

# ACHIEVING CLINICAL EXCELLENCE<sup>SM</sup>



Delivering Value in Our Community.

**Valley Preferred 2013 Progress Update**

# ACHIEVING CLINICAL EXCELLENCE<sup>SM</sup>

Delivering Value in Our Community.

## The sustainability of American health care

requires bold new processes designed to drive the highest quality of care using the most cost-effective methods. Defining and developing these processes is a challenge requiring collaboration between all stakeholders in the health care delivery system.

As the provider-owned preferred provider organization aligned with Lehigh Valley Health Network, Valley Preferred is now in its 19th year of Achieving Clinical Excellence through the development and implementation of a wide variety of innovative programs aimed at improving health care delivery and value in our community. We are fortunate to have recognized systemic challenges early on and are now employing clinically-integrated tools and processes developed by our own physician-driven organization. Using these tools, we are experiencing positive progress in our region's health quality/value ratio.

- **Population health management** is essential to Achieving Clinical Excellence and is reliant upon ready access to the analytics necessary to measure quality and cost effectiveness. Integrating varied sources of analytics into a composite picture has proven to be a major challenge. By providing financial support and education, Valley Preferred has made significant strides by bringing electronic health record systems into more physician practices and is now working to integrate additional components—such as payer claims data—into the composite analytics necessary for effective population health management.

- **The formation of Community Care Teams** provide primary care practices with specialized personnel support for patients with the most common chronic conditions. These teams are led by Registered Nurse care managers and include specialists in key clinical and social counseling disciplines. While relatively new, the Community Care Teams are already achieving measurable improvement in patient care and proving to be an effective way to bridge potential gaps in the health care continuum.
- **A grant to help build a new network information infrastructure** was funded by Lehigh Valley Physician Hospital Organization/Valley Preferred. One of the project's goals is to provide performance measurement standards agreed upon by both providers and payers (health insurance companies). The enhanced information will enable us to make knowledgeable decisions about new reimbursement structures.
- **Wellness education** was provided to a record number of employees through BeneFIT<sup>SM</sup>, Valley Preferred's health education and wellness program. Building on its reputation for high quality wellness solutions and responsive service, BeneFIT experienced a significant increase in utilization by regional employers during 2012.
- **Achieving Clinical Excellence<sup>SM</sup>** is moving the bar of medical care value through a series of interconnected Valley Preferred incentive programs which enable member physicians to participate in quality improvement initiatives, including clinical self-audits, electronic documentation of care goals, educational seminars and disease management patient enrollments. These programs enriched the growing cache of health data needed to pursue our objective of effective population health management.

- **Our community partnerships** also reached new levels of collaborative achievement. Through the diligence of Valley Preferred we have enhanced relationships with key influencers in the health insurance broker community and with the Lehigh Valley Business Coalition on Health Care. This past year also saw the inauguration of the Valley Preferred Tour de Hershey cycling fund-raiser.

▶ We are fortunate to have recognized systemic challenges early on and are now employing clinically-integrated tools and processes developed by our own physician-driven organization.

The combined vision and energy of our member physicians have elevated us to this plateau in our pursuit of Achieving Clinical Excellence. They will continue to guide us into a future focused on delivering ever-improving health care value in our community. Thank you for your continued support.

A closer look at these and numerous other Valley Preferred highlights of 2012 are in this *Progress Update*. These achievements are the result of countless hours shared by our member physicians and institutional partners. The true story behind the success of Valley Preferred's progress has always been the fact that *we are first and foremost a physician-driven organization*.

## Valley Preferred's MISSION:

To ensure high-value health care, satisfied patients and positive outcomes at an affordable cost.



(From left)

**Jack A. Lenhart, MD**, Executive Director

**Christina Lewis, MPH, RN, FACHE**, General Manager

**Selicia Chronister, CBC**, Director, Sales and Client Services

**Mark Wendling, MD**, Medical Director

## National Challenges. Local Solutions.

The scope of health care challenges may be national but their impact is local, affecting the well-being of families in our community. This is not news to Valley Preferred. Producing local solutions to address challenges in traditional health care delivery has defined the work of Valley Preferred for nearly two decades. Our physician-driven organization has been systematically developing an operating architecture enabling providers to enhance care quality and efficiency through a variety of successful delivery programs, all of which have been developed by our own member physicians.

Valley Preferred's Clinical Integration, Achieving Clinical Excellence and Quality Improvement initiatives have improved patient care, streamlined practice workflow and redirected some of the traditional ways in which member physicians are compensated for their time and talents. These programs have also managed to create more time for physicians to focus on keeping people healthy.

Valley Preferred is also a strong proponent of primary care as the pivotal point of the health care continuum. We provide substantial support for the incorporation of electronic health records into paper-based practices and the transition of regional primary care practices to the Patient-Centered Medical Home care model. We also pioneered the NCQA-certified Disease Management programs currently making a measurable difference for many primary care practices and their chronic condition patients.

These programs are the result of a collaborative team approach to bridging the cost/value gaps in our community's health care. As the operating brand of the Lehigh Valley Physician Hospital Organization, Valley Preferred and our two parent organizations—the Greater Lehigh Valley Independent Practice Association, Inc with its 1,100 local physicians; and Lehigh Valley Health Network, the Lehigh Valley's largest employer and a national leader in health care quality and innovation—are fortunate to have the forward-looking individuals and resources necessary to work together toward sustainable solutions.

"The American medical system is set up to treat the sick, not promote and preserve the health of the community," stated Jack A. Lenhart, MD, Executive Director of Valley Preferred and a primary care physician for more than 30 years. "Valley Preferred has made considerable progress with many of our initiatives. We will now be sharpening our focus in two key areas: population health management and coordination of services throughout the care continuum. These investments will hold considerable potential for achieving new levels of efficiency, cost containment, patient satisfaction and value."

“We will now be sharpening our focus in two key areas: population health management and coordination of services throughout the care continuum.”

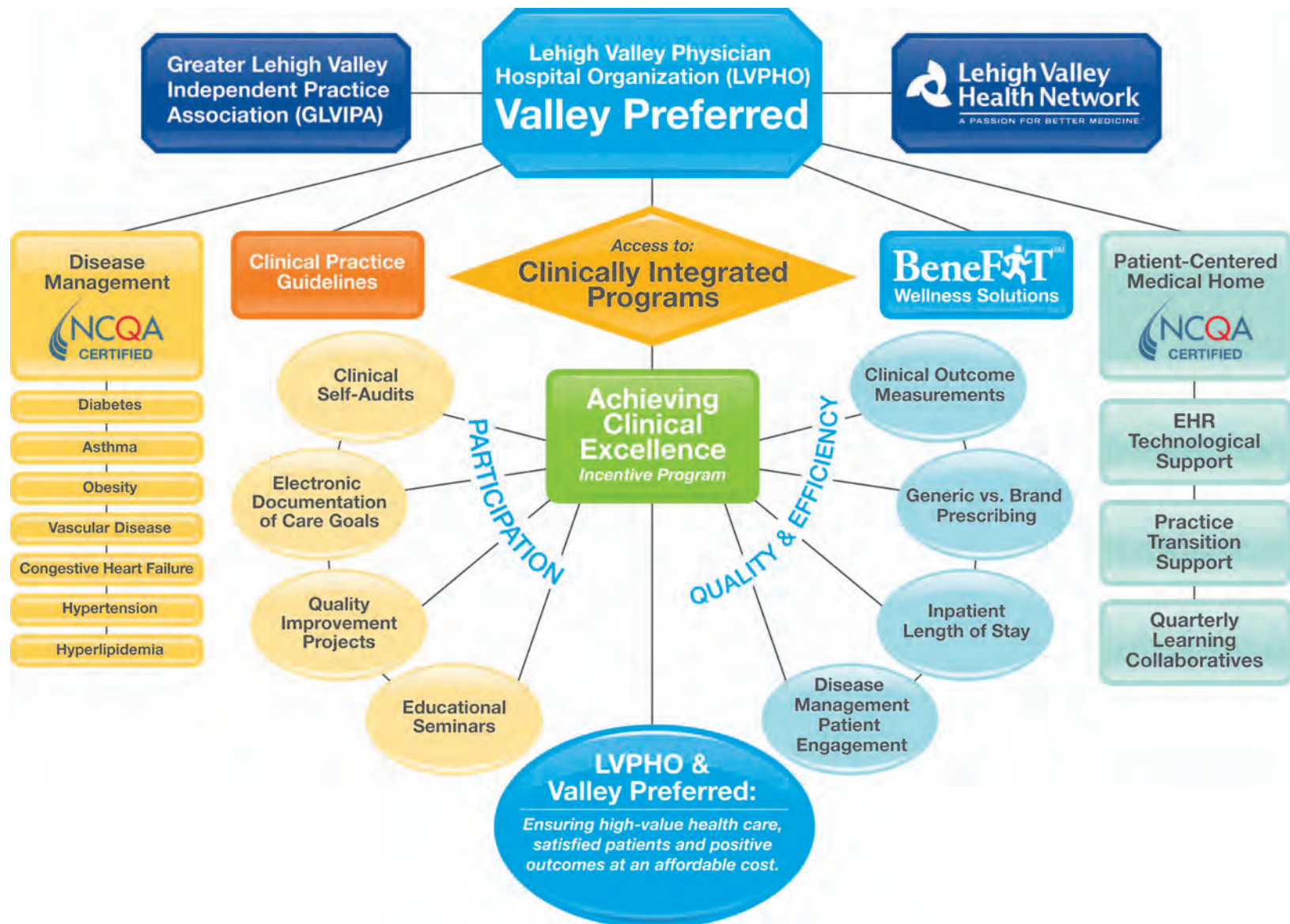
— Jack A. Lenhart, MD  
Executive Director  
Valley Preferred





## Valley Preferred At-A-Glance

Here is a composite view of Valley Preferred's current programs and partnerships.  
An interactive version with descriptions of each component is online at [valleypreferred.com](http://valleypreferred.com).





▶ “If we are going to bend the cost curve, we need to evolve into a system that supports wellness.”

— Jeff Etchason, MD

Senior Vice President  
Health Systems Research and Innovation  
Lehigh Valley Health Network

## Focus on Population Health Management

“Today the term ‘health care system’ is a euphemism. It’s really a ‘sick care system.’ Doctors and hospitals have traditionally been paid to take care of sick people. If we are going to bend the cost curve, we need to evolve into a system that supports wellness. To become a health system that does focus on health and wellness we must develop the capabilities to manage health at a population level. One of those fundamental capabilities is a robust data and analytics infrastructure to guide the most effective and efficient use of scarce health resources, to better coordinate care, and to properly measure progress toward the goal of improving population health,” said Jeff Etchason, MD, Senior Vice President for Health Systems Research and Innovation at Lehigh Valley Health Network. As the former Chief of Health Policy Research at the Centers for Disease Control and Prevention (CDC) in Atlanta, Dr. Etchason is now in his eighth year with Lehigh Valley Health Network where he heads a team responsible for the direction of health services and health systems research.

“Valley Preferred and its partners have recognized that the future of health care delivery will be very different and, therefore, new and innovative tools will be needed,” Dr. Etchason explained. “A recent grant from the Lehigh Valley

Physician Hospital Organization/Valley Preferred is enabling us to start building a new analytics infrastructure to improve care and strategically focus resources on population health management.”

Why is this infrastructure needed? “In the current system most providers get paid for what and how much they do. Therefore, most data are collected to document transactions, not the quality of what is done or the outcomes of care. Early attempts to measure provider performance in these domains began during the era of ‘managed care.’ Those attempts were unsuccessful because of the limitations of data being collected for other purposes and because the data were controlled by the payers, not the physicians themselves. This experience created well-warranted skepticism from physicians about the accuracy of the numbers that supposedly reflected their performance. The solution going forward in the era of ‘accountable care’ is for providers to conduct their own analytics to accurately and transparently measure and improve performance, as well as to have the performance standards mutually agreed upon and accepted by both providers and payers.”

## Building the New Analytical Infrastructure

Dr. Etchason's team is now building the analytical infrastructure needed to manage population health, including predictive modeling capabilities. Predictive modeling uses advanced statistical techniques to model the progression of diseases. By incorporating data on patient and disease characteristics gleaned from large populations, these models help to quantify the probabilities that certain patients may progress to more complicated stages of illness and alert providers to intervene. "The grant from LVPHO/Valley Preferred has allowed us to subscribe to a database which incorporates data on more than 40 million patients. This will enable us to focus on populations similar to ours and develop robust predictive models to apply to our own populations. These models will help us identify the patients at greatest risk for poor health and who are, therefore, most likely to benefit from teams composed of individuals able to coordinate their care and provide access to appropriate resources."

An important feature being designed into the new system is the capability to analyze insurance claims data. "Patients sometimes receive care outside of the primary care relationship or even from non-LVHN providers. However, information related to this care is often not available when a given provider

needs it. Data from insurance claims can provide information about what care has been delivered in various settings, but until now this information has not been available to help in coordinating care because claims data have been the sole province of the payers," Dr. Etchason explained. While the inclusion of claims data is very valuable, the potential power of the new system will be in its hybrid combination of both claims and clinical data. "All data has its limitations, but by combining these two information sources, we can create a very robust tool for care coordination and predictive modeling that will enable us to better serve our patients." This new hybrid information will allow primary care physicians and other providers across the care continuum to focus on early diagnosis and preventive care, thus reducing targeted populations' risk of high utilization and cost.

Dr. Etchason cited the 20/80 rule of health care, a general maxim which purports that 20% of the population consumes 80% of the resources. "So who is this 20 percent?" he asked rhetorically. "These new tools will help to answer that question while also enabling us to identify future population segments before they become the 20 percent," he said. "That is how the power of information will drive the cost efficiencies to be gained from population health management."



► **This new hybrid information** will allow primary care physicians and other providers across the care continuum to focus on early diagnosis and preventive care, thus reducing targeted populations' risk of high utilization and cost.



## New Community Care Teams Support Patient-Centered Medical Homes

An important program begun in 2012 through the joint support of Valley Preferred and Lehigh Valley Health Network was the development and launch of Community Care Teams to assist primary care practices engaged in the Patient-Centered Medical Home initiative.

These teams are a key component of an overall strategy to better manage population health through improved coordination of health network assets. Their role is to optimize resources with an integrated approach to intensified care for those patients with chronic conditions which consume the highest percentage of health costs. These conditions include asthma, congestive heart failure, diabetes, hypertension, chronic obstructive pulmonary disease, coronary artery disease, hyperlipidemia and obesity.

Costs for the Community Care Teams are shared by Valley Preferred and Lehigh Valley Health Network. The program is under the guidance of three leaders of the Patient-Centered Medical Home initiative: Eric Gertner, MD, Medical Director, Patient-Centered Medical Homes and Practice Transformation; Susan Lawrence, MS, CMAC, Senior Vice President, Care Continuum; and James D. Prowant, MS, CMPE, Associate Executive Director - Operations, Lehigh Valley Physician Group.

Two Community Care Teams were launched in July, 2012, to support six Patient-Centered Medical Home Level III practices. Each is led by a Registered Nurse care manager supported by a behavioral health specialist, an information technology specialist and a social worker. In the near future, the team will be supported by a practice coach.

“We envision a total of seven to eight teams in place within the next two years with approximately 50 percent of our network patients receiving their primary care in a Patient-Centered Medical Home practice by 2015.”

— **Eric Gertner, MD**  
Medical Director  
Patient-Centered Medical Homes  
and Practice Transformation



“It takes a team approach. Given the demands of health care today, no individual clinician can do it all. Our embedded care specialists support the ‘team-based care’ of the Patient-Centered Medical Home model.”

— **Susan Lawrence, MS, CMAC**  
Senior Vice President  
Care Continuum





## Coordinated Care in Action:

- ▶ **Community Care Team** providers confer on a patient's best course of care.
- ▶ **At Monthly Care Manager Mixers**, Community Care Team members are brought together to exchange innovative ideas, strategies and techniques.



In terms of population health management at work, the six NCQA Level III practices currently served by the two teams have a patient population of approximately 35,000. Of that total, an estimated 1,700 meet the criteria for “high-risk” determined by clinical markers. Metrics include lab work indicators, hospitalizations, readmissions, Emergency Department utilization, diagnoses and other high-risk factors. “In composite, the data provide workable profiles of patients who can benefit the most from the clinical intervention of our Community Care Teams,” Lawrence said. “We then begin the communication outreach through multiple avenues and work to establish a relationship of trust. A key objective is to engage the patient in the processes proven to make a difference in his or her long-term health.”

“It takes a team approach. Given the demands of health care today, no individual clinician can do it all. Our embedded care specialists support the ‘team-based care’ of the Patient-Centered Medical Home model. Coordinated, high-touch care is delivered to those individuals with the greatest needs, physicians are available for higher-level responsibilities, and costly hospital usage is decreased.”

Why is a social worker on each Community Care Team? “A high percentage of patients are underinsured, which is a strong deterrent to seeking timely care,” Dr. Gertner said. “There are many families throughout the region that are challenged by the current socioeconomic conditions. They may be our own

neighbors, friends or family members. If their conditions can be managed in the primary care outpatient setting, the risk for costly hospitalization at a later date is significantly lower.”

Social worker team members provide valuable links to appropriate social services and assistance from other sources, such as drug assistance now available from many major pharmaceutical manufacturers. “Many patients can qualify for these benefits if they know about them. Our social workers do an excellent job of keeping abreast of the available support programs and helping patients access the benefits to which they are entitled. This serves to help enhance population health without a big boost in costs.”

While in place for less than a full year, the ability of the Community Care Teams to help manage the health of targeted high-risk populations has been “very encouraging” according to Dr. Gertner, and more teams are on the horizon to serve the increasing number of Patient-Centered Medical Home practices. “We envision a total of seven to eight teams in place within the next two years with approximately 50 percent of our network patients receiving their primary care in a Patient-Centered Medical Home practice by 2015.”

## Achieving Clinical Excellence: Interconnected Programs Driving Clinical Value

Achieving Clinical Excellence is the collective name of a series of interconnected programs designed to increase physician engagement and clinical quality through performance-based incentives. “This is a dynamic system of individual programs working together to steadily improve clinical performance and value,” said Jack A. Lenhart, MD, Valley Preferred Executive Director. “The name describes the singular end-goal of this multi-faceted initiative that continues to evolve towards consistent improvement in quality and cost-efficiency.”

The program provides member physicians with clear procedures to meet measured goals of performance results. Financial incentives based on these results are issued on a regular basis.

“Achieving Clinical Excellence encompasses what we are as a clinically-integrated health care organization,” stated Mark Wendling, MD, Valley Preferred Medical Director. “The individual programs are collaborative between primary care physicians and specialists. Ongoing results are monitored and managed by Valley Preferred. The programs are built on best-practice metrics and aligned with both CMS (Centers for Medicare and Medicaid Services) and NCQA (National Committee for Quality Assurance) standards.”



▶ “We made digital documentation an incentivized program in 2010 and can now readily access data on clinical performance for close to 250,000 patients.”

— Mark Wendling, MD  
Medical Director  
Valley Preferred

Achieving Clinical Excellence is comprised of two distinct tracks: Participation and Quality & Efficiency.

**PARTICIPATION** encourages engagement in Valley Preferred initiatives that promote care coordination, education and outreach. Financial incentives are issued quarterly based on consistency and quality of participation in the following main initiatives:

- Clinician self-audits
- Electronic documentation of select patient care
- Quality improvement projects
- Participation in qualified educational seminars

**QUALITY & EFFICIENCY** sets measurable goals based on best practice metrics and encourages participants to meet or exceed these goals with financial incentives issued annually. Starting in 2013, incentives will be disbursed two times per year.

Performance focal points include:

- Clinical outcome measurements
- Efficiency measures
- Acute inpatient length of stay
- Engagement of patients in our Disease Management Program

Among the tangible benefits produced by Achieving Clinical Excellence has been the growing number of practices now issuing electronic documentation of care. “We made digital documentation an incentivized program in 2010 and can now readily access data on clinical performance for close to 250,000 patients,” Dr. Wendling said, noting that this information stream is essential to steering population health management. “We’re aware almost instantly of our actual patient outcomes. Payer claims-based data is also valuable but its processing is far slower and can add a four to six-month lag in the revenue cycle. Getting physicians compensated by payers in a timely manner has been a challenge. Faster access to patient data may prove valuable in accelerating the reimbursement turnaround from payers to providers.”

## Continued Support for Primary Care

In the quest for meaningful health care reform, it has long been Valley Preferred's stance that true reform will occur when clinicians shift from the current volume-based delivery model to a value-based model. The most effective way to change this paradigm is to manage health populations more effectively through early intervention by the proven mainstay of the patient/physician relationship: primary care practitioners.

"The fundamental reason why America's traditional health care delivery system is financially unsustainable is because 95 percent of hospital revenues are still based on the fee-for-documentation model," explained William L. Miller, MD, MA, Chair of the Department of Family Medicine at Lehigh Valley Health Network. "Health care is facing new challenges, yet we're still clinging to the old ways of coping with them. We need a different way of dealing with the future. The new approach starts with more support for primary care practices."

A shift to value rather than volume changes everything, according to Dr. Miller. "There is less emphasis on capital-intensive methods of care and more focus on home health and community agencies addressing the social determinants to real change."

He credits Valley Preferred with initiating this reemphasis on primary care, citing Lehigh Valley Physician Hospital Organization/Valley Preferred grants to sustain 25 practices in the Patient-Centered Medical Home initiative and the provision of matching funds making the new Community Care Team program a reality.

"Valley Preferred has proven to be a powerful proponent of primary care," he said. "Their work is making a difference in the quality of health care in our region. As a career family physician and educator of family physicians, I can also say that Valley Preferred's leadership has helped restore our professional sense of value and respectfulness."



▶ "Valley Preferred has proven to be a powerful proponent of primary care. Their work is making a difference in the quality of health care in our region."

— William L. Miller, MD, MA  
Chair of the Department  
of Family Medicine,  
Lehigh Valley Health Network



## Achieving Clinical Excellence: PHYSICIAN PERSPECTIVES

**Glenn S. Kratzer, MD**

Lehigh Valley Internists  
Associate Medical Director  
Valley Preferred



### “Ongoing education is a high priority...”

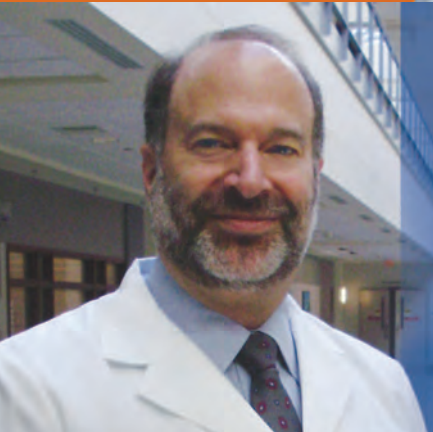
...and physicians are compensated for their educational efforts by Valley Preferred. One recent example is a Quality Improvement (QI) course. I completed the course and found it very informative. Of particular interest were the language of QI, how to measure processes and outcomes, and how to account for unforeseen consequences. We’ve had 180 physicians enrolled so far and the feedback has been very positive.”

### “...committed to clinical integration...”

“Valley Preferred knows the value of medical informatics. They are committed to clinical integration and have effective technology in place for patient outcome data capture and processing. Valley Preferred’s leadership has been a strong partner in Lehigh Valley Health Network’s efforts to consolidate disparate clinical and administrative data sources into an aggregate view accessible at any point of care.”

**Donald L. Levick,  
MD, MBA, FHIMSS**

Chief Medical  
Information Officer  
Lehigh Valley Health Network



### “...the success rating has been 100 percent.”

“I have a one-physician family practice and see about 30 patients a day. There’s only so much time but Valley Preferred’s disease management support has enabled me to better utilize my time and increase practice throughput. I have enrolled several patients in the program and the success rating has been 100 percent. They are becoming better self-managers of their own conditions and there has been absolutely no compromise in the patient/physician relationships.”

**Kenneth G. Ryder, Jr., MD**

Medical Associates of  
the Lehigh Valley



## “...making a measurable difference in the quality of local medicine.”

“As physicians, we all want to improve the quality of care. As member physicians of Valley Preferred, we are provided with the opportunity and resources to do so. Through the Quality Improvement Program, we are supported in identifying clinical areas for improvement, testing and optimizing changes, and disseminating those learnings to all members. I am currently engaged in a project, integrally supported by this program, to improve multi-departmental preoperative procedures. Since this Quality Improvement Program began four years ago, dozens of projects have been completed. Many have been put into widespread practice and are making a measurable difference in the quality of local medicine.”

## “...run by physicians for physicians.”

“As a provider-owned health organization, Valley Preferred is run by physicians for physicians. Important decisions affecting the futures of our 1,100 members are influenced by peers. Every member has the opportunity to be heard and participate in programs proven to advance the quality of medical care and value for the families we serve here in our home community.”

## “...making EHRs affordable for primary care practices.”

“The leaders at Valley Preferred have been very effective in championing the role of family physicians. One example is how they are making electronic health record (EHR) systems affordable for primary care practices. Valley Preferred has provided funds for the conversion of more local practices. Thanks to this commitment, more primary care practices are able to make this vital upgrade.”

## “...now a Patient-Centered Medical Home...”

“Our practice is now a NCQA-certified Patient-Centered Medical Home, thanks in part to the funding and support of Valley Preferred. It was a rigorous, intensive experience but fulfilling in terms of the professional pride and the individual excellence for which we strive. As a Patient-Centered Medical Home, we now are seeing the results of better outcomes attributable to our new team approach to patient care.”



Jennifer L. Stephens, DO,  
FACP

LVPG-Internal Medicine



James W. Manley, DO

Lehigh Valley Family  
Practice Associates

Chair  
Greater Lehigh Valley  
Independent Practice  
Association, Inc.



Joseph A. Habig, II, MD

Medical Associates  
of the Lehigh Valley  
Associate Medical Director  
Valley Preferred



Matthew J. Winas, DO, FACP

Internal Medicine of  
the Lehigh Valley

## Payer Reimbursements Accelerated by Valley Preferred Provider Relations

Making positive advances in the sometimes challenging area of payer/provider interaction, Valley Preferred's Provider Relations specialists have proven instrumental in delivering the leverage needed to resolve insurance contract variances and accelerate payments due to members of the Lehigh Valley Physician Group (LVPG).

"Valley Preferred advocates on our behalf and we are now far more effective in contractual fulfillment and reimbursement turnaround," said Mary A. DeTurk, Director, LVPG Business Services Department, Lehigh Valley Health Network-Physician Group.

Having been on the business side of health care for 27 years, DeTurk is familiar with the complex process of providing multiple health insurers with the precise information each requires to facilitate timely payments on claims.

Valley Preferred Provider Relations has helped streamline the process for LVPG, according to DeTurk, citing the experience and insurance industry knowledge of Selicia Chronister, CBC, Valley Preferred's Director of Sales and Client Services. "As the leader of the Provider Relations team, she has been extremely helpful in recommending procedures to accelerate our reimbursement cycle. Her knowledge and advocacy with the payers has been an invaluable asset to our business operations. We are now functioning more effectively as a result of the team at Valley Preferred."

▶ "Valley Preferred advocates on our behalf and we are now far more effective in contractual fulfillment and reimbursement turnaround."

— Mary A. DeTurk

Director  
LVPG Business Services Department  
Lehigh Valley Health Network-  
Physician Group



DeTurk pointed out episodes when discrepancies arose between contracted and standard payment rates, and noted "Valley Preferred's Provider Relations team worked with payers to resolve any issues."

To take payer/provider efficiency to an even higher level, Provider Relations developed a delegations template for payer distributions which was first implemented by LVPG in October, 2012. "This new tool standardizes the process, saving time and financial resources on the provider side," reported Chronister. "On the payer side, it gets the insurance companies the precise information they need in order to process and pay claims."

Provider Relations has also improved the payer enrollment process for LVPG. "When physicians join our group they must enroll with each contracted payer in a process that can be very time-consuming and often confusing in terms of insurance language. Valley Preferred's team collaborated with us to develop uniform standards for submitting provider enrollment files to payers," DeTurk said, adding that the frequency of provider enrollment information used to be once a month and now is issued twice every month. "This facilitates more timely reimbursements for physicians."

Reaching out to physician practices on a regular basis with educational events is another function of Provider Relations. On May 4, 2012, Valley Preferred held its Second Annual Provider Relations Open House at Lehigh Valley Hospital-Cedar Crest's Kasych Family Pavilion. The event was well attended by both physicians and practice staff, and provided each attendee with the opportunity



Responding to relevant topics, national-class speakers and ongoing education incentives, record numbers of member physicians attended the GLVIPA lecture series in 2012.



to interact with an array of resource providers. Among the exhibitors were payers, Valley Preferred and BeneFIT, and many of the participants in the Preferred Vendor Program, which provides member physicians and their practices with products and services at special discounted rates.

Information sessions by Valley Preferred Provider Relations representatives are also held at practices throughout the year. Typifying the feedback from physician practices on these visits is the following reaction from Donna Knabb, Practice Manager, LVPG/Orefield Family Medicine:

*“Pat Moore was very informative...we learned a couple of things that we were not aware of. The periodic meetings just to refresh staff are always a welcome idea in our office and we appreciate the time that was taken to spend with us.”*

### Valley Preferred Provider Relations Team

(from left):

**Patricia Moore**  
Provider Relations Representative

**Robin Montgomery**  
Provider Relations Representative

**Jo Ann Sofka**  
Secretary

**Mary Ann Curcio**  
Coordinator  
Greater Lehigh Valley Independent  
Practice Association, Inc



### National-Class Speakers, Timely Topics Draw More Members to GLVIPA Meetings

An important feature of the ongoing education offered to member physicians through Valley Preferred and the Greater Lehigh Valley Independent Practice Association, Inc (GLVIPA) during 2012 was an ongoing lecture series featuring national authorities on leading topics of interest to providers.

On June 26, more than 170 member physicians attended a lecture titled “The Evolution of Healthcare IT and Payment Reform” presented by John P. Glaser, PhD, CEO, Health Services for Siemens Healthcare. Among his many career achievements, Dr. Glaser was founding chairman of the College of Healthcare Information Executives (CHIME) and is a member of the Chief Information Officer Hall of Fame.

On September 24, more than 200 member physicians attended a lecture titled “How to Insulate Your Practice, Improve Quality, and Reduce Risk” delivered by D. Scott Jones, CHC, Senior Vice President, Claims and Risk Management at Health Providers Insurance Exchange (HPIX) and a nationally board certified Healthcare Compliance Officer.

## Lehigh Valley Business Coalition on Health Care Recognizes Valley Preferred

When it comes to connecting employers with affordable health insurance plans and educational support, regional businesses have a friend in the Lehigh Valley Business Coalition on Health Care (LVBCHC). By joining the Coalition at nominal membership cost, employers of all sizes have access to quality health insurance choices and other benefits at volume rates generally associated with larger insurance-buying groups. Regional businesses have taken notice of this value proposition. In the past six years, the Coalition's employer membership has grown by over 300%. Today, the Coalition is the coverage connection for about 200 employers representing more than 200,000 lives, all located primarily in the eastern Pennsylvania region.

Valley Preferred is proud to have partnered with the Coalition throughout its odyssey of health advocacy. Over the past decade, Valley Preferred supported the non-profit organization through wellness and clinical experts at membership educational events, and the development of innovative Clinical Collaborative Product health plan offerings.

“Valley Preferred has been a true friend and partner of the Coalition and its growing ranks of employers seeking quality health coverage and wellness for employees and their families.”

— **Thomas J. Croyle**  
President  
Lehigh Valley  
Business Coalition  
on Health Care



Valley Preferred Manager of Health Education and Wellness, Carol Michaels, MPH, MCHES, addresses participants in an LVBCHC Wellness Forum.

On Friday, June 22, the Coalition conducted a Wellness Forum in Allentown which featured an opening presentation by BeneFIT health educators, Amanda Greene, CHES, and Kristin Behler, MPH, CHES. The day's panel discussion, titled “How to Engage Employees and Senior Management” was moderated by Carol Michaels, MPH, MCHES, Valley Preferred Manager of Health Education and Wellness.

Valley Preferred's expertise was showcased again at the 2012 LVBCHC Annual Meeting held on Friday, October 12 at DeSales University. With an estimated 150 Coalition members and community health advocates in attendance, Valley Preferred Medical Director, Mark Wendling, MD, joined authorities from Cigna and Express Scripts in a panel discussion titled “The Patient Engagement Challenge: Health Literacy, Health Disparities, Changing Behaviors.”



## 2012 LVBCHC Partnership Award presented to Valley Preferred

The inscription reads:

*In recognition of your outstanding support of  
the Coalition's educational and marketing programs  
as well as promoting a healthy community.  
We greatly value our relationship with Valley Preferred.*

At the same annual meeting, Valley Preferred's long-time support of the Coalition's work was recognized with the 2012 LVBCHC Partnership Award, presented by Coalition President, Thomas J. Croyle, to Valley Preferred Executive Director, Jack A. Lenhart, MD.

According to Croyle, Valley Preferred earned the award for "supporting and encouraging the Coalition's growth through our small business partnership. Valley Preferred has been a true friend and partner of the Coalition and its growing ranks of employers seeking quality health coverage and wellness for employees and their families. It has been my personal pleasure to work with the Valley Preferred team."

## Disease Management Program Earns National Recognition for Excellence

The 2012 Case In Point Platinum Awards program recognized Valley Preferred's Disease Management Program with its highest honors for excellence among case management programs.

The national competition "recognizes the most successful case management and care coordination programs and individuals working to improve the health care system" and "sets the standard for programs that deliver sustained success across a variety of disciplines and settings in the overarching continuum of care coordination," according to the awards program coordinator Dorland Health, a leading publisher of products and services for professionals involved in care coordination.

Officially titled Care Continuum Disease Management, the program developed by Valley Preferred is provided regionally by Lehigh Valley Health Network. The program achieved certification in program design and systems from the National Committee for Quality Assurance (NCQA). It provides care to members with asthma, congestive heart failure, coronary artery disease/vascular, diabetes, hypertension, hyperlipidemia and obesity. The program was later expanded to include patients with chronic obstructive pulmonary disease. Registered Nurse health coaches reach out to patients with screenings and disease specific education. They are also embedded in primary care practices to provide support to high-risk patients.



## Growing Partnerships with the Health Insurance Broker Community

Health insurance brokers have always held an important role in Valley Preferred's performance promise of delivering "Care Beyond the Coverage." Brokers have the trusted client relationships and knowledge needed to help employers navigate through the complexities of strategic health planning. To bolster their efforts, Valley Preferred readily provides brokers with educational opportunities and communication tools to support their client presentations. In addition, Valley Preferred is one of Pennsylvania's few preferred provider organizations resourced with a representative dedicated to serving the broker community.

One of the largest health insurance industry brokers in the Middle Atlantic region is Kistler Tiffany Benefits, a Master Level Consultant responsible for the coverage of an estimated 18,000 employers. Marc I. Basist, is an Employer Benefit Consultant at Kistler Tiffany's Lehigh Valley operation and a veteran of the health insurance industry for more than 10 years.

"My clients like the fact that Valley Preferred is local and the BeneFIT wellness programs are customizable to their unique needs. It's not a one-size-fits-all product like many other wellness programs," he said, categorizing BeneFIT's onsite wellness programs as "incredible" and relating a personal experience that drew him to this conclusion. At a client's BeneFIT health fair in February, 2012, Basist spoke with an employee who admitted he hadn't had a physical exam in 20 years. "He was in his fifties, overweight and concerned about being tired but attributed the chronic fatigue to weight gain." Basist helped steer the employee to Valley Preferred's screening clinicians and "the cholesterol and glucose readings indicated that he was at risk for an acute diabetic illness." Basist personally helped to get him to a doctor and "he is now getting the appropriate care."

This broker credited Valley Preferred with helping that employee and his client avoid major potential health problems—he was a prime target for a stroke—and the costs that would have accompanied them. "That employee was a frequent driver of company vehicles, so a major risk involving his and other lives was averted," he said. "Both the employee and employer were thrilled with Valley Preferred's clinical expertise."

▶ "My clients like the fact that Valley Preferred is local and the BeneFIT wellness programs are customizable to their unique needs."

— Marc I. Basist  
Employer Benefits Consultant  
Kistler Tiffany Benefits



“After four weeks, 60 percent of the enrollees were still not smoking. The BeneFIT team engaged the employees with an intensive series of one-on-one meetings. It was this personalized, hands-on approach that made all the difference.”

— Rocky Gencarelli

Employer Benefits Consultant  
Stern Insurance Associates, Inc.



Broker Rocky Gencarelli with Stern Insurance Associates, Inc. based in Coopersburg, Pa., is equally enthused about the extras Valley Preferred brings to his client offerings. “All clients want lower premiums, that’s a given in this business,” he stated. “Valley Preferred and several of their payer partners provide multi-tier plans that can be structured to meet their cost criteria.

“But what most of my clients really want is access to the Lehigh Valley Health Network’s hospitals and physicians,” he said emphatically. “And Valley Preferred is the portal to those providers and that quality of care.”

Gencarelli also pointed out that Valley Preferred is “well ahead of the curve in wellness programs to help employers manage health plan costs.” His clients have worked with the Valley Preferred BeneFIT wellness team for multiple health fairs and other wellness interventions and “the results have consistently been fantastic.”

One client was worried about the health of his employees who smoked and Gencarelli recommended BeneFIT for a tobacco cessation program. “After four weeks, 60 percent of the enrollees were still not smoking. The BeneFIT team engaged the employees with an intensive series of one-on-one meetings. It was this personalized, hands-on approach that made all the difference.”

## Keeping Brokers Current on Health Care Changes

Serving to keep health insurance brokers and their clients current on the dynamic changes in health care has been an ongoing priority for Valley Preferred. A series of broker events are sponsored annually by Valley Preferred, some of which offer Continuing Education (CE) credits to attendees, thus enhancing their professional expertise.

Among the industry authorities featured at Valley Preferred broker events in 2012 was Vince Phillips (shown below), lobbyist for the PA Association of Health Underwriters. For more than two decades, Phillips has actively lobbied in Pennsylvania on behalf of insurance brokers. His perspectives on the legislative aspects of health insurance benefits have served to broaden the knowledge of area brokers, employer groups and the business community.



## Valley Preferred Client Perspectives: PROFILES IN PERFORMANCE



**Elaine C. Rutkowski**  
IT Technician  
Materion  
Shoemakersville, Pa.

### “...a great asset to our company.”

Working with Valley Preferred’s BeneFIT team has truly been a moving experience for Materion, an industrial manufacturer in Shoemakersville, Pa.

“We now have more of our employees engaged in regular physical activity than ever before,” reported Elaine C. Rutkowski, a 25-year Materion employee and member of Lifeworks, the company’s wellness program. “Previously, our committee did not promote physical activity within our workforce, but since partnering with BeneFIT, we’ve really noticed our employees engaged with wellness.”

One of the healthy changes now in place with Materion’s employees is “Destination: You” available through BeneFIT. Participating employees now easily record their daily walking distances via an electronic transponder attached to their shoes. Distance data is captured and displayed online.

“The program is a lot of fun and everyone wants to get involved, particularly the employees in the shop. During breaks, you can see employees walking around the perimeter of the plant and that never would have happened before BeneFIT came in with this wellness initiative,” Rutkowski said, noting that the program has been “easy to implement and, above all, it really works to get employees out walking and exercising. BeneFIT has been a great asset to our company.”



**Pastor Mark Worsham**  
Assistant Pastor  
Valleyview Baptist Church  
Northampton, Pa.

### “...always there to assist.”

As the Assistant Pastor at Valleyview Baptist Church in Northampton, Pa. Pastor Mark Worsham takes care of business issues like health insurance. “It’s not my field of expertise so when I need help, the licensed health professionals of Valley Preferred are always there to assist,” he said.

A Valley Preferred client since 2008, Worsham noted that Valleyview’s health insurance needs are relatively small with only two families covered. “But Valley Preferred has always treated us like their top client. I’ve always been impressed by their level of personalized service.”

He cited an experience in which one insurance company instituted a rate hike and “Valley Preferred immediately went to work finding another carrier that was more cost-efficient for us. They really do their homework,” he said. “Every year they provide us with an analysis on plan changes and alternative options. I’m grateful for Valley Preferred’s level of value and the trusted working relationship we’ve enjoyed through the years.”



**Josh Berk**  
Owner/Operator  
Café Bachi's  
Emmaus, Pa.



### “...our gateway to high quality health care.”

As an independent restaurant and catering professional, Josh Berk of Café Bachi's in Emmaus, Pa., knows a lot about the value of customer service.

“Service is what makes the difference in almost any business and service is the reason we have been with Valley Preferred since day one,” Berk said. “Our Valley Preferred representative is Joe Candio, Jr. and he always looks out for our best interests in the business of health coverage. He keeps us informed on changes, new policies and options that would be best for us and our employees.”

Loyal clients for six years, Berk and his owner/operator partner, Trevor Stauffer, also value Valley Preferred as their portal to the region's leading health care network. “The Lehigh Valley Health Network is the premier provider for health care in our area. We're very pleased that our plan provides access to their in-network resources. Valley Preferred is our gateway to high quality health care.”

**David Jaindl**  
President  
Jaindl Farms  
Orefield, Pa.



### “...pro-active approach to employee health...”

In 2012, Jaindl Farms grew more than 1,000,000 turkeys at its agribusiness operations in Orefield, Pa. “Turkey has always been a healthy food source,” said David Jaindl, president of the 75-year-old family business. “Traditionally a seasonal menu item, the nutritional benefits of turkeys have increased to a year-round consumer preference.”

Jaindl Farms' interest in growing health extends to its employees as well as its products. “We have about 80 full-time and 75 seasonal employees. The health of each employee is extremely important to us.”

At the 2012 annual company picnic, Jaindl recruited Valley Preferred's BeneFIT clinical experts to provide health screenings. “The experience was very well received by our employees and their families,” he said. “One employee's reading was extremely high and it compelled him to go to his family physician for treatment. He's now doing well. In all likelihood, our pro-active approach to employee health probably saved his life.”

## Healthy Performance for BeneFIT: Wellness Programs for Employers of All Sizes

With approximately 625 employees, fast-growing Univest Corporation of Pennsylvania is a relatively large employer by regional standards. To build a new culture of wellness into a population spread out over 32 full-service bank branches in a 4-county area, Univest's Benefit Specialist, Julie Sheehan knew she needed a partner who could deliver a wellness strategy with high levels of employee engagement and measurable results.

"BeneFIT has absolutely proven to be a wellness partner that works for the health of our employees," Sheehan said. "The consultation support of their health educators has helped me plan and implement an overall strategic vision of wellness at Univest."

Employee health was always important to Univest's leadership but "there was no programmatic plan to drive wellness," she explained. When Univest switched to a self-funded health plan in 2006, the need for a strategic employee wellness plan with an emphasis on preventive health came into sharper focus. "Keeping employees healthy meant keeping the bank healthy."



▶ "BeneFIT has absolutely proven to be a wellness partner that works for the health of our employees. The consultation support of their health educators has helped me plan and implement an overall strategic vision of wellness at Univest."

— Julie Sheehan  
Benefit Specialist  
Univest  
Souderton, Pa.

Univest's ongoing wellness strategy now includes the BeneFIT Consultation Package and the award-winning BeneFIT Toolkit. Sheehan noted that the Toolkit provides "step-by-step guidance and resources that our in-house team uses to keep the program growing between wellness planning sessions with our BeneFIT health educator."

A healthy portion of smaller employers from throughout our region also entered BeneFIT's growing world of wellness in 2012. "We have definitely seen an uptick in family-owned businesses engaging our wellness services," reported Carol Michaels, MPH, MCHES, Manager of Health Education and Wellness at Valley Preferred. "The scope of their needs is different than larger employers like Univest, but their goals are the same—improved productivity and management of health costs."

Two family-owned businesses committed to wellness after their BeneFIT experience are Wert's Café in Allentown, and Tyndale Company, a safety apparel manufacturer in Bucks County.

With 40 employees, Wert's Café has been a landmark eatery in Allentown's west end since 1968. According to general manager Kathy Wert, the employees are either family members or "have been with us so long they have become part of our family. The health of all of our employees is very important to us."



▶ "The whole experience was wonderful..."

— Kathy Wert  
Wert's Café  
Allentown, Pa.



▶ “...the employee feedback was overwhelmingly positive.”

— **Andrea Mory, PHR**  
HR Generalist  
Tyndale Company  
Pipersville, Pa.

Wert's Café's health insurance broker introduced them to Valley Preferred and the BeneFIT employee wellness programs.

“Valley Preferred's BeneFIT health educators and nurses provided our employees with health screenings for blood pressure, strength and flexibility, body mass index and bone density. “The whole experience was wonderful and it gave us important insights into our own health and what we can do to live healthier.”

Tyndale Company is a family-owned manufacturer and distributor of flame-resistant apparel based in Pipersville, Pa. With more than 100 employees, Tyndale's President

and CEO were “very supportive” of a wellness effort that would help maintain employee health and productivity, according to Andrea Mory, PHR, Human Resources Generalist.

“Our broker told us about Valley Preferred's BeneFIT employee wellness program. Their health educators came in and worked with us to tailor a workplace wellness event that would fit our employee population and our budget,” explained Mory.

The result of this planning was a Tyndale Wellness Fair that succeeded on all counts. “It did not disrupt our workflow and I was amazed at the enthusiasm of the employees,” said Mory who noted that more than 50% of Tyndale's employees attended the event. “There was definitely a positive vibe in the air and the employee feedback was overwhelmingly positive,” she said, adding that “Our CEO was very impressed as well.”



Shortly after joining the BeneFIT team, **Kristin Behler, MPH, CHES** (center) went the distance in the first Valley Preferred Tour de Hershey event to fight children's cancer.

## Wellness at Work Inside Valley Preferred

When Kristin Behler, MPH, CHES joined the Valley Preferred BeneFIT team in 2012 as a Certified Health Education Specialist, she was immediately impressed with how wellness is a way of life inside the organization as well as outside with their clients.

“It didn't take long before I realized that Valley Preferred was a different place to work. Encouragement to be your best is the easiest way to sum up the culture at Valley Preferred.

All levels of leadership are actively engaged in wellness. Ninety-eight percent of Valley Preferred employees participate in physical activity programs provided by our employer. Being the competitive type, I took advantage of an opportunity to participate in an 85-mile bike ride sponsored by Valley Preferred to benefit cancer research for children.

Valley Preferred's Wellness Committee works diligently to provide wellness options like our onsite fitness area complete with walking workstations, a variety of physical activity equipment, and a relaxation area. I feel I am lucky to be part of an organization that cares about the well-being of their employees and the community.”

— **Kristin Behler, MPH, CHES**  
Certified Health Education Specialist  
Valley Preferred BeneFIT



## Looking Ahead: ACHIEVING CLINICAL EXCELLENCE

As both Chief Strategy Officer of Lehigh Valley Health Network and Chair of the Lehigh Valley Physician Hospital Organization, Inc. (LVPHO), Brian A. Nester, DO, is uniquely qualified to provide insights into Valley Preferred's progress of the past year and how it impacts the future of Achieving Clinical Excellence in our community.

**Q. With American health care in a value deficit, what is being done locally to reorganize the delivery system here in the Lehigh Valley?**

**A.** There are several demographic, clinical and financial challenges impacting us simultaneously. Working together, Valley Preferred and Lehigh Valley Health Network are strategically planning and investing in solutions to address a new economic paradigm in health care, one that embraces “value-based” care and reimbursement.

**Q. What is a leading demographic challenge?**

**A.** The Lehigh Valley is not immune to “boomer demographics.” Lehigh and Northampton counties will see a 20% increase in the Medicare-eligible population by 2020. This growing segment of our population has the greatest utilization of health care services. Without significant changes to our delivery model, this utilization spike could outstrip our clinical capacity and jeopardize the quality of health care provided in the Lehigh Valley.

**Q. So how will steadily increasing population needs be met clinically?**

**A.** It starts with population health management. And that means putting relevant, actionable information in the hands of the right provider [at the right time] to improve quality and efficiency, as well as the overall patient experience.

**Q. How have health networks measured health outcomes to date?**

**A.** Most networks and physician practices have relied upon retrospective reviews of hospital or office records, disease registries and, occasionally, utilization information from payers [driven by claims data]. In some sophisticated organizations, this process has been utilized to develop high-level pay-for-performance strategies to improve outcomes. This worked adequately for the “old health care” paradigm, but new demands on our increasingly limited resources clearly require a more robust, more precise, prospective information system.

**Q. Is it time for a new health care measurement strategy?**

**A.** It's inevitable and some of the nation's largest networks have already had success using data from a broader range of sources. The analytical manipulation of these data sets may be complex but the bottom line is simple: better information allows us to risk stratify populations and better allocate scarce resources to improve care. We see this as a significant opportunity to collaborate with payers. To manage the cost and quality demands of the new health care environment, we'll need this level of cooperation and analytical support.

**Q. Has progress begun on this new analytical infrastructure?**

**A.** Yes. In 2012, the LVPHO/ValleyPreferred made significant investments to acquire highly advanced databases and software algorithms enabling Lehigh Valley Health Network's own Health Systems Research & Innovation team, led by Dr. Jeff Etchason, to begin development of the new system.

**Q. Will this impact the financial aspects of local health care?**

**A.** In large part, yes. At the core of the new financial paradigm is how all providers will be reimbursed for their health services. The new analytical capabilities will help us evaluate some of the new payment innovations being proposed by CMS (Centers for Medicare and Medicaid Services) and commercial payers. These include bundled payments, shared-savings, Accountable Care Organizations (ACOs) and other models.

**Q. What's the timetable for this new reimbursement model?**

- A.** We began the strategy process last year and these evaluations will develop and evolve our reimbursement thinking over the next two to three years.

**Q. How else might this new technological investment improve health care value?**

- A.** We have to get more sophisticated in how we apply resources to patient care and the new system will help us with population health management. At Lehigh Valley Health Network, we know that 19 percent of our acute care patients absorb 83% of our costs. We have to understand who these population segments are and how to better manage them. Local primary care provider partners will be essential.

**Q. Have primary care physicians received additional support in 2012?**

- A.** Yes. Supported by the resources of the LVPHO/Valley Preferred, we launched two Community Care Teams (CCTs) in 2012. These are teams of clinical, IT and social service specialists who provide primary care practices with support for their highest-risk chronic disease patients. In collaboration with the LVPHO/Valley Preferred, Lehigh Valley Health Network plans to launch four more CCTs in 2013. These resources will be made available to both private and employed primary care practices who have participated in the Patient-Centered Medical Home Collaborative over the last three years.

**Q. Are there any other developments aimed at Achieving Clinical Excellence?**

- A.** To accelerate our journey toward accountability, Lehigh Valley Health Network has bolstered our commitment to innovating new payer strategies. Lehigh

Valley Health Network has obtained the expertise of Gregory G. Kile, Senior Vice President for Insurance and Payer Strategies (LVHN) to guide efforts related to new payment structures, population health management, analytical capabilities and collaborative payer/partner relationships.

**Q. Will Valley Preferred and its members continue to be a key part of Lehigh Valley Health Network's journey toward accountability?**

- A.** I can't imagine getting there without the continued support of Valley Preferred and the Lehigh Valley Physician Hospital Organization. Our members should be very proud of the strategic support and investments they have provided. The momentum they have initiated and sustained will be essential to address the health care challenges and solutions of the future.

**▶ On Lehigh Valley Health Network's journey toward accountability:**

"I can't imagine getting there without the continued support of Valley Preferred and the Lehigh Valley Physician Hospital Organization. Our members should be very proud of the strategic support and investments they have provided."

— Brian A. Nester, DO, MS, MBA,  
CPE, FAOCEP

Chief Strategy Officer  
Lehigh Valley Health Network

Chair  
Lehigh Valley Physician  
Hospital Organization, Inc.



### Valley Preferred Spirit of Courage: Honoring Hometown Heroes

For the seventh straight year, attendance at the Valley Preferred Spirit of Courage Award Celebration hit a new high as first responders and guests gathered to honor individuals for extraordinary acts of heroism, or for notable work in promoting fire safety and burn prevention education. Proceeds from the annual event benefited the Burn Prevention Network and Lehigh Valley Health Network Regional Burn Center.

Held October 2 on the campus of Lehigh Valley Hospital–Muhlenberg, the 2012 event drew more than 600 attendees from throughout eastern Pennsylvania to honor 14 hometown heroes.

“Their stories of courage inspire all of us while providing a memorable showcase for the often unsung efforts of the men and women in our first responder community,” said B. Daniel Dillard, Executive Director of the Burn Prevention Network. “This year’s event was the most impressive in terms of attendance, production excellence and support for the causes of fire education and burn prevention here in the Lehigh Valley and throughout eastern Pennsylvania. The Burn Prevention Network is proud to have a partner like Valley Preferred to support our mission and provide a safer, healthier future for the families in our communities.”

The 2013 Award Celebration is scheduled for October 8.

### First Valley Preferred Tour de Hershey: Raising Awareness, Funds to Fight Children’s Cancer

The inaugural Valley Preferred Tour de Hershey debuted on September 15 to raise awareness and funds for the fight against children’s cancer. Cyclists rode 85 miles from Allentown to Hershey, raising more than \$37,000 for the causes of beneficiaries, Angel 34 Foundation and the Hackerman-Patz House at Lehigh Valley Health Network.

Angel 34 provides financial assistance, therapy, family services and more for children with cancer and their families. Hackerman-Patz House is a home-like setting for families visiting loved ones at Lehigh Valley Health Network facilities.

“This proved to be a tremendously positive way to raise funds and awareness for the ongoing fight against children’s cancer,” said Valley Preferred General Manager Christina Lewis. “We are proud to have the Valley Preferred name associated with such a worthy event and look forward to building on this opening effort for an even bigger event in 2013.”

Planning is already underway for the next Valley Preferred-sponsored bike tour slated for September 14 to benefit Angel 34 Foundation and Lehigh Valley Health Network Specialty Care. The ride will begin at the Valley Preferred Cycling Center in Trexlertown, Pa.



#### ◀ Valley Preferred Spirit of Courage Award Celebration

Members of the **Scranton Police Department** were honored for extraordinary heroism with the 2012 Valley Preferred Spirit of Courage Award.

#### ▶ Valley Preferred Tour de Hershey

Members of the organizational team featured at the event’s official media launch (from left):

**Doug Sheriff**, President, Angel 34 Foundation

**Kimberly Thompson**, Former Supervisor,  
Hackerman-Patz House, Lehigh Valley Health Network

**Tina Werkheiser**, Coordinator, Sales and Marketing,  
Valley Preferred





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# ACHIEVING CLINICAL EXCELLENCE<sup>SM</sup>

Delivering Value in Our Community.

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## Valley Preferred



LEHIGH VALLEY HEALTH NETWORK

# Valley Preferred

 LEHIGH VALLEY HEALTH NETWORK

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