

Kenner Army Health Clinic

Health Care Guide

FALL 2012



Your Care. Your Trust. Our Mission.

COMMANDER'S WELCOME

It is my pleasure to share our annual fall healthcare supplement to the *Fort Lee Traveller* – Kenner Army Health Clinic's Health Care Guide. Inside you'll find information about the latest initiatives here and within Army Medicine.

The past year has brought significant new growth and missions to our community which we have featured within the supplement. We've focused on topics such as the Army's adoption of the Patient-Centered Medical Home model, the importance of health screenings, our social media activity as well as other topics of interest to our patient population.

We are most proud of our continuity of care and commitment to gaining your trust. Our tagline "Your Care, Your Trust, Our Mission" embodies what our military and civilian team members strive for every day. Our goal is to be the primary care provider of choice for TRICARE Prime beneficiaries and the Department of Defense's premier integrated system for health.

Continuity of care is measured in terms of how well we do at meeting our beneficiaries medical needs. We welcome your feedback and encourage you to use one of three ways to provide us with feedback on your experience at Kenner. After your appointment at Kenner, you may receive a Army Provider-Level Satisfaction Survey (APLSS) from the Army Surgeon General. You can also fill out the online Interactive Customer Evaluation (ICE) comment care to share your experience at Kenner. You also have the option to talk with the Kenner Patient Advocate either by visiting her office or texting your concerns to 804-267-0338.

My command team and I hope you enjoy our Fall Healthcare Supplement and look forward to providing you with quality and compassionate healthcare in the coming year!

"Your Care. Your Trust. Our Mission."

Col. Joseph S. Pina
Commander, Kenner Army Health Clinic
Fort Lee, VA



ELEMENTS OF SUCCESS: Many Kenner Facilities New, Improved

by **Tim Nolan**
Facilities Management Division Chief

Facility construction and revitalization activity has been robust and energetic in 2012 for the Medical Department Activities (MEDDAC), Dental Clinics, and Veterinary Clinic at Fort Lee. To serve the growing medical and dental needs of military members brought to Fort Lee by the 2005 BRAC legislation, an additional Combined Troop Medical and Dental Clinic (TMC #2) was completed in Sept. 2011. The new 34,000 square foot facility serves the advanced individual training population on the Ordnance Campus.

At the main Kenner Army Health Clinic (KAHC) facility, several different projects have been completed to upgrade or renew areas. Some are visible to our patients including installation of marketing media information monitors (the large televisions located throughout the clinics), a new annex on the 2nd floor for patient administration, landscaping improvements, the main break room renovation, and numerous other small projects that contribute to an improved quality of life for all who utilize KAHC. The marketing information system helps enhance awareness and delivery of real-time information to our customers. In the pharmacy, a new robotic dispensing system and patient queuing system have combined to improve pharmacy wait times and keep patients informed with window service information. A less visible, but equally important project was the complete replacement of the boilers that service the heating system.

There are several other projects planned for KAHC in fiscal year 2013 to include replacement of the facility fire alarm system, addition of a mass notification system, and the testing/balancing of the heating ventilation and air conditioning system to ensure efficiency and extend life-cycle costs.

Other upgrades are planned for the corridors on the 1st floor with a complete renovation of the reception/lobby desk area and renovation and upgrades to the restrooms near the main entrance. Exterior refurbishments include painting of the canopies at all entrances to the clinic, installation of a card reader door lock system, and installation of a bi-fold automatic door system at the main entrance. In partnership with AAFES, a new Java Junkiez Café opened recently near the 1st floor lobby elevators. Menu items include coffee, espresso, lattes, smoothies, a variety of wraps and salads. The café is open 6 a.m. to 4 p.m. Monday-Friday.

The Col. Bull Dental Clinic renovation project was completed this year and includes the state-of-the-art dental equipment. The building renovations also included an expansion to provide eight additional dental treatment rooms. Future plans for the dental clinic include an exterior site work drainage project with new sidewalks and replacement of the building's vacuum pumps.

The responsibilities of KAHC also extend to the Lois E. Wells Clinic located at Fort A.P. Hill. In August 2012, staff relocated into a temporary facility which will allow for the complete renovation of the clinic between now and February 2013. Upon completion, a modern facility capable of providing outstanding medical care will service that installation.



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Understanding TRICARE Benefits and Referral Process



by **Capt. Lori B. Gatrell**
Managed Care Division Chief

Kenner Army Health Clinic's mission and commitment to its beneficiaries is to provide access to high quality healthcare.

The majority of Kenner's clinics are open from 7 a.m. to 4:30 p.m. Monday through Friday, except the Active Duty Clinic which is open from 5:45 a.m. to 4 p.m. Monday through Friday. Patients are provided around the clock access to medical services by booking appointments during business hours, obtaining referrals from the on-call provider to urgent care and accessing local emergency rooms when necessary.

Scheduling an appointment with Kenner clinics during duty hours can be done one of two ways: Using TRICARE Online, available 24 hours a day, is a convenient and easy way to book an appointment. Register with TOL and get the benefit of using a secure web-portal to make or cancel medical appointments, review medical claims, order prescription refills and make enrollment changes from most Internet connected computer systems. You can

also access the Patient Appointment Line at 1-866-LEE-KAHC (533-5242) from 6 a.m. to 7 p.m., Monday through Friday.

Occasionally non-emergent medical services are needed when Kenner providers are not available. If you are in need of urgent care after 4 p.m., you must contact the administrative officer of the day (AOD) to speak to the on-call provider at (804) 734-9000 before seeking treatment at a civilian facility. The on-call provider will determine the level of care required. If you are referred to urgent care, a referral will be entered to ensure your medical claim will be paid.

TRICARE Prime enrollees must obtain authorization for all urgent, specialty, and certain routine care. Dependents will be charged a point of service fee that equals a \$300 deductible and 50 percent of TRICARE's allowable amount if the care was not authorized before receiving care. Active Duty Service Members must obtain a referral for all care outside the MTF. ADSMs who receive unauthorized urgent, specialty, or routine care will be liable for the entire amount.

Sometimes, emergencies arise and require an

emergency room visit. TRICARE defines an emergency as a medical, maternity or psychiatric condition that would lead a "prudent layperson" or someone with average knowledge of health and medicine to believe that a serious medical condition exists or that the absence of immediate medical attention would result in a threat to life, limb or eyesight. It is also considered an emergency when a person has painful symptoms requiring immediate attention to relieve suffering. This includes situations where a person is in severe pain or is at immediate risk to self or others. Emergency room visits are covered under TRICARE benefits and do not require an authorization or referral. Additionally, patients must coordinate any follow-up care from the emergency room or urgent care facility visits with the Primary Care Manager before seeking any additional treatment.

If advised to go to an emergency room for a life threatening condition, dial 911 or go to the nearest hospital.

For more information about services available at Kenner Army Health Clinic, visit [www. http://kenner.narmc.amedd.army.mil/Default.aspx](http://www.narmc.amedd.army.mil/Default.aspx)

TRICARE ONLINE Streamlines Access

by **Capt. Lori B. Gatrell**
Managed Care Division Chief

The logon process for TRICARE Online is about to get much easier. Beginning in October, TOL will streamline access and start authenticating users through the Defense Manpower Data Center Access Center.

TOL is the Department of Defense DoD Patient Portal offering authorized TRICARE beneficiaries 24 hours a day, 7 days a week access to Blue Button personal health data, online appointments, prescription refills, secure messaging and health and wellness information.

TOL is a secure, Internet-based program that offers information and appointment assistance for Military Health System beneficiaries including online primary care appointments, extensive reliable health information, disease tracking and management tools and links to TRICARE benefits.

The benefits of scheduling appointments online include convenience in comparison to telephone and in-person appointments, ability to schedule appointments for routine and urgent health care needs and the ability to

book multiple appointment dates and times from which to choose.

In addition to the benefits for patients the system helps improve the military treatment facility's efficiency and cuts down on expenses by reducing no-shows and telephone calls to the appointment and clinic staff.

Soon TOL users will be able to logon with their Defense Finance and Accounting Services myPay username and password, in addition to their Common Access Card and Self-Service logon either basic or premium.

The DFAS myPay account, available to all active duty Service personnel and retirees provides a new easy and convenient way to logon to TOL.

CAC, DS Logon (premium) and the myPay user identification and password are the most secure and preferred ways to logon since they allow users to access all available information and services. The DS Logon (basic) account limits users to booking appointments and/or ordering prescription refills on an individual basis.

Family member booking and Blue Button access



is not available to DS Logon (Basic) account users. Authorized TOL users can also access TOL through the Army Knowledge Online, Air Force Global Command

see **ONLINE** on page 9

Dental Clinic Ensures Mission Readiness

by **Capt. Candace DeVeaux**
Col. Bull Dental Clinic Dentist

In July, Col. Edward Cathright Jr. took command of the Fort Lee Dental Clinic command after a stint at Fort Rucker, Ala. Cathright said he has settled in and is embracing Fort Lee as his new home.

"I am looking forward to continuing the great work that has preceded me here," he said. "As the new commander one of my primary goals is to improve dental readiness among the Soldiers here at Fort Lee." The current oral health status of military personnel is classified as the following:

- **Dental Class 1:** Indicates patients with a dental exam that is current (within one year) who do not require dental treatment or re-evaluation. These patients are worldwide deployable.
- **Dental Class 2:** Patients with a current dental exam, which require non-urgent dental treatment or re-evaluation for oral conditions which are unlikely to result in a dental emergency within 12 months. Examples of non-urgent dental treatment are minor defective restorations and dental decay, as well as cleanings. Class 2 patients are worldwide deployable.
- **Dental Class 3:** Patients require urgent or emergent dental care. Class 3 patients are not worldwide deployable.

These patients require treatment for large dental decay, tooth fracture involving severe pain or defective restorations that cannot be maintained by the patient and also, chronic oral infections associated with wisdom teeth.

• **Dental Class 4:** Patients require an annual dental exam or those with unknown dental classifications. These patients are not worldwide deployable.

Dental readiness can affect a military member's ability to complete a mission. Something as simple as a minor toothache due to a small cavity, if left untreated, can escalate into a significant inconvenience for the patient and his/her unit. Maintaining annual dental exams can circumvent dental emergencies and improve readiness in addition to dental wellness of the unit.

Col. Bull Dental Clinic is located at 2601 C. Ave. bldg. 8204, with operating hours of: 7:30 a.m. to 4:30 p.m.

Sick Call hours are 7:30-10:30 a.m., walk-in exam hours are 7:30-10:30 a.m. and from 12:30- 4 p.m. For more information, call the clinic at (804) 734-9607 or 734-9608.

Troop Medical/Dental Clinic No. 2 is located at 300 Central Ave., bldg. 18036 on the Ordnance Campus. Hours of operation are 7:30 a.m. to 4:30 p.m., sick call is from 7:30-10:30 a.m., walk-in exam hours are 7:30-10:30 a.m. and 12:30-4 p.m. For more information, call 734-5365 or 734-5454.



Changes in TRICARE Prime Enrollment Fees Coming

by **Joyce Harris**
Managed Care Division,
Health Benefits Adviser

In July, TRICARE Management Activity Officials announced that Fiscal Year 13 would bring an increase in enrollment fees for retirees and their families.

The National Defense Authorization Act for fiscal year 2012 allows for annual increase of TRICARE Prime enrollment fees for most retired beneficiaries based on the annual cost of living adjustment. Exceptions to annual increases are for survivors of active duty deceased sponsors and medically-retired service members and their dependents. Survivor and medically-retired service member fees remain frozen at the rate in effect at the time they are classified in the Defense Enrollment Eligibility Reporting System as survivors or medically retired and enrolled. Fees

remain frozen as long as there is no break in their TRICARE Prime enrollment.

Beginning October 1, individual retirees will be charged \$269.28 per year, while families will pay \$538.56. Retirees enrolled prior to October 1, 2011, will see a more significant increase since their enrollment fee remained at the 2011-levels of \$230 and \$460, when fees increased last year.

There is no enrollment fees for active duty service members and active duty family members enrolled in TRICARE prime, TRICARE Prime Remote, or TRICARE Prime Remote for active duty family members.

For more information about TRICARE Prime benefits and costs, visit www.tricare.mil/costs or visit the Kenner Health Benefits Advisers, Building 8130, located on the second floor, room C216 and C-218.



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• **MEERA A. GOKLI, D.D.S.**

Dr. Gokli graduated with honors from the University of Richmond. She was President of the Virginia Society of Pediatric Dentistry, an Associate Professor at MCV/VCU and she is Board Certified in Pediatric Dentistry.

• **STEVEN R. LUBBE, D.M.D.**

Dr. Lubbe graduated from the University of Kentucky. He was also elected into OKU, the national dental honor society, and graduated in the top 5 of his class.

• **DAVID L. KEETON, D.M.D.**

Dr. Keeton received his undergraduate degree in biomedical engineering from VCU. He then completed dental school at the University of Kentucky. Dr. Keeton did a year of private practice with Dr. Beverly Largent, 2008 President of the American Academy of Pediatric Dentistry. He fulfilled his pediatric dental residency at the University of Texas Health Science Center at San Antonio.

Orthodontics for Adults & Children

• **APRIL L. BRIDGES - POQUIS D.D.S.**

Dr. Bridges is a Phi Beta Kappa graduate of the University of Virginia. She graduated 2nd in her class from MCV School of Dentistry where she also completed her post-graduate training in orthodontics.

• **CHAD SCHANILEC, D.D.S.**

Dr. Schanilec is a graduate of The University of Iowa College of Dentistry and completed his post-graduate training in orthodontics at MCV. He has also served as a full time professor at MCV.



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Health Screenings: Am I Due?

by Mary Ann Crispin
Disease Management Clinic

Are You Due for A Mammogram?

Women in the United States get breast cancer more than any other type of cancer, except skin cancer. While breast cancer can take years to develop, women rarely have any symptoms in the early stages. That is why mammograms are one of the most important tools available for detecting breast cancer early. Keep reading to learn more about the importance of mammograms.

When Should I Have A Mammogram?

- Women under 40 with a family history of breast cancer or other concerns about personal risk should talk to their health care provider about when to begin mammograms.
- Women age 40 and older should have a mammogram every year, and should continue to do so for as long as they are in good health.
- Mammogram frequency for women 65 and older should be based on the woman's health and whether or not she has other serious illnesses.

What Can I Expect During My Mammogram?

A typical mammogram takes two x-rays of each breast, although more may be needed to include as much breast tissue as possible. During the exam, the breast is compressed between two plastic plates. The compression ensures minimal movement and a sharper image. Although this compression may be uncomfortable, it is required and only lasts for a few seconds. Don't be overly concerned if your doctor asks for more tests, since studies show a very small percentage of mammograms lead to a diagnosis of cancer.

Mammogram Tips

- Here are some things to consider when scheduling and preparing for your mammogram.
- Before scheduling your exam, talk with your health care provider about any breast symptoms or problems you may be having, prior surgeries, hormone use, and any family or personal history of breast cancer.
- Schedule your exam when your breasts are not tender or swollen. This will help reduce discomfort and ensure a good picture. Try to avoid the week just before your period.
- On the day of the exam, don't wear deodorant or antiperspirant as they can interfere with the x-ray.
- Wear a shirt that can be easily removed since you will only need to undress from the waist up for the exam.

Mammograms, along with clinical breast exams, self-exams and general breast awareness, are the most effective ways to detect breast cancer early. When breast cancer is detected early, the survival rate increases significantly. Talk to your health care provider to see if you are due for a mammogram.

Sources: American Cancer Society and National Cancer Institute

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Military treatment facilities including Kenner Army Health Clinic (KAHC) take an active role in developing processes to improve the health of KAHC beneficiaries. Recognizing the importance of early detection with health screenings is a part of Kenner's mission of care.

The Healthcare Effectiveness Data and Information Set (HEDIS) is the most widely used set of

standardized performance measures for the majority of health care plans in all facilities –military and civilian. Many of these nationally recognized standards measure preventive screenings or management of a chronic illness such as breast cancer, cervical cancer, colon cancer, diabetes and

chlamydia with the goal of providing improved health care quality.

These key concepts are developed into a group of nine measures collectively termed HEDIS that is a set of standardized performance measures to establish accountability in health care.

For the patient, it means that the healthcare received at KAHC is measured against all other health plans. A facility that provides care and follows HEDIS measures receives a score. A facility that maintains in excess of the benchmark receives funding. If the benchmark is not maintained no funding is received. The revenue generated from HEDIS can increase the quality and the delivery of care for the facility. Revenue can be funneled into more education programs, equipment or staff to increase the services available, all by simply maintaining good preventive screenings or management of chronic conditions. A successful "report card" is achieved when all agencies work together to get preventive screenings done.

Disease management at KAHC is involved in the collection of data that we use to monitor, develop, implement and evaluate HEDIS measures for a specific population. The benefit of this process is helping beneficiaries maintain the necessary health screenings, lab work and follow-up care to reach optimal health.

Disease Management provides education, resources and outreach to KAHC beneficiaries to help patients manage their care. Reminder letters, birthday cards and health fairs are some of the methods generated monthly to advertise the importance of the health screenings.

KAHC provides ambulatory services and specialty care with services available in a robust network of providers within the community. Health screenings can also be done "outside" of Kenner. Beneficiaries may choose to have a network provider complete health screenings. Please provide a copy to Kenner of any visits "outside" of Kenner. Then a complete record of the care can be maintained where the patient is enrolled.

For more information about how Kenner compares to peer facilities, call (804) 734-9674.

Pharmacy Gets New Technology

By Leonard Drost
Pharmacy Services Chief

In June 2012, the Pharmacy took a big step forward in the age of technology by installing a robotic prescription filling system in the refill section.

This system is fascinating to watch as it fills, caps and labels prescriptions based on information from the main computer system. About 60 percent of the refills can be processed through this robot, saving time for both pharmacy staff and patients. Most importantly, it is a much safer system that incorporates numerous features to minimize errors.

The refill process is simple, and almost transparent to patients. Once patients use the internet, or call-in their refill information to the 24/7 automated system, the robot interfaces with the main computer that later allows staff to retrieve the prescription information. Behind the scenes, the pharmacy staff completes the filling process where the robot plays a key role.

One thing patients will notice about their refill bottles is the new label format. The size of the lettering is usually larger than normal, making the information easier to see and read.

The Pharmacy Services staff looks forward to continuing to serve its customers.



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Kenner Uses Social Media to Reach Community, Beneficiaries



by **Kimberly K. Fritz**
Public Affairs Specialist

Since taking command of Kenner Army Health Clinic more than a year ago, Col. Joseph S. Pina has used social media outlets like Facebook and Twitter to connect with the Fort Lee community and the clinic's beneficiaries. Pina, like many other military leaders, has embraced the social media movement as an additional avenue to share news about health care, events for veterans and retirees, and happenings within the clinic.

"Social media can be a fun, inexpensive and effective way to communicate," he said. "Social media has simplified keeping people informed."

As the commander of a military treatment facility, Pina has both an internal and an external audience. He uses the clinic Facebook page (www.facebook.com/kennerfilee), Twitter presence (@KennerACH) and his own Twitter identity (@KAHC_CDR) to post messages to inform clinic patients and personnel – two distinctly different audiences or groups.

"Our social media audiences include our stakeholders, our health care beneficiaries, Fort Lee leaders, KAHC

staff members and the public," he said.

Finding a balance between the two types of messages and two audiences is one of his top priorities, he said.

"We are working to grow our social media presence," Pina said. "The Army Surgeon General wants her leadership to use social media as a tool to better connect with beneficiaries and foster trust in Army Medicine."

One of the goals in using social media is to influence patient health in a positive way, he said.

"We realize that primary care managers have a brief amount of time during medical appointments to make a positive impact on our beneficiaries' overall wellness," he said.

Another of Pina's goals is to make KAHC the primary care provider of choice for TRICARE Prime beneficiaries and the Department of Defense's premier integrated system for health.

"In order to achieve this I feel we must do more than communicate with our patients," he said. "We must connect with them. Social media can help us do that."

The commander isn't focusing only on the health care population at Kenner but also military personnel and federal employees.

"I want Kenner to be the preferred place on Fort Lee for people to work," he said. "I believe Facebook and Twitter will help me connect with my staff in a way that complements my face-to-face encounters, emails, town hall meetings and other communiqués."

Pina said he hopes to grow his following and influence wellness in the community.

"The best feature of social media is that we can be engaged and interactive with patients," Pina said. "I invite everyone to like us on Facebook and follow us on Twitter."



Kenner Nurses Earn Coveted Nominations

Four Kenner Army Health Clinic nurses were nominated for the Virginia March of Dimes Nurse of the Year Award. The March of Dimes will recognize 14 or more Virginia Nurses in a variety of disciplines for their work in their communities, impact upon the nursing profession, leadership and other criteria. The awards will be presented at the Nurse of the Year Awards Gala on Nov. 10.



Capt. Darci Martinez

Clinical Nurse Officer in Charge
Troop Medical Clinic 1



Julia E. Patsell

Family Nurse Practitioner
Wilkerson Pediatrics Clinic



Ivey Sweeney

Clinical Nurse
Troop Medical Clinic 2



Karen Keel

Nurse Coordinator
Troop Medical Clinic 1

Increase Your Health Literacy, Decrease Your Risks

by David Bolesh
Patient Safety Manager

More than ten years ago, the Institute of Medicine revealed the shocking reality that in the U. S. health care systems there are nearly 100,000 unnecessary deaths yearly. Subsequent studies have shown that up to 40 percent of patients experience an adverse event while in the hospital. These include 2 million hospital acquired infections.

The Joint Commission, National Patient Safety Foundation, Institute for Safe Medication Practices and many other private and governmental agencies have been working to prevent these unintended but often catastrophic events.

There are many components in health care delivery systems thereby increasing the chances an error will occur. Our health care systems become more complex almost daily with new medications, new technology, information overload and the never-ending administrative load for health care professionals. Health care organizations work diligently to identify and correct the systems to prevent medical errors. Creating an environment and culture where everyone feels comfortable to express their concerns is critical. In order for patients and their families to fully participate they must have an adequate level of health literacy.

Health literacy is defined as “The degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions.” Literacy, the ability to read and write, is considered low in about 50 percent of the United States population. It has been estimated that low literacy costs health care systems as much as \$200 billion annually. The costs are incurred from misunderstood prescriptions, self-care instructions, educational material or follow-up appointments. These can lead to prolonged illness, increased pain, unnecessary hospitalizations, as well as preventable disability and death.

Studies have shown that as much as 50 percent of prescriptions are not followed correctly by patients.

In outpatient medical care, medication errors are the most common and the main reason for health care complications. Communication with your health care team (doctors, nurses and pharmacists) is the key to preventing most medication errors.

Some ways to mediate the risks are the following:

- Always keep a list of your medications up-to-date and with you. Be sure to include herbals, supplements, vitamins and all over-the-counter medications.

- Review your medication list with your health care team during each visit.

- Confirm with your health care team when and how you are supposed to take your medications.

- Read the printed information provided with your medications.

- Know specifically what each medication is for, and when to expect results.

- Know what the possible side effects are for each medication. Let your health care team know if you have any side effects or reactions to your medications.

- If you are pregnant, trying to get pregnant or nursing a baby, always tell each member of your health care team.

- Know your allergies to medications and food, share it with your health care team and include it on your medication list.

- Take your medication when and for as long as you are supposed to. If you need to stop the medication notify your health care team.

- If you take multiple medications ask a pharmacist to review them for possible problems such as drug interactions.

The National Patient Safety Foundation and KAHC recommend you use the questions to improve communications with your health care team and improve your health literacy. The first is “What is my problem?” The problem could be an acute problem such as you have an infection a chronic problem such as diabetes or a health maintenance problem such as obesity. Knowing what your problem or problems are will define the objectives or goals of your care.

The second question: “What do I need to do?” You cannot fully participate in your care if you do not know what actions you can take to improve your problem. As mentioned earlier errors by patients in taking their medications is a significant problem in health care. Be



sure you clearly understand. Ask for further clarification and written instructions if you are not sure. It helps to repeat the instructions back to the health care providers so that they know you understand as well.

The third question is “Why is it important for me to do this?” If you do not understand what the recommended treatment is expected to accomplish you will not know if it is effective. For example if you think taking a cholesterol medication is only to lower your cholesterol you may stop when it that is achieved. If you know it is to help prevent a heart attack or stroke for the rest of your life you are more likely to continue taking it. To learn more about the “Ask Me 3” and other patient safety initiatives visit www.npsf.org.

You are the most important person when it comes to your health literacy. When you do not understand ask for clarification. Don’t be embarrassed because you don’t get it the first time. Medical terminology is complicated and you cannot expect to understand everything. If you have access, use the Internet to research your health issues. Write down any questions you have so that you don’t forget to ask them at your next appointment. If you need an answer sooner call your health care team. Don’t be intimidated by health care professionals. They are people just like you who are there to work with you to achieve your optimal health.

For more information about patient safety at Kenner Army Health Clinic, call (804) 734-9028.

Kenner Army Health Clinic (KAHC)

Transitions to Model of Patient-Centered Care

by **Teresa Wade**
Public Affairs Officer

By spring 2013, Kenner Army Health Clinic will establish four medical home-type clinics and will seek national recognition by the National Committee for Quality Assurance – a certifying body for primary care practices.

Patient Centered Medical Home is a model of healthcare adopted throughout the military healthcare system. The four medical homes will be located within the primary care clinics, the Active Duty, Family Medicine (formerly known as the Primary Care Clinic), Pediatrics and Internal Medicine, said Stephen Boychuck, Kenner PCMH project lead.

“The staff at here is excited to implement this model,” he said. “We always look for new ways to improve the quality of care we provide and this model will definitely take us to the next higher level,” he said.

PCMH models increase access to primary care, expands the definition of healthcare quality and reinforces Kenner’s commitment to customer service, Boychuck explained.

“As soon as a patient enrolls in one of Kenner’s primary

care clinics, the KAHC team will proactively engage the patient as a ‘partner in care.’ The PCMH starts with this face-to-face encounter and expands from there. Patients are assigned to a team of healthcare providers, such as physicians, nurses, behavioral health professionals, to develop a comprehensive, personal healthcare plan. This includes ensuring delivery of prevention screening and services, managing chronic conditions, and promoting a spirit of health, wellness and trust. At this point, the patient becomes the center of his or her own health care team. Collectively, patients and health care teams can take advantage of telephone and web-based communication to follow-up on health issues and concerns, share and update information and coordinate care delivery.

“With the transition of PCMH at Kenner, our enrolled patients have the opportunity to partner with their entire primary care team,” said Boychuck. “This translates to superior access and healthier patients. Each PCM team is led by a physician, physician assistant or nurse practitioner, who is supported by registered nurses, licensed practical nurses, Soldier medics, nursing assistants/medical assistants and medical receptionists. The PCM team approach for delivering a system of health becomes more personalized.”

Patient Centered Medical Home services are easy to access, patient-centered, team based, and quality focused. As patients interact with their healthcare teams, they will immediately realize they have more flexibility in managing their healthcare.

“The PCMH model is a total healthcare package for patients,” he said. “It is team driven with the patient and family in the driver’s seat. The healthcare team is responsible for improving outcomes from acute and chronic diseases affecting patients and their family members. Wellness and preventive care are the basis of our medical home.”

To learn more about this program, visit the Kenner Army Health Clinic Website at <http://kenner.narmc.amedd.army.mil> or www.tricare.mil/tma/ocmo/PatientCenteredMedicalHome.aspx. Like Kenner on Facebook at www.facebook.com/kenner.ftlee.



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Odds of a child being diagnosed with autism: 1 in 150

Some signs to look for:

No big smiles or other joyful expressions by 6 months. No babbling by 12 months. No words by 16 months.

To learn more of the signs of autism, visit autismspeaks.org



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It's time to listen.

NEWS BRIEFS

Update Insurance Information

Patients should update their other health insurance information with the Patient Administration Division of Kenner Army Health Clinic. It only takes a few minutes to update the information while at the pharmacy reception desk and must be done yearly.

Funds collected from other health insurance companies pay for new services, additional staff and state-of-the-art equipment at the clinic. Patients are not billed for any amounts the other health insurance does not pay. Nor will they be excluded from care at KAHC because they carry other health insurance.

Last year, Kenner earned more than one million dollars by billing other health insurance companies or policies. For details, call (804) 734-9937.

Open House

Kenner Army Health Clinic will host a community and veterans' appreciation Open House and Patient-Centered Medical Home Kick-Off at the clinic 11 a.m. to 1 p.m., Nov. 8.

The open house will offer education and awareness opportunities about services at Kenner including the clinic's transition to the Patient-Centered Medical Home model. Seasonal flu and pneumonia vaccines will also be available.

For details, call (804) 734-9086 or 734-9186.

No Shows

Kenner Army Health Clinic is working to decrease its number of "no shows" or people who fail to show up for or cancel an appointment. A scheduled appointment can be canceled by calling 1-866-533-5242 at any time. Patients are asked to cancel appointments at least 24 hours in advance or as soon as they know they will not be able to keep the appointment.

When appointments are cancelled other Soldiers, family members or retirees can fill those time slots.

"No shows" reduce the productivity of the health care provider teams. The loss of productivity is a waste of time and money, and takes appointments away from others who need them.

For details, call (804) 734-9126.

New Audio Communicator Reminds Patients of Referral Status

by Beverly Rank

Referral Management Center Chief

Last year, Kenner Army Health Clinic began using an audio communicating system that helps keep patients informed about the status of their referrals.

Audio Communicator calls are automated contact with KAHC beneficiaries when referrals are given for specialty services by their primary care managers. These calls remind patients of their status in the system and provide additional information like where to get further details.

The system serves as a reminder of their referral and that they need to obtain appropriate care that they were unable to get at Kenner's clinics. This is a valuable tool to track referrals and assist patients with their referrals.

These "robo-calls" also give data about where to get information about the provider with whom they will obtain results of their referral visit. Beneficiaries will receive reminder calls at specified days after the referral is entered into the Audio Communicator system. Calls are currently placed for referral ages of 20, 60, 65 and 75 days with a status of either "defer to network or appointment to military treatment facility." Beneficiaries also have the option of leaving a message at the end of the call initiated by the Audio Communicator.

Network referrals that show results have been received and MTF referrals that have MTF appointments scheduled for the referral.

The system does not communicate when referrals are closed.

For more information about this system, call (804) 734-2273.

ONLINE continued from page 4

and Control Systems, and eBenefits Portals without having to re-enter their logon information.

When streamlined access is released, the numbers of steps necessary to logon to TOL will be reduced significantly and the need to register separately with MHS or TOL will be eliminated. These and other ongoing enhancements represent the TOL project team's commitment to improving the users' experience through continual website improvements.

As part of this upgrade, the old 15 digit password logon was retired August 17. If users are still using the 15 digit password based MHS identity authentication service username and

password, they need to register for a DS Logon Premium account today or use their myPay username and password to logon to TOL.

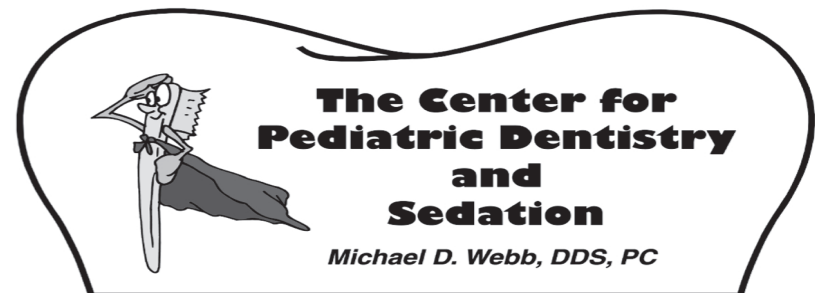
To register for a Premium DS Logon account, users can visit the DoD My Access Center website at <https://www.dmdc.osd.mil/identitymanagement/>. Click on Create a Basic / Premium DS Logon account link and follow prompts to create a Premium DS Logon account.

Help is always available for TOL users. If you experience problems or have questions regarding TOL, agents are available 24 hours a day to assist.

For technical support, call 1-800-600-9332.

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