

# Healthcare Council Report

Volume 27, Issue 1

Winter 2020

HEALTHCARE COUNCIL OF THE NATIONAL CAPITAL AREA  
QUARTERLY REPORT

# HCNCA



## John M. Colmers to Receive Matthew F. McNulty Award at March 12, 2020 Awards Luncheon

At the Monday, December 16, 2019, Healthcare Council of the National Capital Area Board of Directors meeting it was voted to nominate and select John Colmers Senior Vice President, Health Care Transformation and Strategic Planning for Johns Hopkins Medicine to receive the prestigious Matthew F. McNulty Award. The Matthew F. McNulty Award was created on the 24th day of September 1997 in honor of Dr. McNulty for his 20 plus years as leader on the Board of the Healthcare Council and his exemplary contributions to the healthcare field.

The award will be presented at the March 12, 2020 Awards Luncheon, at Congressional Country Club. The award is bestowed on exceptional leaders in recognition of significant and memorable contributions to the healthcare field. Since 2011 Mr. Colmers has worked with leaders from the Johns Hopkins Health System, the Johns Hopkins School of Medicine, and related organizations to develop and implement a strategic plan consistent with the organization's tripartite mission of research, education, and patient care responding to the new challenges of health reform and the more value-demanding health marketplace. Prior to joining Hopkins, he was the Secretary of the Maryland Department of Health and Mental Hygiene from January 2007 to January 2011. In this cabinet level position, he managed a budget of \$9 billion and was responsible for protecting, promoting and improving the health and well-being of Marylanders through a broad range of programs including Medicaid, public health, behavioral health, state health facilities, and regulatory oversight. Other positions included Senior Program Officer for the Milbank Memorial Fund from 2000 to 2007, and 19 years in Maryland State government positions serving as executive director of the Maryland Health Care Commission and the Health Services Cost Review Commission. Mr. Colmers received his BA from the Johns Hopkins University and an MPH from UNC Chapel Hill.

It's a privilege for the Healthcare Council to recognize such an outstanding and deserving leader at the Awards Luncheon March 12, 2020 at Congressional Country Club from 12 to 2 PM. Please reserve this special date on your calendar.



### Recognizing Outstanding Employees

The 8th Employee of the Year & McNulty Awards Luncheon will be held at Congressional Country Club, March 12, 2020. Outstanding employees will be recognized for the significant contribution they made to healthcare in 2019. Employees are selected by each institution based on three criteria: Sustainability, Quality, and Customer/Patient Satisfaction. The narratives about each recipient are awe-inspiring. Honorees are physicians, nurses, painters, cashiers, food service assistants, lab technicians, accounts receivable personnel, environmental services employees, benefits managers, receptionists, engineers, supply chain leaders and more. Every employee is part of the team and every worker makes a difference. The awards luncheon is about honoring those who have in some way in 2019 excelled in a special way in the work they do.



### Meagan Fitzgerald to Host This Year's Awards Luncheon

Meagan will be guest host for the Awards Luncheon, March 12, 2020. Meagan Fitzgerald, co-anchor of the Sunday edition of News4 Today and an Emmy nominated reporter for News4 has been the guest host since the 2018 Awards Luncheon. We are honored that she will be the host again for this year's event. She is a member of the Alpha Kappa Alpha Sorority, as well as a member of the National Association of Black Journalist, where she won the title 'Best Broadcast Journalist.'

## Stay Connected

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# 2020

HEALTHCARE COUNCIL OF THE NATIONAL CAPITAL AREA

CENTERPARK II - FIRST FLOOR 4061 POWDER MILL RD, STE 100 CALVERTON, MD 20705 PH: 301-731-4700

## Supply Chain Advisory Council

The Healthcare Council, formed in 1946 has been serving health care providers in Maryland, D.C. and Virginia since 1946 by providing strategic and business advantages that no single institution or system can efficiently or economically develop alone. Divisions of specific activity have been formed to carry on the ever-changing tasks at hand. These divisions develop information and improve performance using cooperative networking meetings, surveys, group discussion and analysis and continuing education programs. Currently we have 12 divisional groups that meet quarterly including our affiliation with Mid-Atlantic Society of Healthcare Materials Management (MASHMM).

Our wholly owned subsidiary, National Capital Area Shared Services, Inc. (NCASS) has been serving the region's healthcare providers since 1972. We are a regional GPO documenting hundreds of millions in savings and cost containment. NCASS joined the Premier healthcare alliance in 2008 and is currently one of only 28 certified affiliates. In 2013 we signed with Yankee Alliance as a collaborative member. In addition, we continue to offer regional contracts for healthcare providers independent of Premier and Yankee Alliance.

In the 1990's HCNCA had an active supply chain group that we are re-starting to get better feedback from healthcare supply chain leaders and create new contracts that are deemed important for the regions healthcare providers. We will continue to collaborate and support MASHMM as our divisional group for supply chain but also create a separate supply chain advisory council for negotiating better pricing through aggregation in the region.

The supply chain advisory council will be asked to review existing supplier contracts, update agreements, assist in price negotiations, review potential vendors and existing vendors, and help overall in enhancing providers in the region to operate their organizations successfully and cost effectively with integrity and competency.

The first meeting in 2020 was held January 21 at Adventist HealthCare Support Center in Gaithersburg, MD. Other meetings are scheduled on Tuesday, April 21, June 23, and September 22.

### Council Planning Committee:

Jeremy Leonard, Asbury Communities - 301-250-2058,  
[JLeonard@asbury.org](mailto:JLeonard@asbury.org)

Brian Riemer, GBMC - 443-849-2000, [bkriemer@gbmc.org](mailto:bkriemer@gbmc.org)

Swati Salaskar, Adventist HealthCare - 301-315-3352,  
[ssalaska@adventisthealthcare.com](mailto:ssalaska@adventisthealthcare.com)

Lisa Wallace, Goodwin House - 202-877-2745,  
[llwallace@goodwinhouse.org](mailto:llwallace@goodwinhouse.org)

Open Invitation for Additional Members

**Divisional Meetings are held quarterly. Please contact the chair person for more information about the 2020 schedule. You can also call HCNCA at 301-731-4700 for meeting information.**

## Healthcare Educational Advisory Council

In 2020 The Healthcare Council has revised the Divisional (departmental meetings). Based on feedback from Division Chairs and members, we recently adjusted our strategy to deliver educational content. Beginning this year, the Division Chairs have been organized under a new arrangement called the Education Advisory Council. Under this arrangement, approximately 20 meetings will be offered to participants, as we shift the focus of the meetings towards education content rather than affinity groups based on profession. 10 of the 20 meetings will be face-to-face, and the remaining meetings will be offered as webinars. Additionally, a few networking events will take place ad hoc throughout the year. During the months of October and March, no meetings will be scheduled since those are the annual dates for the Healthcare Council Fall and Spring conferences. The Division groups are not being eliminated under this arrangement; they can still meet on an ad hoc basis to discuss issues or present targeted education materials specific to their area of expertise.

### Council Membership:

**Behavioral Health Division Chair** -  
Bevin Merles, 410-402-7385, [BMerles@Maryland.gov](mailto:BMerles@Maryland.gov)

**Facilities & Engineering Divisional Chair** - Mark  
Mininberg, 203-668-3522,  
[mark@hospitalenergy.com](mailto:mark@hospitalenergy.com)

**HR Divisional Chair** - Queenie Plater,  
202-537-4753, [qplater2@jhmi.edu](mailto:qplater2@jhmi.edu)

**IT Divisional Chair** - Open

**Patient Experience Divisional Chair** -  
Takiya Reavis-Benjamin, 540-741-2705,  
[takiya.reaves-benjamin@mwhc.com](mailto:takiya.reaves-benjamin@mwhc.com)

**Pharmacy Division Chair** - JoAnn Neuffer,  
202-537-4171, [jneuffer1@jhmi.edu](mailto:jneuffer1@jhmi.edu)

**Physician Management Division Chair** -  
Darmita Wilson, 240-437-8994,  
[dqwilson36@gmail.com](mailto:dqwilson36@gmail.com)

**Population Health Divisional Chair** -  
Marta Perez, 301-315-3515,  
[MPerez@adventisthealthcare.com](mailto:MPerez@adventisthealthcare.com)

**Rehab Divisional Chair** - Open

**Supply Chain Divisional President of MASH-MM** - Mark Stepling, 301-774-8882,  
[mark.r.stepling@medstar.net](mailto:mark.r.stepling@medstar.net)

**Volunteer Divisional Chair** - Roxanne Holston,  
202-316-5604, [tweetroxie@hotmail.com](mailto:tweetroxie@hotmail.com)

**Young Health Care Professionals Chair** -  
Crystalle A Bortnick, 410-610-7886 [cbortni1@jhmi.edu](mailto:cbortni1@jhmi.edu)

**SAVE THE DATE**

**Matthew F. McNulty Award & Employee Luncheon to be held March 12, 2020**

Save the date and join us from 11:30 AM to 2 PM as we recognize those whose passion and dedication have made a difference in the communities they serve.

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## 2020 Annual Salary Surveys

We are pleased to announce that PeriscopelQ, a leader in the compensation survey business is our new partner in producing the annual Wage & Salary Survey and the Executive Department Head Salary Survey. If your organization has not received the data packet, please contact The Healthcare Council office and request the data form be sent for completion. Below are the key points about the new survey:

- The survey is completely online and fully self-sufficient. You can download the wages datafile, job library and job descriptions from within the survey and upload the wage datafile after completion within the survey. No questionnaires will be mailed.
- The compensation data can be completed online or via an Excel sheet within the survey itself.
- You can enter incumbent (by each employee) data (preferred), average data or any combination of the two. Incumbent data provides more rigorous reporting.
- PeriscopelQ will have a full record of when you opened the survey and when you completed the survey, virtually eliminating any chance of data loss.
- PeriscopelQ will set up a support office for the survey to answer any technical or other questions to provide prompt support via email or phone during regular office hours.
- Each organization will be asked to comment on their survey experience within the survey. Any comment about the survey and any improvements in data collection and reporting relative to previous years will be welcomed and will help in continuous improvement.
- The new survey report will have more useful information, and there will be much more flexibility in delivering custom reports if needed.



## The Synergy Organization

The national leader in evidence-based healthcare executive search

**“I Like You Just the Way You Are.”****How Fred Rogers’ Grandfather Showed him the Beauty of Being “Just the way you are.”**

Fred Rogers, a.k.a. Mister Rogers, received more than 40 honorary degrees and numerous awards, including the Presidential Medal of Freedom in 2002 and a Lifetime Achievement Emmy in 1997. He was inducted into the Television Hall of Fame in 1999 and became synonymous with his oft-repeated mission of convincing his young viewers that “I like you just the way you are.”

It was a message that Rogers learned from his grandfather, according to “The Mister Rogers No One Saw” in the New York Times Magazine by his former WQED colleague Jeanne Marie Laskas ([nytimes.com/2019/11/19/magazine/mr-rogers.html](https://www.nytimes.com/2019/11/19/magazine/mr-rogers.html)). According to Laskas, Rogers very much wanted to be like his grandfather, who told him after one of their many days together “You know, you made this day a really special day just by being yourself. There’s only one person in the world like you. And I happen to like you just the way you are.” “A lot of me came from him,” Rogers told Laskas. He also told her that one of his favorite quotes, which he had framed and hanging on his wall, was, “What is essential is invisible to the eyes,” from Saint-Exupéry’s *The Little Prince*. Rogers became an ordained Presbyterian minister and applied his grandfather’s lessons in creating the memorable atmosphere on “Mister Rogers’ Neighborhood”. Laskas describes this as one that allowed “people to be comfortable enough to be who they are.” You can refresh your own childhood recollections of this beloved man by checking out Tom Hanks’ character study in the recently released movie “A Beautiful Day in the Neighborhood.”

The Reverend Rogers was extraordinarily effective in many ways. Although his program was geared to the youngest viewers, he taught powerful lessons for those among us who aspire to be truly effective leaders. For example, he accepted others for who they are, was respectful, polite, humble, and taught us to accept responsibility for our own actions. “Our” Mr. Rogers wasn’t brash, a braggart and he didn’t try to bowl people over; yet, this authentic man connected deeply with others he touched.

These seemingly “invisible” personality attributes are what differentiate the best leaders from most others. With evidence-based approaches, the “essential that is invisible to the eyes” can be teased out and accurately measured. Specifically, it is the deliberate matching of our hearts, our passions, and who a person really is, to the right position that leads to consistently exceptional performance. Unfortunately, all too common “Position-Person Mismatches” are what cause needless and avoidable organizational expenses, turnover, and predictably dangerous career decisions for everyone involved. In his own way, and one that undoubtedly would have made his grandfather proud, Fred Rogers taught us much more than he might have imagined.

By Ken Cohen, Founder & CEO, The Synergy Organization  
866-HIRE-123 • [synergorg.com](http://synergorg.com)

## FEATURED PARTNERS



### THE ALLĒUS ADVANTAGE

- **Problem:** Uncompensated care (UCC) is estimated to be \$200 billion by 2020
- **Market Niche:** Our focus is on the “end stage” of the revenue cycle, when accounts go to self-pay or are written off
- **Patient Advocates:** We recover from institutions, not patients
- **Proprietary Technology:** Data mining platform identifies multiple alternative institutional payment sources
- **Experienced Management Team:** Decades of expertise in recovery, healthcare revenue cycle management, and subrogation
- **No Fees Unless Success:** Clients compensate Allēus on a contingency basis

### EARLY OUT CAPITAL DEPLOYMENT

- **Significant Capital Available:** Access to as much as \$100 million to deploy for our client’s benefit in our Early Out Capital program
- **Shorten your Recovery Cycle:** The recovery cycle can be long, and our client may want to recover its revenue relating to UCC on an expedited basis
- **Flexible Capital Solution:** Early Out is tailored to each client’s needs. Overall design is a non-recourse “advance” against expected recoveries

### Creating New Value from Uncompensated Care

Allēus Health Analytics is poised to be the most meaningful provider of uncompensated care (“UCC”) recovery services in the United States. Our solutions are based on revenue recovered from institutional payers, never from individuals.

### Who We Are

The Allēus team comprises experts from the top of their respective fields. Members of our company leadership are among the team that designed and managed the \$20 billion Deepwater Horizon economic claims program.

Our legal industry executives and managers have settled and administered multi-billion dollar class and mass action litigation including record-setting complex federal securities settlements, while our acknowledged revenue and subrogation experts are from some of the top healthcare professional services firms in the world.

### Our Focus: Mass Tort Revenue Recovery

Most recovery partners focus on the tried-and-true third-party lien and insurance recovery avenues. Allēus provides those services too, and we provide them via industry experts and smart, efficient processes. But then we take one huge and strategic leap forward... We perform a highly sophisticated recovery analysis across the complex U.S. litigation landscape to identify high-dollar, high-probability recoveries among the dozens of Mass Tort dockets around the country.

A Mass Tort is a civil lawsuit involving many plaintiffs litigating against one or a few defendants in state or federal court. Mass Tort MDLs can result in a global settlement program through which the drug or device manufacturer agrees to pay all affected individuals on the same or similar terms. There are approximately 60 healthcare-related Mass Tort MDL cases currently pending in the U.S. federal court system, representing many thousands of individual plaintiffs.

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Depending upon the drug or device at issue, a successful MDL case can result in settlements in the tens of thousands or in the millions of dollars to an individual plaintiff. Nonetheless, due to litigation and practical complexities involved in Mass Tort actions, providers and payers often fail to recoup these high-dollar potential Mass Tort awards, missing out on a significant boost to their bottom line. Allēus finds those awards and converts them into lien-based assets for our clients.

### Our Process: Analytics & Patient-Centered Advocacy Outreach

Allēus analyzes individual uncompensated healthcare encounters and identifies those patients who may be eligible to participate in a particular Mass Tort. Specifically, we look for those individuals who have both exposure to the drug or device and verifiable damages as defined in the Mass Tort proceeding.

Once an eligible individual has been identified, Allēus conducts a legally compliant direct outreach campaign to educate that individual about his or her potential rights in the Mass Tort. We then determine if the individual is already pursuing those rights. If so, we obtain sufficient information to file a lien to protect our client’s right to recover associated UCC charges. If not, we offer an introduction to a law firm that can work with the patient to evaluate their potential rights.

### Protecting Patient Privacy & Maintaining Data Security

We ensure patient privacy is protected and client data is secure. Our 100% AWS cloud-based technology platform, Common Security Framework, and operational standards meet federal NIST guidelines. Our staff undergoes extensive training and testing to ensure compliance with HIPAA and other applicable laws and regulations.

### Partners in Revenue Recovery

Every member of the Allēus team is a patient advocate. Our aim is to help patients so that our clients can optimize recovery related to third-party liability. We are not a medical debt collection agency, and we never attempt to obtain payment directly from the patient. We do not provide legal or medical advice, and there are never any hidden costs to patients.

Patients retain any amount they recover in excess of the lien owed to our client. Allēus is compensated by clients on a contingency basis once there is a successful recovery of unpaid medical debt related to the Mass Tort encounter.

### MASS TORT INSIGHTS

- 56% of the pending federal civil caseload constitutes MDL cases
- 53% increase in the MDL civil caseload over the last decade
- 80% of all product liability MDLs are drug and device cases
- 25% of MDLs allege drug and medical device defects



### Case Study: Actos MDL

For a regional healthcare system Allēus identified nearly 7,000 patients with uncompensated or undercompensated care that may have resulted from ingestion of the anti-diabetic drug, Actos. At its height, the federal Actos MDL included 5,000 cases alleging the manufacturer failed to warn patients of the risk of bladder cancer and other side effects, with another 4,500 cases across the country in various state courts. Over the course of the litigation juries ordered the manufacturer to pay \$22 million to injured Actos users before the drug maker announced a \$2.4 billion settlement settling 9,000 claims in 2015.

Utilizing our Mass Tort advocacy program, we would expect a population of that size should yield approximately 500 or more patients who are interested in pursuing recovery via Mass Tort litigation. With an average settlement value of \$250,000 per patient, this opportunity could achieve approximately \$125 million in Mass Tort settlement value with upwards of \$25 million in lien recovery for the providers.



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# FEATURED PARTNERS, CONTINUED

## Payers Make Mistakes

Payers/Insurance Companies make mistakes that cost healthcare systems billions of dollars every year. Identifying and correcting these errors is costly and labor intensive to the healthcare system. Healthcare systems are seeking innovative, cost effective solutions to eliminating payer errors and underpayments resulting in increased revenue and improved operating margins. Global Care (GCA) and eReceivables (eR) have combined their very unique services to provide resolution to all payment variances regardless of the age or the amount of the claim.

Global Care (GCA) offers a 100% payer audit, specializing in identifying payment variances and zero-balance accounts. GCA uses our proprietary, cloud-based, analytic software platform to analyze payer and provider contracts and 835/837 transaction data to re-engineer the payment process using historical claims data. GCA then automates the process and effectively re-adjudicates each claim, identifies any variances to which the hospital may be entitled, and qualifies the variances for all parties.

eReceivables (eR), has a patented process to collect the variances from the payer. eR files appeals with the payers using the state mandated appeal rules and through their identified process from their payers plan documents. eR has the ability to automatically escalate the appeal to a compliance department for resolution and track all appeals until resolved.

eReceivables Inc.  
3111 N. University Dr. Suite 702  
Coral Springs, FL 33065  
954-893-1390




### 340B Enhanced:

## Referral Prescription Capture Solution

Capture valuable, compliant 340B referral prescriptions you're missing today.

340B administrators typically lack the ability to capture referral prescriptions written by outside specialists.

**Why Are Referrals Overlooked?**

- Administrators lack referral technology
- Entities often lack compliance knowledge—fearing the audit
- Lack human resources to capture referral prescriptions
- EHR documentation gaps—fail to demonstrate 340B eligibility

**PHS can help Covered Entities enhance their 340B Benefit**

- Revenue**—CE's can capture significant enhanced revenue from their existing 340B program
- People**—We add highly skilled auditors review your EHR system to ensure 340B Compliance
- Documentation**—We help you improve EHR documentation to meet all essential 340B compliance elements

**The Results?**

- On average the 340B Enhanced solution increases entity savings by 15% or \$20,000 per month
- Fills the 340B gap for capture of specialty prescriptions
- Requires no new Covered Entity resources

Let Performance Healthcare Solutions help you fill the gaps in 340B referral prescription capture compliance!

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## BURST Improvement

**DELIVERABLES**

**Priority Alignment**

- Everyone rowing together, towards the same results

**Leadership Development**

- Coaching for managers & directors where they need it the most, in their place of work, turning them into leaders

**Change-driven Culture**

- Leaders driving change at the front line, every day

**Sustainable Results**

- A transformational management model that continues to adapt and excel in the face of change

**Margin Improvement**

- Significant bottom-line results, average client sees 18:1 ROI

For more information:  
Tim Alba, FACHE  
704.564.0163  
tima@caldwellbutler.com

**Proven outcomes based on researched management methods specific to healthcare**

**1.0% Margin Improvement**  
Increase Margin 1% of operating budget (Every 100 Days)

**\$1.6 Billion**  
In Total Client Savings

**\$1.3 Million**  
Average Impact per 100-Day Workout

**3:1 ROI**  
Guaranteed (or no Fee)

**187,000+**  
Change Plans in Searchable Database

# FEATURED PARTNERS, CONTINUED



## Smarter Agency Management

Finding High Quality Locums Just Got Easier!



### HCNCA SHARED SERVICES

A HCNCA Program in Partnership with HWL

#### MEMBER BENEFITS



##### MARKET RATES

Competitive rates and favorable buy out terms for all labor types. Supplier funded, no cost model.



##### ONE CONTRACT

One standard contract for all staffing agencies. Access a pre-vetted network of national, regional and local agencies.



##### WEB BASED TECHNOLOGY

Streamline your process with our easy to use next-generation Vendor Management System.



##### REPORTS & DASHBOARDS

Gain real-time visibility into all agency performance, spending and quality.

“ We appreciate the value of the HWL system to work on Acadia job openings. It saves time and gives us the ability to quickly fill openings. We see more opportunities in real time. It also speeds up the paperwork process before and after each placement. ”

**Ron Mays, Interim CEO**

Riverwoods Behavioral Hospital and Desert Hills Behavioral Hospital

Contact us today for a no obligation demonstration and to learn more.

✉ [info@hwlmisp.com](mailto:info@hwlmisp.com)

🌐 [www.hwlmisp.com](http://www.hwlmisp.com)

☎ 833-HWL-INFO

## DID YOU KNOW?

Health care occupations are projected to account for almost 1/4 of all newly created jobs in the U.S. between 2014-2024.



#### IMMIGRANTS MAKE UP



**BY 2025,**  
AN AGING AND GROWING POPULATION IS EXPECTED TO LEAD TO A **14% GROWTH** IN DEMAND FOR **PHYSICIANS.**

## CURRENT EVENTS &amp; AREA NEWS

☀️ **Gary Bacher Joins Capital Caring Health:** Capital Caring Health in Falls Church, VA recently appointed Gary Bacher as Chief of Strategy, Policy, & Legal Affairs. Gary most recently served as Chief Strategy Officer at the Center for Medicare and Medicaid Innovation where he was responsible for directing the development of new models and initiatives to improve and refine value-based care. In his new role at CCH, Gary will direct all efforts to determine how best to improve all aspects of advanced illness and hospice care at a very critical juncture in the aging of America as over 100 million Baby Boomers enter their 7th, 8th and 9th decades. Coping with this mass aging and ensuring the highest quality care for all in their later years is a challenge Gary is uniquely qualified to take on.



☀️ **Capital Caring Health Launches Primary Care at Home:** Capital Caring recently launched Primary Care at Home in selected zip codes. The new Primary Care at Home (PCH) program will help elders maintain their dignity and independence by bringing full medical and social services to the home. The program will offer primary and urgent care at home, coordinate specialty and hospital care, and arrange daily support services as needed. A dedicated team of doctors, nurse practitioners, social workers and support staff provide diagnosis, treatment, daily support and state-of-the-art mobile technology. They will be available 24/7 by phone and can make urgent visits within 24 hours. This approach lessens the need for 911 calls, ER visits, and hospital stays. The main goals are to offer expert care and peace of mind for elders and families to support aging in place. This new program is under the leadership of renowned geriatrician Eric DeJonge, MD who helped create Medicare's pilot program to advance home health medicine. Tom Koutsoumpas, President & CEO of Capital Caring Health said, "we have high hopes that Primary Care at Home will become a national model for senior care."



☀️ **Robin West, MD, Named President, Inova's Musculoskeletal Service Line:** Robin West, MD, was named President of Inova's Musculoskeletal Service Line in December of 2019. In this role, Dr. West is responsible for leading the Musculoskeletal team in providing world class orthopedic and sports medicine care, and Inova's internationally recognized joint replacement and Sports Medicine programs. Dr. West joined Inova in 2014 where she was responsible for Inova Sports Medicine's clinical, strategic, administrative and academic affairs. Dr. Robin West is a board-certified orthopedic and sports medicine surgeon and has more than 20 years of clinical experience.



☀️ **MWH Named One of the Nation's 50 Top Cardiovascular Hospitals for 2020:** Mary Washington Hospital has been named one of the nation's 50 Top Cardiovascular Hospitals by IBM Watson Health™ for the second year in a row. The study spotlights the top-performing cardiovascular hospitals in the U.S. based on a balanced scorecard of publicly available clinical, operational and patient satisfaction metrics and data. This study is part of the IBM Watson Health 100 Top Hospitals® program, using independent and objective research to analyze hospital and health system performance in key clinical and operational areas for selected cardiovascular procedures and medical care. Indicators include: risk-adjusted inpatient mortality index, risk-adjusted complications index, mean 30-day risk-adjusted mortality rate, mean 30-day risk-adjusted readmission rate, severity-adjusted length of stay, case mix and wage-adjusted inpatient cost per case, 30-day episode payment, and adjusted operating profit margin. The study has been conducted annually since 1998. This is the second consecutive year that Mary Washington Hospital has been recognized with this honor. "This recognition represents the continuous hard work and tireless dedication of our physicians, nurses and staff at Mary Washington Hospital," said Michael McDermott, MD, MBA, President and Chief Executive Officer of Mary Washington Healthcare.



☀️ **GBMC HealthCare System Receives 2019 Malcolm Baldrige National Quality Award for Performance Excellence, in the Leadership Category:** U.S. Commerce Secretary Wilbur Ross has recognized the GBMC HealthCare System with the 2019 Malcolm Baldrige National Quality Award for best practices, the nation's highest Presidential honor for performance excellence, in the Leadership Category. GBMC HealthCare was the only organization cited for best practices in the Leadership Category, which examines how senior executives guide and sustain the organization, and how the organization addresses governance, ethical, legal, and community responsibilities. The GBMC HealthCare System was also the only organization to receive a best practices recognition this year. "We are tremendously honored to be the first healthcare system in Maryland to be recognized by Baldrige for best practices. Receiving this recognition from the Baldrige Award judges reaffirms our vision and promise 'to every patient, every time, we will provide the care that we would want for our own loved ones,'" said John B. Chessare, MD, MPH, President and CEO of GBMC HealthCare System. "We have learned so much through this incredible experience and we will continue on our journey of improvement."



## CURRENT EVENTS &amp; AREA NEWS. CONTINUED



☀️ **Larry Maxwell, MD, Named President, Inova Women's Service Line:** Larry Maxwell, MD, FACOG, COL (ret) U.S. Army, was named President, Inova Health System's Women's Service Line in December 2019. Dr. Maxwell is responsible for developing and managing a comprehensive, consistently high-performing service line, continuing to build upon Inova's nationally ranked Women's Service Line. Over the course of Dr. Maxwell's 20 years of uniformed service, he held the positions of Chief of Gynecologic Oncology at Walter Reed Army Medical Center, Deputy Director of the United States Military Cancer Institute, and Principal Investigator for the Department of Defense Gynecologic Cancer Center of Excellence. He retired as a Colonel in the United States Army. Dr. Maxwell joined Inova in 2011 as Chairman, Obstetrics and Gynecology.



☀️ **Frederick Hospital Updates Behavioral Health Unit:** Everything in the renovated behavioral health unit at Frederick Health Hospital was meticulously thought out. The sink faucet is rounded and when turned on, by pressing a button, water flows from it in an arcing manner. Same with the shower head. The doors pull off; there is no way to barricade them. The doorknobs barely hold weight. Everything was put in place with safety in mind, said Jason Barth, manager of behavioral health services. "So much attention to detail," Barth said. The unit's renovation was unveiled in December 2019 with a ribbon-cutting. The unit has 21 beds, with all but one private. The one semi-private room is for patients who sometimes do better with another person in the room. Every room has two colored walls, with a lighter and darker wall of either green or blue. The lights are meant to feel more like daylight, and each room has a window so that people can have sunshine. But there is no art on the walls or televisions due to safety concerns, Barth said.



Jonathan Ringo, MD

☀️ **Daniel Blum from Northwell Health to Join Sinai in April; President Jonathan Ringo Leaving to Launch Telemedicine Company:** LifeBridge Health recently announced that Daniel Blum will join the organization in April as the president of Sinai Hospital of Baltimore and Grace Medical Center, taking over responsibilities from Jonathan Ringo, M.D., who will step away from his position to become the founder and chief executive officer of a new telemedicine company. Dr. Ringo and Dan Blum will work together for several months to ensure a smooth transition, with Dr. Ringo expected to step down this summer. Blum joins LifeBridge Health from Northwell Health's Phelps Hospital in Sleepy Hollow, New York where he is president and chief executive officer. Dr. Ringo played a leading role in the selection of his successor. As he begins his new venture, Dr. Ringo plans to remain involved with Sinai Hospital's medical education program and, as a practicing OB/GYN, may take occasional shifts on the Labor & Delivery unit, as he has done during his hospital presidency. Blum began his career as a paramedic and emergency management system supervisor before transitioning to hospital administration in the New York City area. In his new role, Blum will serve as senior vice president of LifeBridge Health, along with being president of Sinai Hospital and Grace Medical Center (recently renamed from Bon Secours Baltimore Hospital). Dr. Ringo joined LifeBridge Health in 2014 (also from Northwell Health) as LifeBridge Health's first chief medical information officer and then became the system's vice president of clinical transformation. In January 2017, he became interim president of Sinai and took over the position permanently in May of that same year.



Daniel Blum

## DID YOU KNOW?

The WHO declares a Public Health Emergency of International Concern when there is "an extraordinary event which is determined ... to constitute a public health risk to other states through the international spread of disease".

It has previously declared five global public health emergencies:

- Swine flu, 2009 -The H1N1 virus spread across the world in 2009, killing more than 200,000 people, and a public health emergency was called to ensure the world was carefully monitoring its spread and able to respond, including with vaccines.
- Polio, 2014 - Although closer than ever to eradication in 2012, polio numbers rose in 2013. An emergency was declared due to fears the global fight against its eradication could face a major setback.
- Zika, 2016 - The WHO declared Zika a public health emergency in 2016 after the disease spread rapidly through the Americas. Although for many Zika symptoms are mild, it can be dangerous for pregnant women and the emergency was called to spur urgent research.
- Ebola, 2014 and 2019 - The deadly disease has twice been declared a public health emergency. The first one lasted from August 2014 to March 2016 as almost 30,000 people were infected and more than 11,000 died in West Africa. The WHO cited "the virulence of the virus, the intensive community and health facility transmission patterns, and the weak health systems" in affected countries. A second emergency was declared last year as an outbreak spread in DR Congo.

**CURRENT EVENTS & AREA NEWS, CONTINUED**



☀️ **LifeBridge Health Acquires Bon Secours, the West Baltimore Hospital on November 1, 2019:** Grace Medical Center is the new name for Baltimore’s Bon Secours Hospital. The hospital will include enhanced emergency services, on-site clinical and primary care, expanded specialty services as well as a small medical and surgical unit. New construction and renovation is expected to be complete by the end of 2022.



☀️ **Sentara Healthcare Commits to Increasing Minimum Wage for all Sentara and Optima Health Employees:** Sentara Healthcare has committed to increasing its minimum wage for all Sentara and Optima Health employees, with a plan to reach a \$15 per hour minimum wage by January 2022. This significant increase applies to all positions in the communities Sentara serves across Virginia and North Carolina and is more than double the federally-mandated minimum wage of \$7.25 per hour.



☀️ **Bon Secours Mercy Health Raising Minimum Wage to \$15 Per Hour by 2022:** Bon Secours Mercy Health announced in December that the company will increase its minimum wage to \$15 per hour by 2022. The company says the increase will be accomplished by a phased approach beginning now and culminating in 2022. Bon Secours Mercy Health says the change will affect more than 8,100 associates, or 14% of the health system’s 60,000 employees. That equates to a \$17 million investment in associate pay over the next three years. The company says their new compensation model is designed to enable its associates and their families to enjoy a “dignified livelihood while working, and in retirement.”



☀️ **Meritus Medical Center Receives Two Circle of Honor Awards:** Meritus Medical Center received two Circle of Honor awards recently as part of the 2020 Patient Safety Innovation selections from the Maryland Patient Safety Center. The hospital was recognized for Lean daily management through leadership rounding and a program called “Mothers as Medicine: An Innovative Approach to Care for Neonatal Abstinence Syndrome.” Leadership rounding enhances communication of ideas that can positively affect efficient care and patient satisfaction. The “Mothers as Medicine” project directly impacts the population of babies born with addictions who stay in the hospital’s special care nursery after birth. Winners were selected by a panel of independent judges who

are leaders in the Maryland health care community. The goal of the Maryland Patient Safety Center is to make health care in the state the safest in the nation by focusing on the systems of care, reducing the occurrence of adverse events and improving the culture of patient safety at Maryland health care facilities.

**DID YOU KNOW?**

U.S. life expectancy rose in 2018 by just over a month, up to 78.7 years from 78.6 in 2017, marking the first increase in four years, according to a new report from the federal government. The National Center for Health Statistics said the life expectancy gain was largely attributable to factors like better cancer mortality rates and lower unintentional injuries, such as car accidents and drug overdoses, in addition to the first reduction in deaths from drug overdoses since 1990. - *The New York Times*

**DID YOU KNOW?**

Heart disease is the leading cause of death for men, women, and people of most racial and ethnic groups in the United States. One person dies every 37 seconds in the United States from cardiovascular disease. About 647,000 Americans die from heart disease each year – that’s 1 in every 4 deaths. - *Centers For Disease Control & Prevention*

**DID YOU KNOW?**

An estimated 5.8 million Americans of all ages have Alzheimer’s. An estimated 5.8 million Americans of all ages are living with Alzheimer’s dementia in 2019. One in 10 people age 65 and older (10 percent) has Alzheimer’s dementia. Almost two-thirds of Americans with Alzheimer’s are women. - *Alzheimer’s Association*

## THE BOARD CORNER:



### What Makes a Great Nonprofit Board Member?

Written by Nick Price

Many people do a fair job as board director. Many more do a good job as board director. To truly be a great nonprofit board member requires having good character, a strong commitment to the cause, the gift of time, and a willingness to use personal and professional resources to advance the organization's mission.

According to Robert Greenleaf, founder of the servant-leadership movement, nonprofit board members are servant-leaders, and they are servants first. Greenleaf's philosophy is that nonprofit board members serve as community trustees with a focus on serving, strengthening and transforming their communities. Nonprofit board members will experience personal growth as a byproduct of nonprofit board service.

- Nonprofit Board Members Are People with Excellent Character Qualities
- A Strong Commitment Is a Given for Great Nonprofit Board Members
- Great Board Members Are Innovative and Forward-Thinking
- Nonprofit Board Members Make Regular Financial Contributions
- Enhancing and Nurturing Relationships Are Representative of Great Nonprofit Board Members
- Exemplary Nonprofit Board Directors Take Their Fiduciary Duties Seriously
- Well-Respected Nonprofit Board Directors Know How to Stay in Their Lanes

#### Great Nonprofits Enlist the Help of Great Board Directors

Greatness encompasses many things and covers many areas. Nonprofit board members who attend all meetings well-prepared and arrive ready to ask the hard questions take the first step to great board performance. They're active listeners who respect and acknowledge others' opinions. They don't dominate conversations or push their personal agendas. They're eager to find that delicate balance between collaborating and challenging ideas to bring out the best in the rest of the board's decision-making. Nonprofit board experience merely enhances board directors with all the right stuff.

### 2020 Board of Directors

Chair  
Dean Teague  
Calvert Health System

Vice Chair  
Donna Carris  
United Healthcare Community Plan,  
MD

Treasurer  
Conan Dickson, Ph.D.  
Johns Hopkins Medicine

Secretary  
Louis Damiano, M.D.  
Holy Cross Hospital

President & CEO  
Les Pitton  
Healthcare Council

Legal Counsel  
Robby Brewer  
Lerch, Early, Brewer

Board Chair Emeritus  
Michael Barch

Kathleen Chavanu Gorman, MSN,  
RN  
Children's National Health System

Jack Lewin  
M&T Bank

Board Chair Emeritus  
George B. Wilkes, III

Gary Hibbs  
Riderwood Village/Erickson Living

Tawanna Nottingham  
TRA Medical Supply, Inc.

Alison Arnott  
Sibley Memorial Hospital

Joe Lavelle  
Health First

Kimberly Russo  
George Washington University  
Hospital

Calvin Brown  
C. Brown & Associates

James Lee  
Adventist HealthCare

Omega Logan Silva, M.D.  
George Washington University

Kevin DeBruyne  
Premier Inc.

Doug Leidig  
Asbury Communities

Adrian Stanton  
Virginia Hospital Center

Hugh Eagleton  
Children's National Medical Center  
Board Member Emeritus

## THE HEALTHCARE COUNCIL ANNOUNCES NEW BOARD MEMBERS KATHY GORMAN & ADRIAN STANTON



We welcome Kathleen Chavanu Gorman, M.S.N., R.N., F.A.A.N., Executive Vice President for Patient Care Services and Chief Operating Officer at Children's National Hospital as board member for the Healthcare Council and National Capital Area Shared Services. Kathy

rejoined Children's National from Children's Hospital of Philadelphia (CHOP) where she served as Senior Vice President of Patient Care Services, Chief Nursing Officer and Assistant Dean of Clinical Practice at the University of Pennsylvania School of Nursing. Prior to her tenure at CHOP, Kathy was at Children's National as Vice President of Quality and Clinical Support Services until 2009. During that time, she also led the Quality Program, Clinical Resource Management Program and Family Service Department. She played a critical role in the process of achieving Magnet® status in March 2010. Kathy has been recognized as a top woman leader by Becker's Hospital Review in 2012, 2013 and 2014. Kathy was inducted as a fellow in the American Academy of Nursing in 2014. She received a bachelor's and master's degree of science in nursing from the University of Nebraska Medical Center, College of Nursing. Les Pitton, President & CEO of the Healthcare Council said, "Kathy has been a strong supporter of HCNCA & NCASS since she rejoined Children's National and will be a source of strength and innovation, helping us bring value added services to our members."



Adrian Stanton joined the Healthcare Council & National Capital Area Shared Services board December 2019, for a three-year term. Adrian is Vice President, Business Development and Community Relations responsible for Virginia Hospital Center's growth strategy and execution to advance its mission, competitive position and financial stability. He also serves as the organization's

legislative affairs lead and community relations liaison responsible for guiding the Health System through state and local regulatory rules and regulations. He oversees the organization's growth, legislative and community affairs, marketing, communications, business development, outpatient pharmacy, executive health and health & wellness operations. Prior to Virginia Hospital Center he was Senior Director at Inova Health System and Director of Managed Care Contracting at Suburban Hospital. He received his BBA degree from James Madison University in Harrisonburg, VA. Dean Teague, Board Chair, says, "We are pleased to have Adrian join the board and bring his broad experience and talent in business development to the organization."



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HEALTHCARE COUNCIL OF THE NATIONAL CAPITAL AREA  
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**Council Vision:** "To meet the healthcare challenges of tomorrow by working together today."

The Council functions as a neutral intermediary to facilitate networking and to provide member driven services.

**Mission Statement** - "The Council (HCNCA) is a membership organization dedicated to helping members reduce costs, encouraging co-operative working relationships, and promoting quality healthcare in our region."

**"The Council":** The Healthcare Council of the National Capital Area, Inc. (HCNCA) is an organization of Providers of Care consisting of hospitals and allied health care facilities located in Maryland, Virginia and Washington, DC. The purpose of the Council is to provide for members "strategic and business advantages" that no single institution or system can efficiently or economically develop alone. Divisions of specific activity have been formed to carry on the ever changing tasks at hand. These divisions develop information and improve performance using cooperative networking meetings, surveys, group discussion and analysis and continuing education programs. The aim of the Council's wholly-owned subsidiary, National Capital Area Shared Services, Inc., (NCASS) is to serve its membership in the promotion of programs and services that will enhance the members' ability to operate their organizations successfully and cost effectively with integrity and competency.

Healthcare Council is a not-for-profit  
501(c)(3) corporation  
The Council has opportunities for Associates: For membership information,  
call 301-731-4700

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**Interested in Joining the Healthcare Council?**

Healthcare Council continues to develop its All-Inclusive, Broad-Based Association of Members to accurately reflect the providers of care doing business in its service area encompassing Maryland, the District of Columbia and Virginia. It is committed to creating and providing opportunities for new members and associates while keeping member dues low. It serves its members with detailed communications and professional contacts, partnerships, timely educational programs, surveys, collaborative efforts, and strategic alliances.

To learn more about joining the Healthcare Council and/or participating in our Shared Services, please contact Cheryl Thomas at 301-731-4700 or visit us at: [www.healthcare-council.org](http://www.healthcare-council.org).