

AUSTIN Medical Times

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Inside This Issue



**6 Things You Need to Know
about Millennials and Healthcare**
See pg. 8

INDEX

Financial Forecast pg.3
Technology pg.4
Oncology Research pg.5
Healthy Heart pg.6



**Baylor Scott & White Health and
Select Medical Expand Joint Venture
into the Austin area**
See pg. 12

Understanding the GDPR Eight Things a U.S. Healthcare Organization Should Know



By Matt Todd, JD
Polsinelli, PC

The European Union's General Data Protection Regulation ("GDPR") recently went into effect and healthcare organizations that treat patients from any of the 28 European Union ("EU") nations will need to comply. For any U.S. Health & Life Sciences organization, the GDPR applies when: (1) the organization has an "establishment" in the EU (which does not necessarily mean having an EU corporate entity), (2) the organization does not have any physical presence in the EU, but offers goods or services within the EU to EU data subjects, and (3) the health care organization monitors the behavior of EU data subjects within the EU. While U.S. organizations must remain HIPAA-compliant, for those organizations that treat EU patients, the GDPR may have a profound impact.

Unlike HIPAA, the GDPR regulates the collection, use, disclosure, recording, storage, maintenance structuring, adaptation, alteration, retrieval, consultation, and transmission of all personal data, which is a broader scope of data than protected health information (as defined by HIPAA). This article will identify eight things an organization should know about the GDPR.

1. Territorial Scope – The GDPR applies to companies in the EU and to companies outside of the EU that process EU personal data

2. Consent – Consent regarding personal data must be freely given,



specific, informed, and unambiguous. Click wrap agreements are still acceptable, but because the GDPR requires the user's affirmative action, the check box cannot be pre-checked. Some data types, like health

“ The European Union's General Data Protection Regulation ("GDPR") recently went into effect and healthcare organizations that treat patients from any of the 28 European Union ("EU") nations will need to comply. ”

information, may only be collected by explicit consent which carries a higher standard. In addition, the GDPR establishes three data subject's rights, namely (a) the right to information regarding the identity of the controller, the contact details of the data privacy officer ("DPO") and the reasons for

processing personal data, (b) the right to object to the processing of personal data where the basis for that processing is either public interest or legitimate interests of the controller and (c) the right to erasure of personal data without undue delay if the personal data are no longer necessary or if the data subject withdraws his or her consent.

3. Privacy by Design– Data protection concepts and principles must be considered and built into products and data collection processes. Applications must be built to ensure that privacy is part of the original framework or architecture. Organizations must also implement technology capable of totally and completely erasing personal data upon request.

4. GDPR Exemption – The GDPR provides exemptions to organizations that process personal data for scientific research purposes, however, the organization must still implement

see GDPR... page 14

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Financial Forecast

Another Look at Physician Practice Embezzlement

By Reed Tinsley
CPA,CVA,CFP,CHBC

It's the tragic type of story in the medical field that you hear at industry conferences, or from friends of friends. "The doctor knew the reimbursement climate had become tougher and all, but he just didn't think the practice was making as much money as it should."

It wasn't. A trusted medical office manager had been embezzling money for years, and the CPA auditor the practice was using as a safeguard was in on the scam. Once the embezzlement was detected, the office manager was fired, and charges pressed. But the money was gone forever. Sure, the office manager was supposed to pay restitution, but she no longer had the money to repay. She'd spent it on cruises and clothes.

It's a story that's all too common. Businesses with 100 employees or fewer are more vulnerable than larger businesses. And medical practices are at higher risk than most small businesses. Consider these statistics:

- 10 percent of the nation's healthcare cost is lost through fraud, twice the standard average.
- During the next five years, 80 percent of all medical practices will experience embezzlement in one form or another.
- Of those committing the embezzlement, it is estimated that 70 percent have practiced their embezzlement skills with a previous medical practice.

Why are medical practices so susceptible?

Physician owners must face the fact that they are open targets for fraud. But why? Medical offices are often comprised of close-knit groups, and this familiarity often leads to gradual breakdowns in policies and controls because of trust. This lack of control is mixed with a daily flow of cash and checks, centralized money functions and a lack of supervision, creating "an open account for a potential embezzler."

And like most healthcare providers,



physicians and their staff likely have a basic instinct of wanting to offer aid and comfort, which makes it easier for unscrupulous folks to take advantage of your good intentions.

Many of the forms of theft the employees commit take advantage of this atmosphere of trust. That trust gives them the benefit of the doubt in the case that you begin to feel suspicious of their fraudulent activities, such as:

- Employee takes cash payment from patient and does not post charge or payment.

- Employee gives patient a fictitious receipt for payment that was made.
- Employee gives busy doctor a sheaf of checks to sign, includes an extra one.
- Refund check made out to fictitious patient. (Employee has previously opened an account under that name.)
- Employee substitutes insurance check payment for cash taken and doesn't post insurance payment.
- Rubber stamp is made of doctor's

see Financial Forecast...page 13



Texas law now permits physicians to electronically prescribe controlled substances.

If you regularly write prescriptions for controlled substances, you may find value in upgrading your technology to comply with the federal and state regulations.



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Technology

Future Health Care Technology That Will Drive Better Health

By Mark Johnson
President, Xtrii

For more than 30 years, I have led prominent technology organizations. I have worked with health care providers, payers, independent review organizations, and throughout the health care ecosystem. I have seen significant challenges and opportunities that can be addressed and greatly improved with the right technology. In this article I will cover three technology areas that will soon reshape health care and drive better health outcomes.

Artificial Intelligence:

Some health care systems now provide basic feedback to the clinicians as they enter orders and other information into the system. But currently in most cases, that feedback is very basic. By applying Artificial Intelligence (AI) the clinicians can receive significantly better insight that can help them select the optimal course of care and reduce errors.

Physicians don't want to spend their time entering data, and Artificial Intelligence can also help clinicians enter and capture information, as well as receive timely updates in a more efficient manner. Many of you have used Amazon Alexa, Apple Siri, or Google Assistant to receive updates or perform tasks. You have probably noticed how rapidly this technology has improved recently, and it's now commonly used in homes, on phones, and throughout your day to make everything flow better. As this technology matures, it will be applied to health care environments, and improve the flow throughout the health care delivery process.

Universal Health Data Exchange:

By providing a doctor your full medical record and a complete picture of your health history, it can improve the quality of care and reduce medial errors. But for most Americans, their medical history is scattered across the many hospitals, doctor offices and



clinics they have visited over the years. EMRs (electronic health records) and EHRs (electronic health records) are finally implemented in prominent health care organizations. While we now have digital records, unfortunately the data is still trapped within each organization. Health care needs a universal health data exchange. To achieve an open, timely exchange of health information, the right incentives must be applied including:

1. Financial incentives: One of the primary reasons for EMRs/EHRs

were finally implemented by providers was due to the financial incentives instituted by the government and payers. A similar incentive will likely need to be applied to create and implement a viable health care data exchange.

2. Consumer demands: Consumers have access to their data and service history in other industries,

see Technology...page 13



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Oncology Research

Life Blood – How Breakthrough CAR-T Therapy Attacks Cancer



By Jason Melear, M.D.,
Texas Oncology

Meriam Cancer treatment is becoming less about type of the cancer and where it's located in the body, and more about what's inside – deep inside – cancer cells that is causing them to misbehave. Changing that bad behavior by sparking the immune system to fight back is the aim of an exciting novel cancer treatment breakthrough, a form of immunotherapy called CAR-T.

CAR-T, or Chimeric Antigen Receptor T cell therapy, is a personalized therapy that involves engineering a patient's own immune system's blood cells – arming the cells – to attack cancer cells. During the complex procedure, doctors remove some of the patient's T-cells, a type of white blood cells, which are then

shipped to a cryogenic chamber to be genetically reprogrammed to identify and attack cancer. Weeks later, doctors then infuse the re-engineered cells back into the patient's body.

Sounds like science fiction. But it's now a treatment reality for some patients with diffuse large B-cell lymphoma (DLBCL), the most common and aggressive form of non-Hodgkin's lymphoma, and acute lymphoblastic leukemia. Currently, CAR-T may be available to adult DLBCL patients who have not responded to two or more types of standard therapy.

Because CAR-T's side effects can be serious, and can include fever and low blood pressure, specially trained medical teams are in place to carefully monitor patients. Early results suggest that CAR-T is one of the most potent therapies ever tested for DLBCL cancer patients.

The Food and Drug Administration first approved the new CAR-T therapy in 2017 for the specific



types of lymphoma and leukemia after its promising results during clinical trials.

Earlier this year, Texas Oncology–Baylor Charles A. Sammons Cancer, in collaboration with Baylor University Medical Center, became the second facility in the state to provide groundbreaking FDA-approved CAR-T therapy for DLBCL cancer. That collaboration also has included numerous clinical trials to test CAR-T therapy.

CAR-T is an example of innovative and promising medical advancements following extensive

clinical trials. Research continues, including at Texas Oncology, to examine the effectiveness of the new therapy for other forms of cancer. Through research and patient participation in trials, oncologists are rapidly discovering dramatically better ways to treat, diagnose, and prevent even the most aggressive forms of cancer.

Jason Melear, M.D. is a medical oncologist at Texas Oncology—Austin Midtown, 901 W. 38th Street, Suite 200 in Austin, Texas.◆



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Healthy Heart Summer in the City: Staying Heart Healthy When the Heat is On



By Joel Rice
 The American Heart Association – Austin

When the temperature goes up in the summer months, is it safe to exercise outside? While ample sunshine, longer days and warmer temperatures provide more opportunities outdoor activities -- from walking to gardening to biking -- the higher temperatures can make being

loose-fitting clothes. Moisture-wicking fabric can also be a big help. Protect yourself from the sun with sunglasses, a hat or visor and plenty of sweat-resistant sunscreen.

4. **Listen to your body:** Take frequent breaks in the shade and drink water before you're thirsty. Allow yourself time to adapt to the heat -- some experts say that this can take about 4-14 days. You may not be able to work out as long or as hard as usual when it's very hot.



active more challenging, especially for heart patients. It's easier to become overheated when the sun is beaming down all day. And with humidity, your sweat doesn't evaporate as quickly, so your body has a harder time releasing heat. But there are simple steps to take so you can stay active in the summer.

Five Tips to Beat the Heat

1. **Timing is key:** It's usually hottest this time of year between 1 and 4 p.m. Avoid exercising outside in the early afternoon. Adjust your workout schedule to early morning or late evening when it's cooler outside.
2. **Hydrate:** Drink water before, during and after physical activity. Bring a bottle of water with you, or plan water stops along your route. Even if you don't feel thirsty, make hydration a priority.
3. **Dress for success:** Wear lightweight, light-colored,

5. **Doctor's orders:** ALWAYS check with your healthcare professional before starting a new exercise routine or moving your workout outdoors if you have cardiovascular disease, diabetes, other chronic disease or any medical concerns. Certain medications like beta blockers, ace receptor blockers, ace inhibitors, calcium channel blockers and diuretics can exaggerate the body's response to heat.

If you find you just can't tolerate the heat, don't skip out on your workout or physical activity time. Find indoor locations where you can be active, such as a shopping mall, gym or community recreation center. Or look for ways to stay active at home or at work. Find more ideas by visiting Heart.org/HealthyForGood. ♦

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Marketing Essentials

6 Things You Need to Know about Millennials and Healthcare

By Carolyn Lange
Healthcare Success

Millennials have the power to enact change. According to the US Census Bureau, this group (of people born between 1981 and 1996, myself included) now outnumbers baby boomers by about 8 million. And if we have the power to kill off everything from restaurant chains to paper napkins to the diamond industry, then believe me: millennial healthcare decisions will shape the future of medicine.

Marketing healthcare to millennials means changing the status quo. Recent research from the EBRI/Greenwald & Associates Consumer Engagement Health Care Survey (CEHCS) shows that millennial healthcare trends are increasingly changing, and like it or not, practices and hospitals are changing with it. Stay ahead of the competition by finding ways to adapt to these changing trends and expectations.

1. They Expect Healthcare to Be Simpler

As a millennial, I want to be able to schedule a doctor's appointment online, to easily view my health records, and to touch base with my doctor via a private patient portal. But don't just take my word for it.

The 2018 CEHCS survey shows that millennials are twice as likely to be interested in the convenience of telehealth as baby boomers. Access to remote healthcare is a priority for millennials—and something that practices and hospitals are finally starting to act on. It's up to you to keep up.

2. Millennials Are More Diverse than Older Generations

Millennials are far more diverse than older generations, with 44.2% being part of a minority race or ethnic group. That means diversity is key when you develop a marketing strategy and engage with your patients.



That doesn't mean you can simply throw a few more pictures of diverse families on your website and call it a day. Multicultural marketing in healthcare is about more than representation—it's understanding the nuances that exist amongst generations of different groups. It's about culturally relevant campaigns as well as building trust and deeper connections to patients from different backgrounds.

3. They've Done Their Research

Millennials want to know what they're getting into before they make any purchases. We take full advantage of the tools at our disposal to look up details, reviews, and pricing information before making any big decisions—and we want to see value in our purchases.

That includes medical decisions. Your credentials alone may not be enough to win over a millennial. They look up your information—according to the 2018 CEHCS survey, 51% of millennials research the quality or rating of a doctor or hospital (vs. 34% Gen X and 31% Baby Boomers). And they are nearly twice as likely to use an online health cost-tracking tool.

4. Millennials Care What People Say about You

If I'm shopping for anything on Amazon—whether it's a set of headphones or a pack of kitchen sponges—I pay close attention to the star ratings that product receives. So you'd better believe I read what people are saying about any healthcare providers I'm considering. And the data shows that most millennials agree.

Nearly half of all millennials have researched their healthcare providers, and most put a lot of stake in the reviews they find. Numbers vary from study to study, but around ¾ of consumers say they trust online reviews as much as a personal recommendation from a friend. And as you might guess, that number gets higher with millennials, with some studies citing an 88% trust rate.

5. Millennial Healthcare Preferences Are Closest to the Urgent Care Model

Here's what I love about the urgent care centers in my area: I don't have to call ahead, and I'm usually in and out in less than 30 minutes. Hours are usually flexible, and pricing is fairly predictable.

It turns out that a lot of millennials agree; the 2018 CEHCS survey shows that 30% of millennials have used a walk-in clinic (as compared to 14% of baby boomers and 18% of Gen Xers). Another study from PNC Healthcare shows that 34% of millennials prefer to receive care at a retail (pharmacy) clinic, while 25% prefer urgent care.

That doesn't mean that only urgent care centers will survive this generation, of course. What it does prove is that all practices and even hospitals could benefit from mimicking some of the policies and procedures of urgent care centers, at least in terms of convenience.

6. They Don't Always Have a Primary Care Physician

Fewer and fewer millennials have a primary care physician they rely on. Only 2 out of 3 millennials have a PCP according to the 2018 CEHCS survey (as compared to 85% of baby boomers and 78% of Gen Xers). And why would they when urgent care offers a more convenient model?

Again, this doesn't mean primary care providers cannot find a millennial audience. I belong to the 1 in 3 millennials with a primary care physician, and I will remain loyal to her and her team's level of care for as long as I live in the area. But part of that has to do with how much I feel my PCP values my time.

Savvy healthcare marketers are constantly adjusting to the needs of patients. Customer service and convenience are priorities for millennial healthcare decisions, but overall, patients of any generation appreciate when you put their needs first.◆

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St. David's South Austin Medical Center Earns Level II Trauma Verification

St. David's South Austin Medical Center was verified as a Level II Trauma Center by the American College of Surgeons (ACS). This achievement recognizes the trauma center's dedication to providing exceptional care to the most critically injured patients. Level II is the highest trauma level a hospital can achieve without being affiliated with an academic research facility or residency program.

St. David's South Austin Medical Center began treating critically injured trauma patients in April 2016 as part of the verification process. Since then, the hospital has treated more than 6,000 trauma patients.

"This verification reflects our commitment to providing the highest level of care, and it underscores the dedication of our physicians, nurses and staff," Todd Steward, chief executive officer of St. David's South Austin Medical Center, said. "Several years ago, we identified a strong need for Level II trauma services in South Austin due to our proximity to three

major thoroughfares—Interstate 35, Highway 71/Ben White Boulevard and MoPac Expressway—and we are pleased to be able to fill this critical need in our community."

As a Level II Trauma Center, St. David's South Austin Medical Center provides specialized medical and surgical services and resources to patients suffering from traumatic injuries, working closely with Capital Area Trauma Regional Advisory Council's (CATRAC) Trauma Service Area O to ensure efficient, high-quality trauma care to patients in Central Texas. Additionally, it provides trauma-prevention courses and community education opportunities.

During the verification process, St. David's South Austin Medical Center opened a new Shock Trauma Unit—a higher-level Intensive Care Unit (ICU) for patients who have experienced traumatic injuries—including 10 additional ICU beds, a new trauma operating room (OR) and a hybrid suite. The hospital also added 10 new beds in a "step-down"



unit for patients recently discharged from the ICU but still in need of a higher level of care. Additionally, it has dedicated trauma surgeons and a fellowship-trained critical care team in house 24/7, as well as expedited response times for other trauma surgical specialties, including orthopedic surgery, neurosurgery, plastic and reconstructive surgery, hand surgery, otorhinolaryngology (ear, nose and throat), cardiovascular and vascular surgery, urology and interventional radiology. The hospital also hired additional staff to accommodate the increase in patients and higher-level acuity that comes with treating trauma patients, including highly trained

critical care nurses, anesthesiology support, respiratory support, blood bank and lab support, and imaging (CT, MRI, ultrasound) support.

"When treating traumatic injuries, the faster a patient receives care, the better the outcome," Dr. Ernest Gonzalez, trauma medical director at St. David's South Austin Medical Center, said. "Being able to provide this level of care to patients in South Austin has already made a critical difference in our community, and we are pleased that the ACS has recognized these efforts."

Established by the ACS in

see St. David's...page 13

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Understand the Symptoms of Dementia and Know When to Take Action



By Anand Balasubramanian, M.D.

Dementia is a general term that describes a group of symptoms associated with a decline in memory or thinking skills that interfere with daily life activities. Alzheimer's disease, a fatal disorder that results in the loss of brain cells and function, is one dementia condition and accounts for 60 to 80 percent of cases. The second most common dementia type is vascular dementia, which occurs after a stroke.

It is estimated that more than 47 million people worldwide suffer from some form of dementia and one new case is diagnosed every four seconds.

Dementia is mostly caused

by progressive brain cell death that happens over time. It can also be caused by a head injury, a stroke or a brain tumor, among other causes.

Different types of dementia are associated with the type of brain cell damage in particular regions of the brain. As an example, Alzheimer's disease is affected by cell damage in the brain region called the hippocampus, which is the center of learning and memory in the brain. The brain cells in the hippocampus are often the first to be damaged and therefore memory loss is the earliest symptom of Alzheimer's.

However, there are many conditions that can cause symptoms of dementia, including some that are reversible such as thyroid problems, medication side effects and vitamin deficiencies. So it is essential to know the warning signs and to talk to a doctor if there are any concerns.

Dementia symptoms can vary by individual, but in general, at least



two of the following mental functions must be impaired significantly to be considered dementia. They include memory loss, impaired communication and language, inability to focus and pay attention, impaired reasoning and judgment, and a change in visual perception.

Symptoms of dementia, and Alzheimer's disease, start out slowly and then gradually get worse.

The Alzheimer's Association has published a list of 10 warning signs and early detection does matter.

Don't ignore any symptoms. See a doctor as soon as possible because

a proper medical evaluation may detect a treatable condition. Bring a list of your medications, vitamins and other supplements you are taking to your doctor's appointment. Ask questions and spend the time it takes to understand any tests that may be recommended, as well as possible treatment options and their risks and benefits.

Remember, should the symptoms suggest dementia, early diagnosis allows for maximum benefit from treatment options.◆

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Your Social Life, Or Lack Thereof, Can Affect Your Health

By Dominic Hernandez

Americans are more lonely, and it can be a health hazard

According to a nationwide survey, nearly half of Americans report feeling alone or left out, and one in four Americans rarely feel as though there are people who really understand them. More and more people are feeling lonely every day, and that feeling can be detrimental in the long run.

“Loneliness has been linked to many different health issues,” said Meredith Williamson, PhD, clinical assistant professor at the Texas A&M College of Medicine. “It has been associated with depression, and depression has corresponding risks of high blood pressure, obesity and alcohol and drug abuse.”

What is loneliness?

Loneliness is a nebulous description and one that takes some defining. Psychologically speaking,

loneliness doesn't require a person to be socially isolated (a term used to describe being physically outside of contact). Being lonely means feeling disconnected from others, yet having the desire for a connection or a relationship.

The amount of social networking required to stave off loneliness varies from person to person, and there is no threshold for eliminating the feeling of loneliness. Feeling lonely (even in a crowded room, as the saying goes) does seem associated with poorer health outcomes.

Importance of relationships

There are different types of relationships that someone experiencing loneliness could be missing: intimate, relational and collective. Intimate relationships are in reference to a spouse or significant other, 'relational' relationships refers to one's network of close friends and relatives, and 'collective' relationships



mean group affiliations and connections to society.

“Intimate relationships, such as marriages, are a source of intimate connection and those who are in intimate relationships—where they feel supported—are less likely to experience high levels of loneliness,” Williamson said. “But the biggest predictor of loneliness is relational connections. Having strong relationships with several close friends or family members has been shown to have tremendous benefits for social needs.”

Identifying where social

shortcomings can be important in fixing, or adding, a relationship. For example, in many cases, volunteering can help increase a one's feelings of a fulfilled collective relationship, but it won't necessarily help someone who is recently divorced and feeling intimate loneliness.

Society is more connected, but more lonely

There is no specific reason why someone is lonely, but there are some statistics that point to contributing

see Social Life...page 14



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Baylor Scott & White Health and Select Medical Expand Joint Venture into the Austin area

Joint Venture to Acquire Inpatient Rehabilitation Hospital

Baylor Scott & White Health and Select Medical announced an expansion of their joint venture into the Austin area with the acquisition of a 36-bed inpatient rehabilitation hospital in Lakeway, Texas, that will be operated under the name Baylor Scott & White Institute for Rehabilitation – Lakeway. The transaction is expected to close by July 1, 2018.

Originally formed in 2011 in North Texas, the joint venture today includes 66 outpatient rehabilitation clinics, three inpatient rehabilitation hospitals, and home health rehabilitation services, collectively staffed by more than 1,900 employees. This is the first expansion of the joint venture into Central Texas,

and planning is underway to broaden its outpatient rehabilitation footprint across the Austin/Round Rock region to include additional outpatient therapy clinics.

“With our combined presence in the Austin area, we will have a unique opportunity to leverage the skills and strengths of our two organizations to elevate the rehabilitation services we offer in the community,” said Jay Fox, president, Baylor Scott & White – Austin/Round Rock region.

“We saw a growing need to expand our acute rehabilitation services to serve a wider patient population throughout Texas,” said David Chernow, Select Medical President and Chief Executive



Officer. “Working together, Baylor Scott & White and Select Medical will provide high quality of care and improved functional recovery outcomes for traumatic brain injury, spinal cord injury and stroke patients throughout North and Central Texas.”

Baylor Scott & White has a long-standing history of providing quality medical care to residents and families in Central Texas, including four medical centers and more than

20 clinics in Travis and Williamson counties. Baylor Scott & White most recently expanded into Hays County with a primary care clinic, and its newest medical centers are currently being built in Pflugerville and Buda.

Select Medical is one of the nation’s largest providers of specialized post-acute care with a network that supports more than 100 hospitals and 1,600 outpatient clinics with 42,000 employees.◆

Water Danger: How to Protect Your Child from Drowning

Keeping cool in the pool, lake or water park is a summer ritual, but emergency room physicians warn summer fun can turn to tragedy in a matter of seconds. According to the Centers for Disease Control and Prevention drowning ranks as the leading cause of death for children ages one to four.

Among all ages, drowning is the fifth leading cause of unintentional injury death in the United States, resulting in about 4,000 deaths each year. In 2017, Dell Children’s

Medical Center of Central Texas reported 38 near-drownings. The majority occurred in residential or community pools. To date, 22 children in Texas lost their lives to a fatal drowning.

Dell Children’s is part of Ascension,

the largest nonprofit health system in the U.S. and the world’s largest Catholic health system.

Because accidents can happen with less than a moment’s notice, it’s important to stay closely supervise water activities.

“Parents or caregivers should constantly provide “touch supervision” for infants, toddlers, or weak swimmers, meaning the child is within arm’s reach at all times, when in a pool or water,” said Eric Higginbotham, MD, chief of pediatric emergency medicine at Dell Children’s.

With proper education, supervision and a bit of caution, drowning can usually be prevented. To help your family stay safe this summer, Higginbotham offers these summer water safety tips:

“According to the Centers for Disease Control and Prevention drowning ranks as the leading cause of death for children ages one to four.”



- Plan ahead: Before you make a splash, talk about water safety with your family and friends. Summer is also a great time to enroll children in swim lessons.
- Keep watch: Designate an adult watch children in the water and use touch supervision for infants, toddlers or weak swimmers.
- Suit up: Non-swimmers or weak swimmers should wear a U.S. Coast Guard approved life jacket. Water wings or arm floaties are

not a flotation device and should not be relied upon to keep kids afloat. Everyone should wear a life jacket in open water.

- Protect with fencing: Four-sided pool fencing prevents children from accessing the pool without an adult knowing. Make sure gates are closed and latches work properly.

For more water safety information and resources go to Safe Kids Austin, led by Dell Children’s.◆

Financial Forecast Continued from page 3

signature: uses to make extra paycheck for self.

- Employee purposely pays a bill twice and then pockets the resultant refund.

How to Spot Embezzlers

So if 70 percent of employees who will embezzle in the next five years have stolen from a previous employer, how are they getting hired? This is also particularly tied to the medical field or at least providers' proclivities towards pride, as most physicians are reluctant to:

- Admit that it happened to them.

- Believe it's anything other than a minor, isolated incident.
- Report it to the proper authorities.

You should never leave one employee in control of finances, regardless of your level of trust. This very trust is the springboard that allows employees to commit fraud undetected. You should also be wary if any employee largely responsible for handling finances suddenly quits or disappears without notification.

10 Warning Signs of Potential Embezzlement

- Your practice's accounting

processes seem disorganized.

- There are gaps in your accounting records and discrepancies among your financial reports.
- Claims are closed without payment.
- Vendors are calling to complain your practice hasn't paid your bills, or you're receiving past due notices.
- Patients are complaining that your practice has recorded their payments incorrectly.
- An employee wants to work unusual hours when no one else is around.
- A manager insists on doing routine

tasks himself when clerical staff could be doing them.

- An employee refuses to teach colleagues how to do the job.
- An employee takes accounting materials home.
- An employee never takes vacations.◆

Technology

Continued from page 4

and eventually they will demand the same from the health care organizations they select. If a health care organization fails to participate in the data exchange, they will be viewed as obsolete and consumers will select more progressive providers.

3. The right standards: While health care data standards have existed for many years, critical pieces are still missing. Health care can leverage lessons learned from the financial services industry and other industries that have developed clearing houses or other universal exchanges that remove the barriers for a secure, timely data exchange.

Next Generation of Personal Health Wearables:

SmartWatches such as the Apple Watch, Fitbit, and others now provide millions of people more insight into their fitness, wellness and overall health picture. In each new version, additional features are added that provide a more complete picture. Early versions provided just a single point in time heart rate, but now smartwatches can continuously monitor your heart rate, provide historical reference, and alert you to abnormalities. Smartwatches will become even "smarter" and add new capabilities. Personal health wearables will expand beyond smartwatches, and discreetly take on new forms and functions. As manufactures add other key monitoring capabilities, it will improve the depth, breadth and timeliness of health information.

By providing better tracking

of your daily health, applying more advanced artificial intelligence, and creating a timely exchange of health care information, future technology will play a key role in providing better

health care.

Mark Johnson is President of Xtrii, www.Xtrii.com.◆

St. David's Continued from page 9

1987, the organization's Committee on Trauma Consultation/Verification Program for Hospitals promotes the development of trauma centers to provide the entire spectrum of care to address the needs of all injured patients. This spectrum encompasses

the pre-hospital phase through the rehabilitation process.

St. David's South Austin Medical Center is expected to receive its Level II designation by the state of Texas later this year.◆

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GDPR

Continued from page 1

appropriate safeguards which include “technical and organizational measures to ensure data minimization”.

5. Data Privacy Officers – Depending on certain factors, organizations may need to appoint a DPO to monitor compliance with GDPR. The DPO must possess expert knowledge of data protection law and practices.

6. Breach Notification – Unlike HIPAA which allows providers 60-days from the time of discovery of the breach to provide notice, under the GDPR, organizations have only 72 hours to document and notify applicable regulators of a breach if there is undo harm or an identifiable impact toward the rights and freedoms of the data subjects. Organizations will also have to notify affected individuals

of the data breach without undue delay “when the personal data breach is likely to result in a high risk to the rights and freedoms of natural persons”.

7. Cross border data transfers – There are codified means to appropriately transfer data out of the EU. An organization may still rely on model contract clauses, corporate binding rules, and Privacy Shield; however, there is a cost increase when moving away from the EU preferred transfer model (Privacy Shield most expensive).

8. Fines – Fines for non-compliant activity may be up to 20 million, or 4% of the organization’s worldwide annual revenue of the prior financial year, whichever is higher, depending on severity of non-compliance.

Organizations that treat EU

patients should fully understand the impact of GDPR. As an initial step in GDPR compliance, U.S. organizations should:

- Evaluate data collection processes and policies to ensure collecting the minimum necessary,
- Update external privacy policy for notice and consent requirements,
- Shift to “opt-in” data collection as default rather than “opt-out”,
- Implement privacy by design,
- Evaluate and adjust data tracking for right to be forgotten and consent removal,
- Get familiar with data protection impact assessments,
- Develop a breach response plan (and practice it!).◆

Social Life

Continued from page 11

factors. In the United States, about 40 to 50 percent of married couples get divorced, which could open a void in intimate and relational loneliness (if your spouse had a role in your friendship circle and the loss of the relationship leads to loss of mutual friends).

Also, research suggests that increased media screen activities may have caused a rise in depression and suicide among young Americans. The study also found that people who spend less time looking at screens and more time having social interactions in real life are less likely to be depressive or suicidal.

Williamson also credits a shift toward a nomadic and on-the-go type of society that makes social circles with family, friends and acquaintances less readily available for companionship.

“Our society also moves around a bit more than previously,” Williamson said. “Jobs aren’t as steady, and there’s not as much closeness as people may need, and that can really contribute to feeling lonely.”

Loneliness by gender

According to one study, single men showed higher levels of loneliness than single women, whereas only small differences in loneliness were found in married subjects.

This could be explained by societal habits and the ability to form new friendships, possibly in new locations when someone moves due to work or school. Findings from the Movember Foundation found that 2.5 million British men reported having “no close friends” and women more likely having somebody to turn to in a crisis.

The importance of making new friends, and keeping old friends, can’t be overstated—especially as lives continue to change over the years. Combating loneliness could be a way to help address issues of mental health and suicide—where men are more than 3.5 times more likely to die by suicide than women.

As a positive example other men might emulate to remain connected: One group of friends have been playing the same game of “tag” for over 20 years, and has included some interesting tactics, including hiding in trunks and tagging someone at their father’s funeral. This goofy story about a group of middle-aged male friends has made national headlines and even was made into a movie slated to hit theaters in June 2018.

Treating loneliness

When it comes to dealing with loneliness, Williamson recommended cognitive behavioral therapy—a form of psychotherapy that modifies emotions, behaviors and thoughts—with a mental health professional.

“Cognitive behavioral therapy

helps modify maladaptive cognitions about oneself in relation to social interactions and social relationships, and it can also address underlying mental health conditions that may be contributing to the experience of loneliness,” Williamson said. “The reason for the psychotherapy recommendation is that encouraging people to engage in social situations has not been found to produce significant benefit since it is the perceived quality of relationships and the ability to give-and-take in relationships that seems to matter most.”

Although it may feel uncomfortable, it’s best to tell your health care provider if you’re feeling lonely. Williamson noted that health care providers may not screen for loneliness, but they do screen for depression.

“If you’re feeling that your mental state is at a degree to where it’s impacting your life or effecting your ability to function, then you should tell your health care provider,” Williamson said. “Loneliness is closely related to other mental health concerns, and you and your provider can determine a proper course of action.”

“Encouraging people to engage in social situations has not been found to produce significant benefit since it is the perceived quality of relationships and the ability to give-and-take in relationships that seems to matter most.◆

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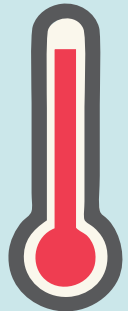
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HEATSTROKE OR STROKE ?

WHAT IS IT?



Heatstroke occurs when core body temperature rises to more than

104°F¹

A stroke occurs when a blood vessel to the brain is either blocked by a clot or bursts.



The disruption of blood and oxygen to the brain causes brain cells to die.

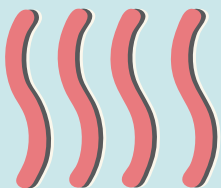
CAUSES

Some people may be at higher risk due to:

- Weight
- Age
- Medical history
- Medications they are taking²



Being outside in **EXCESSIVE HEAT**



80% OF STROKES ARE PREVENTABLE

Some risk factors that can be treated or controlled:

- Heart disease
- Obesity
- Diabetes
- Poor diet
- High blood pressure
- Cigarette smoking
- Atrial fibrillation
- High cholesterol

Some risk factors that can't be changed:

- Age
- Race
- Gender
- Family history
- Medical history

SIGNS

HIGH BODY TEMPERATURE

A body temperature of 104° F or higher is the main sign.

- Muscle cramps or weakness
- Strong and rapid pulse
- Rapid, shallow breathing
- Nausea and/or vomiting
- Confusion and/or unconsciousness
- Headache
- Flushed/red skin
- Hot and dry skin³ (if not exercising)

F. A. S. T.

Face Drooping Arm Weakness Speech Difficulty Time to Call 9-1-1

* Additional signs of stroke include sudden trouble seeing, dizziness, confusion, severe headache, or weakness on one side of the body.

WHAT TO DO

While waiting for emergency care, try to cool the person by moving him/her to a shaded area and by using ice packs, cold wet towels and/or a fan.³

CALL 9-1-1
OR YOUR LOCAL EMERGENCY SERVICES NUMBER IMMEDIATELY

Stroke patients who arrive at the hospital by ambulance have a greater chance of living through the stroke, and a greater chance of preserving independence and having a full recovery.

(1) <http://www.mayoclinic.org/diseases-conditions/heat-stroke/basics/definition/con-20032814>

(2) <http://www.mayoclinic.org/diseases-conditions/heat-stroke/basics/risk-factors/con-20032814>

(3) <http://www.mayoclinic.org/diseases-conditions/heat-stroke/basics/symptoms/con-20032814>

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