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THE REGION'S MONTHLY NEWSPAPER FOR HEALTHCARE PROFESSIONALS & PHYSICIANS
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Arjun Saluja

Camillus Health Appoints Arjun Saluja New Board Chair

BY LOIS THOMSON

Arjun Saluja laughs when he says he was "forced" into joining the board of Camillus Health Concern (CHC), but there's no doubt that both sides are pleased with his decision.

Saluja tells how a few years ago he stepped down as Chairman of the Board of Community Health of South Florida (CHI), where he had served for more than 15 years. Following that, according to Saluja, his friend John Dubois "basically convinced me to join the Camillus Health Board, so I joined a year or two later." And now, after serving during that time, including as Chairman of the Finance Committee, Saluja has been elected Board Chair.

Camillus Health Concern is a community health center that makes available primary care, behavioral health, oral health, and social services to those experiencing homelessness – men, women, and children – in Miami-Dade County. Saluja admitted he was hesitant at first about accepting the position, but eventually agreed because he believes "Camillus Health in particular serves a noble cause," and the current political climate "has made it so much harder for (such facilities) to survive."

With that in mind, Saluja believes he is blessed with certain business skills and strategic thinking to be able to serve Camillus Health, and that "we can one day become self-sufficient, perhaps even grow

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Spirituality

The Science of Grief: Why the Holidays Trigger Memories and How to Cope

BY PATTY HUSTED

For many, the holiday season brings a mix of celebration and reflection. But for those who are grieving the loss of a loved one—including patients, family caregivers and even healthcare professionals—the holidays can also intensify feelings of sadness, longing or emotional overwhelm. These responses are not signs of "doing grief wrong." They are deeply human, rooted in both the brain's biology and the meaning we attach to cherished traditions.

Understanding the science behind these emotions can help caregivers and professionals better support those who are grieving and help individuals navigate the season with greater compassion for themselves.



Patty Husted

Why Grief Feels Stronger During the Holidays

Holidays act as emotional touchpoints. They are filled with routines and sensory cues that remind us of the people who once shared them with us. These traditions are stored in the brain's memory centers, where emotional memories are closely linked to sights, sounds and smells.

During the holidays, familiar songs, recipes and rituals can instantly activate these memory pathways. The brain's limbic system, the part responsible for processing emotion, responds quickly. Sometimes before we even recognize what triggered it.

The season can also elevate stress hormones such as cortisol. Increased demands,

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Faith, Service, and the Future of Care: How FAU's Nurses Christian Fellowship Builds a Spiritual Community in Healthcare

BY DANIEL CASCIATO

At Florida Atlantic University's Christine E. Lynn College of Nursing, spirituality is not treated as an afterthought—it is woven directly into the fabric of nursing education. Through the Nurses Christian Fellowship (NCF), students and faculty are creating a spiritual community that supports future nurses academically, emotionally, and personally. Co-led by student president Sydney Gibbons, Associate Professor Dr. Mary Ann Leavitt and Professor Dr. Lisa Wiese, NCF plays a vital role in shaping compassionate, resilient clinicians grounded in both faith and service.

For Dr. Leavitt, the foundation for this work begins with the college's philosophy. "Christine E. Lynn College of Nursing is founded on the theories and principles of Caring Science," she says. "Nursing involves caring for patients holistically."



Sydney Gibbons

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Healthcare Real Estate



Adrian Barrios

Building the Future of Care: How DPR Construction Is Transforming Healthcare Infrastructure Across South Florida

BY DANIEL CASCIATO

South Florida's healthcare landscape is evolving at a rapid pace, and DPR Construction, one of the nation's leading technical builders, is helping to shape that transformation. From the Proton Therapy Treatment Center at Baptist Health in Boca Raton to the Broward Health Coral Springs South Tower expansion, DPR is building facilities that bring advanced medical care closer to the communities that need it most.

For Adrian Barrios, DPR's local business unit leader, the region's healthcare boom is both personal and professional.

"I was born and raised in South Florida," he says. "I've been watching the healthcare community grow around me my entire life." With the area's continued aging population and growing emphasis on preven-

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Publisher's Note

HOLIDAY EDITION

2025 Healthcare vs. 2026 Healthcare: A Festive Forecast

As we wrap up 2025 with all the grace of someone trying to untangle last year's holiday lights, it feels like the perfect time to reflect on how far healthcare has come—and, naturally, to predict where it's going in 2026. After all, nothing says "holiday spirit" like making bold healthcare predictions with the same confidence we apply to saying we'll actually eat fewer cookies this year. (We won't. It's fine.)



This year, South Florida's healthcare system will once again prove that "holiday slowdown" is a myth. In 2025, our hospitals will stay as busy as Santa's elves on December 23rd—except with fewer candy canes and more clipboards. Luckily, our physicians, nurses, techs, aides, administrators, and everyone else holding the healthcare world together keep showing up, day after day, while the rest of the world debates whether cranberry sauce should be whole or jellied. (We're a divided household – Carol opts for whole, but I'm jellied "log" all the way.)

But what truly sets 2025 apart are the advancements: AI tools helping clinicians (and occasionally mispronouncing their names), new digital platforms promising to simplify workflows (some delivered, some... sent us back to paper), and the continued evolution of care models that have us all Googling terms like "hybrid-digital-patient-interactive-virtual-ambulatory-something-something." We're proud of every innovation, even if some required the patience of a saint—or at least someone with very strong holiday cheer.

Now, as we tiptoe toward 2026, what can we expect? For starters, even more technology—because if 2025 taught us anything, it's that healthcare will never have less software again. Expect smarter tools, more predictive analytics, and at least one new platform claiming it can "revolutionize everything" (our official prediction: it will revolutionize about 37 percent of things).

We'll also see patients continuing to take a more active role in their own care. In 2026, they'll have more ways than ever to communicate with providers—text, portal, app, chatbot, smartwatch, carrier pigeon (still in beta). And let's not forget staffing: while 2025 kept us all on our toes, 2026 promises renewed investment in people, culture, training, and the kind of workplace wellness that goes beyond offering fruit in the break room.

So, as we bask in the holiday season, let's take a moment to appreciate the relentless dedication of our healthcare community. You've healed, supported, advocated, consoled, innovated, and—most importantly—kept showing up.

May your holidays be restful, your coffee be strong, your technology be cooperative, and your 2026 be full of hope, progress, and maybe even a full night's sleep.

Happy Holidays from *South Florida Hospital News!*

Charles Felix



You can reach Charles Felix at
Charles@southfloridahospitalnews.com

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A Heart of Hope, One Transplant and Endless Possibilities

In February 2024, Migdalia Rodriguez had just moved to Tampa, was busy building her remote private mental health counseling practice and was preparing to take a long-awaited trip to Greece with her beloved service dog Milo in the upcoming summer. She was 39 years old and looking forward to this next phase of her life.

So when she started getting heart palpitations, she dismissed them as a symptom of stress or anxiety. But soon she developed a cough that got worse at night and body aches that felt like flu, which caused her concern.

Her symptoms continued and by the next week she couldn't walk easily without getting winded. She took the advice of a friend and went to a local hospital to get checked out. There, she was tested for viruses and was going to be sent home with antibiotics. But when she told a doctor her breathing at night was accompanied by a strange sound, he recommended further testing. The results showed her heart was enlarged, she was in heart failure, and her situation was dire. Additional testing revealed the unexpected – Migdalia was going to need a heart transplant.

After exploring several transplant programs, Migdalia decided that the program at Cleveland Clinic Weston Hospital was the right one for her. She moved back to South Florida to receive her care.

Her team of specialists at Weston Hospital included Nina Rivera, DO; Nicolas Brozzi, MD; Jerry Estep, MD; David Snipelisky, MD; David Baran, MD; and Cedric Sheffield, MD.

"I met every person on my transplant team, and they explained the process thoroughly to me," Migdalia says. "They brought such expertise and made me feel at ease. I felt so cared for."

Migdalia's health began to decline rapidly in the fall of 2024. But on January 13 of this year, she got the call that a donor heart was available for her. "I couldn't stop thinking about the donor," Migdalia says. "It was so bittersweet because I knew there was a family grieving."

Within two days of her transplant, Migdalia was able to get up and walk with some assistance. She was well enough to be discharged from the hospital nine days later. Though her recovery was remarkable (the average length of stay in the hospital for heart transplant patients is 15 days), she cautions other patients not to compare themselves and to be realistic about their own recovery time as everyone's journey is unique.

Migdalia is getting stronger every day. She recently ran a 5k race, takes salsa dance classes, walks with Milo and focuses on strength training. She has had to pause her career but is still finding ways to help people, especially transplant patients and their caregivers, take care of their mental health. She is grateful to her online community for giving her support during her transplant process and is working hard at giving that support back through her social media platform. She also is looking forward to finally taking that trip to Greece next year, with Italy on the itinerary now, as well.

She says that she lives life with more intention now, after the major health issues she has had to face over the past two years. She credits the transplant team at Weston Hospital with giving her renewed life.

"The level of expertise of the transplant team is amazing," Migdalia says. "I have immense love and gratitude for them. I just knew that was where I needed to be."



Learn more about the Transplant Center at Cleveland Clinic Weston Hospital.



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Let's Connect:
ACHE of South Florida Spotlight

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ACHE of South Florida Member Spotlight: Mindy Shikiar

BY LOIS THOMSON

Mindy Shikiar was a Vice President at Boca Raton Regional Hospital when she was first introduced to Caldwell Butler (CB) and encountered the firm's structured approach to operational performance improvement. Impressed by the methodology and its impact on Boca Regional's organizational results, Shikiar later joined CB, where she has now worked for the past four years.



Mindy Shikiar

Caldwell Butler is a boutique health-care consulting firm specializing in performance excellence, operational throughput, and leadership development. One of its hallmark methodologies is the "100-Day Workout," a highly structured leadership accountability system designed to accelerate rapid-cycle performance improvement within hospitals and health systems.

During the 100-Day Workout, CB's primary objective is to rapidly improve an organization's operational and financial performance, drawing heavily on priorities identified by the executive leadership team. According to Shikiar, the model is intentionally structured, action-oriented, and designed to engage middle management – the group most responsible for daily operations and frontline decision-making.

Shikiar emphasizes that the power of the 100-Day Workout lies in its disciplined cadence and accountability structure. "It's a matter of taking the time and making it a priority every month to make two changes," she explained. By the end of the cycle, each leader will have implemented approximately eight targeted improvements.

According to Shikiar, these improvements can generate substantial financial impact, frequently 3 percent to 5 percent improvement in 12 months of their total operating expenses – a meaningful achievement in an industry where margins are often razor-thin. The model also helps cultivate a culture of continuous improvement.

Shikiar explained that the CB team is composed almost entirely of seasoned former senior executives – CEOs, COOs, CFOs, and other C-suite leaders – many of whom spent two or three decades working in hospitals and health systems before moving into consulting.

"That's why when we work with other organizations, we've been there – we've seen all the issues," she noted. This background allows the CB consultants to understand the real-world challenges facing hospital leaders.

Shikiar spent nearly 20 years at Boca Raton Regional Hospital, an experience she describes as foundational to her leadership philosophy and the work she does today. Her tenure there as a Vice President, and later Chief Operating Officer, included participating in a major organizational turnaround and helping prepare the hospital for its integration into the Baptist Health South Florida system.

"My time at Boca Regional shaped a lot of the things I'm doing today," she reflected, noting that the complexity of the turnaround, combined with the growth and strategic repositioning of the hospital, offered invaluable hands-on leadership experience. Among her many contributions, she is especially proud of her role in developing several Centers of Excellence, where she had the opportunity to combine operational leadership with strategic program development.

One of the most meaningful initiatives was the creation of the Christine E. Lynn Women's Health and Wellness Institute. Shikiar shared that this project holds a special place in her career because the institute was truly "developed for women, by women." The construction team was led by a woman; the architectural lead was a woman; Dr. Kathy Schilling, Medical Director, created the vision; and Shikiar served as the administrative project lead. None of this would have been possible without Christine Lynn's generosity and the philanthropic support in the community – the results speak for themselves.

The institute has since become a success story for the organization. "That building is thriving today and has already exceeded capacity," she noted, underscoring how the vision behind the project aligned with a genuine community need.

Shikiar has been a member of the American College of Healthcare Executives (ACHE) since 2014, during her time at Boca Regional, and she earned her FACHE credential two years ago. She noted that the credential is something she is proud to hold and actively encourages others to pursue – whether by earning the FACHE or simply joining ACHE. "No matter what stage of your career you're in, ACHE offers tremendous value," she explained. "If you're new to management, it exposes you to experienced leaders and opens doors to opportunities. And for those later in their careers, it's the best way to stay engaged and on the cutting edge of what's happening in healthcare."

E-mail Your Editorial Submissions to
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Black Health Summit In Action: Driving Lasting Impact Across South Florida

In 2025, the Health Foundation of South Florida took a bold step: it brought the mission of the Black Health Summit off the stage and directly into neighborhoods where health equity challenges are most acute and where community solutions are already taking shape.

What emerged was Black Health Summit In Action, an on-the-ground extension of the Summit's core purpose: centering Black voices, elevating grassroots leadership, and addressing the conditions that shape daily life. Rather than waiting for the next gathering, the Health Foundation activated a year of tangible, community-designed efforts rooted in priorities identified by residents themselves.

A Community Effort That Began with Listening

From the earliest Summits, community members were clear: improving Black health requires more than awareness. It means addressing the issues that determine whether families can access care, afford housing, feel safe, and trust the systems intended to support them. Those insights informed the Health Foundation's strategy, guiding investments in the areas residents identified as most urgent. The result was a public health approach grounded in partnership, proximity, and practical action.

Reframing Health Culture: Take Your Loved One to the Doctor

Inspired by radio personality Tom Joyner's national campaign, the Health Foundation launched local activations of Take Your Loved One to the Doctor in Lauderhill and Overtown. The effort mobilized barbers, faith leaders, business

owners, community organizations, and neighborhood voices to encourage Black men to seek preventive care, reframing health not as an individual responsibility but a shared community value.

The response was significant: more than 500 residents signed health pledges, and outreach efforts reached thousands of residents across both neighborhoods. In partnership with Melissa P. Dunn and MD Marketing, the campaign demonstrated how trusted messengers can reduce barriers that traditional systems often cannot reach.

Strengthening Community Safety: The Peacemakers Program

Health equity is inseparable from community safety and trust. Through continued investment in the Circle of Brotherhood's (COB) Peacemakers Program, the Health Foundation supported one of the region's most respected violence-interruption efforts. This was echoed in COB's 2024 Community Safety Survey, where more than 67% of residents rated COB's crime-prevention efforts as "Excellent" and 25% as "Good."

Recognized by Everytown for Gun Safety, the Peacemakers mediate conflict, prevent violence before it escalates, and connect residents to essential services. Survey data reinforced these outcomes: 59% of respondents reported feeling safe in their neighborhoods, with many attributing their comfort to the Peacemakers' presence. Their work underscored a core truth: community safety is foundational to health, and solutions are most effective when led by those closest to the challenges.

Meeting People Where They Are: Dade County Street Response

Few initiatives embodied community-centered health access more clearly than Dade County Street Response (DCSR), led by Dr. Armen Henderson, MD, MBA. Operating in Liberty City, DCSR provided medical care, case management, legal advocacy, and health education directly to residents, many of whom live entirely outside traditional medical homes.

Today, the organization serves more than 2,300 unique patients, a scale comparable to a large U.S. medical practice. Most patients are uninsured, and 80–85% live below 300% of the federal poverty level, clear evidence of the stark inequities that make DCSR's work essential. With thousands of patient encounters across its programs, DCSR has become a trusted source of consistent, high-quality care for individuals historically excluded from traditional healthcare.

The Health Foundation highlighted DCSR as a powerful example of community-driven health access, especially for Black men who face some of South Florida's most pronounced disparities. The partnership affirmed a core principle: health systems must go to the people, not expect the people to come to them.

Opening Doors to Health Care in Underserved Communities

Access to affordable, culturally responsive care remained a major theme across community conversations. To help address this, the Health Foundation expanded support for free and low-cost clinical services for uninsured and underinsured residents in predominantly

Black neighborhoods.

These investments strengthened preventive care, improved chronic disease management, and expanded wraparound services that help families maintain long-term health. By increasing access where it was needed most, the Foundation helped close gaps in care that conventional systems have long struggled to address.

A Year of Momentum and the Road to 2026

Throughout 2025, Black Health Summit In Action demonstrated that the Summit is not simply an annual event; it is a year-round collaboration shaped by communities, powered by trusted partners, and sustained by investments aligned with community solutions.

As President and CEO, Loreen Chant reflected, "Raising awareness is only the first step. Through Black Health Summit In Action, we supported practical, community-informed strategies grounded in trust and partnership."

The work created a year of progress, collaboration, and promise; momentum that now carries into the next Black Health Summit, returning for its fifth in-person year on June 16, 2026, at the Charles F. Dodge City Center in Pembroke Pines, FL.

What began as a collective gathering has grown into a region-wide effort, one that continues to reimagine what health equity looks like when communities lead.

Learn more at <https://hfsf.org/black-health-summit-in-action/>

The Invisible Burden: HVAC's Critical Role in Hospital and Healthcare Indoor Environments

In the realm of healthcare, the significance of indoor air quality remains paramount. Hospitals and healthcare facilities are uniquely designed environments where the health and safety of patients and staff are the highest priorities. At the heart of maintaining good indoor air quality is a well-functioning Heating, Ventilation, and Air Conditioning (HVAC) system, a factor that is often taken for granted but is essential to patient recovery and staff efficiency.



BY MICHAEL TEBOR,
ASCS, CIE, CMR -
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systems. Exhaust ductwork is critical for removing stale air, odors, and contaminants from indoor environments. If exhaust systems become contaminated, they can inadvertently recirculate harmful particles or pathogens back into patient areas, endangering vulnerable populations.

Moreover, an efficiently functioning exhaust system can help maintain proper pressure differentials in various hospital areas, crucial for infection control.

Properly pressurized areas can help prevent the spread of airborne diseases, which is especially vital in facilities that treat immunocompromised patients.

3. Air Handler Cleaning and Maintenance - Air handlers serve as the lungs of an HVAC system, responsible for delivering conditioned air to indoor spaces. Given their critical role in ensuring that air is appropriately cooled, heated, and filtered, proper maintenance and cleaning are paramount for maintaining optimal performance and safety in healthcare settings. All airside components should be inspected and cleaned including heat/cooling coils, blower compartment, condensate pan and liner.

4. The Importance of Filtration -

Filtration is one of the cornerstones of effective HVAC operation in healthcare environments. Efficient, properly fit air filtration helps remove contaminants from the air, ensuring that patients and staff breathe cleaner air.

5. Outdoor Air Intake

Ventilation plays a vital role in maintaining healthy indoor air conditions. Outdoor air intake significantly affects indoor air quality and is especially crucial in hospital settings where the risk of airborne diseases is heightened.

Importance of Outdoor Air Intake: Fresh outdoor air helps dilute indoor pollutants and introduces necessary oxygen into the environment. According to ASHRAE standards, hospitals should maintain adequate outdoor air intake rates, specifically designed based on area usage and occupancy levels. This helps reduce the concentration of airborne pathogens while improving patient outcomes.

Conclusion

In conclusion, the critical role of HVAC systems in hospitals and healthcare environments cannot be overstated. Contaminated ductwork, ineffective filtration, inadequate outdoor air intake, and improper area pressurization can all lead to compromised indoor air quality and hinder patient recovery. Comprehensive maintenance practices for air

handling units and other components are essential in enhancing the performance of HVAC systems.

As you have read through the importance of these systems and practices, consider how our company can assist you in implementing and maintaining effective HVAC solutions tailored to your healthcare facility's needs. Our expertise in cleaning, inspection, and maintenance services will ensure that your HVAC systems operate at peak efficiency, safeguarding the health of your patients and caregivers. Don't wait until an indoor air quality issue arises; contact us today to discuss how we can help you enhance the indoor environment of your healthcare facility.

Michael Tebor is Vice President of Air Duct Aseptics, a NADCA certified air duct cleaning company with more than 35 years' experience specializing in providing Certified Duct Cleaning and indoor air quality solutions to Florida's top health care facilities. Michael is a Certified Air Systems Cleaning Specialist (NADCA), a Certified Indoor Environmentalist (ACAC) and a Certified Mold Remediator (ACAC). He is also a state licensed Mold Assessor. The company's skill sets, experience and multidisciplinary approach to problem solving sets it apart in the industry. Michael Tebor can be reached at 888-707-7763 or visit www.ADAFlorida.com.

Malpractice Insurance

EXPERT ADVICE

Economic, Social Inflation Cause Spike in Malpractice Verdicts

BY VANESSA ORR

Inflation is affecting everything these days, including malpractice verdicts. Jury awards are increasing, not only as the result of economic inflation, but because social inflation is changing the way that juries think about awards in malpractice cases.

"In the last four to five years, attitudes have changed in the ways that juries see large companies and corporations and how they respond to malpractice cases. There are public trust issues," explained Tom Murphy, SVP National Healthcare Practice, Risk Strategies, part of the Brown & Brown team.

"A lot more physicians have become employed by corporations or private equity groups with fewer going into private practice, and that has put a strain on the doctor/patient relationship," he said. "Physicians are also getting lower reimbursements, so they have to see more patients in the same amount of time to make up for lost income."

Murphy added that many people, especially those under age 35, no longer understand the true value of a dollar as a result of many factors including social media.

"As the younger generation grows up with social media and reality TV, there has been a change in the valuation of money," he said. "They see athletes and celebrities making crazy amounts. For example, Dodgers player Shohei Ohtani signed a contract for \$700 million."

"The playing field has also changed because for many years you could determine what juries would be like in different regions of the country," he added. "But because of social media and cellphones, it doesn't matter if you're in a town of 200 people in Oklahoma or New York City. They're all seeing what everyone else is seeing."

Not only has social inflation affected claims and legal costs in the malpractice world, but it has caused rates to rise as well. Between 2014-2024, economic and social inflation have added \$4 billion in costs to insurance companies. Malpractice rates are up 20 percent for all carriers across the board, causing physicians to pay higher premiums. As economic and social inflation continue to have an effect, they



Tom Murphy

are also at higher risk of being sued and paying higher damages if they lose.

According to Murphy, the average claim payment has increased by 60 percent in the last 20 years, with the average claim payment now equaling \$485,000.

"I remember 20 years ago doing a presentation when the average claim payment was \$250,000," said

Murphy. "Insurance companies are now pondering what to do as costs are spiraling; they are out of control."

Nuclear verdicts of \$10 million or more have also increased. Between 2013-15, there were 85 such judgements across the country. Between 2022-24, that amount doubled to 160 judgements nationwide.

"In a recent Hospital of the University of Pennsylvania birth injury trial, for example, the jury awarded \$207 million to the plaintiff," said Murphy, noting that it was the largest medical malpractice award in Pennsylvania's history. "While there is never justification for the malpractice death or injury of a newborn, how did they come up with this number? In this case, it is mainly punitive to make an example of the hospital and the insurance company."

In a recent case between Phoebe Putney Memorial Hospital in Albany, GA and a double amputee, the jury awarded \$70 million to the plaintiff.

"As a result of physician negligence, the hospital had to amputate the patient's legs below the knees as the result of a medication overdose during treatment for sepsis," said Murphy. "Fifteen or 20 years ago, that patient would have been awarded \$5 million to \$10 million. But now, even if a patient signs a surgical consent form, it's like it doesn't matter."

He noted that while most judges in appeals court will lower these awards because they are so out of line, these verdicts cause other problems.

"Numbers like this cause carriers to settle more cases even if they are defensible because they are afraid of huge nuclear verdicts," he said.

For more information, contact
Tom Murphy at
tmurphy@risk-strategies.com
or call (800) 966-2120.

It's Time to End Stopgap Health Care Policy

The short-term federal funding bill enacted last month reopened the federal government after the longest government shutdown on record. It also provided much-needed relief for hospitals and the patients and communities they serve.

The bill extended until January 30, 2026, vital health care programs, from telehealth and hospital-at-home to Medicare-dependent and low-volume designations for rural hospitals. It also restarted the moratorium on cuts to Medicaid disproportionate share hospital (DSH) payments.

That's the good news.

The challenge now is to avoid additional disruptions to hospital planning and care delivery by extending the rural hospital designations for a longer term, providing long-term relief from Medicaid DSH cuts, and making hospital-at-home and telehealth permanent health care policy. January 30 will be here before we know it, and the persistent threat of expirations and the need for additional short-term extensions are not conducive to health care stability and reliability.

Predictability, reliability, and continuity of care are at stake.

Rural Hospital Designations

Low-volume and Medicare-dependent designations help compensate for rural hospitals' very real patient demographic differences. Rural residents are often older, have lower incomes, and have higher rates of chronic illness, making Medicare rural hospitals' predominant payer. With Medicare covering only about 82 percent of hospital costs, on average, the enhanced payments made possible with the low-volume and Medicare-dependent designations help protect rural hospitals' financial viability and, most importantly, their ability to provide care in their communities.

Short-term extensions and the continued threat of expiration of these designations put rural hospitals in an uncertain position that makes long-term financial planning more difficult and starves them of essential resources.

Telehealth and Hospital-at-Home

Similarly, cycles of momentum and shutdown for telehealth and hospital-at-home programs are not conducive to stable hospital operations, and hospitals, clinicians, and patients alike should be able to trust that these programs are reliable, dependable, and available when they need them.

Hospital-at-home and telehealth programs form the fabric of a modern health care delivery system, one that is innovative, agile, and patient-friendly. Nearly



BY MARY C. MAYHEW

420 hospitals across 39 states, including more than 40 hospitals in Florida, have federal approval for a hospital-at-home program. Originally a pandemic-driven necessity, they have since proven their value and effectiveness over and over again at extending hospitals' inpatient capacity, reducing emergency department boarding, and delivering clinically excellent care in patients' familiar environments.

Hospital-at-home patients generally have lower mortality rates, readmission rates, and spending in the 30 days post-discharge, compared with traditional inpatients, according to data from the Centers for Medicare & Medicaid Services. Patients and caregivers also express predominantly positive experiences with the program.

Telehealth programs eliminate traditional access-to-care barriers, such as geography and transportation. Through telehealth, isolated seniors in rural communities, without reliable transportation, or unable to leave their homes can have regular visits with their health care professionals to stay on track with treatment plans and medication adherence, helping to promote chronic condition stability, timely intervention for acute conditions, and avoidance of emergencies.

Permanent federal authority for telehealth and hospital-at-home programs is needed to catch up with hospital innovation and patient expectations.

Medicaid DSH Cuts

Federal Medicaid DSH spending is slated to be cut by \$8 billion a year over three years. These cuts have been repeatedly delayed since 2014 as lawmakers, on a bipartisan basis, recognize their value in underwriting some of hospitals' costs of caring for patients without health insurance who cannot otherwise pay for their medical care. The temporary reprieve until Jan. 30, 2026, is welcome, but the moratorium needs to be extended for a longer term to avoid further imperiling hospitals that are already under financial strain.

Federal health care policy and regulation are major factors in whether hospitals are financially stable, whether they can innovate, and whether they can plan for the future with appropriate staffing, equipment, and resources. As Congress gets back to work and tackles another funding package, Florida's hospitals are relying on them to prioritize common sense health care policy that ameliorates their challenges while supporting their innovations.

Mary Mayhew is President and CEO,
Florida Hospital Association.

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MARKETING & PUBLIC RELATIONS

Busting the Biggest PR Myths

Public relations is a vital tool for healthcare organizations to strengthen their reputation, educate the public, and build trust with patients, physicians, paraprofessionals, and the broader community. Yet many physicians, practice administrators, and healthcare executives remain hesitant to invest in PR because of outdated or incomplete assumptions about what it actually does. At BoardroomPR, our team of experienced public relations and digital marketing professionals is often asked about these misconceptions. Let's set the record straight and debunk some of the most common PR myths.

Myth #1: PR = Press Releases Only

Reality: In healthcare, effective PR goes far beyond issuing announcements about new hires, procedures and technologies. A strong communications strategy includes patient-centered storytelling, physician and executive thought leadership and a multiplatform communications approach. A well-rounded PR program ensures your key messages reach patients, referring providers, payers, and the community across multiple channels—in a way that is accurate, ethical, and aligned with your clinical and business goals.



BY DON SILVER

Myth #2: "Any Press Is Good Press."

Reality: In healthcare, the wrong kind of attention can be far more damaging than no attention at all. Negative or inaccurate coverage can erode patient trust with physicians, attract regulatory scrutiny, and impact partnerships or funding.

Not all publicity is beneficial. The goal of PR in a medical setting is to secure accurate, balanced, and strategic visibility that reinforces your clinical excellence and commitment to patient care—not to chase headlines at any cost. An experienced PR team helps you assess when to engage, how to respond, and, just as importantly, when it is in your best interest not to comment.

Myth #3: PR Guarantees Media Coverage

Reality: Public relations is not the same as advertising—especially in healthcare. You can't "buy" credible news coverage the way you buy an ad. Earned media comes from building strong relationships with health and medical journalists, crafting timely and clinically relevant story angles, and positioning your practice, hospital, or physicians as trusted experts. Because this coverage is earned, not guaranteed, it carries greater credibility with

patients, referring providers, and the community.

Partnering with a public relations agency like BoardroomPR gives you access to longstanding media relationships and the strategic expertise needed to get the right medical stories in front of the right audiences at the right time.

Myth #4: PR Works Overnight

Reality: In today's healthcare landscape, effective PR means showing up consistently across multiple touchpoints—not just in one article or announcement. People are getting information from many places: traditional media, your website, social media, email, community talks, health fairs, and professional conferences. One press release, newsletter, or Instagram post won't move the needle.

But a coordinated presence over time—sharing expert insights on LinkedIn, patient education on your website and social channels, and thought leadership at events and panels—builds recognition, reinforces your expertise, and steadily grows trust in your organization.

Myth #5: Only Big Companies Need PR

Reality: PR isn't just for national hospital systems or academic medical centers. In many cases, smaller practices, specialty groups, and community hospitals stand to gain the most, because strategic communication helps them stand out against larger

competitors, educate patients, and build trust locally. Whether you're an early-stage practice or a well-established institution, PR amplifies your expertise, strengthens your reputation, and helps ensure the right audiences understand the value of the care you provide.

Myth #6: No Need for Marketing-Communication Pros, Leave it up to AI

Reality: AI is a powerful tool, but it's not a replacement for human strategy, judgment, and relationships. Algorithms can help with research, idea generation, and drafting, but they can't read a room, anticipate how a message will land, or pick up the phone and pitch a nuanced story to a reporter.

Effective PR requires emotional intelligence, experience, ethics, and deep knowledge of your brand. The best results come when PR professionals use AI to enhance their work—not replace it—combining smart technology with human insight to craft messaging that truly resonates.

Ready to elevate your brand? Contact us today to learn how we can help your business thrive.

Don Silver is COO of BoardroomPR, a statewide PR and integrated digital marketing agency. He can be reached at (954) 370-8999 or donsil@boardroompr.com.

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The Greater Miami Chamber of Commerce is now accepting nominations for the 2026 Health Care Heroes® Awards Program; deadline is December 15. The 27th Annual Health Care Heroes® Awards Luncheon will take place May 14, 2026.

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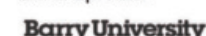
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A Cautious Evolution in the Surgical Management of Advanced Ovarian Cancer

BY JENNIFER WILLIAMSON

Ovarian cancer remains the most lethal gynecologic malignancy, responsible for more than 12,000 deaths and nearly 20,000 new diagnoses in the United States last year, according to American Cancer Society estimates. While incidence and mortality have declined modestly over the past two decades, the five-year survival for epithelial ovarian cancer (EOC) – the most common histology – remains stubbornly around 50%. For patients with metastatic disease, survival plummets to roughly 30%.

“Unfortunately, about 75% of patients are diagnosed with stage III or IV disease, which carries a high recurrence risk,” states Joel Cardenas Goicoechea, M.D., MBA, a board-certified gynecologic oncologist recently named Medical Director of Gynecologic Oncology at Cleveland Clinic in Florida. “We’re constantly reevaluating how to improve outcomes without compromising oncologic safety.”

One open question being explored is the most effective way to surgically remove all visible pelvic, abdominal, and retroperitoneal disease in advanced ovarian cancer.

Maximal debulking

Traditionally, patients with advanced-stage ovarian cancer have undergone open cytoreductive surgery, an operation that



Dr. Joel Cardenas Goicoechea

can involve a midline vertical incision from the xiphoid process to the symphysis pubis. “Our goal is to achieve maximal tumor debulking, a known prognostic factor in ovarian cancer survival,” says Dr. Cardenas.

However, with advances in surgical technology and chemotherapy regimens, the question of whether minimally invasive surgery

(MIS) – laparoscopy or robotic surgery – can safely achieve the same oncologic endpoints has become increasingly relevant.

Over the past two decades, MIS has become standard of care in other cancers – notably endometrial cancer. Randomized controlled trials like GOG LAP2 and LACE demonstrated not only comparable survival outcomes, but also significant improvements in perioperative morbidity, pain, length of stay and quality of life. Yet, as Dr. Cardenas cautions, “We learned the hard way not to generalize these findings across all gynecologic cancers.”

Evidence over enthusiasm

This philosophy underpins Dr. Cardenas’ support for the Laparoscopic Cytoreduction After Neoadjuvant Chemotherapy (LANC) trial, an international, multicenter, phase III study comparing MIS versus open interval cytoreduction following neoadjuvant chemotherapy in patients with stage IIIC-IV ovarian, pri-

mary peritoneal, or fallopian tube cancer.

Study participants receive three to four cycles of chemotherapy prior to undergoing either open surgery or MIS, followed by additional standard-of-care chemotherapy. Investigators will assess disease-free survival as the primary endpoint, as well as overall survival, perioperative outcomes, and differences in health-related quality of life.

In the trial’s feasibility phase, which enrolled 100 women, complete gross resection was achieved in 88% of evaluable patients undergoing MIS (laparoscopic or robotic), compared to 83% in the open group. Based on these findings, the definitive phase is now underway to assess whether MIS can match or potentially improve oncologic outcomes.

Cleveland Clinic Weston Hospital is one of two enrollment sites in Florida and 19 internationally. The team’s first enrolled patient was randomized to open surgery, reports Dr. Cardenas. “I would encourage all eligible patients to consider enrollment. This is how we advance the field,” he adds.

The rise of preventive surgery

Dr. Cardenas also reports a growing number of patients – particularly those with a family history of ovarian cancer – seeking risk-reducing salpingo-oophorectomy following genetic testing. He notes that about 20% of ovarian cancers have a hereditary component, most commonly involving BRCA1 and BRCA2 mutations.

“I perform all prophylactic surgeries robotically,” he says. “Patients go home

the same day, experience less pain and recover faster.”

Dr. Cardenas credits his early experience with robotic technology for his proficiency with the approach. “I started doing robotic surgery in 2006, just after the FDA cleared the platform. The latest technology allows seven degrees of motion, 3D visualization and fine dissection, which is particularly helpful in deep pelvic spaces.”

Comprehensive care

Dr. Cardenas underscores that ovarian cancer requires a multidisciplinary approach. In addition to a gynecologic oncologist, medical oncologist and radiation oncologist, patients may need the care of a liver, colorectal and/or upper abdominal subspecialist. “At Cleveland Clinic Weston Hospital, we have that multidisciplinary capacity and are able to provide truly comprehensive care,” he states.

His team also performs HIPEC (hyperthermic intraperitoneal chemotherapy) for appropriate candidates – typically those receiving neoadjuvant chemotherapy followed by interval debulking.

With only 1,700 new ovarian cancer cases diagnosed each year in Florida, having access to high-volume, experienced centers is critical. Weston Hospital is a regional referral center for patients with ovarian cancer across all Cleveland Clinic locations in Florida.

To refer a patient for the LANCE trial at Cleveland Clinic in Florida, contact the Physician Referral Line at (833) 733-3710.

Genetic Testing Is Revolutionizing Diagnosis and Treatment of Kidney Disease

Genetic testing benefits patients by providing earlier, more accurate diagnoses, and tailored, lifesaving treatment

Kidney disease often progresses silently with few symptoms until considerable damage has occurred. For physicians and health systems, this creates enormous challenges in detecting and managing the disease early. Now, advances in genetic testing are offering a new window into understanding why kidney disease develops, and how to stop it before it leads to irreversible damage.

According to the National Institute of Health, chronic kidney disease (CKD) is a growing global health challenge, affecting more than 800 million people worldwide. More than 37 million Americans have CKD (about one in seven adults), but up to 90% of people with CKD do not know they have the disease until it is advanced. If left untreated, CKD can lead to end-stage renal disease, requiring dialysis or kidney transplantation. A variety of diseases can cause CKD, making it difficult to diagnose using traditional methods.

The National Kidney Foundation (NKF) and Kidney Disease Improving Global Outcomes (KDIGO) recently recommended genetic testing for patients who have a CKD diagnosis, as well as those who may have health conditions or a family history that could lead to kidney disease. Test results can help nephrolo-



Catherine C. Marinak

gists diagnose the disease earlier and personalize treatment plans with genetic-specific therapies and clinical trials.

TGH Cancer Institute | Cancer Care of South Florida (CCSF) in Palm Beach Gardens offers genetic testing for kidney disease through its Hereditary Cancer Prevention & Risk Program.

Catherine C. Marinak, APRN, MSN, AOCNP, directs the program and has been collaborating with nephrologists Dr. Imtiaz Ather and Dr. Kerim Oncu from TGH Advanced Kidney Care, running genetic tests to help in diagnosing and treating patients more effectively.

“We’re seeing a real paradigm shift,” said Marinak, who is board certified in oncology, and has completed advanced training at Fox Chase Cancer Center and Harvard Medical School. “Genetic testing allows us to identify kidney disease much earlier and with far greater precision. It gives patients and families answers — sometimes for the first time — and helps us tailor care so that every decision is evidence based.”

Dr. Ather added that this collaboration between nephrology and genetics is helping uncover hidden hereditary patterns that can change the course of care for entire families.

Genetic testing analyzes a patient’s DNA to detect mutations or variants that may cause or contribute to kidney disease. These insights allow nephrologists to move beyond treating symptoms and instead address the disease’s root cause. For example, identifying a mutation in the COL4A gene can confirm a diagnosis of Alport syndrome and prevent the use of steroids that would otherwise be ineffective. As the science advances, more genetic-based therapies are emerging to match these findings.

Specific benefits of genetic testing for patients with CKD include:

- Facilitates and confirms a diagnosis
- May shorten or help avoid a prolonged diagnostic journey
- May aid in establishing a prognosis
- A clear diagnosis benefits the patient psychologically
- Helps avoid invasive, risky diagnostic procedures
- Helps avoid ineffective, unnecessary and potentially harmful therapies
- Can direct personalized treatment if available
- Facilitates and clarifies overall disease treatment and management
- Helps to identify appropriate kidney transplant recipients
- Prevents kidney donation by those with genetic kidney disease
- Facilitates identification of, and enrollment in, clinical trials
- Supports family planning

• Guides surveillance and detection of non-renal abnormalities tied to genetic disorders

• Helps with identifying at-risk family members

• Advances understanding of etiology of kidney diseases

As genetic testing becomes a standard component of kidney disease evaluation, collaboration among specialists will be key. Marinak’s work with TGH Advanced Kidney Care physicians represents a model for integrating genetics into a community-based nephrology practice. The collaboration also demonstrates how providers within Tampa General’s growing network in Palm Beach and Martin counties rely on one another to deliver innovative, game-changing treatments backed by the expertise of one of Florida’s leading academic health systems. Additionally, Tampa General’s team of experts provides residents with comprehensive preventative care, advanced diagnostics, and access to academic medicine and complex care when patients need it most.

Providers interested in learning more or referring patients for genetic testing can contact TGH Cancer Institute | CCSF Hereditary Cancer Prevention & Risk Program in Palm Beach Gardens at (561) 221-2660 or visit CancerCenterofSouthFlorida.com.

Advocating for Physicians, Patients, and Our Community in Challenging Times

At the Miami-Dade County Medical Association (MDCMA), our mission has always been clear: to advocate for physicians and protect the health of our community. In times of stability, that mission guides progress. In times of uncertainty, like those we face, it becomes essential.

One of our meaningful accomplishments this season has been the publication of the 2026 Physician Guide for Patients Selecting Medicare Advantage Plans. This guide was developed to highlight realities patients must consider if they decide to forgo the protections offered by traditional Medicare and provide information that will help them navigate the increasingly complex landscape of Medicare Advantage options. By offering clear, physician-driven insight into plan networks, coverage, and access to care, we empower patients to make informed decisions about their healthcare. This initiative underscores our belief that informed patients lead to stronger physician-patient relationships and, ultimately, better outcomes.

During the last quarter of the year, we have faced a concerning reality: the federal government shutdown. Beyond its political implications, the shutdown directly impacted and had immediate consequences for the provision of healthcare. Interruptions in federal operations influenced reimbursement processes and the telehealth services that so many of our patients rely on.

In Miami-Dade County, the impact was particularly severe for those in underserved communities. Many families who depend on federal assistance programs such as SNAP were at risk of food insecurity. For them, this was not an abstract policy issue, it was a daily struggle to put food on the table.

To support the community, the MDCMA shared information about local food pantries and community food drives throughout the county. Working



BY ADRIANA BONANSEA-FRANCES, MD

with our county partners and member physicians, we have sought to integrate resources for vulnerable populations, especially children, seniors, and those managing chronic illnesses, so they can access nutritional support during this period. This is healthcare at its most fundamental level: safeguarding physical health, dignity and hope.

Amid these challenges, we continue to look forward. On December 4, we will host an important educational event, "The One Big Beautiful Bill Act: Tax Planning and Year-End Considerations for Physicians." This conversation will examine how recent legislative and financial developments affect the business side of medicine, topics that are vital for the sustainability of physician practices. Events like this reflect our commitment to equipping physicians as leaders, entrepreneurs, and advocates. Members of the MDMCA and the Miami Orthopedic Society members can register at no cost miamimed.com/events.

On December 8-11, MDCMA members will travel to Tallahassee for our annual Legislative Fly-In, joining colleagues from across Florida to meet directly with lawmakers. Advocacy is at the heart of what we do, it is how we ensure that the physician's voice remains central in every healthcare decision that affects our profession and our patients.

As we get closer to the end of the year and prepare for what's ahead, I encourage all physicians in Miami-Dade County to join us. Together, we can make our voices stronger, our community healthier, and our future brighter.

To learn more about membership, events, and advocacy initiatives, visit www.miamimed.com.

Dr. Adriana Bonansea-Frances is President, Miami-Dade County Medical Association.

KIDZ Pediatrician Takes Commitment to Children Worldwide

BY VANESSA ORR



Dr. Austin Boyd

Austin Boyd, D.O., a new general pediatrician with KIDZ Medical Services, hadn't planned to be a doctor until a trip to Haiti changed his mind.

"It's funny how life works," he said. "My mother was an internist, and her patients sometimes had rough nights where she had to stay overnight at the hospital. And there was so much documentation she had to do—I didn't want to become a doctor because of that."

"After I took a couple of trips to Haiti during high school and college, everything changed," he continued. "Two medical situations occurred—one trauma and one suicide attempt—and I had no idea what to do. I wished then that I had more knowledge so I could help."

Through the power of modern medicine, both young patients survived, and Dr. Boyd was convinced. While he originally planned to go into emergency medicine, he found his calling working with pediatric patients.

"I feel like kids keep you young; they are joyous when you walk in the room, even if they're crying," he said. "They almost always get better, and to watch the progression as they go from being sick to getting well is huge. That doesn't always happen on the adult side of things."

Dr. Boyd also enjoys developing partnerships with parents as they learn to trust each other. He adds that by building relationships, he can help reduce the mistrust some people feel toward medical care.

"I noticed in residency that there is a lot of hesitancy and mistrust that people feel toward the medical body as a whole, particularly after Covid," he explained. "That's understandable. As a physician, my goal is to thoroughly review the evidence and recommend what is safest for their children."

"I am willing to have those discussions, particularly about vaccines, and medicines in general versus more holistic care," he added. "I am honored that they give me that trust with their children."

At the KIDZ Pediatric Multispecialty Practice in Naples, FL, Dr. Boyd specializes in general pediatrics and treats patients for everything ranging from ADHD to outpatient circumcisions to sports injuries. A graduate of the Kansas City University of Medicine, he completed his pediatric residency at the University of Florida College of Medicine—

Pensacola at Ascension Sacred Heart before joining the Naples pediatric team.

"Before I took the position, I didn't even know that there were kids in Naples; I thought it was a retirement area," he laughed. "But there are many high schools and double-digit middle schools and elementary schools here, and it's a really growing area."

Dr. Boyd, who began working for KIDZ Medical Services in August, is helping to meet a growing need for more pediatricians in the state. According to the American Board of Pediatrics, there are only 70 general pediatricians for every 100,000 children in Florida, and they are especially scarce in southwest Florida.

He said that one of the things he likes most about working for KIDZ Medical Services is the opportunity to work with other doctors in different medical fields.

"Because KIDZ is a multispecialty group, I get to work side-by-side with subspecialists," he said. "We're working shoulder to shoulder, and that's important to me."

As a strong proponent of community service, Dr. Boyd is already seeking opportunities to become involved in the Naples community. While living in San Diego, he and his wife volunteered at soup kitchens and, after they moved to Pensacola, FL, provided foster care services through their church. He has also traveled to Haiti five times to work on fundraising projects and the H3KIDZ Education Initiative.

"I really enjoy volunteering and being a part of the community," he says. "It gives me fuel and fire, especially when I'm helping kids."



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SPIRITUALITY IN HEALTHCARE

Healing through Holistic Care: Supporting Patients and Caregivers in Body, Mind, and Spirit

A pioneer of holistic healthcare, Dr. Hunter “Patch” Adams once said, “You treat a disease, you win, you lose. You treat a person, I guarantee, you’ll win, no matter the outcome.” At Holy Cross Health, this wisdom shapes our commitment to care for the whole person in body, mind and spirit.

Professional chaplaincy plays a vital role within today’s healthcare system. Board-Certified Chaplains (BCCs) are trained clinical practitioners, grounded not only in their faith endorsement but also in advanced pastoral education with a focus on patient-centered care. At Holy Cross Health, our Spiritual Care Department partners with our interdisciplinary care teams—physicians, nurses, social workers, therapists and more—to provide truly holistic care. While the medical team focuses on the physical aspects of illness, we focus on the emotional, spiritual and relational needs that shape a person’s sense of well-being.

One common misconception is that chaplains only provide prayer, but we are here to offer a lot more. We are available



BY RABBI ALLISON B. COHEN, BCC

to respond to both urgent and non-urgent requests with interventions such as advanced care planning, assistance with emotional regulation and coping skills, crisis support, end-of-life discussions, exploration of meaning and hope, grief education and bereavement support, help with religious and cultural observances, support after receiving a new diagnosis, and values-based decision making.

Holistic care also means caring for caregivers—loved ones and medical professionals alike—who pour so much of their emotional and physical energy into supporting others. For them, the familiar saying, “You can’t pour from an empty cup,” can feel discouraging and unrealistic. When you’re caring for someone who is sick, frail or dying, the thought of filling your own cup can feel selfish or impractical. Yet as chaplains, we witness the toll caregiving can take when a person’s own well-being is overlooked. True self-care is not indulgent. It is essential to sustaining the capacity to love and support another. Beyond the physical self-care list of getting adequate sleep, eating nutritious

meals and staying hydrated, one must also tend to the soul. Here are some suggestions for how to do this:

1. It begins with the acknowledgement that caregiving is hard. Many caregivers move through each day in survival mode, focused solely on the next task or appointment. Pausing long enough to acknowledge this reality allows compassion to begin with yourself and reminds you that you are deserving of care too.

2. Self-care also means permission: permission to rest, to ask for help, to recharge your battery without guilt, as well as to be flexible and have grace for oneself. Keeping small routines such as stepping outside for fresh air, drinking a favorite cup of tea, attending a workout class or reading a daily prayer or meditation can bring grounding and provide structure.

3. Self-care means connection. Caregivers often feel isolated as their world narrows to hospital rooms or daily medical routines. To avoid isolation, identify people who can listen without judgment—a friend, a faith leader or therapist—to hold space for you to express your feelings of grief, frustration and fatigue. This provides an outlet, so you don’t end up accidentally unloading onto your care recipient. Finding a support group can also be immensely helpful.

Even if you don’t feel up to sharing, it can remind you that you’re not alone.

4. Finally, self-care involves meaning-making. Caregiving can feel relentless, but within it are moments of holiness: a shared laugh, a gentle touch, a word of gratitude, a holding of the hand. When caregivers can reflect on these moments and recognize their own courage and love provided, they begin to refill their cup from within.

The holiday season is a time when joy and grief often sit side by side, and we recognize how tender this time can be. At Holy Cross Health, holistic care is woven into our mission. It involves the body, mind and spirit, and it recognizes that a patient’s well-being is interconnected with their support system. Even when an illness cannot be cured, spiritual care can help bring an individual towards inner healing and wholeness. Our Spiritual Care Department is honored to support those within our hospital system, as well as provide outside resources.

To learn more, please visit holy-cross.com/for-patients/spiritual-care.
Rabbi Allison B. Cohen is Manager of Spiritual Care, Holy Cross Health.

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Cover Story: The Science of Grief: How to Cope

Continued from page 1

social expectations and disrupted routines can make grief feel heavier, particularly for caregivers already juggling physical and emotional responsibilities.

Healthcare professionals, who often witness complex grief firsthand, know how powerful these memory responses can be. But even they may experience a resurgence of personal grief during this time.

When Traditions Become Triggers

Holiday traditions often represent togetherness. When a loved one is no longer present, those same traditions can intensify the sense of absence.

“First holidays,” such as the first Thanksgiving, Hanukkah, Christmas, or New Year’s without someone, are particularly challenging. Even years later, grief can resurface. Research shows that the brain unconsciously tracks anniversary dates, which can stir emotions before the mind fully recognizes why.

The external environment can add pressure as well. Messages about joy and celebration are everywhere. For those grieving, this contrast can create feelings of isolation or guilt, especially if they don’t feel “in the spirit.”

What Grief Looks and Feels Like, Physically and Emotionally

Sadness, irritability, nostalgia or numbness are all common. Physical symptoms, including fatigue, changes in sleep and appetite shifts, can also intensify around the holidays.

For caregivers, the season can bring an

added layer of emotional complexity, especially when supporting others while managing their own grief.

Healthcare teams can play a critical role by normalizing these reactions and acknowledging that holiday grief is both common and natural.

Ways to Cope: Strategies Backed by Psychology and Experience

Grief is unique to every person, but certain evidence-based strategies can help ease the emotional weight of the holidays.

1. Honor Loved Ones Through Simple Rituals

Lighting a candle, preparing a favorite meal, sharing a story or creating a memory ornament can offer comfort and connection. Rituals help integrate grief with meaning.

2. Adjust Holiday Expectations

Not every tradition needs to continue unchanged. Give yourself or those you support permission to scale back, simplify or skip certain events if they feel overwhelming.

3. Plan Ahead for Emotional Moments

Identifying potential triggers, such as gatherings, songs or specific dates, can make them easier to manage. Creating a “plan B” can help someone step back when needed.

4. Stay Connected, Even in Small Ways

Social support regulates the nervous system and helps reduce stress. Encourage individuals to reach out to friends, support groups or community resources.

5. Practice Self-Compassion

Grief is not linear. Emotions may rise and fall. Caregivers and professionals can remind grieving individuals that it’s okay to feel whatever they feel, without judgment or comparison.

When Additional Support May Be Needed

Professional help may be necessary when someone experiences persistent hopelessness, difficulty functioning or prolonged isolation. Grief counseling or community programs, like hospice bereavement services, can provide guidance.

VITAS Healthcare offers grief and bereavement support to anyone in the community, even if their loved one was not a VITAS patient—a meaningful resource during the holidays.

A Season for Gentle Grace

The holidays often bring joy and togetherness, but they can also magnify absence. By understanding the science of grief and offering compassionate, proactive support, caregivers and healthcare professionals can help make this season more manageable for those who are grieving.

Grief is a reflection of love. During the holidays, giving ourselves and one another grace can be one of the most meaningful gifts of all.

Patty Husted is the executive vice president of patient and family supportive services for VITAS Healthcare, the nation’s leading provider of end-of-life care. Learn more about grief and bereavement support at VITAS.com.

SPIRITUALITY IN HEALTHCARE

Cover Story: How FAU's Nurses Christian Fellowship Builds a Spiritual Community

Continued from page 1

She notes that one of Sister Simone Roach's "6 C's of Caring" is Compassion, a value that echoes one of nursing's most well-known moral teachings. "One of the most compelling stories of compassionate care is the story Jesus told of the Good Samaritan in the Gospel of Luke, chapter 10. As shown in this story, compassionate caring is hands-on, patient-centered care: physically, emotionally, psychosocially, and spiritually. Our skill in caring develops as we receive care from each other and as we understand God's care for us."

That blend of practical skill and spiritual grounding is the heart of NCF's mission. Student president Sydney Gibbons explains that nursing students face a uniquely challenging academic and emotional landscape.

"The experience of a nursing student is unique, with one foot on campus and one foot in the real world of caring for patients," she says. "Students have questions about life, suffering, death, and how to offer hope to patients and their families."

NCF creates space for students to explore these questions with honesty and support. "NCF helps students navigate these questions and find a strong foundation to compassionately care for



Dr. Lisa Wiese



Dr. Mary Ann Leavitt

others that is centered in God's love and truth," Gibbons adds.

A key expression of that compassion is found in the group's most beloved traditions: distributing Thanksgiving cards of appreciation to all faculty and staff at the college and participating in Operation Christmas Child, sponsored by Samaritan's Purse. Each year, NCF members fill shoeboxes with toys, hygiene items, and gifts for children in developing countries.

"Operation Christmas Child is an opportunity to show God's love through children in developing countries who otherwise would not have a gift to open on Christmas morning," Gibbons says. The project also reinforces gratitude. "We realize that if we have a roof over our head and shoes on our feet, we are rich in comparison to most of the rest of

the world. Sending these shoeboxes of gifts and necessities is one way to share our blessings."

But NCF's impact extends far beyond the holiday season. Its service initiatives foster deep personal and professional growth among nursing students. "Serving together promotes a bond between our students and between students and faculty," Dr. Leavitt says. Whether "removing broken eggs from donated cartons" or "standing outside in the heat distributing food to those in need at Boca Helping Hands," students gain a sense of unity and purpose.

The inclusive nature of NCF also creates mentorship opportunities across all levels of nursing education. "We have students from every program and level of education," she says.

"Freshmen discover that there is life after Anatomy and Physiology and seniors who may inspire them to continue their nursing education." Meetings also provide a confidential space where students can speak openly. "Our meetings are a safe place for them to discuss their concerns without being worried about showing their weaknesses."

NCF also helps students address a critical issue in today's healthcare environment: burnout. Gibbons explains that spiritual grounding is a key source of resilience.

"Nurses Christian Fellowship helps nursing students cultivate resilience, emotional strength, and a deep sense of purpose by grounding their journey in spiritual connection," she says. Through Scripture, from Isaiah 41:10 to Hebrews 12:1-2, students are reminded to "fix their eyes on the Lord," framing nursing not as a burden but "a meaningful calling."

Looking ahead, Dr. Leavitt sees tremendous opportunity to expand the spiritual community within healthcare education. "Taking care of people holistically involves mind, body, and spirit," she says. While faith is central, inclusivity remains essential. "Although we are a Christian organization, we welcome nursing students and faculty of all faiths."

Upcoming plans include a Beach Clean-Up Day, assembling care packages for children at Joe DiMaggio Children's Hospital, continued participation in Boca Helping Hands and local charity walks, and new outreach efforts such as donating turkeys to the rural community of Pahokee. And, of course, Operation Christmas Child will remain an annual tradition.

Together, FAU's Nurses Christian Fellowship members are modeling what healthcare can, and should, look like: compassionate, holistic, spiritually grounded, and deeply human.

For more information, visit www.nursing.fau.edu.

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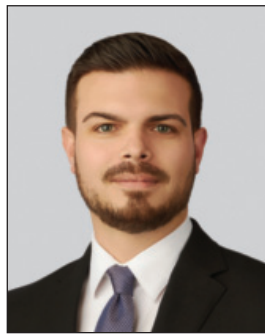
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What Providers and Facilities Should Know About This Year's Insurance Open Enrollment Period

Each fall, the health insurance marketplace enters one of its most consequential times of the year, Open Enrollment. While the headlines often focus on what these changes mean for consumers, it's equally vital for healthcare providers and facilities to understand how shifts in insurance plans, premiums, and pre-authorization rules can directly affect their bottom line and reimbursement cycles.



BY TREVOR BIGLIN,
ESQ.

ify eligibility and network participation to avoid providing services under out-of-network terms.

In short, the financial exposure doesn't just fall on patients, it often lands squarely on providers when insurers deny coverage or underpay claims based on network status.

The Evolving Role of Pre-Authorizations

One of the most significant trends emerging from insurers this year is the tightening of pre-authorization requirements, particularly in the wake of recent legal and regulatory scrutiny around medical necessity determinations.

As federal policymakers debate potential adjustments to the ACA and utilization management rules, insurers are proactively revising their prior authorization protocols to reduce unnecessary spending. Unfortunately, these changes often mean increased administrative burdens for providers; especially in fields such as rehabilitation, physical therapy, and behavioral health, where the necessity of ongoing care can be difficult to justify in short increments.

Providers should take the time now to review payer policy updates and educate billing teams about revised requirements. A small oversight, such as missing an updated authorization code or failing to document the specific functional goals of therapy, can lead to unnecessary denials or recoupments.

The Impact of Potential ACA Reforms

While the ACA remains in effect, certain

proposed changes, particularly those related to cost-sharing subsidies and coverage mandates, could influence both the composition of marketplace plans and the patient mix that providers encounter in 2026.

If subsidies are reduced or coverage mandates loosened, it's likely that more patients will shift toward non-ACA compliant plans or short-term limited-duration coverage. These plans often lack key consumer protections, such as guaranteed essential health benefits or limits on annual out-of-pocket costs.

From a reimbursement standpoint, these alternative policies can pose significant challenges. They frequently include ambiguous coverage exclusions, vague claims processing timelines, and limited appeal rights, leaving providers with little recourse in the event of underpayment or denial. Hospitals and physician groups should train front-end registration and financial counseling staff to identify and document plan types at intake, setting realistic expectations for patients and avoiding surprises later in the revenue cycle.

Preparing for the Post-Enrollment Claims Cycle

Once the Open Enrollment dust settles, providers will likely experience a surge of patients presenting with new insurance cards, updated policy numbers, and revised benefit structures. To minimize disruption during this transition, facilities should take proactive steps such as updating patient intake protocols to ensure accurate insurance information is captured at every encounter, and reverifying authorizations for ongoing treatment plans that span multiple coverage periods. It is equally important to monitor payer

bulletins for any midyear changes to medical policies or reimbursement methodologies, and to educate patients about potential coverage modifications, encouraging them to verify their benefits early to avoid care delays. By implementing these operational adjustments, providers can significantly reduce claim rejections and maintain stronger cash flow during the critical first quarter of the new plan year.

How Legal Counsel Can Help

Given the complexity of today's healthcare reimbursement environment, working closely with counsel experienced in payer disputes and regulatory compliance can provide a strategic advantage. From challenging unlawful denials to negotiating payer contracts, a proactive legal strategy helps providers safeguard their revenue while maintaining compliance with evolving state and federal rules.

At Abril Law, we work alongside hospitals, physician groups, and rehabilitation facilities throughout South Florida to navigate these challenges, protect reimbursements, and ensure providers are paid fairly for the care they deliver.

Conclusion

Open Enrollment is more than a patient decision period, it's a time for providers to assess their payer mix, strengthen their compliance practices, and prepare for the policy shifts ahead. Understanding the ripple effects of ACA changes, premium adjustments, and pre-authorization trends can make the difference between smooth reimbursement operations and costly denials in 2026.

Trevor Biglin, Associate, Abril Law, can be reached at tbiglin@abrilaw.com.

Building on a Century of Impact: The Broward County Medical Association Looks Ahead

For nearly 100 years, the Broward County Medical Association (BCMA) has stood as the unified voice of medicine in our community, advocating for physicians, promoting excellence in patient care, and fostering collaboration across the healthcare ecosystem. As we approach our centennial year in 2026, we are celebrating our legacy and actively redefining our role as a vital healthcare partner for Broward County's future.

This year has marked an exciting period of renewal and momentum for the BCMA. In October, we hosted The Business of Medicine, Part II, a thought-provoking forum where healthcare professionals and industry experts explored strategies for sustaining private practice and adapting to the ever-evolving financial realities of medicine. The event highlighted one of our key goals: to empower physicians with the knowledge, tools, and partnerships needed to thrive in a rapidly changing healthcare environment.

In November, our association was honored to receive the Community Catalyst



BY KAYVAN AMINI,
DO

Award from the Greater Fort Lauderdale Chamber of Commerce. This recognition reflects the BCMA's growing influence and the collective work of our members to build bridges between the medical community, business leaders, and civic institutions. It affirmed that when physicians engage beyond the walls of their practices, our community benefits.

Just days later, on November 12, BCMA hosted our very first Future of Healthcare Roundtable. I had the privilege of chairing and moderating this discussion, which underscored the importance of collaboration among all sectors of healthcare. The gathering brought together healthcare leaders, educators, and legislators to talk about the future of medicine in Broward County. The conversation touched on everything from physician shortages and access to care, to medical education reform, affordability, and how we can balance the needs of patients, providers, and insurers.

I want to personally thank all of the

stakeholders, including our State Representatives, who helped contribute to this monumental event. The BCMA is proud to make this roundtable an annual tradition, creating a space where ideas turn into action and where the healthcare community comes together to shape a healthier future for Broward County. Together, we are charting a path toward a more integrated, equitable, and sustainable system, one that serves patients and supports the professionals who care for them.

Also this year, we published the 2026 Physician Guide for Patients Selecting Medicare Advantage Plans, a physician-driven resource designed to help seniors and their families evaluate their healthcare options during the open enrollment season. By providing clear, accessible guidance on plan performance, physician participation, and patient protections, the guide strengthens our commitment to both physician advocacy and patient education, two sides of the same coin.

As we look ahead, advocacy remains at the heart of everything we do. The BCMA Tallahassee Fly-In, scheduled for December 8-11, will once again provide physicians with the opportunity to meet directly with state legislators and advo-

cate for policies that protect the practice of medicine and enhance patient access to care. Our members' voices matter, and through our presence in Tallahassee, we ensure that those voices are heard loud and clear.

The next chapter of the BCMA story will be one of innovation, engagement, and partnership. We invite physicians, healthcare organizations, and community stakeholders to join us as we strengthen our collective impact. By continuing working together, we can create a healthcare environment that supports physicians, empowers patients, and uplifts the communities we serve.

Finally, I warmly invite everyone to join us on January 31, 2026, for our BCMA Presidential Inauguration and 100-Year Anniversary Gala at Le Méridien, Dania Beach. It will be a celebration of our rich history, our bright future, and the remarkable physicians who make Broward County a leader in healthcare.

To learn more about sponsorship opportunities, partnerships, or membership, please visit www.bcma.com. Dr. Kayvan Amini is President, Broward County Medical Association.

Marc Egart Delivers as Fractional CFO

BY LOIS THOMSON

As described by Marc Egart, a chief financial officer (CFO) is someone hired to assist the executive team in making decisions that impact them financially. Their job is not necessarily to do the financials, but more to interpret and help use the information as a planning tool. But what if a company isn't ready to make a fulltime investment in a CFO? That's where Egart can step in – as a fractional CFO.

Egart explained, "We hire ourselves out to provide fractional CFO services to companies that may not need the services fulltime." He said reasons for that decision could include that the company would be required to give a fulltime financial officer not just sizable compensation, but also benefits; stock options could be involved as well, and a company may not want to or may not be in a position to do that. That's when his firm can step in.

"We make ourselves available to provide some pretty specific components, so once financial statements are prepared, we will go in and do some analytics." He said, for example, they can provide information on the relationship to the client's budget, in terms of how they performed, or are able to provide information on a cash flow projection – whether there might be a potential deficit over the next six months, so the company can prepare for that.

Egart founded his own public accounting firm, Marc Egart CPA, P.A., in 1999, after having been in public accounting since 1991. His background has been in home health and healthcare since 1989. He said that in going from being a healthcare consultant to financial reporting and tax compliance – his work over the years has evolved into a tax practice, and tax mitigation is one element of it. He has considerable background in cost finding, financial reporting, and analyzing balance sheets, and understanding what moving parts are for all types of businesses. "Our job is then to help educate the business owners along the way."

He pointed out that he is able to format a financial statement in any way that best suits a business owner's needs. "For physicians, we remind them that you're not just the doctor, you're also a business owner, and as a business owner you have certain tenets of



Marc Egart

responsibility that require you to understand what your compliance requirements are – such as deadlines, among other things. But physicians don't need to know how to do it, they just need to know that it exists, and that it has to be done."

Egart continued by saying his firm can give clients a different way to view their profit-and-loss statement, and can provide them with a different way of understanding how those drivers work in their favor – or if they don't. "In a physician's particular case, what is the revenue per patient? Not only is there a direct cost of providing care to the patient, but there is also the cost of patient acquisition: do they know the cost of acquiring a patient, whether it's through marketing and advertising or referral costs? They need to have an understanding of how decisions impact their financial picture."

Egart said he works with clients either in a limited engagement or a longstanding arrangement. The limited ones could involve just getting a company in a good financial reporting position. "The longstanding ones, on the other hand, could be the client saying, 'We're expanding, I need someone to get me in front of a lender, I'm looking to sell in a few years, I need my financial statements to be industry-standard, I need a balance sheet supported by some paperwork.'"

"So there's a variety of engagements that (fractional CFOs) could be used for. It could be expansion opportunity, and I'll put them in front of a lender resource that will help them get to the next plan. My job would be to help them with the budget process, help them with projections, help them get that funding."

So whether it's healthcare or other types of businesses, Egart said he can, from ground floor operations, "take their entire financial operations and put it into our office so they don't have to worry about it. All (physicians) need to do is practice medicine and we'll pay their bills, we'll do the payroll, we'll do their reconciliations, we'll take care of the general ledger, so they don't have to bother with it, and so they know everything is done on time."

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Holy Cross Health in Fort Lauderdale Advances Commitment to Safety in 2025

BY CAROL KATZELL, BSN, RN

As a member of Trinity Health, one of the largest Catholic health care systems in the country, Holy Cross Health in Fort Lauderdale continues its journey toward becoming a High Reliability Organization (HRO), with an unwavering commitment to ZERO HARM for patients, colleagues and visitors.

Health care presents unique challenges for high reliability. Unlike other high-risk industries, health care involves a dynamic interplay between providers and patients, each with complex needs and unpredictable conditions. From managing severe sepsis and cardiac arrests to preventing falls and handling patients with multiple comorbidities, hospitals must respond in real time to evolving situations. This complexity demands a robust, adaptive safety system.

At Holy Cross Health, safety is a core value. Our culture of safety is built on transparency, accountability, psychological safety and continuous improvement. We measure our progress through safety metrics that guide our efforts and reinforce our commitment to excellence. Across our organization, we pride ourselves on delivering patient-centered care and shared decision making with our patients and care teams.

In 2025, Holy Cross Health was recognized by *U.S. News & World Report* as one of the Best Hospitals in six specialties: Colon Cancer Surgery, Heart Failure, Hip Fracture, Hip Replacement, Knee Replacement and Pacemaker Implantation. Additionally, we received the new



Holy Cross Health received the American Heart Association's Get With The Guidelines® Target Stroke Honor Roll Elite Silver Plus, Target Stroke: Type 2 Diabetes Honor Roll and Advanced Therapy quality achievement awards for its commitment to ensuring patients receive appropriate lifesaving treatment according to nationally recognized, research-based guidelines.

American Heart Association's Commitment to Quality Award, one of only 158 hospitals nationwide to earn this distinction for multi-disciplinary quality improvement.

"Our team's dedication to treating the whole patient, not just the condition, is what sets us apart," said Pierre Monice, President & CEO of Holy Cross Health. "We are focused on continuous improvement and delivering the highest-quality care across every department."

Holy Cross Health's safety program, TogetherSafe, reflects our collective responsibility to protect one another. Key elements of TogetherSafe include:

- **Foundations of Safety Training:** All colleagues receive training on safety principles, error prevention and high-reliability behaviors.

- **Event Learning:** Conduct Root Cause and Causal Analyses, debriefings and share national best practices.

- **Near Miss Reporting:** Celebrate and investigate near misses to proactively prevent harm.

- **Specialty Programs:** Sharps Safety and Fall Prevention programs are supported by Safety Champions who lead prevalence rounds and promote best practices.

Infection prevention is a shared responsibility at Holy Cross Health and the organization recently achieved 226 consecutive days without a colon surgical site infection, and some nursing units have surpassed 1,000 days without a hospital-acquired infection.

"These milestones are only possible through the dedication of our entire health

care team," said Debbie Lambrinos, MSN, RN, Director of Quality Management and Infection Control.

The Holy Cross team also leverages Lean Six Sigma tools like Kaizen, fishbone diagrams and the "5 Whys" to identify root causes and drive rapid process improvements. The Performance Excellence team plays a vital role in facilitating these efforts.

At the heart of Holy Cross Health's safety culture is the "zero mindset," a belief that zero harm is not just a goal, but a way of thinking. As Vince Lombardi once said, "Perfection is not attainable, but if we chase perfection, we can catch excellence."

Carol Katzell is Patient Safety Officer, Risk Management at Holy Cross Health.



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The Health Foundation of South Florida's **Black Health Summit** returns on **Tuesday, June 16, 2026**, at the **Charles F. Dodge City Center, Pembroke Pines**.

We're honored to announce our **Keynote Speaker: Dr. Roger Mitchell, Jr., MD** — the 126th president of the National Medical Association and president of Howard University Hospital.

Dr. Mitchell is a leading voice for health equity in medicine and building systems that honor lived experience and community leadership.



Mark your calendar for a transformative day of dialogue and action, as we chart a healthier, more equitable future for all.

Scan the code to read more about the Black Health Summit.

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Lee Health at Bimini Square in Cape Coral Opening in Phases

Lee Health is proud to announce the opening of Lee Health at Bimini Square at the corner of Palm Tree Boulevard and Cape Coral Parkway. Cape Coral is one of the fastest growing cities in Southwest Florida and this new location, opening in phases over several weeks, will help guarantee access to essential medical services that will help support Cape Coral's expanding population. The healthcare offerings on the first and second floors of Lee Health Medical Office Building will include:

- Adult Primary Care
- Breast Health Center
- Cardiology Services from the Lee Health Heart Institute
- Imaging
- Lab Services
- Infectious Disease
- Pediatric Primary Care
- Pediatric Rehabilitation
- Pediatric Behavioral Health

The Future of Healthcare Design: Technology and Humanity in Harmony

I just returned from the National Healthcare Design Conference and Expo in Kansas City where the theme of Humanity and technology is the common thread that encompasses medical project design.

Architectural design continues as a key driver in improving the patient experience and streamlining operations. Healthcare facilities are no longer simply places for treatment—they are dynamic environments that blend technology, sustainability, and human-centered design to promote healing, efficiency, and accessibility.

One of the most profound shifts is the integration of smart technologies into hospital infrastructure. Artificial intelligence now supports operational flow, managing patient admissions, room turnover, and staff scheduling.

Sensors and real-time location systems help track equipment, monitor patient conditions, and even adjust lighting or temperature based on occupancy and



BY CHARLES
MICHELSON,
AIA, ACHA, LEED AP

need. These tools allow clinicians to focus more on care and less on logistics.

For patients, digital wayfinding, mobile check-ins, and personalized portals are eliminating confusion and wait times. Hospitals are increasingly designed like airports or hotels—intuitive, navigable, and welcoming. Interactive kiosks and multilingual apps guide visitors from entry to exam room, while virtual consultation spaces bridge the gap between in-person and telehealth services.

Beyond hospitals, outpatient and ambulatory care facilities are emerging as the centerpiece of modern healthcare delivery. These centers are designed for efficiency and comfort, offering same-day procedures, diagnostics, and therapy in environments that feel more like wellness centers than medical institutions.

Modular design allows them to adapt quickly to community needs, expanding or contracting as services evolve. Many are

integrated into mixed-use developments, making healthcare more accessible within the daily rhythms of life.

Technology is also empowering patients to stay healthy and independent at home. Remote monitoring tools, wearable devices, and telemedicine platforms enable physicians to track chronic conditions in real time, reducing unnecessary hospital visits. Smart home adaptations—such as voice-activated alerts, medication reminders, and remote diagnostics—extend the reach of care into the living room.

Ultimately, healthcare design in 2026 focuses on keeping people well, not just treating illness. Architecture, technology, and compassionate design now work in unison—creating systems that connect hospitals, clinics, and homes into a seamless continuum of care that is efficient, sustainable, and profoundly human.

Charles Michelson, President, Saltz Michelson Architects, can be reached at (954) 266-2700 or cmichelson@saltzmichelson.com or visit www.saltzmichelson.com.



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UHealth SoLé Mia Expands Access to World-class Academic Medicine



BY VANESSA ORR

When UHealth SoLé Mia opened in September, the seven-story, 370,000 sq. ft. facility provided something to South Florida residents that they'd been needing for a very long time.

"Access—that sums it up in one word," said Vandana Pathak, assistant vice-president, Ambulatory Operations. "It is the number one priority of the University of Miami Health System to bring healthcare closer to home."

According to Pathak, the demand for world-class academic medicine is growing, with many patients traveling long distances to seek care. UHealth SoLé Mia is the largest ambulatory medical center that the medical system has built to date, joining UHealth Doral and The Lennar Foundation Medical Center, all of which build on the advanced specialty care delivered at UHealth's flagship hospital in downtown Miami.

Nationally Ranked Specialty Care

At UHealth SoLé Mia, all outpatient specialties are housed under one roof to make the patient experience more convenient. The "one-stop shop" has 110 exam rooms, 10 operating rooms, and 33 cancer infusion suites where oncology services are provided by Sylvester Comprehensive Cancer Center, South Florida's only NCI-designated cancer center.

"Our operating rooms and interventional radiology suites are all outfitted with the latest in surgical boom technology, lights and audio/video integration, so physicians can observe cases from other campuses," said Pathak. "Robotic surgery is available in specialties like orthopedics, urology and gynecology."

Eye care at UHealth SoLé Mia is provided by the Bascom Palmer Eye Institute, which has consistently been ranked the number one eye hospital in the country for the past 25 years. Urology services will be provided by the Desai Sethi Urology Institute and UHealth just signed a partnership with the Hospital for Specialty Surgery to provide world-class orthopedic care.

Additional specialties include neurology and neurological surgery, cardiology, endocrinology, gastroenterology, dermatology, otolaryngology, gynecology and more.

"The facility also includes all of the

clinical and ancillary services needed to support care like an imaging lab, pharmacy, physical therapy, occupational therapy and more," said Pathak. "A patient can get their MRI and see their provider in the clinic on the same day, spending less time in their cars and more time at the dinner table with their families."

A Place People Want to Work

UHealth SoLé Mia was designed not only for patients and their families, but with the staff in mind as well. More than 500 staff members were involved in the design of the facility, resulting in a building that promotes efficiency and safety and makes it easier to do their jobs.

The facility has integrated artificial intelligence (AI) in every aspect of patient care, from scheduling to insurance verification to clinical visits. The center features Suki AI, which is ambient dictation that allows doctors to be more efficient when dictating notes, so that they can instead focus on the patient without the distraction of note-taking.

"Our goal with Suki AI is to reduce paperwork and physician burnout, but it also translates into an amazing patient experience," said Pathak. "Providers spend less time notetaking and more time being present in front of patients and family members."

AI also suggests potential diagnoses and recommended treatments based off the latest guidelines, which enhances clinical decision making. It generates after-visit summaries and reports within minutes, which insures that patients leave with a clear understanding of their care plan.

Patient-centered Design

Because many people feel anxious about going to the doctor or having a healthcare procedure performed, UHealth SoLé Mia was designed to make that experience easier by blending hospitality with healthcare.

"The design was focused around creating a healing environment; every touch point in the building was made with the five senses in mind," said Pathak, adding that research shows that patients recover more quickly and require less pain medications when they have exposure to nature and a healing environment.

The design includes floor-to-ceiling windows to bring in natural light, and a reflection garden on the fourth floor offers views of the ocean and the devel-

opment's Crystal Lagoon. Expansive lobbies and hallways are designed to enhance comfort, provide calm and optimize patient flow and efficiency.

"Curated art is a big focal point; we have an expansive, two-story digital art wall, among other pieces," said Pathak. "We also have aromatherapy piped into the building through the HVAC system, and every day, a live piano player performs to create an uplifting experience as soon as patients walk in the door."

Pathak adds that UHealth was also mindful of where services were placed, putting high-volume services on the first floor to make patients' visits easier and more convenient.

"Surrounded by a vibrant residential community, the building is more than just its exterior—it's the people inside who make it come alive," added Pathak. "From valet staff and patient access representatives to housekeeping, nurses, and physicians, every individual was chosen for their role in creating a welcoming, caring environment. Buildings endure, but it's people who give them soul."

"Every day we walk into this facility, we're just thrilled to be here and to be part of this community," said Pathak. "It's something very special."


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How Will Your Malpractice Carrier Fight For You?

It's no longer just a matter of signs hinting at a hardening market. Indisputable evidence is now at the forefront. Malpractice rates are going up across the board. Weaker malpractice carriers are being placed into receivership or sold. Juries are making shockingly high awards. And this is only the beginning.

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These are just a few of the questions you should be asking in this volatile market. It's not too late for a no-obligation medical malpractice insurance review, just contact Tom Murphy of Risk Strategies 800.966.2120 or tmurphy@risk-strategies.com.

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Mount Sinai Medical Center Celebrates Topping Out of New Westchester Freestanding Emergency Center

Mount Sinai Medical Center recently celebrated a major construction milestone with the Topping Out ceremony of its new state-of-the-art emergency center in Westchester, marking the completion of the facility's structural framework. Set to open in late-2026, the facility represents the first phase of Mount Sinai's multi-phase Westchester campus development, which will ultimately become the medical center's second hospital in South Florida.

The ceremony brought Mount Sinai leadership and project partners, who gathered to sign the final beam before it was raised into place atop the new four-story, 112,000-square-foot building located at 8200 SW 8th Street.

Purchased by Mount Sinai in 2023, the Westchester campus is being developed in three phases to meet the growing



Barry L. Skolnick, Chairman of the Board of Trustees of Mount Sinai Medical Center; Gino R. Santorio, President and CEO; and Paul Singerman, Vice Chair of the Board of Trustees, at the topping-out ceremony for the Westchester Emergency Center.

healthcare needs of Miami-Dade residents.

- Phase One, now underway, includes a four-story, 112,000-square-foot facility that will feature Mount Sinai's largest freestanding emergency department with 26 bays, a Baker Act receiving unit, and advanced imaging services such as MRI, CT, and ultrasound. A café and kitchen will also serve patients and visitors. The FSED is expected to open in late-2026.

- Phase Two will expand the upper floors to include inpatient and observation beds and a procedural platform for surgery, cardiac catheterization, and GI procedures, with completion targeted for late 2028.

- Phase Three will add a second building dedicated to outpatient multi-specialty practices, further enhancing access to care for the community.



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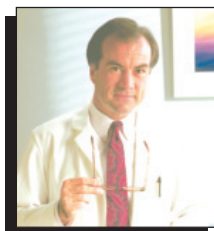


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Kindred Hospitals provide specialized, high quality care for acutely ill patients. For more than a decade, we have fine-tuned the art of medically complex care.

Our services range from complex catastrophic illnesses that require intensive care, post-surgical medical rehabilitation to patients suffering from chronic diseases requiring respiratory and rehabilitative therapies. Kindred Hospitals provide outcome-oriented cost effective care for patients with a wide spectrum of medical conditions.

Admissions to Kindred Hospitals may be recommended by physicians, acute-care hospitals, rehabilitation hospitals, managed care providers, case management companies or by the patient's family. In all cases family tours are encouraged.



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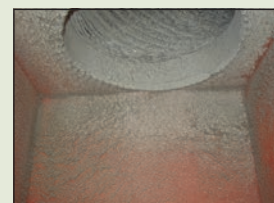
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Cleveland Clinic Indian River Hospital Awarded \$5.5 Million By A. James & Alice B. Clark Foundation

The A. James & Alice B. Clark Foundation has invested \$5.5 million to enhance emergency services, behavioral health, and mother/baby care at Cleveland Clinic Indian River Hospital.

Breakdown of Funding:

Emergency Department – \$5 Million
The largest portion of the investment, \$5 million, will boost funding for a comprehensive renovation and expansion of the Emergency Department to address increasing patient volumes since its last renovation in the early 2000s.

Key updates include:

- Emergency patient volumes have continued to increase since the last renovation in the early 2000s. Cleveland Clinic Indian River Hospital plans a comprehensive renovation and expansion to accommodate growth.

- The project scope will include renovating over 9,000 square feet, adding 8,750 square feet of space that includes low acute treatment stations, private exam rooms for acute care, and rebuilding the main Emergency Department entrance.

Behavioral Health Center – \$250,000
The Behavioral Health Center will receive \$250,000. The 46-bed center provides psychiatric care for patients of all ages, and demand has steadily grown, with admissions increasing by 35% between 2017 and 2022. This increase has been driven by the growing acuity of mental health and substance use disorders as well as the closure of other regional facilities.

Planned improvements include:

- Enhancements of the activity and group rooms. These updates will enhance safety, comfort, and therapeutic engagement for patients across all inpa-

tient and outpatient behavioral health settings.

Labor & Delivery Unit – \$250,000
The Clark Foundation's investment also includes \$250,000 to support ongoing renovations to the Labor & Delivery unit, aimed at improving maternity care facilities and creating a family-centered environment.

Key updates include:

- Renovations to the Labor & Delivery unit are underway and will significantly improve the hospital's maternity care facilities.

- Phase 1, set for completion in 2025, focused on updating labor, delivery and postpartum areas, introducing private suites and expanding the space for birthing and triage.

- Additional renovations will continue through 2026, improving overall capacity to meet patient and operational needs.

- This investment will further postpartum enhancements, expanded care spaces, and comprehensive, family-centered maternity care.

"The support from the A. James & Alice B. Clark Foundation builds on our momentum and enables more people to receive emergency care, timely mental health assistance and more mothers and babies to benefit from the high standards of care we have achieved," said Richard Rothman, MD, Vice President and Chief Medical Officer at Cleveland Clinic Indian River Hospital.

In addition to the Clark Foundation's \$5 million investment, Indian River's philanthropic community also contributed \$15 million toward the renovation of the hospital's Emergency Department renovation and \$7 million toward the renovation of the Labor and Delivery unit.

University of Miami Health System's Bascom Palmer Eye Institute Opens in Abu Dhabi

Bascom Palmer Eye Institute, part of UHealth – University of Miami Health System, made history with its first international expansion. The prestigious institution opened a state-of-the-art facility in Abu Dhabi, United Arab Emirates, in December 2025,

marking a significant milestone in global eye care.

Under the supervision of the Department of Health – Abu Dhabi (DoH), the project is made possible through a strategic collaboration between Bascom Palmer Eye Institute and August Medical, part of SOZA Group, bringing the institute's renowned expertise in ophthalmic care, pioneering research and medical education to the Middle East region.

"This is truly a remarkable milestone for the University of Miami Health System to deliver one of its crown jewels to another nation," said Dipen J. Parekh, M.D., chief executive officer for UHealth and executive vice president for health affairs at the University of Miami. "This venture is much more than opening another health care facility. We are transplanting Bascom Palmer's excellence across continents, expanding UHealth's reach to serve more patients and train more physicians worldwide. We are grateful to SOZA and August Medical for their collaboration in bringing this idea to completion."



Upcoming ACHE Events

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Holiday Networking Event

DATE/TIME Wednesday, December 10, 2025
6:00 pm to 9:00 pm

LOCATION MAI-KAI Restaurant
3599 N. Federal Highway, Fort Lauderdale, FL 33308

2026 ANNUAL

Chapter Meeting & Board of Directors Installation

DATE/TIME Thursday, February 5, 2026
5:30 pm - 9:00 pm

LOCATION Renaissance Hotel
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Tampa General Hospital and Casa Ybor Reveal Plans for New Hospital, Clinic in Historic Ybor City

Tampa General Hospital and local developer Darryl Shaw revealed plans to build a hospital, clinic and medical office building in east Ybor City.

Tampa City Council considered and approved a Comprehensive Plan amendment for parcels owned by Shaw in the eastern portion of Ybor City. The amendment opens up the potential for residential and commercial mixed-use development rather than solely industrial use.

Tampa General plans to construct a hospital and clinical offices, which would provide primary care and urgent care services, offering area residents greater access to world-class care from one of the nation's leading academic health systems. Scenarios for the two-block area consider the possibility of office space and ground-level retail space along with the potential for hotel and residential units.

This announcement comes on the heels of Tampa General's opening of a 32,000-square-foot innovation center at 1205 East Fifth Avenue, the former Masonite building in Ybor City. The center is home to Tampa General's innovation team, its ven-

ture capital arm TGH Ventures and its analytics and IT teams.

This development in Ybor City is within the Tampa Medical and Research District (TMRD), a robust health care and life sciences ecosystem where leading academic and research health systems, nationally recognized universities, biotechnology companies, and a dynamic network of startups, entrepreneurs, and investors intersect, accelerating the revolution of health care. The TMRD, anchored by TGH and USF Health, is expected to drive significant economic development by attracting companies in health care and life sciences, artificial intelligence, defense and technology.

Tampa General's plans are in concert with Shaw's broader vision already underway to revitalize Ybor City. Working with the deep-rooted family businesses and celebrated landmarks of the neighborhood, Shaw is pursuing a plan that puts Ybor back on the map as a premier destination with authentic tributes to its rich culture and vibrant history.

Baptist Health Celebrates Ribbon-Cutting and Unveiling Ceremony for New Freestanding Emergency Room in Palmetto Bay



Baptist Health leadership, board members and the Nateman Family at the Ribbon Cutting Ceremony

Baptist Health recently celebrated the ribbon-cutting and unveiling ceremony for its newest freestanding emergency room (ER) in Palmetto Bay, a facility made possible through the generous support of the Nateman family. The Dr. Harry Richard Nateman Center will operate as a department of Baptist Health Doctors Hospital, providing 24/7 emergency care to the community. The ceremony was led by Baptist Health leadership who gathered with community officials and members of the Nateman family to commemorate the occasion. The new facility is set to begin treating patients in December 2025, significantly expanding access to critical medical services for residents in and around Palmetto Bay. The 17,000-square-foot ER will feature 17 exam rooms, a dedicated triage area, advanced imaging services—including CT scans, ultrasounds and x-rays—as well as an on-site laboratory and pharmacy. The facility's establishment was supported by a significant philanthropic gift from the Nateman family, recognized as valued partners of Baptist Health.



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Cover Story: Building the Future of Care: How DPR Construction Is Transforming Healthcare Infrastructure Across South Florida

Continued from page 1

tative care, Barrios notes that providers are rethinking how and where care is delivered. “We’re seeing a transformation in healthcare where our providers, administrators, doctors, and nurses are trying to get closer to our communities,” Barrios explains. “The demand is going into outpatient facilities, ambulatory care centers and free standing emergency centers that provide between 50 to 80 percent of what a hospital can accomplish.”

This shift toward smaller, community-based facilities requires contractors who can adapt quickly to each project’s unique needs. “Any one healthcare project is its own unique opportunity,” Barrios says. “If it’s never been built before, we try to work with our customers as early as possible, listen to what they need, and offer more predictable opportunities to get projects executed.”

Precision Construction in Active Healthcare Environments

Predictability, Barrios emphasizes, is central to DPR’s philosophy. As a self-performing general contractor, DPR takes on many trades in-house—drywall, concrete, waterproofing, electrical, and more—to ensure quality and schedule control.

“We believe a self-performing general contractor has an ability to be predictable in the execution of the work in the field so that we can deliver our projects on time,” he says.

That reliability is especially critical when working in and around active hospitals. Both the Proton Therapy Center and Broward Health Coral Springs projects were horizontal expansions connected directly to existing, operational facilities, a process that requires precision and constant communication.

“In these environments, you have one side that’s an active construction site and the other side that’s critical patient area,” Barrios explains. “Vibration is a huge deal. For example, if an overhead light boom moves even slightly during an operation



Broward Health North

that could potentially provide an error for the doctor.”

To prevent disruptions, DPR coordinates every activity with hospital administrators, charge nurses, and doctors.

“We scheduled any vibration-related work early in the morning, before 7:00 a.m., to avoid disrupting patient care,” Barrios recalls. “At Broward Health Coral Springs, which operates 24/7, we coordinated directly with the doctors to understand their case schedules so we could plan our work around them and minimize any potential impact.”

Noise, dust, and patient access are equally critical concerns. DPR employs vibration and noise monitoring technology and implements strict dust-control measures, such as using watering trucks and gravel bases on job sites. Signage and site logistics are carefully planned to ensure that patients and visitors can safely navigate hospital entrances during construction.

Harnessing Virtual Design for Complex Medical Projects

The complexity extends beyond patient comfort. It’s about seamlessly integrating advanced medical technology into every build. “We believe these medical technologies require a lot of upfront planning,” Barrios says.

For highly technical installations like MRIs or proton therapy systems, DPR relies on its Virtual Design and Construction (VDC) teams to create detailed, full-scale building information



MHS Miramar

models.

“Our VDC team takes the design drawings and builds a virtual model, essentially creating a life-sized digital version of the facility,” Barrios explains. “Down to the three-quarter-inch conduit, we can pinpoint exactly where everything will go. We then place the medical equipment within that model to ensure all the necessary utilities—power, water, and steam—are precisely coordinated well before construction begins.”

This modeling allows DPR’s trade partners to visualize how systems fit together before construction begins, minimizing errors and ensuring that critical equipment can be installed efficiently once on site.

Bringing Care Closer to Communities

Beyond technical excellence, DPR’s work is reshaping how patients access care. “These healthcare builds impact the patient experience by being closer to where they are,” Barrios says. “You’re seeing more outpatient and ambulatory facilities right in the communities they serve—so they’re convenient and walkable.”

That accessibility, he adds, helps patients act sooner. “When patients can get care earlier, they can address whatever might be ailing them faster,” he says.

To meet this demand, DPR embraces innovation and integrated project delivery (IPD) models that unite builders, designers, and healthcare providers from the start. “We believe predictability for our healthcare providers is paramount,”

Barrios says. “When we delivered the proton therapy treatment facility for Baptist Health South Florida, we knew that if it wasn’t delivered on time, every day that machine wasn’t operating was a day someone wasn’t receiving cancer treatment.”

By engaging early—“When it’s still a napkin sketch,” as Barrios puts it—DPR helps clients stay on budget, on schedule, and ready to serve patients sooner.

Preparing for the Next Era of Healthcare Construction

Looking ahead, DPR is positioning itself for continued growth in South Florida’s healthcare sector—focusing on long-term partnerships, innovation, and strategies that anticipate the needs of tomorrow.

“We’re a global enterprise, but we’re also deeply embedded in this community,” Barrios says. “My role is to listen to our clients, understand where our trade partners and design teams are, and ensure that we’re all aligned—one team working toward a shared mission for the healthcare provider.”

For Barrios and his team, that mission extends well beyond construction; it’s about strengthening the systems and institutions that keep South Florida healthy. “One of DPR’s core values is being ever forward,” he says. “We’re always thinking about what’s next, how the industry will evolve, and we’re confident that we’re ready for it.”

For more information, visit dpr.com.

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2025: A YEAR IN REVIEW

Mount Sinai Medical Center: 2025 Year in Review

Mount Sinai Medical Center closed its 75th anniversary year with key gains across expansion and capital improvement projects, clinical programs, and digital infrastructure, reinforcing its role as a leading healthcare provider for South Florida.

The system's 2025 initiatives focused on expanding access, strengthening specialty care and improving outcomes for patients across Miami-Dade and Monroe counties.

Oncology Expansion and Major Capital Progress

Construction progresses on the Braman Comprehensive Cancer Center, set to open in mid-2026. The facility will centralize medical, surgical and radiation oncology with diagnostics, clinical research and supportive services, reducing fragmentation and improving coordination for patients navigating complex treatment pathways.

The gynecologic oncology program, led by Dr. Brian Slomovitz, broadened its portfolio of clinical trials and now offers more gynecologic cancer studies than any other center in South Florida. The program contributed to research that supported the first FDA-approved treatment for KRAS-mutated low-grade serous ovarian cancer, expanding therapeutic options for a subset of patients with limited alternatives.

Expanding Access Across Miami-Dade and Monroe Counties

Mount Sinai advanced several market expansion projects aimed at improving access in high-growth areas.

The Westchester freestanding emergency center will open in late 2026 with 26 bays, advanced imaging and a Baker Act receiving unit. This marks the first phase of a multi-year plan to develop the organization's second hospital in Miami-Dade County, adding inpatient beds, procedural capacity and a future medical office building.

In East Hialeah, a new 33,000-square-foot site opened in July, brought primary care, urology and cardiology to a densely populated area with rising demand for outpatient services. The location will continue to expand the services offered in 2026.

In April, a new Key West location opened to provide primary care, walk-in care and on-site diagnostics, offering residents and seasonal visitors closer access to essential services.

Strategic Growth in Cardiovascular and Thoracic Care

As the number one cardiovascular program in South Florida for both outcomes and volume, the medical center continued to invest by building on existing expertise, recruiting subspecialists and supporting research that moves complex care forward. The arrival of Dr. Eric Weiss as President of Cardiovascular and Thoracic Surgery and Co-Director of Valve Surgery added further depth to a high-acuity service line that supports patients with complex valve disease.

Mount Sinai advanced its research footprint through a study led by interventional cardiologist Dr. Nirat Beohar, evaluating an FDA-approved device intended to help reduce stroke and cognitive decline following cardiac surgery. As the first center to introduce the protocol, Mount Sinai provided early access for local patients and strengthened its position in trial-based innovation.

Thoracic surgery continued to serve as a regional referral destination. The program became the first in Florida to use real-time hybrid OR imaging for early-stage lung cancer, supporting improved accuracy in diagnosis and treatment. The team reports a five-year survival rate of 83% for stage one lung cancer, well above national figures—a meaningful advantage for patients facing a time-sensitive disease.

Quality, Digital Advancement and Workforce Support

Mount Sinai earned national recognition from Healthgrades as one of America's 100 Best Hospitals, along with multiple specialty distinctions across cardiac, neurosciences, pulmonary and gastrointestinal care. NRC Health honored the system for patient experience, and the American Heart Association acknowledged the organization's stroke performance through multiple Get With The Guidelines® distinctions.

The medical center reached HIMSS EMRAM Stage 7, reflecting a highly integrated digital environment that supports safety, communication and care coordination across sites.

Looking Ahead

As Mount Sinai moves into 2026, the system remains focused on expanding access, strengthening high-demand service lines and building capacity to meet the needs of a growing region. The momentum from 2025 positions the organization to support patients and communities with the scale, expertise and infrastructure required for the years ahead.

Holy Cross Health 2025 Year in Review

For 70 years, Holy Cross Health has been a pillar in our community, and together with Trinity Health, serves in the spirit of the Gospel as a compassionate and transforming healing presence. As we reflect on 2025, we celebrate a year defined by innovation, gratitude and growth, made possible through the generosity of our community.



BY LAURA DENOUX

Leading us into our next chapter is President and CEO Pierre Monice, MBA, FACHE. Since joining Holy Cross Health in May, Pierre has brought a dynamic vision and a deep commitment to our mission. A proud South Florida native, he has been a visible and approachable leader, connecting with patients, families and donors, while championing initiatives that strengthen our community. Under his leadership, Holy Cross is advancing an ambitious ambulatory growth strategy, elevating patient experience and fostering a culture of engagement and collaboration among colleagues. His focus on health equity and innovation ensures that we remain at the forefront of compassionate, high-quality care for all.

This year marked the launch of the Healing Heroes program, providing patients and families with a meaningful way to honor caregivers who have made a lasting impact on their lives. With a philanthropic gift directed to an area of choice, donors not only express gratitude but also advance our mission. Since its introduction, more than 100 caregivers have been recognized.

It has been a year of growth, marked by the opening of new facilities designed to deliver the highest quality care to our communities. Among the most significant milestones was the launch of the Holy Cross Health Family Health Center in Oakland Park, a 15,000-square-foot hub offering comprehensive services for patients of all ages. This center, made possible entirely through philanthropy, provides primary care, annual wellness exams, immunizations, pediatric therapies, medical nutrition, culinary medicine, social services and community education all under one roof. It is the only facility in eastern and northern Broward County to offer pediatric occupational, physical and speech therapy in a single location, along with job-readiness and support programs for adults.

None of these accomplishments would have been possible without our gracious donors, whom we recognized during our annual Evening of Gratitude. In 2025, the Harry T. Mangurian, Jr. Foundation was presented with the Remarkable Philanthropy Champion Award for its \$5 million gift that funded the renovation of the Harry T. Mangurian Jr. Foundation Surgical Suites.

Following a generous \$2 million gift from Jon and Helaine Ayers that enabled Holy Cross to renovate the Outpatient Rehabilitation Center and purchase state-of-the-art physical rehabilitation equipment to treat neurologic, vestibular, oncologic and complex orthopedic conditions, we celebrated the newly renamed Jon & Helaine Ayers Rehabilitation Center at the main hospital.

The unique therapies offered here help patients who are recovering from strokes, brain and spinal cord injuries, or are living with Parkinson's disease, multiple sclerosis and other complex conditions regain and improve their mobility and balance through physical, occupational and speech therapy.

The Philips Spectral CT 7500, a cutting-edge diagnostic imaging system that delivers high-definition, multi-layered scans for faster and more precise diagnoses, is now available to patients at the newly named Wanda & Jim Moran, Jr. Emergency Department (ED). A transformational \$6.5 million gift, one of the single largest donations in the hospital's 70-year history, from philanthropists Wanda and Jim Moran, Jr. and the Wanda & Jim Moran Foundation, enabled advancements to the ED and purchase the scanner. Combined with previous contributions to Holy Cross, the couple's support totals \$8 million.

We were also blessed to receive another of its single largest planned gifts in our 70-year history. Philanthropists and grateful patients, Charles "Chuck" and Jacqueline "Jackie" Frasier, named Holy Cross Health in their estate plans, committing nearly \$5 million in addition to the couple's \$250,000 multi-year pledge made earlier this year. Both gifts support to heart and vascular care.

Thanks to the 15th Annual Holy Cross Health Golf Classic that raised more than \$279,000 and our Women's Wellness Brunch, which celebrated the 15th anniversary of the Dorothy Mangurian Comprehensive Women's Center at Holy Cross HealthPlex, we are closer than ever to purchasing new state-of-the-art mammography units to serve more women, reduce wait times and provide faster access to life-saving screenings.

To donate, visit the website holycross-donations.com/women.

As we enter 2026, we remain committed to building a healthier, more connected community. Every milestone achieved this year reflects the power of partnership and the enduring impact of generosity. Thank you for standing with us as we continue to serve with compassion, excellence and faith.

Laura Denoux is Vice President and Chief Development Officer, Holy Cross Health

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2025: A YEAR IN REVIEW

Broward Health 2025 Year in Review: A Year of Expansion, Innovation and Community Impact



Shane Strum

In 2025, Broward Health continued to transform healthcare delivery across Broward County, breaking barriers and expanding access through visionary partnerships, cutting-edge technology, innovative programs and new facilities. This was a year of unmatched commitment to transforming care for every member of our community.

Strengthening Communities Through Collaborative Programs

One of the most significant milestones of the year was the launch of Better Together, a historic partnership between Broward Health and Memorial Healthcare System developed to address the county's most pressing primary and maternal healthcare needs while also targeting food insecurity. Its impact and vision were recognized with the Outstanding

Healthcare Collaboration Award from the Greater Fort Lauderdale Chamber of Commerce.

"Through ingenuity, strategic partnership and determination, Better Together is revolutionizing primary and maternity care for our community," said Shane Strum, President and CEO of Broward Health and interim CEO of Memorial Healthcare System.

Furthering the effort to close gaps in care, Broward HealthPoint, an affiliate of Broward Health, launched Stay Healthy Together, a comprehensive preventative and primary care initiative. Beginning in the City of Lauderdale Lakes, the mobile health unit provided eight weeks of on-site services before continuing its rotation to the City of Pompano Beach. The mobile health units will continue to travel to different cities to ensure patient-centered primary care is available where residents live, work and gather.

Broward Health achieved significant financial milestones that reflect the system's continued commitment to operational excellence and long-term stability. S&P Global Ratings upgraded its long-term rating on Broward Health's 2017B revenue bonds from A- to A+. The two-rating upgrade from S&P is a rare achievement that underscores significant improvements in Broward Health's financial stability and operational performance.

Fitch Ratings assigned an A+ Issuer Default Rating to the North Broward Hospital District, which operates as Broward Health, and assigned an A+ long-term rating to Broward Health's 2017B revenue bonds. Fitch also upgraded the outlook to positive, reflecting continued confidence in the system's financial strength.

In FY25, Broward Health served 1,172,133 patients, a 4.3% increase over the previous fiscal year. Broward Health Physician Group office visits increased 13.8%, pharmacy visits increased 6.3% and primary care visits increased 23.7%.

Advancing Technology and Elevating Patient Care

Innovation remained at the forefront in 2025 as Broward Health invested in expanding and modernizing medical technology across the system.

At Broward Health Medical Center, two major advancements were unveiled. The hospital opened its new Advanced Training Simulation Lab, featuring the HAL S3201 multipurpose patient simulator. This high-fidelity technology recreates real-world medical scenarios, allowing teams to practice lifesaving interventions in a safe, controlled environment.

The 716-bed hospital also opened a state-of-the-art interventional radiology lab, equipped with the Canon Alphenix Sky Plus with the HD76 detector. Broward Health is the first in South Florida to utilize this advanced imaging platform, which supports com-

plex, minimally invasive procedures across multiple specialties.

Broward Health North expanded its cardiovascular services with the opening of an 11,600-square-foot cardiac catheterization suite designed to meet the growing demand for electrophysiology care in North Broward.

At Broward Health Coral Springs, the hospital opened a new \$16 million medical-surgical and step-down intermediate recovery unit on the fourth floor of the south tower.

The 87-year-old health system solidified its role in surgical innovation, becoming the first system in Broward County to offer the latest Stryker Mako 4 robotic surgical system. The technology, available at Broward Health Imperial Point and Broward Health North, enhances precision for total hip, total knee and partial knee procedures.

Expanding the System Footprint to Meet Community Needs

To meet Broward County's growing population, the safety-net hospital system is building three new freestanding emergency departments, located in Lighthouse Point, Sunrise and Fort Lauderdale, with an expected opening in 2026 and 2027. Alongside the new emergency departments, Broward Health is building medical office facilities countywide to meet growing healthcare needs.

- Fort Lauderdale: Broward Health Medical Center is developing an eight-story, 188,000-square-foot medical office building and parking garage that will feature 129 exam rooms.

- Deerfield Beach: Broward Health North is adding a six-story, 114,000-square-foot medical office building with 75 exam rooms, along with a seven-story, 300,000-square-foot parking garage.

- Oakland Park: A three-story, 16,000-square-foot medical building is being renovated into a modern medical office building.

- Parkland: Broward Health has acquired a 7-acre parcel for the future development of an outpatient center and additional medical facilities.



The Broward Health Medical Center
interventional radiology lab



Better Together

For more news about Broward Health,
visit [BrowardHealth.org/News](https://www.browardhealth.org/News).



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Lee Health Names Dr. Michael Lipinski as Its New Research Chief of the Lee Health Heart Institute

Lee Health is pleased to welcome Dr. Michael Lipinski as the new Director of Research for the Lee Health Heart Institute. A cardiologist who specializes in cardiovascular disease and interventional cardiology, Dr. Lipinski has over twelve years of experience and has authored or coauthored fourteen book chapters and more than 140 peer-reviewed manuscripts. He also serves on editorial boards and as a reviewer for numerous medical journals.

Before joining Lee Health, Dr. Lipinski served as an interventional cardiologist and cardiac ICU attending at MedStar Washington Hospital Center, where he helped run a preclinical and translational research lab developing novel immune-modulatory therapies and test novel cardiac devices and stents for industry partners. He later served as an interventional cardiologist with Cardiovascular Associates of Charlottesville in Virginia, specializing in the treatment of coronary artery disease, acute myocardial infarction, inflammation, and genetic vascular diseases.



Dr. Michael Lipinski

Baptist Health Brain & Spine Care Names Peter A. Abdelmalik, MD, PhD, Director of Inpatient General Neurology

Board-certified neurologist Peter A. Abdelmalik, M.D., Ph.D., has joined Baptist Health Brain & Spine Care and will serve as director of inpatient general neurology. He specializes in the acute care of hospitalized patients with neurological conditions that affect the brain, spinal cord and nerves. He has training and expertise in neurocritical care and vascular neurology. Prior to joining Baptist Health, Dr. Abdelmalik was an assistant professor of neurology at the State University of New York, University at Buffalo, Jacobs School of Medicine and Biological Sciences and a neurointensivist at Kaleida Health, Buffalo General Medical Center. He also served as a teleneurology and telestroke consultant for Adjacent Health, located in Norfolk, VA.

After earning his Ph.D. in neurophysiology/neuropharmacology at the University of Toronto, Dr. Abdelmalik earned his medical degree at St. George's University School of Medicine in Grenada, West Indies. His clinical training includes an internal medicine internship at Thomas Jefferson University Hospital, a neurology residency at Jefferson Hospital for Neuroscience and a neurocritical care fellowship at The Johns Hopkins University School of Medicine.



Dr. Peter A. Abdelmalik

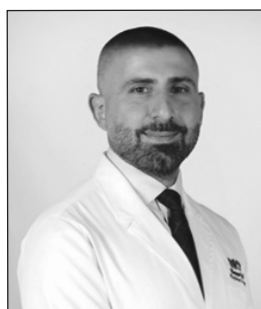
Memorial Neuroscience Institute Adds Specialists

Memorial Neuroscience Institute has added three fellowship-trained physicians to its roster of clinicians.

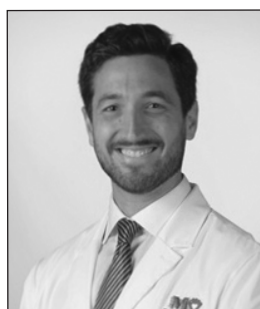
Hisham Alhajala, M.D., is a vascular interventional neurologist that completed fellowship training in vascular neurology at the University of Toledo.

Michael Kader, M.D., is a neurosurgeon with fellowship training in spine surgery, including endoscopic, and brain tumor care that focuses primarily on degenerative spine conditions, primary brain tumors, metastatic disease, and pituitary tumors. A graduate of New York University Medical School, Dr. Kader's internship and residency were completed in the University of Miami/Jackson Health System.

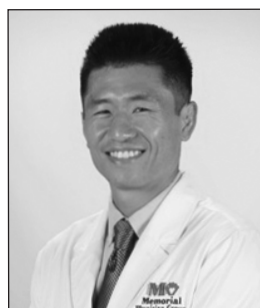
Casey Young, M.D., is a neurologist and specialist in movement disorders and deep brain stimulation that received advance training at Mount Sinai (NY) Health System. Dr. Young was a resident and intern before that in the Columbia University (NY) system.



Dr. Hisham Alhajala



Dr. Michael Kader



Dr. Casey Young

Srishti Srivastava, MD, Joins Baptist Health Brain & Spine Care as an Interventional Pain Management Physician

Board-certified interventional pain management physician Srishti Srivastava, M.D., has joined Baptist Health Brain & Spine Care. Prior to joining Baptist Health, Dr. Srivastava practiced at Pain Treatment Centers of America, White River Health Pain Management in Batesville, AR. Dr. Srivastava earned her medical degree at the University of Manchester School of Medicine in Manchester, United Kingdom. She completed an anesthesiology residency at the University of Miami, Jackson Health System in Miami, FL and a pain medicine fellowship at Stanford Medicine in Stanford, CA.



Dr. Srishti Srivastava

Gastroenterologist and Transplant Surgeon Join Cleveland Clinic Weston Hospital

Fellowship-trained gastroenterologist Darrel Gachette, M.D., has joined Cleveland Clinic Weston Hospital. Dr. Gachette earned his medical degree from the Alpert Medical School of Brown University in Providence, RI. He completed a residency in internal medicine followed by a fellowship in gastroenterology and hepatology at the New York University Grossman School of Medicine in New York, NY.

Fellowship-trained transplant surgeon Masaya Yokoyama, M.D., Ph.D., has also joined Cleveland Clinic Weston Hospital. Dr. Yokoyama earned his medical degree from the University of Toyama School of Medicine in Toyama, Japan. He completed his residency in general surgery at Kimitsu Chuo Hospital in Chiba, Japan, followed by multiple advanced fellowships including: Abdominal Transplant Surgery and Advanced Living Donor Laparoscopic Surgery at the Miami Transplant Institute, Jackson Memorial Hospital in Miami, Florida; Transplant Surgery and Hepatopancreatobiliary Surgery at Virginia Commonwealth University Medical Center in Richmond, Virginia; and Gastrointestinal Surgery, Transplant Surgery and Surgical Oncology at the Chiba University Hospital Group in Chiba, Japan.



Dr. Darrel Gachette



Dr. Masaya Yokoyama

Cleveland Clinic Tradition Hospital Adds Neurologist

Morgan Jordan, D.O., a board-certified neurologist, has joined the medical staff at Cleveland Clinic Tradition Hospital in Port St. Lucie. Dr. Jordan brings extensive expertise in neuromuscular disorders and a deep commitment to patient-centered care to the Treasure Coast community. Board-certified by the American Board of Psychiatry and Neurology, Dr. Jordan earned her medical degree from Edward Via College of Osteopathic Medicine in Spartanburg, SC. She completed an internal medicine internship and a neurology residency at the San Antonio Uniformed Services Health Education Consortium in San Antonio, TX, before completing a fellowship in neuromuscular medicine at UF Health Shands Hospital, University of Florida in Gainesville, FL.



Dr. Morgan Jordan

Cleveland Clinic Indian River Hospital Welcomes Hematologist-Oncologist

Hematologist-oncologist Nataly Torrejon, M.D., has joined the medical staff at Cleveland Clinic Indian River Hospital. Dr. Torrejon's medical education was completed at Universidad Privada del Valle School of Medicine in Cochabamba, Bolivia. She completed an internal medicine residency at Cleveland Clinic in Ohio, where she was also part of the Clinical Scholars Program with a focus on clinical research. During and after medical school, Dr. Torrejon gained experience in internal medicine, nephrology and hematology-oncology by participating in multiple clinical observerships at prestigious U.S. institutions including Brigham and Women's Hospital, Jackson Memorial Hospital and Kettering Medical Center.



Dr. Nataly Torrejon

Abena Serwaa Bonsu Annor, MD, MS, Joins Miami Neuroscience Institute as a Neurohospitalist

Neurologist Abena Serwaa Bonsu Annor, M.D., M.S., has joined Baptist Health Miami Neuroscience Institute. She specializes in the treatment of hospitalized patients with neurological disorders.

After earning a master's degree in medical sciences at the University of South Florida Morsani College of Medicine in Tampa, Florida, Dr. Annor remained at USF to earn her medical degree. She completed an internal medicine internship as well as a neurology residency at Vanderbilt University Medical Center in Nashville, Tenn. During the final years of her clinical training, she educated fellow residents, medical students, faculty and staff through presentations and bedside teaching.



**Dr. Abena Serwaa
Bonsu Annor**

Dr. Daniel Ruggles, Nicklaus Children's Orthopedic Surgeon, Receives AOA Humanitarian Award

Nicklaus Children's Orthopedic Surgeon, Dr. Daniel Ruggles, was recently recognized with the American Osteopathic Academy of Orthopedics (AOAO) Humanitarian Award. Honoring individuals with a commitment to addressing key health concerns, Dr. Ruggles dedicates extensive time to his volunteer work with CURE international, is the director of the Limb Lengthening and Deformity Corrections Program at Nicklaus Children's as well as the director of the pediatric fellowship program within the hospital.



Dr. Daniel Ruggles

Cardiologists Join Baptist Health Heart & Vascular Care at Baptist Health Miami Cardiac & Vascular Institute



Dr. Sheng Fu



Dr. Pedro Covas

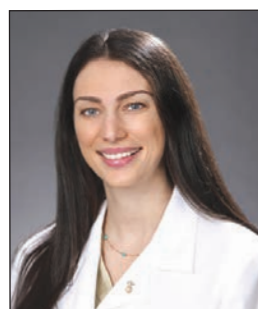
Board-certified advanced heart failure and transplant cardiologist Sheng Fu, M.D., has joined Baptist Health Heart & Vascular Care at Baptist Health Miami Cardiac & Vascular Institute. Prior to joining Baptist Health, Dr. Fu served as an assistant professor of medicine at the University of Louisville. Additionally, he served as medical director of the Cardiac Intensive Care Unit at Jewish Hospital and as associate medical director of the Department of Heart Transplantation at Jewish Hospital – University of Louisville.

Board-certified noninvasive cardiologist Pedro Covas, M.D., has also joined Baptist Health Heart & Vascular Care at Baptist Health Miami Cardiac & Vascular Institute.

Prior to joining Baptist Health, Dr. Covas was an assistant professor of clinical medicine at the University of Miami Miller School of Medicine and director of structural imaging at the University of Miami Health System.

Elizabeth Rubin, DO, Joins The Eugene M. and Christine E. Lynn Cancer Institute as a Hematologist Oncologist

Hematologist oncologist Elizabeth Rubin, D.O., has joined the Eugene M. and Christine E. Lynn Cancer Institute, part of Baptist Health, at Boca Raton Regional Hospital. She specializes in the treatment of cancer using therapies such as chemotherapy, hormonal therapy, biological therapy and targeted therapy and has a clinical and academic interest in breast oncology. She is board certified in internal medicine. Dr. Rubin earned her medical degree at Nova Southeastern University College of Osteopathic Medicine after earning a master's degree in medical clinical sciences at the University of South Florida Morsani College of Medicine. Her clinical training includes an internal medicine residency at Jackson Memorial Hospital, University of Miami Miller School of Medicine and a hematology oncology fellowship at Memorial Regional Hospital. During her fellowship, Dr. Rubin conducted breast cancer research, resulting in published studies, and managing a dedicated breast clinic.



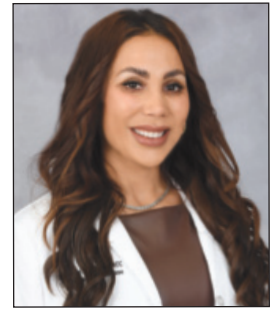
Dr. Elizabeth Rubin

Cardiologist Nadia Isabel Abelhad, MD, FACC, Joins Holy Cross Medical Group

Cardiologist Nadia Isabel Abelhad, MD, FACC, has joined Holy Cross Medical Group.

Dr. Abelhad is a leading cardiologist specializing in preventive cardiology, advanced cardiac imaging and women's cardiovascular health. Her focus areas include cardiometabolic health, lipid optimization, plaque prevention, cardio-obstetrics, pre-eclampsia, cardio-oncology, echocardiography, nuclear cardiology, Single Photon Emission Computed Tomography (SPECT), Positron Emission Tomography (PET), valvular disease, coronary artery disease and heart failure.

Prior to joining Holy Cross Health, Dr. Abelhad was with the Cardiovascular Institute of San Diego. She earned her Bachelor of Science in biology from University of Houston and medical degree from McGovern Medical School at UTHealth Houston. Following her residency at Texas Medical Center she pursued advanced fellowship training in cardiology at Ochsner Medical Center in New Orleans.



Dr. Nadia Isabel Abelhad

Surgeons Join Cleveland Clinic Tradition Hospital

Cleveland Clinic Tradition Hospital welcomes Paulette Griffin, D.O., to its medical staff. Dr. Griffin is a fellowship-trained gynecologic surgeon specializing in minimally invasive and robotic techniques to treat a wide range of complex gynecologic conditions.

Dr. Griffin earned her medical degree from the Edward Via College of Osteopathic Medicine in Auburn, Alabama, and completed her residency in obstetrics and gynecology at HCA Healthcare/USF Morsani College of Medicine in Tampa. She then completed a fellowship in minimally invasive gynecologic surgery at the Mayo Clinic in Jacksonville.

Asa Ramdath, M.D., has also joined the medical staff at Cleveland Clinic Tradition Hospital. Dr. Ramdath is a board-certified general surgeon with specialized training in minimally invasive surgery.

Dr. Ramdath earned his medical degree from the University of the West Indies – St. Augustine Campus in Trinidad. He completed his residency in general surgery at Howard University Hospital in Washington, D.C., followed by a fellowship in minimally invasive and bariatric surgery at Cleveland Clinic Weston Hospital.



Dr. Paulette Griffin



Dr. Asa Ramdath



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A message from our President

What Do We Do Now?

President Obama signed the Affordable Care Act (ACA) into law on March 23, 2010. We have been operating using either the national or state healthcare exchanges ever since. A major question at that time was whether it would be successful. We have the answer.

The ACA Marketplace has seen continuous growth, reaching a record high of 24 million individuals with insurance through the Marketplace in 2025. Literally, a life-saving opportunity affording Americans with preexisting conditions an opportunity to be insured at a cost they can afford. The Marketplace also provides an avenue for individuals and families who have limited income to afford quality insurance coverage.

So, what do you do with a wildly successful program that is servicing 24 million Americans? Well, you fail to support one of the critical features of the ACA. The premium tax credits (also known as subsidies), which lower the cost of health insurance premiums for eligible individuals and families ends in 2026. The recently passed Continuing Resolution to fund government operations fails to reauthorize these subsidies.

Even if the Congress acts in the next 30-days, there will be disruption.

So, what are they talking about to take the place of the Marketplace in the interim?



Jaime Caldwell

"President Donald Trump's exhortations that Congress should send money directly to households, rather than subsidize insurance premiums, loosely fits into the HSA framework, and GOP lawmakers are floating specific proposals. But other ideas are proliferating, including phasing out the ACA itself and reviving policies that didn't make it into Trump's tax law." [Modern Healthcare]

The next 180 days will be interesting. The realities of increases in insurance premiums for 2026 have hit. The average increase for 2026 ACA Marketplace health insurance premiums is 26%, though this can vary by state, with those using Healthcare.gov seeing an average 30% increase and those in states with

their own marketplaces seeing an average 17% increase. The median proposed premium increase is 18%, and these averages do not account for potential increases in what individuals will pay if enhanced premium tax credits expire (which they have).

So, again, with no plan for replacing the ACA in place, HSAs?

So, who is going to be impacted by this change? Americans with limited income will definitely be impacted. From carrying their own insurance card and being able to access the healthcare system for their care, to now having their access limited. Hospital charity and uncompensated care will grow as an estimated 1,000,000 Florida residents will be unable to afford coverage without subsidies. Like COVID, care will be delayed leading to more serious healthcare issues in the future.

We will keep you informed over the next few months about what is happening to either reauthorize the ACA or create a successful replacement.

Cover Story: Camillus Health Appoints Arjun Saluja New Board Chair

Continued from page 1

our footprint and open some health centers in other homeless shelters."

Regarding CHC, he said not only are almost all of its patients uninsured, but they are also homeless, and truly need the services. In fact, Saluja pointed out that Federally Qualified Health Centers, like CHC, serve as many as one out of 10 people. "Last year almost 32 million people across the United States visited these centers for their healthcare needs."

Because of the 40 years' experience Saluja gained from his business ventures – which include manufacturing, distribution, and real estate – he believes he has the skills and knowledge to help. "By running my own businesses, you learn certain skills and try to apply them, keeping in mind the mission – seeing where the needs are, and providing services in those locations, looking for every possible grant, fundraising efforts, to name a few."

Evan Piper, CHC board chair for the previous three years, originally appointed Saluja as finance chair, and now recently appointed the nominating committee that elected Saluja board chair. Piper said, "Arjun has a lot of knowledge and experience in this field. We've had a close working relationship and that makes an easy transition for him."

Saluja acknowledged, "Evan's a great guy, and I am glad that he will continue to serve as a board member. He has been associated with this cause for more than a dozen years and gives his all. There's no question, a lot of credit goes to him for getting us to where we are today." In stepping up as board chair, Saluja is not looking to make any wholesale changes, but

rather is looking into more operational efficiencies, including eliminating excesses. "We need to become leaner and smarter. The bottom line is that to grow any business – and the word 'grow' in this sense means to be able to serve more patients – you have to become self-sufficient and not solely rely on government."

He gave some examples, saying a physician may schedule appointments for 20 patients a day, but ends up only seeing 12 because of no-shows. "What can we do ahead of time to fill in those gaps, to make them more efficient?" He pointed out that there are homeless shelters that use health services and wondered, can we place someone there to make it easier on those people, rather than having them transport the patients to CHC? Or are we doing the best in our contracts with supplies?

"A lot of this is just basic business skills, but board positions are voluntary and sometimes not a lot of time gets spent on really looking at what we can do. So we will look at all of those initiatives and see what we can do better."

Saluja never thought he would be serving in a position like this, but said that once he had established his businesses and realized he actually had some spare time, he felt the need: "That's the way I was brought up, to give back." He said his time with CHI showed him there are a lot of people with a lot of needs, with healthcare being a primary one. "I fell in love with the cause, and now I'm fully committed; this is my second go-round. I learned a lot from the first, and I hope to apply some of that (at CHC)."

For more information, call 305-577-4840 or visit www.camillusHEALTH.org.

WHAT'S NEW...WHAT'S

New State-of-the-Art CT Scanner Now Available to Patients in Wanda and Jim Moran, Jr. Emergency Department at Holy Cross Health

The state-of-the-art Philips Spectral CT 7500 is now open and available to patients at the newly named Wanda & Jim Moran, Jr. Emergency Department (ED). A transformational \$6.5 million gift from philanthropists Wanda and Jim Moran, Jr. and the Wanda & Jim Moran Foundation enabled Holy Cross Health to



make advancements to the ED and to purchase this CT scanner.

This generous contribution significantly elevates the hospital's diagnostic capabilities and ability to better serve the community with enhanced emergency care. In recognition of one of the single largest donations in the hospital's 70-year history, the ED was officially named in their honor during a celebration.

This CT scanner enables practitioners to provide faster, more accurate assessments and interventions for patients experiencing emergencies such as stroke, acute cardiac and vascular conditions, spinal cord injuries, internal bleeding and complex bone fractures. The machine, which takes only two seconds to scan the chest, abdomen and pelvis, has a large bore and height-adjustable table to provide comfort for patients, while providing high-quality, low dose and low contrast images for physicians to review. The clear, accurate images help practitioners make life-saving decisions faster.

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WHAT'S NEW...WHAT'S NEW...WHAT'S NEW...

\$14.5 Million Raised for VeloSano, Funding Cancer Research at Cleveland Clinic

A total of \$14.5 million was raised in 2025 for VeloSano, Cleveland Clinic's movement to fund lifesaving cancer research.

This achievement was made possible through the collective efforts of the VeloSano community, including more than 4,000 participants in the annual Bike to Cure and Trike & Bike signature events, as well as 30,000-plus donors who made direct contributions or legacy gifts to the fund.

Since its inception in 2014, more than \$95 million has been raised for cancer research at Cleveland Clinic and Cleveland Clinic Children's. VeloSano began with a weekend event and has evolved into an initiative that engages individuals, families and organizations throughout the year.

"Cancer remains one of the most pressing health challenges of our time," said Alex A. Adjei, M.D., Ph.D., Chief of Cleveland Clinic's Cancer Institute. "Now more than ever, research funding is essential to accelerate breakthroughs, improve treatments, and move us closer to a cure. Support for VeloSano empowers Cleveland Clinic researchers to push the boundaries of scientific discovery and bring hope to patients and families."

Every dollar raised by VeloSano supports cancer research at Cleveland Clinic. A portion of VeloSano funds is awarded through a competitive application process known as VeloSano Pilot Grants. Since 2014, over 260 cancer research projects have been funded and an additional \$85 million has been earned from extramural granting sources, making the total impact of VeloSano more than \$180 million. Additionally, funding has supported clinical trials and the training of high school students, college students and postdoctoral fellows to ensure future generations continue the research to conquer cancer.

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