Engagement component will be rolled out regionally over several months beginning no sooner than April 1, 2019.

Kentucky HEALTH is an innovative approach that will put Kentuckians on a path to better health, and is key to ensuring the long-term viability of the Medicaid program. Kentucky HEALTH is not a one-size-fits-all program. It includes new opportunities for beneficiaries to earn rewards for healthy activities through the My Rewards Account, introduces premiums for some individuals to have a stake in their healthcare services, and requires some adults who can participate in community engagement activities that will lead to improved long-term health and increased career opportunities.

The program also includes expanded access to Substance Use Disorder (SUD) treatment for Medicaid beneficiaries, a fully-funded $1,000 Deductible Account to help beneficiaries track their healthcare spending and show the cost of healthcare services, and the Kentucky Integrated Health Insurance Premium Payment (KI-HIPP) program that lets Medicaid help beneficiaries pay for the cost of private health insurance.

In addition, initial Kentucky HEALTH estimates project that the program will save the Medicaid program in excess of $2 billion dollars during the five-year demonstration period, with more than $300 million in savings to Kentucky’s General Fund, and will help ensure availability of Medicaid resources to the Commonwealth’s most vulnerable citizens. Additional details regarding the implementation of Kentucky HEALTH will be available in the coming weeks.

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Q&A

BRUCE SCOTT, MD
PARTNER AND PRESIDENT, KENTUCKIANA EAR, NOSE AND THROAT
PRESIDENT, KENTUCKY MEDICAL ASSOCIATION
BOARD OF TRUSTEES

"My hope is that healthcare can address the social determinants of disease to raise the health status of all members of our community."

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"Near the top of most physicians’ list of administrative burdens that interfere with patient care is prior authorization."

Medical News: Looking back on the past year, how has the healthcare system changed and what is the physician community doing to adapt to the changing environment?

Bruce Scott, MD: There continues to be consolidation within all levels of healthcare. Health plans continue to merge both horizontally and vertically. Hospital systems and even physician groups are consolidating to respond to the changing environment of healthcare.

How has the practice of medicine changed over your career? How would you like to see it continue to change?

There have been remarkable advances in medicine over the course of my career with improved treatment and prognosis for many illnesses. As a surgeon, I have directly witnessed the rise of minimally invasive surgery. Patients now have procedures done as outpatients who previously would have been hospitalized for several days and experience less pain, quicker recovery and improved outcomes.

My hope is that healthcare can address the social determinants of disease to raise the health status of all members of our community. As a population, we must address chronic illness and move toward prevention with healthier lifestyles.

What are the biggest challenges to practicing medicine in Kentucky?

Kentucky has a physician shortage which is worsening every year, particularly in the rural areas.

It is no secret that Kentucky has one of the worst medical-legal climates in the nation. Our broken professional liability system places unlimited, unpredictable risks on physicians, weakens quality control, drives up healthcare costs and leaves injured patients in a lottery like system where the only winners are the lawyers.

Unfortunately, the Kentucky Supreme Court just recently struck down the limited liability reform instituting medical review panels that the legislature passed in 2017.

A recent study by the AMA found that Kentucky has one of the lowest rates of competition among health plans with many communities having only one choice of insurer, particularly among Medicaid expansion and Medicare Advantage plans.

What was the biggest success or accomplishment for the Kentucky Medical Association (KMA) this past year?

The Kentucky Physicians Leadership Institute (KPLI), cofounded by our Kentucky Foundation for Medical Care, is the premier leadership training program for physicians in Kentucky.

This exclusive program which selects diverse physicians from around our state to participate in a year-long series of learning events has allowed us to cultivate leaders who have become champions for issues of importance for patients and physicians.

What is your top priority for the Kentucky Medical Association in 2019?

KMA is advocating for transparency, simplification, expediated processes and compliance with published quality standards.

Near the top of most physicians’ list of administrative burdens that interfere with patient care is prior authorization. A study published in Health Affairs estimated that physician practices spend between 23 and 31 billion dollars per year on administrative issues that do not improve patient care.

90 percent of physicians surveyed reported delays in needed medical care because of prior authorization.

KMA is advocating for transparency, simplification, expediated processes and compliance with published quality standards.

FAST FACTS

Leadership style: Trying to build consensus to focus on the things that unite physicians - our dedication to our patients and our commitment to care - rather than those things that divide us.

Mentor: Bob Goodin, retired cardiologist here in Louisville, a role model as a caring physician and a gifted leader in organized medicine, but even more as a person who understands how to enjoy life.

Dream job as a child: A surgeon. I have always been a person who enjoys fixing things.


Through my activities with the AMA, I have had the opportunity to work with Mr. Winarsky and deeply respect his experience and knowledge.

Hobbies: I love traveling, particularly with my wife and family.
Medical News: Looking back on the past year, how has the healthcare system changed and what is the health-related business community doing to adapt to the changing environment?

David Henley: In a broad sense, healthcare is comprised of those who provide care (hospitals, doctors, nurses and other medical professionals) and those who pay for medical care rendered to their insureds and members (health plans and employers).

HEN VIP, as it’s known, brings entrepreneurs and healthcare leaders together to bridge the corporate engagement gap between startups and big corporations. HEN VIP provides an unparalleled opportunity for entrepreneurs to connect and engage with the healthcare leaders, decision makers and community resources they need to develop and grow their business.

Members have established pilot programs with local healthcare facilities, gained access to additional investment funding, engaged in customer discovery conversations and formed strategic relationships with area leaders.

Medical News: How do you envision the health-related business community working together to make Kentucky (or Louisville) a location of choice for companies that work in this industry?

David Henley: Various healthcare organizations in the Louisville metropolitan area have recognized that our healthcare ecosystem consists of many of the leading and impactful organizations in the healthcare industry. These significant organizations are looking for opportunities to collaborate on healthcare matters that will improve the economy of the Louisville metropolitan area.

For example, these healthcare companies are using value-based contracting and incorporating social determinants of health into their strategies to improve the health of their insureds and members.

And, of course, Passport Health Plan is helping transform an entire underserved community through its innovative health and well-being campus.

Medical News: What was the biggest accomplishment for Health Enterprises Network over the past year?

David Henley: Continued engagement with and support of entrepreneurs through our Health Enterprises Network (HEN) VIP Program. We established the HEN VIP Program in 2017 and it now consists of over 50 companies.

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Members have established pilot programs with local healthcare facilities, gained access to additional investment funding, engaged in customer discovery conversations and formed strategic relationships with area leaders.

What is your long-term vision for the healthcare community in our region?

David Henley: To be aligned and support each other’s efforts to improve the economy of the Louisville metropolitan area.

FAST FACTS

Leadership style: I change leadership styles based on the team and the situation. My primary leadership style is a democratic style in which I involve team members in discussions about issues while making the critical decisions. In some situations, I use a transformational leadership style where I focus on setting high goals and objectives with deadlines and have my staff work in unison to accomplish goals and objectives on time.

Mentor: I view a mentor as someone that is invested in my long-term success and who gives me advice and support. Using that as a definition, I would say that I do not have a mentor. What I do is build relationships with those who I can learn from and whose advice and counsel I value and trust.

Dream job as a child: A race car driver or a football player.

Book on nightstand: The last book I read was “The Servant: A Simple Story About the True Essence of Leadership” by James Hunter (Prima). Although I will confess that I really don’t read many books. I mostly read magazine articles and two of my favorites are the Harvard Business Review and Success Magazine.

Hobbies: Running and travel.

Medical News: What is the health-related business community doing to adapt to the changing environment?

David Henley: In a broad sense, healthcare is comprised of those who provide care (hospitals, doctors, nurses and other medical professionals) and those who pay for medical care rendered to their insureds and members (health plans and employers).

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What is your long-term vision for the healthcare community in our region?

David Henley: To be aligned and support each other’s efforts to improve the economy of the Louisville metropolitan area.
We need to offer employees better healthcare packages, more engagement opportunities and most importantly we need to promote an environment that focuses on the value and appreciation of our employees and the care they give to our residents.”

The greatest change in the long-term care sector over the course of my career is the growing expectation to have senior living communities offer a diverse assortment of quality activities and provide an exceptional culinary experience.

We are creating opportunities to provide seniors with the ability to volunteer in the community, attend community events, participate in sports leagues and join educational and hobby style classes. Our communities are now supplying our residents with multiple dining options. The typical cafeteria style dining no longer meets the desires of today’s seniors.

As Chairman of Kentucky Senior Living Association (KSLA), what are your top priorities for 2019?

Education, support and awareness are all priorities. KSLA offers diverse educational training opportunities for all disciplines, including during our annual conference.

The KSLA Education Action Team relies on constant feedback from members and leaders to offer pertinent and timely topics.

In addition, we work closely with state agencies and other organizations to address information that they feel is relevant to KSLA members.

KSLA’s weekly e-Blast News is published with up-to-date information concerning the Kentucky legislature and upcoming workshops and conferences.

KSLA is dedicated to representing senior living communities including assisted living communities, apartment-style personal care homes, memory care communities, independent living communities and retirement communities.

How has the long-term care sector changed over your career?

The greatest change in the long-term care sector over the course of my career is the growing expectation to have senior living communities offer a diverse assortment of quality activities and provide an exceptional culinary experience.

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What are the biggest changes in the long-term care and aging care sector face in Kentucky?

Due to this new technology, we now have an increased ability to monitor for safety, deliver important daily reminders to our residents, provide seniors the ability to speak with a physician over video chat and increase communication with residents and their family members. This new technology helps promote independence and facilitate aging in place.

My industry is adapting to this change in environment by continuing to learn about new products and by implementing care related technology into senior communities. We are learning what technology seniors are using and what works best to help provide better personalized care.

Medical News: Looking back on the past year, how has the healthcare system changed and what is your industry/sector doing to adapt to the changing environment?

Dean Windsor: The most apparent change in the healthcare system over the past year is the increase of technology. There has been a tremendous growth in the number of products designed to help contribute to the care of seniors.

The most apparent change in the healthcare system during my experience has been the tremendous growth in the use of technology. There has been an increase in the development of products and services that help facilitate aging in place. My industry has adapted to this change in environment by continuing to learn about new products and by implementing care related technology into senior communities. We are learning what technology seniors are using and what works best to help provide better personalized care.

Fast Facts

Leadership style: I am a passionate servant leader with a focus on trust and communication.

Mentor: My wife, Amber, has helped me grow the most as a leader. She can help me look at situations from a different perspective and her nursing background helps customize my view to patient care settings.

Dream job as a child: I have always wanted to be a leader, but I was not sure how I wanted to lead. As I grew older, I developed a passion for helping others. This progression into senior living care was a natural draw to me.

Book on nightstand: “The Way of the Shepherd” by Dr. Kevin Leman (Zondervan).

Hobbies: Anything that involves spending time with my wife and our four children.
Providers are positioning themselves to thrive in a payment system that rewards value over volume and partnerships are becoming increasingly important.

Unfortunately, despite recognizing the importance of advance care planning, most physicians receive no formal training on this important skill.

End of life is a challenging time for families and physicians. How would you like to change the dialogue?

We know that seriously ill and terminally ill individuals are exposed to non-beneficial and potentially harmful healthcare utilization in terms of frequent visits to the emergency departments and subsequent hospitalizations. A contributing factor to this phenomenon is a lack of advance care planning and conversations with healthcare providers about goals for medical care.

Through a partnership with Ariadne Labs, the Center to Advance Palliative Care and VitalTalk, Bluegrass Care Navigators and the University of Kentucky have partnered to improve the communication skills of clinicians caring for the seriously ill and assuring that patient preferences are known throughout the health system.

What recommendations do you have for the physician community as it relates to end of life care?

What were the biggest accomplishments for hospice providers this past year?

Kentucky is fortunate to have 22 high-quality, community-based hospice providers. Most hospice providers in the state exceed national benchmarks for quality and have received distinction for excellence in care delivery and workforce. Hospice providers have a specially trained workforce with expertise in managing pain and symptoms and helping patients stay in their homes.

Additionally, hospice programs have a 24/7 on-call infrastructure to support patients and respond to crises any time of day. Because of the unique workforce and infrastructure, many hospice programs have created community-based palliative care programs to support people who need expert pain and symptom management, but who are not yet eligible for hospice care.

While it may seem that we live in a death-defying culture, surveys show that patients and families want their doctors to initiative conversations about goals of care. Conducting goals of care conversations is a skill and there are several excellent resources to support physicians and other clinicians.

What are the biggest challenges for hospice organizations in Kentucky?

Despite hospice care being a benefit for the individuals in the last six months of life, half of patients who elect hospice receive care for 18 days or less. Consequently, many terminally ill patients and their families are not able to fully take advantage of the hospice benefit. Hospice clinicians often report feeling like they are practicing brink of death care rather than end-of-life care.

Additionally, hospice providers in Kentucky are committed to managing intractable pain and bothersome symptoms while also safely prescribing and disposing of opioids. We worked closely with the general assembly to pass legislation that helps keep our communities safe.

What recommendations do you have for the physician community as it relates to end of life care?
Medical News: Looking back on the past year, how has the healthcare system changed and what is the physician community doing to adapt to the changing environment?

Molly Rutherford, MD: There is no longer a penalty for individuals who choose not to have health insurance coverage, which has opened the market for innovative catastrophic care options including Sedera health, which is like a christian health sharing ministry without the religious requirement.

Molly Rutherford, MD:  (Continued) Short-term catastrophic plans are legal again also, and they last 12 to 36 months, providing another affordable, more tailored coverage option for individuals and families.

Molly Rutherford, MD: Association plans, for small businesses to band together and leverage with insurance companies, also became legal to provide employers with a more affordable way to offer healthcare coverage for employees.

Molly Rutherford, MD: The Affordable Care Act did not allow these options, and unfortunately led to limited, cost prohibitive options on the exchanges for individuals.

Molly Rutherford, MD: These changes, along with growing concern around the rising premiums and deductibles of available insurance plans, have led to more cost consciousness by individuals, which will lead to pressure on providers of healthcare services to increase price transparency.

Molly Rutherford, MD: More physicians are leaving the traditional system and starting direct care practices, which offer affordable, accessible care for individuals, families and employers.

Medical News: What are the biggest challenges to practicing medicine in Kentucky?

Molly Rutherford, MD: Kentucky is not generally considered a physician friendly state. Kentucky physicians have been blamed for the opioid epidemic, leading to many physicians to fear prescribing of various controlled substances.

Molly Rutherford, MD: Well-meaning legislation has had unintended consequences. Chronic pain patients are needlessly suffering because of fear, and frankly the legislative efforts, including House Bill 1, have not reduced overdose deaths.

Molly Rutherford, MD: During an opioid overdose epidemic, states should make every effort to expand access to effective treatments for substance use disorders, but Kentucky has instead made treating addiction more challenging. Kentucky passed legislation regulating prescribing of buprenorphine, which has discouraged many primary care physicians from treating addiction. No other chronic disease is regulated in this manner.

Molly Rutherford, MD: Finally, the previous governor passed an emergency regulation in 2014 that prohibits Medicaid patients from benefiting from affordable, accessible care such as direct primary care, and I’m not sure why this has not yet been reversed.

Molly Rutherford, MD: How has the practice of medicine changed over your career? How would you like to see it continue to change?

Molly Rutherford, MD: The practice of medicine has become more about coding/billing and meeting government requirements than about caring for patients. The Affordable Care Act unintentionally worsened administrative burden for physicians.

Molly Rutherford, MD: As a result, more independent physicians have sold out to big health systems and hospitals, all which has a negative impact on patient care. We know that outcomes are better in small, independent practices.

Molly Rutherford, MD: After working as an employed physician for eight years and being frustrated with limited time with patients due to increased billing/coding and reporting tasks, I started my own direct primary care (DPC) practice where I’m able to spend as much time as needed with my patients.

Our work in drafting direct primary care legislation which was signed by Governor Matt Bevin in 2017. In 2018, KAFP received a grant to offer free training to physicians to learn more about addiction through a live course offered twice and an online course on Screening, Brief Intervention and Referral to Treatment (SBIRT).

Molly Rutherford, MD: What is your top priority for the Kentucky Academy of Family Physicians in 2019?

Molly Rutherford, MD: To educate practicing physicians, students and residents on direct primary care. During a time of record burnout and even increased physician suicide, there is hope for primary care physicians who want to own and operate a practice. I will continue to encourage family physicians to treat addiction as well.

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Ruth Carrico, PhD, DNP, APRN, CIC
Associate Professor, University of Louisville
President, Kentucky Nurses Association

Q&A

“Nursing practice has changed dramatically over my career as best practice and evidence-based care has emerged and become the standard.”

Medical News: Looking back on the past year, how has the healthcare system changed and what is the nurse community doing to adapt to the changing environment?

Ruth Carrico, PhD:
Undoubtedly, the greatest change in our healthcare systems has revolved around the ability of patients to receive quality healthcare services. The need to address illness as well as the need to provide preventive care services remain, so how we can engage the population and enable them to access necessary services are critical.

Since nurses represent what the public views as the most trusted profession, our role has been focused on helping patients access, receive, understand and follow through with healthcare services across the lifespan.

Medical News: How has the practice of nursing changed over your career? How would you like to see it continue to change?

Ruth Carrico, PhD:
Nursing practice has changed dramatically over my career as best practice and evidence-based care has emerged and become the standard. I would love to see more nurses involved in nursing research to continue this trajectory.

Medical News: What is the biggest accomplishment for the nursing community over the past year?

Ruth Carrico, PhD:
The focus for nursing during the past year has been “Healthy Nurse, Healthy Nation.” The nursing community has embraced this on several levels. There has been an emphasis on general health and fitness among nurses, promoting a workplace that facilitates a healthy environment for the nurse and the patient, and the impact the healthy nurse has on the overall wellbeing of the patient, their families and community. The biggest accomplishment has been the successes that have occurred in advocating for each of these components.

Medical News: What is your top priority for the Kentucky Nurses Association in 2019?

Ruth Carrico, PhD:
It is the expansion of our ability to be the voice for Kentucky’s nurses. This means growth in the membership and growth in the strength of our voice involving nursing practice.

FAST FACTS

Leadership style: Engaged and collaborative but with an expectation of accountability.

Mentors: Early in my practice, Juanita Clay was my mentor for development of my nursing skills and management. Dr. Julio Ramirez has been my mentor in areas involving clinical practice and research. Dr. Shirley Chater was my mentor in the area of nursing leadership.

Dream job as a child: I have always wanted to be a nurse.

Book on nightstand: I just finished “Origin” by Dan Brown (Anchor) and am currently reading “No Fail Meetings” by Michael Hyatt (Baker Books).

Hobbies: Anything involving international travel.
Medical News: Looking back on the past year, how has the healthcare system changed and what is your industry/sector doing to adapt to the changing environment?

**Terry Skaggs:** Three years ago, the Centers for Medicare and Medicaid Services began implementing new Requirements of Participation for skilled nursing facilities. This past year was the final year of the phase-in of those requirements placing an increased regulatory burden on providers.

**Inadequate Medicaid funding for skilled nursing facilities continues to be one of our greatest challenges.**

Associations, such as the Kentucky Association of Health Care Facilities (KAHCF), have provided focused education to assist providers with the policy development and implementation of the new requirements. As a result of these new requirements, new survey processes and protocols were developed and implemented. KAHCF is keeping member providers informed of survey results and trends as they adapt to the new processes and protocols.

This year, CMS announced, in its Final Rule for 2018, that sweeping payment changes are to be implemented in the skilled nursing sector beginning October 1, 2019. This is the most comprehensive change to the payment methodology used for skilled nursing services in the past thirty years.

KAHCF has already begun the education process to assist our members to understand the complexity of the changes and to be prepared to implement them within the next year.

**Medicare and managed care continue to push for shorter lengths of stay in skilled care settings. This push has resulted in a shorter skilled stay and has significantly lowered overall utilization in our facilities.**

At both the federal and state levels, we face continued challenges to funding of Medicare and Medicaid for skilled nursing services. While the Requirements of Participation place greater emphasis on person-centered care and quality outcomes, legislators continually scrutinize government funding for these services looking for ways to reduce spending.

**What are the biggest challenges the long-term care/aging care sector face in Kentucky? How can we overcome those challenges?**

**Terry Skaggs:** Inadequate Medicaid funding for skilled nursing facilities continues to be one of our greatest challenges. Over the past five years, Medicaid rates for skilled nursing services have risen 0.5 percent (0.1 percent per year in each of the five years).

Due to a lack of meaningful tort reform in Kentucky and the predatory litigious environment created for nursing facilities, as a result, our Commonwealth has one of the highest professional liability costs in the nation. Litigation and subsequent double-digit premium cost increases have caused some providers in our state to forego insurance coverage.

Providers have proposed methods for increasing Medicaid funding in Kentucky without the use of general fund dollars. The proposal would draw down additional federal funding to help ease some of the burden created by these inadequate funding periods. Further, liability costs have reached a critical point.

Our sector faces significant workforce shortages. Decreased funding is also making it difficult to attract and retain a quality workforce where wage increases are restrained due to low reimbursement increases. Providers are having greater difficulty attracting quality, qualified workers into our sector. Workforce shortages have created higher demands for wage and benefits in a time when funding is being limited or decreased.

**As Chairman of KAHCF, what are your top priorities for 2019?**

**Terry Skaggs:** Assuring adequate Medicaid funding must be a top priority in 2019. Providers cannot continue to operate on inadequate funding. Workforce challenges and liability insurance costs demand more of our resources. Those resources must be adequate to provide quality services.

A second priority is taking the next steps to tort reform. The 2019 legislative session must address meaningful and adequate steps to ensure that Kentucky does not continue to be open to predatory litigation.

Third, assuring that the regulatory process is fair and consistent for all providers.

Lastly, taking steps to identify ways for providers to recruit and retain a quality workforce.

**FAST FACTS**

**Leadership style:** Assemble a team that brings all perspectives to the table. I have used this quote before, “Never doubt that a small group of thoughtful people can change the world.”

**Mentors:** When I entered this profession, John Vinson, Sr. was a strong influence on my professional development. For the past 25 years, I have worked with an amazing group of individuals who are my business partners and my mentors, such as Jack Wells, Jean Wells, Greg Wells and Janine Lehman. You won’t find a better team that brings all perspectives to the table.

**Dream job as a child:** I was always a math whiz, so accounting was always the path that I set my sights on.

**Book on nightstand:** “Killing the SS” by Bill O’Reilly (Henry Holt & Co.) I have enjoyed this series of books. I also read everything by John Grisham.

**Hobbies:** Golf
Kentucky healthcare organizations win awards

Nearly fifty Kentucky healthcare organizations were recognized at the annual Thoroughbred Awards for healthcare marketing and public relations.

Kentucky healthcare organizations were eligible to submit entries in 34 categories ranging from television advertising to direct mail design, community events and social media campaigns.

The awards luncheon was presented by the Kentucky Society for Healthcare Public Relations and Marketing (KSH-PRM), a group of public relations, marketing, physician recruiters/liaisons and development practitioners that represent Kentucky’s hospitals and healthcare related organizations.

This year’s 75 entries were judged by KSHPRM’s sister organization in Florida. The full list of winners can be found at medicalnews.md.

Kentucky hospital to open children’s hospital

Pikeville Medical Center officials unveiled plans for a children’s hospital recently. The plans are to provide more convenience to hundreds of pediatric patients traveling long distances.

For years people in the area have had to take their children to Lexington, Cincinnati or West Virginia. The children’s facility will have 17 exam rooms.

The first step for the children’s hospital will be to relocate and expand the medical center’s pediatrics clinic, which will cost $7 million and will open in March. This is a part of a $52 million investment into patient care over an under-served region.

New cancer programs at Pikeville Medical Center

With the growing number of new patients being treated by the skilled physicians at the Leonard Lawson Cancer Center, there are new programs being implemented to service them.

The Pikeville Medical Center (PMC) Outreach Program Coordinator has implemented programs to help cancer patients with their overall physical and emotional health.

The newest program to benefit the overall mental and emotional health of cancer patients is The Art of Healing. The Kentucky Cancer Program will offer a Plan to Be Tobacco Free program for the patients.

Waystar buys part of Pittsburgh company

Waystar, formerly known as ZirMed, will purchase part of a business associated with the University of Pittsburgh Medical Center.

The Louisville-based healthcare revenue cycle management and technology company will take over the transaction services division of Ovation Revenue Cycle Services.

The transaction services division uses advanced algorithms to automatically monitor the status of reimbursement claims and verify patients directly with health plan web sites.

It will be integrated into the cloud-based systems that Waystar currently offers its clients. Waystar works with 450,000 providers, 22,000 healthcare organizations and 750 health systems and hospitals across the U.S.

News in Brief continued on page 18
Federal government approves Kentucky’s plan for innovation

The federal government recently approved Kentucky’s implementation plan for substance use disorder services under the 1115 waiver submission from the Cabinet for Health and Family Services (CHFS). The plan will increase Medicaid enrollees’ access to care and enhanced benefits to improve treatment and outcomes for substance use disorder (SUD).

The enhanced Kentucky Medicaid SUD treatment package is one part of the state’s 1115 demonstration waiver, Kentucky HEALTH. While a judge’s ruling in June 2018 vacated approval of many of the changes proposed under Kentucky HEALTH, the SUD component of the waiver submission remained approved, and the Cabinet continues to work with CMS as it awaits a final decision on the rest of the waiver.

Specifically, the Centers for Medicare and Medicaid Services (CMS) granted approval for the SUD portion of the Kentucky HEALTH demonstration waiver, granting the state more flexibility in the delivery of services to Medicaid enrollees. Through the program, beneficiaries will have access to enhanced mental health and substance use disorder treatment services, raising the standard of care for drug treatment in Kentucky.

Current Medicaid benefits do provide a full range of care, including residential treatment options. New flexibility under the SUD portion of the 1115 expands access to SUD providers, allows Medicaid to reimburse for short-term residential stays (up to 30 days) in mental health facilities, and creates the circumstances necessary to add coverage for methadone, a form of medication-assisted treatment not currently covered under Kentucky Medicaid.

Per guidelines established by CMS, Kentucky Medicaid is seeking to expand its network of providers with an established level of care for SUD treatment. Under the implementation plan, providers can attest to the level of care provided at treatment facilities, which will be verified through subsequent certification visits.

This process will ensure more bed capacity for residential treatment facilities (the current policy limits coverage to 16 beds), while also elevating program standards regarding the types of services, hours of clinical care, and credentials of staff in such settings. The enhancements to Kentucky Medicaid’s SUD benefits will be available to all beneficiaries. These services will be delivered through the managed care delivery system. All Medicaid beneficiaries in Kentucky will continue to have access to all current mental health and SUD benefits.

New virtual simulation prepares healthcare workers

Healthcare professionals who treat patients in the home often face numerous hazards that do not exist in traditional medical settings, from exposure to lit cigarettes near oxygen tanks to tripping over pets that trail underfoot.

To better prepare nurses, occupational therapists, physical therapists and home healthcare aides who face these hazards, researchers from the University of Louisville School of Nursing and The Ohio State University developed the Home Healthcare Virtual Simulation Training System to instruct workers and students on 150 dangerous scenarios that might exist in a patient’s home.

Three categories are featured: slip, trip and lift hazards; fire and electrical hazards; and environmental hazards.
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