

## *President's Message by Carl Seitz*



As we get older, time feels like it moves faster. This phenomenon can be explained by the fact that as we age, we experience fewer new things; every day is the same basic routine. To counter this perception, we are advised to do one new thing a week and to break out of our comfort zone.

June 5th marked my one-year anniversary as Coalition President. For me, it has been an exciting year, a time of learning new things, forming new relationships, and certainly, at times, being out of my comfort zone. Many of you have heard me say that I forgot what it was like to change jobs after 20+ years at my previous position with St. Luke's University Health Network. In my years of health care management, as with any role, I got to know the job-related duties, responsibilities, issues, etc. In changing jobs, there are a lot of new things to learn. Early on with the Coalition, with so many new experiences, the passage of time seemed to slow down.

Now, looking back on the previous 12 months, I am amazed how fast the year has passed and how much has been accomplished. The Coalition's Annual Conference, our signature educational event of the year, was held on May 3 at DeSales University (pages 6-12). This year's Conference was a great success with records set for attendance (259) and sponsors (30). A highlight of the day was the presentation of our first Leadership in Wellness Awards to three deserving senior-level administrators from Coalition member companies. Most rewarding was the feedback from attendees regarding the high energy level of the event. Thank you to everyone involved in making this year's Conference a memorable event.

Other educational events in the past year included the Lehigh Symposium (page 14), the Associates Showcase, employer forums on the Opioid Crisis (page 5) and BSI CORE, and broker events covering vision and pharmacy.

Major initiatives during the past year included a medical plan purchasing partner request for proposals (RFP) with results to be announced, the Geneia Data Initiative (page 4), an early repricing of the Express Scripts PBM contract, our partnership with the NEPA MAEA, and the initial steps to create a stronger Coalition presence in the Reading/Berks County Area. In April, the Coalition staff expanded with the hiring of Donna Corsi as Director of Member Programs and Services (page 3).

I want to thank everyone associated with the Coalition for making this an enjoyable and rewarding year. I look forward to working with you in the upcoming year. One of the most rewarding parts of the past year has been the opportunity to get to know and work with you – our employer/associate members, our purchasing partners, consultants, Coalition Board Leadership, and staff. Your commitment and engagement drive the success of the Coalition. Thank you for all that you do.

## New Members

### Welcome New LVBCH Members

We extend a warm welcome to the following new member of the Coalition and encourage them to become active in Coalition activities:

❖ Caregiver Action Network

## Upcoming Events

### Mark Your Calendar

Health Care Quality Roundtable – September 19, 2018, DeSales University

### We Want to Hear from You

Have an employee health or benefit topic that you would like to learn more about? Shoot us an email (see contact page of [lvbch.com](http://lvbch.com)) or call us at 610-317-0130. Our Education and Wellness Committee is always looking for topics of interest to our members. We have relationships with dozens of experts in the health care and benefits fields and can design a program to provide you, your employees and other employers like you the information you need.

## Coalition Happenings

### LVBCH Advises Brokers on Ways to Reduce Pharmacy Benefit Costs

John R. Adler presented *Understanding and Controlling Pharmacy Benefit Costs – What You Can Do for Your Self-funded Clients* at the LVBCH Broker Event on April 12 at Melt in Center Valley.

Also, Adler was a presenter at LVBCH's Annual Meeting. See story on page 9.



## Welcome Donna Corsi, Director of Member Programs & Services



*Donna Corsi*

Please join us in welcoming Donna Corsi, LVBCH's Director of Member Programs & Services. Recently, *News Notes* sat down with Donna to get to know her better.

***Q: Tell us about your background. Where did you work before joining LVBCH?***

**Donna:** I came to LVBCH from St. Luke's University Health Network where I worked for 32 years. Most recently, I was the Compliance Program Coordinator. I coordinated confidential drug and alcohol programs, physical and auxiliary testing for client companies. I managed random drug testing for more than 200 companies, representing a few thousand employees, to ensure their employees were compliant with DOT and other Federal requirements. This included school districts, municipalities, hospitals, manufacturers and trucking companies.

Over the years, you form lasting bonds. In fact, some of the people I worked with at St. Luke's are also Coalition members.

***Q: What attracted you to this position?***

**Donna:** I have always enjoyed working with Carl. I had been familiar with LVBCH and when he moved to the Coalition, I thought it sounded like an interesting and challenging place to work. I loved my role at St. Luke's, but was ready for a change so the timing was perfect.

***Q: What is the most important asset that you bring to LVBCH?***

**Donna:** I understand the value of building member relationships. It's the most important part of the job – the reason for coming to work each day. I truly believe that the customer is always right. Even when I might have a different perspective, I work to address the issue. By doing so, the most challenging client becomes your ally.

I bring existing relationships with employers built over decades. I am experienced in hosting seminars, providing supervisory training and working with Human Resources professionals. I worked with and trained personnel from 11 outpatient clinics, as well as provided mentoring and training to our sales and support staffs.

***Q: What are your plans?***

**Donna:** First, I plan to get to know the members. I have been calling people personally and introducing myself and have begun visiting a lot of our members. I will continue to meet people at events. I'm in a brand new position so I'm not sure where all of the roads will lead me.

***Q: Tell us about you personally. What is the most interesting thing about you?***

**Donna:** I'm an optimist who just enjoys living life. I'm an avid walker. If I'm having a bad day, I walk and feel better afterwards. It's good for your mental health. I'm half Italian and half German. I enjoy cooking. My parents grew up in Bethlehem. My father worked for Bethlehem Steel.

I have three grown sons and a grandson. My husband and I enjoy spending time with them and their families. They all live in the Lehigh Valley. My son Robert is a Bethlehem Police officer, my son Marc is working at Centennial School while pursuing a Master's Degree from Lehigh University, and my son Matthew works for St. Luke's Hospital in the radiology department and also has a baseball business, the Lehigh Valley Revolution.

***Q: You've been here a few months now. What do you like most about working at the Coalition?***

**Donna:** The staff is wonderful. Wendy is so helpful, as was Rachel before she retired. I love working with the member employers, partners, brokers and the LVBCH Board. I couldn't be happier with my decision. I'm so excited to start this new chapter in my life.

# Schlouch Hosts Berks County Employers for Geneia Presentation

LVBCH Coalition member Schlouch Incorporated hosted a meeting at its headquarters on June 11 to provide area employers with an overview of LVBCH educational events and membership growth in the Reading/Berks County area. Geneia representatives were invited to attend, alongside presenter Capital BlueCross, to introduce the LVBCH Geneia employer data analytics initiative.

Leaders from East Penn Manufacturing and B. Braun Medical Inc., who have long been involved in the Geneia initiative, provided a historical timeline for the Geneia tool development and described the value to their respective organizations. Laura Syron and Patricia Ingerick from Geneia presented about Geneia's data analytics solution, the Theon® Platform, and shared how Coalition employer groups use it to lower costs and improve employee outcomes.

The tool integrates data from multiple sources including medical, pharmacy, dental and vision, vendors and applies analytics. The insights are presented in easy-to-use dashboards with the ability to drill down into details. Examples of information available are the number of employees who have received preventive screenings in the past year and the number who have visited the emergency department but not a primary care physician.



Click on the flyer for more information.



## LVBCH Employer Forum

### Strategies Available to Curb Health Benefit Expense

Rising health care costs and skyrocketing pharmaceutical increases are putting employers and employees at greater financial risk, said **Kevin Davis**, Senior Benefits Consultant, Univest Insurance. Davis spoke at the LVBCH Employer Forum, *The Role of the EAP in the Opioid Crisis and Emerging Trends in Benefits* held at PBS39/WLVT studio in Bethlehem.

The average family medical plan costs \$26,000 per year with the employer contributing \$15,000 in premiums and the employee picking up \$6,700 in premiums and \$4,300 in out-of-pocket expenses. Most employees do not have enough savings to pay substantial medical bills with 69% having less than \$1,000 in savings.

Even long established medications are seeing stiff increases. Such as, the price of a 40-year-old, off-patent cancer drug in the U.S. has risen 1,400%, putting the life-extending medicine out of reach for some patients.

To fight the rising costs, a growing number of employers are becoming self-insured as new products emerge to make this option viable for smaller companies. In 2017, 60% of covered workers were enrolled in self-funded



Kevin Davis

plans. The percentage increases with the size of the organization – from 23% for companies with 50-199 to 91% of employers with 5,000 or more workers.

Also, more companies, 30%, are offering high deductible health plans. These plans:

- Can reduce costs by promoting consumerism in healthcare purchasing. Employees have more control over the money spent on benefits.
- Can be perceived as a pure cost shift with employees bearing the burden

[CLICK HERE TO VIEW KEVIN DAVIS' PRESENTATION](#)

## Employers Can Set Addicted Employees on the Right Path

Employer supported treatment for opioid abuse is one of the most effective ways to persuade individuals to seek help, even more than the urging of loved ones, said **Carolyn Lamparella**, Ed.S., L.P.C., Program Director of Preferred EAP. Lamparella spoke at the LVBCH Employer Forum, ***The Role of the EAP in the Opioid Crisis & Emerging Trends in Benefits*** held at PBS39/WLVT Public Media Center on June 6.

“People don’t want to lose their jobs,” she said. “It’s a huge motivator. As employers, we can do something about this problem. We can set employees on the right path.”

Lamparella advised employers to have strong workplace policies related to drug misuse that include Employee Assistance Program (EAP) referral guidelines and the inclusion of opioids in drug testing. In addition, she recommended education for employees, supervisors and managers so they understand the policies, learn to recognize signs of impairment and know how to refer an employee for help.

“The number one reason we get a referral is because the employee is falling asleep on the job,” she said. “An addict is a master at hiding. We all have to be detectives.”

If an employer suspects an employee is misusing prescription drugs, she suggests partnering with an EAP and informing employees of the availability of its confidential services. An EAP can conduct a drug and alcohol assessment, make treatment recommendations, facilitate placement, monitor progress, evaluate readiness to return to work and follow the employee for a year afterwards. The EAP also reviews the employee’s prescription drug habits.

[CLICK HERE TO VIEW CAROLYN LAMPARELLA'S PRESENTATION](#)



*Carolyn Lamparella*



# 2018 LVBCH Annual Conference

LVBCH hosted 259 people at its 38<sup>th</sup> Annual Conference at DeSales University on Thursday, May 3, 2018. The title of the event was ***Driving Healthcare Value, Innovation and Transparency***.

## Health Care Provider and Insurance Markets Stable, but Unsustainable



Health care strategist and Washington DC insider **Robert Laszewski** compared the health care system in America to a walk on a short pier. “For the moment, we’re enjoying the walk,” he quipped, but unless substantial changes occur soon, we’ll soon find ourselves under water.”

Currently both the health insurance and health care provider markets are remarkably stable, growing and profitable. But, the system continues to cost far too much and is unsustainable. While the industry has done a fair job in decreasing utilization, it has failed to reduce prices. Laszewski presented, ***The American Health Care System Under the Trump Administration*** at the LVBCH Annual Meeting.

Laszewski quoted an article by Alex Kacik and Shelby Livingston published in the February 2018 issue of *Modern Healthcare*:

**Robert Laszewski**

*“American healthcare has reach a tipping point. Look no further for proof than the insiders and outsiders who are linking up to disrupt the long-stagnant, cost-ridden industry that’s eating up nearly a fifth of the nation’s gross domestic product.”*

For example, Amazon is partnering with JP Morgan Chase and Warren Buffet’s Berkshire Hathaway to tackle employee spending. CVS Health and Aetna are combining, as well as CIGNA and Express Scripts, to offer cheaper, more convenient access to care and services.

Meanwhile, insurance companies are realizing profits in the Medicare and Medicaid markets.

Realizing there is a lot of money on the table, hospitals and health systems are getting into the insurance business, but rather than going alone, there is a growing trend of health systems partnering with insurers. Overall, hospitals are doing well while more and more rural hospitals are coming into larger systems, he said. Profits at the country’s more than 4,800 community hospitals continued to rise in 2017 hitting \$76.1 billion, a 43% increase since 2011, according to an American Hospital Association statistical report. Overall, hospitals’ operating margin was 7.7% in 2015.

The system is stable but cannot continue its current course. While enrollment in government supported programs grew, the private individual insurance market declined. As of March, the individual insurance market fell to 17.6 million, down from 20.2 million the year before.

While Republicans failed to replace Obamacare, it cannot continue. Possible Democratic solutions include a single-payer Canadian-style health program and a “public option” and/or Medicare buy-in for Americans age 55 and older. The Medicare-like program proposed by the Center for American Program would replace other entitlement programs and even allow small employers the opportunity to buy into it by contributing 70% of cost. Using the Medicare fee schedule, the plan would provide no or low deductibles, free preventive care, chronic disease treatment and generic drugs.

[CLICK HERE TO VIEW ROBERT LASZEWSKI’S PRESENTATION](#)

## LVBCH Names First *Leadership in Wellness Award* Recipients



*Pictured from left to right: Carl Seitz, LVBCH President, Bob Johnston, LVBCH Board Chair, award recipients Richard F. King of Schlouch Incorporated, Terry Capuano of Lehigh Valley Health Network and Deborah Faulkinberry of Gross McGinley, LLP, and Committee Members Amanda Greene of BeneFIT Corporate Wellness – Populytics and Kevin Davis of Univest. BeneFIT Corporate Wellness – Populytics sponsored the award.*

A highlight of the LVBCH's 38th Annual Meeting was the presentation of the Leadership in Wellness Awards, which recognizes executive leaders of LVBCH member companies for their innovation, dedication and contribution to the success of their organization's corporate wellness program.

Receiving the awards were:

- Terry Capuano of Lehigh Valley Health Network
- Richard F. King of Schlouch Incorporated
- Deborah Faulkinberry of Gross McGinley LLP

In thanking all the companies who nominated leaders, Amanda Greene of LVBCH's Education and Wellness Committee noted that the committee was impressed by the innovative ways in which these executives are supporting their employees in making healthy lifestyle choices. The best practices identified through the application process will be shared with LVBCH member employers.

"All of the award recipients lead by example," she says. "They 'walk the wellness talk' to develop cultures that promote healthy behaviors as 'the way we do things around here.'"

Employee wellness programs are not only the right thing to do, but benefit companies by lowering absenteeism, increasing productivity and lowering health plan costs.



## LVBCH Members in Value-Based Care Arrangement Saw Costs Decline



*Heather Lavoie*

LVBCH members enrolled in value-based contract (VBC) arrangements on average experienced a 7% lower per member per month (PMPM) medical cost than those who were not, said **Heather Lavoie**, Chief Strategy Officer, Geneia.

Lavoie presented, ***Market Insights into Driving Health Value and Well-Being*** at LVBCH's Annual Conference. Geneia provides participating employers with information and analysis of their employees' use of services, including performance, risk, cost and utilization.

On average, medical costs decreased by 3.9% for those in a VBC arrangement while those not enrolled in a VBC arrangement saw a 3.1% increase. For VBC members, emergency department utilization was 8.6% lower, admissions 4.7% lower, and readmissions 12.9% lower. Approximately 53% of all LVBCH members receive care through a value-based contract (VBC). The greater the member medical cost share, the lower the PMPM cost.

The most costly and prevalent diseases driving health care costs for LVBCH members involve musculoskeletal system and connective tissue diseases, respiratory system diseases and septicemia diagnoses,

- Musculoskeletal system and connective tissue diseases, including back, neck, knee, hip, wrist and arthritis account for almost \$11 million in cost and involve approximately 20% of members.
- Respiratory System Diseases, such as asthma and COPD account for \$5.5 million of annual costs and 29% of members
- Septicemia diagnoses accounts for \$3.7 million.

[CLICK HERE TO VIEW HEATHER LAVOIE'S PRESENTATION](#)

## Specialty Drug Strategy Could Save Employers up to 40%

Specialty drug spending is taking a heavy toll on employer sponsored drug plans, a problem which is expected to worsen over the coming years. Fortunately, employers can employ several tactics to curtail these increases, said **John R. Adler**, Consultant and President of ELMC Rx Solutions. Adler presented, ***Specialty Drug Management: Is It Possible?*** at LVBCH's Annual Meeting and in April at the LVBCH Broker Event, ***Understanding and Controlling Pharmacy Benefit Costs - What You Can Do for Your Self-funded Clients.*** (See photos, page 2.)

Specialty drug spending in the United States is expected to spike 361% from 2012 to 2020, increasing from \$87 billion to \$402 billion, according to PWC's Health Research Institute. However, employers can adopt several strategies to reduce specialty drug costs by 25-40%, Adler said.

Reducing specialty drug spending begins with the contract. Adler urged employers to completely understand all the terms and have them clearly defined within the contract. In addition, he suggested that the contract allow audits to be performed by a clinical pharmacist on the employer's behalf.

"Review of pre-authorizations are now automated," he added. "They've taken people out of the process."



*John R. Adler*

Most pharmacy benefit managers (PBMs) use pharmacy techs to oversee claims and only engage clinical pharmacists to review claims when there is a denial.

This process has serious flaws, Adler said. To illustrate, he shared examples of where a clinical pharmacist conducting audits for ELMC Rx Solutions clients identified serious and costly errors:

A patient diagnosed with hepatitis C was prescribed Veikira plus Ribaviron, but a review of the patient's medical records and lab test results found that a 12-week dose of Harvoni was sufficient. The clinical pharmacist submitted data from clinical trials to substantiate her findings and the physician subsequently changed the prescription. The plan saved more than \$100,000 and the patient avoided an extra 10 weeks of therapy that would have worsened his condition.

[CLICK HERE TO VIEW JOHN ADLER'S PRESENTATION](#)

## SurgeonCheck–CBC Collaboration Shows Economic Power of Data



*Marc Granson, MD*

By using health care data to objectively judge surgeons on outcomes, rather than perceptions, substantial savings could be realized and patients could have information needed to choose the best surgeon possible, said **Marc Granson, MD**, Founder of SurgeonCheck LLC. Dr. Granson, along with **Jennifer Chambers, MD**, Medical Director of Capital BlueCross, presented ***Leveraging Data to Increase Surgical Value*** at LVBCH's Annual Meeting. SurgeonCheck is collaborating with Capital BlueCross to develop a comprehensive tool to analyze the quality and cost of a surgeon.

SurgeonCheck:

- Analyzes most frequently performed surgical procedures
- Provides distinct metric sets
- Is outcome-focused, literature based and peer reviewed
- Utilizes insurance claims data and hospital sources
- Extracts basic data to a secure, cloud-based platform

Drs. Granson and Chambers shared the findings of a pilot program that evaluated claims and clinical information to determine opportunities to lower costs and improve quality. Two pilot facilities, both outside of the Lehigh Valley, participated in the study of costs and outcomes related to hysterectomies – performed vaginally, laparoscopically and traditionally (open surgery).

The study concluded that of the 600,000 hysterectomies performed in the United States each year, more than \$1 billion could be saved by reducing the number of open hysterectomies by 20% and increasing the number of vaginal hysterectomies.

SurgeonCheck plans to evaluate more facilities and share the information with clinical and quality leaders.



*Jennifer Chambers, MD, and Marc Granson, MD*

## HTA Aims to Transform Employer Health Care Benefit

The Health Transformation Alliance (HTA) is committed to improving the way employers provide health care benefits in an effort to deliver better health care outcomes for employees and lower costs for employers, said **Robert E. Andrews**, HTA Chief Executive Officer. Andrews presented *The Health Transformation Alliance – Taking Better Care of the People Who Take Care of Us* at LVBCH's Annual Meeting.



*Robert E. Andrews*

HTA a 46-company collaborative covering 7 million people with medical costs of \$27 million annually. Member organizations include Coca-Cola, Verizon and American Express. It seeks to fundamentally transform the employer health-care benefit marketplace by focusing on four areas: greater marketplace efficiencies, harnessing data, educating employees and breaking bad habits.

## LVBCH Supports American Diabetes Association's Camp Freedom

LVBCH is pleased to support organizations that improve the health and welfare of the communities we serve. As part of this effort, the Coalition's Board of Director's made a contribution to the American Diabetes Association at the Coalition's Annual Conference on May 3rd at DeSales University.



LVBCH's contribution will help to support the ADA's Camp Freedom for children and youths. Camp Freedom offers a traditional camp experience in a medically-safe environment. The camp provides opportunities for children with diabetes to forge life-long, sustainable relationships, overcome feelings of isolation and gain self-confidence. Diabetes affects 30 million children and adults in the United States and is prevalent in our area. Over the next 10 years, the cost of care for diabetes and related complications is expected to exceed \$7 trillion worldwide.



*LVBCH Board Chair Bob Johnston presented Kevin Kelly, Executive Director of the American Diabetes Association with a donation at this year's Annual Conference. Pictured from left to right: LVBCH President Carl Seitz, Jack Gross, Jeannine O'Callaghan, Bob Johnston, Kevin Kelly, Eileen Zielinski and John Marchetto.*

## And the Raffle Winners Are...

Thanks to our generous sponsors and vendors, several people left the LVBCH Annual Conference with gifts.

Sponsor	Gift	Winner's Name	Winner's Company
<b>AblePay</b>	Sunday Brunch at Hotel Bethlehem for 4	<b>Virginia Otis</b>	Weldship Corporation
<b>American Diabetes Assn</b>	Swiss Force Meister Multi-Tool	<b>Alex Zamora</b>	Weldship Corporation
<b>BSI Core</b>	4 Tickets & Parking Pass to the Iron Pigs Game in the BSI Dugout Suite	<b>Cristie Lazart</b>	Northampton Community College
<b>Capital BlueCross</b>	QardioArm Wirelss Smart BP Monitor & Mart Body Composition Scale	<b>Sheila Rulli</b>	Kids Peace
<b>Caregiver Action Network</b>	30-minute Free Webinar	<b>Geraldine Garza</b>	City of Allentown
<b>DeSales University</b>	Basket of DeSales Items (coffee mugs, umbrella, fleece, pens)	<b>Alison DeCleene</b>	B.Braun Medical
<b>Express Scripts</b>	\$100 Amazon Card	<b>Tiffany James</b>	Good Shepherd
<b>Geisinger Health Plan</b>	Basket Fill With Wellness Items	<b>Isabel Rivera</b>	Monroe County
<b>Health Advocate</b>	Fitbit	<b>Toni Lee Febbo</b>	Lehigh University
<b>Highmark</b>	4 Tickets to Rod Stewart at PPI Arena	<b>Melinda Stuck</b>	West Shore School Dist.
<b>IBH</b>	Bluetooth waterproof speaker	<b>Jessica Ehrhardt</b>	MCS Industries, Inc.
<b>Key Insurance &amp; Benefits Services</b>	Roku Streaming Stick Plus Streaming Player, Wireless Range & Voice Remote	<b>Kathryn Anderson</b>	County of Northampton
<b>NVA</b>	\$50 Visa Gift Card	<b>Angie Smallwood</b>	Volvo/Mack Truck
<b>Populytics/BeneFIT Corporate Wellness</b>	Wellness Basket (yoga mat, exercise bank, towels, heat/cooling pack etc.)	<b>Susan Grella</b>	Buzzi Unicem USA
<b>St. Luke's University Health Network</b>	Wellness Package, Incl. 2, 3-Month Memberships at St. Luke's Fitness Ctrs.	<b>Mary Garcia</b>	Sevice Tire Truck Centers (STTC)
<b>The Equinox Agency</b>	Goodies Gift Basket & 2 Books	<b>Terry Beidelman</b>	County of Northampton
<b>Trividia Health</b>	\$50 Visa Gift Card	<b>Lori Young</b>	Crayola
<b>United Concordia Company</b>	Oral-B Professional Care 2000 Rechargeable Toothbrush-Set Of 2	<b>Adrienne Nagy</b>	Crayola
<b>Univest Insurance</b>	Portable & Wireless Bluetooth Speakers	<b>Dawn Wilson</b>	Buzzi Unicem USA

## Save the Date

### LVBCH 39<sup>th</sup> Annual Conference - May 2, 2019 at DeSales University



## Thank You LVBCH 2018 Annual Conference Sponsors

LVBCH would like to once again acknowledge and sincerely thank all of our event sponsors. Without their enthusiastic support, this event would not be possible.

### Premier Sponsors



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HealthAdvocate



# 2018 Healthcare Symposium

## Experts Say Telehealth Is a Safe, Convenient and Cost-Efficient Option

The telehealth industry has made great strides in improving convenience and access for patients, especially those who live a distance away from their health care provider or have mobility challenges, said panelists participating in Lehigh University's Healthcare Systems Engineering's 2018 Symposium on May 24. The event, **Telehealth: Federal Initiatives, State Policy and Current Implementations** was co-sponsored by LVBCH.

However, government and insurers have yet to fully embrace tele-visits as being equal to on-site visits. Also, many rural areas still experience connectivity issues.

Pediatrics professor **Karen Rheban, MD**, Senior Associate Dean for Continuing Medical Education and External Affairs and Medical Director and Office of Telemedicine at the University of Virginia was the keynote speaker.

**James Balshi, MD**, Chief Medical Information Officer, St. Luke's University Health Network predicts that within a few years, telehealth visits will be fully accepted and will become a normal part of a provider's day, interspersed between office visits and other duties. Dr. Balshi was one of several panelists. Others were **Joseph Tracy, MS, and Robb Kruklitis, MD, PhD**, of Lehigh Valley Health Network; **Scott Bishop, MA**, of Hospital and Healthsystem Association of Pennsylvania (HAP); **Brooke Nordai** of Capital BlueCross; and **Tejal Raichura, MHA, SSGB**, of Geisinger Health System. **Phillip Burrell** of HAP served as moderator.

Currently millennials are most comfortable with telehealth, given their familiarity with technology, but young baby boomers are also welcoming the trend. Telehealth is particularly useful for adult children with aging parents. Rather than taking time off work to drive their parent to the doctor, they can arrange a telehealth visit and can even join the call from their home or office. It makes it easier for both the adult child and the parent, especially if getting in and out of a car is challenging.

Dr. Rheban said telepsychiatry also shows promise. In fact, many patients feel more comfortable talking to the physician from their own living room. Other areas where telehealth is effective is in stroke care, she said.

Tejal said many patients who drive to Geisinger come from a distance. With telehealth the patient doesn't need to spend three or four hours driving to and from the appointment that lasts a few minutes. Telemedicine is improving access for many patients who have difficulty getting to the doctor due to distance or lack of transportation.

"Your address should not dictate whether you can get health care" Joe said. "Plain and simple."



*From left: Panelists Dr. Robert Kruklitis, Brooke Nordai, Dr. James Balshi, and Tejal Raichura*



## Leapfrog Update



### How Safe is Your Local Hospital?

In April, [The Leapfrog Group](#), a Washington, D.C.-based organization aiming to improve health care quality and safety for consumers and purchasers, announced the updated [Leapfrog Hospital Safety Grades](#). General acute-care hospitals in the U.S. are assigned letter grades of A, B, C, D or F based on their performance in preventing medical errors, infections and other harms. These errors, killing or harming millions of people per year, are the third leading cause of death in the United States.

In Pennsylvania, 118 hospitals were graded, and 37 (31%) were awarded an “A”, the highest letter grade, demonstrating these hospitals’ dedication to safe care. Only two Pennsylvania hospitals – PinnacleHealth Community General Osteopathic Hospital in Harrisburg and St. Clair Hospital located in Pittsburgh – have received ‘Straight As’ since 2015.

LEAPFROG  
**HOSPITAL**  
**SAFETY GRADE**

“Patient safety should be a priority for all residents of Pennsylvania. We are committed to ensuring our hospitals offer the best and safest care to their patients,” said Carl Seitz, president of LVBCH. “We strive to work together with the hospitals and other stakeholders in our community to ensure excellent and safe care.”

To read the entire news release about the Spring 2018 Hospital Safety Grades and see the complete list of the 37 hospitals in PA that were graded an 'A' in this latest update, click the box below.

[CLICK HERE TO REVIEW THE LIST OF 37 “A” GRADED PA HOSPITALS](#)

### Look Up Your Hospital’s Safety Grade



To find out the grade of your local hospital, click the image to the left or visit [www.hospitalsafetygrade.org](http://www.hospitalsafetygrade.org).

A Hospital Safety Grade mobile app is also available for download.

## Opioid Fact Sheet Available from Choosing Wisely

Want to educate your employees on the responsible use of health care services and medications, Choosing Wisely has many downloadable resources. Among these is a fact sheet about opioid use.

The sheet:

- Describes appropriate uses as well as the potential dangers
- Lists side effects
- Discusses alternative treatments for chronic pain
- Advises how to use opioids safely
- Warns against the use of opioids while pregnant

To download the flyer, click on the picture to the right.

### Avoid Opioids for Most Long-Term Pain

#### Advice from experts

Opioids have been in the news a lot lately. To help you make sense of them, we've gathered advice from the Centers for Disease Control and Prevention, doctor's groups, and Choosing Wisely. In this guide you can read what the experts say about using opioids.



Choosing Wisely  
An initiative of the ABIM Foundation



An initiative of the ABIM Foundation

## American Occupational Therapy Association Releases Suggestions

**Choosing Wisely** An initiative of the ABIM Foundation

**AOTA** The American Occupational Therapy Association, Inc.

**Five Things Patients and Providers Should Question**

- 1 Don't provide intervention activities that are non-purposeful (e.g., cones, pogs, shoulder arc, arm balls).**  
Purposeful activities—tasks that are part of daily routines and build meaning, relevance, and personal utility such as personal care, home management, school, and work—are a core premise of occupational therapy. Research shows that using purposeful activity occupations in interventions is an effective technique for patients. Such activities can increase attention, motivation, motor performance, and persistence and engagement, resulting in better patient outcomes. Purposeful activities focus on a person's ability and lead to achievement of personal and functional goals. Conversely, non-purposeful activities do not stimulate interest or motivation, resulting in reduced patient participation and suboptimal outcomes.
- 2 Don't provide sensory-based interventions to individual children or youth without documented assessment results of difficulties processing or integrating sensory information.**  
Many children struggle with difficulties in processing and integrating sensations that negatively affect their ability to participate in meaningful and related occupations. Processing and integrating sensations are complex and multi-influenced patterns of dysfunction that must be addressed in personalized ways. Interventions that do not target the documented pattern of dysfunction are unlikely to produce effective results. Therefore, it is imperative to assess and document specific sensory difficulties before providing sensory-based interventions such as Ayres Sensory Integration®, weighted vests, listening programs, or sensory diets.
- 3 Don't use physical agent modalities (PAMs) without providing purposeful and occupation-based intervention activities.**  
The inclusion of PAMs (e.g., repetitive thermal agents, deep thermal agents, electrical/electromagnetic agents, mechanical devices) in therapeutic intervention without their application to occupational performance is not considered occupational therapy. PAMs provided with a functional component can lead to more positive health outcomes. PAMs should be integrated only as a broader occupational therapy program and intervention plan in preparation for or concurrently with purposeful activities or interventions that ultimately enhance engagement in occupation.
- 4 Don't use pulleys for individuals with a hemiplegic shoulder.**  
Use of an overhead pulley for individuals with a hemiplegic shoulder resulting from a stroke or other chronic condition is considered too aggressive and should be avoided, as it prevents the highest use of the patient developing shoulder pain. Gentle and controlled range of motion exercises and activities are preferred.
- 5 Don't provide cognitive-based interventions (e.g., paper-and-pencil tasks, table-top tasks, cognitive training software) without direct application to occupational performance.**  
To improve occupational performance, cognitive-based interventions should be embedded in an occupation relevant to the patient. Examples of occupation-based interventions include assessment opportunities, strategy building, task setting, environmental modifications, and cognitive challenge. The use of cognitive-based exercises not based on occupational performance will result in suboptimal patient outcomes.

The American Occupational Therapy Association has recently released five things physicians and patients should question. The recommendations can be downloaded by clicking on the picture to the left.

**Choosing Wisely®** is an initiative of the American Board of Internal Medicine (ABIM) Foundation that seeks to advance a national dialogue on avoiding unnecessary medical tests, treatments and procedures. It is designed to educate employers and their employees about the ***dangers and issues associated with the overuse of health care services***. The campaign helps employers encourage their employees to get involved in their health care and make informed conversations with their physicians.

To access more than 100 guides (including videos) to getting better, safer, more cost-effective care, simply click on the following link: [www.choosingwisely.org/](http://www.choosingwisely.org/).

## Guest Articles

### Overcoming Four Common Reservations about Health Coaching



**“I have zero time to devote to this.”**

A good program will handle everything, from employee health assessments to post-program results reporting and analysis. Coaching is convenient, delivered via phone or onsite, and offers self-management through an online wellness portal.

**“I have no idea where to start.”**

That’s OK. Everyone starts differently, based on readiness. Good programs are individual, and designed to suit any kind of company, at any stage of health status. Begin by

scheduling an introductory conversation to learn what a company offers, and how it can work for you.

**“Our budget is really tight this year.”**

Maybe so, but consider what absenteeism – associated with poor health – is costing you. It can be as high as \$1,685 per employee!\* Also, quality coaching programs offer a range of choices at varying engagement levels and price points for the cost-conscious.

**“Will I see a return on my investment?”**

Value of Investment (VOI) is the key. Employers who establish a healthier work culture – starting now – can see good results over time in the best pay-back there is: Optimizing the productivity of your workforce.

To learn more, watch the BeneFIT Corporate Wellness on-demand webinar, [“What is Health Coaching ... Really?”](#) or contact our Senior Client Solutions Specialist, Eileen Fallis, at 610-969-0044 or [eileen.fallis@lvhn.org](mailto:eileen.fallis@lvhn.org).

\* <https://www.cdcfoundation.org/businesspulse/healthy-workforce-infographic>



### Mark Your Calendar for Our Live Webinar

Absolutely Essential Steps to a Successful Wellness Program  
11 am, July 24, 2018

To register, click [here](#)

## WATCH YOUR MOUTH...This Summer

### *United Concordia Offers Five Tips for Healthy Smiles*

Don't take a vacation from good oral care this summer. Follow these five tips to help keep your smile healthy.

#### **1. Don't chew on ice**

Cold hard cubes [can crack or chip your teeth](#). Break fillings and crowns. And damage the wires and brackets on braces.

#### **2. Swim with your mouth closed**

Too much chlorine can soften your protective tooth enamel. Teeth can become discolored, more sensitive and prone to decay.

#### **3. Rinse after sweet treats**

Leftover sugar breaks down into acid that can damage enamel and cause cavities. Swish with water or mouthwash, or even chew sugarless gum.

#### **4. Wear lip balm with SPF 30**

[Don't skip your lips](#). UV rays can cause skin cancer, even on your lips. Too much sun can also lead to wrinkles and a dry, flaky smile.

#### **5. Prevent dental emergencies**

Wear a mouthguard during sports. Use scissors – not your teeth – to cut things. Don't chomp on hard candy and popcorn kernels. And [be prepared to handle dental emergencies](#), just in case they happen.



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Our affiliation with these national organizations is a value-added benefit for our members.

