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November 20, 2013

***Also Admitted in
Kentucky and West
Virginia*

Ms. Rebecca Maust, Chief
Division of Quality Assurance
Ohio Department of Health
246 North High Street
Columbus, OH 43215

Re: Women's Med Center Dayton
Request for Variance to the Hospital Transfer Agreement Requirement

Dear Ms. Maust:

I represent Women's Med Professional Corporation which operates Women's Med Center Dayton ("WMCD"), an ambulatory surgery facility. I am writing to supplement WMCD's 2013 request for a variance of O.A.C. § 3701-83-19(E), which is the requirement that the ASF have a written transfer agreement ("WTA") with a hospital. This supplement is to provide information to ODH that is required by HB 59.

In August 2012 and again in September 2013, WMCD requested a renewal of its ASF license. WMCD never received a response to the 2012 request. The September 2013 request is still pending.

In order to comply with HB 59, WMCD has contracted with Wright State Physicians Women's Health Care to provide backup physician services (Attachment 1). WMCD continues to have the same patient hospital transfer policy (Attachment 2) in order to ensure continuity of care for any patient who may need to be transferred to a hospital. For these reasons, WMCD requests a variance from the WTA requirement. As is explained in more detail below, WMCD's alternative to a written transfer agreement provides patients with the same level of safety and protection as its written transfer agreement had provided.

WMCD previously had a back-up doctor contract from Dr. Sheila Barhan, Dr. Janice Duke, and Dr. Lawrence Amesse¹ who were members of the Wright State Physicians Women's

¹ In May 2013 WMCD learned that Dr. Amesse had left the group practice. ODH was notified at the same time WMCD learned of this. Dr. Amesse did not give WMCD prior notice of his withdrawing as a backup physician.

Health Care ("WSPWHC") group. When WMCD contacted Dr. Barhan to renew the contract for the 2013-2014 license year and to comply with HB 59, WSPWHC group agreed to take over the contract. WSPWHC is the faculty department of Obstetrics and Gynecology for the Wright State University Boonshoft School of Medicine overseeing the ACGME-accredited education and training for resident physicians at Miami Valley Hospital ("MVH") in Dayton, Ohio. Part of WSPWHC's responsibility for the resident training program is to provide a supervising physician in the hospital 24 hours 365 days a year. All of the physicians in the group are board certified or board eligible in Obstetrics and Gynecology, have active Ohio medical licenses and have admitting privileges at Miami Valley Hospital as a requisite for membership in the department.

WSPWHC's physicians are credentialed with admitting privileges in Obstetrics and Gynecology without restrictions at Miami Valley Hospital and will arrange patient admission and care for each patient needing medical services according to each patient's need. WSPWHC has agreed to exercise those privileges to provide for the continuity of care and the timely, unimpeded acceptance and admission of WMCD's patients.

WMCD's alternative to a written transfer agreement satisfies ODH's November 17, 2011 protocol and the provisions of HB 59 as follows:

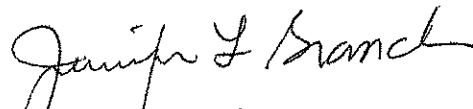
- a. The WSPWHC contract complies with the requirements in ODH's protocol. WMCD has a written policy ensuring 24-hour per day, seven days per week coverage by the backup physicians who can admit patients to a hospital in the event that a patient experiences a surgical complication, an emergency, or other medical need. WSPWHC provides a physician at MVH 24 hours a day, 365 days a year. WSPWHC's offices are located 5 minutes away from MVH by foot.
- b. All WSPWHC physicians currently have active status with the Ohio Medical Board and possess a current medical license.
- c. No WSPWHC physicians have had any actions taken against them by the Ohio State Medical Board for violations of R.C. § 4731.22 according to their agreement with the facility. No WSPWHC physician has a pending action or a complaint under review by the Ohio State Medical Board for violations of R.C. § 4731.22 according to their agreement with the facility.
- d. All backup physicians are credentialed with admitting privileges in Gynecology without restrictions at Miami Valley Hospital. This has been verified by WSPWHC in its contract. Furthermore, WSPWHC has notified MVH that the group is consulting for WMCD and that it has agreed to provide backup services. (Attachment 3).
- e. WSPWHC agreed in its contract to immediately inform WMCD of any circumstances that may impact its ability to provide for continuity of care and the timely, unimpeded acceptance and admission of the WMCD's emergency patients.

- f. WSPWHC is familiar with WMCD and its operations and its policy. The contract verifies this.
- g. WSPWHC has verified that there is practically no travel time from the WSPWHC office to the hospital. The travel time is 5 minutes by foot.
- h. The facility's written policy explains how the attending physician will use WSPWHC to admit patients to a local hospital in an emergency, complication, or other medical need. The policy includes a plan which ensures that a substitute doctor is available to admit patients to local hospitals in the event the named backup physicians are temporarily unavailable and unable to admit patients to local hospitals.
- i. WSPWHC agrees it has access to and will use MVH's on-call consulting/referral physicians outside WSPWHC's area of specialty/expertise, if necessary .
- j. See i above.
- k. WMCD's written protocol ensures that a copy of the patient's medical record is transmitted contemporaneously with the patient to hospital.

This variance request is a good faith attempt to comply with ODH's November 17, 2011 protocol and HB 59. WMCD has not been informed by ODH of any additional rules or regulations that apply to a variance request. If ODH implements any additional rules, WMCD requests ODH to notify WMCD.

If you need any additional information or have any questions, please contact me at the address and phone number above, or by email to jbranch@gbfirm.com.

Sincerely,


Jennifer L. Branch

Encls. Attachment 1 Contract with WSPWHC
Attachment 2 WMCD Hospital transfer policy
Attachment 3 Attachment A to contract (notice to hospital)

BACK-UP PHYSICIAN SERVICES AGREEMENT

11/1/2013
NOVEMBER
This Back-Up Physician Services Agreement ("Agreement") is effective as of 2013 ("Effective Date"), by and between Women's Med Professional Corporation, an Ohio professional corporation, ("WMPC") and Wright State Physicians Women's Health Care ("WSPWHC").


1. Wright State Physicians Women's Health Care is the faculty department of Obstetrics and Gynecology for the Wright State University Boonshoft School of Medicine overseeing the ACGME-accredited education and training for resident physicians at Miami Valley Hospital ("MVH") in Dayton, Ohio. Part of our responsibility for the resident training program is to provide a supervising physician in the hospital 24 hours 365 days a year. All of the physicians in our group are board certified or board eligible in Obstetrics and Gynecology, have active Ohio medical licenses and have admitting privileges at Miami Valley Hospital as a requisite for membership in our department.
2. WSPWHC agrees its physicians are credentialed with admitting privileges in Obstetrics and Gynecology without restrictions at MVH and will arrange patient admission and care for each patient needing medical services according to each patient's need.
3. WSPWHC agrees to provide 24/7 emergency hospital admission as the admitting physician for WMPC's patients in the event of surgical complications, emergency situations, or other medical needs that require a level of service beyond the capability of WMPC.
4. WSPWHC attests that the following statements are true:
 - a. its physicians are licensed to practice medicine in Ohio and will alert WMPC within 24 hours if any physicians' active status to practice medicine in Ohio changes;
 - b. its physicians are familiar with WMPC and its operations;
 - c. its physicians agree to provide WMPC notice of any changes in their ability to provide back-up coverage; and
 - d. the travel time from WSPWHC main offices to MVH is approximately 5 minutes by foot as we are located on the MVH Campus located in downtown Dayton. After the office is closed, physicians on call for the practice are within 30 minutes of Miami Valley Hospital and will respond within this time frame if needed.


5. WSPWHC verifies that:
 - a. it has told WMPC that its physicians' specialty is Obstetrics and Gynecology;
 - b. WMPC may contact WSPWHC by calling the office telephone number 937.208.6810 during the hours of 8:30am and 4:30 pm and ask to speak to the *private office doctor on call* regarding any question related to or the transportation needs of a patient. During non-office hours, call the answering service, Match MD, telephone number 866.200.1935 and ask for the *private office doctor on call*; and
 - c. WSPWHC has informed MVH that its physicians are consulting for WMPC and have agreed to provide back-up coverage for the facility when medical or surgical complications arise for WMPC patients
6. WSPWHC agrees that no disciplinary actions have been taken against any of its physicians and that no complaints are under review by the Ohio State Medical Board for violations of R.C. § 4731.22. WSPWHC agrees to alert WMPC within 24 hours if an action is taken against any of its physicians by the Ohio State Medical Board.
7. WSPWHC agrees to immediately and without delay inform WMPC of any circumstances that may impact its physicians' ability to provide for continuity of care and the timely, unimpeded acceptance and admission of the WMPC's patients.
8. If all WSPWHC physicians experience any planned or unplanned absence from the locale for one business day, WSPWHC agrees to provide WMPC with notice before such date or as soon as practicable (if the absence is unplanned) or three business days before such date or as soon as practical (if the absence is planned in advance).
9. WSPWHC agrees it has access to and will use MVH's on-call consulting/referral physicians outside WSPWHC's area of specialty/expertise, if necessary.
10. WMPC agrees to provide WSPWHC with the patient's name, reason for referral, current medical condition and the means of transport to the hospital.
11. WMPC agrees to send to the hospital with the patient a copy of all patient records.
12. This agreement may only be modified in writing.
13. This agreement may be terminated without cause after thirty (30) days written notice is provided to the parties.


The parties have executed this Agreement by each of their authorized representatives.

Wright State Physicians Women's Health Care

Women's Med Professional Corporation


Name: Sheela Barhan, M.D.
Title: Physician


Name: Martin Haskell, M.D.
Title: Medical Director


Alan P. Marco, M.D.
Title: President and CEO
Wright State Physicians

E. Emergency Medical Protocol

1. Initial Response

Upon recognition of a suspected emergency, Nursing Staff summons the Head Nurse, the attending physician and immediately surrounding personnel using any means available (paging system, intercom, telling a nearby employee).

Nursing staffs' priorities are to

- a) protect the patient from further injury (make sure the patient will not fall),
- b) summon assistance
- c) assist the patient according to each staff member's capability
- d) assist licensed staff as they arrive

Physicians respond to requests for assistance immediately upon being notified that there is a possible emergency.

However, if a physician has started a surgery, he or she completes the surgery at hand before responding. The physician defers charting the completed surgery until the emergency is under control or has been triaged successfully.

2. Attending Physician

The attending physician is responsible for the patient outcome and has the authority and prerogative to direct the care of the patient including choice of physician and/or hospital to which the patient will be transferred. The attending physician has the prerogative to:

- a. choose to continue his or her care at another facility or hospital;
- b. refer the patient to a consultant of his or her choosing;
- c. refer the patient to one of the Center's backup physicians (list and contact information available on the company intranet).

In the event the attending physician wishes to use the Center's backup physicians and in the unlikely event that all the backup physicians are unavailable, the attending physician contacts the Medical Director for assistance in obtaining a receiving physician from the Medical Director's network of physician contacts.

The attending physician performs, directs and/or coordinates the following responses to a medical emergency in order of priority:

- a. Declares that a medical emergency or need for transfer exists and has the in charge nurse summoned to the patient care area.
- b. Provides immediate support to the emergency until adequate personnel are present and can step back.
- c. Directs the medical response and assures that the patient is receiving the appropriate medical care.
- d. Directs the in charge nurse to summon appropriate personnel and transport for the patient and assist in the medical response.
- e. Unless the attending physician will be continuing the care himself or herself, contacts the physician who will be assuming care of the patient by phone or other verbal means of communication and provides the necessary medical information and history for the receiving physician to appropriately assume care of the patient.
- f. Contacts the receiving Emergency Room physician and provides all necessary medical information and history for the physician to appropriately care for the patient until the treating physician arrives.
- g. Prepares a detailed note for the patient chart of the nature of the emergency, physical findings, the care given, order for transfer and the patient's condition at the time of transport.
- h. Directs that a complete copy of the patient's chart be made and given to the ambulance crew to transport to the emergency room

with the patient. The chart copy should be placed in an envelope labeled with the patient's name, the receiving hospital's name and receiving physician's name and the reason for the transfer.

- i. Provides instructions to the ambulance crew to appropriately care for the patient while in transit, or alternatively accompanies or directs a nurse to accompany the patient in the ambulance if the patient's condition is grave or requires ongoing medical care beyond the scope of the transport crew.
- j. Communicates the nature of the emergency and care plan with the family as soon as practical without endangering the patient's safety.

3. Charge Nurse

The in-charge nurse on duty manages and coordinates the center's response to the emergency, subject to the direction of the attending physician.

In conducting the center's response, the in charge nurse conducts herself in a calm and reassuring manner towards other staff, patients and visitors. When delegating tasks, she instructs each person to whom a task is assigned to act in a calm and professional manner.

The in charge nurse performs the following tasks in this order of priority:

- a. Provides immediate support to the emergency until adequate personnel are present that the nurse can step back.
- b. Directs personnel to assist in managing the patient's medical care and obtain appropriate equipment as conditions warrant.
- c. Upon direction of the attending physician, calls or directs someone to call 911 requesting an ambulance and describing the nature of the emergency.
- d. Calls or directs someone to call the in-charge person for the front desk/reception/waiting areas, notifying them of the existence of a medical emergency and that an ambulance has been called.
- e. Directs someone to greet the ambulance crew at the surgical area entrance and lead them to the site of the emergency.
- f. Directs someone to move patients and visitors in the surgical area into areas where they will not observe the ambulance crew entering or leaving (patient privacy), and to advise them in a calm, reassuring manner that we have an emergency and are expecting an ambulance.
- g. Directs such other response of personnel, equipment or resources that will serve the patient's best interest.
- h. Calls or directs someone to call the Medical Director if not present.
- i. Talks with the patient's family/visitors and explains the circumstances and plan to them; takes them to wait with the patient if circumstances warrant.
- j. Directs the ambulance crew to take the patient to the hospital designated by the attending physician. Insures that the crew has a copy of the patient's medical record with the receiving hospital's

name, receiving physician's name and reason for transfer prominently written on the outside of the envelope containing the medical record.

- k. If requested by the attending physician, accompanies or directs a nurse to accompany the patient to the hospital with the patient's belongings and a copy of the chart, and to relate to the hospital emergency room personnel the nature of the patient's emergency, circumstances surrounding the emergency and the care given.

4. Front Desk Charge Person

The person in charge of the front desk/waiting/reception areas, upon learning of a medical emergency, directs and coordinates the following responses in order of priority:

- a. Directs someone to wait at the building entrance for the ambulance crew and leads them to the surgical area.
- b. Directs someone to move visitors in the waiting reception areas so as to provide an unobstructed path for the ambulance crew; insofar as possible, visitors should be moved to a location out of the view of the entering and exiting ambulance crew; these activities should be conducted in a calm reassuring manner.
- c. Directs a Patient Educator or other individual to locate any visitors that accompanied the patient experiencing the emergency and take them to a private room; the Patient Educator explains to them that the patient is involved in an emergency and that a member of the medical/nursing staff will come down and explain the situation after the patient is cared for; the Patient Educator stays with the visitors providing support.
- d. Assists in accomplishing the above and directs any other response necessary as circumstances warrant.
- e. Assures that one of the patient's visitors accompanies the patient to the hospital.

5. Nursing Staff

After ensuring that any patient under their direct care has been appropriately transferred to the care of another staff member, nursing staff (other RNs, LPNs, Medical Assistants) respond to the site of the emergency and provide assistance as directed by the in charge nurse or physician.

6. Code Blue

Code Blue is the universal call for help for cardiac or respiratory arrest and is a call for all available medical personnel to respond to the site of the emergency.

After ensuring that any patient under their direct care has been appropriately transferred to the care of another staff member or discharged, nursing staff (other RNs, LPNs, Medical Assistants) respond to the site of the emergency and provide assistance as directed by the in charge nurse or physician and according to each member's capability.

The order of priority of roles and minimal qualification are as follows:

1. Call for help
2. Chest compressions—BLS Certified
3. Airway and breathing (may take 2 individuals)— BLS Certified
4. Obtain emergency cart and AED— BLS Certified
5. Operate AED—BLS Certified
6. Start IV—LPN with IV certification
7. Scribe—MA
8. Administer IV medications—RN or physician

Upon entering the site of the emergency, each staff member assesses the scene, the roles being fulfilled, whether the most appropriate level staff member is fulfilling each role and decide where he or she can best help. For example:

- If someone is performing chest compressions but no one is breathing for the patient, the person entering should begin airway management/breathing.
- If chest compressions and breathing are managed but the emergency cart is not present, the entering staff member should obtain the emergency cart, notifying those present.
- If a nurse or physician is performing CPR and an MA enters the room, the MA should ask if she can relieve the nurse or physician from the CPR.
- If a nurse enters the room, and chest compressions and airway/breathing are under way but the AED is not engaged, the nurse should set up and start the AED.

Of course, if there is only respiratory arrest but not cardiac arrest, chest compressions and the AED are not warranted. The AED should remain available and staff should be vigilant for the onset of cardiac arrest following respiratory arrest.

Some roles may require two people, depending upon the skill level of the individuals. For instance, it may take one person holding the mask securely over the patient's nose and mouth with both hands while another squeezes the ambu bag. One person can easily tire doing chest compressions for more than 2 minutes. This person and the scribe may want to alternate roles every 2 minutes.

From the above examples, it is evident that the first goal is to be sure that the roles are being fulfilled in order of priority and second that the most appropriate person is fulfilling that role. Staff communicates with each other to coordinate their actions so that all know who is doing what. Ultimately, the nurse in charge or the physician will direct personnel into specific roles.



Wright State Physicians
WOMEN'S HEALTH CARE

Berry Women's Health Pavilion
One Wyoming Street, Suite 4100 • Dayton, OH 45409
Tel 937.208.6910 • Fax 937.208.2000
wrightstatephysicians.org

November 19, 2013

Bobbie Gerhart
CEO, Miami Valley Hospital

Re: Back-up Agreement with Women's Med Center of Dayton

Dear Ms. Gerhart,

As the physician representative of Wright State Physicians Women's Health Care, I am required to inform Miami Valley Hospital administration that the Wright State Physicians Women's HealthCare group of obstetricians and gynecologists are serving as the consulting physicians for Women's Med Center of Dayton. We will consult when medical care is necessary that is beyond the scope of that which the Women's Med Center of Dayton can provide. Patients treated at Women's med center of Dayton who require hospitalization will be admitted under our group's care. We executed a formal agreement between Wright State Physicians Women's HealthCare and Women's Med Center acknowledging such. The agreement is attached for your records.

Sheela M. Barhan, MD

Enclosure

Cc:

Dr. Alan Marco, President and CEO, Wright State Physicians
Dr. Jerome Yaklic, Chair, WSU Department of OB/Gyn
Dr. Martin Haskell, Medical Director, Women's Med Center of Dayton

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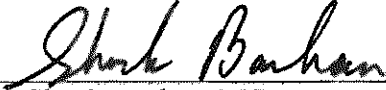
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Wright State Physicians Women's Health Care

Women's Med Professional Corporation



Name: Sheela Barhan, M.D.
Title: Physician



Name: Martin Haskell, M.D.
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Alan P. Marco, M.D.
Title: President and CEO
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