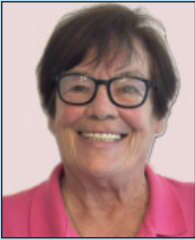


SALUTE TO VOLUNTEERS

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Enhancing Dementia
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THE REGION'S MONTHLY NEWSPAPER FOR HEALTHCARE PROFESSIONALS & PHYSICIANS
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Dr. Alice W. Brumley

Louis and Anne Green Memory and Wellness Center Partners with Baptist Health on GUIDE Model

BY VANESSA ORR

For the past 25 years, the Louis and Anne Green Memory and Wellness Center (MWC) has been helping families dealing with the complex needs of persons with memory disorders such as Alzheimer's disease and related dementias (ADRD) through a variety of specialized programs. This year, the state-designated memory disorder clinic is partnering with the Marcus Neuroscience Institute, part of Baptist Health, as a respite partner under the federal Guiding an Improved Dementia Experience (GUIDE) model.

Patients on Medicare with a dementia diagnosis can receive up to \$2,500 annually to use toward Medicare-funded respite services, such as the Memory and Wellness Center's Adult Day Care program and Sustaining the Caregiver Program.

"Baptist Health provides these recipients with specialized medical care, and we provide caregiver support, an adult day care program, and a number of no-cost services including education, support groups and seminars," explained Alice W. Brumley, DNP, APRN, AGPC-

Continued on page 22

Broward Health and Nicklaus Children's Expand Pediatric Care Access Across Broward County

BY DANIEL CASCIATO

A new chapter in pediatric care is underway in Broward County as Broward Health and Nicklaus Children's Health System advance a strategic affiliation designed to expand access, enhance specialty services, and keep more families close to home for care.

In March 2026, pediatric services at Broward Health Medical Center and Broward Health Coral Springs officially transitioned to Nicklaus Children's, marking a significant milestone in a collaboration that aims to reshape the region's pediatric landscape. The affiliation brings together Broward Health's extensive community-based network with Nicklaus Children's nationally recognized pediatric expertise, with both organizations aligned around a shared goal: delivering high-quality, compassionate care where families need it most.

Addressing a Critical Community Need

For years, Broward County families have faced a gap in access to specialized pediatric care. Approximately 16 percent of pediatric patients have historically left the county for advanced services, creating disruptions for families and adding strain during already difficult times.

Continued on page 17



Shane Strum



Matthew A. Love

Outsourcing



Trevor Biglin

Turning Denials into Revenue: How AI and Outsourced Expertise Are Reshaping Healthcare Reimbursement

BY TREVOR BIGLIN, ESQ.

The financial health of a healthcare organization depends not only on the quality of care delivered, but also on the ability to successfully navigate an increasingly complex reimbursement landscape. Over the past decade, healthcare providers have experienced a sharp rise in claim denials, authorization disputes, coordination of benefits issues, and out-of-network reimbursement challenges. All the while, staffing shortages and growing administrative burdens have made it increasingly difficult for internal business offices to devote the time and specialized expertise required to resolve complex revenue issues. As a result, providers are turning to healthcare consulting and outsourcing partners to supplement their internal teams and help maximize recovery from problem receivables.

Continued on page 10

Salute to Volunteers

A Volunteer's Heart

Seven years. That's how long my friend Chevon Byfield was among the sickest of the sick.

Diagnosed before the age of 30 with congestive heart failure and told he might have just months to live, Chevon was kept alive for much of the next decade by a Left Ventricular Assist Device (LVAD), a mechanical pump implanted in his chest that did what his own weakened and diseased heart couldn't: circulate enough blood and oxygen to sustain his body.

The LVAD, often described as a "bridge to transplant," was his lifeline, but also a daily reminder of what had become an interminable wait for a donor heart to become available. Because while Chevon was immediately placed on the transplant list, hearts large enough for a 6'5" frame like his are always in short supply. The commonality of his blood type, O-positive, also worked against him, since he'd be competing with a larger pool of potential recipients for organs that only become available when someone dies.

So, despite his personal trauma, numerous hospitalizations and the uncertainty of whether he'd survive long enough to be transplanted, Chevon avoided the pity party and made a choice very few in his position would. He became a volunteer for the Memorial Cardiac and Vascular Institute, turning his disease and misfortune into a learning experience for others.



BY KIM BRACKNEY,
BSN, RN, PM

Continued on page 13

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Publisher’s Note

The Quiet Backbone: Volunteerism in Healthcare

April has a way of reminding us that renewal isn’t just for flowers and pollen counts—it’s for people, too. And nowhere is that more evident than in the hallways, waiting rooms, and front desks of our healthcare facilities, where volunteers quietly (and sometimes not so quietly) keep the wheels turning.

Let’s start with a little rumor—because every good publisher’s note needs one. Word around the coffee machine is that if you removed volunteers from a hospital for just one day, the place wouldn’t collapse... but it might look like your kitchen after a long holiday weekend. Slightly chaotic, mildly concerning, and someone would definitely be asking, “Where did all the help go?”

In all seriousness, volunteerism in healthcare is not just a “nice to have”—it’s essential. Volunteers are often the first friendly face a patient sees and the last reassuring voice they hear before heading home. They guide lost visitors, deliver reading materials, assist staff, and, perhaps most importantly, provide human connection in moments when it matters most.

And let’s be honest—sometimes they know more about navigating a hospital than the rest of us combined. Need to find Radiology? A volunteer will get you there faster than your phone’s GPS, and probably with a smile and a story along the way.

Healthcare professionals—doctors, nurses, technicians—deserve every bit of praise they receive, and then some. But volunteers bring a different kind of energy. They are there because they choose to be. No shift requirement, no paycheck—just a genuine desire to give back. That kind of motivation is powerful, and it’s contagious.

Another rumor floating around: some administrators secretly believe volunteers have a sixth sense for when someone needs help. A patient looking confused? A family member unsure where to go? Somehow, a volunteer appears almost instantly. Coincidence? We think not.

Volunteer programs also strengthen communities. They bridge generations, bring together people from all walks of life, and create a shared sense of purpose. In an industry often defined by urgency and complexity, volunteers remind us of something simple: kindness still matters.

As we move through April, let’s take a moment to recognize these unsung heroes. Whether they’re offering directions, delivering comfort, or simply sitting with someone who needs company, their impact is immeasurable.

To every healthcare volunteer reading this: thank you. Thank you for your time, your compassion, and your willingness to step in where you’re needed most. You are not just supporting the system—you are strengthening it.

And if the rumors are true—and we suspect they are—healthcare wouldn’t be the same without you.

Charles Felix

You can reach Charles Felix at Charles@southfloridahospitalnews.com

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KIDZ Pediatric Pulmonologist Thrives on Positivity of Young Patients

BY VANESSA ORR

Dr. Juan Martinez has spent his medical career caring for children. Though he was first drawn to pediatric pulmonology by the types of cases he would treat, he soon developed a true passion for caring for the youngest patients and their families.

"During my primary care training in pediatrics, I was mentored by an attending physician who brought my attention to a couple of interesting pulmonology cases and how they were treated," he explained.

"I started to see how the lungs are related to almost every organ system, and to many of the conditions that children have. So I applied for an elective rotation at the specialty hospital where that physician was from and got accepted."

Dr. Martinez completed his pediatric internship and residency at MetroHealth Medical Center/Case Western Reserve University in Cleveland, Ohio, followed by a fellowship in pediatric pulmonary medicine at Rainbow Babies and Children's Hospital, University Hospitals of Cleveland.

He later served for more than two decades at Joe DiMaggio Children's Hospital, where he was chief of the pediatric pulmonology, cystic fibrosis, and pediatric sleep division, as well as medical director of both the Joe DiMaggio Sleep Disorders Center and the Joe DiMaggio Cystic Fibrosis Center. He joined KIDZ Medical Services as a pediatric pulmonologist and pediatric sleep medicine specialist last September.

"What I like most about my job is helping families; I'm a very social person, and I enjoy speaking with families, not just about medical problems but life in general," he said. "Different families have different life philosophies about how they approach caring for their kids, and I find that enlightening."

"The kids themselves are incredibly resilient and have such a positive outlook, and most recover well from their conditions," he added. "That 'positivity vibe' brings me back to work every day."



Dr. Juan Martinez

Treating Pulmonary Problems

Dr. Martinez treats a broad range of conditions and diseases across all ages. His pulmonary patients range from premature newborns with lung issues and children with cystic fibrosis at risk of developing chronic lung disease, to children with more common clinical conditions like asthma or chronic cough. He also deals with anatomical

airway abnormalities and conditions that require semi-surgical procedures or interventions like bronchoscopy, and treats pediatric patients with sleep disorders like sleep apnea.

"Pediatric pulmonary issues and sleep issues are inherently related," he explained. "Breathing is one of the mechanisms we learn about intensely in pulmonary training, including the control of breathing, how it is regulated, the dynamics of breathing, the physiology, gas exchange, and more—all of which are interrelated to pediatric sleep."

According to Dr. Martinez, symptoms of pediatric sleep problems are often seen during the day, as children who do not get adequate sleep at night may be restless, inattentive, fall asleep, or not do well in school. Behavioral consequences can include hyperactivity and executive dysfunction.

Dr. Martinez is actively involved in research and clinical trials on cystic fibrosis, asthma, and pediatric sleep disorders, and serves as an affiliate clinical assistant professor at Florida Atlantic University. He has also taught at the University of South Florida.

Since joining KIDZ, Dr. Martinez has not only helped new patients but also returned to Miami, where his family is originally from. He has also re-established friendships with many of the doctors that he's worked with over the past two decades while based in Hollywood, FL.

"KIDZ is a very broad-spectrum organization with high respect for its physicians and their independence, and it's filled with hardworking people," he said. "It's a wonderful organization, and it's been great to get the opportunity to come work with old friends."

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Thriving Hospitals. Thriving Economy

Hospitals are not solely stewards of their community's physical health. Above and beyond supporting access to health care, Florida's hospitals are critical contributors to healthy local economies here in the Sunshine State.

Florida has a lower unemployment rate, greater job growth, and greater real GDP growth than the national average. The state also ranks second in the nation for net state-to-state migration, a testament to our state's family-friendly environment and quality of life.

Hospitals are a significant contributor to this success. Florida hospitals' total annual economic contribution to the state is \$198 billion, according to the latest hospital economic impact report from the University of Florida-IFAS. Their economic activity supports more than nine percent of Florida's total workforce and accounts for almost nine percent of the state's Gross State Product.

Florida's hospitals are truly an economic engine.

Hospitals are also powering the economy as employers and reliable purchasers of essential goods and services statewide. Nationally, even as other sectors have cut back on jobs, health care remains a major growth sector for employment, with the need for reliable, high-quality care only intensifying as the population ages.

In Florida, hospitals are among the state's largest and most stable employers, and their economic contributions continue to grow. The University of Florida-IFAS hospital economic impact report documents that in 2023, 337 Florida hospitals provided 343,952 in-demand jobs with \$34.5 billion in annual wages, salaries and benefits for employees to support their families. Combined with affiliated businesses, they support an estimated



BY MARY C. MAYHEW

976,834 full-time and part-time jobs.

As Florida's population grows, hospitals grow along with it, ensuring high-quality, timely medical care is available when and where it is needed. Between 2021 and 2023, Florida's hospitals added 11 percent more jobs and nearly 7 percent more value to the state's economy.

This growth mirrors national trends where, as the *Wall Street Journal* noted in February, "all of America's jobs growth now comes from a category (health care and social assistance) responsible for less than 15 percent of total employment." While payroll growth in every other sector of the economy turned negative at the end of last year, health care employment grew by 12.5 percent.

Beyond their role as employers, Florida's hospitals are robust economic engines as purchasers of essential goods and services, contributing \$23.3 billion in local, state, and federal tax revenue.

The linkage between Florida's thriving economy and being a destination of choice and the contributions of Florida hospitals as employers, purchasers, and health care providers is undeniable. Florida has one of the nation's most enviable and growing economies, and our hospitals are foundational economic pillars and economic engines. As Florida's population continues increasing and aging, the state's continued economic success is intertwined with sustaining a vibrant, financially strong, and sophisticated health care system ready to deliver high-quality modern health care services today and well into the future.

Mary Mayhew is President and CEO,
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Tampa General Utilizes 3D Printing to Advance Cardiovascular Care

Dr. Fadi Matar holds a model of a patient's heart in his hand. A 3D printer recreated the model in precise detail. Using high-resolution scans, the device replicates the exact bulges, bends and delicate surfaces of the organ as if Dr. Matar had somehow removed it from the patient's chest and froze it in place.

Dr. Matar, interventional heart failure program director and medical director of the David and Tara H. Ruberg Innovation and Research Center of Excellence at the Tampa General Hospital Heart & Vascular Institute, and professor and chief of cardiology at the USF Health Morsani College of Medicine, uses these models to plan surgeries and transcatheter procedures. Now, before a single incision is made, he can test procedures, study angles and know precisely how a replacement valve will fit.

Inside the cutting-edge Tampa General Hospital | USF Health 3D Medical Visualization and Printing Lab, a bank of specialized printers builds precision replicas of aortas, kidneys, jawbones and other body parts layer by layer. Using advanced software, engineers convert imaging data from CT scans, MRIs and echocardiograms into digital blueprints. Those files guide printers that deposit microscopic layers of resin or polymer, gradually forming a model that mirrors the patient's anatomy down to the smallest contour.

The 3D model is one of several innovations that have changed the way the academic health system treats heart patients. Dr. Matar, in collaboration with Devid Zille, DDS, OMFS, director of the 3D Medical Visualization and Printing Lab, and assistant professor of medicine at USF Health Morsani College of Medicine, has led the way in discovering new ways to care for heart diseases that used to be largely untreatable. "Now we have hope," Dr. Matar said. "We have the ability to help people whom we were unable to help previously."

Heart disease remains the leading cause of death in the United States, responsible for one in three deaths — more than 919,000 people in 2023 alone



Dr. Fadi Matar

— according to the U.S. Centers for Disease Control and Prevention (CDC). More than half of U.S. adults don't know heart disease holds that title despite more than a century as the nation's leading cause of death. In this environment, earlier detection and more precise treatment don't just move care forward — they save lives.

The 3D-printed heart Dr. Matar holds is just the start. The 3D printing lab is developing a pulsatile model — one that will pump fluid exactly as a patient's heart pumps blood. "What's not constant is the shape of the heart, especially when disease sets in," Dr. Matar explained. "So, in the future, I can make a 3D-printed heart that will pump fluid in the way your heart is really pumping the blood."

These models are already used to plan complex valve repairs and replacements, often revealing risks invisible on scans. Soon, they could also serve as real-time training tools, giving scientists, cardiac surgeons and interventional cardiologists the ability to practice on therapeutic devices as a remarkable functioning replica before ever touching the patient.

Even more precise measurements are coming from another innovation: pressure-volume loop technology. By threading a catheter into the heart, doctors can accurately measure how well the right or left ventricle is functioning. This assessment is critical in deciding whether it can withstand a tricuspid replacement. It's the kind of detail that can mean a significant difference in the success of the procedure.

For Dr. Matar, these tools aren't just medical advancements — they're a way to transform the patient's odds. "As physicians, when we are faced with suffering patients in front of us, it's not a good feeling when we cannot give them options," he said. "Here at Tampa General, we're fortunate to have a very solid academic heart team."

For more information about how Tampa General Hospital is advancing cardiovascular care, visit TGH.org/Heart.

Match Day 2026: A Defining Moment and a Call to Lead

On March 20, 2026, thousands of medical students across the nation experienced one of the most defining moments of their professional lives: Resident Match Day. For many, it is a day filled with anticipation, relief, and profound gratitude, a culmination of years of sacrifice, discipline, and unwavering commitment to the calling of medicine.

As President of the Broward County Medical Association, and as someone deeply invested in medical education and mentorship, I view Match Day not simply as a milestone, but as a transformation. It is the moment when students officially step into the next phase of their journey, transitioning from learners of medicine to practitioners entrusted with patient care. The envelope opened, or the email received, does more than reveal a residency placement; it shapes careers, influences futures, and often determines where physicians will build their lives, serve communities, and establish roots.

For many, Match Day carries emotional weight. It represents years of early mornings, late nights, exams, rotations, and personal sacrifice. It is also a reminder of the resilience required to pursue medicine. Regardless of where each student matches, the achievement itself is extraordinary and worthy of celebration.

Here in Broward County, we are especially proud of the outstanding students who have matched into residency programs this year. Our community continues to benefit from the exceptional training provided by institutions such as Nova Southeastern University's Colleges of Allopathic and Osteopathic Medicine, along with other outstanding medical schools that contribute to the pipeline of talented, compassionate physicians entering our workforce.

To all newly matched residents: congratulations. You are embarking on a chapter that will challenge you, shape you, and ultimately define the physician



BY CHRISTOPHER CHANG, MD

you will become. Residency is where knowledge is refined into clinical judgment, where uncertainty becomes confidence, and where mentorship plays a critical role in your development.

Throughout my career, I have had the privilege of mentoring residents and fellows, and I have seen firsthand the importance of staying intellectually curious and committed to lifelong learning. Medicine is ever-evolving, and excellence requires not only knowledge, but adaptability, humility, and a willingness to grow.

As you begin this journey, I encourage you to become actively involved in your professional community. The Broward County Medical Association exists to support you, not only as clinicians, but as advocates, leaders, and members of a broader medical community. Engaging early in organized medicine ensures that you stay informed on the issues impacting your profession, from healthcare policy to patient advocacy.

Importantly, membership for medical students and residents is offered at no cost. This is an opportunity to connect with peers, access valuable resources, and have a voice in shaping the future of medicine. Your perspective matters, and your involvement strengthens our collective ability to advocate for both physicians and patients.

Match Day is not the end of a journey, it is the beginning of a lifelong commitment to learning, service, and leadership. As you move forward, remember that you are not alone. You are part of a profession grounded in collaboration, mentorship, and shared purpose.

On behalf of the Broward County Medical Association, I congratulate each of you and look forward to welcoming you into our community. Your future is bright, and the impact you will make is immeasurable.

Dr. Christopher Chang is President, Broward County Medical Association.

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Robotic Companion Pets Show Promise in Enhancing Dementia Care at Sarasota Memorial Hospital

BY DANIEL CASCIATO

An innovative clinical trial at Sarasota Memorial Hospital is offering new insight into how small, compassionate interventions can lead to meaningful clinical improvements for hospitalized older adults living with dementia.

Led by Joanna D'Elia, MSN, RN, GERO-BC, CPHQ, nursing quality specialist at Sarasota Memorial Hospital, the year-long randomized study examines whether robotic companion pets can enhance outcomes for patients with mild to moderate dementia in the acute-care setting.

Overseen by the hospital's Kolschowsky Research and Education Institute and funded by Sarasota Memorial Healthcare Foundation board member Deb Kabinoff, the study is among the first of its kind conducted in a U.S. community hospital.

Addressing Vulnerability in Hospitalized Dementia Patients

For D'Elia, the idea grows from years of experience working with geriatric patients.

"When I first started the study, I was serving as Sarasota Memorial's Geriatric Program Coordinator," D'Elia says. "I recognized that patients with dementia are particularly vulnerable during hospitalization and are admitted more frequently than those without dementia. I wanted to find an innovative way to engage both patients and nursing staff, creating uplifting experiences while offering meaningful support."

Hospital stays can be especially destabilizing for individuals with cognitive impairment. Patients often arrive from memory care or skilled nursing facilities, separated from familiar routines and, at times, without regular visitors. The unfamiliar sights, sounds, and clinical demands of the hospital environment can heighten anxiety and confusion, increasing the risk of delirium and prolonging recovery.

"Patients with dementia can become disoriented and anxious during hospitalization," D'Elia explains. "This stress can affect both emotional well-being and physical health, increasing the risk of delirium and slowing recovery."

D'Elia draws inspiration from the hospital's Pet Paws Volunteer and Pet Therapy programs, observing how live animals bring comfort to patients and staff. However, therapy animals cannot be present around the clock. She also sees the positive impact of robotic companion pets in memory care facilities but notes their absence in acute-care hospitals.

"With funding from the Sarasota Memorial Healthcare Foundation and guidance from the Kolschowsky Research and Education Institute, we transformed this concept into a formal research study," she says. "Their support was instrumental in navigating the research process and rigorously evaluating outcomes while keeping patient experience and staff engagement central."

From Concept to Clinical Trial

The study is randomized. Approximately half of eligible older adults with mild to moderate dementia receive a robotic pet in addition to standard care. Patients in the intervention group select either a cat or a dog, which they keep throughout their hospital stay and take home upon discharge. The interactive pets respond to touch: the cat blinks, meows, and purrs; the dog blinks, barks, and wags its tail.

Launching the program requires months of operational planning with ongoing education for those involved in the pilot project.

"Launching the program required careful planning and collaboration," D'Elia says. "We piloted it on 3 medical/surgical units and provided education to staff, patients, and families to ensure everyone felt confident and informed. I reviewed charts for eligibility, while a computer program randomly assigned patients. Staff training and workflow coordination were essential to successfully implement and sustain the study."

What the team discovers surprises even the researchers.

Compared with the control group, patients who receive robotic pets experience fewer drops in blood pressure and heart rate, fewer episodes associated with fall risk, shorter hospital stays, and a higher likelihood of returning home rather than transitioning to assisted living or skilled nursing facilities.

"Initially, the physiological improvements were unexpected," D'Elia says. "However, patients who interacted with robotic pets were actively engaged—they held, petted, and conversed with their companion pet, and that appeared to reduce stress and promote emotional well-being. Observing laughter, smiles, and comfort underscored the profound connection between emotional support and physiological responses."

She adds that the findings reinforce a broader clinical truth.

"These findings highlight that non-pharmacological, human-centered interventions can elicit measurable clinical effects," according to D'Elia. "They reinforced for me that emotional and physical health are deeply intertwined, and that fostering comfort, engagement, and companionship can be a meaningful component of acute-care strategies."

Improving Discharge Outcomes and Independence

One of the study's most compelling outcomes is the increased likelihood that patients return home after hospitalization. For older adults with dementia, discharge destination significantly influences long-term independence and quality of life.

"I believe emotional support and engagement were key factors," D'Elia explains. "Robotic pets provided comfort, companionship, and a sense of purpose, helping patients feel calmer, less isolated, and more motivated to participate in care."

She notes that while she does not directly observe measurable changes in mobility or appetite, it is reasonable to speculate that emotionally supported patients may be more likely to engage in therapies and self-care.

"Interactions with staff while using the pet likely strengthened communication and



Led by principal investigator Joanna D'Elia, nursing quality specialist at Sarasota Memorial Hospital, the study is among the first to test robotic pets as a non-pharmacological strategy to support dementia care in the hospital setting.

personalized care, supporting independence and increasing the likelihood of a successful discharge home," she says.

A Model for Non-Pharmacological Innovation

From a clinical leadership standpoint, the trial underscores the power of non-pharmacological interventions in the hospital setting.

"The trial highlighted the power of non-pharmacological interventions," D'Elia says. "Providing comfort, engagement, and emotional support through robotic pets enhances patient experience and produces measurable clinical benefits."

She believes the initiative also reflects a broader cultural shift.

"It demonstrated that human-centered, creative approaches can complement medical care and that fostering a culture of nursing innovation, where staff are empowered to implement evidence-based, non-drug strategies, can meaningfully improve care and outcomes. Most importantly, the study showed that small, compassionate interventions can profoundly impact patients' well-being."

With the trial now complete, the next phase focuses on sustainability and scalability.

"The next step is securing funding to integrate robotic companion pets into standard care," D'Elia says. "The intervention has already provided meaningful benefits for patients, caregivers, and staff, offering comfort and engagement when it's needed most."

Expanding the model would require purchasing more robotic pets, as well as additional education and ongoing monitoring. Yet the implications extend beyond one hospital.

"Scaling the approach would involve training staff, embedding the intervention into routine care, and monitoring outcomes to capture its ongoing impact," D'Elia adds. "This program demonstrates how innovative, patient-centered strategies can enhance care and serve as a practical model for other hospitals."

As hospitals nationwide seek to improve outcomes while reducing reliance on medications, Sarasota Memorial's experience suggests that sometimes the most powerful interventions are not high-tech devices or complex therapies, but thoughtful, human-centered solutions designed to meet patients where they are.

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Proposed Rule Allowing Physicians to Dispense Medications Directly to Workers' Comp Patients Invalidated

BY VANESSA ORR

When physicians dispense medications through their offices for worker's compensation patients, it creates an extra revenue stream. This can affect a patient's choice of where to purchase their medication and end up costing them—and in turn, insurers—more than they expected.



Kyla Murphy

On Feb. 25, 2026, in the case of Publix Super Markets Inc. versus the Department of Financial Services, the Florida First District Court of Appeal invalidated proposed rules from the Florida Division of Workers' Compensation that would enable physicians to dispense these medications. The regulations went against Florida State Statute 440.13, which provides injured employees the right to a free, full and absolute choice when selecting a pharmacy or pharmacist for prescription medications.

"Injured workers currently have a choice in where they purchase their medications," explained Kyla Murphy, AVP National Healthcare Practice, Risk Strategies. "That's why when you visit your doctor, they ask for details about your pharmacy."

"But some physicians want to dispense the medications themselves," she added. "While this is perfectly legal, in the case of workers' compensation, the court ruled that insurers do not have to authorize or reimburse medications dispensed directly by physicians to injured workers."

There are a number of reasons why insurers opposed the proposed rules, including the fact that health insurance companies claim there is a major increase in cost for medications when they are dispensed at physicians' offices.

According to Murphy, an Insurance Journal 2026 MyMatrixx pharmacy benefit analysis showed that at a retail pharmacy, Vicodin costs about 52 cents per pill compared to \$1.41 per pill at a doctor's office. Mobic cost \$3.10 at a pharmacy versus \$5.86 from a doctor.

The study predicted that carriers could save approximately \$43 million over five

years, based on this court ruling. This is only one study, and others would need to be performed to verify these costs.

While the ruling doesn't prevent physicians from dispensing medications, it does clarify that they are not automatically entitled to reimbursement through the workers' compensation system simply because they

dispense medication. While this decision could be appealed to the Florida Supreme Court, the Florida Legislature could also revise the current statute to clarify how physician dispensing should be handled when dealing with injured workers.

While this ruling doesn't necessarily affect malpractice claims, it may affect the healthcare industry as a whole.

"If insurers are no longer required to reimburse physicians for dispensing these medications, clinics could lose this revenue stream, which may change their incentive to dispense medications in-house to injured workers," said Murphy. "This may lower the likelihood of over-prescribing, which is sometimes associated with malpractice claims."

She added that physicians who continue dispensing medications could still face liability in the case of medication errors—such as providing the wrong drug, incorrect dosage or dispensing medication to the wrong patient.

"It's all about the analytics," said Murphy. "Because malpractice insurers evaluate risk partly based on claim frequency and severity, if there are fewer dispensing-related mistakes, this could lead to fewer claims and possibly more stable insurance premiums."

Others would argue that pharmacies and pharmacists could also make these errors, and it is certainly not limited to physicians dispensing medication in-house for workers' compensation patients.

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

Let's Connect:
ACHE of South Florida Spotlight



ACHE of South Florida Member Spotlight: Brady Alexander

BY LOIS THOMSON

What does it take to be the new assistant administrator of a Broward Health hospital, particularly as a recent graduate of the system's fellowship program for young business executives? According to Brady Alexander, a lot of hard work and a network designed to augment professional competency and business acumen.



Brady Alexander

Alexander, who oversees several departments at Broward Health Imperial Point, including laboratory, nutritional and environmental services, rehabilitation and more, recognizes the responsibility that has been thrust upon him to optimize the hospital's operational efforts. But he also knows what's at stake: patient outcomes and experience.

Acutely attuned to the needs of patients, Alexander originally envisioned a healthcare career in the clinical space. "I wanted to be a doctor; I was fascinated with orthopedics." However, one course in organic chemistry quickly changed Alexander's mind, but not his love for medicine.

After working in an emergency department and volunteering on patient floors, Alexander's healthcare career was just beginning. "I knew I wanted to find solutions in a challenging environment and so pivoted to pursuing my Master of Health Administration. Considering where I've landed in such a short time, that decision has served me well!"

Alexander began his career as a graduate intern at Ballad Health at their Level I trauma center at Johnson City Medical Center in Johnson City, Tenn., then became one of the administrative fellows at Broward Health in a program that had been recently reinstituted by current leadership. The fellowship allowed him to learn all facets of healthcare administration and hospital operations, and he was given strategy and operational projects, dealing with leaders at both the hospital and corporate levels. "That's when I realized I was gravitating toward strategy and operations."

But while his graduate education and fellowship were creating an exceptional educational backdrop, Alexander knew it took more to seat yourself as a future healthcare executive. It's also about the relationships, and so during his fellowship, under the counsel of other healthcare executives, Alexander became a member of ACHE, the American College of Healthcare Executives.

Having previously participated as a student member with the local chapter, Alexander deemed joining ACHE as "an opportunity to learn more about the healthcare landscape, but I was also

interested in networking and exploring the various avenues of healthcare leadership."

Alexander quickly realized that ACHE has many attributes benefiting developing and established healthcare leaders. For example, being from Washington, D.C., he had never been through a hurricane. But the first education session Alexander attended was an emergency session regarding

hurricane preparedness. "We were learning how hospitals interact with the government – city and state, FEMA, even the local police – and the contracts needed to bring in oil tankers or sandbags. All those things need to be in place to be prepared, and that's not something you're learning in a college classroom."

Alexander, who is the current student services chair-elect, has also participated in several case competitions. While at the University of Florida (UF), his team placed first, which had never previously happened for any team competing for UF. That experience prompts him today to mentor his home school team – the University of Florida – as a team competition mentor.

"In this position as student services chair-elect, the ideas I have focus not just on South Florida, but on how we can become the best in the ACHE network of chapters." He said the students are paired with mentors from the field they're learning from, "so the competition becomes invaluable."

Today, Alexander's experience in the classroom and ACHE have led him to an enviable and well-earned opportunity to lead several projects across Broward Health. In January 2025, Alexander had the opportunity to travel to the Epic headquarters in Wisconsin to get certified in OpTime, which is the Epic application that facilitates electronic health records for the operating room (OR), scheduling and surgery, ultimately increasing the flexibility and efficiency of the OR.

Most recently, he helped spearhead electronic, online surgical scheduling. Now live, he notes the organization has seen some increases of almost 20% in electronic scheduling for surgeries.

Alexander recognizes that while he is still early in his profession, the opportunities afforded him by ACHE and his current role with Broward Health are positioning him for a fruitful healthcare administration career. "It's important to keep sight of not only where you're going, but from where you've come. My education, my fellowship and my participation in ACHE have all prepared me for this moment. I can't wait to see what other opportunities lay ahead."

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Measles in Florida: Science, Responsibility, and the Duty to Protect

Florida is once again confronting a preventable public health challenge: a resurgence of measles. As physicians, we are trained to respond to disease with evidence, vigilance, and an unwavering commitment to our patients. Today, that responsibility is more important than ever.

Data from the Centers for Disease Control and Prevention (CDC) show that, as of March 2026, Florida had reported more than 120 confirmed measles cases, placing our state among the highest in the nation. While the numbers may appear modest compared to historical outbreaks, measles is one of the most contagious infectious diseases known, capable of spreading rapidly in under-immunized communities.

Measles is not a benign illness; it can lead to pneumonia, encephalitis, hospitalization, and even death, particularly among young children and immunocompromised individuals. Neurological complications can be permanent, such as post-infectious encephalomyelitis. Measles causes prolonged immunosuppression making individuals susceptible to other infections. Every case represents an individual patient as well as a potential chain of transmission that threatens entire communities.

This outbreak is not occurring in a vacuum. It reflects a broader national trend of declining vaccination rates and growing misinformation about vaccine safety. The science, however, remains unequivocal. Since 1963, when measles vaccination started, it has shown that the measles, mumps, and rubella (MMR) vaccine is safe, highly effective, and critical to maintaining herd immunity. As physicians, we understand the consequences of falling rates of vaccination.

Recently, a federal judge issued a ruling reinforcing the importance of science-based public health protections, an important step toward safeguarding Americans, particularly children. As the American Medical Association (AMA) stated on March 16, 2026: "Today's ruling is an important step toward



BY ADRIANA
BONANSEA-FRANCES,
MD

protecting the health of Americans, particularly children. Vaccines are one of the safest and most effective tools in medicine, and strong, science-based immunization policies save lives."

The AMA is committed to maintaining access to vaccines, and it is not alone. The American Academy of Pediatrics, the CDC, and countless county and specialty societies stand unified in their support of routine childhood immunizations. This is not a matter of opinion, it is a matter of decades of rigorous scientific evidence and real-world outcomes.

In Miami-Dade County, we are fortunate to have a strong network of physicians committed to patient care and public health. But we must remain vigilant. Prevention is always more effective, and more humane, than treatment after the fact.

I urge my colleagues to continue having honest, evidence-based conversations with patients and families about vaccines. Address concerns with empathy, but stand firm in science. Our voices matter, and our recommendations carry weight.

I also invite physicians across Miami-Dade County to become more actively involved in advocacy through the Miami-Dade County Medical Association. Organized medicine plays a critical role in ensuring that public health policies remain grounded in evidence and that physicians have a seat at the table when decisions are made.

At a time when misinformation can spread as quickly as disease, unity within the medical community is essential. Together, we can protect our patients, uphold the integrity of science, and reaffirm our commitment to do no harm.

Measles is preventable. The question is not whether we have the tools, but whether we will use them.

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

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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.

Isn't it time your medical malpractice policy had a checkup?

Risk Strategies will perform a no-obligation comprehensive review of your current malpractice coverage. You need this because so few doctors and administrators have an in-depth knowledge of their coverage or insurer and may not be asking all the right questions. For instance, do you know the following about your coverage?

- Does your insurer fight cases or just settle?
- How strong is your insurer financially?
- How experienced is their claims-defense team in Florida courtrooms?
- Do you have a consent-to-settle clause, or can they settle against your will?

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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Cover Story: Turning Denials into Revenue: How AI and Outsourced Expertise Are Reshaping Healthcare Reimbursement

Continued from page 1

Revenue cycle management companies and healthcare-focused law firms are uniquely positioned to assist providers in addressing these challenges. While internal billing departments are highly effective at managing routine claims submission, payment posting, and follow-up activity, certain categories of accounts often require a deeper level of investigation, payer negotiation, and legal familiarity with reimbursement regulations.

These cases frequently involve aged complex denials, disputed medical necessity determinations, coordination of benefits errors, and out-of-network payment disputes that fall outside the scope of standard billing workflows. When these accounts remain unresolved for extended periods of time, they often migrate toward write-off status despite representing legitimate reimbursement owed to the provider.

Recent advancements in artificial intelligence are helping healthcare organizations identify these hidden revenue opportunities earlier and more efficiently than ever before. AI-powered analytics tools can rapidly review large volumes of claims data, denial codes, payer correspondence, and payment patterns to identify systemic issues that may otherwise go unnoticed. These systems are capable of flagging trends such as repeated authorization denials, coordination of benefits misclassifications, underpayments tied to specific payer policies, and aging claim inventories that are statistically likely to remain unpaid without targeted intervention.

Rather than relying solely on manual review processes, providers can now leverage AI to perform large-scale issue spotting across thousands of accounts simultaneously.

However, while artificial intelligence excels at identifying patterns and anomalies within complex datasets, technology alone does not resolve the underlying reimbursement disputes. Once potential recovery opportunities are identified, experienced revenue cycle professionals and healthcare attorneys play a critical role in converting those insights into actual revenue.

This is where the partnership between advanced analytics and specialized outsourcing teams becomes particularly valuable. Skilled RCM professionals are able to conduct detailed claim audits, communicate directly with payer representatives, and escalate disputes through formal appeal processes when necessary.

In parallel, healthcare attorneys with experience in reimbursement litigation and regulatory compliance can evaluate whether certain denials violate applicable statutes, contractual obligations, or administrative orders, and can pursue appropriate remedies when payers fail to comply with governing rules.

For many providers, this combination

of technology-driven analysis and specialized professional expertise can unlock significant value within aged or complex accounts receivable inventories. Healthcare organizations frequently discover that claims previously categorized as uncollectible can in fact be recovered by experienced professionals who focus exclusively on these types of disputes. By addressing systemic denial patterns and payer behaviors, these efforts can also help improve reimbursement outcomes on future claims, creating lasting operational benefits for the provider's revenue cycle.

Importantly, engaging outside revenue cycle support should not be viewed as an admission that a provider's internal business office is not up to par. On the contrary, healthcare finance teams today operate under extraordinary pressure as they balance regulatory compliance, staffing constraints, evolving payer policies, and the operational demands of patient billing.

Outsourced RCM partners and healthcare law firms are best understood as extensions of the provider's existing business office, offering specialized expertise and additional resources that allow internal teams to remain focused on core operational responsibilities, often on a contingent fee basis.

As payer policies continue to evolve and administrative complexity grows, the importance of strategic revenue cycle partnerships will only increase. Artificial intelligence is rapidly transforming the way providers identify reimbursement issues, but human expertise remains essential to transforming those insights into meaningful financial outcomes. By combining advanced analytics with experienced RCM professionals and healthcare attorneys, providers can create a powerful framework for identifying, pursuing, and recovering revenue that might otherwise be lost within the healthcare reimbursement system.

For hospitals, physician groups, rehabilitation facilities, and all healthcare providers facing growing denial inventories or complex reimbursement disputes, strategic outsourcing can serve as a practical and financially beneficial solution. Abril Law works closely with healthcare organizations and revenue cycle partners to identify underpaid and improperly denied claims, pursue payer accountability, and maximize reimbursement for the care providers deliver every day.

Healthcare organizations interested in learning more about how AI-driven issue spotting combined with experienced revenue cycle and legal support can improve financial outcomes are encouraged to contact Abril Law for additional information about healthcare revenue cycle outsourcing solutions.

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

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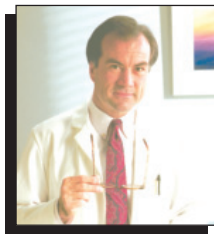


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Medicare Recoupment Letters: Response Steps and Pitfalls to Avoid

What is a Medicare Recoupment Letter?

When Medicare determines it has overpaid you or your practice, the Medicare Administrative Contractor (MAC) for your region will issue an overpayment demand or recoupment letter. This notice details the alleged overpayment amount, the stated basis for the determination, and your options—either to acknowledge and repay or to pursue an appeal.

If you believe you have grounds to challenge the determination, you have important choices to make, and timing matters. How you respond—and how quickly—can be critical to protecting your practice and preserving your appeal rights.

What are some reasons for overpayments?

Medicare may determine overpayments for several reasons, including:

- Incorrect coding
- Insufficient documentation
- Lack of medical necessity
- Processing and/or administrative errors

If I disagree with all or part of the overpayment determination, what are my options?

There are five levels of appeal for Medicare:

- Level 1 – Redetermination
- Level 2 – Reconsideration
- Level 3 – Administrative Law Judge (ALJ)
- Level 4 – Medicare Appeals Council (MAC)



BY JEN PREAS AND
JULIE TAITSMAN, MD, JD

• Level 5 – Federal Court

All levels have timely filing limits, and some have a minimum amount in controversy (AIC) threshold to qualify. Carefully review the appeal instructions in your overpayment letter to ensure you meet all criteria. You can file the appeal yourself or enlist the help of someone else – Medicare calls this helper an “authorized representative.” If an authorized representative is assisting you with your appeal be sure to complete and return the CMS Appointment of Representative Form (CMS 1696).

Pitfalls to avoid

Don’t ignore the letter. Inaction won’t make the letter go away, but it might cause you to miss out on some of your better options. Don’t delay planning your response when you receive an overpayment demand letter. Interest on your unpaid balance begins accruing on the 31st day following final determination of overpayment.

• Determine whether your overpayment determination should be appealed. A redetermination request must be submitted within 120 days of the date of the overpayment demand.

• Consider submitting a statement of rebuttal if you are not disputing the overpayment allegation, but you can prove the recoupment would result in financial harm to you or your practice. This is not the same as an appeal.

• Review Immediate Recoupment options if you do not believe an appeal is appropriate and you agree with the overpayment determination. Immediate recoupment may help you avoid paying interest on the overpayment debt. Use caution and judgment when selecting the appropriate Immediate Recoupment options:

• You may request Immediate Recoupment for the current overpayment demand, and all future overpayments identified OR

• You may request Immediate Recoupment as a one-time request for the overpayment identified in the demand letter you received. This would encompass the amount addressed in the demand letter.

What if I agree with the decision, but I can’t afford the recoupment or I need more time to pay?
What are my options?

If payment poses a substantial hardship, you may consider submitting a rebuttal. If you choose to submit a rebuttal, be aware that this is subject to evaluation by the Medicare Administrative Contractor (MAC) and this must be submitted within 15 calendar days from the date on the demand letter.

If you can make the repayment but need more than 30 days to do so, you may request an Extended Repayment Schedule (ERS). Follow the instructions in the overpayment demand letter to request an ERS.

How can BDO help?

A timely, strategic response to Medicare overpayment recoupment letters can help mitigate—or avoid—significant financial impact on your practice. BDO’s Healthcare Advisory professionals analyze overpayment determination rationales, Medicare policies, and applicable regulations to help you assess options and build an effective appeal strategy. We prepare comprehensive, well-supported appeal submissions designed to address the issues cited and help seek reversal of adverse decisions.

Jen Preas is Manager, Healthcare Forensics, BDO. Dr. Julie Taitsman is Managing Director, Forensics Healthcare, BDO

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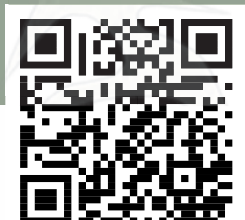
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Salute to Volunteers

BROWARD HEALTH MEDICAL CENTER

Cynthia Wheeler

Cynthia Wheeler spent more than 30 years as a public-school teacher working with special needs pre-K students. After retiring from Miami-Dade County Public Schools, she continued supporting children as an infant and toddler developmental specialist at Children's Diagnostic & Treatment Center for five years.

A widow with two grown sons, Wheeler found herself with extra time after fully retiring two years ago and decided to give back by volunteering at Broward Health Medical Center.

"There are so many needs in the community, so whatever you're passionate about, you can find a volunteer opportunity that's right for you," she said. One item on her personal bucket list was becoming part of the hospital's infant cuddler program. Today, Wheeler volunteers twice a week in the NICU, feeding babies, changing diapers and comforting them. On Wednesdays she also spends extra time in the pediatric oncology and hematology units, playing games, creating art or simply talking with young patients.



Lisa Goldberg

Since 2018, Lisa Goldberg has volunteered weekly in the gift shop at Broward Health Medical Center and, over the past year, at Broward Health Imperial Point. A former ICU and trauma nurse who later spent many years in education, Goldberg brings a lifetime of experience caring and nurturing others to her volunteer role. As the visual merchandiser, she designs warm, welcoming spaces that offer a moment of relief to patients, families and staff.

For Goldberg, the gift shop's purpose goes far beyond its shelves. "Sometimes the greatest things we give aren't items, but simple moments of connection or kindness," she said. Whether greeting a visitor or helping someone choose a small comfort item, she values every opportunity to make someone's day a little lighter. Goldberg encourages others to volunteer, noting compassion matters more than experience and calling her work with Broward Health a meaningful way to give back to her hometown.



BROWARD HEALTH NORTH

Mark Chibis

Mark Chibis likes to joke that he is a "professional volunteer." His work has taken him around the world responding to disasters, serving in war-torn regions and supporting anti-human trafficking efforts.

Chibis continues that mission locally as a volunteer at Broward Health North, where he has served for the past 15 years and where his wife once worked as a nurse. He often volunteers on the long-term care floor, supporting ventilated patients with neurological deficits, as well as in PACU surgical units and hospice.

"These are real people, not just patients or a number," he said.

Chibis is also involved in the hospital's organ procurement efforts, serving as a compassionate liaison for families during the emotional donation process. One of the most powerful moments is the Walk of Honor, a solemn procession from the ICU to the operating room that honors the gift of organ donation.

For Chibis, it is another opportunity to bring comfort, dignity and humanity to those facing profound loss.



Anne-Marie Rempala

Anne-Marie Rempala has been volunteering in the gift shop at Broward Health North every Thursday for the past three years. She calls it her family's hospital; her husband was treated there after a serious accident, she received care after suffering a heart attack at 45 and her son was also treated at the hospital as a child.

Rempala spent her career as a psychiatric nurse, beginning at Broward Health Imperial Point and later teaching nursing at Florida Atlantic University. After retiring, she was recruited into the volunteer role. While she wasn't quite ready to return to direct patient care, the gift shop offered a meaningful way to give back. Rempala said the role is about much more than ringing up gift shop purchases. "Some people just need to come in and browse, to be distracted for a little while. Others just need a word or two of kindness," she said.



BROWARD HEALTH IMPERIAL POINT

Genevieve Cordes

At 94, few people keep a schedule as busy as Gen Cordes. For the past 25 years, she has volunteered at Broward Health Imperial Point, bringing energy, compassion and a warm smile to every corner of the hospital.

After retiring as a business owner, Cordes moved from Atlanta to Fort Lauderdale to be closer to her daughter and soon discovered a new calling at the hospital.

She volunteers two days a week, primarily in the gift shop, but has supported nearly every department, including Same-Day Surgery, Ways & Means and Patient Services. Cordes also helps oversee Auxiliary efforts, attends hospital community events and organizes jewelry sales and vendor events that raise funds for the hospital.

"Volunteers can be advocates for the families of patients, too," she said. "Sometimes they just need a smile or a welcome distraction from their worries."

Her dedication embodies the heart of volunteerism at Broward Health Imperial Point.



Douglas Gorab

For more than a decade, Doug Gorab has volunteered at Broward Health Imperial Point, continuing a commitment he first shared with his late partner.

Now 82, Gorab helps lead the hospital's concierge program, a first-of-its-kind volunteer initiative in the main lobby designed to welcome patients and families the moment they walk through the door. He trains new volunteers and even created a custom hospital map and written guide.

"No one's happy to walk through those doors," he said, "so we smile at them first." Whether escorting a visitor, pushing a wheelchair or pointing someone in the right direction, Gorab brings warmth and purpose to every shift. A former United Airlines employee and Chicago real estate professional, Gorab found his way to volunteering after moving to Florida. He credits the work with keeping him sharp, active and connected. "It keeps you young," he said. "I leave tired, but it's a good tired."



BROWARD HEALTH CORAL SPRINGS

Norman Parks

At 86, Norman Parks still looks forward to reporting for duty three days a week as a volunteer at Broward Health Coral Springs. After retiring from Motorola 35 years ago, Parks stayed active as a Community Emergency Response Team volunteer, participated in ride-alongs with the Coral Springs Police Department and helped build the Sawgrass Nature Center. He proudly said his "new vocation" is volunteering.

Parks' connection to Broward Health began in 2015 when his wife suffered a stroke and was rushed to the hospital. Observing specialists from multiple departments work seamlessly to care for her left a lasting impression. "I told myself, I want to be part of this," he said.

Now Parks assists wherever needed, supporting staff and patients across the hospital. He also serves on the volunteer board as president and writes a monthly volunteer newsletter called "Notes from Norm."

"I have the best job in the hospital," he said. "Our main objective is helping other people."

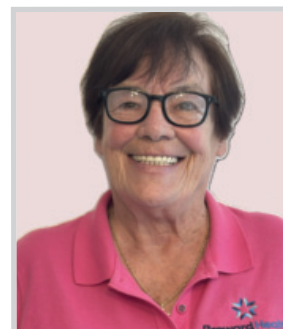


Gloria Rzeczycki

Gloria Rzeczycki has been a familiar face at Broward Health Coral Springs since 2020 when she started volunteering in the hospital's gift shop. Now 80, the Parkland resident handles all the buying, manages the staff and keeps day-to-day operations running smoothly, drawing on decades of retail experience. What began as a single volunteer shift has now turned into two or three days a week.

"It's a good job to have and not get paid," she said with a laugh. But her reason for volunteering runs deeper than the work. She is drawn to the families who wander in during hard moments. A friendly conversation, she said, makes them feel better and does the same for her.

Moving to Florida was an adjustment for Gloria, and volunteering gave her back a sense of belonging. "One of the wonderful things about volunteering is the friends that you make," she said, "it really enhances your life."



Salute to Volunteers

Cover Story: A Volunteer's Heart

Continued from page 1

It was a cause greater than himself and, in some ways, probably helped Chevon find something positive about having a heart that refused to let him live a normal life.

EMS Meets LVAD

Chevon became a familiar face at local fire stations, spending countless hours with EMS crews sharing experiences and educating them about the unique care LVAD users require. He'd bring his equipment and explain the controller, batteries and alarms, providing hard-earned knowledge on how to troubleshoot issues. Chevon demonstrated how to take a Doppler blood pressure and explained why traditional pulse checks can be challenging with LVAD patients. One of the most memorable parts of his training sessions was having first responders place him on a cardiac monitor. It was the first time many of them had seen what an EKG rhythm looks like in someone with an implanted pump.

Through his willingness to teach, Chevon helped build confidence and knowledge among EMS providers, who now have a much better understanding of the needs of LVAD patients that are likely to need their emergency service at some point in their lives.

Volunteer Karma?

LVADs aren't supposed to be semi-permanent in a patient's body, but with no other options, Chevon shouldered on with his equipment. February brought another stay at Memorial Regional Hospital, this time with an infection along the cable that connects the internal pump in his heart to the external controller outside his body.

The silver lining was being hospitalized increased Chevon's chances of receiving a donor heart, with med-

ical urgency part of the formula for determining who among the many patients that need receive the too few organs that are available.

Seven years after having the LVAD implanted, Chevon, a father of two whose kids had never known a healthy dad, received the news for which everyone on the transplant list prays. A replacement heart was available for him.

My friend, and favorite volunteer, would finally have the second chance at life he so richly deserved.

The Journey Continues

Chevon's surgery took place in early March and his recovery has been slow but steady. But what I'm left with in the wake of this life-changing outcome was the incredible selflessness he displayed teaching EMS crews how to save lives even while his own survival was in doubt.

For a longtime clinician like myself, it was a reminder that educating others is a legacy we can all leave. Chevon's dedication to helping others never skipped a beat, even while his original heart struggled to do the same.

Kim Brackney is a nurse and district EMS manager for pre-hospital services at Memorial Healthcare System. A former firefighter paramedic, she has more than two decades of clinical and emergency care experience that she brings to healthcare leadership and education.

To learn more about heart, kidney and pancreas transplants, visit [Memorial Transplant Institute](http://MemorialTransplantInstitute.org) online at www.mhs.net/services/transplant.

HOLY CROSS HEALTH

Sarah Ransdell

Since joining the Holy Cross Health Volunteer Program in the fall of 2021, Sarah Ransdell has brought exceptional energy, passion and efficiency to her role in the Wanda and Jim Moran, Jr. Emergency Department. Every day, she arrives with a warm smile and a positive attitude, immediately diving into her responsibilities of checking patient rooms, supporting patients and families, and assisting colleagues with comfort measures. With more than 1,600 hours of dedicated service, she has become an essential member of the ED team.

Ransdell not only volunteers several days a week, but also helps orient new volunteers, ensuring they feel welcomed, prepared and supported. Her enthusiasm extends far beyond her daily shifts. She plays an active role in colleague engagement and hospital wide celebrations, where her upbeat spirit brings joy and brightness to every event. In addition to her volunteer service,

Ransdell brings an extraordinary 40-year career in higher education, including 20 years at Nova Southeastern University. She currently serves at NSU's Dr. Kiran C. Patel College of Allopathic Medicine, continuing to inspire and shape future health care professionals.



START THE CONVERSATION National Healthcare Decisions Day

April 16

Hospitals and healthcare providers play a critical role in facilitating advanced care planning discussions, especially for patients at end of life when healthcare utilization often increases.

As a pioneer and national leader in hospice and palliative care, VITAS supports and advocates for advanced care planning to serve as an important reminder to begin or continue conversations about end-of-life wishes. While these discussions are critical for patients and families with advanced illness, everyone over 18 — regardless of health status — should document their preferences in an advanced directive.

VITAS offers tools and resources to support you.

Learn more at VITAS.com

VITAS Healthcare



Salute to Volunteers

More Than a Title: Board Members Volunteer Their Time to Support Joe DiMaggio Children's Hospital Foundation and Memorial Foundation

BY KELLEY MORRIS

When people think about hospital volunteers, they picture fundraising walks, patient companionship or a familiar face in a hospital lobby handing out directions. What's easy to miss is the work happening one floor up, in a conference room and around a table, where another kind of volunteer is putting in just as many hours.

The board members of Joe DiMaggio Children's Hospital Foundation and Memorial Foundation are doctors with full patient loads, executives with demanding careers and community leaders who already have more obligations than hours in a day, and yet they keep showing up, because Memorial Healthcare System matters to them. For many of them, it matters in the most personal way possible.

Joe DiMaggio Children's Hospital Foundation and Memorial Foundation exist to support care that goes beyond what hospitals can fund on their own. Together they underwrite programs across Memorial Healthcare System ranging from breast cancer diagnostic testing and emergency financial assistance to wigs and prostheses for cancer patients, rehabilitation technology for children and parent education classes for new families.

Beth-Ann Krinsky, who chairs the Foundations' board and is the national litigation



Kelley Morris



Beth-Ann Krinsky



Derek Thornhill



Dr. Atif Hussein



Dr. Ralph Levy



Dara Levan

chair and partner at Greenspoon Marder LLP, doesn't need to look far for her reason. Her son Harrison was treated at Joe DiMaggio Children's Hospital for childhood cancer and later came back to Memorial as an adult cardiac patient of Dr. Ralph Levy. Her family credits Memorial with saving Harrison's life — twice. The decisions she helps make about priorities and funding aren't abstract to her, they're personal.

Months after Derek Thornhill moved his family from California to South Florida in 2022, his five-year-old son Charlie was diagnosed with B-cell acute lymphoblastic leukemia. The treatment was grueling, but at Joe DiMaggio Children's Hospital the family found something alongside the medicine they hadn't expected. Child life specialists, a therapy dog named Freedom, birthday decorations that appeared in Charlie's room made health challenges manageable. "Everyone treated Charlie like he mattered," Thornhill said. "Not just as a patient, but as a person." Thornhill, an Executive Director at J.P. Morgan Private Bank, joined the Foundations' board in

2025. "If you're looking for a cause that will change lives," he said, "this is it."

Dr. Atif Hussein came to Memorial 25 years ago, recruited from Duke to help build a cancer program with just a handful of oncologists. He has supported its growth into Memorial Cancer Institute, now home to more than 70 physicians and a designation as a Cancer Center of Excellence, one of only a handful in Florida. As Medical Director and Program Director of the Hematology/Oncology Fellowship Program, he trains the next generation of oncologists. To him, philanthropy isn't optional, since a quarter to a third of what it takes to run modern cancer care must come from donors. "Philanthropy bridges the gap between what is possible and what is truly transformative for patients," he said.

Dr. Ralph Levy, chief of cardiology at Memorial, has spent seven years building the Memorial Cardiac and Vascular Institute into a program with 60 to 70 physicians and around 120,000 patient encounters a year. He joined the Foundations' board recently with a clear sense of what's at stake. The cardiology workforce is shrinking, more than 60 percent of U.S. counties have no cardiologist, and the patients aren't going away. "It's about investing strategically in capacity," he said, "so we can meet the needs of our community over the long term."

Dara Levan has been on the board of the Foundations for more than a decade, through three terms and three CEOs. When her first term ended, she spoke up immediately. She wasn't leaving. Since then, she has helped launch the Pink Angels, a group that helps breast cancer patients access wigs, therapy, acupuncture and survivorship support, and pushed for a meditation room inside the Memorial Hospital Chapel. Levan is also an award-winning author, a speech-language pathologist and the host of the "Every Soul Has a Story" podcast. "Patients aren't just numbers," she says. "They're people who are seen, heard and cared for. Everyone deserves to matter."

Board members often work quietly behind the scenes, in boardrooms and on evenings and weekends carved out of lives that are already full. But each of these individuals is at the table, and every one of them is all in.

Visit Memorial Foundation at mhs.net/give-back/memorial-foundation or Joe DiMaggio Children's Hospital Foundation at jdch.com/give-back to learn more about how to give back.

Kelley Morris is President of Joe DiMaggio Children's Hospital Foundation and Memorial Foundation.

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Reframing Hospice Timing in Advanced Cancer Care

A patient with metastatic cancer is admitted for the third time in two months. Symptoms are escalating. Treatment options are narrowing. The care team is doing everything possible, yet the patient spends more time in the hospital than at home.

Hospice is introduced in the final days.

This scenario is familiar across oncology. It is not the result of indifference or lack of skill. It reflects a pattern in how and when hospice enters the conversation for patients with advanced cancer.

A Timing Problem, Not a Care Problem

Hospice is often viewed as a last step, reserved for when disease-directed treatment has fully stopped. In practice, this leads to referrals in the final week of life, limiting what hospice can provide.

Earlier involvement changes that experience.

Hospice care focuses on:

- Expert management of pain and complex symptoms
- Care delivered wherever the patient calls home
- Support for families navigating difficult decisions

For patients with advanced cancer, these needs often emerge well before the final days.

Why Referrals Happen Late

Several factors contribute to delayed hospice involvement:

- Prognostic uncertainty: Cancer trajectories can be difficult to predict
- Clinical momentum: Each additional line of therapy can feel like the next right step
- Perception challenges: Hospice is still equated with giving up rather than shifting focus
- Patient and family expectations: Hope is often tied to continued treatment

These are real and understandable pressures. They are also why hospice discussions benefit from starting earlier, before decisions become urgent.

Hospice as a Continuation of Care

Hospice is not about stopping care. It is about aligning care with a patient's goals as illness progresses.

In advanced cancer, that often means:

- Prioritizing time at home over time in the hospital
- Managing symptoms proactively rather than reactively
- Supporting emotional and spiritual needs alongside medical care

When hospice is introduced earlier, patients and families have time to understand the services, build trust with the care team and make informed decisions without crisis driving the timeline.



BY ILEANA LEYVA,
MD, FAAHPM

Practical Triggers for Hospice Conversations

Clinicians do not need to wait for a final turning point. Certain clinical patterns can serve as cues to begin the discussion:

- Disease progression after multiple lines of therapy
- Increasing hospitalizations or emergency department visits
- Declining functional status or weight loss
- Symptoms that are difficult to control in the outpatient setting

These moments create an opportunity to reframe the conversation.

Language matters. A simple shift can help:

- "We are at a point where focusing on comfort may help you spend more time at home."
 - "I want to make sure your care matches what matters most to you."
- This approach preserves trust while expanding the plan of care.

The South Florida Perspective

South Florida's patient population is diverse, with a wide range of cultural beliefs about serious illness and end-of-life care. Many families prefer to stay closely involved in decision-making. Others may equate hospice with stopping treatment entirely.

Early, clear communication is essential. When hospice is presented as an added layer of support rather than a last resort, it becomes easier for patients and families to consider.

In a region with high healthcare utilization near the end of life, earlier hospice involvement can also reduce avoidable hospital stays and improve the overall patient experience.

Aligning Care With What Matters

Oncology has made meaningful advances in extending life. At the same time, there comes a point in advanced cancer when the focus naturally shifts.

Hospice supports that transition. It allows clinicians to continue caring for their patients in a different, but no less important, way.

Earlier referrals do not take away options. They expand them.

Learn more about how hospice supports patients with advanced cancer and refer patients to VITAS by calling (800) 938-7827 or visiting [VITAS.com/Refer](https://www.vitas.com/Refer), available anytime 24/7/365. Download the VITAS mobile app for seamless, one-touch referrals by patient facesheet.

Dr. Ileana Leyva is the regional medical director for VITAS® Healthcare in South Florida, overseeing interdisciplinary hospice and palliative care at the nation's leading provider. Learn more about end-of-life care at [VITAS.com](https://www.vitas.com).

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Autism... Autism... Autism...

Setting the Standard: Autism-Friendly Care at UHealth Jackson Urgent Care

BY RUELLE CHAMPION

Going to an urgent care center can be a stressful experience. For people with autism and families of children on the autism spectrum, that stress can be amplified. It's why all six UHealth Jackson Urgent Care centers are designated as autism-friendly. "Every patient on the autism spectrum is different," said Rohit Chugh, M.D., medical director of UHealth Jackson Urgent Care. "That's why it's so important that our teams are comprehensively trained and prepared to meet each patient where they are."

Doctors, nurses, and staff at each center are all specially trained to care for autistic adults and children. UHealth Jackson Urgent Care locations throughout Miami-Dade County also offer safe, calm, and sensory-friendly environments for patients. These separate rooms have bean bag chairs, light dimming capabilities, and options to play soft music to keep a relaxed space.

"We have devices that can project calming lights on the ceiling to help keep patients comfortable while they're here," Dr. Chugh said.

The traditional approach to health care is also modified for autistic patients. Staff learn to recognize autism as a spectrum and adapt their communication style accordingly. Sometimes that means asking a caretaker all of the medical questions, and other times it means speaking directly with the patient.

"We train our staff every step of the way, from the front desk to the clinical team, so they know how to communicate and interact in ways that help patients on the spectrum feel at ease," Dr. Chugh added.

Every step of the patient's journey matters, and that includes the moments of checking in, waiting, and going home. Autistic patients are offered sensory kits as a way to relieve and regulate stress during their urgent care visit. Kits include a puzzle



Sensory Room



Fidget Spinner

piece stress ball, a fidget spinner, and a squishy gel pad. Patients and parents can also bring their own comfort items.

"When parents bring their child in, you can almost see the sigh of relief," Dr. Chugh said. "They realize they're in a place that can cater to their child and provide thoughtful care."

With the right tools and high-quality treatment, taking an autistic patient to an urgent care center can be manageable and stress-free for everyone. The autism-friendly designation recognizes UHealth Jackson Urgent Care's commitment to providing care to a diverse community.

"We want families to know that if someone with autism spectrum disorder needs medical care, they're welcome here," Dr. Chugh said.

To learn more about our UHealth Jackson Urgent Care centers or to make an appointment, visit JacksonUrgentCare.com.

Holy Cross Health is Leading the Way in Sensory Inclusive Health Care

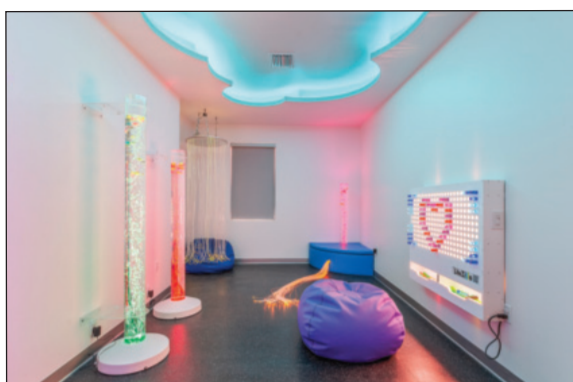
BY LISA S. TAORMINA, MOT, OTR/L

Last June, the Holy Cross Health Family Health Center opened in Oakland Park, becoming the only health care facility in Northeast Broward County to provide pediatric occupational therapy, physical therapy and speech language therapy under one roof. The Pediatric Therapy Clinic serves pediatric patients of all developmental stages from birth to age 21. It features a sensory gym and low stimulation room for those who experience sensory processing difficulties, including individuals on the autism spectrum. These differences can impact how children process visual cues, bright lights, sounds, smells, tastes and textures. Their vestibular (balance), proprioception (body awareness) and interoception (internal bodily states) can also be affected.

Through a thorough evaluation process, we customize an individualized treatment plan for each of our patients. We help children navigate their world with confidence by integrating sensory activities during therapy that promote efficient processing, teaching practical strategies for home, school and community, and provide self-regulation tools to help children understand and advocate for their own needs.

Play is central to our therapy. Our sensory gym includes a range of equipment, including a tactile caterpillar, tunnel, wooden slide, variety of swings, rock wall, scooters and pressure-sensitive floor panels, all designed to provide sensory input while helping children develop movement, strength, coordination and body awareness. Meanwhile, the low stimulation room features ambient lighting, calming bubble tubes, bean bag chairs, a soft rocking chair, a Lite-Brite, and touchable fiberoptic lights that glow and change color. These tools help children stay calm and regulate their sensory systems, so they feel safe, focused and ready to engage in learning.

In the short time since our clinic has been open, we have been privileged to witness remarkable progress in the children we serve. Our very first patient is one of our greatest success stories. He was struggling to cope with overwhelming sensory experiences at home and school. His frustration sometimes led to non-compliant behaviors including hitting and pushing his peers, which made daily routines and classroom participation difficult. The sensory equipment in our gym helped soothe him, and he learned self-regulation techniques to recognize and control his feelings. With the involvement of his parents and teachers, he applied these lessons at home and school. After a few months, his progress was remarkable, and he recently received an award for outstanding behavior at school. This is a testament to what thoughtful, sen-



Low Stimulation Room



Sensory Gym

sory-informed intervention and consistent support can achieve.

We invite educators and health care providers to tour our specialized sensory gym and low-stimulation space. Facility tours offer caregivers and professionals a chance to see our programs in action and understand how they work. Beyond the tour, we offer guidance on adapting environments to support children with sensory processing difficulties. We also help caregivers recognize behaviors that may signal sensory challenges, such as meltdowns in crowded or noisy spaces, aversions to certain textures in food and clothing, covering ears in response to sounds that are barely noticeable to others, difficulty focusing in busy environments and constant motion such as spinning, jumping and crashing into objects.

Understanding the sensory basis of these behaviors allows us to create strategies and environments that truly guide children and help them thrive. Progress is most meaningful when professionals, families and schools collaborate to meet each child's unique sensory needs. Every child deserves to feel understood and empowered so they can build confidence, grow and flourish in their everyday lives. At Holy Cross Health, we are proud to partner with children and families every step of the way.

The Holy Cross Health Family Health Center is located on the first floor of the Holy Cross Medical Plaza at 5601 N. Dixie Hwy. in Oakland Park and can be reached at (954) 542-2840. To learn more, visit holy-cross.com/services/rehabilitation-and-therapy/outpatient-rehabilitation/holy-cross-pediatric-therapy.

Lisa Taormina is a Pediatric Occupational Therapist at Holy Cross Health.

Cover Story: Broward Health and Nicklaus Children's Expand Pediatric Care Access Across Broward County

Continued from page 1

Broward Health President and CEO Shane Strum says the decision to partner was driven by both vision and practicality.

"Broward Health has historically had a small pediatric hospital within our larger hospitals – Broward Health Medical Center in Fort Lauderdale and Broward Health Coral Springs," Strum says. "As the first children's unit in Broward County, we have always had a heart for our youngest patients. But we also had a vision to grow several floors of pediatric space into a free-standing hospital with specialties."

However, building that level of specialty care independently would take years. Instead, Strum says the organization chose collaboration.

"Rather than move forward independently, we chose to do what many other highly successful programs have done – collaborate," he says. "There was no need to replicate the successes of Nicklaus Children's Health System. Instead, we elected to imagine what could be possible if we built something together."

Matthew A. Love, president and CEO of Nicklaus Children's Health System, says the partnership is rooted in a shared mission to serve children and families more effectively.

"As Broward County continues to experience growth, so does the need for greater access to specialized pediatric services," Love says. "This affiliation was formed to address that need by bringing nationally recognized pediatric expertise directly to the community in the form of pediatric inpatient, infusion services, and pediatric ER services."

Keeping Care Close to Home

One of the primary goals of the affiliation is to reduce the number of children who must travel outside Broward County for care. According to Love, that number has been significant.

"Approximately 900 children have had to seek care outside of the county due to access issues each year," he says. "More than half of those patients were treated at Nicklaus Children's Hospital in Miami."

By integrating Nicklaus Children's services into Broward Health facilities while

expanding outpatient locations throughout the county, the collaboration aims to change that dynamic.

"Keeping children in their communities for care is the central goal of this collaboration," Love says. "By bringing Nicklaus Children's inpatient, pediatric subspecialists, and clinical programs to Broward County we hope to minimize the impact that families have experienced when there have been access issues."

Strum adds that the effort is part of a broader, long-term vision.

"With Nicklaus Children's presence, we are bringing care to the patients who sometimes need to travel out of county or state for care," he says. "This expansion is a long-term plan to evolve healthcare access and change the pediatric landscape."

Complementary Strengths, Expanded Capabilities

The affiliation leverages the strengths of both organizations. Broward Health brings a deep-rooted presence in the community, while Nicklaus Children's contributes decades of pediatric specialization and experience managing complex cases.

"At the heart of both our organizations is our role as safety net health systems," Strum says. "We are here to provide care to all patients, regardless of ability to pay."

He notes that Broward Health's footprint across the county provides a strong foundation for growth.

"Broward Health's longstanding commitment to the community and physical footprint across the county provide the perfect gateway for Nicklaus Children's extensive specialty care to grow organically in the region," Strum says.

Love emphasizes the practical benefits for families.

"The strength of our two organizations together on the Fort Lauderdale and Coral Springs campuses of Broward Health not only provide greater convenience for families, but also comprehensive clinical excellence," he says.

A Seamless Transition

Behind the scenes, both organizations spent more than a year planning the tran-

sition, which involves approximately 450 Broward Health employees moving into the Nicklaus Children's network.

"As a result, on March 1, we transitioned all pediatric clinical operations to Nicklaus Children's with no interruption of patient care and tremendous staff support," Strum says. "There's no way to express the pride we all felt in that successful transition."

Love echoes that sentiment, noting the scale and coordination required.

"Cross-functional workgroups from both organizations have spent the past year working closely to integrate technology and clinical best practices," he says. "We are proud to say the transition was successful with no significant issues or concerns."

Expanding Specialty Services

A key component of the collaboration is the expansion of pediatric subspecialties, including neurology, orthopedics, endocrinology, and gastroenterology. These areas are prioritized based on community needs and access challenges.

"Our service line prioritization with Nicklaus Children's is complex but grounded in data to ensure specialty care growth is strategic and addressing real needs," Strum says.

Love adds that long wait times and high demand drive the decision-making.

"Families should not have to wait months for an appointment," he says. "Our goal is to bring wait times down by increasing access to care in Broward County."

The expansion also focuses on coordinated care for chronic conditions and access to multidisciplinary teams, helping ensure that children with complex needs receive comprehensive treatment locally.

A Vision for the Future

Looking ahead, both leaders envision a transformed pediatric care ecosystem in Broward County—one that is more accessible, integrated, and responsive to community needs.

"Success means more specialized care with more access points and more physi-

cian availability...meaning every child in Broward County will have convenient access to the most advanced pediatric care within minutes of home," Strum says.

He also sees the affiliation as a foundation for something even larger.

"The long-term goal is to create a pediatric health network that includes many other partners in the region to further broaden children's healthcare," he says.

For Love, success is measured in both access and experience.

"Success would be that no child must wait for the care they need, regardless of how complex that care might be, and that no child must travel long distances to get that care," he says. "When a child must travel for care it affects the entire family."

Keeping Families at the Center

While infrastructure and clinical capabilities are critical, both organizations emphasize that the patient and family experience remains central to the collaboration.

"Patients are always at the center of everything we do, and that's even more true in the pediatric space," Strum says.

"Quite literally every decision we are making with Nicklaus is with Broward County families in mind."

Nicklaus Children's reinforces that focus through initiatives such as its Family Advisory Council, which provides direct input from parents and caregivers.

"We believe the Family Advisory Council is our best and first line of ensuring that what we are doing is what is best for our patients and their families," Love says.

As the affiliation continues to evolve, Broward Health and Nicklaus Children's are positioning themselves to deliver not only expanded clinical services, but also a more connected, compassionate experience for families—one that keeps care close to home and centered on the needs of children.

For more information, visit BrowardHealth.org/Nicklaus.

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A message from our President

Training Hospital Leaders for Chaos: Educating Healthcare Executives for a New Era of Complexity

The operating environment facing hospitals in 2026 makes one reality unmistakable: the next generation of healthcare leaders must be trained for complexity, not stability. With hospitals accounting for 31% of U.S. health spending and employing nearly half of the healthcare workforce, leadership decisions now sit at the intersection of economics, policy, clinical care, and consumer expectations. Traditional administrative training models are no longer sufficient.

Future hospital leaders must be educated through a multidisciplinary lens. Finance and operations remain foundational, but curricula must expand to include macroeconomics, capital markets, and geopolitical risk. Events such as the war in Iran and Federal Reserve concerns about economic instability demonstrate how external forces can directly impact hospital costs, labor markets, and access to capital. Leaders must be well versed in scenario planning and risk mit-



Jaime Caldwell

igation, not just budgeting.

Equally critical is fluency in regulatory and policy dynamics. Increasing scrutiny from the FTC and Congress on consolidation, pricing, and competition requires leaders who understand antitrust frameworks, compliance risk, and public accountability. The era of passive governance is over; executives and boards alike must be trained to interpret policy signals and respond proactively.

Clinical transformation and care delivery innovation must also be central to leadership development. The shift from inpatient to outpatient care, the rise of chronic disease management, and the integration of AI-enabled technologies demand leaders who can align clinical models with finan-

cial sustainability. This includes rethinking physician alignment, compensation structures, and team-based care.

Finally, tomorrow's leaders must be deeply grounded in consumerism and affordability. Public concern over healthcare costs is intensifying, and hospitals are increasingly viewed through the lens of value. Leaders must be trained to balance mission, margin, and market expectations while improving transparency and community trust.

In this era of "March Madness" for hospitals, leadership is no longer a linear career path—it is a continuous, adaptive discipline and education is key.

Around the Region... Around the Region... Around the Region...

Leonard Petrucelli, PhD, Joins Miller School of Medicine as Founding Director of the Neuroscience Institute

The University of Miami Miller School of Medicine has appointed internationally renowned neuroscientist Leonard Petrucelli, Ph.D., as the founding director of its newly established Neuroscience Institute. Dr. Petrucelli, who also joins the Department of Neurology as a professor, brings with him a distinguished record of scientific discovery and an unwavering commitment to advancing the understanding and treatment of neurodegenerative diseases.

Most recently the Chair of Neuroscience at Mayo Clinic in Florida, Dr. Petrucelli has focused his career on deciphering the molecular mechanisms underpinning Alzheimer's disease, frontotemporal dementia (FTD), and amyotrophic lateral sclerosis (ALS) – work that has uncovered novel biomarkers and therapeutic targets instrumental to shaping the future of treatment development.

Dr. Petrucelli's appointment represents a meaningful homecoming. He began his academic journey in Miami, FL, earning a Bachelor of Science degree from Barry University and later completed his Ph.D. in molecular and cellular biochemistry at Loyola University and the Stritch School of Medicine in Chicago. Over the course of his distinguished career, Dr. Petrucelli has secured an impressive portfolio of foundation and National Institutes of Health funding, including a prestigious R35 Outstanding Investigator Award and leadership of the ALLFTD2 (Advancing Research and Treatment for Frontotemporal Lobar Degeneration) initiative, underscoring the national impact and sustained support of his research program.



Dr. Leonard Petrucelli

Baptist Health Announces Key Leadership Appointments Across Several South Florida Hospitals

Baptist Health has announced several leadership appointments that will support continued growth and operational excellence across the health system's network.

Carlos Hernandez has been named chief executive officer of Baptist Health Doctors Hospital. He will also serve as executive leader for Baptist Health Orthopedics. Hernandez most recently served as vice president and chief operating officer for Baptist Health Doctors Hospital and Baptist Health West Kendall Baptist Hospital.

Nathaniel Ortiz has been named chief executive officer of Baptist Health West Kendall Baptist Hospital. Ortiz currently serves as chief operating officer at Baptist Health Baptist Hospital and has extensive experience leading complex clinical operations, strategic growth initiatives and large-scale capital projects.

Drew Grossman will serve as CEO Advisor for Baptist Health Sunrise Hospital, helping guide the hospital's operational framework as construction progresses. Groundbreaking for Sunrise Hospital recently took place, and the facility is scheduled to open in early 2029. Grossman will continue in his current role as chief executive officer for Baptist Health Fishermen's Community Hospital and Baptist Health Mariners Hospital in the Florida Keys while taking on this additional responsibility.

Raymond Perez has been named executive director of the new Baptist Health Rehabilitation Hospital, opening August 2026 in South, Miami, FL. Ray brings more than 15 years of leadership in inpatient and post-acute rehabilitation, most recently serving as administrative director of rehabilitation services at Baptist Health Homestead Hospital



Carlos Hernandez



Nathaniel Ortiz



Drew Grossman



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Kyaw Aung, MBBS, PhD, Joins Baptist Health Miami Cancer Institute

Medical oncologist Kyaw Aung, M.B.B.S., Ph.D., has joined Baptist Health Miami Cancer Institute. He specializes in gastrointestinal cancers, particularly pancreatic cancer.

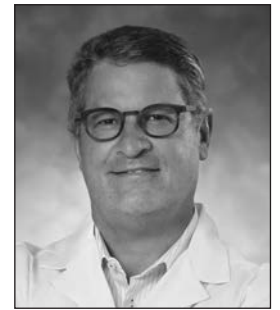
Prior to joining Baptist Health, Dr. Aung was an assistant professor of oncology at Dell Medical School at the University of Texas at Austin and a gastrointestinal medical oncologist UT Health Austin's Livestrong Cancer Institutes.

Dr. Aung earned his medical degree at the University of Medicine 1 in Yangon, Myanmar and his doctorate degree in circulating tumor DNA at the University of Manchester in the United Kingdom. He completed an internal medicine residency at Lincoln County Hospital and a medical oncology fellowship at Clatterbridge Cancer Center NHS Foundation Trust, located in the United Kingdom. His clinical training also includes a fellowship in Phase I Oncology Drug Development and Gastrointestinal Cancers at Princess Margaret Cancer Center in Toronto, Canada.



Dr. Kyaw Aung

HCA Florida JFK Hospital Welcomes Renowned Cardiothoracic Surgeon Cristian Baeza, MD, as Medical Director of the Heart and Vascular Institute



Dr. Cristian Baeza

HCA Florida JFK Hospital is proud to announce that Cristian Baeza, M.D., a nationally and internationally recognized cardiothoracic surgeon and leading expert in complex aortic disease, has joined the hospital's medical staff and has been appointed Medical Director of the Heart & Vascular Institute.

Dr. Baeza is a highly accomplished aortic surgeon with advanced expertise in both open and endovascular techniques, specializing in complex aortic root procedures including Bentall procedures, David valve-sparing repairs, and Ross operations, as well as coronary artery bypass surgery, minimally invasive valve procedures, thoracoabdominal aneurysm repair, and structural heart interventions.

Originally from Chile, Dr. Baeza earned his medical degree from the University of Chile and completed residencies in general surgery and cardiovascular surgery before pursuing advanced cardiothoracic surgery fellowship training at the Cleveland Clinic, one of the world's leading cardiac programs. Most recently, he served as Co-Director of the Aortic Center at University Hospitals Harrington Heart and Vascular Institute in Cleveland, where he led surgical innovation and clinical excellence, including performing the first complete endovascular Bentall procedure at University Hospitals and in the state of Ohio.

Zack Z. Ramilevich, MD, Joins Marcus Neuroscience Institute as General Neurologist



Dr. Zack Z. Ramilevich

Board-certified neurologist Zack Z. Ramilevich, M.D., has joined Marcus Neuroscience Institute, part of Baptist Health, as a general neurologist.

Dr. Ramilevich earned his medical degree from the Charles E. Schmidt College of Medicine at Florida Atlantic University in Boca Raton. He completed an internal medicine internship followed by a neurology residency at the University of Florida in Jacksonville, where he was selected to serve as administrative chief resident. During his training, he presented educational lectures to residents and attending physicians on topics including stroke prevention in atrial fibrillation, emerging therapies for Alzheimer's disease and new treatments for migraine.

Dr. Jose R. Soler and Dr. Craig Hostig Join Baptist Health Heart & Vascular Care



Dr. Jose R. Soler



Dr. Craig Hostig

Board-certified cardiologists Jose R. Soler, M.D., FACC, and Craig Hostig, M.D., have joined Baptist Health Miami Cardiac & Vascular Institute, part of Baptist Health Heart & Vascular Care.

Dr. Soler earned his medical degree from Rutgers Medical School, formerly the University of Medicine and Dentistry of New Jersey, after graduating magna cum laude from Rutgers University with a bachelor's degree in chemistry and psychology. He completed his residency in internal medicine at Overlook Hospital, an affiliate of Columbia University College of Physicians and Surgeons, followed by fellowships in cardiovascular disease and interventional cardiology at The Medical College of Pennsylvania.

Dr. Hostig earned his medical degree from the University of Maryland School of Medicine in Baltimore and completed his internship, residency and fellowship training through Weill Cornell Medicine affiliated institutions, including North Shore University Hospital and Memorial Sloan Kettering Cancer Center in New York. He completed a fellowship in cardiovascular diseases at North Shore University Hospital, where he also held academic appointments with Cornell University Medical College.

Sarasota Neurosurgeons Join SMH's First Physicians Group



Sarasota Memorial Health Care System is pleased to announce that Sarasota-based Neurosurgery and Spine Specialists has joined the health system's First Physicians Group (FPG) network.

With more than 30 years of expertise in neurological surgery of the brain, spine, peripheral nerves and surrounding structures, the Neurosurgery and Spine Specialists team has transitioned the practice to FPG. The practice will now operate as First Physicians Group Neurosurgery and Spine Specialists.

The practice's longtime Sarasota neurosurgeons Robert Knego, M.D.; Peter Mayer, M.D.; Kenneth Vives, M.D.; Ryan Glasser, M.D.; and Andrew Fine, M.D. – as well as their clinical team and practice staff – will be part of the transition.



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

VITAS Healthcare Opens Office in Cape Coral to Meet Growing Demand for Hospice Care



Cape Coral continues to rank among the fastest-growing cities in the United States, and its expanding population of older adults highlights a growing need across Southwest Florida for accessible, compassionate end-of-life care. To help meet this need, VITAS Healthcare has opened a new administrative office in Cape Coral. The additional location means patients and families throughout Lee County can more easily access high-quality hospice care and meaningful support wherever they call home.

Hospice care is primarily provided in private residences, assisted living communities and nursing homes. The new Cape Coral location provides VITAS interdisciplinary hospice teams with a centralized office that improves coordination, supports faster response times and enhances access to care across the region.

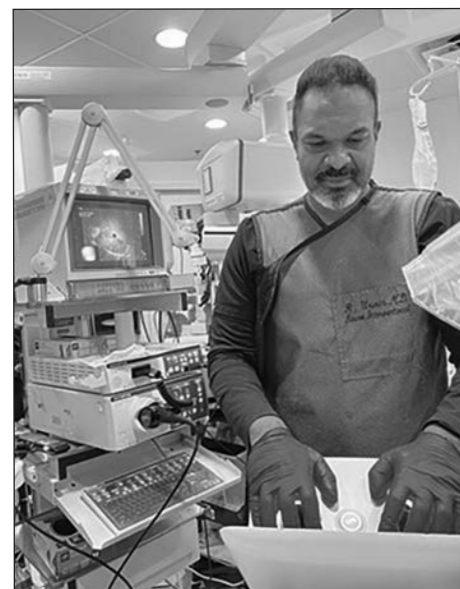
Broward Health Medical Center Acquires State-of-the-Art Ion Robotic-Assisted Navigational Bronchoscopy

Broward Health Medical Center announced the acquisition of the Ion™ Endoluminal System. This state-of-the-art robotic-assisted navigational bronchoscopy platform enhances the early detection and treatment of lung cancer. With this advanced robotic platform, Broward Health Medical Center is now the first hospital in Broward County to offer both interventional pulmonology and thoracic surgery services in a single location, bringing comprehensive lung cancer care closer to home for our community.

Ion provides physicians with a highly precise, minimally invasive approach to diagnosing lung nodules that are small, deep or difficult to reach using traditional methods. The system creates a three-dimensional, GPS-like map of the lungs, allowing pulmonologists to navigate complex airways with exceptional stability and accuracy.

"When lung nodules are identified early, we can intervene sooner and often before cancer spreads," said Sajive Aleyas, M.D., a pulmonary critical care surgeon with the Broward Health Physician Group. "Ion allows us to move quickly from detection to diagnosis, and in many cases, directly to treatment."

If a lung nodule is detected during the procedure, a biopsy can be analyzed immediately in collaboration with the pathology team. When cancer is confirmed, patients may proceed to surgical removal in partnership with an in-house thoracic surgeon, often while still sedated. In some cases, patients learn in recovery that the cancer has already been removed and can move directly to the recovery phase of care.



**Dr. Sajive Aleyas performs BHMC's first
case using the Ion Endoluminal System.**

Baptist Health Hosts Ribbon-Cutting Ceremony for New Urgent Care & Diagnostic Imaging Location in South Miami

Baptist Health recently hosted a ribbon-cutting ceremony to celebrate the opening of Baptist Health Urgent Care & Diagnostic Imaging in South Miami. Located less than 2 miles south of its previous site in University Center, the new location expands available services while remaining conveniently close for both existing and new patients.

Focused on improving access and efficiency, the facility offers fast check-in through the Baptist Health PineApp, on-site labs, meds to go with Rx Now and comprehensive imaging, including X-rays and CT scans.

"This new location allows us to continue caring for our patients while providing convenience in a new, modern facility with enhanced services," said Nancy-Batista-Rodriguez, CEO of Baptist Outpatient Services. "By relocating the urgent care less than 2 miles down the road, we're ensuring continuity of care while improving the overall patient experience."



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

Miami-Dade and Broward County Medical Associations Announce Winners of Medical Students and Residents Research Competition



The Research Competition finalists

The Miami-Dade County Medical Association (MDCMA) and the Broward County Medical Association (BCMA) proudly announced the winners of the 7th Annual Medical Students and Residents Research Competition. The annual event recognized the outstanding research contributions of medical students, residents, and research fellows across Miami-Dade and Broward Counties.

The competition showcased 15 innovative research presentations reflecting a strong commitment to advancing medical knowledge, improving patient outcomes, and strengthening the future of healthcare in South Florida. Physician leaders from both counties served as judges, evaluating participants on scientific rigor, originality, presentation quality, and clinical relevance.

Medical Students

First Place: Hope Cherian

"A Preliminary Analysis of Standalone and Adjunctive Middle Meningeal Artery Embolization for the Treatment of Very Large Subdural Hematomas." Florida

International University Herbert Wertheim College of Medicine. Miami Neuroscience Institute, Baptist Health South Florida.

Second Place: Evelyn Echevarria Cruz

"Preclinical Analysis of the Therapeutic Potential of Resveratrol in Parkinson's Disease." Nova Southeastern University Dr. Kiran C. Patel College of Osteopathic Medicine.

Honorable Mention: Annabel Ricci

"Preventing Intravenous Administration Errors of Epinephrine in the Emergency Department: A Root Cause Analysis (RCA) and Plan-Do-Study-Act (PDSA) Approach." St. George's University, Grenada, West Indies. Keralty Hospital Miami.

Honorable Mention: Hunter Moran

"Socioeconomic analysis of pediatric onset inflammatory bowel disease at age 30: A population-based matched cohort

study of patients and their siblings." Florida International University Herbert Wertheim College of Medicine.

Residents and Research Fellows First Place: Carol Williams, M.D.

"To Increase PrEP Screening at Federally Qualified Health Center Doris Ison of Community Health of South Florida (CHI), Inc." Community Health of South Florida, Inc. (CHI).

Second Place: Kevin Pina, M.D.

"Recurrent Metformin-Associated Lactic Acidosis on a Patient with End-Stage Renal Disease: Fatal Case Despite Biochemical Improvement." Keralty Hospital and Keralty Research Center.



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VITAS Healthcare Inpatient Hospice Care at Oak Manor



Residents in Pinellas County now have improved access to high-quality, compassionate end-of-life care with the opening of VITAS Healthcare inpatient hospice care at Oak Manor in Largo. As the first VITAS inpatient center in the region, the facility strengthens the continuum of care for people facing terminal illness by providing around-the-clock clinical support in a comfortable, supportive environment.

The center features 12 private patient rooms designed to offer comfort, dignity and support for patients and families. Individuals living at Oak Manor or anywhere in Pinellas County can now benefit from expert symptom management and clinical oversight without traveling far from home.

The facility, located at 3500 Oak Manor Lane in Largo, is expected to care for more than 400 patients and their families each year.

Designed to provide 24/7 clinical care and high-acuity support, the VITAS inpatient center offers compassionate extubation services, physician-led plans of care, pain and medication management, psychosocial support, bariatric beds, handicap-accessible rooms and specialized equipment to enhance comfort and safety. Two landscaped courtyards offer peaceful outdoor spaces for reflection and time together.

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Cover Story: Louis and Anne Green Memory and Wellness Center Partners with Baptist Health on GUIDE Model

Continued from page 1

NP-BC, interim director, Louis and Anne Green Memory and Wellness Center, Christine E. Lynn College of Nursing, Florida Atlantic University. "It's a natural fit between our two agencies."

As a result of the partnership, Dr. Brumley said that families will find it easier to navigate care. "A lot of families have trouble navigating the healthcare system as it is, and the dementia aspect makes it especially difficult as patients aren't able to participate in their own care; it all falls on the care partner," she said. "As one of Baptist's community partners, they can trust that our services are well-vetted and know the quality of care that they'll be receiving."

Reaching Out for Resources

While some care partners may be wary about utilizing an adult day care program or other dementia-related resources, GUIDE respite care dollars make it easier to take that first step.

"Many people may not know what services are available to them, but once they see what tremendous benefits these programs offer, they often want to do more," said Dr. Brumley, noting that participants in the Adult Day Care program not only enjoy the experience, but also show better behavior at home as they have been kept engaged throughout the day.

"They aren't sitting in front of a TV, isolated in the home," said Dr. Brumley. "Their care partners report that after day care, these individuals are more lively, engaged, calmer and happier."

The Adult Day Care program is designed to stimulate participants cognitively, physically and socially in a safe environment. Activities include reminiscence therapy, exercises for hand-eye coordination, painting classes, chair aerobics, chair dancing, live music, drumming, guest lecturers and more.

In addition to structured activities every day and every hour, special events include bringing miniature ponies into the courtyard, therapy dogs once a month, and robotic, interactive cats that purr as part of the animal therapy program.

"We work to enhance cognitive stimulation, meeting each person where they are and engaging the skills that they have through activities like folding laundry, working with tool sets, doing sorting exercises and more," said Dr. Brumley. "These activities help to stimulate the brain while they are enjoying themselves."

She notes that families have been able to postpone moving their loved ones into long-term care by using daycare services, enabling them to age in place safely and avoiding the high costs of assisted living and associated health issues.

While the pilot program is scheduled



to run for eight years, participants can continue to access MWC's programs after their allotted funds run out through private pay or through scholarships supported by the Caring Heart Auxiliary, the Boca Raton Regional Hospital Foundation, and other generous community donors. MWC also has an array of no-cost services, including in-person and virtual care partner support programming and educational programs.

"We see this collaboration as an opportunity for local families to learn about our adult day care scholarships," said Dr. Brumley. "For eligible participants, these scholarships mean they can continue to receive the services beyond the period covered by GUIDE respite funding."

"As part of the Christine E. Lynn College of Nursing, the Louis and Anne Green Memory and Wellness Center plays a vital role in advancing compassionate, person-centered care," said

Dean Cameron Duncan, Ph.D., DNP, APRN, FNP-C, PMHNP-BC, CNE, FAANP. "We are excited to see the center's involvement in the GUIDE model expand access to critical services that support individuals with dementia, their care partners and families across our community."

Those interested in MWC's programs or the GUIDE program are welcome to contact MWC for a tour or a trial visit for their loved ones.

"Another benefit when they come to the center is that our social worker does a patient and family evaluation to determine their needs," Dr. Brumley said. "As a memory disorder clinic, we offer a full gamut of cognitive testing, which helps us in guiding them to treatment and getting them connected to the right resources."

For more information, visit www.fanursing.org/MWC or call (561) 297-0102.

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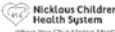


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