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Partners HealthCare, Care New England sign definitive agreement

PROVIDENCE – Partners HealthCare and Care New England Health System on May 23rd announced the signing of a definitive agreement formalizing Partners' planned acquisition of Care New England (CNE).

"Today marks an important milestone for Rhode Island health care," said Care New England President and CEO **JAMES E. FANALE, MD**. "Care New England has made significant progress in the last year to strengthen our financial outlook, and now while we will work through this important regulatory process, I am confident our affiliation with Partners will help us further invest in quality local care for the community, building upon the tremendous successes already in place."

"We believe that this partnership will further strengthen an already robust local health care system and provide opportunities for new investments in patient care, research, and health care innovation in Rhode Island," said **DAVID F. TORCHIANA, MD**, President and CEO, Partners HealthCare.

The goals of the affiliation include building on the existing clinical relationships between the parties, ensuring ongoing clinical research and educational collaboration in support of the

parties' charitable missions, enabling the organizations to more efficiently use their resources, and establishing effective and expanded approaches to population health management.

This agreement builds upon the successful clinical affiliation between Partners' Brigham and Women's Hospital and CNE's Kent Hospital on cardiology and surgical services, a partnership that's provided Rhode Island patients with a collaborative care model that has enhanced local services since 2009.

"On behalf of the Care New England board, we are extremely pleased to reach this agreement today. We are excited about the opportunities this presents for CNE and Partners, but perhaps even more importantly for patients and their families in our state and the region," said **CHARLES R. REP-PUCCI**, chair, CNE Board of Directors.

"Partners has enjoyed a decade-long relationship with Care New England that's brought specialized Brigham Health services to patients right here in Rhode Island," said Brigham Health President **ELIZABETH NABEL, MD**. "Our agreement today will solidify our collaboration, deepen that commitment to quality local care, and will also mean new investments in

Brown University-led research, with the important goal of continuing to strengthen the relationship with The Warren Alpert Medical School."

With the signing of the definitive agreement, Partners and CNE will continue discussions with Lifespan.

"Preserving and strengthening health care and biomedical research and innovation in Rhode Island continues to be an important priority," Brown University President **CHRISTINA PAXSON** said. "As Brown's discussions with Partners and Care New England continue, I am optimistic that we can address the various concerns that I raised earlier this year.

"Brown has a long and productive partnership with Care New England, and the continued success of Care New England is important to the University and to the people of Rhode Island. Brown will continue to support collaboration among organizations dedicated to serving the health needs of Rhode Islanders and economic development in the state," Paxson said.

The agreement follows extensive due diligence, internal reviews, and collaborative discussions between the two health care systems. With the signing of the definitive agreement, both organizations agree to move forward to prepare and file all necessary Rhode Island, Massachusetts, and federal regulatory filings, and, upon approval, move forward on Partners' integration of CNE.

With the signing of the definitive agreement, Partners and CNE will continue discussions with Lifespan. Partners and CNE invited Lifespan to the affiliation conversations earlier this year because the parties share a mutual desire to improve access, quality, and efficiency of care for all Rhode Islanders. ❖

5TH ANNUAL RIMS MEMBERS

CONVIVIUM

SAVE THE DATE SEPTEMBER 28

Members and guests are invited to schmooze, graze, and relax with colleagues while enjoying live music

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NORM GRANT

Rhode Island Free Clinic Adding Dental Care for Uninsured Adults

SOUTH PROVIDENCE – The Rhode Island Free Clinic (Clinic), which has been serving the state for nearly 20 years providing health care to uninsured, working poor and low-income Rhode Island adults, will soon be offering dental care to uninsured adults. Initially, the Clinic will provide basic dental services including routine cleanings, oral examinations, simple extractions, and health education for Clinic patients.

Dental care remains a critical need for the 2,000 Clinic patients as identified by patient satisfaction surveys and patient inquiries. In a 2016 dental survey of 200 Clinic patients, results confirmed this need. More than 88% of patients surveyed did not currently have a dentist and 70% had dental issues. Most of the patients said they would use dental services at the Clinic if they were available.

Medical-dental integration

The medical-dental integration at the Clinic was planned by the Clinic's Medical Advisory Clinic team led by **JERRY FINGERUT, MD**, and **CAROLINE TROISE, MD**, the Clinic's medical director. Volunteer dentists, **MARIA SACCOCCIO, DMD**, and **JOHN WADE, DMD**, are serving as Dental Directors and have already donated over 200 hours towards the dental program. **SHIRLEY SPATER, DMD**, **MARTY NAGER, DMD**, **ROBERT BARTRO, DDS**, **SAM ZWETCHKENBAUM, DDS**, and other dental leaders have also been an integral part of the process.

With the support of Delta Dental Rhode Island (DDRI), collaboration with community dentists and existing dental programs, and planning with dental leaders, the Clinic's Board developed a strategic plan to integrate dental care into the Clinic's comprehensive health care model. Generous support from The Champlin Foundation funded facilities and equipment and early this year construction began for a two-chair dental suite, which is expected to be completed by July. Working closely with dental supplier, Benco Dental, the Clinic has secured new state of the art equipment and in-kind services. Additional support came from CVS Health, the Rhode Island Foundation, Blue Cross Blue Shield of RI, Amica, Ocean State Job Lot, Lifespan, Coastal Medical, and other many other donors.

Volunteers needed for program

Volunteers are the heart and soul of the Rhode Island Free Clinic; 50% of the Clinic's team are AmeriCorps VISTAs – college graduates who commit to a year of service at the Clinic. The Clinic's Dental Care VISTA will work to build the dental volunteer team. The Clinic is currently recruiting for a bilingual dental assistant and part-time dental hygienist to manage the Program working alongside with the current corps of volunteer dentists, dental hygienists and other dental partners.

Dentists or hygienists who wish to volunteer at the Clinic will receive malpractice insurance coverage through the



Dental volunteers, front left and moving to right back: Maria Saccoccio, DMD; Joseph Samartano, DDS; Thomas Correia, DDS; Robert Bartro, DDS; Jeffrey Dodge, DMD; Marty Nager, DMD; John Wade, DMD; and Daniel Kane, DMD.

About the RI Free Clinic

Over 50,000 Rhode Islanders do not have healthcare because they do not have access to it, cannot afford to buy insurance, or have no means to acquire it. The Clinic is nationally recognized as a dynamic volunteer model, mobilizing a statewide corps of nearly 600 health care professionals, and community partners. The Clinic provides primary care, nearly 30 medical specialties, wellness programs and preventive services on-site, as well as medicine and Minute Clinic care from CVS – all free to patients.

support of the Federal Torts Claims Act Program (Section 224(o) of the Public Health Service Act). This program provides free malpractice insurance to licensed providers working at free clinics. In addition, retired dentists volunteering at the Clinic will be able to receive a volunteer Rhode Island license at no cost.

There are many opportunities for health care staff, language interpreters, students, retirees, and others to get involved, help others, and work with the Clinic's team of dedicated volunteers. If you are interested in becoming a dental volunteer at the clinic, visit the Clinic's website at www.rifreeclinic.org or contact Nicole Salfi, the Clinic's Dental VISTA, at nsalfi@rifreeclinic.org or at 401-274-6347 x209. ❖



Construction of the Clinic's Dental Suite is underway.

Care New England (excluding Memorial Hospital) Achieves \$4.4 M Gain in Q2

Care New England Health System (CNE) announced last month that for the FY 2018 second quarter (January 2018–March 2018) its Obligated Group (CNE excluding Memorial Hospital) achieved income from operations of \$4.4 million versus the prior year loss of \$26 million.

Memorial Hospital, which closed in January 2018, withdrew from the Obligated Group on December 22, 2017.

For the six months ending March 2018, the Obligated Group posted a loss from operations of \$4.3 million. More than 100 percent of this total loss was attributable to Memorial Hospital which experienced a loss of \$8.5 million during this period.

“Today’s reporting represents impor-

tant and significant progress in CNE’s efforts to dramatically improve its financial performance,” said **JAMES E. FANALE, MD**, president and CEO, CNE. “While we continue to experience some significant loss associated with Memorial Hospital, we are experiencing tremendous results otherwise. While we expect these losses associated with Memorial to continue at a declining rate through the fiscal year, we now can see to a point in the near future where those losses will end due to the closure of the facility that took place in January. These results, coupled with the successful turnaround that is taking shape across the system, is a testament to the dedication and hard work of everyone at CNE. We are extremely

optimistic about our current position and the partnership opportunities in which we are now actively engaged.”

The successful implementation of growth initiatives and cost management has been very effective in achieving the results to date. Action plan tracking, daily productivity monitoring, and revenue cycle improvements are making an impact on performance. Management plans to continue to implement more initiatives targeting growth, care retention, access, and cost savings, to further strengthen CNE’s position are among the efforts in place. Specific cost savings efforts in the areas of labor management, medical supplies and drugs, and other purchased services also yielded positive results.

On a consolidated basis, CNE including Memorial experienced a net loss from operations of \$7.0 million for the second quarter of FY2018 and \$40.7 million for the six months ended March 31, 2018. More than 100% of the total loss in both the second quarter and thorough the first six months of FY2017 was attributable to Memorial Hospital which experienced a loss of \$12.3 million and \$46.2 million, respectively. Consolidated CNE losses include the Memorial losses before and after the December 22, 2017 withdrawal from the Obligated Group and a one-time, non-cash loss on asset impairment at Memorial Hospital. For the first two fiscal quarters of 2018, CNE’s financial performance has improved more than \$29 million from the same period last year.

For informational purposes the CNE Obligated Group is comprised of: Care New England Corporate, Integra Community Care Network, LLC, Butler Hospital and related affiliates, Kent Hospital and related affiliates, Women & Infants Corporation and related affiliates, VNA of Care New England and related affiliates, Southeastern Healthcare System and related affiliates (excluding Memorial Hospital of Rhode Island and affiliates), The Providence Center, Inc. and related affiliates. ❖

RIH researchers publish findings on stem cells, osteoarthritis

Found aberrant stem cells may play a role in osteoarthritis

PROVIDENCE – A group of researchers at Rhode Island Hospital and Brown University, along with two international co-authors, had a study published recently in Scientific Reports that found aberrant stem cells may play a previously unexamined role in osteoarthritis.

The researchers discovered that a small population of stem cells found in the joint cartilage of osteoarthritis patients may contribute to the development and worsening of this joint disease. The research team names these cells as OA-MSc (osteoarthritis-mesenchymal stem cells). These stem cells, whose numbers increase as the patient ages and the disease progresses, express tissue-degrading enzymes and may also promote the mineralization of cartilage.

“This holds real promise for future therapies,” says **CHATHURAKA T. JAYASURIYA, PhD**, of Rhode Island Hospital and the Alpert Medical School, the lead author of the study. “These stem cells are a precursor to the chondrocytes that we’ve long associated with osteoarthritis. We may be able to target the stem cells, eliminating them or preventing their proliferation, and saving valuable cartilage for a longer period of time.”

QIAN CHEN, PhD, also of Rhode Island Hospital and Brown, and the corresponding author of the study comments, “Since we have generated these OA stem cell lines, they will be very useful for screening drugs for treating OA.”

The study, “Molecular characterization of mesenchymal stem cells in human osteoarthritis cartilage reveals contribution to the OA phenotype,” is supported by two major research grants held by the hospital and the university – the Center of Biomedical Research Excellence (COBRE) in Skeletal Health and Repair and the Advance Clinical and Translational Research, both funded by the National Institute of General Medicine (NIGMS).

The other authors are Richard Terek, MD, Michael G. Ehrlich, MD, and Nicholas Lemme, BS, of Rhode Island Hospital/Brown University and Nan Hu, PhD and Jing Li, PhD of Xi’an Jiaotong University in Xi’an, China. ❖

VA expands telehealth, allowing providers to treat patients across state lines

WASHINGTON – On May 11 the U.S. Department of Veterans Affairs (VA) announced a new federal rule that will allow VA doctors, nurses and other health-care providers to administer care to veterans using telehealth, or virtual technology, regardless of where in the United States the provider or veteran is located, including when care will occur across state lines or outside a VA facility.

Previously, it was unclear whether VA providers could furnish care to veterans in other states through telehealth because of licensing restrictions or state-specific telehealth laws. This new rule exercises federal preemption to override those state restrictions, paving the way for VA to expand care to veterans using telehealth. VA worked closely with the White House Office of American Innovation and the Department of Justice for implementation of the new rule.

“This new rule is critical to VA’s ‘Anywhere to Anywhere’ initiative,” said VA Acting Secretary **ROBERT WILKIE**. “Now that the rule has been finalized, VA providers and patients can start enjoying the full benefits of VA’s telehealth services.”

By enabling veterans nationwide to receive care at home,



the rule will especially benefit veterans living in rural areas who would otherwise need to travel a considerable distance or across state lines to receive care. The rule also will expand veterans’ access to critical care that can be provided virtually – such as mental health care and suicide prevention – by allowing quicker and easier access to VA mental health providers through telehealth.

In the announcement, VA also unveiled VA Video Connect, a video conferencing app for veterans and VA providers. Through this new rule, VA providers will be able to use VA Video Connect and other forms of telehealth to furnish care to veterans anywhere in the country, including in the veteran’s home. ❖



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VA Center funding for Neurorestoration and Neurotechnology renewed

Providing \$4.5M over five years



Dr. Benjamin Greenberg, associate director of the VA Rehabilitation Research and Development Service's Center Neurorestoration and Neurotechnology, or CfNN, left, and **Dr. Leigh Hochberg**, the center's director, at the Providence VA Medical Center in Providence, prior to the facility's Research Day event, May 17, 2018. CfNN's operations will be extended for another five years, beginning June 1.

[PROVIDENCE VA MEDICAL CENTER PHOTO BY WINFIELD DANIELSON]

PROVIDENCE – Funding for the VA Rehabilitation Research and Development Service (RR&D) Center for Neurorestoration and Neurotechnology (CfNN) located at Providence VA Medical Center, will be renewed June 1, providing \$4.5 million in funding over five years to support the center's research activities.

"We're honored to have the opportunity to continue developing, testing and implementing neurotechnologies and other restorative therapies for veterans with disorders affecting mobility, limb function or mental health," said **DR. LEIGH HOCHBERG**, a neurologist and neuroscientist, and director of CfNN. "Together with our academic partners, we look forward to creating a new generation of extraordinary rehabilitation therapies for veterans."

One of 12 centers funded by VA RR&D, CfNN brings together scientists, engineers and clinicians from the VA, Brown University and its Carney Institute for Brain Science,

and affiliated hospitals, dedicated to advancing neurotechnology to restore lost function for veterans with injuries or illness of the nervous system. Since the center's launch in 2012, its researchers, as part of the BrainGate consortium, have led the development of advanced neural interfaces for veterans and others with amyotrophic lateral sclerosis (ALS), spinal cord injury and other forms of paralysis.

The center also expanded its research in using brain imaging and new brain stimulation methods to develop and improve treatments for other conditions important to veterans, such as post-traumatic stress disorder, major depression and chronic pain.

Among CfNN's successes are studies of Veterans with upper limb loss, which enabled Food and Drug Administration approval of the Life Under Kinetic Evolution – or LUKE – arm, the first commercially-available prosthetic arm that translates signals from a patient's muscles into complex motions. The work contributed to CfNN's **DR. LINDA RESNIK** receiving the 2017 Paul B. Magnuson Award for Outstanding Achievement in Rehabilitation Research and Development, VA's highest honor in the field. ❖

Roger Williams University's public health program partners with RIDOH

BRISTOL – Roger Williams University's public health program has begun a new partnership with the Rhode Island Department of Health (RIDOH), in policy, research and quality initiatives.

RWU President **DONALD J. FARISH** and Director of Health **NICOLE ALEXANDER-SCOTT, MD, MPH**, signed the memorandum of understanding just as RWU is about to create a Department of Public Health on July 1. The University's public health program has experienced rapid growth since it began working with the RIDOH about nine years ago. At first, the University offered a public health minor,

and it began offering a public health major in 2015.

The newly formalized partnership calls for student "public health scholars" at the RIDOH Academic Center, research opportunities for students and faculty members, summer programs for high school students interested in public health fields, joint quality-improvement programs, a healthcare speakers' bureau, and the sharing of data for research and public policy matters.

The University is currently working with RIDOH on their Health Equity Zone initiatives in Bristol, Providence, Newport and Central Falls/Pawtucket. ❖