

North Port CHAT Meeting Summary **March 13, 2013**

Present: Chief Kevin Vespia, Monica Becket, Sue Steele Miller, Anne Marie Lupien, Bruce Burton, Brie Southall, Jasmen Rogers, Brenda Szych, Davie Powell, Ken Alexander, Vince Giuffre, Marilyn Gregory, Tom Davie, Maureen Coble, Linda Stone, Janis Russell, Mayor Linda Yates, Kenneth Koslow, Hector Mendez, Deborah Robinson, Dayna Bloch, Vice-Mayor Jim Blucher, Ken Alexander, Freddy Koenig, Gwen MacKenzie, Sam George, Vanessa Carusone, Diane Ramseyer

Welcome and Introductions – Past Chair, Sam George welcomed everyone and introductions were provided.

Guest: Sam George introduced Gwen MacKenzie, CEO of Sarasota Health Care System. Ms. MacKenzie provided the group with an update on the North Port Emergency Room – achieving highest patient experience scores in the SMH system. She briefly recounted the history of the ER which is set for 28,000 visits this year, more than most ER's in the area. Here are a few details:

- They now offer pulmonary rehabilitation,
- vascular ultrasound,
- orthopedic physician on Mondays,
- full-time obstetrician,
- full-time pediatrician.

Additionally, they have provided over 60,000 visits to persons without insurance throughout the region (not just North Port ER). A benefit of the Affordable Care Act (ACA) is the expansion of coverage to more Americans, which could help around 60% of those 60,000 uninsured. It also has the potential to bring in \$362 million to the region over the next few years and 50,000 new jobs to Florida. She also indicated that it would also provide the “dignity of insurance” so that the emergency room is not the place of primary care. This in turn, helps the cost of health care overall. She indicated that they have been sharing the benefits of participating in ACA with elected officials through the current legislative session. During the first three years of ACA, if Florida opts in, 100% will be provided through the federal government, diminishing to 90% the following 2 years and then through a sliding scale structure thereafter. Support from the community would be helpful during this legislative decision making process.

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Ms. MacKenzie provided some additional data that is important to know for a better understanding of the issue. Currently, Florida ranks #1 in Medicare recipients; #2 in uninsured; and one of the top states with Medicaid recipients. These are some of the reasons that there can be benefit to Florida for “opting in” with ACA.

(NOTE: The following should be viewed from the context of March 13th and the status of ACA in Florida at that time. Changes may have occurred since then.) She indicated that the Governor has indicated he is in favor of participating at least through the first three years (100% coverage), and then looking at the situation again. The Senate, which is interested in Medicaid Reform, voted it down. Our local representatives to the House are supportive to our local needs, but not in leadership roles related to this issue. There is also a proposal to cut 2% to Medicaid, which will have negative impacts to the area through a reduction in the number of persons eligible for services.

Ms. MacKenzie then shared some of the vision and values of the SMH system. This includes providing a patient (not hospital) center system. Through a population health and population based service focus, this can help support prevention efforts, avoid chronic and future health issues, and reduce future healthcare costs. Examples of this include their work on the prescription drug database and education to physicians, obesity issue, etc. This also includes the concept of “service centers” rather than a hospital-based system. Service centers are based on population data –locating services so that all community areas have local access. SMH is focused on providing centers at the community level to assure services are as local as possible. The goal is to have urgent care centers throughout their catchment area, which would also help reduce emergency room costs. Currently 90% of emergency patients go home, and only about 10% require more critical care. Technology is going to be a key part of achieving this community-centric service; and help people to remain in the home and not in a patient setting.

This approach is the reason the Hospital Board is committed to providing a service center in the Venice area. The statistics on people from Venice who are driving longer distances to receive services through SMH bear out the need. They also have about 500 staff from the area who would like to work in their community. Further, it would also address a need for pediatric services.

Ms. MacKenzie took some questions:

1. *What about a surgery center in North Port, so that community members do not need to drive so far?*

There are 30 in the region already. They may not be well-located with regard to North Port, however. Additionally, surgery centers are usually owned by physician groups.

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For SMH to get involved, they would be competing with their own physicians. This on top of the over-capacity level currently has made surgery centers not a highly considered service for the Board. However, it because of the location issue, it could be a discussion topic at the Board level. She also clarified that the Venice center would NOT be a surgery center.

2. *What about a hospital in North Port?*

A 120 bed hospital costs about 120 million dollars and requires 25-300 physicians on staff, including all specialties. Even though there may be specialists in the region, having them add another hospital to their practice is not as simple as it may appear. One of the factors is being on-call. If they already have privileges with a hospital, they are already on-call with that system. It is not usually feasible to add more on-call time.

3. *Will SMH be expanding the Medicare Supplement programs it currently accepts?*

Ms. MacKenzie indicated she is aware of this issue and that they do review insurance program and try to expand providers as much as possible.

4. *What are the primary areas that would benefit from community advocacy?*

Medicaid expansion

5. *Where are good sources for reliable information on ACA?*

It is difficult to find a single source of objective and impartial information. Ken Alexander suggested Kaiser Family Foundation.

6. *What is the integration process with Baycare and how does this affect SMH?*

The future of the hospital sector is to either consolidate or go out of business. Starting two years ago, SMH Board began looking at its options as one of the only independent hospitals in the area. Coming into the process as a healthy organization is a strong asset, helping assure such partnerships address the areas of purchasing power and negotiating contracts that are a benefit of a larger organization, while maintaining local operational control. Through a process of looking nationally, statewide and regionally, the Board identified several systems for consideration of affiliation. Both are able to address the mutual need for leveraging power through this affiliation.

7. *Jasmen Rogers, DCF, asked if their protocol for drug testing mothers after birth might be examined. Currently, they see many referrals as a result of positive tests from the medication used during delivery, not from previous use.*

Ms. MacKenzie made a note of this and said these protocols are a work in progress, with Tampa General helping. Data indicates babies diagnosed as being substance exposed newborns has tripled in the past few years. Freddy will talk with the OB Specialist.

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8. *There can be difficulty transferring from North Port ER to other hospitals.*

This is a choice of those hospitals to re-admit and re-assess. Upon discharge from North Port ER, SMH is not involved in those decisions.

Vice-Mayor Blucher wanted to commend Freddy Koenig, ER Manager, on his work in the community. Others echoed this sentiment and thanked both him and Ms. MacKenzie for assuring participation in the community.

Next CHAT MEETING- April 10, 2013- LOCATION CHANGE APRIL ONLY

Community Forum on Children At-Risk

NORTH PORT CITY COMMISSION CHAMBERS (location change)

April 11th – 8:45 am – NP-ASAP – North Port Police Dept.

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