



Foundation  
CHEYENNE REGIONAL  
MEDICAL CENTER

# Advancement

Advancing Premier Regional Community Healthcare

WINTER 2012-2013



Together - we  
create a healthy  
community



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Stephen Stone**  
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SEVENTEENTH ANNUAL

# Tree of Remembrance LIGHTING CEREMONY

*Saturday, December 1 • 1:30 p.m.*

*Frontier Mall, Dillard's West*

Please join Cheyenne Regional Medical Center for the 17th Annual Tree of Remembrance Lighting Ceremony. Help us honor the memory of those who are no longer with us and those who continue to touch our lives. Donations may be made at the Tree from December 1 through December 24. All donations will be used to support Cheyenne Regional Hospice services and programs.

**For more information,  
please call 633-7667.**



**Foundation**

CHEYENNE REGIONAL  
MEDICAL CENTER



# Advancement

Volume 15, Number 4 | Winter 2012-2013

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Message from  
**Tom Stuckey**  
*Foundation Chair*

Greetings to all our supporters and friends! This will be my last letter to you as I will soon step down as Chair of the Foundation Board. Yet I am happy to say I will continue to serve on the Board. Over the years, I have watched the Foundation grow, change and adapt to meet the requests of the hospital. These efforts have positioned the Foundation well to move forward in the future. I would like to thank fellow board members and officers I have served with for their hard work and dedication. Finally, I want to wish John Balsler, our new Chair, and his officers the best in leading the Foundation.

A highlight of this last quarter has been the annual Donor Recognition Dinner at Little America to honor select donors who achieved new levels of support. As we enjoyed a delicious dinner of stuffed pork chops and roasted potatoes, we listened to Dr. John Lucas, CEO of Cheyenne Regional, tell how the \$213,000 raised for the new telemedicine bridge during last spring's Denim 'N Diamonds event played a key role in helping the hospital land a \$14.2 million grant from the Center of Medicaid and Medicare Innovation. The grant will help create medical "neighborhoods" across Wyoming in collaboration with the Wyoming Integrated Care Network (WYICN). Foundation supporters helped raise \$213,000, and in turn, the hospital received a grant for 14 million—that's more than a 70 to 1 return on our investment! This is a perfect example of how the Foundation's efforts can help the hospital build on their resources. As Foundation supporters I thank you for helping make this happen, and for your ongoing generosity. Together we really do make a difference for healthcare in Cheyenne and Wyoming.

It has been an honor and pleasure to serve as Board Chair the past two years. I wish all of you a joyous and prosperous Holiday Season.

**Best regards,**

**2012 Board Officers:**



**Tom Stuckey**  
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**John Balsler**  
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**Carmalee Rose**  
*Secretary*

# Cheyenne Regional Promotes Innovative Health and Wellness Programs

By Phyllis Sherard, PhD,  
Executive Director of Wyoming Institute of Population Health

Did you know that some of the big thinkers in healthcare reform are right here in Cheyenne? Cheyenne Regional and community partners are initiating the latest healthcare innovations to come out of national healthcare think-tank organizations here at home. Cheyenne Regional is looking toward a new, expanded future. While providing acute patients with the best and most up-to-date care, the hospital system also wants to create ways for individuals to play a more active role in maintaining their own health and well-being. Through pilot programs and new initiatives, Cheyenne Regional is also taking action to improve the overall wellness of communities across the state. Below, you'll read an update on innovations at CRMC, and you'll learn about partner healthcare change-making organizations from Phyllis Sherard, PhD, Executive Director of the Wyoming Institute of Population Health. It's an exciting time. All this positive, proactive energy is bound to result in better healthcare for everyone in Wyoming.

Cheyenne Regional has a proud history; the 'tent hospital' built in 1867 has grown into a sizable health system serving and inspiring residents throughout Wyoming. The system's trustees and senior leadership believe that every person should be as healthy as he or she can be, and that every community member should be safe from threats to their physical, mental and social well-being.



A commitment to the health and well-being of communities is seen at every level of the organization. Cheyenne Regional takes seriously its responsibility to advance the principles of "healthy people in healthy communities." The hospital system is mobilizing creativity and resources of the entire community towards a shared vision of the future. They foster collaboration and integrate dialogue with local leaders, elected officials, providers and consumers in the design and delivery of healthcare at Cheyenne Regional and beyond.

In the 21st century, the hospital system and its providers must be true public health partners, forming collaborations and sharing data with community organizations to facilitate healthy behavior changes for patients where they live, learn, work and play. The system has a renewed role to play in advancing population health by improving quality and patient safety, increasing care coordination and expanding preventive services. These efforts cannot succeed without every patient, provider and community partner doing their part to focus on wellness.

*continued on page 5*

# Empowering Patients, One at a Time

## How the Wellness Center Changed Debbie Egan's Life

Debbie Egan feels she owes her good health to the medical staff at the Cheyenne Health and Wellness Center. They taught her to control her diabetes rather than letting it control her. More importantly, they empowered her to care about herself.

“They made me realize that I was important and that I needed to take care of me, for me, not just for my husband and grandkids,” says Debbie.

Debbie attended the Center's Diabetic Group Sessions — a five-month series of education and treatment classes funded by CRMC and led by Dr. Phyllis Sherard and the Institute. “I knew I had diabetes, but it didn't hit me until I went to classes. They taught me what happens to the body when blood sugar is low or high, and how important it is to watch what we eat and to exercise. They helped me take it to heart. Now I know I have a disease to manage, not just a shot to do every day,” says Debbie.

And manage she has. On her first visit, Debbie's blood sugar control was rated as “high risk.” Just 90 days later she received a “good control.” “That's unheard of for diabetes, she is very motivated,” says Tasha Urbanek, the Center's RN Care Manager. By engaging patients in their care, the Center breaks the cycle for chronically ill patients who get gravely sick and land in the ER for treatment. Without education, guidance, and money for prescriptions, they often end up back at the hospital again when the next scare comes. “We provide a medical home to make sure that



*Tasha Urbanek, RN Care Manager, visits with patient Debbie Egan about her recent blood work results. Debbie is managing her diabetes well ever since she made Cheyenne Health & Wellness Center her medical home.*

when they walk out our door, they will return improved,” says Tasha.

Before discovering the Center, Debbie, who lives with her husband Daniel and is raising her granddaughters Byonca 6, and Bryonna 10, was told by her doctor that because she couldn't pay, he couldn't see her. Being unemployed and uninsured she had nowhere to turn. Thankfully, she learned about the Wellness Center.

“We serve a lot of working class families that are either uninsured or underinsured—who couldn't otherwise afford healthcare. We also serve small business owners who can't afford healthcare as well as people who are unable to work due to mental or physical limitations,” says Tasha. Clients are screened for eligibility requirements based on income and pay a low fee for services, between \$0 and \$5. The Center also serves insured patients and accepts all commercial insurances as well as Medicare and Medicaid.

*continued on page 19*

## Cheyenne Regional Promotes Innovative Health and Wellness Programs

*continued from page 3*

Cheyenne Regional’s longstanding support of Healthier Laramie County (HLC) is an example of such a committed partnership that began in 1995. Today, this 65-member collaborative addresses every aspect of health in the community.

HLC’s earliest efforts created a community “free” clinic. Three years later, in 2005, the partnership helped open a federally qualified health center, the Cheyenne Health and Wellness Center (see article on page 4).

HLC also partnered with the Wyoming Department of Health to create a program to dispense donated medications to uninsured residents through the Laramie County Centralized Pharmacy. With grants from United Way and Cheyenne Regional, in 2011, the Laramie County Centralized Pharmacy filled 26,270 prescriptions for 3,161 low-income individuals and leveraged \$468,600 in combined community funding into services that had a retail value of \$2,891,157.

In October 2010, Cheyenne Regional partnered with the Wellness Center to pilot Wyoming’s first Primary Care Medical Home. Patients of the pilot center reported increased satisfaction, improved medication compliance, more confidence in self-managing their conditions and a positive relationship with their healthcare team.

Cheyenne Regional has come a long way since its founding in 1867. This little ‘tent’ hospital has grown up and is ready, with its dedicated partners, to take on the healthcare challenges of the future.



### Cheyenne Regional Houses Award-Winning Health Institute

Did you know Cheyenne Regional houses the Wyoming Institute of Population Health? This Institute, formerly known as Cheyenne Regional’s Office of Community Health, helps communities take a proactive approach to patient care and population health management. The Institute reaches out beyond the traditional four walls of a hospital or a clinic to address the challenges of caring for frail and vulnerable populations, addressing rising chronic disease rates and delivering evidence-based preventive health services.

A staff of 10, led by an official Center for Medicaid and Medicare Innovation (CMMI) advisor, applies principles of community health improvement, epidemiology, evidence-based healthcare delivery, health informatics/analytics, and even grant-writing to create care systems that work. The Institute brings members of the Wyoming Integrated Care Network together. Their mission? To transform healthcare delivery so it’s affordable, effective and accessible throughout Wyoming.

The Institute was recently recognized for its important work: It was deemed the recipient and principal investigator of a \$14.2 million Health Care Innovation Award from CMMI. The institute was just one of 107 recipients selected out of 3000 applicants nationwide.

The projects created by the grant are projected to save nearly \$33 million over the next three years by instigating cost-saving measures—like nurses helping teach vulnerable patients self-care methods for chronic illnesses—and thereby lowering hospital visits. Other innovations that are already in place, namely the telemedicine program and the low-cost pharmacy program, will also be expanded.

For more information on the Institute, contact Phyllis Sherard, PhD, Executive Director, at [Phyllis.Sherard@crmcwy.org](mailto:Phyllis.Sherard@crmcwy.org) or 307-633-2914.

# Q & A with Dr. John Lucas

Chief Executive Officer, Cheyenne Regional Medical Center

We sat down with Dr. Lucas as we do each quarter in preparation for *Advancement*. Dr. Lucas is very generous with his time for this publication and we very much appreciate being able to share with you his perspectives and insights into the ever-changing healthcare environment and the latest happenings at CRMC.



Dr. John Lucas, CEO  
Cheyenne Regional Medical Center

**Q: Let's start with the more visible changes around Cheyenne Regional; what is the update on construction of expansion projects?**

**A:** The parking garage is complete and the Emergency Room expansion is underway. We held our ground-breaking ceremony for the Cancer Center in August and construction has started. Overall, expansion plans are moving along as expected and are on schedule.

**Q: Would you share the surprise donation that you received for the Cancer Center?**

**A:** We are grateful for all the men and women who serve as volunteers within our hospital; in fact, we have about 330 volunteers in all. These volunteers wanted to support the Cancer Center in a meaningful way so they pooled their resources and pledged \$500,000 to the project over the next 5 years. What an amazing gift from those who already give so much!

It was definitely a surprise, and just not something we expected. We are grateful for all that they give. Their pledge shows the kindness and philanthropic spirit that is so present in our community.

**Q: This issue of *Advancement* is about a 360-degree view of healthcare in our community – the roles that patients, physicians and administrators all play in a successful model. Could you weave the story together for us?**

**A:** There are several characters in the 360-degree story. Three of the main ones are patient literacy, patient-centered medical homes and electronic medical records.

## **Patient Literacy**

It's complex, but let's start with the patient. According to the Institute of Medicine, "nearly half of all American adults lack health literacy – an individual's ability to obtain, process and understand basic health information."

We need to do a better job at educating our patients and helping them become better consumers of healthcare. We use the term "literacy" and that doesn't mean that patients simply need to be able to read health information. Much of that responsibility is on us. It means we need to communicate information in a way that patients understand their diagnosis and their treatment options. It also means we must educate them on ways to prevent "before 30-day" re-admittance to the hospital, what medications to

take, how to live healthier, how best to receive healthcare information, how to manage chronic diseases and more. When patients have the information they need they feel empowered to care for themselves and take charge of their healthcare.

"We're here to save patients when they are drowning, but really our job includes teaching everyone to swim."



Health literacy is part of patient-centered care; the medical industry has traditionally been provider-centered. We're here to save patients when they are drowning, but really our job includes teaching everyone to swim.

**Patient-Centered Medical Home**

We are participating in a national pilot program to create Patient-Centered Medical Homes (PCMHs), something that's happening at the Cheyenne Health and Wellness Center (see story on page 4). The American Academy of Family Medicine (AAFM) created this innovative program to improve primary care in the United States. The National Committee for Quality Assurance (NCQA) sets standards and specific criteria to verify how healthcare providers are organizing care around the patient. Creating a Patient-Centered Medical Home involves establishing partnerships between patients and all of their healthcare providers.

In simple terms, the PCMH is a team of doctors, physician assistants, nurses and a health coach that really get to know you as a patient. Likewise, you choose a home and really get to know your team of caregivers, who are accessible to you and strong advocates for your health. The idea is that your team is available not just when you are sick but also there to help keep you healthy.

The model allows doctors to spend time with each patient in a highly-focused way and for patients to be more engaged in their health and able to manage their health conditions, with support. The PCMH also reduces costs by improving overall health and tightening care coordination.

**Electronic Medical Records**

As administrators we are investing in expanded facilities, expert physicians and equipment. TrueConnect powered by EPIC is our patient electronic records system. At first it will provide doctors with efficient access to patient records.

"There will always be opportunities for donors to support initiatives as we move forward as a healthcare system. Everyone is part of the change."

That means when you sit in front of your doctor and review your health history, he or she will be able to pull up past labs, diagnoses, x-rays and scans instantly and get a full picture of your health. Eventually patients will be able to access their own records through a secure portal. To our older audience it may seem foreign to use technology in this way, but as more and more tech-savvy youth come into the system it will become second nature. Gone will be the days of thick paper files of your health records being stored at your doctor's office with little access to you.

You might say we are reengineering our old ways. We need to. We need to make health records more available to you and your entire healthcare team. We need to continue to improve patient-centered care but also bring down costs. Both are possible if we make prevention as much of a priority as we make providing life saving medicine.

**Q: What role do you see the Foundation playing in this new future?**

**A:** We are happy to welcome Stephen Stone to our CRMC team as the new Executive Director of the Foundation. Stephen is a fully-trained healthcare professional with a Master's in Addiction Studies, with an emphasis in Public Administration from the University of Arizona. He has 30 years of experience and he is very familiar with healthcare systems. We feel he is the perfect leader for the Foundation as we go forward with these changes.

The Foundation will continue to be extremely important when it comes to raising funds for new and updated equipment, setting up the new Cancer Center and establishing unique programs and services for patients. There will always be opportunities for donors to support initiatives as we move forward as a healthcare system. Everyone is part of the change.

# Employee Profile: Kim Johnson

Busy Clinical Director Serves as  
Foundation Employee Partners' Chair

We're fortunate in life when our passions match up perfectly with our work. Kim Johnson, RN, BSN, and interim Clinical Nursing Director at CRMC, is one person who can claim this as true. When she first started out, Kim chose business rather than nursing as a career. A few major life challenges made her rethink her path.

"We had a son who passed away when he was 10 days old, and then my dad died at the young age of 57 of cancer. I asked myself, 'How can I turn these losses into something positive?' Nursing was the answer," exclaims Kim.

Through nursing, Kim gets to do what she does best—make a difference in her patients' lives and the lives of her employees. "Through the years I've counseled moms who have lost a child at the hospital. And when I sit and listen to my cancer patients, especially those going on to hospice, it makes it really clear that I'm in the right job and the right place." As a clinical director, Kim oversees 16 employees with Ambulatory Infusion, Wound Care and the specialized IV PICC Team.

Her job gives her energy: "I love working with patients and interacting with my employees. There is nothing more satisfying than to listen to my team, learn together, and share experiences with each other and our patients." And she means it. Kim and her husband joke that if they won the lottery, she'd still go to work every day.

Kim leads a busy life. Not only is she a nursing director but she also serves as the Employee Partners' Chair for the Foundation. "The Foundation is great at putting money back into



*Kim Johnson, RN, BSN, and interim  
Clinical Nursing Director at CRMC*

the hospital to improve patient care. Recently my department got a big check — they actually gave us one of those big checks — for \$18,000 for new IV pumps. I held it up and celebrated with my employees," says Kim. Her role as Chair is to act as liaison between the Foundation and CRMC employees. She is an employee volunteer for the Denim 'N Diamonds event. She also raises awareness about how much the Foundation does for the hospital.

Kim is in the final stretch of graduate school at Regis University. In May, she'll earn her Master's degree in nursing leadership and healthcare administration.

Kim is married to Dave, who retired after serving 20 years in the Air Force. The two met when Kim was 20 and married just six months afterwards. After all, it was love at first sight! Kim grew up in Missouri, and Dave in Oklahoma. The two moved to Cheyenne in 1995, and plan to stay put.

The couple has two boys—Tyler who is 17, and Tanner who is 11. Tyler is a top swimmer in the state and plans to study pre-med at college next year. Tanner plays basketball and is active in the all-city children's choir. "We are kind of an old-fashioned family. We eat all our meals together and enjoy playing games and cards together," says Kim.

Kim is especially enthusiastic about the new Cancer Center: "I'm excited to rally my team and other employees to support the Foundation's fundraising efforts. Even small gifts can make a difference."

# Winds of Change

By Stephen V. Stone, M.S., CFRE  
Executive Director



As I drove from Tucson, Arizona to Cheyenne to assume the role of Executive Director of the Foundation at Cheyenne Regional Medical Center, I couldn't help but think of the term

"winds of change" and now that I have been on board for two months, the term seems all the more apropos. Driving across Arizona, New Mexico, Colorado and into the beautiful state of Wyoming I noticed the first signs of seasonal change from late summer to autumn and the beautiful colors of the fall. I left my home, family and many friends in the desert southwest for the western edge of the Great Plains where a whole new life chapter awaits; new friends, new adventures, new goals to meet.

I took over the role of Executive Director from Mr. Ted Adams, a masterful leader who guided the Foundation through difficult times, and in his quiet way managed to set the stage for us to accomplish great things. Ted, I wish you well in your retirement, and I thank you for your leadership over the past 16 months.

I have had the great fortune to inherit a strong Board of Directors for the Foundation, many of whom have gone out of their way to introduce me to the community, its key leaders and wonderful Foundation donors. The Board is already embracing change as it has instituted a number of changes within the organization to increase its efficiency and effectiveness. I look forward to working with them to accomplish great things for the hospital and the patients it serves.

In order to embrace the winds of change coming with healthcare reform, Cheyenne

Regional Medical Center itself is undergoing tremendous transformations. They have already implemented the first of several phases designed to improve programs and services for the residents of Cheyenne and the tri-state region we serve. A new parking structure has been built, while ground has just been broken for a new Cancer Center and an expanded and modernized emergency department. These two new facilities will enable our highly talented and committed teams of doctors and medical professionals to deliver quality care close to home for the patients we serve. The hospital has also instituted internal changes to improve the delivery of care to its patients. The focus is on providing quality and compassionate care to make each patient's stay as comfortable as possible, and to provide a welcoming environment for family members.

I am told the people of Cheyenne are very generous and giving in supporting a variety of causes throughout the community. From what I have seen and learned about in my short tenure with the Foundation, that observation is very true, and Cheyenne is a better place because of it. The CRMC Foundation is engaged in raising \$10 million from the community to support the new Cancer Center facility. When completed, cancer patients will be able to receive a wide range of treatments from one convenient location rather than leaving the state for treatments or traveling to multiple locations for care as is now the case.

I am happy to have been selected as the new Executive Director to lead the Foundation and raise funds to support the changes coming to Cheyenne Regional Medical Center. I look forward to participating in the life of the community and working with many committed donors, civic leaders and businesses as we work together to make Cheyenne a strong, vibrant community now and for years to come.

# Dr. Rick Davis

Even though he has plenty of reason to do so, Dr. Rick Davis refuses to brag: yet this retired cardiologist is proud to be helping advance healthcare in Cheyenne and the region.

One way he does so, of course, is by serving on the Foundation Board. He will soon finish up his second four-year term. The Foundation is extremely grateful for his service. “Compared to working as



*Dr. Rick Davis, retired cardiologist, board member and volunteer*

a physician, my work on the Board has a much broader scope in affecting the delivery of healthcare in our region. I never dreamed I’d be helping get that job done,” says Dr. Davis.

His work on the Board is similar to his role as the physician representative on the Wyoming State Board of Pharmacy where he and

others oversee rules and regulations on patient safety.

While he enjoys making a difference on a large scale, he relished affecting change on an individual basis the most—with his cardiac and internal medicine patients: “My most rewarding work as a doctor has been to take care of patients, get to know them as individuals, and attempt to do the best I could for them on their behalf.”

Dr. Davis started his career as a cardiologist in Cheyenne in 1973. “I was the first cardiologist in Cheyenne and was just one of two in the entire state,” he exclaims. He and other physicians recruited other cardiologists through the years and helped build the cardiac program at Cheyenne Regional.

Dr. Davis retired in 2005, and is “busier than ever.” He and his wife, Ibbby, love to travel—that is when they can find time between their many service-based commitments. Besides his volunteer work on the Board and with the State Board of Pharmacy, Dr. Davis also serves on the Old West Museum Board and is active in his church. “Ibby is the one who is really most active in the community. She so appreciates the opportunity to interact with many people from all walks of life. It’s

very fulfilling for her,” he adds. Ibbby is a visual artist whose oil, water, and pastel paintings and drawings will soon be displayed in the halls at CRMC.

“One of the most rewarding accomplishments I’ve had since retirement is to serve as the Medical Director for Honor Flight-Wyoming,” says Davis. The program flew more than 600 Wyoming WWII veterans to see the war memorial in Washington D.C. between 2009 and 2011.

Dr. Davis cites serving on the Endowment Committee as what he enjoys most as a Foundation Board member: “We have a very effective method of awarding grant requests to hospital departments, developed by Dave Foreman. It’s rewarding to provide needed equipment to the hospital and in doing so advance the delivery of healthcare in our community. The Foundation plays a definitive role in doing that and I am happy to be a part of it,” he concludes.

The Davis’s have two grown children—Katie who lives in Denver, and Stuart who lives in Washington, D.C. Whenever possible the couple spends time with their children, their spouses, and four grandsons.

**“It’s rewarding to provide needed equipment to the hospital and in doing so advance the delivery of healthcare in our community.”**

# Take Charge of your Health!

by Gretchen Halley, MAT, RD, LMNT, LD  
Cheyenne Regional Physicians Group, Weight Loss Center

As we age it is important for us, as individuals, to be advocates for our own health and wellness. The following actions will help you take charge of your own health and well-being:

**Health history:** It is important to know your health history in order to get appropriate care, as well as your family's health history (parents, grandparents, siblings). It is vital to your health that you be able to give your healthcare provider an accurate personal and family medical history. Their services are not as effective if they do not know your full story, and some treatments and prescription medications may actually be dangerous without this information. Before seeing a new healthcare provider, it is very helpful to contact your previous doctors' offices and have them send over your medical records. Also, feel free to ask your doctor for copies of your lab and test results to keep in your personal health history folder at home.

**Medications:** You are responsible for knowing your current medications names and doses, past medications, and any recent medication changes. This includes vitamin and mineral supplements, over-the-counter medications and herbal supplements. Keep an ongoing list of the medicines and supplements you take. A complete list will help your healthcare provider determine any drug interactions. Do not expect the pharmacy to keep a list for you. Please carry with you a record of all the medications you are currently taking so it is easy to access when you have a doctor's appointment. In an emergency, a current medication list might save your life.

**Allergies:** Be aware of your allergies (seasonal, drug, food, etc.) and let your healthcare provider know about any adverse reactions that you have to



any medicines that you're taking. A slight reaction now can lead to a larger problem if not addressed quickly. Voice this information to your provider.

**Providers:** View your provider as a partner in your health. They are there to assist you. Do not be afraid to ask them questions about

your health, medications, prevention strategies, etc. Write down your questions ahead of time so you don't forget to ask them when you are in an appointment. Also, give your provider a list of all other providers that you see. This includes specialty providers. Know their contact information so appropriate connections can be made.

**Diagnosis:** Understand your diagnosis. Education is the key to help you be your own advocate in your healthcare. Ask your provider questions about the information you gather. Not all sources are reliable.

**Insurance:** Get to know your insurance plan. While most healthcare providers are happy to work with your insurance, it is your responsibility as the patient to be familiar with your insurance policy's coverage and copays. Do not be afraid to contact your insurance company directly with questions about your insurance policy and the care that you are receiving. Making sure your visits and tests are covered before going to a scheduled appointment will decrease the likelihood of being surprised by an unexpected bill for charges that weren't covered under your policy.

Be an advocate for your health. You yourself know best when it comes to your health and you are the best one to help others assist you. Get routine medical check-ups and gather all the above information before your next visit. Speak up so you are heard. After all, it's your health!

*This article is advice only and does not represent medical opinion and/or diagnosis.  
We do not assume any liability for the information contained in this article.*

# Donor Recognition Dinner

**Thank you to everyone who attended the 2012 Cheyenne Regional Medical Center Foundation Donor Dinner. The event was held on October 23rd at Little America. What a pleasure it was for us to formerly recognize so many of our generous supporters.**

*Unable to attend:*

**Founder**

Amy Davis  
Dillard's  
John Gross

*All awards were presented by Board Chair Tom Stuckey and Foundation Executive Director Stephen Stone.*

## Thankfulness

*For each new day  
with its light, For  
rest and shelter  
of the night, For  
health and food, For  
love and friends,  
For everything thy  
goodness sends, Let  
us be thankful now.”*

By Ralph Waldo Emerson



**2013 Denim ‘N Diamonds Honorary Chairs**  
Brent Weigner and Sue Hume



**Distinguished Fellows**  
CRMC Volunteers  
Accepted by Jean Parks

Donor Recognition Dinner *continued*



**Chairman's Circle** – Ken and Pat Kennedy  
*Accepted by Ken and Pat*



**Chairman's Circle** – Ron and Carol Waeckerlin  
*Accepted by Ron and Carol*



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3rd quarter: July 1 - September 30, 2012

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*Donations of all sizes are greatly appreciated. For more information about how you can contribute, call (307) 633-7667.*

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## Empowering Patients, One at a Time *continued from page 4*

“We don’t turn anyone away. While we are mostly a primary care provider, we do some urgent care as some people won’t go to the emergency room because of costs,” says Tasha.

“Dr. Hagemeyer, the Center’s Medical Director, even took me to his gym and taught me some exercises that I can do at home,” exclaims Debbie. She also receives a monthly diabetic retinopathy screening from a volunteer optometrist and reduced-cost labs and medicines. The Center partners with several healthcare professionals who offer care at low cost.

“Cheyenne Regional is a huge partner. They process our labs and offer reduced-cost diagnostic tests, like MRIs. They also create connections for us with specialists and other providers. We are very grateful to them,” exclaims Tasha.

The Center will deliver more than 10,000 patient visits this year. With same day scheduling, patients can be seen the same day they request an appointment. Patients have their choice of providers, and the Center’s providers are available or on call around the clock. A case manager connects patients with other healthcare and social service resources.

“I don’t know where I would be without the Center. My blood sugar levels are steady; I’m eating better and walking every day. I can even keep up with my grandkids!” concludes Debbie.

# Ways to Give

By Stephen V. Stone, M.S., CFRE Executive Director



We fundraisers are a funny lot, especially when it comes to planned giving to your favorite charity. Often times we get caught up in the complexities of the creative and arcane ways people can leave a legacy gift. We bandy about such gobbledygook terms as CLT, CGAs, CRUTs, CRATs, NIMCRUTs and NIMCRATs. I recently read about one called a Shark Fin Lead Trust. Talk about complicated, and silly!! I think that all too often we get caught up in the sound of listening to ourselves talk and we lose the most important thing of all. . . YOU!

Planned giving needn't be complex to have a huge impact on the non-profit you select, and what's more, most everyone can do it very easily. Let's consider some very easy planned gifts available today.

Finding simple ways to help your favorite non-profit organization grow and flourish for years to come is easy and rewarding. In fact Cheyenne Regional Medical Center is still benefiting from gifts that people made long ago, and that's a powerful way to leave a legacy!

**Life Insurance** Many individuals purchased life insurance policies throughout their lives for various reasons and may not have need of them any longer as their circumstances have changed. Whether whole-life or term insurance, you can easily change your beneficiary to include CRMC through the use of a Beneficiary Change Designation form available through your insurance agent or the company which issued the policy. Designating CRMC as your beneficiary for all or a portion of your policy death benefits is an easy way to create a legacy of support for the organization.

**Savings Accounts** Wyoming statutes allow for what is called Payable On Death (POD) or Transfer On Death (TOD) designations to your savings accounts. You can designate the money in the account to other individuals or non-profit organizations, and the funds are not counted in your estate for probate purposes. As owner of the account, you control the account and can change beneficiary designations at any time. If you designate a non-profit organization as your beneficiary all funds in the account pass to the organization tax-free. Your personal banker can assist you with setting up such an account.

**Wills and Bequests** If you have a personal will (and everyone should, regardless of the size of their estate), you can include the name of your favorite charitable organization as a beneficiary of your estate. In many cases, families include a non-profit to receive a portion of funds from their estate. This is usually done through a percentage designation of the total estate. For example, an individual or couple may designate that some amount of their estate, say 4, 6, 8 percent or some other amount be directed toward their favorite charity.

**Individual Retirement Accounts (IRAs)** This may be a limited option due to potential changes to federal law, but for now you may donate IRA distributions to your favorite charity if you are 70 ½ or older. If you meet this criterion you may transfer up to \$100,000 from your IRA. The amount of the charitable contribution is excluded from your taxable income, but you can't double dip and take a tax deduction for the donation, too.

**If you are interested in exploring any of these options I would be happy to meet with you at your convenience. You can reach me directly at my CRMC Foundation office by calling 307-633-7645 or by e-mail at [Stephen.Stone@crmcwy.org](mailto:Stephen.Stone@crmcwy.org).**

# EAC Grants

The gifts listed below were made to Cheyenne Regional Medical Center through the Foundation Board. The Foundation’s Endowment Advisory Committee meets bi-annually to review grant requests from various hospital departments. The Board approves grants to provide direct budget relief to Cheyenne Regional and are used to purchase much needed hospital equipment and to supplement programmatic expenses. The funds provided from the Cheyenne Regional Foundation during 2012 are as follows:

Acute Rehab Unit-Facelift .....	\$14,000
Acute Rehab Unit-Therapy Equipment ....	\$5,568
Cardiac Rehab/Pulmonary Rehab- Recumbent Bikes .....	\$6,951
Care Coordination-Indigent Supplies .....	\$6,000
Cheyenne Oncology/Hematology-Piccolo Lab Instrument .....	\$14,482
Davis Hospice Center-12 Televisions .....	\$12,137
Davis Hospice Center-Bird Seed .....	\$1,500
Davis Hospice Center-Educational Materials .....	\$7,737
Davis Hospice Center-Ice Machine .....	\$3,460
Davis Hospice Center-Medical Equipment .....	\$23,367
Davis Hospice Center-Water Feature Repairs .....	\$22,000
Denim ‘N Diamonds 2012-Telebridge ...	\$213,000
Emergency Department-EKG Machines & Software .....	\$46,813
Endoscopy-CO2 Efficient Endoscopic Insufflator .....	\$26,193
Endoscopy-Traveling Cart .....	\$6,850
Lab/Nursery/CDU-i-Stat .....	\$17,455
OP Rehab-Diathermy .....	\$8,500
OP Rehab-Game Ready .....	\$7,754
Organizational Development-Clinical Education .....	\$4,605

Organizational Development-Lactation Pumps-West .....	\$5,000
Pastoral Care-BHS-Art Supplies .....	\$430
Radiology-Lead Aprons .....	\$9,000
Radiology-Nuc Lab .....	\$10,000
Special Care Nursery-Retinopathy Equipment .....	\$3,057
Women & Children-Postpartum Training .....	\$10,000
Women & Children’s Services-Electrified Locks .....	\$11,100
Women & Children-Special Needs Forums .....	\$10,000
Wound Management-Oxygen Leads .....	\$18,240
WY Heart & Vascular Clinic-Ladies in Red 2013 .....	\$4,000

**Grand Total: \$529,199**



*Insufflation is the practice of injecting inert gases, such as room air, into a body cavity for medical procedures. There can be increased patient comfort by using a CO2 insufflation device as shown here. Three of the CO2 devices were purchased because of the generosity of Foundation donors.*

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## Physician Profile

# Dr. Ashutosh (Ash) Goel, Hospitalist Physician

Did you know the landscape of Cheyenne is similar to that of parts of northern India? As a young doctor deciding where to settle in the United States, Dr. Ash Goel selected Cheyenne because it reminded him of home: “Cheyenne is similar to the small town in India where I grew up, near the base of the Himalayas,” says Dr. Goel.

Dr. Goel is not your typical family practice physician. He is a member of a team of eight physicians who serve as hospitalists at Cheyenne Regional. Hospitalists are a newer specialty of medicine where doctors take care of other doctor’s patients who need acute care in the hospital, rather than maintaining their own practice or clinic. “We have several arrangements with multispecialty physician groups in town to take care of their patients when they require hospitalization,” adds Dr. Goel who serves as the Lead Hospitalist of the Cheyenne Regional’s Hospitalist Services group.

Dr. Goel finds his work as a hospitalist extremely rewarding: “The best part of my job is being able to help high acuity patients and give them my undivided attention. As a hospitalist, I can see the same patients several times a day. It’s rewarding to be able to see them through their critical illnesses.”



*Dr. Ashutosh (Ash) Goel*

He also enjoys the culture and atmosphere at CRMC: “Since my group is at the hospital full time we form close relationships with the nurses and other staff. At Cheyenne Regional I feel a strong sense of belonging and respect. It’s a very positive work environment.”

Because of his gratitude for Cheyenne Regional and its good work environment, Dr. Goel feels it’s his “duty to give back.” That’s why he supports the Foundation.

“It’s important for me as a physician and a leader at the hospital to help the Foundation advance healthcare in the community,” he adds. Dr. Goel is leading the hospital’s efforts to implement *True Connect*—an expansive update of CRMC’s clinical information systems.

Dr. Goel’s family enjoys participating in Cheyenne community activities and relishes exploring the nearby mountains. His wife Arti is a successful senior systems analyst for an out-of-state company. His two girls Amiti, age 8 and Aanya, age 4 (who was born at Cheyenne Regional) are a part of the Trailblazer gifted and talented program through Cheyenne schools.

Dr. Goel is one of more than 20 doctors in his family—several of whom are spread out across the U.S. He has practiced at CRMC for the past six years.