

Congratulations

to the ***Rhode Island Medical Journal*** for
100 years of advancing healthcare in our state

At Blue Cross & Blue Shield of Rhode Island, we're proud
to support the *Rhode Island Medical Journal* and work with
the Rhode Island Medical Society in making healthcare
accessible, affordable, and of the highest quality.

We are partnering with healthcare providers across the state
to establish accountable care organizations that combine innovative
payment models, patient data, and improved coordination of care to ensure
our state continues to remain a healthcare leader for the next century.



The Good News is . . .

that Thousands More Rhode Islanders, Formerly Ineligible, May Now Enjoy the Protection of

Blue



Cross

As recommended by many Rhode Island physicians, Blue Cross now extends protection to Self-employed, unemployed, retired, or other persons employed in establishments having five or less employees. Opportunity for this new individual enrollment is *open to October 18th only*.

This new, widespread Blue Cross service, bringing the important protection of prepaid hospital service to the vast majority of Rhode Island citizens, will undoubtedly have your active support through recommendation to all eligible people within your sphere of professional and social contacts.

Farmers, fishermen, domestic employees, professional people, small business men—are among those who may now join. The age limit is 65 years and the usual Blue Cross health statement is required. The waiting period for maternity cases will remain at 9 months.

Prospective applicants may obtain full information and enrollment blanks by applying to Blue Cross headquarters. You will help this greater Blue Cross plan to complete success by requesting and using descriptive folders for your outgoing mail and a small display cut-out in color for your waiting room.



BLUE CROSS

338 HOSPITAL TRUST BUILDING
PROVIDENCE, RHODE ISLAND

GA Spee 1451

Care New England Board takes action on the future of Memorial Hospital

Authorizes end of negotiations with Prime Healthcare Foundation

In action taken at a special meeting October 17, the Care New England (CNE) Board of Directors authorized the termination of negotiations with Prime Healthcare Foundation regarding their planned acquisition of Memorial Hospital of Rhode Island as a result of both sides being unable to reach mutually acceptable terms. The Board also authorized Care New England management to prepare necessary plans and filings with the Rhode Island Department of Health to maintain vital access to primary care and outpatient services in the community, while closing Memorial's inpatient units and Emergency Department.

The impetus for the changes includes the chronic financial losses being incurred at Memorial, continuing a nearly 10-year slide. The 294-bed hospital has averaged a daily inpatient census of just 15 to 20 patients resulting in an operating loss in the past fiscal year of \$23 million. According to **CHARLES R. REPPUCCI**, chairman of the CNE board, "The magnitude of the losses at Memorial cannot be sustained and jeopardizes our other hospitals and provider organizations. We have exhausted our very best efforts and those of some nationally-recognized consultants to improve the situation without the outcomes we had hoped to achieve."

Care New England recorded a \$68 million loss from operations in fiscal year 2016 and is projected to show a \$49 million operating loss for the fiscal year that just ended on September 30. Its plan to restore financial well-being to the health care system focuses on continued work on revenue improvement and cost reduction, and resolution of the ongoing losses at Memorial.

Since the 2013 acquisition of Memorial by Care New England, **DENNIS D. KEEFE**, president and CEO, said the leadership of the system and the hospital have worked diligently to try to make Memorial successful. This includes significant investment in clinical information systems and facility improvements, bringing in new administrative leadership, establishment of new services, initiation of marketing plans to promote the hospital and its programs, and the hiring of restructuring experts to help turn around the hospital's dire financial situation.

Despite these efforts and a 2016 improvement plan to relocate the obstetric unit and scale back inpatient capacity, Memorial has not drawn enough patient and community support to meet meaningful volume thresholds that would sustain a safe and viable inpatient operation.

Accordingly, in early 2017, Care New England initiated an exhaustive search to engage more than 70 potential parties that might be interested in the acquisition of Memorial. Prime ultimately emerged as the single bidder, and the execution of the Letter of Intent (LOI) between Prime and Care New England was announced in April 2017. In the time since, extensive work on due diligence and the negotiation of terms has taken place. However, the parties were unable to reach an ultimate agreement. Confidentiality provisions in the LOI prevent both organizations from sharing further details.

Care New England's **JAMES E. FANALE, MD, EVP**, chief operating officer and chief clinical officer, said it will be the utmost priority in the plan for Memorial to continue to provide high quality patient care, while working to

address options to ensure access to care for patients in the community including maintaining a robust primary care presence. CNE will also develop a plan to address the Memorial-based medical residency training program with The Warren Alpert Medical School of Brown University.

"While difficult, these actions represent a necessary and critical step in restoring financial health to Care New England while ensuring the future of hospitals and facilities many have come to rely on for their care," continued Reppucci. "This has been a long and complex process that has been met with unrelenting dedication and compassionate care from all who work at Memorial Hospital. We will support both the employees and the community in this transition so the well-established legacy of care in Pawtucket is not lost, but rather adapted for the demands of today's health care landscape."

Care New England will begin immediately working with the Memorial staff on transition plans. Until a definitive plan is developed and approved, there are no estimates on the number of employees who might be displaced. Care New England will attempt to place affected employees in other vacancies across Butler, Kent, Women & Infants, the VNA of Care New England, and The Providence Center.

Care New England officials say they hope to file the necessary regulatory application (Reverse Certificate of Need) as soon as possible.

Care New England remains committed to its affiliation with Partners HealthCare, and looks forward to ongoing progress in the negotiations and due diligence process. ♦



Brookdale Overview

Independent Living *An ideal retirement living experience*

- Spacious apartments with minimal maintenance
- Restaurant-style dining
- Plenty of planned activities every day

Assisted Living *The right choice for people who need extra help with daily activities*

- Qualified staff assists with taking medication, dressing, bathing, etc.
- Floor plans, from studio to two-bedroom apartments
- Activities and events for various levels of acuity

Alzheimer's & Dementia Care *Person-centered care for people at various stages*

- Programs that leverage the latest dementia care research
- A care philosophy defined by more than the symptoms of Alzheimer's & dementia
- An experienced staff who help residents thrive

Rehabilitation & Skilled Nursing *For short-term surgical recovery or long-term rehabilitation*

- Around-the-clock, licensed nursing care
- Providing clinical resources in a comfortable setting that feels like home
- A mission and focus to helping residents get well and then get home as quickly as possible

Personalized Living *For people who just need a little help with things*

- One-on-one non-medical services for home care needs
- Additional personal needs for those in assisted living or home such as escorts to doctor appointments and more

Home Health *For qualified people in need of therapy or rehabilitation — all in the comfort of home*

- Get Medicare-certified assistance from experienced professionals
- Many healthcare services such as wound care and stroke therapy

Therapy *Specialized programming personalized to encourage recovery*

- An emphasis on education, fitness and rehabilitation that helps seniors retain or enhance their independence
- Most insurances accepted

Hospice *Promoting comfort by addressing the full range of needs of patients and families*

- Primary focus of quality of life
- Specially trained staff help families and patients cope with overwhelming feelings accompanying end-of-life care

Not all services are available at all communities. Contact community for details

The Rhode Island Network

Brookdale Center of New England
Brookdale Cumberland
Brookdale Smithfield
Brookdale Greenwich Bay
Brookdale Pocasset Bay

Brookdale Sakonnet Bay
Brookdale East Bay
Brookdale West Bay
Brookdale South Bay

**For more information about
how we can help you serve
your patients' needs**

Click Here



Miriam receives NIH grant to study RI Department of Corrections opioid program

\$215,157 grant to be led by principal investigator Josiah "Jody" Rich, MD

The Miriam Hospital has been awarded a National Institutes of Health grant to study an innovative opioid addiction treatment program for incarcerated individuals that was expanded at the Rhode Island Department of Corrections last year.

The \$215,157 federal grant will fund research into medication-assisted treatment to be led by principal investigator **JOSIAH "JODY" RICH, MD**, an infectious disease specialist and director of the hospital's Center for Prisoner Health and Human Rights.

The program at the Rhode Island Department of Corrections treats individuals diagnosed with opioid use disorder by initiating and continuing them on synthetic narcotics – methadone and buprenorphine (Suboxone). The program also provides access to naltrexone (Vivitrol), which deters opioid abuse by blocking any high from narcotics. As they re-enter into the community, participants are linked up with providers of medication-assisted treatment to further decrease risks of relapse, overdose, and re-incarceration.

The program, the first of its kind in a statewide correctional system, has garnered national attention.

The grant from the National Institute on Drug Abuse is for "evaluating the implementation and impact of a novel medication-assisted treatment program in a unified jail and prison system."

"People with opioid use disorder who leave the correctional setting without medications are among those at the highest risk for overdose and death," said Dr. Rich, who in addition to his work at The Miriam is a professor of medicine and epidemiology at Brown University's Warren Alpert Medical School. "The comprehensive program developed at the Rhode Island Department of Corrections, in partnership with CODAC and others, is having and will continue to have a substantial impact on reducing overdose deaths in Rhode Island. This grant will allow this program to be optimized and replicated across the nation."

Dr. Rich serves as an expert advisor to Gov. Gina Raimondo's Overdose Prevention and Intervention Task Force. In response to a request from the governor, the General Assembly provided \$2 million in the state's 2017 budget to expand the treatment program in the prisons.

ASHBEL T. WALL, II, director of the RI Department of Corrections (RIDOC), said, "With the support of the Governor and the General Assembly, we have been able to roll out treatment for opioid addiction to currently incarcerated individuals and link those individuals to ongoing treatment in the community. Our approach has been so successful that the Bureau of Justice Assistance has designated RIDOC as a 'Center of Innovation' and we have been receiving calls



from colleagues around the country who are interested in our approach."

The corrections program is run by CODAC Behavioral Healthcare, Rhode Island's oldest and largest community provider of services for opioid use disorder.

Dr. Rich's research team is an interdisciplinary collaboration between Lifespan, Brown University's Center for Alcohol and Addiction Studies, the University of Rhode Island's Academic Health Collaborative, and the University of North Carolina at Chapel Hill. **LAUREN**

BRINKLEY-RUBINSTEIN, PhD, is the lead co-investigator for the study and will oversee the qualitative component of this research. Other members of the research team are **TRACI GREEN, PhD**, **BRANDON MARSHALL, PhD**, **LYN STEIN, PhD**, and **ROSEMARIE MARTIN, PhD**. ❖



For those who proudly serve our country

Aetna is proud to support the members of the Rhode Island Medical Society.

aetna®

Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies, including Aetna Life Insurance Company and its affiliates (Aetna).

©2016 Aetna Inc.
2016019

Lifespan's Comprehensive Spine Center expands to Newport

The Comprehensive Spine Center anchored at Rhode Island Hospital is now offering its full range of services at Newport Hospital. The Center opened there on October 10. Patients will be seen by interventional pain specialist and physiatrist **KYLE SILVA, DO**, neurosurgeon **JARED FRIDLEY, MD**, and **ALEXIOS G. CARAYANNOPOULOS, DO, MPH**, medical director of the Lifespan Comprehensive Spine Center and division director of Pain and Rehabilitation Medicine in the Department of Neurosurgery at Rhode Island Hospital. Dr. Carayannopoulos is also an interventional pain specialist and physiatrist. Services at Newport Hospital will be integrated with the Vanderbilt Rehabilitation Center. ❖

Brown launches global public health MA program

PROVIDENCE – Beginning with the fall 2018 semester, Brown University will offer a global public health master's degree that combines traditional public health training in population sciences with rigorous social science and international fieldwork experience. The Corporation of Brown University approved the new degree program at its annual fall meeting on October 21.

Graduate program director Abigail Harrison said the University expects to enroll a cohort of 10 domestic and international students in the first year and more in future years.

Only about five other universities offer a master's in global health, Harrison said – and only about half a dozen more provide a global track within a traditional master's in public health. Among those, not all require fieldwork. Students in the new Brown program, however, will work in one of several low- or middle-income countries such as Ghana, Samoa, South Africa, the Philippines or Mexico, during the summer between the program's two years to "learn public health by doing public health." The projects they perform will form the basis of their master's theses.

Classroom-based curricular highlights include new courses on the ethics of community engagement, global organizations and policy priorities, and implementation science and public health interventions, Harrison said.

The program will begin accepting applications late in fall 2017. ❖

Wellesley Medical Building

Medical Office Space Available - 1515 Smith St., North Providence

Fully furnished and centrally located for all hospitals

Available on a one or two day a week basis, or full-time, from \$450 a month

Contact: Dr. Frank D'Allesandro (401) 440-4058



Proud to sponsor the Rhode Island Medical Society

More than \$1 out of every \$4 of practice revenue is the patient's responsibility!



24/7 Online

Client Management System

Patient portion has been growing by five to six percent per year. Getting control of patient portion an important focus of any private practice that expects to stay private.

On average practices send 3.3 statements before receiving payment

*The average cost of printing, handling and stamping a statement is \$1.25 per statement, not including employee cost.

COLLECTIONS WITHOUT ALIENATING YOUR PATIENTS



**Local
High Recovery
Customized Programs
Improved Patient Retention**

**For a free consultation call Carmella Beroth at
508-553-1916 or visit www.debtmanagementinc.com**

**Debt Management, Inc.
"Collecting the Uncollectible"**

Hep C care falls short for young RI opioid users

PROVIDENCE – As public health officials worry that the increase of opioid use among young adults has helped to spread the hepatitis C virus to a new generation, a study in Rhode Island finds that while screening is common, the follow-up measures needed to stop the spread of the virus are significantly less so.

“Many young people who are at risk for hepatitis C may acquire the infection and then not know it, and then through drug injection practices may transmit it to others,” said **BRANDON MARSHALL**, associate professor of epidemiology in the Brown University School of Public Health and corresponding author of the new study in the *Journal of Adolescent Health*. “For this reason, we need to not only be screening, but also providing care to young people who test positive for hepatitis C.”

Between January 2015 and February 2016, the researchers recruited 196 people between the ages of 18 and 29 from the streets of Rhode Island who use prescription opioids recreationally, rather than for medical reasons. Of those, 154 (78.6 percent) reported receiving HCV screening, which Marshall said was a high and encouraging rate. That said, the proportion receiving screening was much higher among those ages 24 to 29 (89.5 percent) than among those ages 18 to 23 (59.7 percent), he noted.

Among those who were screened, 18 said they tested positive for HCV, which was 30 percent of the 59 people in the study who said they have injected drugs. When study staff asked about follow-up care, they found several gaps: Among the 18 with a positive test, 13 received a confirmatory follow-up test, 12 were referred for specialty care, only 10 received information about how not to transmit the virus to others, and nine received education about living with HCV.

“Screening for HCV is free in many parts of the state, but financial and other barriers exist for youth who test positive and are in need of additional resources and hepatitis C care,” Marshall said. “We need to work on improving access to hepatitis C treatment programs and other referral services for young people.”

Co-author **DR. LYNN TAYLOR**, an associate professor of medicine at Brown and physician at the Miriam Hospital, said the clear overlap of opioid use and hepatitis C infection requires a tightly coupled public health effort.

“This work points to our next steps: We must act to integrate overdose and hepatitis C prevention in Rhode Island,” Taylor said. “In locales where people are injecting opiates, there are an estimated five new hepatitis C infections for every fatal overdose. Rhode Island is the ideal state to address the connections between the opioid and hepatitis C crises and demonstrate the benefits that are possible for public health preventive efforts.”

Brown University School of Public Health graduate alumnus **AYORINDE SOIPE** led the study. Other authors include **AJIBOLA ABIOYE**, **TRACI GREEN** and **DR. SCOTT HADLAND**.

The National Institutes of Health funded the Rhode Island Young Adults Prescription Drug Study (grant R03-DA03770), from which the data were derived, and provided additional funding (P30AI042853). ♦

Kent Union employees and Kent Hospital reach agreement

WARWICK – The United Nurses and Allied Professionals and Kent Hospital reached a tentative agreement October 22, on a first contract for 400 newly organized employees and a contract extension for the 800 employees currently under contract. Members voted by an overwhelming margin to approve the two agreements Monday night. Both contracts will run through at least June 30, 2020.

The difficult and complex negotiations dealt with two fundamental issues. The first was bringing the newly organized employees pay and benefits up to the level of already-organized employees. The second issue was a contract extension, providing employees with security and stability while Care New England seeks to establish an organizational partner for the future. The first contract for the 400 newly organized employees largely places all members in the same pay benefit structure. The contract extension includes a one-year wage freeze in 2018 with wage increases in 2019 and 2020.

Union president **ROSE DESNOYERS, RN**, said, “This agreement achieves two major goals for our members. First, we are very pleased that our 400 new members now have the benefit of a union contract. Second, the contract extensions provide stability and certainty for all of our members over the next several years.”

MICHAEL DACEY, MD, Kent Hospital president and COO, said, “I am extremely pleased with the agreement reached and the tremendous support indicated by Monday’s vote. I believe this new contract is the result of both sides coming together and achieving positive outcomes that put the future of the hospital first, while addressing the important concerns of the union membership.” ♦



Helping local healthcare providers reach their goals.

Washington Trust is actively lending to local healthcare providers throughout the region, financing solutions that allow them to provide exceptional quality client care and remain competitive, just as we have done for more than 200+ years. For more information, call us at 401-348-1200 or 401-331-5090.

Arrowhead Dental Associates



delivering exceptional and comprehensive dental care out of South County, Rhode Island for over 39 years

Blackstone Valley Community Health Care



committed to providing high quality, accessible, affordable, comprehensive health care to the residents of the lower Blackstone Valley

Brentwood By The Bay Assisted Living



Assisted Living
providing compassionate, comprehensive nursing care and physical rehabilitation for a seamless senior living and care solution

Saint Antoine Community



Saint Antoine Community
THE ULTIMATE IN ASSISTED LIVING AND EXCELLENCE IN NURSING CARE
a caring community serving the physical, social, emotional, and spiritual needs of older adults and their families

Saint Elizabeth Community



Saint Elizabeth Community
Where RI seniors come first
a non-profit, non-sectarian, charitable organization that provides a full spectrum of quality care to older adults and people with physical disabilities

The Branches of North Attleboro



new assisted living and memory care community scheduled to open in Fall 2017
EOEA certification pending

Thundermist Health Center



a Federally Qualified Community Health Center, serving three communities -- Woonsocket, West Warwick, and South County -- for 45 years

University Orthopedics



Healers. Innovators. Teachers.
a regional referral center for patients with back and neck pain, joint pain, sports medicine problems, shoulder pain, hand problems, hip and knee pain, and foot and ankle injury

Visiting Nurse of Hope Health



Touching Lives
an independent, non-profit, community-based home health care provider providing high-quality care to residents of Rhode Island and Massachusetts



WASHINGTON TRUST®

www.washtrust.com

Multi-site study to examine cognitive behavior therapy for traumatic brain injury-induced seizures

PROVIDENCE – Seizures are a common result of traumatic brain injury, especially in Veterans. A new study funded by the Department of Defense Congressionally Directed Medical Research Programs, and conducted in Providence and Birmingham, Ala. – at the Veterans Affairs Medical Centers in Providence and Birmingham, Rhode Island Hospital, Brown University and the University of Alabama at Birmingham – hopes to shed new light on the mechanism behind seizures associated with post-traumatic epilepsy and psychogenic nonepileptic seizures.

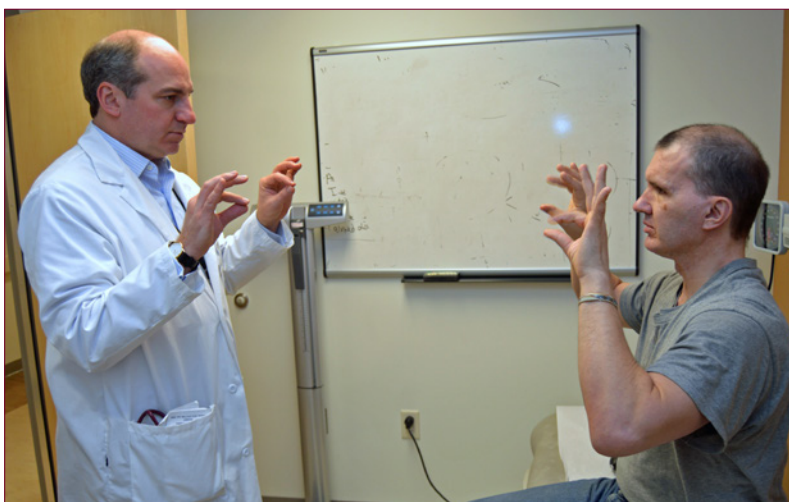
The \$3.6 million award, W81XWH-17-1-0619, will examine whether a form of cognitive behavior therapy – a short-term, goal-oriented psychotherapy approach to problem-solving – could be effective in reducing the frequency and/or severity of seizures in those with traumatic brain injury, or TBI. Cognitive behavior therapy has been widely used for improving mental health. It focuses on developing coping strategies to treat specific problems and decrease symptoms.

“Individuals can develop pathological responses, including seizures, from major, life-changing events such as traumatic brain injury,” said **Jerzy Szaflarski, MD, PhD**, director of the Epilepsy Center in the UAB School of Medicine and co-principal investigator of the study. “The overall goal of the study is to see if cognitive behavior therapy will modify brain changes and response to stressful events, and whether these changes will result in improved seizure control.”

“Non-pharmacologic approaches for seizures are gaining acceptance as a therapy,” said **W. CURT LAFRANCE JR., MD**, co-principal investigator and member of the VA RR&D Center for Neurorestoration and Neurotechnology, associate professor of Psychiatry and Human Behavior and Neurology at Brown University’s Warren Alpert Medical School, director of Neuropsychiatry and Behavioral Neurology at Rhode Island Hospital, and neuropsychiatrist at the Providence VA Medical Center. “Building off of our previous pilot studies, this will be the first large-scale examination of the neuroimaging brain signals in response to an intervention for patients with seizures.”

The study teams will enroll Veteran and civilian patients with a history of TBI, divided into three groups of 88 patients each. One group will consist of patients with TBI without a history of seizures, another group will have TBI with epileptic seizures, and the last will have TBI with non-epileptic seizures.

Patients with seizures will receive cognitive behavior informed therapy for 12 weeks, administered by trained medical professionals. All patients will receive functional magnetic resonance imaging, or MRI, at baseline and again



Dr. W. Curt LaFrance Jr., co-principal investigator for a new study that hopes to shed light on the mechanism behind seizures associated with post-traumatic epilepsy and psychogenic nonepileptic seizures, conducts a finger-tapping exercise with Army and Navy Veteran Ernest J. Avery of West Warwick, as part of an exam at the Providence VA Medical Center February 2, 2016.

at approximately 14 weeks. An earlier study conducted by LaFrance and Szaflarski in 36 patients showed that cognitive behavior therapy improved seizure control in patients with nonepileptic seizures.

Epileptic seizures can be treated medically and with surgery, but there is not a standard therapy for nonepileptic seizures, which also occur in Veterans. Between 10–20 percent of the general population with seizure disorders experience nonepileptic seizures.

“The anticipated long term scientific gains will contribute to the goal of validating a neurological biomarker for patients with seizures that may be used for identifying treatment response,” LaFrance said. “The effort could ultimately affect individuals and caregivers by providing a diagnostic tool that may aid in identifying treatment targets and response in reducing seizures and common comorbidities in Veterans and civilians.”

“This project, combining functional neuroimaging with patient interventions, should provide a deeper understanding of neuroanatomic and neurophysiologic processes in patients with seizures,” Szaflarski said. “The information gained will generate further hypotheses on neural processes and biomarkers for both epileptic and nonepileptic seizures.”

The research is being funded through an Idea Development Award by the Department of Defense Congressionally Directed Medical Research Programs’ Epilepsy Research Program. The ERP was initiated in 2015 to develop an understanding of the magnitude of post-traumatic epilepsy within the military and to expand research into the basic mechanisms by which TBI produces epilepsy. ♦



Pictured here at the groundbreaking (from left to right) are Cheryl Dunnington, RN, Chief Nursing Officer; Dr. Vincent Armenio, Chairman of Medicine; Demetra Ouellette, President, Roger Williams; Dr. Sheri Smith, Chair of the Roger Williams' board; John Holiver, Chief Executive Officer of CharterCARE; Edwin Santos, Chair of the CharterCARE board; Dr. N. Joseph Espat, Chairman of Surgery, and Candace Wray, RN, clinical nurse manager of the Roger Williams' Emergency Department.

Groundbreaking held at RWMC for major Emergency Department renovation

PROVIDENCE – On October 3, 2017, Roger Williams Medical Center held a groundbreaking ceremony to renovate the existing Roger Williams' Emergency Department space by building an addition of approximately 12,000 SF to accommodate increased patient bay sizes and an expanded behavioral health program.

The new addition will provide 28 private patient treatment bays including six behavioral health beds, a bariatric treatment bay, two procedure rooms and a trauma room alongside

typical state-of-the-art treatment bays and exam space.

Substantial renovations will occur in the existing portion of the Emergency Department to further provide for a separate behavioral health tract. The existing Emergency Department will remain operational during construction. Upon completion of the project, there will be improved patient parking and a covered patient drop-off along with increased support space and modernized fixtures, furniture and equipment.

"Throughout our health system,

we continue to make investments to improve the care we deliver to the community," said **JOHN HOLIVER**, CharterCARE CEO. "We pride ourselves on speedy and appropriate emergency care, which will be enhanced greatly by this renovation at Roger Williams."

Holiver also noted the significant economic boost this 18-month project will bring to the construction, trade and affiliated industries. The project was designed by Robinson Green and Beretta (RGB) Architects and is being constructed by Gilbane. ❖



MEDICAL CONDO FOR SALE - 2500 SQ. FT., \$225,000

First Floor, X-Ray Room, Six Exam Rooms, Plus Offices, Nothing to do but Move In!

Unlimited Parking, Highway Access, Close to Bus line and Dining.

400 Massasoit Ave., East Providence, Minutes from the East Side and Providence

Call RoseMarie Clemente, Baron & Clemente Real Estate, 401-519-6677