



From left to right, nurse practitioners Linda Krause, Lisa Moreland and Jenny Barlow, WMHS President and CEO Barry P. Ronan, WMHS Senior Vice President and Chief Operating Officer Nancy Adams, WMHS Senior Vice President and Chief Medical Officer Gerald Goldstein, M.D., nurse practitioners Lynn Metcalf, Tiffany Bennett, Allison Rexrode and Ashley Preston.

‘A historic victory’

Maryland becomes first state to allow nurse practitioners to order home health care

Now that the calendar has changed to 2020, historic change has taken place across the state of Maryland in relation to the authorization for home health care.

In October of 2019, The Centers for Medicare and Medicaid Services announced an adjustment in policy that enables all Medicare-enrolled nurse practitioners in Maryland to certify home health care services for Medicare beneficiaries as part of the Maryland Total Cost of Care Model.

Under the previous Medicare regulations, a nurse practitioner could provide primary care services, but only a physician could order the patient to receive home health care services.

The push to change the existing policy was championed by Western Maryland Health System President and CEO Barry Ronan. “When I learned that the 5,300 nurse practitioners who had full practice authority in Maryland were not permitted by CMS to write orders for home care services, I realized that something had to be done,” Ronan said. “I am extremely grateful that the leadership at both the Centers for Medicare and Medicaid Innovations, the Maryland Hospital Association and Bobby Neal, Maryland’s Secretary of Health, were receptive to the recommendation that a demonstration project be created for NPs in Maryland being permitted to write orders for home care. This action no longer interrupts the continuum of care for NPs in the treatment of their patients.”

Maryland will become the only state to allow NPs to write these orders. “The previous policy excluded nurse practitioners and was completely antithetical to

So many patients struggle to get the care they need after they leave the hospital. They can take comfort in knowing there are now no barriers to home health care, regardless of who their provider may be. There are no limitations and that’s just huge.”

***-Sharon Mason,
WMHS Director of Home
Health & Hospice Services***

the mission of this state, which is value-based care and care in the most appropriate location,” said Gerald Goldstein, M.D., WMHS Senior Vice President and Chief Medical Officer.

“We have been carefully decreasing unnecessary length of stay and utilization. We place patients in the correct location, but because a patient’s primary care provider happens to be a nurse practitioner, the patient is unable to receive home care while under their care.”

Sharon Mason, WMHS Director of Home Health & Hospice Services, called the change a “historic victory” for home health care, nurse practitioners and patients in the community alike. “Our goal is to keep patients out of the hospital,” she said.

“This opens the patients’ doors

to us. We are now able to get to them as soon as possible. Previously, their care was being delayed, and sometimes, after surgery or a hospital stay, they ended up back in the emergency department. Home health care is so important. It is one of the leading ways to reduce readmissions.”

Jennifer Barlow, a Nurse Practitioner at WMHS LaVale Primary Care Center, said she treated many patients who were turning down home health care services because they did not want to go through the process that was in place.

“Patients would often refuse to seek home health services because it was difficult to get authorized,” she said. “At their sickest and most vulnerable points, they were forced to go see a new provider they did not know in order to get the services started. It was very hard to overcome.”

Mason said that WMHS Home Health Care will now be able to touch 15-20 percent more patients than they have in the past. “We were hoping for this,” she said, “and now we are making a plan to reach our local nurse practitioners to educate them about some of the regulatory pieces and orders so that we can provide seamless care. That’s the whole goal.”

“The community is going to benefit greatly from this welcomed change in the regulation. So many patients struggle to get the care they need after they leave the hospital. They can take comfort in knowing there are now no barriers to home health care, regardless of who their provider may be. There are no limitations and that’s just huge.”

Breathe it in

Vaping, tobacco cessation kick off 2020 WMHS Population Health initiatives

In this time of new year’s resolutions, one of the biggest changes a person can make is kicking a bad habit. One of the hardest habits to quit, smoking, is facing renewed scrutiny thanks to a change in how the nicotine is delivered.

Vaping, which according to the Center on Addiction, is the act of inhaling and exhaling the aerosol, often referred to as vapor, which is produced by an e-cigarette or similar device, has taken the world by storm over the last several years. “I think initially when it first came out it was meant to help people quit smoking, but then it was geared toward a younger audience through advertising all the different flavors,” said Jill Evans, Pulmonary Education Specialist at Western Maryland Health System. “Although we don’t fully understand yet what happens to the lungs when someone vapes, we are finding out quickly that it has devastating consequences, just like smoking.”

The practice is popular in Western Maryland and nearby Pennsylvania and West Virginia. “I’ve had the opportunity to provide outreach in some local schools, and it has been a growing concern for the last several years,” Evans said. “The majority of students know about vaping and many have experimented. The kids are getting addicted at an early age.”

Even those people with good intentions who aim to use vaping as a way to quit smoking are putting themselves at risk. “One of the biggest concerns is that many people who are working toward smoking cessation by using vaping as an alternative end up both vaping and smoking at the same time, which ends up being a double-edged sword,” Evans said.

Evans’ fellow Pulmonary Education Specialist Cheryl Hartman said the lack of information about the long-term effects of vaping causes concern. “It’s just dangerous,” she said. “We don’t know how bad of an epidemic this is going to be. There’s a lot of young people doing this under the radar.”



What is clear is the process. You are putting an oil filled with chemicals into your lungs, and they are just not made to tolerate something like that. Your lungs are a sponge meant to be exposed to only air.”

Both Evans and Hartman emphasized that quitting both smoking and vaping is tough. “You are talking about one of the most addictive substances on the planet,” Evans said. “It’s not impossible though. The key is sharing the information we have with the people that need it. Those who seek out counseling and help are more than three times as likely to successfully quit.”

Parents worried about their children’s vaping habit or those seeking more information should contact their pediatrician, and consult the information below and/or visit <https://teen.smokefree.gov/quit-vaping>.

Additional information and resources are also available at the WMHS Center for Clinical Resources by calling 240-964-8787.



A gift unlike any other

\$160K endowment for WMHS Pastoral Care will open new doors

Before Sara Jane Rawlings of New Creek, West Virginia, passed away last May, she went to extraordinary lengths to ensure her memory would live on through the good works and deeds of the Western Maryland Health System Pastoral Care Department. An endowment gift of nearly \$160,000 given to WMHS Pastoral Care, the first ever for the department, was initiated by the interactions Sara Jane experienced with Pastor Bruce McBride and the WMHS chaplains while she was a patient here.

Sara Jane was an active member of the Rees Chapel United Methodist Church, serving as Sunday school teacher, member of the choir, Vacation Bible School teacher and member of the Administrative Council. She lived her faith, and though she never had children of her own, they held a special place in her heart.

Rusty Kitzmiller, who serves as a WMHS Chaplain, was especially close to Sara Jane. “She was like a member of our family,” Rusty said. “She became very close to my dad after each of their spouses passed away. He did a lot of work for her at her home and they were best friends. She didn’t have any kids of her own, so she really felt we were her kids. My family loved her so much. She treated my grandkids as her great grandkids.”

As her health declined and stays at WMHS became more frequent, Sara Jane wanted to do something special to help the Pastoral Care Department in their ministry. “When she was a patient here she observed how our department interacted with patients and prayed with them,” Rusty said. “She loved what we did. She always expressed concern that those with medical conditions would have the ability to have a chaplain available to pray for them.”

Over the course of her time as a



Sara Jane Rawlings

patient, Pastor McBride had several conversations with Sara Jane about the needs of his department. “She sought me out and wondered how she could help our ministry,” he said.

That help came in a two-fold approach. Two-thirds of the endowment is to be used for general ministry and the needs of the department, while the other third is specifically designated to go toward helping children in need – thus affirming Sara Jane’s love for kids.

Sara Jane’s endowment, like all gifts donated to WMHS, has been managed by the Western Maryland Health System Foundation. “We are the keeper of funds like this, and we make sure the donor is remembered and recognized—if they choose—and we also make sure the funds are dispersed exactly as the donor asked that they be,” said Karen Johnson, WMHS Foundation Chief Development Officer. “There’s a process with every gift. There are checks and balances to ensure that Sara Jane’s wishes will be fulfilled.

And her wishes are already being

realized.

More than 200 toys have been purchased and are being dispersed as needed throughout the Western Maryland Regional Medical Center. They are given to children in areas like the Emergency Department, Same Day Surgery and the Pediatric Observation Unit. Staff have access to the toys to give out as needed.

“There are always children around who need to know that they are loved,” Pastor McBride said. “These little toys show we care and help take their mind off whatever they are going through.”

As far as the other uses of the endowment, Pastor McBride said the gift will open a lot of doors for both patients and their families as well as staff. “This allows us to have more resources,” he said. “We will be able to reach these folks who may be struggling in their lives and to offer the encouragement so many people need.”

While gifts as specific as Sara Jane’s endowment are not typical, Johnson conveys that a donor has a myriad of options when it comes to enriching WMHS. “They can be as direct or as broad as they’d like,” she said. “People can give any amount to any department or cause. We understand that most people aren’t able to give their entire estate. Even a percentage is significant and will touch many people. Truly, legacy gifts impact the future.”

Sara Jane’s generous donation is already doing the good she hoped it would. “I think she’d be thrilled with this,” Rusty said. “She’s certainly smiling down from heaven.” Pastor McBride agreed and said, “for decades to come there will be resources here in her memory.” She was so blessed by this hospital that she wanted to make sure we knew the impact we had on her life.”



You don’t have to be rich to be generous.

YOU can make a real difference. Planned Gifts — perhaps a percentage of your will, real estate or a life insurance policy — make it possible, without affecting your current budget. Your generosity can make that happen.

If you have the desire, we can work with you to fulfill your wish to leave an impact on our world. From scholarships to health care to technology, we can help you find a personal and meaningful way to leave a legacy.

Learn more at
WMHSlegacy.org,
or call 240-964-8003

Remember! Members of the Pastoral Care staff are available for prayer and reflection every Wednesday from noon until 1 p.m. in the WMHS Chapel

Drop us a line!

Community Relations wants to hear all of the good news about the employees, patients and departments at WMHS. Contact Ed DeWitt at edewitt@wmhs.com if you have a story that is begging to be told.



Do you follow us?



A grand entrance

Congratulations to Felicia Gordon and Corey Smith of Cumberland on the arrival of baby Waylon, the first baby born in the new year at the Western Maryland Regional Medical Center. Wasting no time, Waylon made his entrance at 12:01 a.m. on New Year’s Day.



ICU staff spreads cheer

Intensive Care Unit staff members went the extra mile to make the holidays memorable for one patient and his family, singing carols around his bedside Christmas Eve. “As ICU nurses, we form meaningful bonds with our patients and their families,” said Liz Simmons, RN. “This patient has been with us for almost two months, through both Thanksgiving and Christmas. His family has sat by his side throughout his stay, celebrating both holidays with him in ICU. Knowing that they couldn’t be home for Christmas, we wanted to bring Christmas to them. We thought it would bring the patient and his family joy to sing Christmas carols to them. It was a priceless moment for all,” she said. “I am very proud of the staff in ICU,” said Critical Care Services Manager Crissy Martz. “They always go above and beyond for our patients, so I wasn’t surprised when they told me they were getting ready to sing carols for this gentlemen. Seeing their excitement for him and their effort to give him a small gift of music at Christmas made it extra special.”