



# *healthy*partnerships

## Partners In Health Network Inc.

February 2009

### Welcome

The administration of Partners in Health Network welcomes you to a new year and the February issue of our newsletter. After you read this month's issue, please visit our website ([www.pihn.org](http://www.pihn.org)). If, in the future, you have something you wish to share in our newsletter, send it to Tom Kuhn at: [tom.kuhn@camc.org](mailto:tom.kuhn@camc.org). We hope you enjoy this month's edition.

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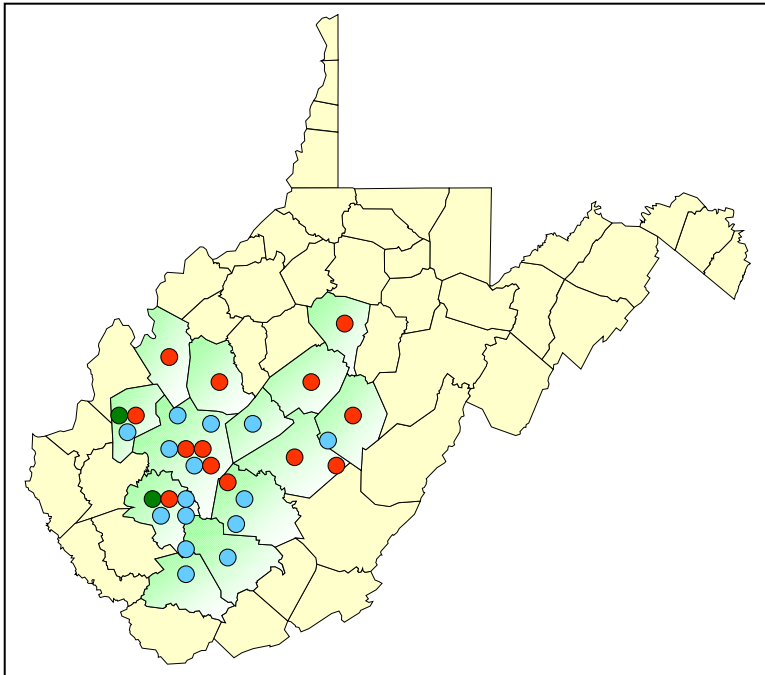
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### Network News Mention

- See message from our Executive Director on page 3.
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## Where we Are



Hospitals, red  
Primary Care Centers, blue  
Health Departments, green

### Members

Boone County Health Department  
Boone Memorial Hospital  
Braxton County Memorial Hospital  
Cabin Creek Health System  
CAMC Teays Valley Hospital  
Camden-on-Gauley Medical Center  
Charleston Area Medical Center  
Clay Primary Care Systems  
Hygeia Facilities Foundation  
Jackson General Hospital  
Madison Healthcare, Inc.  
Montgomery General Hospital  
New River Health Association  
Putnam County Health Department  
Roane General Hospital  
Stonewall Jackson Memorial Hospital  
Summersville Memorial Hospital  
Charleston Surgical Hospital (Formerly  
The Eye and Ear Clinic of Charleston,  
Inc.  
Webster Memorial Hospital  
WomenCare / FamilyCare  
Women's Health Center of WV

### Associate Members

WV Primary Care Association

### Newest Member:

Highland Hospital

**“Creating an integrated  
healthcare delivery network  
for the communities we serve.”**



## **From the desk of the Executive Director**

Now is a good time to reflect on 2008 and look forward to 2009. First, I would like to acknowledge the outstanding contributions made to Partners in Health Network by its members. It is a sincere honor to be able to serve as your director. I continue to be impressed with you're your level of dedication and wisdom and your insatiable drive to improve the health status of our most vulnerable populations. Several highlights include:

- A \$ 250,000 grant from Carelink to improve the care management of Medicaid managed care patients, allowing Partners to make sub grants to its members and recruiting Melda Brown as a half time project coordinator. I want to thank to Carelink for working with us on this important initiative;
- Participated with the Department of Health and Human Resource's "Innovation Community" and submitted a grant to improve care management of the Medicaid disabled population;
- Under the leadership of the CAMC Health Education and Research Institute (CHERI), submitted a telehealth grant to the West Virginia Telehealth Alliance
- Implemented a quality improvement project on sepsis for small and rural hospitals;
- Implemented a quality improvement project on hospitals acquired urinary tract infections;
- Dr. Tom Horsman returned as full time Physician Network Director
- Formed a JCAHO/OFLAC Committee;
- Brenda Greene continued the Credentialing Verification Organization and was a major contributor to the Administration Simplification subcommittee of Select Committee D;
- Continued Critical Access Hospital network meetings;
- Continued Critical Access Hospitals Chart reviews;
- Continued the Community Access Program, providing access to health care to the working uninsured
- Added one new member—Highland Hospital;
- Developed an educational and marketing campaign
- Tom Kuhn assisted with transition activities in Richwood and continued to make site visits; and
- Most of all, we were extremely fortunate to have the services of Ina Angel in 2008 who continues running the day- to -day operations including coordination of all committee meetings and board meetings.

We all look forward to working with you in 2009.

*Bob Whitten*



## Network News

The Partners in Health Board met on January 28. Bill Adams, VP/Administrator, CAMC Memorial Hospital gave a brief description of the new Robert C. Byrd Clinical Teaching Center/CAMC Heart and Vascular Center. Mr. Adams and Lisa Hoffman, RN took the members on a tour of the second and third floors of the center.

The \$72-million, 210,000-square-foot facility houses new cardiac catheterization labs, pre- and post-procedure rooms. The behavioral medicine, internal medicine, family medicine and outpatient care opened in July.

The second floor, where cardiac catheterizations will be performed, opened with seven catheterization labs and two electrophysiology labs. This floor was designed with efficiency in mind, as patients enter from the perimeter of the labs and supplies are located in the center, allowing quicker access to supplies needed for procedures.

The private rooms on the third floor include special areas for families to wait while their loved one recovers from the procedure.

The new Vascular Center of Excellence, which opened in October, contains 15 exam rooms (a significant increase from the previous location), four vascular ultrasound spaces, a reading station for digital images and X-rays and offices for physicians. Patients will also benefit from a dedicated registration area and a patient education area.

Through its educational partnership with West Virginia University-Charleston Division, the teaching centers on the fourth and fifth floors provide increased educational opportunities for medical residents and other health professional students, as well as more convenient and efficient access to health care for thousands in the region.

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### **From CAMC – Transfer Center (!!!):**

The one-call patient transfer center opened Sept. 1 and is operating 24 hours a day, 7 days a week. Currently any referring provider wishing to transfer a patient from their hospital to CAMC General, CAMC Memorial or CAMC Women and Children's Hospital may do so by calling one toll-free number (877-226-2273). This new

center is equipped with a computerized bed board system, which provides the bed status at any of the three hospitals. All calls will be answered by a nurse who will be able to tell you immediately whether there is a bed available and once a bed is located, the nurse will connect the caller to the appropriate physician. Additionally, any transfers to CAMC General Hospital emergency department may be made through this same number. The goal of the center is to receive transfer calls for all three hospital's emergency departments in the near future.

The purpose of a one-call transfer center is to make the transfer process easier and faster for the provider and patient. To assure this, the center will be sending out provider satisfaction surveys in the near future to all referring providers. When these arrive please take time to complete and return so that we can improve our service to you. If you have any problems or suggestions regarding the transfer center please call Denise Sneed, RN at (304) 388-7203 or email her at [denise.sneed@camc.org](mailto:denise.sneed@camc.org).

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### **From Summersville Memorial Hospital:**

Summersville Memorial Hospital would like to announce that they have been granted American College of Radiology (ACR) accreditation in Computed Tomography for their Toshiba Aquilion-64 CT scanner.

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### **From Boone Memorial Hospital:**

**FUN, UNIQUE, LATIN INSPIRED AEROBICS**

**ZUMBA**

**DANVILLE COMMUNITY CENTER, DANVILLE**

**EVERY TUESDAY & THURSDAY (6pm-7pm)**

**COST: \$4.50**

**ALL ABOUT KIDS SPORTS COMPLEX, COMFORT**

**MONDAY (4pm-5pm) & FRIDAY (5pm-6pm)**

**COST: \$6.00**

**BURN OVER 450 CALORIES PER CLASS!!!**

**For More Information Contact:**

**Karlie Belle Price, Certified ZUMBA Instructor  
(304) 437-1572 or [karliebelleprice@suddenlink.net](mailto:karliebelleprice@suddenlink.net)**

## Highlighted Partner Facility:

### **MONTGOMERY GENERAL HOSPITAL** **“Quality Healthcare Close to Home”** **Yesterday, Today, and Tomorrow**



Montgomery General Hospital (MGH) was originally founded as Laird Memorial Hospital in 1938 by Dr. William R. Laird in response to a rapidly increasing need for medical care in the coalfields of West Virginia. The name was officially changed to Montgomery General Hospital in 1971. Today, MGH functions as a non-profit, critical access facility with 25 acute care beds and 44 skilled/long term care beds.

Serving Fayette, Kanawha, Nicholas, Clay and surrounding counties, MGH provides healthcare in the areas of Emergency Medicine, Family Practice, Internal Medicine, Pediatrics, General Surgery, Gastroenterology, Cardiology, Ophthalmology, Podiatry, Orthopedics, Neurology, Urology, and Gynecology. These disciplines are supported by laboratory, pathology, radiology, physical therapy and wound care services.

Montgomery General Hospital works with area universities to provide their clinical students with hands on training and experience in patient care services.

For seventy years, Montgomery General Hospital has played an active part in fulfilling the health care needs of area residents. Although the needs and even the name may have changed over the years, our mission remains the same: *“Montgomery General Hospital is committed to providing the highest quality of care and community-wide health improvement.”*

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## More CAMC News:

### ***Physician Access Line at CAMC (PALS Line)***

Call [1-877-226-2273](tel:1-877-226-2273) to refer a patient to be admitted through the hospitalist program or to check on your patients after admission.

### ***Transfer Center***

All transfers to CAMC General Emergency Department should be made through the Transfer Center 1-877-226-2273 in place of calling the Emergency Department Direct.

Please inform your medical staff especially your Emergency Department Staff. Any problems you can contact Dr. Tom Horsman 304-388-7946 or Denise Sneed, RN, Transfer Department Supervisor at 304-388-7203.

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## Credentialing:

From Brenda Greene, Director PIHN CVO:

February is Here!!!! At our credentialing meeting in November, I stated that I would try to have meetings at least quarterly. And now it is February! So I'm looking at a March meeting. My thoughts are to not only discuss credentialing topics, but if you have any provider enrollment issues, let's see if we can make this an easier process. If you have any specific area to discuss, please let me know and I will send an agenda out prior, so we can all be prepared. Or if there is someone within your facility that may benefit from a roundtable discussion on this topic, please include them. Information will be forthcoming on date, time and location. I look forward to seeing you all

*Partner's In Health, Inc can handle your credentialing needs. Call for more information..304-373-1507 or Brenda.greene@pihn.org*

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## Miscellaneous:

### *Links*

**Partners in Health Network**  
<http://www.pihn.org>

**CAMC Institute (for on-line Education)**  
<http://camcinstitute.org>

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## State Children's Health Insurance Program:

Both houses of Congress have passed reauthorization of the popular State Children's Health Insurance Program. Twice vetoed by President Bush, the bill is expected to be signed into law by President Obama. The bill assures that West Virginia will have enough money to cover uninsured children at the current level of 250 percent of the federal poverty level (\$44,000 for a family of three). The bill also provides much needed oral health wrap-around benefit for low income children with health coverage but without oral health coverage. With reauthorization, health advocates in West Virginia will ask the Manchin Administration to cover all uninsured children to 300 percent of the federal poverty level and make an oral health benefit available to insured children, according to Renate Pore, health policy analyst at the West Virginia Center for Budget and Policy.



## Your Board's 2009 Calendar

As we begin a new year, 2009 is shaping up to be unlike many past “new years.” All you have to do is turn on your morning news show or open the paper and many of us feel like jumping back under the covers to wait until another new year.

Although we may feel this way on the inside, your organization is looking to you for leadership during this time of economic turmoil. How healthcare leaders react to difficult situations, can have major impacts throughout their organizations. Given the challenges and possible opportunities that await us in 2009, what can board leadership do to ensure the success of your healthcare organization?

### Think Strategically.

Examine your organization's goals and strategies in light of the current economy. Consider allocating a significant portion of board meetings to focus on your organization's short-term strategies and forward-looking, long-term strategies. Eventually, the financial crisis will end, and the markets will recover. Organizations that have continued to think strategically throughout the crisis will come out of it in the best position.

### Generative Governance

Thinking strategically also implies being conscious of how questions are framed. If the board asks, “Where do we cut expenses to balance our budget?” the discussion will center around expense reduction. If the question is framed as, “How do we maintain a balanced budget?” the discussion will include expenses and revenue.

### Evaluate Compensation Structure.

What could be worse than newspaper headlines announcing the names of overpaid healthcare executives? To avoid this scenario, boards need to benchmark their chief executive's compensation against survey data for comparable healthcare organizations. The new IRS Form 990 signals unprecedented transparency and public accountability requirements for not-for-profit healthcare organizations, including how executive compensation is set by the full board. Your healthcare organization wants to be able to readily answer “yes” to the question about whether it has taken the steps necessary to ensure that compensation is *reasonable* for the CEO and other key staff. Paying attention to this and other IRS Form 990 changes will help **ensure that your organization demonstrates that it deserves its tax-exempt status.**

## 2009's HOT TOPICS

- New IRS Form 990
- Pay for performance/no-pay for “never events”
- Transparency of quality and safety information
- Re-looking at strategic priorities given the current economic climate
- Possible increases in charity care or bad debt in response to economic down-turn
- Healthcare reform proposals resulting from Select Committee D and the new presidential administration
- Operational changes in response to new financial realities

## Get a Realistic Picture of Your Healthcare Organization's Financial Situation.

The current financial downturn is adversely affecting operating cash, debt financing and investments of many healthcare organizations. In addition, many are experiencing lower utilization leading to tighter operating margins. Set aside some time at your next board meeting to talk to the CEO and CFO to determine where the economic downturn is affecting your financial picture. Assess cash availability if your revenue is tied to market fluctuations; make sure that your cash, investments, or reserves are safe and are getting the best possible return. Get an immediate and firm grip on all revenue streams and be clear as to what programs or services are – or are not – cost effective. This does not mean cutting all non- or negative revenue programs and services; it does mean seeing the whole picture and your financial realities with eyes wide open.

## Community Health

Is your community getting healthier or sicker? What should be your goals for community health education and improvement? When the community and patients look at your organization's priorities, would they agree?

**No one has a crystal ball.** The current economic downturn may be short-lived or we may be headed into a prolonged recession. While we all hope for the former, boards that prepare – strategically, financially, and operationally – will be in the best position to serve their communities now and when the markets recover.

**The Institute for Healthcare Governance** is a program of the Center for Rural Health Development, Inc. Through the Institute the Center works with executive and board leadership to improve the long-term strength and viability of West Virginia's health infrastructure by increasing the effectiveness of governance. For more information or to schedule board development or training for your organization contact the Center at 304/397-4071.

Boards that want to practice **“generative governance”** should work with the CEO to develop a board work and education calendar for 2009 that includes time for discussion of the most relevant strategic and policy questions for their organizations.



**West Virginia  
Immunization Network**  
Improving Immunization Rates Across the Lifespan

Please Mark Your Calendars:

Media Event:

**February 25, 2009 10:00 - 11:30AM**  
**Lower Capitol Rotunda**

Launch of Phase Two of Take Your Best Shot:  
The WV Adolescent Immunization Project

**Key note Address by First Lady Gayle Manchin**

## Awards Dinner:

**February 25, 2009 6pm  
Embassy Suites**

### **Special Guest:**

**Michelle Hannah, Founder  
Celebrate Life Foundation**

Michelle Hannah, through her life's medical challenges and overwhelming love for humanity and the health and well-being women, is becoming one of the most influential women of today. She has been molded by her family, education, and personality for a life committed to being a resounding voice for women, particularly in the intercity for the fight against cervical cancer and Human Papillomavirus Virus (HPV)

Michelle personifies these 21st Century medical challenges for women through a unique theatrical performance. Her remarkable spirit, determination, motivation, and personal experiences make her life devoted to the highest values of human dignity in service to social change.



### **RSVP for Dinner:**

**Teresa Tucker by February 16th  
C/O Center for Rural Health Development  
[teresa.tucker@wvrruralhealth.org](mailto:teresa.tucker@wvrruralhealth.org)  
Phone: 304/397-4071**



## **Closing Notes**

I want to thank everyone for all of your kind thoughts during my illness, hospitalization, and surgery (glad that's over with!). As we are well underway into the New Year, I am anticipating getting back out onto the roads to visit your sites. Today, as I write this it is Ground Hog Day and he says that we are in for 6 more weeks of Winter, I say we cook him. As always, if anyone has a request, you do not have to wait for me to visit, feel free to call or e-mail your request anytime. Tom

**Send us your news and photos to be incorporated  
into the February newsletter: [tom.kuhn@camc.org](mailto:tom.kuhn@camc.org)**

## Employee Contact

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