

# Healthier Nebraska



## **JEFFERSON COMMUNITY HEALTH CENTER** *Fairbury, Nebraska*

**NHA** Nebraska  
Hospital  
Association

The influential voice of Nebraska's hospitals

**Laura J. Redoutey, FACHE**  
President

**A Publication of the Nebraska Hospital Association**

# Focused on women's health.

## *Spirit of* **Women**

*Methodist Health System is proud to be a member of Spirit of Women, devoted to helping women lead healthier lives.*

Methodist Health System is the leader in women's health services—with the hospital that delivers more babies than any other in the region. With state-of-the-art, comprehensive cardiac and cancer care. With the largest and most experienced OB/GYN practice in the metro area. With an entire medical campus and hospital dedicated to the care of women, opening in 2010. Methodist Health System offers a wide-ranging list of women's health services with a shared focus on one important aspect of treating patients—The *meaning* of care.<sup>SM</sup>



The meaning of care.<sup>SM</sup>

**METHODIST  
HOSPITAL**

**METHODIST  
PHYSICIANS  
CLINIC**

**JENNIE  
EDMUNDSON  
HOSPITAL**

**METHODIST  
WOMEN'S  
HOSPITAL**



Meet our Women's Services providers at [www.bestcare.org/womens](http://www.bestcare.org/womens).

Dr. Rebecca McCreary  
Urogynecology  
Methodist Physicians Clinic Women's Center

# Healthier Nebraska

SUMMER 2009

A publication for Nebraska  
Health Care Professionals

Healthier Nebraska is published quarterly  
by the Nebraska Hospital Association

3255 Salt Creek Circle, Ste. 100

Lincoln, NE 68504

402/742-8140 • FAX 402/742-8191

www.nhanet.org

ALL RIGHTS RESERVED

## 2009 NHA BOARD OF DIRECTORS

Harold L. Krueger, Jr., Chadron / Chairman

Glenn A. Fosdick, FACHE, Omaha / Immediate Past  
Chairman

Daniel W. Griess, Alliance / Vice Chairman

Neil Hilton, Ainsworth / Secretary

Steve Goeser, Omaha / Treasurer

Kevin Nokels, FACHE, Papillion / Director

Ronald J. Cork, O'Neill / Director

Celine Mlady, Osmond / Director

Victor Witkowicz, Lincoln / Director

Roger Reamer, Seward / Delegate

Glenn A. Fosdick, FACHE, Omaha / Alternate Delegate

Vic N. Lee, FACHE, Albion / At-Large Delegate

Tom Theroult, Omaha / District I Chair

Patrick Booth, Fremont / District II Chair

Danielle Gearhart, Sidney / District III Chair

James Ulrich, FHFMA, CPA, McCook / District IV Chair

Ryan Larsen, FACHE, Falls City / District V Chair

Laura J. Redoutey, FACHE, Lincoln / Ex-Officio

## NHA STAFF

Laura J. Redoutey, FACHE, President

Jon Borton, Vice President, Educational Services

Heather Bullock, Marketing and Events Coordinator

David Burd, Vice President, Finance

Kevin Conway, Vice President, Health Information

Patty Kahler, Executive Assistant

Al Klaasmeyer, Vice President, NHA Subsidiaries

Kim Larson, Graphic Design Specialist

Cora Micek, Advocacy Coordinator

Vicky Pfeiffer, Administrative Assistant

Kelley Porter, Director of Communications

Bruce Rieker, Vice President, Advocacy

Monica Seeland, Vice President, Quality Initiatives

Cindy Vossler, Director of Health Data

Maria Witkowicz, Director of Accounting

## DISTRIBUTION

Healthier Nebraska is distributed quarterly throughout hospitals in Nebraska. It reaches all hospital department heads including administrators, hospital physicians, managers, trustees, state legislators, the Congressional delegation and other friends of Nebraska hospitals.

# in this issue

Jefferson Community Health Center  
Continues its Mission of Serving the Community

4

A Time to Heal: A Holistic Approach  
to Health for Cancer Survivors

6

Nebraska's Biennium Budget  
and Beyond

8

Effective Tools For  
Year-Round Advocacy

10

Community Hospital Receives  
Advocacy Award

12

Economic Crisis Survey Results: Nebraska

14

NHA Board of Directors - Leadership Profile

16

Hospitals in Pursuit of Excellence  
Program Launches

18

H1N1 Planning a Top Priority

20

NHA Service Targets Workers' Compensation Claims

22

*Featured Hospital*

**Jefferson Community Health Center**  
*Healthier Nebraska*

## Healthier Nebraska Sponsors

Baird Holm	13	D.A. Davidson & Co.	13
BD Construction	20	Farm Bureau Financial Services	19
Beckenhauer Construction	22	HDR	13
Bio-Electronics	9	MMIC	11
BlueCross/BlueShield	24	Nebraska Methodist Health Systems	2
Cassling Health Care	8	Performance Group Inc.	15
CLH Architects	7	ProAssurance	19
Copic	9		

Created by  Publishing Concepts, Inc.

Virginia Robertson, Publisher • vrobertson@pcipublishing.com • 14109 Taylor Loop Road • Little Rock, AR 72223 / 501.221.9986

For advertising information contact: Kimberly Irizarry at 501.221.9986 or 800.561.4686 • kirizarry@pcipublishing.com  
visit our Web site www.pcipublishing.com

Edition 49



## JEFFERSON COMMUNITY HEALTH CENTER CONTINUES ITS MISSION OF SERVING THE COMMUNITY

By Lana Likens, Director of Public Relations, Jefferson  
Community Health Center

It's all about serving the community and providing excellent quality care. At Jefferson Community Health Center (JCHC) in Fairbury, more than 45 years of serving the community has meant growth and changes.

The most recent addition and renovation project was a \$4.4 million venture. The 11,000 square foot addition includes a new surgical area containing two operating rooms, minor procedure room, office spaces, four-bay admission/recovery area, central sterilization area and storage, new emergency room, decontamination room, outpatient reception and waiting area, and chemotherapy area.

The project also included the renovation of 700 square feet of current outpatient clinic spaces and the addition of more parking in an effort to better serve patients, visitors and staff members. The project is nearing completion, and JCHC celebrated the milestone with a ribbon cutting and dedication ceremony.

The project was funded by a

combination of donations, loans and operating revenue. The Jefferson Health Care Foundation had a goal of raising \$300,000 to support this important project for local health care and raised more than \$368,000—surpassing its goal and showing the wonderful support for health care in the community.

“We have been very pleased with our community’s support of this project, and the general support of quality health care over the years,” said Bill Welch, CEO of Jefferson Community Health Center.

JCHC’s surgical department has shown sustained growth in the last 10 years. The increases can be attributed to:

- the addition of total knee replacement surgery in 2002;

The new medical staff lounge is designed to provide a comfortable space for local physicians, PAs and visiting specialists.

- an increase in minor procedures, including the addition of colonoscopy services in 1998 and the addition of a fourth local physician;
- an increase in major procedures performed by additional specialists, including an obstetrics and gynecology specialist and a podiatrist; and
- an increase in dental surgery.





The new trauma room provides more space for staff to care for patients in an emergency.

The former surgical area was not well-suited to continue to support growth. The 345-square foot operating room was original to the facility in 1963. Additional space was needed to allow for continued future growth and consideration of additional services.

Outpatient services have seen similar growth. Outpatient visits have grown to 2,787 in 2006, up from 1,933 in 1996—a 44 percent increase. Emergency room visits have grown to 2,082 in 2006, up from 1,785 in 1996—an increase of nearly 17 percent.

“In recent years, outpatient revenue and procedures have surpassed inpatient revenues,” Welch said. “We had outgrown outpatient clinic space, and in order to plan for additional potential growth, we needed to add clinic rooms.”

Jefferson Community Health Center has a history of continued growth. The facility, which began as an acute care hospital with an attached nursing home in 1963, has added on several times:

- New patient rooms in the late 1960s. That wing has since been converted to much-needed office space;
- An additional nursing home wing in the early 1980s;

- A new community wellness center, the Bob and Wauneta Burkley Wellness Center, along with a new therapy area and main waiting area, in 1996;
- Fairbury’s first assisted-living facility, Cedarwood Assisted Living, added in 2004, is a joint project with co-ownership by JCHC and BryanLGH Health Systems.

JCHC is a private not-for-profit corporation that includes a 25-bed critical access hospital, a 39-bed long-term care facility (Gardenside), a community wellness center (The Bob and Wauneta Burkley Wellness Center), a home health agency (Jefferson Family Home Care) and 24 hour emergency services. JCHC is also part owner of Cedarwood Assisted Living, a 42-unit assisted-living facility located on the campus and attached to the hospital.

Jefferson Community



Two new chemotherapy rooms were an appreciated addition.

Health Center is very active in its community, providing educational programs and support groups, participating in community health initiatives, and partnering with many other local agencies. JCHC’s 180 full- and part-time employees are also active in their communities in many ways. **HN**



Outpatient clinic nurses Tamara Katz, RN, and Joni Backer, LPN-C, work at the new outpatient clinic nurses desk.

# A TIME TO HEAL: A HOLISTIC APPROACH TO HEALTH FOR CANCER SURVIVORS

By Kelley Porter, Director of Communications

Participants in *A Time to Heal* start the weekly sessions with gentle activity that includes light exercise with bands and scarves.



*A Time to Heal* is a 12-week wellness rehabilitation program, based on a holistic model of health, for breast cancer survivors. Much like cardiac rehabilitation for people who have had a heart attack, this program aids in recovery for women who have undergone treatment for breast cancer.

The program incorporates a series of topics to help empower women to take control of their lives, including: presentations on nutrition, vitamins and medical supplements, spirituality, exercise, healing, relaxation, resilience, body image, relationships, intention, ways to advocate for oneself, goals and happiness.

The founders of this program are Dr. Stephanie Koraleski and Dr. Kay Ryan.

Dr. Koraleski is a cancer center therapist at Methodist Hospital Cancer Center in Omaha and the daughter of a breast cancer survivor. Dr. Ryan is a coordinator

for Nursing Professional Development at Children's Hospital and Medical Center in Omaha. She serves as a health care consultant, speaker and trainer and is also a breast cancer survivor. Both women are very familiar with the side effects and after effects of breast cancer treatment.

Research on breast cancer survivors has shown that women who have access to information, who make healthy choices, and who feel able to make a difference in their own lives can do very well after treatment. *A Time to Heal* gives women access to the tools they need to be well after breast cancer.

"We both knew that if I'd had a heart attack, a stroke, or even a broken leg, I would have received rehabilitation," stated Ryan. "And yet, after a

## NEBRASKA A TIME TO HEAL SITES

METHODIST ESTABROOK CANCER CENTER, OMAHA

THE LATINO CENTER OF THE MIDLANDS, OMAHA

MY SISTER'S KEEPER, OMAHA

ST. ELIZABETH'S REGIONAL MEDICAL CENTER, LINCOLN

FREMONT AREA MEDICAL CENTER, FREMONT

GOOD SAMARITAN CANCER CENTER, KEARNEY

SAINT FRANCIS CANCER TREATMENT CENTER, GRAND ISLAND

YORK GENERAL HOSPITAL, YORK

AGING OFFICE OF WESTERN NEBRASKA, SCOTTSBLUFF

CHADRON COMMUNITY HOSPITAL, CHADRON

REGIONAL WEST MEDICAL CENTER, SCOTTSBLUFF

TRI-COUNTY HOSPITAL, LEXINGTON

CENTENNIAL PARK RETIREMENT VILLAGE, NORTH PLATTE

cancer diagnosis and surgery, chemo and radiation, a survivor is left to put their life back together without such a program.”

After treatment, individuals may have experienced serious side effects, including: fatigue, difficulty with concentration, pain, weakened immune system, muscle weakness, sleep problems, plus emotional stress, and stress in family, work and social relationships. Ryan and Koraleski researched various programs for breast cancer survivors, looking for holistic healing techniques that address physical, psychological, emotional and spiritual issues, specifically designed to promote healing and transformation.

“Steph and I just wanted to find a program that was holistic and wellness oriented, but such a program didn’t exist,” said Ryan. “After considerable research, we put together all the evidence-based pieces that really helped survivors regain their health and strength.”

The program focuses on teaching specific coping skills such as journaling, affirmation writing, exercise and stretching, meditation and relaxation techniques. Ongoing research shows that women in the program significantly improve their quality of life, hope and happiness, and reduce depression and anxiety.

Koraleski, who provides counseling to many cancer patients during and after treatment, notes that the emotional aspect of dealing with cancer can be as big a battle as the physical aspects of treatment. Most patients worry about recurrence, and some suffer from on-going depression or anxiety as a result of their cancer experience. They worry about the effects of cancer on their spouses, children, employment and their future.

Over the course of several weeks, participants are asked to look inside themselves and to select goals and activities based on personal needs, abilities and resources. Each participant is provided with action steps to continue the healing process. The objective is to encourage survivors to make personal choices that will enable them not just to survive, but to thrive after breast cancer treatment. The program facilitation team includes one health professional, a mental health practitioner and invited speakers who present on specific topics.

In 2008, a two-year grant was awarded



Dr. Stephanie Koraleski (left) and Dr. Kay Ryan, co-developers of *A Time to Heal*.

to *A Time to Heal* by the Lance Armstrong Foundation to expand the program to survivors of all cancers. The new program will be piloted in early 2010 at six sites: Methodist Estabrook Cancer Center, Omaha; Latino Center of the Midlands, Omaha; St. Elizabeth’s Regional Medical Center, Lincoln; Good Samaritan Hospital,

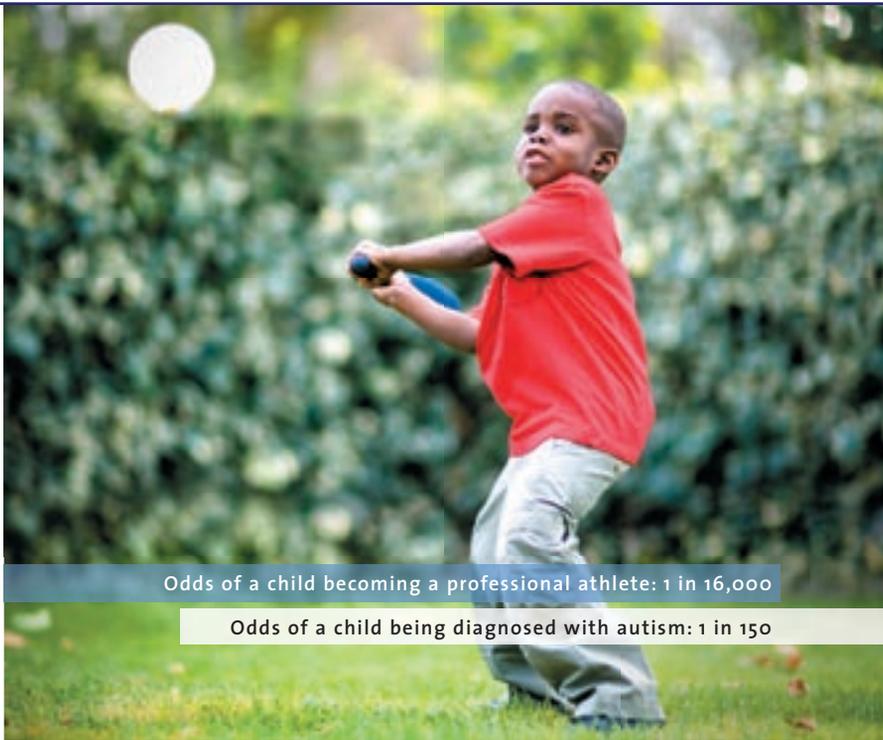
have not been through the program. The results of the research have been presented at the national American Psychosocial Oncology Convention, the National Wellness Conference and the International World Breast Cancer Conference.

For more information, please visit [www.atimetoheal.org](http://www.atimetoheal.org). 

Kearney; Shawnee Mission Medical Center, Kansas City, Mo.; and Avera McKennan Cancer Center, Sioux Falls, S.D.

Recently, the program also received a Susan G. Komen Grant of \$38,655 to continue to provide training and ongoing support and materials to facilitator teams, and to extend the program in 12 communities throughout Nebraska.

Koraleski and Ryan have been conducting research on the program’s effects since it started in 2005. Breast cancer survivors who have completed the program show statistically significant improvements in hope, happiness and holistic quality of life, and significantly less depression and anxiety compared with women who



Odds of a child becoming a professional athlete: 1 in 16,000

Odds of a child being diagnosed with autism: 1 in 150

Some signs to look for:

No big smiles or other joyful expressions by 6 months.	No babbling by 12 months.	No words by 16 months.
--	---------------------------	------------------------

To learn more of the signs of autism, visit [autismspeaks.org](http://autismspeaks.org)

  **AUTISM SPEAKS™**  
It's time to listen.

© 2007 Autism Speaks Inc. "Autism Speaks" and "It's Time To Listen" & design are trademarks owned by Autism Speaks Inc. All rights reserved.

By Bruce Rieker, Vice President, Advocacy



# Nebraska's Biennium Budget and Beyond

A strong health care delivery system is a cornerstone of strong communities and is critical to our state's economic recovery and future economic development. In this difficult economy, Nebraska's hospitals are seeing an increasing number of uninsured/underinsured and Medicaid patients. As those numbers continue to increase, many hospitals will be forced to make significant changes to the way they deliver health care—those changes will undoubtedly reduce access to care, service availability and the number of health care professionals.

The biennial budget, passed by the legislature and signed into law by the governor, was developed with four key

guidelines in mind: no tax increases, prioritize education funding, strengthen programs for vulnerable children and families, and maintain a strong cash reserve. Developing a two-year budget that funded state government and met those four criteria was not a small task, considering that Nebraska's revenues have historically increased an average of 5.4 percent per year; but, in this challenging economy, our state's revenues are projected to increase a mere 1.1 percent per year for the period affecting this budget.

In January, Nebraska entered the budget process with \$545 million in cash reserves. Simultaneously, the state's economic forecasting board was

predicting a \$377 million shortfall in anticipated revenues. By late April, the estimated shortfall had grown to more than \$600 million.

During the next two years, the American Recovery and Reinvestment Act of 2009 (ARRA) will deposit significant amounts of money in Nebraska, including: \$234 million for education, \$52 million for general use, more than \$225 million for enhanced Federal Medical Assistance Percentage (FMAP), at least \$31 million for unemployment FMAP, and nearly \$7 million for work force development. Even with those sizable infusions of cash into Nebraska's budget, the legislature and governor still used more than \$250 million of the state's reserves to fund all of the programs and services deemed necessary.

Nebraska's budget for the next two years will give health care providers a rate increase of 1.5 percent per year. Other notable increases in state expenditures for 2009-11 include:

- State aid to education - \$240.5 million
- Replacement of lost federal funds for the Beatrice State Developmental Center (BSDC) - \$49.5 million
- Developmental disability programs - \$33.1 million
- State employee retirement shortfall and defined benefit/cash balance contributions - \$27.5 million
- Health insurance for state agencies - \$22.7 million
- Public assistance - \$13.7 million
- BSDC action plan and rightsizing - \$15 million
- Department of Health and Human Services facility operations - \$4.4 million

**AFFORDABILITY.**  
IT'S ON EVERYONE'S MIND RIGHT NOW.

**CLINCORE**  
THE CORE OF CLINICAL INFORMATION

If you're looking for a cost-effective way to transition into an efficient filmless environment, Clincore PACS is a no-brainer. With fast, Web-based access to quality clinical images and reports, Clincore is a comprehensive, flexible solution to promote increased volume and efficiency.

- » Scalable PACS for any size facility
- » Available under a variety of flexible financial models
- » Convenient image access for referring physicians
- » Backed by Cassling's reliable local support

Request a free trial at [clincore.cassling.com](http://clincore.cassling.com) or call 800-228-5462 ext. 1176.

13808 F Street | Omaha, NE 68137 | Ph. 800-228-5462 | Fax: 402-334-8325 | [www.cassling.com](http://www.cassling.com)

- Medicaid - \$3 million
- Public health aid - \$2.1 million
- Norfolk College of Nursing operations - \$1.9 million

Nebraska's budget also includes several cuts for 2009-11, including a reduction of \$3.3 million for BSDC, due to a declining patient census. Additionally, five areas of provider reimbursements that receive a federal match (approximately 40 percent state/60 percent federal) were cut:

- Outpatient reimbursement rates were changed from 82.45 percent to 75 percent of hospital specific cost-to-charge ratio - \$843,137
- Child care payments for disabled children were adjusted to the amount exceeding regular child care - \$725,380
- A two-tiered payment rate that provides a 20 percent payment differential for inpatient or outpatient setting, compared to same procedures performed in an office, was created - \$637,878
- Premium payments for families at 185 percent of the federal poverty level and above - \$213,215
- Indirect Medical Education - \$49,556

If our economy does not improve, preparing the budget for the next biennium (2011-13) may be much more challenging than the development of Nebraska's current budget. Without the stimulus funds, it is estimated that state expenditures will have to increase by more than 9 percent per year to maintain the spending provided for in the current budget. In addition, when the ARRA funding is exhausted, more than \$234 million will be needed for state aid to education; correctional facilities will need \$17 million; and Medicaid appropriations will need to grow by 20 percent to replace more than \$63 million in lost federal stimulus monies.

Without substantial changes in the economy, Nebraska may enter the following biennium budget process with an estimated shortfall of \$385 million—a situation that does not bode well for patients, providers and taxpayers. Fiscal responsibility in future budget planning may necessitate deeper cuts to state-funded programs, including provider reimbursements. Lower

reimbursement rates will jeopardize an already fragile provider network. More adequate rates will enable health care professionals to continue to deliver high quality services to all Nebraskans. By emphasizing the need for adequate reimbursements, hospitals and other health care providers can continue to serve as key economic drivers throughout the state. **IN**



# Make your **NHA** membership work for you!

Nebraska Hospital Association

- *Contracted price savings*
- *100% product guarantee*
- *Free warehousing*
- *Product distribution*
- *Online order management*



**Fileroom Products**



**Print and Marketing Products**



**Promotional Items**



**Medical Labels**



**Furniture and Seating**



**PERFORMANCE Group Inc.**

**Toll-Free 1-800-913-9015**  
**402-896-9400**  
**FAX 402-896-9308**  
**www.formsguys.com**







# Effective Tools For Year-Round Advocacy

Traditional ways of doing business in the development of health care policy are quickly becoming obsolete. Term limits in Nebraska's legislature and discussions of comprehensive health reform at the federal level, coupled with the current economic recession, have intensified and accelerated the need for innovative and resourceful efforts that advance the Nebraska Hospital Association's (NHA) advocacy agenda.

Hospital leaders must be proactive in public policy development—identifying important issues and developing strategies to address them. When Nebraska's hospitals adapt, adjust and respond to new health care policy initiatives in a timely and informed manner, they position themselves as reliable, trusted resources and empower policymakers to make informed decisions.

Effective advocacy that produces substantive change is a year-round effort. During the 2009 legislative session that adjourned on May 29, NHA members and staff took active roles on numerous bills by promoting those that positively impacted the delivery of health care and opposing those that would have an adverse affect on the health of the Nebraskans served by our state's community hospitals; however, there is a great deal more to be done.

The NHA encourages all of its members to participate in activities throughout the year that build stronger working relationships with those who have the power to change health care policy with one vote. Strong working relationships with legislators are the foundation for thoughtful, informed and substantive public policy changes. In cooperation with its members, the NHA staff has developed several programs and tools that hospital leaders can use to implement successful advocacy efforts.

- **Policy Development Committee:** In July of each year, the policy development process is initiated when the NHA surveys its members on state and federal issues. In

August, the Policy Development Committee (PDC), a group of two dozen hospital executives and policymakers, meets to evaluate the outcome of the Annual Membership Survey. The PDC reviews the members' comments, prioritization of the issues and the policy briefs prepared by staff. The PDC will then forward its recommendations to the membership for review during the September round of district meetings, where final action on each of the issues will be determined by the NHA Board of Directors in October.

- **Advocacy Teams:** Advocacy teams are members of the hospital team selected by the hospital's chief executive officer to serve as advisors, planners and active participants in the hospital's political and community advocacy efforts. The team gathers and delivers political and community information for the CEO and helps develop and implement strategies to influence policymakers at both the state and federal level. Advocacy teams also coordinate grassroots political action, such as letter writing, meetings with legislators and hosting policymakers to visit their facility.
- **Mini-Residencies:** Mini-residencies are designed to give policymakers a first-hand look at health care delivery. The program is designed to educate legislators about health care issues and encourage them to view local hospitals as reliable sources of information. It is an opportunity to establish a comfortable working relationship and open a line of communication with

the policymaker, which can help advance the NHA's advocacy agenda.

- **CEO/Policymaker Meetings:** CEO meetings with state senators and members of Nebraska's congressional delegation are designed to educate policymakers about health care issues and further develop comfortable working relationships. Such meetings may take place at the hospital, state capitol, Washington, D.C., or other location.
- **AHAPAC:** Contributions to the AHAPAC are crucial for effectively promoting the NHA's advocacy agenda to Nebraska representatives at the federal level. As the premier vehicle for collecting candidate contributions, the AHAPAC sets aside funding in order to highlight the importance of health care to Nebraska leadership in Washington, D.C.
- **Advocacy Day:** In March of each year, the NHA will host its annual Advocacy Day. All members of the NHA are invited and encouraged to attend. The one-half day agenda includes presentations on key legislative and regulatory issues, and provides hospital representatives the opportunity to meet with state senators and advance the NHA's advocacy agenda during the Legislative Luncheon. Please tentatively mark your calendars for next year's NHA Advocacy Day on March 9, 2010.

If you would like further information on any of the programs described above, please contact an NHA staff member at (402) 742-8140. 



## Health Care Reform Necessary; Public Plan Not The Solution

The Nebraska Hospital Association (NHA) and its member hospitals deem health care reform necessary and are committed to doing our part to make health care more affordable and effective. During the past few years, the American Hospital Association and other key stakeholders of the state and federal health care community discussed the changes needed to successfully address the challenges facing Americans. The result was a national framework for change titled *Health for Life – Better Health, Better Health Care*.

*Health for Life* is not a hospital plan for health reform—but a roadmap for change and for building relationships and coalitions that could guide us on what will be, under any set of economic and political circumstances, a long and difficult journey. The framework identifies five essential elements of reform upon which we must build if our nation wants to achieve better health and better health care: health coverage for all, paid for by all; a focus on wellness; the most efficient, affordable care; the highest quality care; and the best information—for both consumers and providers.

All Americans should have access to affordable, high quality health care services and we applaud the Obama administration for a strong commitment to reforming our nation's health care system. However, the NHA is concerned that

the proposed public health care plan will put our entire health system at risk.

In the June 7 *Omaha World-Herald*, Steve Martin, president and CEO of Blue Cross and Blue Shield of Nebraska, expressed his concerns about any proposal that would create a government-administered insurance plan or public plan. The NHA agrees with Mr. Martin's comments and the need for sustainable health reform to enhance quality, improve the overall health of the population and reduce cost growth.

Just as Mr. Martin outlined in his editorial, the NHA is also concerned about the possible elimination of other health care coverage choices due to the millions of people estimated to move to a government program in its first year. One of the proposals would function like Medicare and compete with private insurance offering employers and individuals an alternative to obtaining health insurance in the private market. And just like Medicare, it too will likely be grossly underfunded. The leap will eventually drive out private insurers. If we want to improve the current health care system, we have to have true price competition, in which *all* public and private payers “compete” fairly and consumers have a choice.

Combine the realities of a lack of access to affordable health care with a population that is rapidly aging, an obesity epidemic and

an ever increasing prevalence of diabetes, and there's more cause for concern. Compounding the problem, government payers—like Medicare and Medicaid—pay *less* than what it actually *costs* to treat their beneficiaries, leaving hospitals to make up the difference or shift the cost to other payers.

According to the *2008 Nebraska Hospitals Community Benefits Report*, Nebraska's hospitals were responsible for covering nearly \$477 million in unpaid costs of public programs in fiscal year 2007. Clearly, expenditures of this magnitude are unsustainable.

With any proposal of a government-regulated program, providers will be forced to examine their ability to continue providing services, potentially resulting in decreased access to quality health care and ultimately jeopardizing the health of our communities.

The nation's health care system is in critical condition, but momentum is building to solve the problems. While there is no easy fix, steps toward imperative reform—at the federal and state level—will make a difference. We need to make health care a priority and ensure that health care coverage is affordable and accessible for all. Together, hospitals, health care providers, insurance companies, businesses and government can work together to make a difference for Nebraska families and our future generations. **HN**

# Community Hospital Receives Advocacy Award

Every year, the Nebraska Hospital Association presents the *Advocacy Team of the Year Award* during its annual Advocacy Day event. The award honors one hospital advocacy team for their collective commitment to advance health care issues

Johanns and Nelson, advocating for Nebraska's hospitals and other health care-related legislation. In addition to this continued correspondence, Community Hospital has hosted numerous elected officials to give them a first-hand look at the

for the message being delivered," Ulrich said.

The advocacy team at Community Hospital recognizes that effective advocacy is an ongoing effort. "The focus of advocacy efforts often changes from week to week,"



Community Hospital was recently awarded the Nebraska Hospital Association 2008 Advocacy Award for working with elected officials both statewide and nationally to advocate for rural hospitals and health care legislation. Those helping in the hospital's effort include: (front row) Doris Blume, Business Office Manager; Troy Bruntz, Vice President of Finance and CFO; Leanne Miller, Director of Human Resources; and Jan Fidler, Vice President of Patient Care Services; (back row) Karen Klimont, Vice President of Ancillary Services; Jim Ulrich, President and CEO; Brian Rokusek, McCook Clinic Practice Administrator; and Anthony Rodewald, Director of Pharmacy.

that are important to both their facility and community. This year, the NHA was delighted to invite Community Hospital Chief Executive Officer Jim Ulrich to accept the award on his team's behalf.

In 2008, Ulrich and his knowledgeable team of vice presidents, medical staff and hospital professional staff were in regular contact with their elected officials, including Senator Mark Christensen, Congressman Smith and U.S. Senators

complex health care delivery and finance system.

"Being an advocate for quality and accessible health care in both rural and urban settings entails educating and discussing how proposed legislation can impact our hospital, rural hospitals, or even the health care industry as a whole. Developing relationships with our Congressional leaders and their legislative assistants fosters a level of trust and respect

Ulrich said. "But it's great to have the opportunity to share our viewpoint on how legislation can affect rural health care. It's fantastic to be recognized for these efforts."

Community Hospital was nominated along with four other Nebraska hospitals: Methodist Hospital in Omaha, Madonna Rehabilitation Hospital in Lincoln, Pender Community Hospital in Pender, and St. Francis Memorial Hospital in West Point. **HN**



**D.A. Davidson & Co.** member SIPC

## Hands-On Help With Health Care Finance

Experienced with using both revenue and general obligation bonds, D.A. Davidson & Co. is exceptionally qualified to assist healthcare institutions with infrastructure financing. Types of organizations we have served include hospital systems, independent hospitals, community hospitals, critical access hospitals and senior living facilities.

Call D.A. Davidson & Co., while you are in the planning stages for a no cost consultation.

**Dan Smith** | 800-394-9219  
*Senior Vice President, Public Finance* | 402-392-7979

**Paul Grieger** | 800-528-5145  
*Vice President, Public Finance* | 402-392-7986

**Jerry Spethman** | 866-466-9368  
*Vice President, Public Finance* | 402-392-7933

1111 North 102nd Court, Suite 300  
Omaha, NE 68114

[www.davidsoncompanies.com/ficm](http://www.davidsoncompanies.com/ficm)

11/08

## Helping our health care clients feel better

For over 40 years, health care clients have entrusted us to provide general and special representation to help them manage the varied health care complexities encountered in the industry. Our dedicated health care team continues to bring valuable experience to clients throughout the Midwest. To learn how our focus on the health care industry can benefit your organization, visit our web site at [www.bairdholm.com](http://www.bairdholm.com).



**BAIRDHOLM** LLP  
ATTORNEYS AT LAW

1500 Woodmen Tower • Omaha, NE 68102  
402.344.0500 • [www.bairdholm.com](http://www.bairdholm.com)



## Visionary

Serving all of greater Nebraska's healthcare design needs

Methodist Women's Hospital  
Omaha, NE



ONE COMPANY | *Many Solutions*®

[www.hdrinc.com](http://www.hdrinc.com)



# Economic Crisis Survey Results: Nebraska

In March, the American Hospital Association (AHA) conducted a nationwide survey, *The Economic Crisis: Ongoing Monitoring of Impact on Hospitals Survey*. Of the 4,946 community hospitals that received the survey, over 1,000 responses were received, providing a broad representation of hospitals. The

than double what it was a year ago.

Nationally, the majority of hospitals reported that fewer patients are seeking inpatient and elective services; however, many hospitals are seeing more patients covered by Medicaid or other public programs. In Nebraska, 40 percent of hospitals reported an increase of patients covered by Medicaid, SCHIP and/or other programs for low income populations.

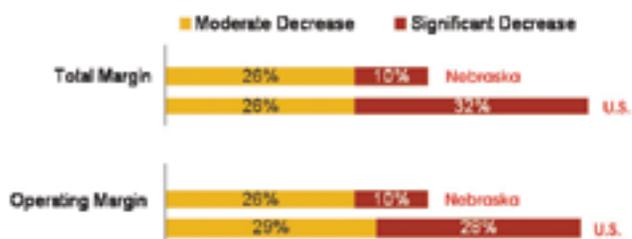
The need for hospital-subsidized services, such as clinics, screenings and outreach, is increasing, and at the same time, charitable contributions are declining for many hospitals. Over the last seven years,

In addition, the survey also found that the economy is affecting hospitals statewide, with nearly eight in 10 hospitals making financial cutbacks to help weather the economic storm. Sixty-three percent of responding hospitals are making administrative cuts, and nearly one in five hospitals reported reducing services their community depends on, such as behavioral health programs, post acute care, clinics and patient education.

Despite taking these steps, the majority of hospitals are experiencing moderate to significant declines in their financial health in 2009 versus the same period in 2008. Many hospitals are struggling to make ends meet, with nearly 30 percent expecting losses in the first quarter of 2009, jeopardizing their mission of caring for their communities.

For the full NHA *Economic Crisis Survey Results: Nebraska*, visit [www.nhanet.org](http://www.nhanet.org). 

## Hospitals reporting a moderate to significant decrease in total and operating margin, 2009 calendar year-to-date versus same period last year



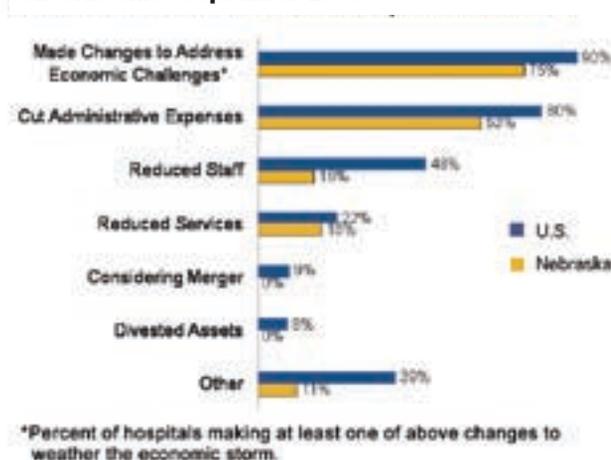
Nebraska Hospital Association (NHA) coordinated efforts with the AHA to provide state specific data.

Data shows that six out of 10 hospitals nationally, and five out of 10 Nebraska hospitals, are seeing a greater proportion of patients without insurance coming through their emergency departments—at the same time, 16 percent of hospitals reported staff reductions. Recent employment information from the Bureau of Labor Statistics confirms that hospital employment is no longer growing, and the national number of mass layoffs for hospitals reported in February was more

the NHA reports that community benefits provided by hospitals have more than tripled.

“Despite the increasingly important role hospitals play in Nebraska communities, they are just as susceptible to feeling the impact of a downturn in the economy,” said NHA President Laura J. Redoutey, FACHE.

## Hospitals making changes in response to economic concerns since September 2008



# Make sure your family has a plan in case of an emergency.



Fill out these cards, and give one to each member of your family to make sure they know who to call and where to meet in case of an emergency. For more information on how to make a family emergency plan, or for additional cards, go to [ready.gov](http://ready.gov)



**Family Emergency Plan** 

EMERGENCY CONTACT NAME: \_\_\_\_\_  
 TELEPHONE: \_\_\_\_\_

OUT-OF-TOWN CONTACT NAME: \_\_\_\_\_  
 TELEPHONE: \_\_\_\_\_

NEIGHBORHOOD MEETING PLACE: \_\_\_\_\_  
 TELEPHONE: \_\_\_\_\_

OTHER IMPORTANT INFORMATION: \_\_\_\_\_

DIAL 911 FOR EMERGENCIES

**Ready** 

**Family Emergency Plan** 

EMERGENCY CONTACT NAME: \_\_\_\_\_  
 TELEPHONE: \_\_\_\_\_

OUT-OF-TOWN CONTACT NAME: \_\_\_\_\_  
 TELEPHONE: \_\_\_\_\_

NEIGHBORHOOD MEETING PLACE: \_\_\_\_\_  
 TELEPHONE: \_\_\_\_\_

OTHER IMPORTANT INFORMATION: \_\_\_\_\_

DIAL 911 FOR EMERGENCIES

**Ready** 



## BUILD ON EXPERIENCE.

In healthcare, more than any other type of building project, experience counts. Before you build, talk to the experts in healthcare construction. Talk to BD.

209 East 6th Street ■ Post Office Box 726 ■ Kearney, NE 68848  
**TEL 308.234.1836 ■ [www.bdconstruction.com](http://www.bdconstruction.com)**





## Steve Goeser, President and Chief Executive Officer, Nebraska Methodist Hospital

After graduating from Creighton University in 1978, Steve Goeser began his career in health care as a lab director at Rosary Hospital in Corning, Iowa. He made his move into administration in 1983, when he transitioned from the lab director at Audubon County Memorial Hospital in Audubon, Iowa, to the position as the operations administration director at Palo Alto County Hospital in Emmetsburg, Iowa.

In 1988, Steve Goeser took the next

*“The Nebraska Hospital Association’s advocacy efforts at the state and federal level are first and foremost in assisting our hospital in its mission.”*

step in his career as Administrator and CEO at Orange City Municipal Hospital and Medical Clinic in Orange City, Iowa. “I was asked to apply for a rural hospital administrator position after several years as a medical technologist and manager of ancillary departments,” said Goeser.

He served as the chief executive officer of Myrtue Memorial Hospital, Shelby County Medical Corporation and the Prairie Rose Mental Health Center in Harlan, Iowa. The three organizations act as an integrated rural health system consisting of a 52-bed hospital, a primary care clinic with three satellites, and a community mental health center forming the Shelby County Health System. The

clinic corporation employs practitioners as well as operating the main clinic in Harlan and rural health clinics in Elk Horn, Avoca and Shelby.

Goeser joined Methodist Hospital in June 2004 as vice president with responsibility for the administrative direction of the hospital’s Home Health program, the Methodist Estabrook Cancer Center and the departments of Pastoral Services, Volunteers in Partnership (VIP), Medical Records, Transcription, Referral Communications, and the Hospital and State Tumor Registries. Goeser was promoted to executive vice president and chief operating officer in June 2006.

In 2008, Methodist Health System President and CEO John M. Fraser announced that Goeser had been promoted to president and chief executive officer of Methodist Hospital. In his current capacity, Goeser has overall administrative responsibility for Methodist Hospital and its divisions, including the Methodist Women’s Hospital.

Goeser earned his bachelor’s degree at Creighton University and his master’s of business administration in health care administration from City University in Bellevue, Washington.

Through his years of leadership, Goeser has become a Fellow in the American College of Healthcare Executives and is a recipient of numerous leadership awards, including the IH & HS Excellence in Leadership Award, the American College of Healthcare Executives 1996 Regent’s Award, and the James B. Seaman II Young Administrator’s Achievement Award in 1995.

Goeser has been involved in hospital

associations in both Iowa and Nebraska. “The Nebraska Hospital Association’s advocacy efforts at the state and federal level are first and foremost in assisting our hospital in its mission.” His grassroots efforts include testifying before the Senate Special Committee on Aging on Medicare reform, presenting to Congressional health care aides on proposed transfer rules, and serving on American Hospital Association’s (AHA) special taskforce on HIPAA’s impact on America’s hospitals.

### *About Nebraska Methodist Hospital and its key programs:*

Nebraska Methodist Hospital serves the Omaha metropolitan area with affiliated hospitals and clinics in Council Bluffs, Iowa; Red Oak, Iowa; Glenwood, Iowa; Tabor, Iowa; Louisville, Neb.; and Valley, Neb.

The hospital is a 430-bed acute care hospital serving Omaha and the surrounding region. Nearly 2,500 employees, including 439 physicians on active staff and 692 nurses, have a hand in delivering positive experiences and positive outcomes for more than 30,000 patients treated at Methodist each year.

Established in 1891 by members of Omaha’s Methodist Church, Nebraska Methodist Hospital opened its doors later that year at the intersection of 20<sup>th</sup> and Harney Streets. In 1908, Methodist Hospital moved from its original frame building to a state-of-the-art brick structure at 36<sup>th</sup> and Cuming Streets. After 60 years and four major additions to this location, Methodist made the move west to a modern structure near 84<sup>th</sup> and Dodge Streets.

Methodist will open the Methodist

Women's Hospital at 192<sup>nd</sup> Street and West Dodge Road in 2010. Upon completion, the 116-bed facility will be the first hospital dedicated to women's health services in the region. The opening of the new hospital will provide space at the main hospital for much-needed renovations and expansion of services.

Today, Methodist Hospital provides a variety of consumer-preferred services, such as:

- Quality cancer care requiring the finest clinical experts and technology.
- Excellent cardiac and vascular services.
- Comprehensive diagnostic imaging services, featuring state-of-the-art technologies.
- A full range of educational, medical and surgical services.
- Compassionate and experienced orthopedics and rehabilitation services.
- First hospital and medical campus solely dedicated to women's health services, including OB-GYN, perinatal and birth services.
- Omaha's only Sexual Assault Nurse Examiner/Sexual Assault Response Team (SANE/SART) program from survivors of rape and sexual assault.

*What are the new and exciting things happening right now at your hospital?*

"We are building the area's first dedicated women's hospital in the region," said Goeser. Methodist Women's Hospital contains amenities including all private rooms, family space, green space, hotel-style room service, decentralized patient check-in and decentralized nursing stations. The 28 neonatal intensive care unit (NICU) beds planned for the hospital should help alleviate the area's shortage of such beds.

Since the original announcement to build the women's hospital in December 2005, physicians and staff from throughout Methodist Health System have provided input on the design and clinical services to be offered at the new facility. Included in the plan is a 150,000-square-foot medical office building to house a variety of specialists, and a full service emergency department and urgent care.

Goeser said anticipated growth of the population in the area combined with Methodist's experience in women's health care services helped drive the decision to

build a women's hospital at this location. Methodist Physicians Clinic, another affiliate of Methodist Health System, opened the region's first health care facility dedicated to women in early 2002 near 90<sup>th</sup> Street and West Dodge Road.

The Methodist Women's Hospital is part of a larger strategy which includes construction of the new hospital, as well as renovations and new construction projects at Methodist Hospital, 8303 Dodge Street. In addition to the new parking structure project already underway, the hospital has plans for a new pathology center, major expansion of the surgery department and additional private rooms.

Goeser said moving much of the hospital's obstetric and gynecology services to the new facility will allow Methodist Hospital to create capacity and provide space to expand some lines of service. He said Methodist plans to maintain a unit for high-risk pregnancies.

*What are the toughest challenges your hospital is facing?*

With the uncertain economy that we are all facing, patient payment issues have

become the toughest challenge for the hospital. "We know many of our patients have concerns about losing jobs and not being able to pay for a procedure," said Goeser. "That is why we are encouraging everyone who may need surgery, or any costly medical procedure, to share their concerns with us as early in the process as possible." Methodist Hospital is more than willing to work with patients regarding payment plans and potential discounts, but would prefer to make arrangements up front rather than when the account is 90-plus days past due.

*What do you see for the future of health care in the next five years?*

Goeser believes with President Obama and a Democrat-controlled Congress, there is going to be a great deal of discussion at the national, state and local levels about health care reform. He stated, "Until we get some idea as to the changes the administration has in store for health care—if any—it will be difficult to get a read on what the future of health care will look like." **HN**

Proactive

Committed

Deep-rooted



At COPIC, we work as your partner from day one—providing aggressive defense of good medicine plus a wide range of practical tools and resources proven to reduce risk and enhance patient care.



**COPIC**  
Better Medicine • Better Lives

*Today and in the future, you can count on COPIC to be proactive, committed, and deep-rooted.*  
Contact Ms. Pat Zimmer, Director of Sales, at (800) 421-1834, x6186 or email sales@copic.com for more information or to obtain an application or premium indication.

233 South 13th Street, Suite 1200, Lincoln, NE 68508 • 7351 East Lowry Boulevard, Denver, CO 80230 • www.callcopic.com  
Exclusively endorsed by the Nebraska Medical Association and the Colorado Medical Society

# Hospitals in Pursuit of Excellence Program Launches

By Monica Seeland, RHIA, Vice President, Quality Initiatives



Ten years ago, the Institute of Medicine (IOM) published its report *To Err is Human: Building a Safer Health Care System*, in which it estimated that as many as 98,000 people may die each year from preventable harm in hospitals. In a follow up report, *Crossing the Quality Chasm: A New Health System for the 21<sup>st</sup> Century*, the IOM introduced six aims for improvement in care: care that is safe, timely, effective, efficient, equitable and patient centered.

Despite advances in patient safety made during the last ten years, problems still exist. According to

patient experience and outcomes. The goal is to smooth the path for hospitals to achieve excellence in clinical, operational and financial performance. The program is a platform to help hospitals accelerate their journeys to excellence for the patient experience and in clinical and operational performance. The initiative focuses on building hospital capacity to internally improve and bring additional value to patients and communities.

The cornerstone of *Hospitals in Pursuit of Excellence* is the six IOM aims. Hospital leaders can achieve

- **Manage organization variability:** Some variables, such as scheduling of elective surgery, can be smoothed out to achieve more even patient flow.
- **Remove waste:** This includes removing inefficiencies such as unnecessary process steps, and can have a direct, positive impact on the bottom line.
- **Eliminate defects:** Finding and resolving problem points will result in greater efficiencies and better health outcomes.



the Centers for Disease Control and Prevention, 1.7 million health care acquired infections occur in hospitals each year. In a 2006 report, the IOM estimated the number of preventable drug related injuries in hospitals at about 400,000 annually.

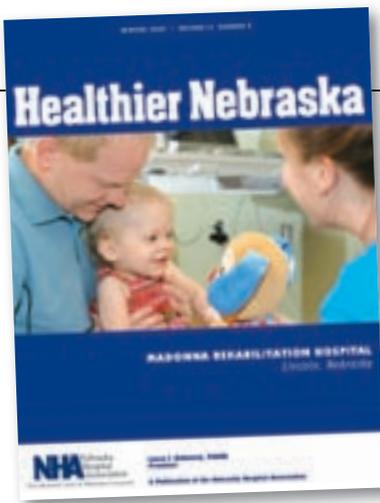
*Hospitals in Pursuit of Excellence* is a program of the American Hospital Association (AHA). Their mission is to bring field-tested practices, proven strategies, tools and education to engage, support and advance hospital leaders' ongoing efforts to improve the

these six aims by applying the principles of performance excellence:

- **Perfect the patient experience:** Care must be respectful of, and responsible to, individual preferences, needs and values.
- **Create a high reliability culture:** Organizational cultures must embrace the transformation of hospitals into places where each patient receives the best quality care, every single time.

- **Reduce process variation:** Using quality tools and frameworks can increase consistence and reduce errors in both the clinical delivery of care and the policies and procedures that support care.

This guide is the beginning of a commitment to highlight hospitals and health systems that are leading the way toward performance excellence in these focus areas. Visit [www.ahaqualitycenter.org/hpoe](http://www.ahaqualitycenter.org/hpoe) to view the complete guide and valuable other resources. Source: American Hospital Association. **HN**



## For Advertising Information

contact Kimberly Irizarry  
Publishing Concepts, Inc.  
by phone at  
501/221-9986  
or by email at  
kirizarry@pcipublishing.com

# Take advantage of this opportunity.

The Nebraska Hospital Association works together with Western Agricultural Insurance Company and LaMair-Mulock-Condon Co. to make Workers' Compensation coverage available to its members. To learn more about the coverage, and the education and loss prevention services available, call 402-742-8162.



**FARM BUREAU FINANCIAL SERVICES**

*Insurance • Investments*

[www.fbfs.com](http://www.fbfs.com)

Western Agricultural Insurance Company\*/West Des Moines, IA.  
\*Company of Farm Bureau Financial Services © 2008 FBL Financial Group, Inc. WC002 (12-08)

*Professional Liability Insurance & Risk Management Services for Hospitals & Clinics*

## Caring Counts

**W**hile you focus on caring for your patients, you can count on us to help protect your organization. For over 20 years, we've helped community hospitals, clinics and physicians practice with confidence by providing professional liability insurance that works.

We support your mission with practical underwriting, results-oriented risk management and expert claims defense. Call 800/279-8331 or visit [www.ProAssurance.com](http://www.ProAssurance.com) to find out how we can work together to care for your community.



 **PROASSURANCE**  
Treated Fairly

Professional Liability Insurance & Risk Management Services • Rated A- (Excellent) by A.M. Best

# H1N1 planning a top priority

By Jon Borton, MS, Vice President, Educational Service



Hospital emergency preparedness staff found themselves putting pandemic planning to the test with the appearance of the H1N1 influenza virus. As the first notices started being distributed from the Centers for Disease Control and Prevention on the weekend of April 25-26, 2009, NHA began sharing with our member hospitals the latest information and resources regarding the outbreak. As with any public health emergency, hospitals were encouraged to report any suspected H1N1 cases to their local county health department. NHA worked closely throughout the incident with the Nebraska Department of

Health and Human Services in verifying information about medical supply/equipment needs and Nebraska's portion of the national stockpile of antiviral medications.

Study of the H1N1 virus continues and will no doubt factor into response efforts during the flu season this fall. In the interim, it is important for hospitals to take steps in revisiting their response plans and communicating this information to hospital staff.

Steps to consider are:

- Review pandemic flu or biological response plans and monitor CDC Interim guidance for hospitals,

specifically 1) infection control for patients in a health care setting, 2) identifying and caring for patients, and 3) any interim guidance for influenza screening.

- Describe precautions or protocols expected to be taken by all hospital staff members (i.e. hand washing).
- Describe precautions or protocols (including protective equipment) expected to be taken by staff members working directly with infected or potentially infected patients.
- Describe precautions or protocols (i.e. isolation or protective equipment) to be taken with regards to infected patients.
- Remind staff of existing sick leave policy and procedures.
- Identify any special policies or procedures that may be relevant in the event that a staff member has flu-like symptoms.
- Describe where relevant information updates or changes in protocols or procedures can be found (likely on Web site or bulletin boards).
- Identify to whom employees can bring any concerns (i.e. supervisor, health clinic, human resources, etc.).
- Describe any relevant reporting guidelines for the hospital.

NHA will continue to provide the latest information related to hospital emergency preparedness through the weekly electronic newsletter *NHA Emergency Preparedness News*. If you are not receiving this newsletter and wish to do so, please contact Jon Borton, vice president, Educational Services, at (402) 742-8147 or [jborton@nhanet.org](mailto:jborton@nhanet.org). 



be

## CONFIDENT

When your patients' health and safety are at stake, how important is it that your medical equipment is working and working right?

Bio-Electronics maximizes uptime and safety with regular inspections and preventive maintenance. Our *CompliancePlus* process assures full compliance.

With service rates 40 to 60% below most equipment manufacturers and many value-added services, Bio-Electronics is your best choice for expert medical equipment maintenance and management.



**Bio-Electronics**

Expert medical equipment maintenance & management

Phone: 402-742-8160

Toll free: 888-449-4980

[www.Bio-Electronics.com](http://www.Bio-Electronics.com)

A subsidiary of the



# NEBRASKA HOSPITALS

A MISSION TO CARE. THE VISION TO LEAD.

## NHA 2009 ANNUAL CONVENTION

OCTOBER 14-16, 2009  
CORNHUSKER MARRIOTT HOTEL  
LINCOLN, NEBRASKA

**NHA** Nebraska  
Hospital  
Association

The influential voice of Nebraska's hospitals

### WEDNESDAY, OCTOBER 14

#### PRE-CONFERENCE WORKSHOP

##### **The Agencies of Health Care Leadership**

Harry Chambers



This content-rich program will address the compelling agencies that define exceptional leadership in today's health care organizations. Chambers will discuss the realities of today's health care environment, the changes in employee perceptions, and the strategies and behaviors that are critical to today's leaders.

#### OPENING KEYNOTE

##### **Silence Kills: The Seven Crucial Conversations in Health Care**

Joseph Grenny



All too often, well-intentioned professionals in health care organizations choose not to speak up when they're concerned with the behavior, decisions or actions of a colleague. This is making a big impact on the health care industry. "Silence Kills" reviews seven categories of especially difficult conversations and, at the same time, appear to be especially essential for people in health care to master. Grenny is the co-author of the best seller *Crucial Conversations*.

### THURSDAY, OCTOBER 15

#### KEYNOTE SESSION 2

##### **Living Great Leadership**

Todd Linden



Participants will have an opportunity to share their best leadership ideas. The presentation will focus on the best strategies for developing a leadership culture for your hospital, your community – and even yourself. Attendees will leave the session armed with practical and proven ideas for empowering leadership – and gain inspiration to make it happen.



#### KEYNOTE SESSION 3

##### **Thriving in Extraordinary Times**

John Robbins, FACHE

In these extraordinary times, the health care environment will continue to be more challenging, which increases the demands and pressures on its leaders. It is imperative for them to learn how to better cope with these challenges in their professional and personal lives. Practical suggestions of life lessons will help leaders thrive and serve with greater purpose, optimism, strength and effectiveness.

### FRIDAY, OCTOBER 16

#### KEYNOTE SESSION 4

##### **TRUST is Everything: Saving Lives, Changing Lives from Bedside to Board Room**

Brian Wong, MD, MPH



While mistrust, misalignment and miscommunication are endemic to almost all hospital/physician relationships, it is possible to overcome years of discord when all parties can learn the value and experience the power of mutually trustworthy behavior. Dr. Wong teaches proven methods for creating a cycle of measurable, sustainable improvement.

### *Caring Kind Luncheon 30<sup>th</sup> Anniversary*



##### **Care of the Caregiver**

Sally Karioth, RN, PhD

Caregivers will take a look at their own gifts, celebrate the exquisite moments and explore the concepts associated with compassion fatigue, as well as help distinguish between minor and major events. Dr. Karioth will help identify life traps and find ways to celebrate an individual's differences, focusing on taking care of oneself and increasing emotional intelligence.

# NHA Services targets workers' compensation claims



By Al Klaasmeyer, Vice President, NHA Subsidiaries

The Nebraska Hospital Association Services, Inc. (NHA Services) initiated a Nebraska Safety Committee comprised of representatives from NHA member hospitals participating in the NHA/LMC/Farm Bureau Workers' Compensation Program. Individuals from LaMair Mulock Condon Co. and Farm Bureau Financial Services serve as the staff component of this committee. Twenty-six hospitals are presently enrolled in the NHA/LMC/Farm Bureau Workers' Compensation Program.

This committee provides input into the semi-annual Workers' Compensation Seminars which brings

together individuals for informational and educational offerings related to Workers Compensation. In addition the committee highlights specific areas related to the safety of your hospital employees.

The NHA Safety Committee monitors the number and the types of workers compensation claims. Falls, Lifting and Strains make up 66 percent of the total claims submitted for the 2006, 2007 and 2008 calendar years. As a result of this figure, the NHA Safety Committee has and will continue to target much of their efforts into providing educational services to NHA/LMC/Farm Bureau

Workers Compensation NHA member hospitals and to reduce the number of claims for falls, lifting and strains.

The NHA Safety Committee will be recognizing hospitals for their efforts in reducing the number of workers' compensation claims over a period of time with a NHA Safety Award. Criteria for the awards are being developed and awards will be presented in the fall of 2009. Not every hospital will receive an award, but each hospital significantly reducing workers' compensation claims will benefit by having healthier employees and the possibility of lower premiums for workers' compensation. **HN**

## 130 years and counting...



Boone County Health Center, Albion



**BECKENHAUER**  
CONSTRUCTION, INC.

Established 1878

[www.BeckenhauerConstruction.com](http://www.BeckenhauerConstruction.com) • 402.371.5363

# “The only constant we see is change.”

Learn how MMIC is continually developing ways to protect you from and to help you prevent medical malpractice lawsuits.

For 28 years, we've seen how malpractice issues can challenge physicians. We're here to help protect your assets with medical professional liability insurance coverage that is backed with:

- Unsurpassable risk management and patient safety resources
- Competitive pricing through effective underwriting
- Strong defense-minded philosophy to protect your interests
- Service and support that puts you first

To learn more about how MMIC can help protect you, call 1-888-397-3034.

“A” Excellent rating from A. M. Best

[MMICGroup.com](http://MMICGroup.com)



Insurance, Claim & Risk Management • Technology • Customer Service

to protect against & prevent malpractice

to help your practice thrive

that puts you first

# Soaring to new heights

Blue Cross and Blue Shield of Nebraska ranks **"Highest in Member Satisfaction among Health Plans in the Heartland Region"** (IA, KS, MO, NE), according to the J.D. Power and Associates 2009 National Health Insurance Plan Study.<sup>SM</sup>

Customers rated BCBSNE on seven key factors:

**Coverage and benefits • Provider choice • Claims processing  
Approval processes • Statements • Customer Service  
Information and Communication**



Blue Cross and Blue Shield of Nebraska received the highest numerical score among large commercial health plans in the Heartland region in the proprietary J.D. Power and Associates 2009 National Health Insurance Plan Study.<sup>SM</sup>

Study based on 33,007 total member responses, measuring 10 plans in the Heartland region (IA, KS, MO, NE) (excludes Medicare and Medicaid). Proprietary study results are based on experiences and perceptions of members surveyed in December 2008 and January 2009. Your experiences may vary. Visit [jdpower.com](http://jdpower.com)



**BlueCross BlueShield  
of Nebraska**

**One less thing to worry about.<sup>SM</sup>**

[bcbsne.com](http://bcbsne.com)

An Independent Licensee of the Blue Cross and Blue Shield Association.