New Munson Medical Center President Alfred E. Pilong Jr. has assumed his role at the hospital effective April 3.

Munson Healthcare President and CEO Ed Ness announced his appointment in February.

“Kathleen McManus, who is retiring this fall from her position as chief operating officer and executive vice president of Munson Medical Center, will work closely with AI during her transition to retirement,” Ness said. “This returns us to a leadership structure that has been in place successfully during most of Munson Healthcare’s 28-year history. I will continue on as president and CEO of Munson Healthcare and will focus my efforts on developing a financially stable, clinically coordinated, integrated health system.”

Pilong most recently served as president of the 445-bed Winchester Medical Center in Winchester, Va., where he also was senior vice president of the multi-hospital Valley Health System.

“Al comes to us highly recommended, with demonstrated success in addressing the challenging quality and operational issues we face,” Ness said.

While Pilong led Winchester Medical Center, the hospital was named in U.S. News and World Report’s list of best regional hospitals and received a Leapfrog Hospital Safety Grade A. The hospital also was designated a Magnet hospital for nursing excellence.

Prior to his service in Virginia, he served as vice president of professional and ambulatory services at Bayhealth Medical Center in Dover, Del.

“I am excited to be joining an organization with such a high commitment to quality

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Health Care Reform Brings Challenges to Munson

From one vantage point, health care reform may look like a tsunami cresting toward a familiar shore and changing all that seems familiar and comfortable.

However, from the wave’s crest, health care organizations determined to “ride the surf” see possibilities for coming out on top of a new world of opportunities that offer the promise of greater access to care for patients and rewards for quality.

“There is no doubt we face challenges ahead,” said Derk Pronger, vice president of operations at Munson Medical Center. “But this hospital has a history of overcoming whatever obstacles we face and continuing to ensure the safety of our patients, provide high quality care, and do it in a cost-effective way.”

Pronger said the challenges of health care reform are no longer on the horizon. Patient outcomes now are reflected in how the hospital is paid. The hospital’s fall prevention program, noise reduction efforts, and work to prevent patient readmissions to the hospital are all part of efforts to ensure a positive outcome for patients and reimbursement for their stay.

see Care Reform, page 2

Tonsillectomy in Morocco

Munson Family Practice Resident Robert Milanes, MD, learned a lot during time late last year in Kenya and Morocco. Dr. Milanes, upper left, observes as a young patient’s tonsils are being removed in this photo from Morocco. Read how the Munson Family Residency Program continues to strengthen its international ties on page 5.
Adapting to Our Changing World in Health Care

As a nation, we have known for some time that the current model for health care is not sustainable or affordable. Health care reform is bringing about some changes, but insurers and consumers have also called for a new model because people cannot afford health care. As an organization, we have been on a journey of transforming and improving our care for many years, and more changes are coming.

Munson is already a high quality, low cost provider thanks to all of the great work you've done over the years. We have had considerable success in containing costs.

In recent years, everyone has pulled together and done a terrific job of cutting $10 - $15 million annually. Even so, we will have to do things differently and better to sustain our quality and remain financially strong.

During the next three years, we need to improve our financial performance by another $40 million through a combination of reducing costs and adding new revenue. In FY 2014 alone, we must achieve sustainable improvements of $15 million because of declining Medicare reimbursement and other regulatory changes. This will require us to redesign our work, and we must do so in a very fast moving environment.

Our plan is not simply to cut dollars with across-the-board spending cuts. Instead, we are taking a thoughtful and purposeful approach. We are looking at everything we do to find ways to be more effective and efficient in our work.

Based on benchmarking data, we know we have an opportunity to reduce our average length of stay by one full day during the next three years. That alone will have an $11 million impact. Even more importantly, it will allow patients to go home where they want to be more quickly, with the safety of home care and other services they need in place.

In the near future, we will see better coordination, collaboration, and communication needed. This will impact numerous benchmarks, including accurately reflecting the acuity of our patients, and providing the precise data required for accurate reimbursement.

This organization is great at solving tough problems. I believe we have the right people and the right resources to figure this out and to make the necessary changes. We would appreciate any input from medical staff.

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“Our ongoing preparing for the future efforts are aimed at helping us meet the financial challenges we face, while at the same time ensuring our patient safety and quality of care continues strong,” Pronger said.

During the next 12 - 18 months, the hospital will focus on:

- Patient satisfaction as reflected in HCAHPS scores
- Maintaining a strong financial foundation
- Reducing patient length of stay
- Reducing complications
- Managing costs
- Increasing revenues

Part of health care reform also gives hospitals responsibility for managing the health of the region. The hospital in partnership with other organizations and providers in the region are working on ways to provide the right level of care at the right time for patients.

“It’s why we look at the reasons some patients have multiple trips to the Emergency Department within a short period of time. We need to see if their care can be managed more effectively in a different setting,” Pronger said.

How well the hospital adapts to challenges posed by health care reform will affect the hospital’s financial strength and its ability to appropriately address the needs of the region.

“We’ve had a lot of success in the past, and we plan to celebrate our successes as we move through this challenging time in health care,” Pronger said. “From our recycling efforts, to application of LEAN principles to processes, to our efforts to implement the electronic health record, a lot of progress has been made. However, there remains much more to do as we position ourselves to stay strong and provide health management and care for the people of northern Michigan.”
Community Health Needs Assessment Completed

Data compiled by a Munson Healthcare effort to pinpoint the most pressing health needs in the five-county Grand Traverse region is now available for the public at the Munson Healthcare website.

The 2013 Community Health Needs Assessment is the culmination of six months of effort between January and July 2012 to gather primary data for the report that was then combined and analyzed with secondary data supplied by the Healthy Communities Institute.

Munson Manager of Community Health said the Community Needs Assessment offers data and information from Antrim, Benzie, Grand Traverse, Kalkaska, and Leelanau counties.

Butler said the assessment process included meetings with 10 focus groups and 16 individual interviews conducted in the five-county region.

Following analysis and prioritization, initial areas of focus will include access to care for medical, dental, and behavioral health needs in the region as well as perinatal and obstetrical services, Butler said.

“There also will be a focus on access to care for the uninsured, those with Medicaid, and those who can’t afford their medications,” she said.

Other issues that will be targeted include diabetes, maternal smoking, and obesity.

Butler said results of the Community Health Needs Assessment will be disseminated to community partners.

The complete 2013 Community Health Needs Assessment, including a detailed report, as well as secondary data are available online at munsonhealthcare.org/chna.

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patient care, a talented clinical team, an outstanding medical staff, and a strong reputation in the community,” Pilong said. “Clearly Munson Medical Center is a special place with great board leadership, physicians, staff, and volunteers. I couldn’t be more pleased with this tremendous opportunity and am thrilled to be relocating to such a wonderful part of the country.”

Pilong said during the interview process he was very impressed with everyone he met, including members of the medical staff, the board, and the senior leadership team.

“I am looking forward to joining Munson’s talented leadership team and am humbled to have been entrusted with this great opportunity to provide leadership and service to such a prestigious organization,” he said. “I am also looking forward to working with Ed and supporting him as we tackle the many challenges facing Munson Healthcare.”

In addition to a Master of Business Administration degree from St. Joseph’s University in Philadelphia, Pilong holds a Master of Divinity degree from Alliance Theological Seminary. He began his career as a pharmacist after obtaining his Bachelor of Science degree from Rutgers University.

He served as a pharmacist and later a professor of pharmacy before moving into hospital administration roles.

Married and the father of three children, ages 22, 19, and 13, Pilong enjoys golf, working out, and hiking.

He is a Fellow of the American College of Healthcare Executives.

Physician Recruiting Looks For Needs Ahead

New physician recruiting in Fiscal Year 2012 resulted in 27 physicians joining Munson Healthcare-affiliated hospitals.

Recruiting for the new year is under way and physicians are reminded that Physician Recruitment can help with succession planning.

“All physicians thinking about retirement in the next three years or so should contact our Physician Services and Recruitment office,” said David McGreaham, MD, Vice President of Medical Affairs at Munson Medical Center, who is responsible for physician recruiting at Munson Healthcare.

Physician recruiters include Physician Recruitment Director Deb Glicker and Senior Physician Recruiter Tracey Kukla-Aleshire.

The FY 2012 recruiting class included the following specialties and the number of recruits: Anesthesiology, three; Cardiothoracic Surgery, one; Emergency Medicine, two; Family Medicine, two; Hematology/Oncology, one; Hospitalist, five; Infectious Disease, one; Nephrology, two; Pediatrics, one; Physical Medicine and Rehabilitation, three; Psychiatry, one; Radiation Oncology, one; Radiology, one; Urology, one.

Physician Services and Recruitment may be reached at (231) 935-5890 or (231) 935-7692.
Assessment Tool with new Protocol Will Help Patients and Staff

An assessment tool for patients going through alcohol withdrawal will now be used as a pathway protocol at Munson Medical Center starting May 21.

Medical Department Chairman Donald Caraccio, MD, said the Clinical Institute Withdrawal of Alcohol (CIWA) protocol pathway was collaboratively developed in coordination with the Primary Care committee working with Nursing and Pharmacy staff who identified a patient and staff safety concern. The drivers for this initiative were champion Hospitalist Thomas McElwee, MD, and Intensivist John Kremarik, MD. The Pharmacy and Therapeutic committee also approved the initiative.

The CIWA nursing assessment tool is part of an adjunctive power plan and would be used in conjunction with other admitting Power Plans. This protocol will allow early recognition and appropriate treatment of patients undergoing alcohol withdrawal with benzodiazepines and Phenobarbital.

“Our goal is to standardize best care and best practices with evidenced based literature for this patient population and improve patient quality and safety as well as staff safety,” Dr. Caraccio said. “The key to success with this is early recognition of the condition and appropriate use of medications.”

Primarily this patient population will be managed by hospitalists with the aid of this adjunct power plan. Physicians and providers in other services such as Trauma and Surgery are encouraged to consult Hospitalists early when the diagnosis is suspected. Prior to the go-live day on May 21, Dr. Caraccio said education will be offered at the Hospitalist section meeting as well as Tuesday Grand Rounds on April 30 and May 7. Nurses, Allied Health and other providers are welcome to attend the lectures. Hospitalist will also receive education through HealthStream. Nursing and staff education has been ongoing.

“On May 21 and for several weeks following, an implementation team will be available via pager 24/7 to assist with questions and concerns,” Dr. Caraccio said.

Doctor’s Day 2013

More than 60 members of the Munson Medical Center medical staff along with retired physicians enjoyed a Doctors’ Day celebration on March 19 in the hospital Conference Center. Medical Executive Committee President Carl Anders, MD, spoke about the history of Munson and played a presentation by physician/author Abraham Verghese, MD. Drawing winners for gift certificates at area restaurants included: Troy Ahlstrom, MD; Don Caraccio, MD; Amy Ferguson, MD; and Sara Roth, DO.

Hospitalist Ken Friar, MD, received special recognition for his contributions to Munson Medical Center over the years.

Above, more than 60 members of the Munson Medical Staff along with retired physicians turned out for Doctor’s Day. In photo at left, Amy Ferguson, MD, left, and Yvonne Hunter, MD, enjoy some conversation over lunch at the Doctor’s Day event.
Munson Residency Program Strengthens Ties Overseas

Munson Family Practice Resident Robert Milanes, MD, spent time late last year working at hospitals in Kenya and Morocco.

Watching tonsils taken out as a security guard kept a young patient’s head immobile in Morocco was a good reminder of how different international medicine can be from what is experienced in the U.S.

“It’s good to go and see how fortunate we have it here,” he said. “They have limited resources and are asked to do patient care. They are very resourceful.”

Munson Family Practice Residency Program Director J. William Rawlin, DO, said spending time in an international setting benefits a resident’s education.

“They get the opportunity to improve their ability to care for patients of a different culture, and also work with health care providers of a different culture. Our residency program at Munson Medical Center supports the mission to train residents for working in rural areas. In many rural areas, access to services or technology may be limited. Working in Africa provides about the strongest possible experience for working in conditions with limited resources. It really forces the resident to learn how to use their history and physical exam skills to diagnose and then treat patients.”

Dr. Milanes and Kurt Sanford, MD, a Munson gastroenterologist, provided care at PCEA Hospital in Chogoria, Kenya, last November as part of a growing relationship between the hospital and Munson Medical Center.

Rawlin said the relationship with that hospital began with Munson Cardiologist David MacIntosh, DO, doing volunteer work there. Last year, Munson resident Heather Kennedy, DO, and Munson Family Practice faculty member David Klee, MD, visited and spent time caring for patients. Dr. Klee recently was in Kenya for a second visit.

“The frequency of faculty involvement is still in development,” Dr. Rawlin said. “The purpose of faculty will be to work alongside the resident as a supervisor, but also to participate in the care for their own experience. It will help them gain insight to international medicine. The intention is that whenever a resident goes, we hope to have either a core Family Medicine faculty member or other member of the Munson Medical Center staff go as well.”

Rawlin said the relationship with PCEA in Chogoria became it helps with recruitment of residents.

“In the past we have lost some good candidates by not having this opportunity,” he said. “It will help the Munson Healthcare system as well. We hope that we are establishing the groundwork and creating the process that any physician in the Munson Healthcare system who wants the opportunity to participate in an experience like this can, regardless of their specialty.”

Recalling the very different practice environment, Dr. Milanes said in both Kenya and Morocco, patients have to pay for care before they receive it. Instead of dealing with issues such as hypertension and diabetes – typical conditions in northern Michigan – he participated with Kenyan medical staff in treating patients with TB, HIV, and malnutrition.

“I got a lot more out of being there than the help I gave them,” Dr. Milanes said. “You get a lot of perspective.”
**IN BRIEF**

**Resident Jake Flynn, MD, Race Director for 5K**

Helping create Munson Medical Center’s first 5K run/walk seems a natural next step for second-year Munson Family Practice Resident Jake Flynn, MD.

“Promoting healthy lifestyles is a huge passion of mine,” said Dr. Flynn a former All-American runner at Central Michigan University and a three-time high school state champ in cross country at Benzie Central High School. “Daily exercise is just a component of that, but I think this employee 5K makes for a fun, convenient path to improving overall fitness.”

The run/walk is scheduled for 9 am on Saturday, June 8. Dr. Flynn said the course will be professionally timed and participants will stay on or near the hospital campus.

The event is open to all Munson Healthcare staff, physicians, providers, families and friends. Awards and prizes will be given for finish times, general participation, and best department spirit. T-shirts are available for purchase. There is no cost to participate in the race.

For more information on the event go to munsonhealthcare.org/runtherun.

**Technology Fair Offered at Munson Monday, June 3**

Munson Medical Center Information Systems is sponsoring a technology fair on Monday, June 3, from 9 am – 3 pm.

Technology experts and vendors will be on-site in the Conference Center to provide demos and answer questions.

For questions about the event, please contact John Rokos, Information Systems, at (231) 935-6999 or jrokos1@mhc.net.

**Oncologist-Hematologist Joins Otsego Staff**

Oncologist-Hematologist Philomena M. Colucci, DO, MS, has joined the medical staff at Otsego Memorial Hospital. Her Traverse City office was closed on March 1.

To refer a patient, or to speak with Dr. Colucci, call the Munson Switchboard at (231) 935-5000, or contact her Gaylord office at (989) 731-7760.

**Grand Traverse Stroke Club Celebrates 30 Years**

The Grand Traverse Bay Area Stroke Club will celebrate 30 years during its monthly meeting on Wednesday, May 8. May is also National Stroke Awareness Month.

Munson Medical Center Medical Department Chairman Don Caraccio, MD, and Stroke Coordinator Kathleen Glaza, MSN, RN, ACNS, BC, will be on hand to congratulate the group and talk about the importance of the support group for stroke victims.

The meeting will be from 2:30 - 4:30 pm at The Presbyterian Church, 701 Westminster Rd., Traverse City.

**Physician Lecture Series Addresses Healthcare Reform**

“Tools for Transformation – How to Make Health Reform Work for You” will be offered from 6 - 8 pm on Wednesday, May 8 at Traverse City Golf and Country Club. A light dinner and refreshments will be served. Physicians will receive 2.0 hours of CME for attending. To RSVP, please contact the Northern Physicians Organization at (231) 421-8505.

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**Physician Support Important During Disaster Codes**

Munson Director of Safety and Security John Bolde said he appreciates physician support for disaster codes, as well as various training exercises held to fulfill various regulatory requirements at the hospital.

As a reminder, the four stages of Code Triage are:

**Code Triage: Standby Internal/External** – Activated to alert the hospital of a potential disaster or a disaster for which the hospital needs to begin preparations. If the disaster is internal to the hospital, “internal” is paged. If the disaster is external to the hospital, “external” is paged.

**Code Triage: Stage I, ED** – Activated when the Emergency Department needs additional staff to care for its emergent patient load (i.e., ED capabilities are taxed).

**Code Triage: Stage II, Internal/External Hospital-Wide** – Activated when full activation of Incident Command is required to address the situation (i.e., MMC’s overall capabilities are taxed).

**Code Triage: Stage III, Surge Protocol** – Activated when there is a systemic or area emergency department overload. Patients range up to 500, and/or for situations that may be longer in duration, days or weeks (i.e., community capabilities are taxed).

For quick reference, Emergency Codes cards are clipped to the back of ID badges. For security and patient safety, ID badges are required to be worn at all times and may be needed for hospital access during disaster situations.

Disaster notification will occur via overhead page and Alpha pagers systems, and a mass notification system is in the works through Munson Medical Center Switchboard, to be implemented April/May of this year. Physicians should report to the physician lounge for an assignment unless another location is specified.

“Physicians will typically report to a position known as the ‘Medical/Technical Specialist’ who will likely be a physician in a leadership position such as the VPMA or a medical director,” Bolde said. “The Medical Specialist makes assignments, which may differ from a physician’s daily routine. Every attempt will be made to match specialties with patient needs of the situation. If a physician has a particular area of interest or experience to bring to medical disaster response, please let us know.”

The Emergency Operations Plan can be viewed on the Disaster web page: MMC Intranet/ Disaster Preparedness/ Disaster Policies/ Munson Medical Center.