ST. LOUIS BUSINESS JOURNAL

TABLE OF EXPERTS

PARTNERS IN HEALTH CARE







FRANK D'ANTONIO

Frank D'Antonio is president of Aetna's North Central region, which includes lowa, Kansas, Missouri, Nebraska, North Dakota, South Dakota and Southern Illinois where Aetna serves 1.5 million members.

Included under his oversight are all aspects of network development and innovation, clinical operations, product sales and customer satisfaction and retention, regulatory affairs and financial management. He also manages the product portfolio, develops key customer relationships and ensures membership growth.

Prior to joining Aetna, D'Antonio served as director of sales and marketing of Healthsource (CIGNA). He was also an account executive for MH Healthcare (MPlan) in Indianapolis and an agent with Country Insurance in Chicago.

Committed to community involvement, D'Antonio supports numerous charitable organizations. He currently serves on the board of directors of the Regional Business Council and Midwest Health Initiative. He also currently serves on the executive committee for the Leukemia/Lymphoma Society.

D'Antonio graduated from Illinois State University with a degree in marketing and earned a master's degree in business administration from Indiana Wesleyan University.



MEET THE EXPERTS

DR. JEFF PITTMAN

As the chancellor of St. Louis Community College, Dr. Jeff Pittman serves as the chief executive officer of a multicampus college system consisting of four campuses, which offer 15 college transfer options and 90-plus career programs. STLCC serves more than 80,000 students annually. Prior to joining STLCC in July 2015, Pittman served as the statewide vice president of corporate college services and online education at Ivy Tech Community College of Indiana. Pittman also served Ivy Tech in a wide variety of academic leadership roles for the past 27 years in four geographic regions and the system office.

Pittman is a member of several boards of directors, including the Urban League of Metropolitan St. Louis, the Missouri Botanical Garden, St. Louis Regional Chamber, United Way of Greater St. Louis, Higher Education Consortium of Metropolitan St. Louis, Missouri Community College Association Executive Committee and RC-2020.

Pittman's doctorate in educational leadership, administration and foundations is from Indiana State University. His master's degree in human resource development is from Indiana State University, and his bachelor's degree in business is from Indiana University.



LAURA CANOVA WASSON

Laura Canova Wasson entered the family business of Tech Electronics in 1987 as the voice systems manager. Currently, she is the director of health care and voice products. As the director of health care , she is responsible for helping customers utilize technology to increase the quality of patient care and staff productivity. Her contributions to the health care industry go beyond her role within the company. Canova Wasson is extremely active in the community, sitting on multiple boards including the Mercy Foundation Board and VOYCE, and plays an active role in the Cardinal Glennon Foundation. With her most recent endeavor, Canova Wasson is working to bring health care to local high schools. In addition to her roles as the director of health care and philanthropist, she spearheaded the launch of Tech Electronics' cloud company, Sequre.



PARTNERS IN HEALTH CARE

Amazon took St. Louis out of the running for its second headquarters because of the lack of a blueprint for talent here. Do you agree with the finding?

Dr. Jeff Pittman: I absolutely agree with the finding. I can base that argument on empirical research that the college has completed the last several years with our State of the St. Louis Workforce report. This particular year, we focused on middle-skills jobs or those jobs that require more than a high school diploma, but not necessarily a four-year degree. These are high-paid jobs. Some of the best examples I can provide in the health care sector include registered nurses, occupational therapy assistants, dental hygienists and radiologists. But the middle skill shortage exists in all sectors. In the St. Louis market, we only have about 46 percent of the workforce with the education and training needed for middle skill jobs, which presents a large skill gap when projections show that 53 percent of all jobs will be middle skill jobs by 2020. Health care is the sector that's in the worst shape and needs the most workers. The projected growth rate for health care over the next 10 years is 11 percent. That's more than double any other sector in the St. Louis market. There were 20,000 job postings just last year in the health care sector in St. Louis, according to the Missouri Economic Research and Information Center. Forty-four percent of the health

care employers said they had to hire people with less skills and education than they needed. So, employers are already onboarding people with less than a desired education because there's such a shortage, and they're trying to provide training internally or send them to an educational provider to get the education they need. The most significant and scary number for me as an educator is that we have a vacancy rate in nursing of 18.8 percent. That's a big number to overcome, and why the college has decided to invest in a new Center for Nursing and Health Sciences at the Forest Park Campus.

Laura Canova Wasson: As an owner of Tech Electronics, we are finding it difficult to find talent to fill our open positions for our growing company. As the director of healthcare, we are seeing a serious shortage in nursing in the state of Missouri, especially in long-term care. In an effort to combat this issue, we are partnering with organizations such as Leading Age and nursing schools, such as Maryville University, to expose nursing students to opportunities in long-term care. Traditionally, students complete their practicums in acute care hospitals. The goal of this partnership is to have students complete their practicums in skilled care facilities. Our hope then is that these students will accept jobs within these communities.

Frank D'Antonio: At Aetna, we have a vested interest

in local talent as well. We want our teams to have a diversified educational and work background that includes all areas of business, education, clinical and non-clinical disciplines. At Aetna, we look for nurses and other medical professionals to join us. We have a team of doctors and nurses, which includes case managers, utilization managers, nurse practitioners, but we don't direct care. What we do is pay attention to criteria, evidence-based medicine, making sure medical care givers are following guidelines so that members get quality care and best outcomes. And what I think is also going to support this as we go forward, is the type of contracts we have with providers and our relationships with them. By "providers," I mean hospitals, doctors, specialists, long-term care facilities across the board. The health care industry is ready for change. Valuebased-care is the direction Aetna is headed to help provide sustainable health care for our future. It changes our role to be less transactional and more collaborative. consultative. It changes from somewhat of a "Mother, may I?" to "How can we do it better?" and "Did we take care of the patient?" This means Aetna is taking a coordinated approach to care, it's member-focused, doctor-driven health care. And to be able to go there, we need to have a diversified talent pool that's coming out of the next generation.



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Laura Canova Wasson: Even companies like ours, as well as manufacturers who make and sell health care technology, are looking for RNs because they know how to speak to the clinical staff. This shrinks the available labor pool for providers. The shortage is only going to increase as baby boomers continue entering into skilled and assisted living care as well as needing

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FRANK D'ANTONIO, Aetna

> hospitalization. This is not just a St. Louis or Missouri problem, this is nationwide problem.

How does Missouri compare with the rest of the states?

Dr. Jeff Pittman: In terms of the statewide average of nursing shortage, we're higher than average. And St. Louis County is even higher than the statewide average. And, compounded with that, our health care workforce is graying. The number of people working who are 55

and older constitute 22 percent of our workforce in St. Louis County. So, you're going to see an exodus occur in terms of retirement. To contrast, just a decade ago, it was 15 percent aged 55 and over. You can see that number is going to continue to tick up for a while, so we need to prepare for this rather large change that's coming.

Frank D'Antonio: Aetna is always looking for talented and diversified workforce, especially in the nursing field as Dr. Pittman mentioned. Nursing is a rewarding field where you can make a difference in a patient's life and our community. There's also flexibility in the workplace. At Aetna, we have nurses that visit our members in their home, work in doctor's offices and advocate for our members. Nursing is also a great career for those looking for flexibility and work-life balance. This is not only in Missouri, but across all of Aetna.

What are you doing to address workforce development and shortages in health care?

Frank D'Antonio: We developed what we call our Agile Hire Program here in St. Louis and in Des Moines, Iowa. It stands for Aetna's Growth in Local Experience. We're working with Maryville University and Lindenwood University, and in Iowa, Drake University. It's a paid internship program and here's how it works. We offer eight-week rotations through various areas of our organization from commercial sales to marketing to technology to compliance, finance and Medicare. We look for students that are in their second semester, sophomore year so that when they go through all these rotations, it takes them to their second semester senior year. And after each one of the rotations, they put together their research and build their own portfolios,

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which they present to the senior team. It becomes an on-the-job interview for us with them, and they end up knowing our business inside and out. What we're hoping is that they choose to stay with Aetna for a full-time job. It's all about helping develop that talent earlier. And it doesn't matter to me whether they're a health sciences major, whether they're a finance major, a marketing major. It matters that they get a well-rounded education and internship experience and that takes a partnership between universities, colleges and business.

Laura Canova Wasson: There is a pool of bright young students in north St. Louis city and county who may not have exposure to the job opportunities in health care. Tech Electronics, in partnership with other health care organizations, is working on a program to educate middle school and high school students about this job market. The goal is to increase the pool of health care workers and use philanthropic efforts to provide scholarships to promising students as necessary. We're also looking to address the workforce issue through virtual health care. Mercy's virtual care center is growing and telehealth is becoming increasingly popular. This type of technology and shift in mindset, on how health care is delivered, could rectify the work shortage issue. Baby boomers prefer to age in home instead of going to an independent living community. A new trend in long-term care is Continuing Care at Home (CCaH) also known as long-term care without walls. To support this trend, we are developing technology services to monitor individual's health remotely, allowing them to age in home. An example of such technology is Epharmix, which was developed to automate routine outreach and collect condition-specific patient reported outcomes.

Talk about that technology.

Laura Canova Wasson: One of the biggest expenses for hospitals as well as long-term care facilities is falls and pressure ulcers. There have been some visible lawsuits around these issues and some multimilliondollar settlements. Hospitals, as well as the long-term care owners, are looking for ways to predict these events before they occur. There are many fall management technologies on the market. One example is Foresite, which uses cutting edge artificial intelligence and monitoring technologies. A resident's behavior is used to predict actions that proceed a fall, allowing staff to be alerted and intervene before the fall happens.



With our health care programs, we bring area health care providers and physicians and administrators in to assist us with the curriculum that we have.

DR. JEFF PITTMAN,

St. Louis Community College



Dr. Jeff Pittman: We are addressing workforce development by aligning our training and degree programs with business and industry through advisory committees for our degree programs and in meeting with employers. With our health care programs, we bring area health care providers and physicians and administrators in to ensure our curricula aligns with their workforce needs. We also partner with key workforce development agencies, such as the Regional Business Council, the Regional Chamber, the Urban League, Civic Progress and the Department for Economic Development. A good example is how we partner with the Missouri Economic Research and Information Center in developing the State of the St. Louis Workforce Report. For our degree programs, we work to develop strong clinical connections with area health care providers. I believe that clinical sites provide the perfect educational model, because students are receiving didactic and lab training and education while they're at the campus, and also real-time clinical experience in hospitals and with other health care providers. This type of "apprenticeship" model is one I would like to apply to all of our programs because I believe it's the best educational model. It's a model that addresses the workforce situation much more quickly in lieu of someone just graduating from school and hitting the

workforce cold with no work experience in the type of job they have applied for.

How are you making that happen?

Dr. Jeff Pittman: We're talking to employers now in regard to how we can engage with them to develop an apprenticeship model so they can get the opportunity to see students in the work setting. For many of our other programs, including IT, we need to repackage them to better align with area employers. Students enjoy this type of experience because they're actually learning in the workplace. Employers also appreciate this model as they are provided the opportunity to see the students in the workplace, which could assist them in making a decision to hire the student in the future. So, the apprenticeship model is a very good educational model. It's what the building trades have used with their particular training programs for decades. It's also the model that our allied health programs have used since their inception. On the noncredit side, the college is finishing up a grant called MoHealthWINs, which we've had more than 800 participants. The MoHealthWINs grant is from the Department of Labor and focuses on economically disadvantaged or high-risk students. The grants train individuals for entry-level jobs, for example, like a certified nursing assistant. But these programs also crosswalk some credit into degree programs that provide the students the opportunity to continue their education while they are employed. Many of the grant

recipients have been unemployed, with no opportunity for educational access. For these programs to be successful, we have placed strong support around them, including basic skills education and a high level of faculty and tutoring support. And, we've had success with that. Of those completing the program, 92 percent were employed after program completion. Many of the completers have returned, and they're entering into regular credit degree programs.

Are you targeting high school students for these programs or is it just for firstyear college students?

Dr. Jeff Pittman: We're targeting both traditional high school graduates, early college students and adult students. We have an early college program where students attend classes at the Forest Park and Wildwood campuses. They come in as juniors and must meet certain ACT and GPA requirements. This May, we'll have our first cohort of early college graduates walk across the commencement stage, and they'll get an associate's degree simultaneously with

As much as there is a shortage in nursing overall in the state of Missouri, it's even worse for long-term care owners and their staff, especially on the skilled care side.

LAURA CANOVA WASSON, Tech Electronics

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a high school diploma. Right now, these programs are in general studies, but they will become more specific over time and include pathways for students into careers. That's the K-through-12 system and how we're working with them. For adult students, one of the largest demographics in St. Louis County is the 30 to 39-year-old range. So, we know we have a lot of potential students in this category; and it's really the only demographic that's growing right now other than the boomers. But from a workforce development perspective, that's a group we are focused on. The MoHealthWINS grant really focused on adult learners, and we need to continue this focus in the future, even with the grant ending.

Frank D'Antonio: I think that's fantastic, because when I was growing up in Chicago, we had a program called CEDA. It was for high school students that weren't going to go to college, but with CEDA, they were able to spend half of each school day learning to be a hairdresser or learning to be an electrician, specific trade skills that would help them get a job upon graduation. So, it would be great if those sorts of programs could start up. Because really, if you think about it, it's your ZIP code, or the block you live on that really determines your life span. We understand that addressing the social determinants of health in a community can help people achieve their health goals. Sixty-percent of a person's life expectancy is associated with where they live. Thirtypercent to their life expectancy is associated with their genetic code and 10 perfect is the clinical care they receive. Now, where we live and what our ZIP code is matters more than our genetic code on how long we live. If we can do more in the community, near people's home, we look to help keep people healthy and live the life to achieve their personal health ambition. We want to build healthier cities, and we believe we can do that

by creating a better health care experience. And what we are focused on is trying to get health care from the exam table to the kitchen table. Really get into people's homes, join them to get healthy. We currently work with local organizations to build healthier communities including those that partner with local schools to better educate our future talent.

Laura Canova Wasson: One of the reasons why the elderly are hospitalized is due to falls. Urinary tract infections is one of the main casues of resident falls. What causes the urinary tract infection? Many times it is simple dehydration; they're not drinking enough water. The technology that will eventually become available is measuring how much water Mrs. Smith, age 85. is drinking in her home. It will also detect how often she goes into bathroom. Today, we can install sensors throughout the home to monitor when Mrs. Smith gets out of bed, goes to the bathroom, etc. These metrics are transferred automatically through imaging monitors to an artificial intelligence engine for analyses and alerting. Therefore, personel can see what is causing Mrs. Smith to fall. The predictive technology will eliminate existing exams, such as gait, balance assessments and timed up and go. This technology saves valuable staff time by completing these assessments automatically as resident or patient moves about their room. Since monitoring is continuous, the system makes it possible to detect decline much ealier stage.

Talk about other new technologies in health care.

Frank D'Antonio: Aetna has partnered with Apple to bring the best of both organization's capabilities together to unlock value in new ways never before done in health care. Apple brings technology, best-in-class user design and innovative devices. Aetna brings health care expertise in access to care, in-house nurse teams and partnerships with an engaged provider network. Together, this brings tangible value, transformational experiences and in the long term, early behavior change and as for Aetna members, as we join them on their journey to better health. The combined value is greater than the sum of the parts. Apple sees this and as a result, Aetna was invited to work with Apple in their Innovation Lab. Together with Apple, Aetna can lift the burden and anxiety of taking the first steps to enjoy health.

Laura Canova Wasson: The problem with wearables, especially in at-home care, is that they will not always remember to put on the devices. New technology is being developed at a rapid pace to eliminate the need for wearables. For example, there are smart toilets that can scan your internal organs by analyzing your waste then automatically send the results to your provider.

Who wants to have the last word?

Laura Canova Wasson: One other thing I want to mention is exposing younger kids to the different careers in health care. I want childern and young adults to know they have options and can have a good career. In addition to the workforce shortage, health care is evolving at a rapid pace and at the end the day we have to work together, meaning all health care organizations, to deal with these issues.

Frank D'Antonio: Across the country, the Aetna Foundation and its partners are helping to inspire cities and counties to uncover innovative ways to build healthier communities. This mission truly comes to life through a first-of-its kind collaboration with U.S. News & World Report to create the Healthiest Communities rankings. Like I mentioned earlier, our ZIP code determines our life span more than our genetics. So, when it comes to improving health care, we have a big job in this country to expand our focus beyond the services we receive at a doctor's office or hospital and also consider the social and environmental factors that have an even greater impact on our health.

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