

COLUCCI & GALLAHER, P.C.

Direct Dial: (716) 854-8671
Email: ajc3@colucci-gallagher.com

May 6, 2011

HHS

Certified Mail - Return Receipt Requested

The Honorable Christopher Collins
Erie County Executive
Erie County Office Building, 16th Floor
95 Franklin Street
Buffalo, New York 14202

Re: Erie County Medical Center Corporation

Dear County Executive Collins:

In accordance with section 12.7 of the Sale, Purchase and Operating Agreement between the County of Erie, New York and Erie County Medical Center Corporation, enclosed you will find the packet of materials distributed at the May 3, 2011 regular meeting of the Board of Directors of Erie County Medical Center Corporation.

By copy of this correspondence, we are providing a copy of these materials to The Honorable Barbara Miller-Williams and the Erie County Attorney.

Very truly yours,

Anthony J. Colucci, III
for COLUCCI & GALLAHER, P.C.

krt

Enclosure

cc: The Honorable Barbara Miller-Williams
Chair, Erie County Legislature

Jeremy A. Colby
Erie County Attorney

11M-1

ERIE COUNTY MEDICAL CENTER CORPORATION

REVISED AGENDA

AGENDA FOR THE
MAY 2011 REGULAR MEETING OF THE
BOARD OF DIRECTORS

TUESDAY, MAY 3, 2011

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ERIE COUNTY MEDICAL CENTER CORPORATION

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CREDENTIALS COMMITTEE MEETING

April 5, 2011

Committee Members Present:

Robert J. Schuder, MD, Chairman (conf call)	Timothy G. DeZastro, MD
David G. Ellis, MD	Gregg I. Feld, MD
Richard E. Hall, DDS PhD MD FACS	Andrew J. Stansberry, RPA-C
Philip D. Williams, DDS	

Medical-Dental Staff Office and Administrative Members Present:

Jeanne Downey	Emilie Kreppel
Susan Ksiazek, R.Ph.	Elizabeth O'Connor

Members Not Present (Excused *):

Dietrich V. Jehle, MD (ex officio) *	Joseph M. Kowalski, MD (ex officio) *
Brian M. Murray, MD (ex officio) *	

CALL TO ORDER

The meeting was called to order at 3 PM by Dr. Robert J. Schuder. The proceedings from the previous meeting of March 1, 2011 were reviewed and accepted.

RESIGNATIONS

The Credentials Committee was made aware of recent resignations, application withdrawals or leave requests and presents the following names to the Executive Committee for information/overall action.

A. Deceased

B. Application Withdrawn

C. Resignations

Richard Pretorius, MD	Family Medicine	as of 10/31/2010
Andrea Schmitt, FNP	Surgery	as of 02/01/2011
Samantha Moeller, RPA-C	Internal Medicine	as of 02/16/2011
Jacqueline E. J. Bhandari, MD	Family Medicine	as of 03/01/2011
Tan Tran, RPA-C	Internal Medicine	as of 03/18/2011
Robert B. Moynihan, DMD	Dentistry	as of 03/22/2011
Sanjivini Wadhwa, MD	Internal Medicine	as of 04/30/2011

Correspondence was reviewed. If not explicitly stated by the staff member, follow up requests for formal staff resignation statements will be issued.

CHANGE IN STAFF CATEGORY

None

CHANGE IN COLLABORATING/SUPERVISING PHYSICIAN

None

PRIVILEGE ADDITION/REVISION

Cardiothoracic Surgery

Robert Gibson, ACNP

Allied Health Professional (Nurse Practitioner)

Collaborating MD: Stephen Downing, MD

-Tracheal/bronchial aspiration via flexible bronchoscopy on intubated patients in the ICU setting

Tara Edmiston, RPA-C	Allied Health Professional (Physician Assistant)
Current Internal Medicine:	<u>Supervising MD: Khalid Saadah, MD</u>
Additional Rehabilitation Medicine:	<u>Supervising MD: Tat Fung, MD</u>
Christopher John, RPA-C	Allied Health Professional (Physician Assistant)
Current Internal Medicine:	<u>Supervising MD: Nancy Ebling, DO</u>
Additional Rehabilitation Medicine:	<u>Supervising MD: Tat Fung, MD</u>
Noelle Lohr, NP	Allied Health Professional (Nurse Practitioner)
Current Internal Medicine:	<u>Collaborating MD: Jenia Sherif, MD</u>
Additional Rehabilitation Medicine:	<u>Collaborating MD: Mary Welch, MD</u>

OVERALL ACTION REQUIRED

REAPPOINTMENT APPLICATIONS

None

DUAL REAPPOINTMENT APPLICATIONS

None

PROVISIONAL APPOINTMENT REVIEW

April 2011 Provisional to Permanent Staff

None

AUTOMATIC MEMBERSHIP CONCLUSION

None

FUTURE MEMBERSHIP CONCLUSION, planned

The following members may have not responded as of 4/5/2011 to requests for reappointment applications, information, privilege requests and/or credentials, are slated for potential future membership conclusion.

Requests for reappointment applications are distributed to applicants six months before the end of their current appointment period to allow time for return of the application and processing. After three requests for return and no response, little time is left for processing, submission to the Chief of Service, submission to the Credentials Committee, submission to the Medical Executive Committee and then Board of Directors, each of which takes a month. **The members below must be ready at the latest for the May 2011 Credentials Committee meeting to allow time for approval by the Board before reappointment expiration.**

The Medical Directors and Chiefs of Service will be informed of this pending action before the Medical Executive Committee meeting and have been asked to encourage a response.

The planned membership conclusion letters will be sent from the Medical Director and Officers to the member with copies to the respective Chiefs of Service regretting the need for conclusion and with thanks for service to ECMCC.

Cardiothoracic Surgery

Aldridge, Janerio, MD, FACS	Associate Staff	07/01/2011
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Emergency Medicine

Suffoletto, Heidi, N., MD	Active Staff	07/01/2011
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Family Medicine

Finney, Maureen, F., RPA-C	Allied Health Professional <u>Supervising MD: Dr. Singh</u>	07/01/2011
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Internal Medicine		
Bielinski, Michelle A., RPA-C	Allied Health Professional	07/01/2011
	<u>Supervising MD: Dr. Milling</u>	
DeRosas, Andrea, L., MD	Courtesy, R & F	07/01/2011
Iyer, Vijay S., MD	Active Staff	07/01/2011
Rueda, Benjamin G., MD	Courtesy, R & F	07/01/2011
White, Thomas G., MD	Active Staff	07/01/2011
Neurology		
Silvestri, Nicholas, Joseph, MD	Active Staff	07/01/2011
Neurosurgery		
Landi, Michael, K., MD	Courtesy, R & F	07/01/2011
Oral and Maxillofacial Surgery		
Cecere III, William, L., DDS, MD	Active Staff	07/01/2011
Radiology		
DeZastro, Timothy G., MD	Active Staff	07/01/2011
Rehabilitation Medicine		
Zhan, Su, MD	Active Staff	07/01/2011

Planned Credentials Committee Meeting: May 5, 2011
Planned MEC Action Date: May 23, 2011
Last Possible Board Confirmation by: June 7, 2011
Next Board Meeting: July 12, 2011 too late

PRESENTED FOR INFORMATION ONLY

OLD BUSINESS

Internal Medicine

Action regarding extending to midlevels the privilege of bronchoscopy on intubated patients in the ICU setting will be deferred awaiting input from the department and the credentials committee representative. When last discussed, it was suggested that the hospitalist group initiate dialogue with the departmental chief of service.

Advanced Airway Management Training

The committee received an update on the ongoing advanced airway management training being conducted for ICU midlevel practitioners in Internal Medicine to provide intubation under sedation.

Credentialing Software Transition at Kaleida & ECMCC

Integration of the new IntelliSoft credentialing software continues to move forward at ECMCC and Kaleida. A technical and business conference call was conducted and a template and timeline for incorporation was discussed. A transition manager will facilitate adoption. The current vendor has agreed to a reduced fee extension period should implementation extend beyond June 2011.

Anoscopy Training

The committee awaits documentation of the completion of credentialing requirements for the three Internal Medicine physicians who have undergone the training.

Temporary Privileges Pending Initial Applications

A tracking system has been formalized to monitor Temporary Privilege expiration periods and the status of application completion. The current tracking matrix is attached.

INFORMATION ONLY

NEW BUSINESS

Clarification of the Previous March Provisional to Permanent List

Sarah A. Devlin, RPA-C was listed as moving from Provisional to Permanent in the March 2011 minutes. It has been confirmed that she is no longer affiliated with the Department of Orthopaedics. Multiple attempts to contact have failed, with no forwarding address, e-mail address or telephone number. If formal resignation is not received, the committee endorsed for her membership to lapse at the end of the current appointment period.

Radiation Oncology Consultation

The privilege offering of Radiation Oncology Consultation will appear on the Internal Medicine delineation form in the Hematology/Oncology section. The Medical-Dental Staff office will forward the revised privilege form to Roswell and Western New York Urology Associates once formal approval of the Board of Directors is received.

Enter " Y, Yes, +, x, or ✓" in Physician Request Column

(Please avoid sweeping vertical lines)

HEMATOLOGY-ONCOLOGY

HEMATOLOGY-ONCOLOGY PROCEDURES	Init/Reap Volume	Physician Request	Chief of Service action:		Recommend If Yes, indicate any requirements; if No, provide details. See p.23
			YES	NO	
Radiation Oncology Consultation (Board Certified Radiation Oncologists only)					

Emergency Medicine Privilege Form

The Chief of Service of Emergency Medicine has suggested a major revision for the department's privilege delineation form. The goal is to harmonize the ECMCC version with that of Kaleida's as well as to incorporate groups of core and cluster privileges. A proposed draft will be completed and submitted to the Chief of Service for initial comments. Draft privilege form revisions for Anesthesia, Family Medicine, Internal Medicine and Psychiatry are pending harmonization with the Kaleida format.

Internal Medicine Physician Palliative Care Changes

Following the request for Palliative Care Management privileges for a Nurse Practitioner (see below), the Chief of Service decided to also revise credentialing criteria for physicians. Documentation will be verified by the Medical-Dental Staff Office. The following changes are presented:

Enter " Y, Yes, +, x, or ✓" in Physician Request Column

(Please avoid sweeping vertical lines)

PALLIATIVE CARE

PALLIATIVE CARE PROCEDURES	Init/Reap Volume	Physician Request	Chief of Service action:		Recommend If Yes, indicate any requirements; if No, provide details. See p.23
			YES	NO	
Palliative Care Management and Consultation					See Credentialing Criteria page 20

PALLIATIVE CARE CREDENTIALING CRITERIA AND REQUIREMENTS (Physicians)

For initial appointment in the Palliative Care specialist category, qualifications shall include one year of experience (full-time) or the added Internal Medicine Board Certification component in Palliative Care (available 2008) or completion of an approved fellowship in Palliative Care. M-1

Internal Medicine Nurse Practitioner Palliative Care Privilege Addition

In carrying out the FPPE process, the need to delineate palliative care delivery by midlevels was identified. A request for the addition of Palliative Care privileges to the Internal Medicine form for Nurse Practitioners was forwarded to the Chief of Service. In following with the physician privilege delineation, specific credentialing criteria are proposed in order to ensure practitioner competency. The Chief of Service also recommends that the collaborating physician or other physician member of the same palliative care organization must have seen the patient either prior to the initial NP visit or within 24 hours afterwards to ensure adequate physician oversight. And, as with other privileges, the collaborating physician must hold the same privilege as the Nurse Practitioner and be in the same department. The committee deferred opinion on extending this privilege to Physician Assistants until a need for such is identified.

DEPT. ACTION			
Recommended under General Collaboration	Recommended under Direct Collaboration	Recommended under Personal Collaboration	Not Recommended

IV. SPECIAL PROCEDURES

Palliative Care Management

(see specific credentialing criteria page 7)

The collaborating physician or other physician member of the same palliative care organization must have seen the patient either prior to the initial NP visit or within 24 hours afterwards.

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PALLIATIVE CARE CREDENTIALING CRITERIA & REQUIREMENTS (Nurse Practitioner)

- The Nurse Practitioner must be affiliated with a palliative care organization.
- Qualifications shall include at least ½ year of experience
- The collaborating physician shall possess palliative care privileges.
- The collaborating physician or other physician member of the same palliative care organization must have seen the patient either prior to the initial NP visit or within 24 hours afterwards.

Thom R. Loree, MD

At the March Medical Executive Committee meeting, Dr. Loree was approved for dual appointment in the Departments of Surgery and Otolaryngology. Following a special session of the Medical Executive Committee and its endorsement, with the recommendation of the Chief Medical Officer, Dr. Loree was proposed to be Chief of Service of a new department initially named the Department of Plastic and Reconstructive Surgery. The recommendation and Chief of Service appointment is pending approval of the Board of Directors. Additional MD and Dental surgeons will be joining ECMCC under this new department. The Credentials Committee stands ready to assist in the development of a new department privilege forms and anticipated revisions to the forms for the Departments of Surgery, Otolaryngology and Oral-Maxillofacial Surgery. The Director of Medical Staff Quality and Education offered to assist the Credentials Chair with the facilitation of the new form and revisions to the existing forms, as these will need to be put into production upon approval by the Board.

Interim Director of the Transplant Service

Dr. Brian M. Murray was named as the Interim Director of the Renal Transplant Service thus formalizing its harmonization with Kaleida for this service. A formal search will be conducted for a permanent director.

Exclusive Outpatient Practice

ECMC has recruited a new Primary Care physician in Internal Medicine whose practice will be exclusively outpatient. The Internal Medicine privilege form is designed primarily for inpatient care. The chair agrees with the Director of Medical Staff Quality and Education that the sole selection of "Admitting Privileges, Non-ICU Beds" is currently appropriate, but that additional ambulatory activities should be added to the form, perhaps as a core/cluster group. A template for such was submitted for review, and will be endorsed as harmonization with the Kaleida privilege forms proceeds.

EEG Reading Privileges

In December 2010, temporary privileges were granted to afford for remote EEG reading, providing a continuum of care with the retirement of an on-site ECMCC neurologist. Temporary privileges for certain Kaleida Neurologists to read EEGs expire on April 22, 2011. Contract negotiations with a neurologist to deliver this service are near completion. All parties are aware of the need to complete this before the above referenced expiration date.

Application Form Changes

CME requirements for Podiatrists have been added to the appointment and reappointment forms.

OVERALL ACTION REQUIRED

OTHER BUSINESS

FPPE-OPPE Report

FPPEs were successfully completed in the following departments:

- Neurology (1 MD)
- Orthopaedic Surgery (2 RPA-C)
- Psychiatry (1 MD)
- Surgery (1 RPA-C)

OPPEs were completed for the Department of Internal Medicine (87 MDs and 27 AHPs). Dr. Joseph Izzo delegated the review and sign off of this group of OPPEs to Dr. John Fudyma. The Director of Medical Staff Quality and Education will attend the monthly Internal Medicine meeting on April 11th, to review a relevant trend observed in the OPPE process.

OPPEs are near completion for Emergency Medicine, with 2 MDs outstanding. OPPEs for Neurosurgery will be complete pending the receipt of information from one surgeon, and the assistance of the department chief of service has been solicited to ensure completion by the May meeting. OPPEs for Family Medicine have begun, with the Family Choice midlevel providers already completed. Dr. Khalid Malik, Family Medicine Chief of Service, has identified Dr. David Eubanks as the OPPE/FPPE designee for Family Choice. OPPEs have been initiated for the Department of Orthopaedics, with the service specific measures approved by the Chief of Service.

PRESENTED FOR INFORMATION ONLY

ADJOURNMENT

With no other business, a motion to adjourn was received and carried. The meeting was adjourned at 4:20 PM.

Respectfully submitted,



Robert J. Schuder, MD,
Chairman, Credentials Committee

ERIE COUNTY MEDICAL CENTER CORPORATION

**A Resolution of the Board of Directors Adopting a Lobbying Contacts
Policy Pursuant to Public Authorities Law Section 2987**

Approved May 3, 2011

WHEREAS, Erie County Medical Center Corporation [the "Corporation"] was created by New York Public Authorities Law ["PAL"] Article 10-C, Title 6 and is subject to PAL Section 2987; and

WHEREAS, PAL Section 2987 requires that the Corporation maintain a record of all lobbying contacts and adopt a policy setting forth the procedures for recording and maintaining such record; and

WHEREAS, the Corporation desires to adopt the Lobbying Contacts Policy in the form presented to the Board of Directors and attached hereto as Exhibit A.

NOW, THEREFORE, the Board of Directors resolves as follows:

1. The Corporation hereby adopts the Lobbying Contacts Policy in the form attached hereto as Exhibit A.
2. This Resolution shall take effect immediately.

Bishop Michael A. Badger
Corporation Secretary

ERIE COUNTY MEDICAL CENTER CORPORATION

EXHIBIT A

Erie County Medical Center Corporation
Policy Regarding Lobbying Contacts

I. **Purpose.**

The purpose of this Policy is to ensure that Erie County Medical Center Corporation ("ECMCC") records and maintains lobbying contacts in accordance with Article 12-A, Section 2987 of the Public Authorities Law, as established by the Public Authorities Reform Act of 2009.

II. **Background.**

Public Authorities Law § 2987(4) requires every state authority to adopt a policy regarding lobbying contacts as defined in that section of law.

III. **Definitions.**

For purposes of this Policy, the following terms shall have the following meanings:

A. "**Lobbyist**" means every person or organization retained, employed or designated by any client to engage in lobbying but does not include an officer, director, trustee, employee, counsel or agent of the State or a municipality (including State public authorities) thereof engaged in the discharge of official duties (other than officers, directors, trustees, employees, counsels, or agents of public institutions of higher education engaged as lobbyists).

B. "**Lobbying**" means and includes any attempt to influence:

- i. the adoption or rejection of any rule or regulation having the force and effect of law by ECMCC; and
- ii. the outcome of any rate making proceeding by ECMCC.

C. "**Contact**" means any conversation (either in person or by telephone or other remote means) or correspondence between any Lobbyist engaged in the act of Lobbying and any person within ECMCC who can make or influence a decision on the subject of the Lobbying, including, but not limited to ECMCC's board members and officers.

IV. **Policy.**

A. It is the policy of ECMCC to maintain a record of all Lobbying Contacts made with ECMCC. Accordingly, each board member, officer or employee of ECMCC who is contacted by a Lobbyist shall make a contemporaneous record of such Lobbying Contact. Such record shall include the day and time of the Contact, the identity of the Lobbyist and a general summary of the substance of the Contact.

ERIE COUNTY MEDICAL CENTER CORPORATION

B. Each record of a Lobbying Contact shall be made on a form provided by ECMCC for such purpose and shall be submitted to ECMCC's Ethics Officer, or such person as he or she may designate, who shall receive and maintain a record of such Lobbying Contacts in accordance with the requirements of Public Authorities Law §2987(4).