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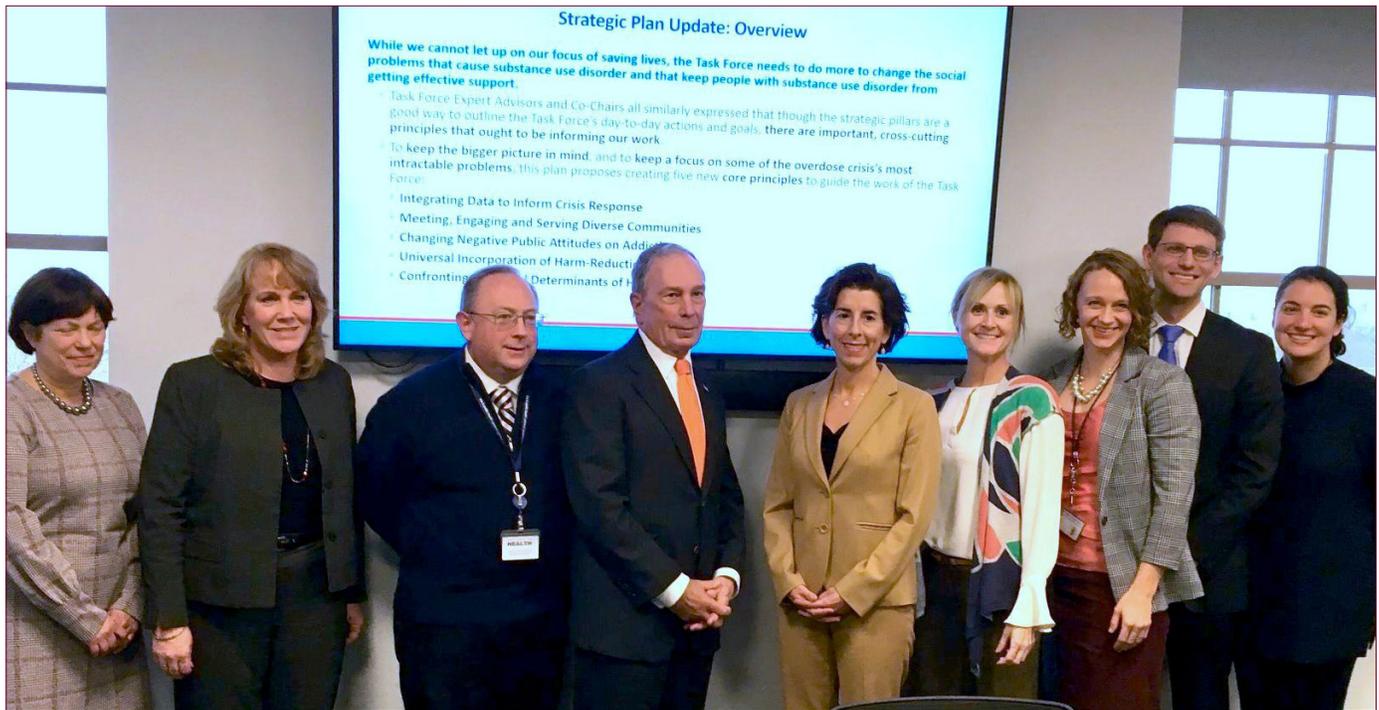


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## Philanthropist Michael Bloomberg visits RI, praises the RIDOC MAT program



CRANSTON – Philanthropist **MICHAEL BLOOMBERG** visited Cranston's Adult Correctional Institution on Monday November 26th to develop a firm understanding of the 'ground-breaking' work being done to curb the opioid crisis in Rhode Island.

"There's an enormous crisis that's come on us very recently," Bloomberg said. He came with a team to learn about the RIDOC MAT program, and to congratulate state leadership and healthcare workers who are addressing an issue, he says, has no boundaries. His visit was prompted by the startling findings that show the RIDOC MAT program has contributed to a 60 percent decline in overdoses across the state.

CODAC Behavioral Healthcare administers treatment in this program, and helps ensure recently released inmates continue to have access to services that they need. The Cranston-based organization helps screen inmates, and provides all three FDA-

RIDOC's James McDonald, MD, MPH, at left of former New York City Mayor Michael Bloomberg, Governor Gina Raimondo, and other members of Governor Raimondo's Overdose Prevention and Intervention Task Force met last week to discuss Rhode Island's response to the overdose crisis.

[PHOTO: RIDOH]

approved medications for the treatment of opioid use disorder. They also provide other services to help individuals on their path to recovery.

"CODAC Behavioral Healthcare is extremely gratified by Michael Bloomberg's recent visit to our state. Our staff regularly meets with several out-of-state officials who have shown an interest in understanding how the MAT program works, and we are always willing to help other states implement similar programs," said **LINDA HURLEY**, President/CEO of CODAC. "We are among the few states to have seen a decrease in overdoses, and findings from Brown University researchers suggest the RIDOC MAT program is having a real impact."

David Dorsey, a clinical supervisor with CODAC and a champion for the

recovery community, can attest to the number of visitors who have expressed interest in the MAT program. Dorsey has an office at the ACI, and he is involved in the case of every person who is receiving medication at the ACIs.

**GOVERNOR GINA RAIMONDO** also took the opportunity to praise the healthcare workers, recovery specialists, and inmates who are contributing to "ground-breaking, path-breaking work."

"Nobody I know, nobody I've talked to here or anywhere, wants to be addicted," Raimondo said.

She said this program is helping countless individuals return to healthy, fulfilling lives, but agreed with Bloomberg in saying the nation still has "a long ways to go." ❖

## Charitable Foundation brings virtual reality technology to Southcoast Health patients

NEW BEDFORD – Virtual reality technology is coming to Southcoast Health, courtesy of a gift from the Thomas H. and Catherine D. O’Neil Charitable Foundation. The technology, with a variety of viewing programs for patients to utilize, will be used to help mitigate patient pain and anxiety both leading up to and during medical procedures.

The donation was presented by the grandchildren of Thomas and Catherine O’Neil at St. Luke’s Hospital on the 76th anniversary of Boston’s Coconut Grove Fire. Thomas and Catherine were among the 492 individuals killed on November 28, 1942 in the historic blaze. To honor their memory, in 2012 one of Thomas and Catherine’s grandchildren, Chris O’Neil, created the Foundation as a way to honor the victims of the fire while also helping those suffering from painful injuries, particularly burn victims and pediatric patients. Chris says, “I wanted to bring some good where a lot of pain had once been, that the lives lost were not in vain. We can make an impact with the O’Neil Foundation.”

The virtual reality system will be the first such technology utilized by Southcoast Health. The system will be used to manage patient pain, first at the Southcoast Health Wound Center at St. Luke’s Hospital, with plans to incorporate its use



Peggy O’Neil Verronneau tries out donated VR device at St. Luke’s Hospital on 76th anniversary of Coconut Grove Fire.



into other service areas at Southcoast moving forward. “The opportunity for our Foundation to provide this technology to Southcoast has brought a lot of excitement versus a simple cash donation,” Chris says. “We get a chance to be part of a new way of helping people.”

The O’Neil Foundation gift was made in memory of Dr. Charles Eades, one of the Foundation’s most generous supporters. ❖

O’Neil family joins Southcoast Philanthropy, CEO, and medical staff to mark occasion: Front Row Jack Dresser SVP of Southcoast Health Philanthropy, Chris O’Neil, Keith Hovan CEO of Southcoast Health, Dr. Robert Sanford Wound Center Medical Director, Catherine O’Neil Norton. Behind left to right: Dr. Robert Caldas Chief Medical Officer, Ellie Potter, and Peggy O’Neil Verronneau. Behind Left to right: Mark O’Neil and Andrew O’Neil. Back row: Tom O’Neil (left), Tricia Grimes of Southcoast Health Philanthropy (center), and Tricia Verronneau (right).

[PHOTOS: STEPHEN PRESTON/SOUTHCOAST HEALTH]

## AMA Announces \$15M 'Reimagining Residency' Initiative

CHICAGO – Building on its work over the past five years to reinvent the way future physicians are trained, the American Medical Association (AMA) recently announced a new \$15 million competitive grant initiative aimed at significantly improving residency training. Through the new AMA "Reimagining Residency" initiative, the AMA will work toward better aligning residency training with the evolving needs of patients, communities, and the workforce needs of the current and future health care system.

The AMA Reimagining Residency initiative marks the next phase in AMA's successful efforts to transform physician training. The goal of the effort is to address the growing gap between how physicians are being trained and the skills they'll need to practice in modern health systems.

"Applying what we've learned through our successful initiative to create the medical schools of the future, we're embarking on a new effort to reinvent residency training to ensure our future physicians are able to make a seamless transition into residency and ensure they're prepared for practice – while supporting their well-being and improving patient safety," said AMA CEO & Executive Vice President **JAMES L. MADARA, MD**. "During this unprecedented time of rapid growth and technological change in the U.S. health care system, the AMA is continuing to support significant redesign and innovation in physician training that will help physicians adapt and grow at every stage of their career, and ultimately improve the nation's health."

Through the new grant program, the AMA will provide \$15 million over five years to fund up to eight innovations among U.S. graduate medical education sponsors, medical schools, health systems, and/or medical specialty societies to support bold and innovative projects that promote systemic change in graduate medical education.

The selected organizations will join an AMA-convened consortium and work together to evaluate successes and lessons learned, and promote wide dissemination and adoption of successful innovations.

Beginning January 3, 2019, organizations interested in applying to receive funding and join the consortium must submit letters of intent describing the goals and scope of their proposed project by February 1.

Specifically, funding will be awarded to institutions and their partners for:

- Improving the transition from medical school to residency to preserve continuity in professional development
- Ensuring readiness for practice through modifications of residency curricula
- Optimizing the learning environment to support well-being among trainees, mentors, and staff

From the initial pool of proposals, the AMA will invite a select group of organizations to submit full proposals by April 17, and will conduct a thorough review of all materials before announcing the selected organizations at its annual meeting in June 2019.

Upon selection, the eight institutional partners receiving grant awards will meet together to agree upon standardized criteria for student assessment, resident selection procedures, on-boarding/transition of students to residency, off-cycle selection of residents, core curriculum for residents in health systems science and a common evaluation program that measures performance, patient outcomes and learner well-being.

The new AMA Reimagining Residency initiative builds on the work of the AMA Accelerating Change in Medical Education initiative launched in 2013 to create the medical schools of the future. The new partner organizations will work in tandem with the AMA's consortium of 32 medical schools created through the AMA Accelerating Change in Medical Education initiative, which has impacted more than 19,000 medical students who will one day provide care for more than 33 million patients annually.

For more information about the initiative and to view a short video, visit:

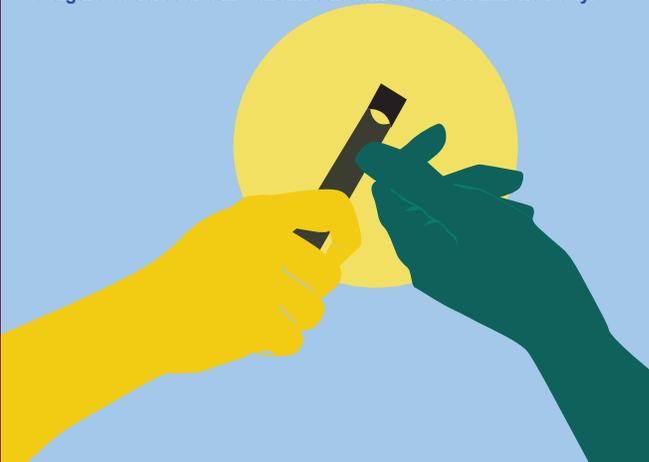
[www.ama-assn.org/ama-reimagining-residency-initiative](http://www.ama-assn.org/ama-reimagining-residency-initiative)

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US Department of Health and Human Services. E-cigarette use among youth and young adults: a report of the Surgeon General [PDF-8.47 MB]. Atlanta, GA: US Department of Health and Human Services, CDC; 2016.



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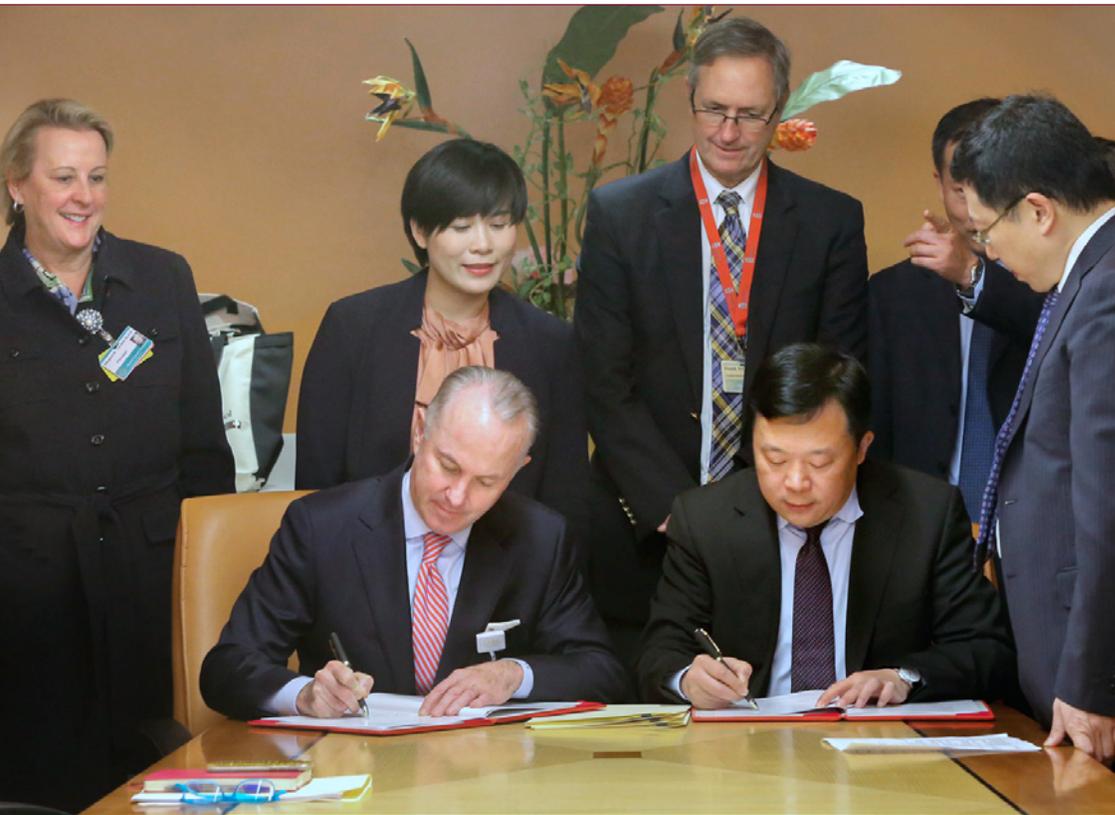
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## Lifespan Cardiovascular Institute partners with Chinese academic medical center

*International exchange to foster research, cultural awareness*



Lifespan President and CEO **Timothy J. Babineau, MD**, and Union Hospital President **Yu Hu, MD, PhD**, sign the agreement between the two institutions as members of their senior teams look on.

PROVIDENCE – Leaders of Lifespan and the Lifespan Cardiovascular Institute convened November 7th at Rhode Island Hospital with a delegation from Huazhong University of Science and Technology's Tongji Medical College and Union Hospital in Wuhan, Hubei Province, People's Republic of China. The parties signed a memorandum of understanding to establish an exchange program centered around cardiovascular research and medical knowledge in the areas of cardiology, echocardiography and cardiovascular surgery.

University Cardiovascular Surgical Associates, the practice group which includes several Lifespan surgeons, is also a party to the agreement.

The program initially calls for each

institution to host two to five medical students, residents, fellows, physicians, faculty and other health care providers per year in an exchange arrangement. It is the intention of the participants to expand medical education and cultural awareness, develop collaborative research and education projects, and build a lasting relationship between and among the health care institutions.

In Rhode Island, the program will be co-directed by **PHILIP HAINES, MD**, associate director of echocardiography at Rhode Island Hospital, and **FRANK SELLKE, MD**, chief of cardiothoracic surgery at Rhode Island and The Miriam hospitals and representing University Cardiovascular Surgical Associates.

The partnership originated with conversation between Dr. Haines and his mentor, Dr. Tao Wang of the University of Pennsylvania, who had himself studied at Tongji Medical College. Dr. Haines, upon arriving in Providence from his fellowship at Penn, says he had a vision of expanding the cardiovascular research collaborations of both the Warren Alpert Medical School of Brown University and the Lifespan hospitals as its major teaching affiliates.

"The exchange of faculty and trainees between these two organizations is an enormous opportunity in the global pursuit of medical knowledge and research breakthroughs," said Dr. Haines. "The possibilities for both universities and hospitals cannot be underestimated. I am grateful for the support and mentorship of Dr. Sellke and Dr. (Athena) Poppas as we pursued formalizing this exchange of ideas and resources."

Drs. Haines, Sellke and Poppas, the chief of cardiology at Rhode Island and Miriam hospitals, have traveled to China to meet and develop the emerging partnership.

"Wuhan Union Hospital and Tongji Medical College are premiere medical institutions in China," said Dr. Sellke. "They have tremendous patient volume and their researchers will bring a new perspective and new capacity, while their students and fellows will benefit from learning more about our research and clinical practices here at Brown and the Lifespan hospitals. All of this enables greater potential for basic and clinical research, and the benefits are truly reciprocal." ❖

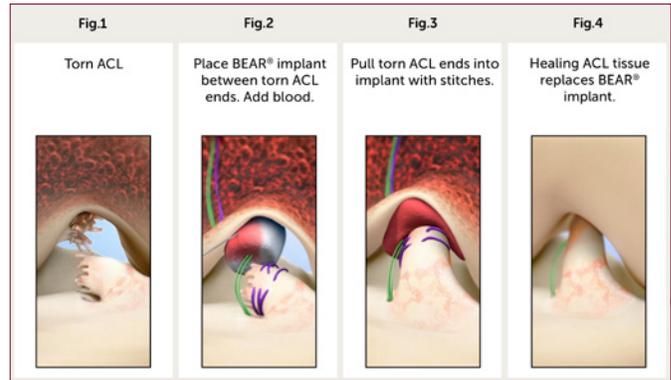
## University Orthopedics Partners with Boston Children's Hospital on ACL Repair Trial

PROVIDENCE – University Orthopedics announced that their team of sports medicine surgeons, Drs. Hulstyn, Fadale and Owens, have begun performing ACL repairs with BEAR, a procedure that has been developed by **DR. MARTHA MURRAY** and her team at Boston Children's Hospital, with the help of **DR. BRADEN FLEMING** and his team at Rhode Island Hospital.

The new technique, bridge enhanced ACL repair (BEAR), uses stitches in a bridging scaffold (a protein sponge injected with the patient's blood) to stimulate healing of the torn ACL.

University Orthopedics' **DR. MICHAEL HULSTYN** was the first to perform the surgery at Rhode Island Hospital. "Anterior cruciate ligament reconstruction is the standard of care for a torn ACL with high patient satisfaction and outcomes, but carries the long-term risk of graft failure and knee post traumatic degenerative arthritis. The BEAR procedure allows reattachment of the native ligament and is less invasive than reconstruction surgery. The goal is for a faster recovery time and return of knee stability with high patient satisfaction, and hopefully less chance of arthritis 15 to 20 years down the road."

Dr. Murray states, "We are now in our third clinical trial and we feel that University Orthopedics and Rhode Island Hospital are a perfect fit to continue this research. Doctors



Hulstyn, Fadale and Owens have extensive experience in ACL surgery and we are excited to have them join this study."

The goal of the current study is to analyze the BEAR procedure and more patients to determine if patient age contributes to the success of the procedure. Up to 250 patients will be enrolled at University Orthopaedics/Rhode Island Hospital and at Boston Children's Hospital. "So far the results have been very promising. We are thrilled to be part of this exciting trial and appreciate Dr. Murray and her staff for allowing University Orthopedics to continue this groundbreaking work," says Hulstyn. ❖



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## Southcoast Health opens new Fall River Breast Center, upgrades to 3-D mammography



From Left to Right: Derek Viera (Project Team), Debra Desmarais, George Berg (Project Team), Christopher DaSilva, Dr. Maureen Chung, Christine LoPiano, Mary-Lou Shea RN, Filomena Curley.

FALL RIVER – Southcoast Health has opened the Southcoast Health Breast Center in Fall River, where all regional services have been integrated at one site.

This \$4 million project brings the latest in breast care services – from mammography to surgical consults – to offer timely, integrated care that also includes breast ultrasound and bone densitometry.

Southcoast Health modeled the Fall River site after its successful Breast Program in Dartmouth at the Center for Women's Health, on Faunce Corner Road. This program has been in place for several years and has produced exceptional results in reducing the time from a positive mammogram to surgery and cancer diagnosis. The excellent outcomes at that site helped Southcoast Health gain certification by the prestigious National Accreditation Program for Breast Centers.

A staff radiologist will be available at the new center to read all mammograms. The center also has a surgical clinic where patients can meet with a breast surgeon who will coordinate their care with the assistance of a nurse navigator. This model of care provides a seamless approach for all patients who are diagnosed with breast disease.

The new center also uses the latest in mammography

technology, tomosynthesis or 3-D mammograms. Unlike standard 2-D mammogram images, the 3-D images provided with tomosynthesis enable radiologists to identify tumors at their earliest stages, when they are most successfully treated. Tomosynthesis also makes it easier to identify benign abnormalities, reducing the need for patients to return for a second mammogram.

"Studies show that a physician-led, multi-disciplinary team approach to breast care delivers the best results," said **DR. MAUREEN CHUNG**, medical director of the Southcoast Health Breast Program. "We have confirmed those studies at Southcoast Health, with our own experience in Dartmouth, and I am pleased that we can replicate that approach in Fall River."

These advances in Southcoast Health's Breast Program include improvements to the IT system to allow digital transfer of the larger, 3-D images.

Support for the project came from the Manton Foundation, Southern New England Radiology Associates and the Charlton Memorial Hospital Auxiliary. Massachusetts Sen. Michael Rodrigues also provided unwavering support for the new Fall River center. ❖