By Sally McMahon

Dean Dorton, a CPA firm in Louisville, Ky., recently hosted a roundtable discussion with leaders from Kentucky Medical Group Management Association (KMGMA) about the impact of the COVID-19 pandemic.

Started in 1976, KMGMA includes members from across the commonwealth and provides advocacy, educational and networking opportunities for members by hosting webinars and conferences.

Participants included KMGMA president Martina Denny with Pediatric & Adolescent Associates; KMGMA president-elect Craig Gillispie with Family Practice Associates of Lexington; and KMGMA immediate past president Mollie Schnettler with Kentucky Diabetes Endocrinology Center. Adam Shewmaker, director of Healthcare Consulting at Dean Dorton, moderated. Below are the highlights.

**Adam Shewmaker:** Your teams are on the front lines, fighting this pandemic. How are your teams holding up?

**Martina Denny, Pediatric & Adolescent Associates:** I am extremely impressed with how well our team is holding up. The first two weeks were the most stressful and now we are getting acclimated to what is going on. Our staff have adapted and come together as a team and are volunteering to go home early so that another team member can stay and work.

**Mollie Schnettler, Kentucky Diabetes Endocrinology Center:** We also had a lot of anxiety about furloughs. Employees wanted to know, one way or another, but they seemed to handle it well once we made the decisions. But the in-between time was rough.

**Craig Gillispie, Family Practice Associates of Lexington:** Overall, they have been doing well—some of them have been worried about COVID-19. There are a lot of unknowns with family members, and that unknown was stressful. We had two weeks where we were pausing on furloughs and not doing anything yet to try and do the right thing. Our employees wanted to know if they were going to be furloughed or not.

**Shewmaker:** Describe the immediate impact COVID-19 has had on your practice (revenue, patient volume, morale).

**Denny:** Our patient volume has dropped significantly, probably 55 percent at this point, and that came on quickly. We were quick to pull the trigger on furloughing staff and physicians. Our staff did not have time to be overly concerned about what was going to happen because we were quick to tell them what was happening. We had to furlough four physician positions. We furloughed all part-time staff and we reduced all full-time staff to 30 hours per week. We are also taking volunteers to go home early. We are trying to get everybody in at that 30-hour mark. We also closed one of our locations temporarily. We typically have nine physicians in the office daily at multiple locations. We are keeping five right now; however, we only have enough work for about two-and-a-half to three.

**Gillispie:** We are down probably 60 percent. We have tried to bridge the gap some with the telehealth, telephone visits and that brought on its own set of circumstances and stress. We basically had a little bit of telehealth going on, but not really video visits, so we rolled that out with two different methodologies in one day. That was a problem. We also laid off staff and laid off six providers completely, extending our nurse practitioners and PAs and then reduced many others. The impact has been felt, and it was quick. We had a two-week period where we knew we had to do something, and we just delayed if we could. We finally had to pull the trigger and make hard decisions.

Continued on page 8
New Vista awarded grant to expand mental health services

New Vista was awarded a $2 million grant to expand mental health and substance use treatment services in Fayette, Clark, Madison, Estill and Powell Counties. The Substance Abuse and Mental Health Services Administration awarded the grant and New Vista will provide care via the Certified Community Behavioral Health Center (CCBHC) model which is designed to provide coordinated care to vulnerable populations with a variety of healthcare needs.

With this new grant, New Vista’s services will integrate primary care with expanded mental health and substance use services in rural areas of central Kentucky. Plans include a new rural Assertive Community Treatment (ACT) team to assist those experiencing serious mental illness, enhanced crisis services and new outreach teams. New Vista also anticipates hiring additional staff, expanding clinical space and offering free transportation to clients in rural areas.

“The CCBHC grant will help us reach more of our fellow Kentuckians,” said CEO Paul Beatrice. “We serve 25,000 Kentuckians and their families each year, but still more is needed. This grant will allow us to expand services and improve access to mental health and substance use services. The ability to integrate primary care will be invaluable to our clients.”

As the Community Mental Health Center serving 17 counties in Central Kentucky, New Vista has provided behavioral health services since 1966. New Vista was one of five centers in Kentucky to receive a CCBHC grant. This is a two-year award from SAMHSA with two million dollars available in the first year with a potential for two million in the second year.

“We hope that this grant will demonstrate the value of the CCBHC model in our region,” said Don Rogers, Chief Clinical Officer. “We can make a huge impact in the lives of children, adults and families by providing more of their healthcare services under one roof.”

UPS helps fund potential coronavirus breakthrough

UPS is providing a $100,000 contribution to the University of Louisville to fund promising research into blocking the novel coronavirus from infecting human cells.

UofL is seeking to fast-track development of its discovery, including application to the Food and Drug Administration, for approval to begin treating patients already infected with COVID-19. The UPS gift, which will fund trials and test materials, will help enable that work.

The work being conducted at UofL involves a piece of synthetic DNA known as an “aptamer” and was originally developed as a cancer treatment by researcher Paula Bates with co-researchers John Trent and Don Miller. With the global pandemic of coronavirus and the COVID-19 disease it causes, Bates partnered with fellow researcher Kenneth Palmer, director of UofL’s Center for Predictive Medicine for Biodefense and Emerging Infectious Diseases, to apply the technology once again.

UK research team has work highlighted in AAAS’ Science Journal

A group of University of Kentucky professors and scientists efforts to identify possible direct therapeutic approaches to treat COVID-19 was published in the Perspectives section of the most recent issue of Science, a journal of the American Association for the Advancement of Science (AAAS).

“Repurposing of drugs for COVID-19,” is authored by Kip Guy, dean of UK College of Pharmacy; Robert DiPaola, dean of the UK College of Medicine; Frank Romanelli, professor in the UK College of Pharmacy; and Rebecca Dutch, professor in the UK College of Medicine.

The article details the approach to repurpose approved drugs that are currently developed for other uses.

“We can do this by reviewing existing detailed information on human pharmacology and toxicology,” said Guy. “That enables us to create clinical trials at a more rapid pace, which leads to faster regulatory review.”

Time is a critical component in the race for therapeutic development, especially as we continue to learn more about COVID-19 and how quickly it spreads compared to other strains of coronavirus. Supportive care is currently the only available treatment for COVID-19 patients -- most of whom recover within one to three weeks -- though some patients develop severe illness that can progress to acute respiratory distress syndrome (ARDS), which can be deadly.

To address the need for rapid discoveries in the treatment of COVID-19, the College of Medicine launched a transdisciplinary, cross-campus team with the Office of the Vice President for Research to develop activities in the laboratory and clinical trials: the COVID-19 Unified Research Experts (CURE) Alliance. This team, with leaders from UK’s Markey Cancer Center, College of Medicine and College of Pharmacy, worked together to launch a clinical trial for experimental therapies to treat patients in Kentucky who are infected with COVID-19.

The trial will investigate the effectiveness of azithromycin, ivermectin and camostat mesylate — drugs that could inhibit replication of SARS-CoV-2, the virus that causes the disease. The three will be tested either as stand-alone therapies or in combination with the antimalarial drug hydroxychloroquine.

The trial has a “pick-the-winner” design, which will allow UK researchers to rapidly understand what potential therapies appear to be effective, guiding patients to treatments that work and researchers to promising drugs that warrant further investigation.

“The process of trial development is typically done over time -- we are talking months, sometimes years, of work,” DiPaola said. “Fortunately, with combined expertise, leveraging the strength of our colleges, departments, and centers, we were able to create a UK-driven clinical trial in record time, making it available as an option for those patients in need.”

Several treatments for other diseases currently under development are being considered for this trial. For example, research on various antibodies used to treat acute lung injury and pulmonary arterial hypertension show promise in efforts to reduce viral entry in patients. Camostat mesylate, approved in Japan for the treatment of chronic pancreatitis and post-operative gastric reflux, has been shown to potentially block infection of COVID-19 virus. The UK trial will be among the very first in the world to include this novel treatment.

—Mallory Olson is with the University of Kentucky.

US WorldMeds lands big sale

Supernus Pharmaceuticals, a pharmaceutical company focused on developing and commercializing products for the treatment of central nervous system (CNS) diseases, will acquire the CNS portfolio of US WorldMeds, a biopharmaceutical company based in Louisville, Ky.

Supernus will pay $530 million for the four products, which represent the central nervous system portfolio of US WorldMeds. Supernus will pay $300 million upfront and up to $230 million pending certain regulatory and commercial milestones.

News in Brief continued on page 3
Norton Children’s Medical Associates adding prescriptive food pantry to more locations

Many families in Louisville and southern Indiana struggle to provide healthy meals for children. This is due to many factors, including cost, living in a “food desert” — an area where it is difficult to find affordable fresh food — and being unable to travel to a grocery. Food insecurity has negative effects for a child’s health and lifelong well-being. Norton Children’s Medical Associates, affiliated with the UofL School of Medicine, is expanding the prescriptive food pantry model to select Norton Children’s Medical Associates’ offices and Norton Community Medical Associates family practice offices.

Providers will screen patients for signs of hunger and food insecurity. Providers then can use the prescriptive pantry to provide families with nutritionally sound food as well as information on how to get the best nutrition with limited resources.

The pantries will be phased in at locations throughout May and June. The prescriptive pantries are made possible through grants supported by Norton Children’s Hospital Foundation and the Community Foundation of Louisville – One Louisville: COVID-19 Response Fund, and powered through Dare to Care Food Bank.

The Norton Children’s Medical Associates – Broadway location has had a prescriptive pantry since 2016. While performing an exam on a new patient in 2015, pediatrician Erin R. Frazier, MD, learned that the teen, along with her mom and sister, had just arrived in Louisville after escaping a bad situation. They were practically homeless and did not know where their next meal would come from.

“As I finished the checkup, the mom asked if we had any food vouchers,” Dr. Frazier said. “Unfortunately, we didn’t have anything readily available. We did end up helping the family, but we had to scramble.”

That started a change. Frazier and colleagues Becky Carothers, MD, and Nancee Spillman, APRN, teamed up with Dare to Care to open a prescriptive food pantry in their pediatric practice.

Having a food pantry at the practice allows pediatricians to identify families who may be experiencing hunger. As part of all wellness visits, patients are asked a couple of basic questions to determine if they have food insecurities.

“Our job is to treat the whole patient, and food and proper nutrition are a big part of physical and mental health,” Nancee said. “It turns out we see multiple patients and families each week who are facing this hardship.”

The food pantries are stocked with healthy options such as cereals low in sugar, brown rice, whole-wheat pasta, low-sodium pasta sauce, tuna, peanut butter, canned fruit in natural juices and canned vegetables with no added salt.

Coronavirus immunity initiative receives funding

Just as the Co-Immunity Project has begun its first phase to test Louisville healthcare workers for COVID-19 and antibodies from the disease that may signal a level of immunity, the initiative has received an infusion of funding that will enable it to build its infrastructure and scale up quickly.

The Jewish Heritage Fund for Excellence has provided a grant of $750,000 to the Co-Immunity Project — a collaboration between the University of Louisville Christina Lee Brown Envirome Institute and the Louisville Healthcare CEO Council with Louisville’s three major health systems, Baptist Health, Norton Healthcare and UofL Health.

The innovative project, announced in mid-April, identifies where the virus is found in each community, how strong it is, and how it is moving geographically.

Phase I focuses on Louisville’s healthcare community and began its comprehensive coronavirus and antibody testing for healthcare workers with the Louisville health systems in early May. All testing is conducted at the individual hospitals, and health system workers interested in participating should register in advance on the project website, co-immunityproject.com.

Liberate Medical receives FDA Emergency Use Authorization

Liberate Medical has received Federal Drug Administration (FDA) Emergency Use Authorization for its VentFree Respiratory Muscle Stimulator, intended to be used to reduce disuse atrophy of the abdominal wall muscles, which may reduce the number of days adult patients require mechanical ventilation, including those patients with COVID-19.

Reducing the time patients spend on mechanical ventilation may reduce the risks of prolonged mechanical ventilation, which include hospital acquired infections, deteriorated quality of life and death. Fewer days on ventilation may also increase the availability of ventilators during the COVID-19 pandemic.

Two pilot randomized controlled trials, recently completed in Europe and Australia, indicated that compared with placebo stimulation, the VentFree may reduce ventilation duration and ICU length of stay. Last year VentFree received FDA Breakthrough Device Designation and CE marking in the European Union.

St. Elizabeth Healthcare first hospital for Phase-2 COVID-19 clinical trial

St. Elizabeth Healthcare has been selected as the first site of the FDA-approved Phase-2 COVID-19 clinical trial studying the drug PUL-042 of Pulmocet, Inc., in partnership with CTI Clinical Trial and Consulting Services (CTI), a global full-service contract research organization.

The clinical trial will study the safety and efficacy of PUL-042, Pulmocet’s inhalation solution, for the prevention of disease progression in patients with early COVID-19 disease.

U.S. Food & Drug Administration (FDA) approval occurred last week and the trial is active and will be conducted at up to 10 clinical sites throughout the country, starting with St. Elizabeth in Northern Kentucky, the first hospital site in the world to be able to start dosing patients.

This clinical trial represents St. Elizabeth Healthcare’s strategic partnership with CTI. Both organizations hope to expand this relationship to include other diseases, including oncology, immunology and nephrology, given the quality facilities, as well as the dedicated medical and research teams at St. Elizabeth, which is located close to CTI’s headquarters. They hope to bring more local attention to clinical trials and the importance of research.
PEOPLE IN BRIEF

Cabinet for Health and Family Services
Eric Friedlander has been named secretary of the Kentucky Cabinet for Health and Family Services.

Norton Healthcare
Monulisa Tailor, MD, was appointed president of Greater Louisville Medical Society.

Stites & Harbison
Managing Intellectual Property magazine has named Joel Beres to the 2020 "IP Copyright Stars" and the "IP Trademark Stars" list.

Stites & Harbison
David Nagle, Jr., was named to the 2020 "IP Trademark Stars" list.

KNOW SOMEONE WHO IS ON THE MOVE?
Email sally@igemedia.com

FRIEDLANDER
Hosparus Health
Nathan Riley, MD, has joined the medical team and has extensive experience providing virtual palliative care.

RILEY
Kentucky Voices for Health
Cara Stewart was hired as new director of Policy Advocacy.

STEWART
Repiblic Bank & Trust
Logan Pichel, previously with Regions Bank in Birmingham, Alabama, was hired as the bank’s new president.

PICHEL
Stites & Harbison
Chair Robert Connolly was elected to The Nature Conservancy Board of Trustees of the Kentucky chapter.

CONNOLLY
University of Louisville
Alice Shade was hired as an entrepreneur in residence, or EIR, through the UofL Office of Research and Innovation.

SHADE

healthy vitals
ProAssurance has been monitoring risk and protecting healthcare industry professionals for more than 40 years, with key specialists on duty to diagnose complex risk exposures.

Work with a team that understands the importance of delivering flexible healthcare professional liability solutions.
Meet Chris Holcomb, assistant vice president of Behavioral Health at Baptist Health

FAST FACTS

FAMILY: Married with two daughters, one dog and two cats.
HOBBIES: Traveling and being outdoors.
FAVORITE BOOK: “Man’s Search for Meaning” by Victor Frankel. The book is inspirational and highlights the value of meaning and purpose in one’s life.
FAVORITE VACATION SPOT: Hawaii
COLLEGE ATTENDED, DEGREE: Bachelor of Social Work, Eastern Kentucky University; Master of Social Work, University of Louisville; and Master of Administration, Union College

“Since our launch in 2015, we started with five locations and have now expanded to approximately twenty spanning three regions in the state.”

At newvista we see the good ahead.

Medical News: First, congratulations on being named Community Star by the National Organization of State Offices of Rural Health! What does this recognition mean to you?

Chris Holcomb: It reflects a vision that my colleagues and I had to improve access points of care in our rural areas. I am so appreciative and humbled by the award. It is such a wonderful honor to be able to represent the state of Kentucky!

MN: You were instrumental in planning and development of a telehealth program that provides services to seven counties in southeast Kentucky. Tell us a little about the program.

CH: The program was initially started to offer behavioral health services to rural areas. The focus was on treating depression, anxiety and addiction. Since our launch in 2015, we started with five locations and have now expanded to approximately twenty spanning three regions in the state.

MN: Prior to COVID-19, were you seeing success in improving rural health access because of the program?

CH: Absolutely, customers rated the service very high based on surveys because it helped to preserve resources. In addition, our treatment compliance rates were approximately 30 percent better when compared to in-person visits.

MN: How do you look to as a mentor? What qualities do they have that have helped you in your career?

CH: I have been blessed to have had many positive influences in my life, but a former supervisor named Mike Phelps from Somerset is the first person I think of. He taught me the importance of teamwork and the value of placing people in the right position so they can best utilize their strengths.

MN: What advice would you give to someone interested in a career in your field?

CH: In whatever you do, be passionate and sincere.

MN: What is your most significant accomplishment?

CH: It is such a wonderful honor to be able to represent the state of Kentucky!”

SOMETIMES IT JUST HELPS TO TALK

You don’t have to go it alone. Speak with a licensed therapist and get mental health services from the comfort of your own home.

New Vista’s Telehealth Services offer meaningful therapy available from any smartphone, tablet or computer. One call to the 24-Hour Helpline gets you started. Call today 1.800.538.8000 or visit newvista.org for more information.

We accept Medicaid, Medicare and Private Insurance.

NEW VISTA IS A NONPROFIT ORGANIZATION PROUD TO SERVE KENTUCKY SINCE 1966.
MAKING AN IMPACT

Healthcare Fellows discuss community projects and goals.

By Sally McMahon

The Healthcare Fellows is a formal executive education program focused on the many business sectors in Louisville’s vast healthcare ecosystem.

Each year professionals are selected to participate in the 10-month program with sessions led by community leaders, academics, elected officials, organizational experts, researchers and entrepreneurs.

Fellows are tasked with completing a group project that has a community or economic impact. Current projects include quantifying the positive economic impact older adults have on the region’s economy; developing a marketing and communications plan to help raise awareness of the Alzheimer’s Association’s programs; and creating a Kentucky Nurse Resource Book that profiles Kentucky nurses and promotes existing areas of excellence. We spoke to the project leaders with highlights below.

### PROJECT: ALZHEIMER’S ASSOCIATION – MARKETING AND COMMUNICATIONS PLAN

**Project Leader:** Aleah Schutze, Of Counsel, Steptoe & Johnson

**Medical News:** What drew you to participate in the Healthcare Fellows program?

**Aleah Schutze:** The Healthcare Fellows program has a great reputation and I have been continuously impressed by the program alumni I have met over the years. I like that the Healthcare Fellows participate in a group project that has a tangible impact on the community.

**MN:** Describe the project you are involved with.

**AS:** I am working with the Alzheimer’s Association, Greater Kentucky and Southern Indiana Chapter. Specifically, my group is helping the Alzheimer’s Association create a marketing and communication strategy to raise awareness of its programs and services and to generally increase its reach within Kentucky and southern Indiana. Our group has identified four specific goals that we will focus on achieving over the next seven months.

**MN:** What attracted you to your project?

**AS:** My grandfather had Alzheimer’s disease and I saw first-hand the devastation that it can have on a person and a family. My youngest daughter has Down Syndrome and people with Down Syndrome are at increased risk of developing dementia or Alzheimer’s disease as they age. I am excited about the project because our group can have a real, positive impact on the Association with our work.

**MN:** What do you hope to achieve with the project?

**AS:** We have a talented, enthusiastic group of people working on this project. Our immediate goal is to help the Association sign up teams to participate in the Walk to End Alzheimer’s scheduled for October 10, 2020. We are also recruiting corporate teams and sponsors. We are planning to have our own Healthcare Fellows team and we are determined to be one of the top fundraising groups! We are also helping the Alzheimer’s Association strengthen its social media presence and are developing a social media campaign related to the walk in October. Additionally, we want to identify other educational and community events to promote the Alzheimer’s Association as a resource in the community.

### PROJECT: AARP – THE LONGEVITY ECONOMY OUTLOOK

**Project Leader:** Craig Long, Chief Growth Officer, SentryHealth

**Medical News:** What drew you to participate in the Healthcare Fellows program?

**Craig Long:** I have worked in the healthcare technology space throughout my career. While I have lived in Louisville for the past twenty years, I was covering other geographic areas around the U.S. I was able to attend my first Health Enterprises Network (HEN) event in 2018 and was impressed with the membership and content covered during the sessions. I joined a Louisville based
Impact on the community.

I like that the Healthcare Fellows project can determine if a subset of these individuals are not in the workforce. If the outcomes of our research project can be tied to the Longevity Economy, it would be a rewarding outcome.

**Project: Kentucky Nurses Association – Nursing Asset Resource**

Co-Leaders: Holly Symonds Clark, Deputy Director, Commercialization EPI-Center, UofL and Jill Gaines, Associate Director of Admissions and Community Partnership Development, Egan Leadership Center, Spalding University

**Medical News: What drew you to participate in the Healthcare Fellows program?**

**Jill Gaines:** The opportunity to be involved with the HEN Fellows was presented to me by our CFO, Rush Sherman from Spalding University, a HEN board member. I was excited and intrigued for the chance to network with folks from all areas of healthcare as well as promote healthcare education.

**Holly Symonds Clark:** The program was highly recommended to me by Dr. Mary Nan Mallory from UoL—a HEN board member who knew of my desire to learn more and network within the Louisville healthcare community.

**MN: Describe the project you are involved with.**

**CL:** I am a member of the over 50 workforce. We are examining the Longevity Economy and the impact those over 50 can make to the workforce. Our research project will help us to identify how Louisville and the surrounding area can be evaluated to determine the current environment and how we may be able to stimulate more discussion with local companies, particularly those in the healthcare space.

**MN: What attracted you to your project?**

**CL:** I am on Team AARP. We are examining the Longevity Economy and the impact those over 50 can make to the workforce. Our research project will help us to identify how Louisville and the surrounding area can be evaluated to determine the current environment and how we may be able to stimulate more discussion with local companies, particularly those in the healthcare space.

**MN: What do you hope to achieve with the project?**

**CL:** The goal is to provide a framework of data that can act as a catalyst to foster more dialogue with those over 50 individuals and local companies. While some in this age group are currently not working, they may have a desire to continue working and also the local companies that may not know how to best tap into this resource pool.

**MN: What do you hope to achieve with the project?**

**CL:** I am a member of the over 50 workforce. We are examining the Longevity Economy and the impact those over 50 can make to the workforce. Our research project will help us to identify how Louisville and the surrounding area can be evaluated to determine the current environment and how we may be able to stimulate more discussion with local companies, particularly those in the healthcare space.

**MN: Describe the project you are involved with.**

**JG and HSC:** Kentucky Nurses Association (KNA) is doing a leadership effort in showcasing the year of the nurse and highlighting their expertise. Team KNA is working on a campaign to attract nurses who wish to take part in a virtual directory that’s goal is to brand a new professional platform for nursing. Our "mug book" will consist of nurses all over the Commonwealth who have expertise within the nursing profession, from leadership roles to that of an educator. This project includes Team KNA creating communication plans, videos and other tactics to promote participation in the project and in the field of nursing in general.

**MN: What attracted you to your project?**

**JG:** My affinity towards the nursing profession and higher education. I have many family members, friends and students who I admire that work diligently to care for others. The road to becoming a nurse is far from easy. It takes lots of sacrifice, dedication and compassion to cross the finish line. My goal is making higher education and the road to becoming an RN/BSN/MSN/DNP streamlined.

**HSC:** I was immediately attracted to KNA’s overall goal of changing the old-fashioned image of nursing to the more modern reality of the importance, diversity and expertise of the profession. Nurses are front-line people of all types, and I felt that this project would help to highlight the nursing profession and attract more people to it.

**MN: What do you hope to achieve with the project?**

**JG and HSC:** For KNA, our team hopes to get the nursing expertise directory on a path where it will continue to grow each year and make connections for KNA. While building the directory, we hope to learn from our teammates and mentors and the folks in healthcare that we meet along the way.

The Health Enterprises Network (HEN) Healthcare Fellows cohort continued virtual sessions in May due to the COVID-19 crisis. The session included a presentation from Cara Silletto, President and Chief Retention Officer at Crescendo Strategies, exploring how to reduce unnecessary employee turnover.

Silletto discussed COVID-19 specific challenges, such as engaging new hires who are working from home and gaining trust from furloughed employees after they return to work. Silletto also discussed bridging generational gaps and making managers more effective in their roles.

Medical News asked Healthcare Fellows Dale Clemons and Marisa Tichenor a few questions about the program.

**Dale Clemons, Founder, myHealthyUS and HealthGenie Holdings**

**Why did you want to be a Healthcare Fellow?** To engage with other accomplished leaders in the healthcare field and broaden my view of the industry as it evolves.

**Describe one takeaway from Cara Silletto’s session.** I was impacted by the many examples of how old and outdated management habits continue to plague and burden the industry. Some of the simple insights Cara offered can be big game changers.

**Marisa Tichenor, Director of Client Management, Humana**

**Why did you want to be a Healthcare Fellow?** I realized for the last two years I had been very company focused and my knowledge of the local healthcare landscape was lagging.

**Describe one takeaway from Cara Silletto’s session.** To retain top performers, we need to be ready for the changes in the workplace resulting from the COVID-19 pandemic including offering permanent work-at-home flexibility, managing remote teams effectively and finding better ways to track and measure productivity. We will also see some of the current business practices and hierarchical structures change as millennials enter the workforce in huge numbers. The millennial mindset is different than the GenX’s and Baby Boomer’s mindset, and this will influence how we conduct business within our company and with our customers.
Practice managers discuss impact of COVID-19 pandemic

**Schnettler:** We are down close to 70 to 75 percent currently. We did not do telehealth in the past. We talked about it, but we were so busy with the volume coming in, there was not time to schedule a provider to do telehealth. Almost immediately, we laid off our part-time staff and we started offering telehealth. It was challenging trying to implement telehealth immediately because everybody was hitting these telehealth companies at the same time. They were like, ‘I’ll get back to you in 30 days.’ We did not have 30 days. We got it running in one and it seems to be going okay.

**Shewmaker:** What short-term measures has the practice made to help offset the operational and financial stresses of this pandemic? Any use of the Paycheck Protection Program (PPP) loan from the Small Business Association or accelerated Medicare payment?

**Denny:** We applied for the Economic Injury Disaster Loan (EIDL) immediately but have not heard back. I know some folks are starting to get funds, so we are hopeful. We did that early. We applied for the $10,000 advance through the EIDL, but we have not received that either. We did apply for the PPP loan; that one is the most promising and would be the most helpful.

Our main goal is to try and keep our full-time employees working at least 30 hours per week. We know they are struggling to pay mortgages and buy groceries.”

— Martina Denny, Pediatric & Adolescent Associates

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— Martina Denny, Pediatric & Adolescent Associates

When it comes to healthcare law, does your law firm even have a pulse?
We have tried to bridge the gap some with the telehealth, telephone visits and that brought on its own set of circumstances and stress.

— Craig Gillispie, Family Practice Associates of Lexington

for us. We are waiting for these funds to come through. We have already done the leg work. Our owners are opting to go without a paycheck for the month of April, and possibly May, hoping that some of these funds will come through for us. Our main goal is to try and keep our full-time employees working at least 30 hours per week. We know they are struggling to pay mortgages and buy groceries.

Gillispie: We applied for the PPP loan. We did get the accelerated Medicare payments and the HHS CARES (Coronavirus Aid, Relief, and Economic Security Act) stimulus. I am concerned about the accelerated Medicare payments. It is nice to have them upfront, but that means we must plan for fourth quarter. You will not have anything, Medicare-wise, in the fourth quarter. The PPP will be helpful as soon as that comes through.

It was challenging trying to implement telehealth immediately because everybody was hitting these telehealth companies at the same time.”

— Mollie Schnettler, Kentucky Diabetes Endocrinology Center

Schnettler: We have applied for everything, too. I have not received any money yet. I have the exact same concerns about paying back the Medicare advances, 210 days after your 120-day period and then they will begin recoupment. I am not sure if there will be enough time for Medicare to recoup since everything is not just going to go back to normal all at once. We will have to write a check to Medicare—and that is a concern. We have a decent volume of Medicare—maybe 30 percent of our practice. That is a big thing to take a hit on in the fourth quarter. I hope we are back to full volume quickly, so we do not have a deficit.

Shewmaker: To the extent you could have prepared for this, what do you wish would have been in place to help soften the impact?

Denny: I do not know that there was a lot we could have done to prepare financially. Obviously, if we could have seen this a year ago, we could have saved money—had a much larger savings account for 2020. I wish we had a larger inventory of PPE. None of us have ever lived through something like this before so it would not have been on the radar. We are pediatricians, so a lot of what we see are fevers and coughs, so it is hard to tell if this population has been affected as significantly as the adult population. We could be seeing kids that have it and not realize it. Then you send your staff out there without PPE. I wish we had N95 masks and I plan to have those in the future.

Gillispie: I echo the same thing. We are doing testing. In the first couple of weeks, they were not available. With the PPE, the issue has been a real one, along with some cleaning supplies. We are now even starting to run out of wipes. The gloves—we are okay. We do not have a lot of the disposable lab-jacket gowns for our staff who are swabbing, so we have assigned people to various tasks. One person parks in a designated exam room and one person swabs, minimizing the exposure to the staff and minimizing our use of the PPE.

Schnettler: We do not really have patients in the office now—they would have to be in bad shape to warrant a face-to-face encounter. The PPE has not been as big a struggle with us. We had some and that was enough so we could get by. Acclimating to patient need was just a challenge for us in trying to meet patient expectations because no one knew what was going on. We could not tell them what to expect with the virus and the length of quarantine. I also do not think there was anything any of us could have done because no one saw it coming. The information we all got, and continued to get, is confusing and constantly changing. People are asking a lot of questions and we do not have the answers for them.

Create more moments.

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HOSPARUS HEALTH®
Vital support for rural hospitals

Kentucky Office of Rural Health to administer nearly $4 million in federal funds.

By Sally McMahon

The Kentucky Office of Rural Health (KORH) received nearly $4 million from the Health Resources and Services Administration’s Federal Office of Rural Health Policy to support 46 of the commonwealth’s rural hospitals as they work to prevent, prepare for and respond to the COVID-19 public health emergency.

The funds, which are part of the federal Coronavirus Aid, Relief, and Economic Security (CARES) Act approved late last month, will provide one-time support to hospitals to help cover expenses associated with increased demands for COVID-19 related testing, clinical services and equipment. Funds can also be used to address the financial and workforce challenges related to the public health emergency.

“We are thankful to see this kind of support from the federal government during these challenging times,” said KORH Director Ernie Scott. “There’s no doubt about it: The COVID-19 pandemic has caused a widespread disruption to our health system. While preparing for and fighting the coronavirus, our hospitals have had to discontinue outpatient care and elective procedures. As a result of that lost revenue, many hospitals have been faced with the reality of having to temporarily furlough staff. Through it all, though, these hospitals have remained open all day, every day. And, their staff has continued to place the medical needs of their community members above all else.”

The Kentucky Office of Rural Health (KORH), overseen the administration of federal funds the facilities. Established in 1991, KORH is a federal-state partnership authorized by federal legislation. The UK Center of Excellence in Rural Health, located in Hazard, serves as the federally designated Kentucky Office of Rural Health. The mission of the KORH is to support the health and well-being of Kentuckians by promoting access to rural health services.

The program provides a framework for linking small rural communities with local, state and federal resources while working toward long-term solutions to rural health issues. The KORH assists clinicians, administrators and consumers in finding ways to improve communications, finances and access to quality healthcare while ensuring that funding agencies and policymakers are made aware of the needs of rural communities.

Distributing Funds

“Each hospital will receive an equal amount of funds and has received a brief work plan to complete and return to our office,” said Michael McGill, Rural Project Manager at the Kentucky Office of Rural Health. “The work plan contains a menu of eligible activities and investments and hospital leadership is asked to indicate and briefly describe which activities and investments their facility intends to engage in to support COVID-19 related challenges.”

Fund Use

These funds are provided to hospitals to support them as they work to prevent, prepare for and respond to the coronavirus pandemic. Funds can be used for ensuring hospitals are safe for staff and patients, detecting, preventing, diagnosing and treating COVID-19 and maintaining hospital operations.

“Hospitals can purchase supplies that assist with respiratory hygiene and cough etiquette (like hand sanitizer) and personal protective equipment for hospital personnel or known-infected patients,” McGill explained. “Hospitals can also use funds to support COVID-19 testing and laboratory costs—including purchasing COVID-19 tests as well as supporting an increased capacity for patient triage, testing and laboratory services or support transitions to increase access to care through telehealth, hiring and contracting with new providers to support increased service demand due to COVID-19.”
Finding your next great hire

Apprenticeship program provides career pathway opportunities in health sciences sector.

By Sally McMahon

Investments in the rural workforce can lead to improvements in the economic stability of communities. Investing in educating and training the rural healthcare workforce is a particularly important strategy.

One such investment is the Tech Ready Apprentices for Careers in Kentucky (TRACK) youth pre-apprenticeship program. This program is a partnership between the Kentucky Department of Education’s (KDE) Office of Career and Technical Education and the Kentucky Labor Cabinet to provide secondary students with career pathway opportunities into Registered Apprenticeship programs.

TRACK is a business and industry driven approach available statewide designed to create a pipeline for students to enter post-secondary apprenticeship training while gaining credit for courses taken and on-the-job hours worked in high school. Employers can tailor the program for their specific needs and select the courses and students for their apprenticeship program. The apprenticeship program is available in 16 career clusters, including the health science sector.

We spoke to Mary Taylor with the Office of Career and Technical Education at KDE to learn more about the program and the importance of filling the pipeline in rural areas. Taylor said, “Traditionally, apprenticeships have been utilized more in the skilled trade areas and for people out of high school, but we are seeing an increased interest from employers in more non-traditional occupations and a desire to start the pipeline at a younger age.”

Not every occupation requires a degree, but most require a learned skill set. “A good start on these skills can be acquired through high school Career and Technical Education (formerly known as vocational) programs and on-the-job experience,” Taylor said. “Employers utilizing the TRACK program have said that these students come to them with a great foundation learned in the classrooms and labs and an interest in continuing in the occupation, but without any preconceived notions enabling apprentices to learn their processes from the beginning.”

Results in Rural Communities

This model is working well in rural communities around the commonwealth. Rockcastle Area Technology Center and Rockcastle Regional Hospital and Respiratory Care Center in Mount Vernon, Kentucky developed Kentucky’s first TRACK Youth Apprenticeship in Certified Nursing Assistant (CNA).

Rockcastle Regional Chief Nursing Officer Tammy Brock, RN, Julie Mullins, RN, in conjunction with Rockcastle Area Technical Center (ATC) Health Science instructor Rhonda Childress, worked to create the opportunity for qualified candidates. The CNA apprenticeship program starts when Rockcastle County High School students take the health science elective courses. Those who perform at a high level and express an interest in the nursing field will go through a selection process with Rockcastle Regional to determine the final TRACK Certified Nursing Assistant candidates. Those selected work for Rockcastle Regional during the summer.

As seniors, students will continue to work for Rockcastle Regional, receive instruction at Rockcastle ATC and work to obtain their CNA certification. Students obtain on-the-job training in a multitude of competencies while at the hospital.

The culmination of this program is a Journeyperson Certification and a continued position at the hospital after graduating. “In today’s healthcare environment, nursing shortages are being seen nationwide,” said Brock. “The TRACK program is an excellent opportunity for our organization to identify talented, intelligent, and highly-driven young people who are interested in the nursing field and help them get on a fast track to jump start their career. It allows students to connect with a potential future employer, as well as gain hands-on experience early on so they can be confident they are choosing the best career path for them.”

Apprenticeships During COVID-19

Taylor said that the COVID-19 crisis has altered the format of the programs. “Since the future of the economy is uncertain at this point and students are unsure about their post-secondary plans due to changes in financial situations, apprenticeships could be a very attractive option to both employers and students alike,” Taylor said. “Employers can use this model to grow employees as needed and tap into the ready-made and sustainable pipeline of students taking secondary Career and Technical Education courses. Students will be attracted to this earn as you learn approach where they can pursue a nationally recognized credential.”

Growing Talent

The US Department of Labor has more than 1,000 occupations registered with its Office of Apprenticeship. Businesses are encouraged to register their modern apprenticeship programs to ensure program components and competencies meet national standards for quality and rigor, and apprentice’s skills are well honed and relevant.

“There are so many opportunities that can take place in healthcare facilities of all sizes in both patient care and administration/operations,” Taylor said. “While several occupations in patient care require a degree, students can get their start with an entry level position and work their way up earning stackable credentials and gain credit for prior learning through their hands-on experience.”

Employer Benefits

- Employer-tailored training
- Employer selects students and courses for program
- Employer selects post-secondary requirements
- Employer cultivates a loyal employee
- Works with any number of trainees
- “Grow Your Own” approach to skilled worker shortage
- Can create multiple pipelines by working with several different schools in the region
- Saves time and money

Information about the apprenticeship program can be found at https://educationcabinet.ky.gov/initiatives/.
Healthcare gaps

Distance learning addresses lack of primary healthcare providers in rural parts of state.

By James Kelsey

During the COVID-19 pandemic, limitations have been a common storyline. Healthcare professionals have dealt with limited supplies of personal protective equipment, limited space in which to house and care for patients, insufficient testing supplies and limited workforce.

Limitations in healthcare are not new to rural southeastern Kentucky, where most counties are designated as medically underserved areas (MUAs). Despite its beauty, the region’s remote locations and rural clinics and hospitals struggle to attract primary healthcare providers from larger cities and communities.

The problem is magnified by a lack of specialized healthcare providers in these rural and underserved areas. A 2018 study published in the American Journal of Preventative Medicine found that 65 percent of non-metropolitan counties in the United States lacked a psychiatrist.

Kevin Scalf is a psychiatric-mental health nurse practitioner at Hazard Appalachian Regional Healthcare Psychiatric Center in Hazard, Kentucky. Originally from nearby Manchester, Kentucky, Scalf is also a Regional Clinical Faculty member at Frontier Nursing University (FNU). He has been a Psychiatric and Mental Health Nurse Practitioner (PMHNP) since 2011 and a registered nurse for 24 years.

“I serve a population of adults that struggle with psychiatric illness in rural southeastern Kentucky,” Scalf said. “The residents of this region have limited support systems and significant economic challenges while living with persistent mental illness. As a result of these limited support systems and economic struggles, they often find it challenging to make healthy decisions and follow up with their primary care providers on a routine basis.

The healthcare gaps include a shortage of mental health providers, which is especially true for patients suffering from conditions such as autism spectrum disorder, intellectual disabilities and substance abuse.”

These issues existed before the pandemic. Now, for many in the region, COVID-19 has added another component to their mental health struggles.

“COVID-19 has increased isolation among our population. Isolation is a risk factor for mental health destabilization,” Scalf said, noting that many patients in the area lack the mechanisms to attend virtual appointments. “Patients who suffer from anxiety and fear related to COVID-19 can sometimes be afraid to go to their primary care provider, resulting in decreased follow-up visits. This can be a significant risk factor for acute exacerbations of mental illness.”

Distance Learning Model

Scalf’s presence as a mental health provider in the area is an example of the impact that Frontier Nursing University’s (FNU) unique distance-learning model can have within rural and underserved populations.

Founded in Hyden, Kentucky by Mary Breckinridge as the Frontier Graduate School of Midwifery in 1939, FNU offered the first distance learning nurse-midwifery program in 1989. Because FNU’s students are already nurses, the distance-learning model allows them to continue to work while they pursue their advanced practice degrees.

In addition to maintaining his practice and teaching students, Scalf is also attending FNU as a student on track to earn his Doctorate of Nursing Practice this spring. With an enrollment of more than 2,300 students representing all 50 states, FNU students like Scalf are working and serving their communities while they continue their studies.

“We work every day to address healthcare shortages, particularly in rural and underserved populations,” said FNU president Dr. Susan Stone. “Our unique distance-learning model allows and, in fact, encourages students to continue their education in the same communities where they practice. Our students are not pulled to larger cities to be able to attend classes. They can remain in their local communities and continue to work and serve there while attending classes on a flexible schedule.”

More than 180 Frontier Nursing University graduates practice in southeastern Kentucky, representing a large percentage of the area’s healthcare providers. For example, in many of these counties, 50 percent or more of the Family Nurse Practitioners are FNU graduates.

“FNU has given me additional education, tools and skills that I can take into the world and use to bring about meaningful change in our region,” Scalf said. “As healthcare becomes more complex, it is important to have the ability to translate evidence-based strategies into individualized practice interventions.”

FNU’s model has also allowed the university to adjust to COVID-19 with no interruptions in classes. The university has remained open throughout, continuing to enroll new students while keeping current students on track to complete their degrees. Students have been allowed to take an academic hiatus as needed, and FNU has an emergency student fund to assist students with financial hardships brought on by the pandemic or other emergencies.

“FNU has been helpful in staying current on the latest COVID-19 updates,” Scalf said. “FNU has offered faculty, staff and student support sessions that have helped us draw strength from one another. These sessions not only demonstrate FNU’s culture of caring but also help us realize that social distancing does not always mean social isolation.”

— James Kelsey is with Frontier Nursing University in Versailles, Kentucky.
Substance abuse in rural America

Seven Counties Services awarded grant to expand treatment in Bullitt County and beyond.

By Shannon White

Seven Counties Services Inc. (SCS) has just been awarded a $4 million Certified Community Behavioral Health Clinic (CCBHC) Expansion Grant from the Substance Abuse and Mental Health Services Administration (SAMHSA).

CCBHCs are a federally defined type of behavioral health clinic designed to expand access and provide a comprehensive range of evidence-based mental health and substance use disorder services to vulnerable individuals, including individuals with substance use disorders, adults with serious mental illness, and children/adolescents with severe emotional disturbance.

SCS was awarded an initial CCBHC grant in 2018 to operationalize this clinic, and individuals are already experiencing the positive impact and outcomes that access to care provides.

**Success Story**

Jennie Hulette, project director, shared a story of a man who sought treatment due to a substance use disorder and a Child Protective Services case, which spurred him to want to change his life. “He was able to meet with a Peer Support Specialist, a new role that our CCBHC grant supports, which is someone with the lived experience of recovery to provide support to others experiencing similar challenges. Our Peer Support Specialist encouraged and inspired hope in him and a Care Coordinator (another grant-funded position) assisted him in accessing detox services at our Addiction Recovery Center.”

Once there, the client started a journey of being substance free. “He returned to the CCBHC site to participate in Intensive Outpatient Program (IOP) services. Transportation had been a barrier for him in the past, but with CCBHC grant funded van services, the client was able to come consistently, complete the program and step down to weekly continuing care groups,” Hulette said. “He worked with his Peer Support Specialist to get connected to 12-Step meetings for natural supports. He continues to be substance free and this is his longest stretch of sobriety.”

**Bullitt and Beyond**

Although the CCBHC site is in Bullitt County, no individual will be turned away due to where they live or inability to pay. SCS covers a catchment area of Bullitt, Henry, Jefferson, Oldham, Shelby, Spencer and Trimble counties, and the need for services is prevalent.

Within this region, 22 percent of adults experience mental illness, 14 percent of children ages 2-17 have an emotional/behavioral/developmental condition(s), and eight percent of adults and four percent of adolescents ages 12-17 have a substance use disorder.

Without coordinated, whole person care options, these individuals are vulnerable to poor outcomes and at risk for higher rates of mortality, suicide, substance abuse, hospitalization, incarceration and homelessness.

Without coordinated, whole person care options, these individuals are vulnerable to poor outcomes and at risk for higher rates of mortality, suicide, substance abuse, hospitalization, incarceration and homelessness. “Without CCBHC funding, we have the opportunity to impact lives like never before and continue to serve clients that need us the most.”

Contact sally@igemedia.com for more information.
Delivering healthcare through smart glasses

The COVID-19 pandemic has led to the expansion of telemedicine, and as part of that expansion, faculty at the University of Louisville are piloting new smart glasses for advanced delivery of healthcare.

Long-term care (LTC) facilities and emergency departments represent two of the areas with greatest need for the glasses for direct physician care during the pandemic. The UofL Trager Institute, emergency medicine and psychiatry are part of a feasibility study to test the Vuzix M400 smart glasses.

An advanced practice nurse practitioner or other health care professional working at a LTC facility will put on the web-connected glasses and dial-in with an attending physician through the Zoom conference platform. A camera and microphone are attached to the glasses, and the technology has the potential to display and obtain information for the physician to access remotely. The physician can see and interact directly with the LTC resident, providing immediate consultation and evaluation.

The glasses allow for ease of mobility and hands-free interaction for the on-site provider, an advantage over current standard telehealth delivery which requires computers and monitors to be transported from bed-to-bed on large carts. Additionally, data can be input into medical records hands-free, and can be controlled by voice-commands.

Smart glasses will support healthcare workers at five LTC facilities and one emergency department in Kentucky. UofL researchers will conduct a brief feasibility study related to the use of these six pairs of smart glasses. If the data is promising, the study will be extended. Once the pandemic has subsided, researchers hope to investigate the utility of usage for medical education.

Humana Foundation commits $50M to coronavirus relief

The Humana Foundation, philanthropic arm of Humana Inc. will deploy $50 million in immediate short-term and long-term relief and partner with national and community service organizations to help those disproportionately impacted by the COVID-19 health crisis. The commitment, the largest in the Foundation’s 38-year history, will be split between organizations that support essential workers, food security, behavioral health and community-based organizations (CBO).

The Humana Foundation will distribute $16 million of the $50 million commitment to the immediate short-term response efforts of service organizations on the frontlines of the COVID-19 health crisis. The Humana Foundation will distribute $34 million of the $50 million commitment to the health of the communities it serves.

Greater Louisville Inc., Louisville Forward recognized

Greater Louisville Inc. (GLI), the 15-county regional chamber of commerce, and Louisville Forward, the city’s economic and community development organization, have been jointly recognized as a Top U.S. Economic Development Group for 2019 by Site Selection magazine.

This is the sixth straight year Louisville Forward has received the Mac Conway Award for its economic development efforts and the fourth year in a row that Louisville Forward and GLI have shared the award for their regional efforts.

Louisville Forward, led by Mary Ellen Wiederwohl and Rebecca Fleischaker, worked with multiple organizations to launch a new loan program for small businesses and provided regulatory relief.

GLI, in partnership with Louisville Forward developed a Crisis Support Hub, which also includes a PPE supplier network, and partnered with workforce agencies on both sides of the river to support displaced workers.

Chambers USA honors Stites & Harbison attorneys

Chambers USA selected 19 Stites & Harbison attorneys in Kentucky and Tennessee for inclusion in their 2020 guide. The Chambers USA guide ranks the top law firms and leading attorneys in the United States. The list is developed based on client and peer interviews discussing the skills of individual attorneys.

Stites & Harbison is ranked Band 1 in Kentucky for Litigation: General Commercial; Band 2 in Environment, Natural Resources & Utilities: Environment, Intellectual Property and Real Estate; and Band 3 in Corporate/M&A.

The following attorneys are leaders in their field for Kentucky:

- Corporate/Mergers & Acquisitions: W. Thomas Halbleib, Jr., and James Seiffert
- Environment, Natural Resources & Utilities-Environment: William Gorton III and W. Patrick Stallard
- Intellectual Property: Joel Beres, Mandy Wilson Decker, Jeffrey Haeberlin, David Nagle, Jr., and Terry Wright
- Labor & Employment: Shannon Annette Hamilton
- Litigation-General Commercial: Philip Collier, Robert Connolly and Charles Croman IV
- Litigation-Tort & Insurance Defense: Robert Connolly
- Real Estate: Lawrence Droge, T. Gregory Ehrhard, David Saffer
- Real Estate-Zoning/Land Use: T. Gregory Ehrhard

Hardin Memorial Health to join Baptist Health

The sale of Hardin Memorial Health (HMH) to Baptist Health has been accelerated and will now be finalized by Sept. 1, 2020. The prior plan called for closing on or before Dec. 1, 2020.

Under the terms of the Asset Purchase Agreement (APA), Baptist Health will acquire all assets of HMH and, in return, will commit $235 million over 10 years to HMH in operating and capital investments.

Specific terms call for Baptist Health to invest a minimum of $150 million in the first five years to build new facilities, recruit more physicians, upgrade HMH’s information technology and equipment and strengthen HMH’s position and reputation as a regional healthcare center. After the first five-year period, Baptist Health will commit an additional $85 million in capital investments to HMH.

Baptist Health will offer employment to all HMH non-contracted employees at their existing rates of compensation. Dennis Johnson will be retained as president of the hospital, as will other members of the HMH senior leadership team.

HMH, which will become the ninth hospital in the Baptist Health system, will be renamed Baptist Health Hardin, in keeping with Baptist Health’s tradition of naming its hospitals after the geographic area.
GLI announces 2020 legislative outcomes, MVPs

GLI’s 2020 Legislative Outcomes report details the major wins for businesses from this year’s sessions in Frankfort and Indianapolis and highlights the region’s Most Valuable Policymakers.

“The 2020 sessions presented us with unprecedented and unexpected challenges in advocating for the business community’s needs. However, despite the onset of a global pandemic, our regional business community succeeded in passing several key pieces of legislation that will be critical to greater Louisville’s economic recovery,” said GLI President and CEO Sarah Davasher-Wisdom.

address the substance use disorder crisis and support employee retention.

University of Louisville
A major win for greater Louisville, HB 99 (Speaker David Osborne) protects jobs, ensures access to quality healthcare at a critical time, and supports the University of Louisville by outlining the terms of a state loan to facilitate the University’s purchase of Jewish Hospital and other assets. This legislation secures UofL’s R1 status and protects nearly 2,000 jobs and more than $300 million in annual direct economic activity in our region.

Tobacco 21
Kentucky and Indiana both took important steps to improve the health of our regional workforce by passing legislation to align state law with new federal law raising the minimum purchase age for tobacco and other nicotine products to 21: SB 56 in Kentucky (Senator Ralph Alvarado) and SB 1 in Indiana (Senator Ed Charbonneau). Wins like these will help boost worker productivity, reduce strains on our health care system, and reduce healthcare costs for employers. Smoking costs employers about $6,000 for each employee who smokes. Raising the tobacco age to 21 is expected to result in a 12 percent reduction in smoking prevalence.

Covid-19 Relief
With strong support from GLI, lawmakers passed SB 150 (Sen. Ralph Alvarado and Rep. Bart Rowland), which provided much-needed relief from COVID-19 for businesses and workers throughout Kentucky. The bill relaxed administrative regulations, fees, and other restrictions on businesses, delayed the state tax filing deadline, and created more flexibility for the Governor to respond to the crisis.

Legal Liability Reform
Legal liability reform remains a priority for future legislative sessions. Kentucky’s lawsuit climate continues to harm economic growth and drive up cost for businesses and consumers in the Commonwealth. Lawmakers proposed several bills that would have led to major improvements to Kentucky’s legal liability environment: SB 51 (Sen. Ralph Alvarado), SB 100 (Sen. Stephen Meredith), SB 178 (Sen. Ralph Alvarado), and HB 481 (Rep. Kim Moser).

Key legislative measures championed by GLI in 2020 include reforms to Kentucky’s expungement laws, legislation to address substance use disorder in the workplace, COVID-19 relief, funding for public transportation, and support for Kentucky’s Bourbon industry. Highlights include:

Recovery through Employment
GLI successfully advocated for an important new initiative to support employers seeking to assist workers struggling with substance use disorders. Lawmakers passed SB 191 (Sen. Julie Raque Adams), which included language from SB 173 (Sen. Matt Castlen), to create a legal and regulatory framework that employers may use as a guide to get their employees into treatment and keep them as part of their staff. This legislation will help

A few key GLI bills that did not pass in the 2020 session include:

HB 193 (Rep. James Tipton) and SB 95 (Sen. Chris McDaniel) would have streamlined sales tax exemption rules for contractors and nonprofits.

SB 98 (Sen. John Schickel) would have lowered healthcare costs for employers by removing smokers as a protected class.

GLI also recognized a select group of lawmakers who went above and beyond in support of the business community’s priorities. GLI’s 2020 Most Valuable Policymakers voted in favor of GLI’s legislative priorities 90 percent of the time or more during this year’s session. This distinction is given exclusively to lawmakers from the greater Louisville region.

The full Legislative Outcomes report can be found at greaterlouisville.com.
The Louisville Healthcare CEO Council (LHCC) announced a strategic partnership with Aging2.0, the largest global innovation platform focused on aging. Highlighting their shared mission to accelerate innovation and recognizing Louisville as the home to titans of the healthcare aging innovation industry, Aging2.0 is moving its international headquarters into LHCC’s new Corporate Innovation Center in Louisville, Kentucky.

Considering the global pandemic, LHCC and Aging2.0 are launching their partnership by co-hosting a Global Innovation Search for innovations that address social isolation and loneliness for older adults.

“This partnership is a natural one,” said LHCC Board Chair and Kindred Healthcare CEO Benjamin Breier. “Aging2.0 and LHCC are both organizations committed to finding systems solutions.” “By connecting the LHCC corporate healthcare titans and their business challenges to an active network of innovators dedicated to the aging innovation space, we are changing the healthcare conversation about aging from being about challenges to being about opportunities,” added Tammy York Day, LHCC President and CEO.

The Global Innovation Search, which kicked off in late May, provides an opportunity for innovators around the world to showcase their product or service and compete for international exposure. Aging2.0 and LHCC are searching for innovations that help keep older adults connected to their communities, families, healthcare providers and vital information.

Innovators interested in participating in the Global Innovation Search can learn more about the program and submit their application at aging2.com/gis. The deadline to apply is June 15.

“Please prepare your application early to ensure you are ready for the live streaming event on June 11,” said Dr. David McLoughlin, vice president of Adaptive Biotechnologies and XLN EAC Chair.

The winning proposals include:
- “R-FIX (Rib-FIXation System) for severe progressive spinal deformity” by Dr. Yao from Clemson University (South Carolina)
- “Development of an immune-based non-invasive diagnostic assay for endometriosis” by Dr. Flores from Ponce Health Sciences University (Puerto Rico)
- “Multifunctional Chitosan-Genipin Hydrogel Biomaterials for Wound Healing Applications” by Dr. Calderera-Moore from Louisiana Tech University (Louisiana)
- “Temporally-controlled site-specific delivery of endocrine FGF1 to prevent heart failure” by Dr. Sakon from University of Arkansas (Arkansas)
- “Non-invasive assessment of coronary stenosis in real-time” by Dr. Berson from University of Louisville (Kentucky)
- “Hemocompatible antimicrobial peptides for drug-resistant bacteria” by Dr. Wimley from Tulane University (Louisiana)
- “Development of multi-gene assays for diagnostics and prognostics of breast, ovarian and lung cancer utilizing FFPE patient samples” by Dr. Guo from WVU (West Virginia)

I2P is funded through an NIH Administrative Supplement that has been provided to augment the original grant to create the XLERator Network, one of four Institutional Development Award (IDEA) State region “hubs” supported by the Small Business Technology Transfer (STTR) program.

The STTR program funds research and development partnerships between small businesses and academic institutions. This grant is managed by the National Institutes of General Medical Sciences (NIGMS) and is expected to total more than $3.7M for XLH and the project’s 24 partnered academic institutions through 2021.

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XLerateHealth, Southeast XLerator Network announce NIH funding

XLerateHealth (XLH), its affiliate, the Southeast XLerator Network (XLN) and XLN Academic Lead, the University of Kentucky, announced that the National Institutes of Health (NIH) has approved XLN’s External Advisory Committee’s (EAC) recommendation to fund the continued development of seven biomedical innovations that represent various areas of technology, from medical devices to diagnostics and therapeutics.

XLerateHealth

The funding is part of the XLerator Network’s “Ideas to Products” (I2P) program that supports researchers with competitive proof-of-concept (POC) funding that will help accelerate healthcare technologies for commercialization across the Southeast IDEA States.

I2P is not a traditional academic grant program; it is milestones-based and project-focused with checkpoints on research along the way.

XLN’s EAC members performed a rigorous review of 55 proposals, scoring them based on criteria including description of unmet need, market size, competitive landscape, IP status, regulatory and reimbursement considerations, development milestones, and personnel. The best-scored applications were selected for funding recommendations, with a total amount of $200,000 available for this round of funding.

“Our EAC members were delighted to see the high quality of the proposals we were asked to review, and wished there were more funds to provide them, as we had to pick the very best from those that made it to the final group,” said Dr. David McLoughlin, vice president of Adaptive Biotechnologies and XLN EAC Chair.

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LHCC, Aging2.0 partner to accelerate innovation in aging

By Julie Hefflin

More precise data has informed a second modeling study produced by the University of Louisville School of Public Health and Information Sciences (SPHIS) and the Louisville Metro Department of Public Health & Wellness (LMPHW).

The updated projections show both a slight decrease in death rates and a significant decrease in hospitalizations by the end of August, compared to the first report completed just a few weeks ago.

“These projections assume “current social distancing and strong containment measures are continued,” said Seyed Karimi, PhD, an assistant professor in the Department of Health Management and System Sciences at the UofL School of Public Health and Information Sciences, a co-author of the report.

The study includes factors such as hospitalization rate, length of time from disease onset to hospitalization and average length of stay in the hospital – just five days in Louisville.

Karimi, also a health economist with LMPHW, said, “Hospitalizations appear to have plateaued and are hopefully on a trend downward, but again, only if social distancing and stronger containment measures continue at least at the current rate.”

The most recent report benefits from an additional 20 days of data, and updated projections narrowed two potential scenarios in the first report to just one, pinpointing April 7 as the date when public and private social distancing policies became most effective.

Other report authors include Natalie DuPre, Bert Little, PhD, Paul McKinney, MD, Naiya Patel, all the SPHIS, along with Sarah Moyer, MD, director of LMPHW and the city’s chief health strategist.

Researchers will continue to update models on COVID-19 death and hospitalizations as new data becomes available. All reports and projections are available on the SPHIS web site.

UofL report shows COVID-19 hospitalizations plateau in Louisville

By Julie Hefflin

The Louisville Healthcare CEO Council (LHCC) announced a strategic partnership with Aging2.0, the largest global innovation platform focused on aging. Highlighting their shared mission to accelerate innovation and recognizing Louisville as the home to titans of the healthcare aging innovation industry, Aging2.0 is moving its international headquarters into LHCC’s new Corporate Innovation Center in Louisville, Kentucky.

Considering the global pandemic, LHCC and Aging2.0 are launching their partnership by co-hosting a Global Innovation Search for innovations that address social isolation and loneliness for older adults.

“This partnership is a natural one,” said LHCC Board Chair and Kindred Healthcare CEO Benjamin Breier. “Aging2.0 and LHCC are both organizations committed to finding systems solutions.” “By connecting the LHCC corporate healthcare titans and their business challenges to an active network of innovators dedicated to the aging innovation space, we are changing the healthcare conversation about
Stroke survivor, stroke support group receive American Stroke Association awards

By Beth Bowling and Hillary Smith

The Hazard and Surrounding Area Stroke Survivor and Caregiver Support Group through the University of Kentucky Center of Excellence in Rural Health, along with one of the group's founding members, Mark Kincaid, a stroke survivor from Letcher County, were honored with Stroke Hero Awards from the American Stroke Association, a division of the American Heart Association (AHA).

Stroke Hero Awards are given each year to individuals and groups in the stroke community who have shown resilience and outstanding progress. Kincaid was among eight finalists nationwide for the Voters' Choice Award, which honors an individual or group making an outstanding effort to educate, inspire, and bring awareness about stroke on a local or national level. AHA honored him with the Voters' Choice Award and the following story on their web site:

Mark's Story

Over a decade ago, Mark Kincaid experienced a catastrophic ischemic stroke at age 42 due to undiagnosed high blood pressure. He miraculously survived and after intensive therapy improved enough to go home after three months.

Kincaid joined his local stroke support group and has been an active member for years. He regularly participates in stroke education activities in schools, helps provide stroke awareness education at local events and works with a rehabilitation center to help patients learn to cope with the aftermath of a stroke. Mark also helps educate graduate students at Eastern Kentucky University on the stroke survivor experience and works to achieve local and national recognition for Stroke Awareness Month and World Stroke Day.

Support Group Recognized

The Hazard and Surrounding Area Stroke Survivor and Caregiver Support Group was also honored by the AHA with the Outstanding Support Group Award. Established in 2015, it was the first stroke support group ever created to serve Perry and surrounding counties. It formed after a need was identified during a UK pilot, Kentucky Care Coordination for Community Transitions Program (KC3T), a program geared toward stroke navigation and community transition.

The group offers support not only for stroke survivors but also for their caregivers and family members. Increasing awareness and providing stroke education at the community level is an additional mission of the group. They actively work to raise stroke awareness in under-resourced rural eastern Kentucky — a region with one of the highest stroke rates in the nation.

Since 2018, they have completed over 542 stroke screenings, educated 1007 elementary and high school students and garnered stroke proclamations in three counties as well as two cities of eastern Kentucky.

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“We when we developed the Kentucky Care Coordination for Care Transitions program little did we know that one of the lasting impacts within the region would be the development of this amazing support group. This group was a key member of another funded project examining how to empower community members to be active advocates within their community. This national recognition demonstrates how the stroke support group has excelled as advocates for the stroke population within their rural communities,” said Pat Kitzman, professor in the UK Physical Therapy Program.

Keisha Hudson, research coordinator at the UK Center of Excellence in Rural Health (UK CERH) in Hazard, Kentucky, has provided dedicated leadership for the group since its inception and said the award could not have come at a better time since the organization will celebrate its five-year anniversary this month.

“Our group has worked very hard to make stroke education and awareness a focal point in our rural communities of eastern Kentucky, and I am honored that our efforts have been recognized by the American Stroke Association,” Hudson said.

Dr. Fran Feltner, director of the UK CERH, applauded the passion and dedication of the people working on the locally-led initiative to improve the health of their fellow rural Kentuckians.

“The support group has developed into a family of people who are survivors, caregivers, family members, local and state leadership, who play a vital role in educating community awareness and support for the people who need access to care and healing,” Feltner said.

— Beth Bowling and Hillary Smith are with the UK Center of Excellence in Rural Health (UK CERH) in Hazard, Kentucky.

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KHA works with leaders to help Kentucky’s hospitals

By Nancy Galvagni

As Kentucky hospitals have stepped up to meet the challenge of fighting COVID-19 in the commonwealth, the Kentucky Hospital Association (KHA) has been there to support its members.

KHA has been active throughout this crisis to provide information and assistance to each of its members. As the voice of Kentucky hospitals, KHA has focused on advocating for the needs of member hospitals to help them care for their patients.

We have worked closely with the Governor’s office, the Kentucky Department for Public Health, the Inspector General and the Department for Medicaid Services to secure necessary state waivers to assure hospitals could appropriately respond to the COVID-19 public health emergency.

KHA led the development of guidance for cancelling elective procedures in March per the request of the Governor, and the Association recently submitted recommendations on a phased reopening approach, which will protect patients while reserving hospital capacity and resources to meet any spike in COVID-19 cases that may occur as businesses begin to reopen.

We have also worked closely with the state to assist with data collection, and KHA has published information to keep its membership informed of trends in capacity, personal protective equipment (PPE) and admissions related to COVID-19. KHA is continuing to assist our members with ways in which to secure testing and PPE to support hospital operations as they resume.

KHA also requested waivers from the Centers for Medicare and Medicaid Services, and has been meeting with Kentucky’s congressional delegation and their teams to explain challenges hospitals are facing during the pandemic.

Kentucky hospital revenue has declined significantly – by an estimated $1.3 billion for just an eight-week period – due to hospitals being required to cancel elective procedures."

Treating an epidemic within a pandemic

By Tim Robinson

In communities across the commonwealth and throughout the U.S., mental health and addiction treatment providers are facing a new set of challenges as they continue to care for some of our population’s most vulnerable amid a global pandemic.

According to the National Institute on Drug Abuse, 67,367 Americans died from drug overdoses in 2018—more than 1,300 of whom were here in Kentucky. While public health officials and providers battle one crisis, we cannot afford to overlook another that has been impacting our communities for years—and one that will most certainly still be here even after the COVID-19 outbreak subsides.

RECON KY was formed as a consortium for recovery in Kentucky, bringing together stakeholders from all parts of the treatment system to advocate for a more comprehensive, long-term approach to recovery. And, considering current events, a statewide coalition focused on strengthening and expanding addiction and mental health services has never been more needed and important. RECON KY is focused not only on bolstering and expanding access to treatment services but on addressing the underlying factors that can lead to substance use disorders.

Addiction is a complex and multifaceted disease, affecting people of all ages, genders, races and backgrounds. However, numerous studies have shown that social determinants—socioeconomic status, education level and where you live, among others—can indeed indicate whom in our communities is most at risk for developing substance use disorders and other mental health conditions.

Now, with our country weathering the COVID-19 outbreak, we anticipate an even greater influx of mental and behavioral health needs in the months ahead: exacerbated symptoms, increased substance use and relapses and higher rates of overdose.

Thankfully, Governor Andy Beshear and the Cabinet for Health and Family Services have acted swiftly to protect, and even expand, access to proven forms of treatment and counseling for substance use disorders and behavioral health.

As efforts to address the outbreak continue, lawmakers at all levels must remember the crucial role that mental health and addiction treatment providers play—and will continue to play, moving forward—and include them as essential pieces of the healthcare system when making emergency policy decisions.

The mental health system includes many moving, critically important pieces—residential treatment, detoxification, outpatient, medication assisted treatment, recovery housing, advocacy, prevention, workforce training—that must be maintained during this crisis.

Beyond quality healthcare, long-term recovery requires a great deal of resources and support: employment and educational opportunities, safe and affordable housing, transportation, childcare to encourage workforce participation.

Great strides have been made in recent years to build up Kentucky’s recovery infrastructure, and we cannot let that progress fall to the wayside at a time when many Americans are facing greater strains on their mental health.

— Tim Robinson is CEO of Addiction Recovery Care and a founding member of RECON KY, a consortium for recovery in Kentucky.
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