



VIEWPOINT

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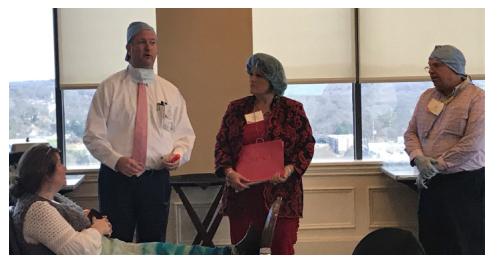
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March educational programs draw positive reviews

On March 13, The Risk Authority Stanford and Aon held a special workshop guided by an industry expert, exploring how healthcare leaders can use Design Thinking to generate value-driven solutions in healthcare. Attendees learned the fundamentals of Design Thinking and how to use it to generate powerful solutions for the most pressing challenges and risks facing healthcare leaders. Design Thinking is a mindset and methodology for problem solving that is being leveraged by the most successful organizations to drive innovation and value.

Capped at 25 participants, this was a collaborative and hands-on experience where participants learned new tools to spark innovation and value creation in their organizations. The event was very well-received, and when asked to name the best parts of the workshop, participant comments included:

- Interaction with all participants
- Participation by all attendees. Learning Design Thinking - never heard of it before. Empathetic approach - I can use it in my work.
- Being pushed into using my critical thinking skills. The fast pace.



- Simon made the material very understandable from the beginning. He engaged everyone immediately. I liked how the examples were simple to build up to more complex.
- Hands on activities
- Role playing to bring ideas to reality
- Additional skills to use with any design project

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TRA GSC's annual *Medical Staff Leadership Advance* was held at the Hyatt Regency in Greenville on Thursday and Friday, March 22 & 23, 2018. Fifty-two participants from 14 facilities attended the *Advance*, now in its 17th year. Our premier educational event for physicians, advanced practice providers, and risk managers, this year's program focused on the potential pitfalls of electronic medical records, issues inherent in monitoring patients, and what we have learned about improving documentation.

Along with featuring nationally known speakers who addressed broad issues regarding the role of technology, the two-day event included presentations and case studies from risk managers and claims consultants with a comprehensive understanding of liability issues in South Carolina.

The *Advance* was, once again, a great success, with evaluation comments including:

- I think that focus on documentation really helped, and showing how important it is to document, and not that is just an afterthought. I think that it was eye opening to the physicians in the room.
- The Q&A was very beneficial due to the interactions of the group.
- Enjoyed the program and speakers, and am glad I was invited.
- Great subject experts!
- Better understanding of varying content of audit trail, better understanding of pitfalls of EHR as it relates to documentation.

For more information about upcoming educational opportunities, please contact Janine Wall, ARM, AIS, GBA, director of marketing at TRA GSC, at jwall@theriskauthority.com or visit our website at www.theriskauthority.com and click on Learning and Educational Programs. ■



Gosnell elected to PHT, PHLIP boards

Larry D. Gosnell, treasurer, Greenville Health System, has been elected to the boards of Palmetto Hospital Trust (PHT) and Palmetto Healthcare Liability Insurance Program (PHLIP), filling the unexpired term of Doug Dorman, whose position terminated concurrently with his retirement from Greenville Health System on February 16, 2018. Mr. Gosnell's term began immediately and will expire on December 31, 2018.



Larry D. Gosnell

Mr. Gosnell holds a master of business administration degree from the University of South Carolina and a bachelor of science degree in financial management from Clemson University.

He is responsible for all Greenville Health System (GHS) treasury functions, including investment management, debt management, banking operations and property, casualty and malpractice insurance programs. Prior to joining GHS in 2000, Mr. Gosnell worked in corporate finance leadership roles with Advantica Restaurant Group in Spartanburg, SC and in corporate banking with First Union National Bank in Charlotte, NC.

"We look forward to Larry joining the boards," says Brian J. Teusink, CPA, CCM, AIAF, president of PHT and PHLIP. "His knowledge and experience will be an asset to our governance team as we continue to serve the needs of South Carolina's not-for-profit healthcare organizations." ■

Moody's: nursing shortage will persist into the near future

U.S. hospitals are experiencing an extreme nursing shortage, and the added expense pressure and personnel issues will negatively affect hospital margins for at least the next three to four years, Moody's Investors Service says in a new report.

The Bureau of Labor Statistics predicts this nursing imbalance will persist until 2025. The shortage is largely due to a growing demand for nurses and a lack of supply. Hospitals have implemented strategies to attract and retain nursing talent, including increased compensation, sign-on bonuses, and attractive fringe benefits. However, these incentives are increasing already increasing expenses.

"An aging population, increased incidence of chronic disease and alternative employment options, such as nurse staffing and traveler agencies, drive increased demand. Although the supply of nurses is expected to improve with the expanded nurse training programs and increase in the number of eligible nurse educators, it will still take three to four years for the supply to meet expected demand," Moody's Analyst Safat Hannan says.

Another tactic to reduce the need for expensive contract labor is the creation of an internal nursing pool. However, this can have drawbacks, as it requires the hospital to manage those resources, which can lead to an increase in labor costs. While nursing pools can reduce expensive contract labor, it may lead to higher attrition and lower productivity if nurses are not effectively trained across service lines.

"Labor is the largest hospital expense and is increasing faster than total expense growth while outpacing revenue growth," Hannan says. "The lack of qualified nurses will compound these expense pressures and negatively affect hospital margins."

The nursing shortage will also impact the southern and western U.S. more heavily than the rest of the country. A growing and aging population and low numbers of

nurses entering the workforce are characteristic of Florida, Georgia, Texas, and California.

Moody's says the shortage of nurses will most adversely affect rural hospitals since large urban hospitals benefit from advantages such as their proximity to nursing schools, the ability to pay competitive wages, and greater job opportunities for spouses.

Some hospitals are so desperate for nurses they are offering five-figure signing bonuses, free housing, and college tuition for employees and their children, according to a story by CNN.

UCHealth, which operates nine acute-care hospitals and more than 100 clinics across Colorado, Wyoming, and Nebraska, currently has 330 openings for registered nurses. The health system has offered relocation allowances and signing bonuses of up to \$10,000. Additionally, it provides nurses with up to \$4,000 a year to invest in continuing education, and it offers the Traveler RN program, which allows nurses to do a 13-week rotation at different UCHealth facilities.

In the same vein, Inova Health System in Washington, D.C. is offering nurses who have at least two years of critical care experience and live more than 50 miles from one of its six Washington, D.C.-area hospitals a \$20,000 sign-on bonus and up to \$20,000 in reimbursable relocation costs. Nurses who live within 50 miles of one of Inova's hiring hospitals are offered a \$10,000 signing bonus.

CNN also reports that starting in 2018, West Virginia's WVU Medicine, which operates eight hospitals in the state, will start offering tuition reimbursement for employees and their children. The offer is restricted to nurses who have been employed at the health center for at least five years. The health center will pay full college tuition for nurses' children who attend West Virginia University or partially cover tuition if they attend college elsewhere. ■

False sense of confidence about benefits choices?

Aflac says its recent report shows that American workers may feel more confident about benefits choices, while admitting a lack of understanding regarding the choices being made. A separate Aflac study found younger workers who may be making benefits decisions for the first time also lack knowledge of health insurance coverage but want to branch out and make independent benefits decisions.

Benefits enrollment findings from the 2017 Aflac WorkForces Report, a national online survey of 5,000 U.S.

workers, conducted between January 26 and February 17, 2017, by Lightspeed GMI and released by Aflac, found that more than half (55%) of American workers who receive benefits from their employer agreed that completing their annual health benefits enrollment made them feel secure, like being tucked in at night, or accomplished, like they just finished a marathon. And 67% said they are confident they understood everything for which they signed up.

Continued on page 4

"However, these results may indicate an underlying false sense of confidence," Aflac says, since the survey also uncovered that 76% of workers are making benefits decisions without a complete knowledge of the overall plan. When asked specifically about understanding their overall policies, like deductibles, copays and providers in their network, only 24% of these workers could answer that they understood everything. And this result has been on a steady decline since 2015, when nearly half (47%) believed they knew everything, and then down to 39% in 2016.

"It's counterintuitive to see that workers are reporting a positive benefits enrollment experience, but so many are still struggling with a good understanding of the various aspects of their healthcare coverage," said Matthew Owenby, senior vice president, chief human resources officer at Aflac.

"Benefits enrollment is one of the most important decisions a worker can make each year. Ensuring workers are more educated will require a sustained effort by employers and employees alike to better understand all aspects of benefits, including coverage options and costs."

First-Time Enrollees Looking for Independence, Yet Unprepared

Because millennials and Generation Z are entering the workforce in record numbers, Aflac conducted a separate survey among 1,000 20- to 26-year-olds, employed either full or part time. The Aflac WorkForces Report First-Time Enrollees Survey was conducted from August 24-28, 2017, by Research+Data Insights Inc. on behalf of Aflac and found that more than half (51%) of young workers will be choosing

their healthcare benefits for the first time this enrollment season.

When thinking about healthcare benefits, nearly one-quarter of young adults surveyed associate benefits with independence (22%), yet only 19% feel confident, and just 31% say they feel prepared. Their biggest concern about choosing their own health insurance plan is cost (44%), followed by understanding how health insurance works (36%).

"For all workers, but especially young adults, choosing benefits is complex and filled with unfamiliar terminology, which leaves them feeling overwhelmed and possibly deterred from signing up for the right insurance coverage that they need," added Owenby. "Many young adults are also staying on their parents' insurance plans longer than ever before, delaying the need and opportunity to educate themselves about healthcare benefits."

Of respondents currently on their parents' plans (35%), more than half (54%) are leaving their parents' plan in the next year to purchase their own benefits for the first time. More than two-thirds (69%) of those on their parents' plans are unaware how much their health insurance coverage even costs, but surprisingly, 41% indicated they contribute financially to the health insurance plan their parents pay for.

Despite who is paying the bill, young workers are interested in voluntary benefits. When asked about the benefits young adults are most interested in, voluntary benefits were chosen by one-third of respondents; specifically, 32% said hospital insurance and 29% answered accident insurance. ■

Around TRA Stanford Global Service Center

Lisa McDaniel joined our staff February 20 in the position of payroll clerk.

Sonya Dawkins, senior vice president, claims & risk management, attained 21 years of service on March 31.

Sylvia Prohett, client service representative, attained two years of service on March 21.

Wendy Stephenson, vice president, risk management, attained 13 years of service on March 28.

Amy Uldrick attained four years of service on March 3 and was promoted to the position of vice president, risk management on March 25.

DATEBOOK

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|-------------|---|----------------|
| April 10 | Transforming Health Symposium (Sponsored by SCHA and Co-Sponsored by TRA GSC, Health Sciences South Carolina, BlueCross BlueShield of South Carolina, and Mothers Against Medical Error)*/* | Columbia, SC |
| April 11 | End of Life Issues (PHLIP Liability Program Members Only)* | Webinar |
| April 11 | "Therapy and Nursing Collaboration: Enhancing Communication to Achieve Quality Outcomes" (webinar 12:00 - 3:00 p.m.) (HCPro)** | |
| May 17 & 18 | PHT Worker Safety Symposium (PHT Members Only)* | Charleston, SC |

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*/ * To register or for more information, visit <https://www.scha.org/events/transforming-health-symposium-0>