Geisinger is transforming healthcare.
Transforming quality and innovation.
Transforming market leadership.
Transforming the Geisinger family.
For our region and for the nation.
OUR MISSION

Enhancing quality of life through an integrated health service organization based on a balanced program of patient care, education, research, and community service.

OUR VISION

To be the health system of choice, advancing care through education and research. Our vision is focused on these strategic priorities:

- **Quality and Innovation**: driving all our patient care decisions
- **Market Leadership**: exporting Geisinger quality and innovation across the region and into new markets
- **The Geisinger Family**: empowering personal and professional well-being
Leadership Message

Nearly a century ago, our founder, Abigail Geisinger, had a vision to “make my hospital right; make it the best.” Mrs. Geisinger’s foresight and her values continue to be the inspiration for the fully integrated health service organization we know today.

Now, as society is compelled to deliver and pay for health services that optimize both individual patient and population outcomes, we are in a unique position to deliver even further on Mrs. Geisinger’s promise to the community.

While we remain steadfast in our mission of healing, education, research, and service right here at home, we are also in a unique position to export Mrs. Geisinger’s dream beyond central and northeast Pennsylvania. Our unique model and pedigree have enabled us to assume accountability for coordinating and organizing care in order to reduce variability, improve outcomes, align incentives, and decrease costs. The result: healthcare strategists, government leaders, and industry pundits study Geisinger in an effort to determine if what we do here can be scaled for use in other environments.

Thanks to the talents, dedication, and commitment of our board, staff, patients, and community, Geisinger continues to meet its mandate for excellence and innovation.
A UNIQUE CULTURE AND STRUCTURE ENABLE GEISINGER HEALTH SYSTEM TO IMPLEMENT AND DISSEMINATE NEW MODELS OF CARE. AS A RESULT, THE SYSTEM’S INNOVATIVE SOLUTIONS ARE HELPING TRANSFORM HOW HEALTHCARE WILL BE PROVIDED AND FINANCED IN THE FUTURE. THIS WAS THE TOPIC OF A RECENT CONVERSATION WITH THREE OF GEISINGER’S VISIONARY LEADERS.

GEISINGER LEADERSHIP:
FRANK M. HENRY, CHAIRMAN OF THE BOARD EMERITUS
GLENN D. STEELE JR., MD, PHD, PRESIDENT AND CEO
WILLIAM H. ALEXANDER, CHAIRMAN OF THE BOARD
MODERATOR: The three of you have an extraordinary perspective on what’s occurred at Geisinger Health System in recent years and what the future might hold. Frank and Bill – together you have been involved as board members for nearly half a century … and Glenn’s been at the helm for more than a decade. Why is Geisinger a national leader in transforming the way patients and communities get high-quality healthcare at a time when so many health systems across America are struggling to define their futures?

BILL: Geisinger has had a culture of accepting and working to meet challenges from the very beginning. The physician group practice model that Abigail Geisinger insisted upon was pretty radical 100 years ago, but it has worked.

FRANK: We’ve stuck to Mrs. Geisinger’s vision of wanting this community to have the best and we’ve embraced constant change as the way to achieve that. And in the past 10 years, innovation has been a constant reality for us.

GLENN: But you can’t innovate without the freedom to fail, to learn from that and keep moving ahead. I’ve been blessed with a board that’s understood that taking chances is part of achieving a vision.

MODERATOR: Do you think that cripples some hospitals and health systems?

BILL: It does. Because we have a tendency to associate failure with someone’s mistake or error in judgment rather than a natural part of any change process. This is particularly true in the ever-changing healthcare environment.

GLENN: Change is not a choice; it’s a necessity in today’s environment. Many organizations have a hard time letting go of what they know. Change – in their market, their structure, or their way of looking at their mission – is terrifying and often avoided.

BILL: And it won’t happen if it’s a top-down exercise. It’s not enough for a board or management to announce: “This hospital or health system is going to change how it operates” and then expect it to happen. All change must involve the entire organization in its planning and execution.

FRANK: People must buy into the changes and what the results will be – doctors, nurses, everyone. They have to want to be part of it. I think that’s the real key to what’s happened here. Everyone understands the team approach. Sometimes board members worried we were moving too fast, but they never doubted it was the right direction.

GLENN: The other aspect – and this may be the most daunting of all – is that, in order to re-engineer healthcare to better serve the patient and keep costs under control, you have to do everything – everything – differently.

FRANK: We’ve gotten a lot of attention for our success at eliminating needless protocols and the 30 or 40 percent of unnecessary care and associated costs that are of no value to patients. But that’s only a part of it.

GLENN: But that was the touchstone. We had to start by demonstrating that we could re-engineer from a focus on procedures to a focus on outcomes … better, patient-centered care.

BILL: Glenn spent a lot of time educating the board, the staff, and the community about where we were headed. He wanted them to understand not only how we wanted to make care better, but that Geisinger was going to play a different role in the healthcare of central and northeast Pennsylvania.

MODERATOR: Different from?

FRANK: If you look back before 2000, we were not at all welcomed by other hospitals. They looked at us as only interested in taking away their patients. It took time, new leadership, and slowly repositioning ourselves to allow other hospitals and doctors to change their view of us.

BILL: Old perception: aggressor. New perception: partner. Our hospitals were going to facilitate the handoff of the patient to the best setting for care … in the patient’s interest. And we repositioned the health plan to be a partner.
FRANK: Our health plan now has contracts with many providers, not just Geisinger. I might add that we almost sold the insurance company at one point years ago. Deciding not to do that was very important to being where we are today.

GLENN: Yes it was. But we also tried to be very clear to other hospitals and providers and the community at large about what we were trying to do on both the care and insurance sides of the system. Our model has proven itself and that’s why we’re welcome as partners for the future. We’re now able to reach out into markets outside of Pennsylvania such as West Virginia, Delaware, and New Jersey.

FRANK: I think that’s as good an indicator as any of how far we’ve come.

BILL: I’d like to add to something Frank mentioned a moment ago. I agree about the importance of the decision not to sell the insurance company. But I think the other major decision that we made that was a milestone was the commitment to major investments in information technology.

FRANK: That’s very true. For some on the board the costs were breathtaking. But remember we got serious about information technology long before anyone else did, and that’s a tremendous advantage for our patients and for us. We can track the health of the people in our community literally from birth throughout their entire lives. What that means in terms of making people healthier is astonishing.

BILL: It also means seamless communication of information between hospitals, doctors, and clinics when someone needs care. That’s something patients can see and appreciate.

GLENN: And it’s a never-ending investment ... or should I say continuing re-investment?

MODERATOR: Changing the subject for just a moment to national health policy coming out of Washington. We talked about healthcare reform for a long time in this country and finally did something about it. The new law is being challenged in the courts at every level. Some want to repeal the entire thing. The current administration has begun issuing regulations to implement ideas such as accountable care organizations – ACOs for short. ACOs seem to be what Geisinger already is ... 

GLENN: Reform won’t derail where we’re headed. It may scare off others who want to follow a vision like ours and know they should. The new rules and regulations governing ACOs are a perfect example. They were unrealistic and overly specific. I think they frightened a lot of organizations that want to change.

FRANK: Our board is not going to veer from the path we’re on because of what the bureaucrats and politicians can or can’t get done. As long as it’s fiscally possible, we’ll keep moving ahead. We’ll have to adapt, but we believe in our solution.

BILL: If we continue to focus on the patient, we’ll survive anything that comes out of Washington. The economy is a greater challenge for us.

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MODERATOR: How so?

FRANK: We’re one of the top employers in the region. Others are laying people off, while we continue to add jobs. We’re committed to being a stabilizing force. When the Geisinger board looks at our future direction, one of the most important issues is our $5.5 billion annual positive economic impact on the community … integrating into the state and local economy.

GLENN: We’ve grown from 7,000 to 17,000 employees in 10 years. We understand what we mean to the micro-economy here. When the last manufacturer left the Danville area, we bought the plant and turned it into an ambulatory campus. Jobs and stability are very real.

BILL: I’d like to think that any employer in the Geisinger service area is better off because we’re here. If their employees are healthier then they’re more productive and there’s less turnover.

FRANK: It creates a better business climate … way beyond just jobs.

BILL: That also makes us an asset for economic development. Our clinics mean patient access that goes far beyond what most rural communities could ever imagine.

MODERATOR: Doesn’t the fact that Geisinger Health System has been acclaimed as a model for where American healthcare needs to go put a lot of pressure on you?

GLENN: It’s heartening that others from across the nation and the world want to come and see what we’re doing. But the pressure that I feel is the challenge of staying close to the community so that we continue to succeed here.

FRANK: We did a formal board assessment not long ago. As a result, we made the boards of the health system and health plan more diverse. We brought on some younger board members, and revamped our committees.

BILL: We also added a couple of directors with a national perspective on healthcare. The result has been a very stimulating mix of ideas and perspectives … a great balance.

FRANK: One of our strengths today is the way in which the board and professional leadership work together … the extraordinary level of communication … informed decision making and a process to keep building talent throughout the organization.

BILL: Each generation of leaders has to empower the next generation to be better than they were. My greatest satisfaction would be to see a new board at Geisinger in the future doing a better job than we’re doing. That’s part of stewardship.

GLENN: Right now our towering strength is the motivation and teamwork of everyone who works in the Geisinger family. We have to keep listening to them to learn how we can help them do their jobs better. And we have to keep creating new incentives and rewards that let them know we value that motivation and teamwork.

FRANK: It’s all reflected in the patient experience here. It is different. People see me or call me three or four times a week to tell me about the care at Geisinger. They talk about everyone they come in contact with … wonderful, loving care.

BILL: There’s a culture at Geisinger that lets the patient-centeredness come through. About a year ago I was an overnight patient here for a procedure. As I was leaving in the morning, headed down the hallway, the person scrubbing the floor wished me a good morning. Then he said: “How are you doing? I hope we took good care of you.” He didn’t know anything about me except that I had been a patient where he worked.

MODERATOR: What did you tell him?

BILL: I said: “Yes, you took very good care of me.” And I could see the pride and satisfaction on his face. Everyone from our housekeepers to our top physicians has embraced that concept. That’s the heart of it here … doing what’s right for the patient.

“ANY EMPLOYER IN THE GEISINGER SERVICE AREA IS BETTER OFF BECAUSE WE’RE HERE. IF THEIR EMPLOYEES ARE HEALTHIER THEN THEY’RE MORE PRODUCTIVE AND THERE’S LESS TURNOVER.”
GEISINGER'S COMMITMENT TO QUALITY AND INNOVATION CONTINUES TO DRIVE ALL PATIENT CARE DECISIONS AND KEEPS THE SYSTEM IN THE FOREFRONT OF AMERICA'S HEALTHCARE EVOLUTION. AS A RESULT, GEISINGER HAS INCREASED ITS EFFORTS TO ENSURE THE SYSTEM REMAINS ON THE LEADING EDGE OF ADVANCES IN PATIENT CARE, RESEARCH, EDUCATION, TECHNOLOGY, AND BUSINESS.
At Geisinger, innovative approaches are developed and implemented to attain the “perfect patient experience” while empowering patients to be actively engaged in their care. The talents and energy of the Geisinger family, cutting-edge research, and the use of technology and metrics to improve care delivery are all harnessed to improve clinical outcomes, develop new models of care, and base payment on value re-engineering.

**ProvenCare**

Geisinger’s signature ProvenCare® model is the foundation upon which much of the system’s research and redesigned care is tested and perfected. A collaborative effort between the Geisinger Clinical Enterprise and Geisinger Health Plan, ProvenCare focuses on patients with particular medical conditions using only best-practice, evidence-based techniques and treatments. Geisinger Health Plan pays a single, global fee for pre-admission testing, treatment, and follow-up care with no additional payment for treating complications, should they arise.

“ProvenCare works because we have learned that by strictly adhering to a set of standards and eliminating things that don’t add value for the patient we can dramatically elevate quality and reduce costs at the same time,” said Geisinger President and CEO Glenn D. Steele Jr., MD, PhD.

In addition to coronary artery bypass graft surgery – the program the New York Times called “The Warranty” – the ProvenCare Episodic model is also producing dramatic results for other episodic medical conditions. For example, beginning three years ago, Geisinger leaders and caregivers looked at the care surrounding the 5,000 pregnancies seen annually at the system’s clinic sites and hospitals. The result was ProvenCare Perinatal, built on a model that changed virtually every aspect of the program from prenatal to postpartum care and patient education. At Geisinger Wyoming Valley Medical Center alone, cesarean section deliveries dropped nearly 33 percent between 2008 and 2010, with fewer babies admitted to a neonatal intensive care unit.

Following many of the principles of the ProvenCare Episodic model, ProvenCare Chronic expands bundling to the chronic care continuum – providing care in the hospital, in physicians’ offices, at home, or in other settings. It also covers adult disease prevention management. Payment arrangements include a quality-based incentive program for primary care providers. As with the episodic model, evidence-based, standardized best practices are hardwired into the electronic health record to ensure that every patient receives every element of care, every time. The ProvenCare Chronic portfolio includes diabetes, congestive heart failure, hypertension, and the prevention bundle.

**ProvenCare Next Steps**

Working in partnership with the American Cancer Society and others, Geisinger researchers and clinicians have developed guidelines for treating lung cancer and are developing guidelines for other cancers, including pancreatic. Additional guidelines are in development for epilepsy.

A serious and debilitating disease, epilepsy affects more than 2,000 people in the Geisinger service area alone. “Epileptic seizures prevent many people from working and driving, and lead to injuries such as falls that we might be able to prevent,” said Steven A. Toms, MD, MPH, associate chief medical officer, director of neurosurgery and co-director of the Neurosciences Institute. “With ProvenCare, primary care doctors will soon have guidelines that will help them manage these patients with medications, access the intervention of specialists at the right time, and advise surgery where appropriate.”
“We have a long agenda for developing ProvenCare models,” said Albert Bothe Jr., MD, Geisinger’s executive vice president and chief medical officer. “The potential is enormous, so we’re conducting in-depth research on our processes. The ProvenCare model is a pattern not only for acute care, but also for treating chronic conditions such as congestive heart failure, diabetes, and hypertension.”

Rewards of Medical Research

A robust research program that ranges from investigating health issues facing families to collaborations on the cutting edge of human genome science is the catalyst for much of Geisinger’s innovation and clinical change. Over the past year, David H. Ledbetter, PhD, executive vice president and chief scientific officer, has accelerated the research agenda and added to the ranks of the system’s top investigators.

While 2011 was a year of milestones in patient safety and numerous clinical care areas, Geisinger’s ongoing commitment to a vigorous research agenda targeted directly at patient care and personalized health is one not many health systems and academic medical centers can match.

National Human Genome Research Institute

Fueled by a major, four-year grant from the National Institutes of Health known as the Electronic Medical Records and Genomics – eMERGE – grant, Geisinger is partnering with seven medical
research institutions and the National Human Genome Research Institute to use genetics to improve patient care. The goal is to enable physicians to make genomic-informed decisions on the choice of drug therapy or other therapeutic intervention that will work best for an individual patient.

To leverage its electronic medical record capabilities for genomic medicine research, Geisinger launched a large-scale biobanking program in 2006, known as MyCode to create a repository of patient samples that are linkable to rich clinical data. These resources provided the basis for eMERGE.

“We are now in Phase II of eMERGE and focusing on how we use genetic information to affect patient care,” said Ledbetter. “The intent is to move genomic clinical research into routine patient care as rapidly as possible.”

Research Program Expansion

Additional prominent collaborations and national grants will enable enhanced recruitment and expanded research into areas with more immediate patient care impact. Work is underway to expand Geisinger’s genetics program around oncology services such as ovarian, breast, and colon cancer, and a team is working toward an Autism Center of Excellence that is scheduled to be in operation in 2012.

“Our goal is to bring real benefit to patients with autistic children, who currently have long waits for evaluations and services,” said Ledbetter. “We have to develop a new model. There is a tremendous national need, and our hope is that we can pave the way for something that could have an impact across the United States.”


eMERGE

Geisinger Health System was awarded a $3.3 million grant from the National Human Genome Research Institute to investigate how patients’ genetic information can be used to improve their care. The eMERGE network, made up of seven member organizations, will receive $25 million over the next four years to demonstrate how genetic information linked to disease characteristics and symptoms in patients’ electronic medical records can be used to obtain better outcomes. The eMERGE grant is led at Geisinger by David Carey, PhD, Weis Center for Research, and Marc S. Williams, MD, the Genomic Medicine Institute.

Other eMERGE network sites are:

- Vanderbilt University Medical Center, Nashville, Tenn.
- Group Health Cooperative, Seattle.
- Northwestern University, Evanston, Ill.
- Marshfield Clinic Research Foundation, Marshfield, Wis.
- Mayo Clinic, Rochester, Minn.
- Mount Sinai School of Medicine, New York.
GEISINGER IS WELL POSITIONED TO ENHANCE HEALTHCARE ACROSS THE REGION AND TO BRING QUALITY PRIMARY AND SPECIALTY SERVICES TO AREA COMMUNITIES, ESTABLISHING URGENT AND AFTER-HOURS-CARE CENTERS, LINKING GEISINGER’S SPECIALTY SERVICES TO RURAL COMMUNITIES THROUGH CUTTING-EDGE TECHNOLOGY, AND PARTNERING WITH HOSPITALS, PHYSICIANS, AND OTHER PROVIDERS IN THE REGION.

JOHN MCIWAIN, DO, eICU® PROGRAM DIRECTOR, AND KENNETH E. WOOD, DO, GMC CHIEF MEDICAL OFFICER, USE TELEMEDICINE TO ENHANCE BEDSIDE ADHERENCE TO BEST PRACTICE AND ENSURE PATIENTS RECEIVE QUALITY CARE NO MATTER WHERE THEY LIVE.
Geisinger remains committed to improving the health status of the residents of central and northeast Pennsylvania and is dedicated to capitalizing on the “sweet spot” between the Geisinger Clinical Enterprise and Geisinger Health Plan (GHP) in order to scale and generalize Geisinger innovations in new regional, national, and international markets.

Local and Regional Partnerships

Geisinger partners with numerous hospitals, physicians, skilled nursing facilities, and a variety of other organizations to share innovations, ensure access to care, and extend expertise and technology.

In the nearby Shamokin community, what began as a partnership has developed into the full merger and integration of Shamokin Area Community Hospital into Geisinger Medical Center (GMC), bringing Geisinger’s national reputation for quality and cost-effective care to patients in that community.

“Geisinger is committed to the traditions of quality and service that characterize Shamokin,” said Geisinger President and CEO Glenn D. Steele Jr., MD, PhD. “We are just beginning to consider the extraordinary possibilities this merger represents for the people of Coal Township and the surrounding community. As we bring this talented group of individuals together, we’re certain a stronger, more dynamic healthcare community will emerge.”

Geisinger’s merger with Community Medical Center (CMC) in Scranton became official on February 1, 2012. Since the signing of the definitive agreement in July 2011, CMC and Geisinger have been developing clinical program and integration plans. Geisinger has committed to invest $158.6 million over seven years in northeast Pennsylvania to enhance clinical programs, increase physician recruitment, expand and improve facilities, and implement new information systems – including Geisinger’s electronic health record capabilities.

“These new relationships will allow the merged organization to build programs, grow services, improve health outcomes, and demonstrate value,” said Steele. “Together, we can enhance our ability to provide superior care and service for all the residents of the region.”

Outreach

Geisinger’s expertise and advanced services are disseminated throughout the region through a network of primary care and specialty physicians who work in both Geisinger-owned facilities as well as in local and regional independent hospitals. This model enables patients and their families to obtain the majority of their care close to home.

“We made a conscious decision and significant commitment to focus the power of our clinical network – 39 clinics in 44 counties – on helping our healthcare professionals function at the highest level,” said Lynn Miller, executive vice president, clinical operations. “Whether it’s the availability of our electronic health record or our specialists partnering with community physicians and hospitals, the result is improved communication and coordination to benefit patients.”

“When we create a successful model, whether it’s designed to improve patient care or how we pay for care, we share that success with other providers both in the region and across the country,” said Miller.

Telehealth

Geisinger uses telehealth to partner with a variety of community hospitals – many of which are in rural communities – to ensure that patients receive quality care no matter where they live.

Kenneth E. Wood, DO, GMC chief medical officer, said a patient’s location should not determine the level of care they receive. “If an individual lives in a small town, or in an area where there are few or no subspecialists, he or she should still have access to the best care available.” Telehealth provides a solution.
Urgent needs (intensive care or stroke), as well as patients who require more routine types of services (psychiatry or dermatology, for example), can all be managed through telehealth.

“Every ICU patient served by our system is covered by our electronic intensive care unit (eICU®),” Wood said, noting that Geisinger also has linked non-Geisinger hospitals into its system. “In the past, those patients would have been transferred to GMC, but now more patients can remain in their own communities and still benefit from Geisinger’s quality care.”

Examples of telehealth programs include:

**eICU:** Geisinger’s eICU program connects all of Geisinger’s intensive care units and several remote intensive care units to a team of critical care specialists at GMC. These specialists constantly monitor patients’ vital information and clinical status using electronic support tools and video-telemonitoring equipment, recommending appropriate and timely medical interventions by the local care units.

**Tele-stroke:** A certified primary stroke center and the only neurovascular intervention center in the region, GMC employs board-certified stroke specialists who use video, audio, and electronic monitoring technology to help physicians diagnose and treat stroke patients with clot-busting thrombolytic medications in participating hospitals, 24 hours a day. Geisinger is partnering with Evangelical Community Hospital and Lewistown Hospital to expand stroke services in the Central Susquehanna Valley and Lewistown areas.

**Pediatric Cardiology:** Pediatric cardiology specialists provide expert interpretations of echocardiograms, electrocardiograms, and Holter monitoring exams for regional hospitals and providers. Sophisticated digital equipment allows participants to transmit studies to Geisinger’s specialists for interpretation, facilitating timelier, accurate diagnosis and treatment planning.

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**Keystone Health Information Exchange**

Ensuring that patient information is available when and where it is needed throughout central and northeast Pennsylvania is the critical role of the Keystone Health Information Exchange.

Through the information exchange, healthcare professionals at more than 50 central and northeast Pennsylvania hospitals and healthcare facilities, including nursing homes and homecare agencies, have web access to patient-consented hospital discharge summaries and reports. The exchange eliminates the cost and time spent repeating unnecessary tests and procedures by allowing clinicians to view historical patient information.

Partnering with General Electric Healthcare, the information exchange is scheduled to launch an online patient portal in summer 2012 that will allow patients to interact with all their exchange-participating doctors and nurses, regardless of facility affiliation, and view their clinical information from participating healthcare organizations.

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**Keystone Beacon Community**

Keystone Beacon Community, the three-year federally funded initiative focused on improving care coordination, communication, and connectivity for high-risk patients, now has four central Pennsylvania hospitals (Bloomsburg Hospital, Evangelical Community Hospital, Geisinger-Shamokin Area Community Hospital and Geisinger Medical Center) sharing critical patient-consented data.

Through the synergy of Keystone Beacon Community’s health information technology and skilled nurse care managers, more than 2000 patients who have heart failure or chronic lung disease or who have recently had surgery received integrated care across nonintegrated systems in the program’s first year. By building effective low-investment interventions that are sustainable and replicable, Keystone Beacon Community is optimizing care coordination in this region and beyond.
**Tele-psychiatry**: Geisinger’s department of psychiatry uses telemedicine to better meet the mental and behavioral health needs of residents in Lycoming and Centre counties. Tele-psychiatry connects patients at Geisinger-Lycoming and Geisinger-Scenery Park with psychiatrists at GMC in Danville for two-way interactive consultations and evaluations. Additional locations plan to add tele-psychiatry services in 2012.

**Knowledge Dissemination**

Healthcare strategists, government leaders, and healthcare executives from around the world look to Geisinger “because we have assumed accountability for coordinating and organizing care in order to reduce variability, improve outcomes, and decrease costs,” said Earl P. Steinberg, MD, executive vice president for innovation and dissemination. “We’ve demonstrated that what we have achieved is sustainable and can be replicated elsewhere.”

“We are motivated by a sense of mission and the potential to have a positive impact on how healthcare is provided and financed,” said Steinberg. Innovations such as ProvenHealth Navigator® and ProvenCare® may not be reproduced everywhere exactly as they have evolved at Geisinger, Steinberg said, but “we can share our knowledge to help others re-engineer how they provide care within their local environment.”

**Population Health**

One of Geisinger’s major areas of focus is population health: delivering value-based care across a continuum of patient types, from the healthy to the critically ill. Enabled by its integrated structure, Geisinger has developed best practices and tools to manage significant patient populations, including:

**Geisinger Proven Solutions (GPS)**

Geisinger Proven Solutions (GPS) is the team that disseminates Geisinger’s intellectual property. The GPS team consults on healthcare delivery redesign with other provider, payor, employer, and governmental organizations.

The team – led by Meg Horgan, Bruce Hamory, MD, and Nancy Rizzo – includes physician, nurse, and administrative leaders who together represent more than 90 years of executive and senior management experience. Many on the team were instrumental in developing Geisinger’s nationally recognized innovations and consult from a position steeped in hands-on experience. They are highly sought-after thought leaders who educate, assess and guide in the implementation of population health, patient-centered medical home, reliable deliver of best practices, physician alignment, healthcare IT and a variety of other timely healthcare delivery models.
Operational efficiencies to manage and integrate service delivery across the care continuum

Payor partnering, compensation management, and incentive alignment

Staff support (role definition and resource distribution)

Care gaps and patient-centered strategies (with particular emphasis on chronic disease management).

Examples of population health programs include:

**ProvenHealth Navigator**: Geisinger’s advanced medical home, ProvenHealth Navigator® (PHN), one of the system’s most widely lauded initiatives, is a collaborative effort between GHP and Geisinger Clinic.

PHN is designed to drive sustained changes in healthcare quality and value by providing physician-directed, team-based care. The model works to improve the quality of care provided in physician offices through the implementation of a series of patient-centered, integrated, cost-effective, and evidenced-based longitudinal protocols.

“We have removed the barriers between payors and providers,” said Janet Tomcavage, RN, MSN, GHP’s chief clinical transformation officer. “The model is designed to improve the quality of care provided in physicians’ offices by inserting GHP nursing professionals directly into physician-led patient care teams, thus providing enhanced care coordination and evidenced-based care that is extraordinarily cost effective.”

In a recent paper published in *The American Journal of Managed Care*, Geisinger experts demonstrated that PHN can lead to significant and sustainable cost savings over time. The paper states...
that PHN reduces costs by providing patients with improved care coordination, enhanced access to primary care providers, and more effective and efficient disease and case management.

Thomas Graf, MD, chairman of the community practice service line and system associate chief medical officer for population health, singles out the development of PHN as the foundation for Geisinger’s approach to population health. More than five years of re-engineering steadily redefined the relationship between patients and their primary care doctors in meaningful ways.

As a result, physicians are now able to look monthly at data on all aspects of utilization, including emergency department (ED) use, spotting patients who access ED services at a high rate. That’s a signal to redesign care to reduce or end ED visits. “The medical home is really about more proactive, patient-centered care, determining their needs and finding the best way to meet those needs,” said Graf.

**Skilled Nursing Facility Pilot Program:** A new care delivery model Geisinger developed in conjunction with nursing homes has dramatically reduced the number of patients who are admitted to the ED and reduced hospital readmissions to 39 percent lower than the national average in many Geisinger sites.

Geisinger’s Skilled Nursing Facility (SNF) pilot program places a dedicated Geisinger advanced practitioner – a physician assistant or a nurse practitioner – in nursing homes where they focus on medication reconciliation, identifying potential medical problems early, and enhanced connectivity to case managers, hospitalists, and the primary care team for discharge planning.

“We’re collaborating with leadership in these facilities and helping patients stay healthy and out of the hospital,” said John Pagnosto, DO, a Geisinger Community Practice physician. “We think this type of program could and should be replicated in nursing home settings across the country.”

**Geisinger Ventures**

Geisinger Ventures, the system’s for-profit venture arm, develops collaborations with innovative companies and advances a portfolio of for-profit businesses. Its goal is to enable more patients and providers to benefit from Geisinger’s intellectual assets, technologies, and services by making them available in the commercial market.

**Office of Strategic Industry Partnerships and Negotiations (SPAN)**

The Office of Strategic Industry Partnerships and Negotiations is charged with identifying, negotiating, and developing key partnerships with top-tier global companies that, like Geisinger, seek to transform the way in which healthcare is provided and paid for nationally. The primary intent of these select strategic partnerships is to leverage the aligned interests and complementary assets of Geisinger and its partners in order to develop, test, and disseminate innovations and programs that increase quality and decrease the costs of healthcare in the United States.
GEISINGER’s heritage of excellence, quality, and innovation is grounded in and contingent upon the personal and professional well-being of the Geisinger family. As a result, the system has redoubled its commitment to providing employees with the knowledge, incentives, and resources necessary to live healthy and active lives, offering opportunities for learning and knowledge sharing, recruiting the best and brightest professionals, and developing and sustaining world-class formal education programs.

The Geisinger Fitness Center at Woodbine Lane offers fitness equipment, classes, and personal training services to Geisinger employees.
A Healthy Workforce

Geisinger has moved forward with an extensive portfolio of programs focused on the health and wellness of its workforce. The programs focus on encouraging employees to set personal health goals tailored individually to each employee’s health status.

“It’s amazing how willing people are to share their stories and support one another in reaching their goals,” said Diane Harlow, manager of employee wellness, Geisinger Health System. “In fact, many of the components of the wellness program are based upon issues and workplace situations that have been identified by our employees.”

Starting in 2012 Geisinger is increasing its emphasis on exercise, smoking cessation, stress management, and biometric screenings. Employees who are also members of Geisinger Health Plan (GHP) will enjoy health coaching and reduced contributions to premiums by achieving their personal health goals.

“This relationship with GHP has been – and will continue to be – critical because it enables us to measure progress, support populations of employees with similar challenges, and encourage participation by incentivizing our employees,” Harlow said.

“This relationship between an employer and health plan is an example of how Geisinger is out ahead of the curve,” said Janet Tomcavage, RN, MSN, GHP’s chief clinical transformation officer. “Employers are always seeking ways to improve the health of their employees, decrease absenteeism and control costs.”

“Other employers are looking at what Geisinger has done with its own employees and are eager for that kind of progress,”

Recruitment and Retention

As a truly integrated health system, a center of medical quality and innovation, and an organization dedicated to transforming care and improving outcomes, Geisinger has become a powerful magnet for high-performing professionals from healthcare, insurance, academia, and the private sector.

In the past 12 months Geisinger has recruited 124 physicians, researchers, and leaders; 389 nursing professionals; and hundreds of others in areas including information technology and finance to support services and therapists.

Education

Geisinger has a long-standing commitment to medical education and embraces its responsibility to train the next generation of physicians, nurses, and other healthcare professionals. The health system’s unwavering emphasis on academic excellence will help prepare well-trained providers for the anticipated increase in medical demand.
Linda M. Famiglio, MD, Geisinger’s chief academic officer and a pediatric neurologist, said Geisinger plays an important role in training professionals to work in a rapidly evolving healthcare environment. Geisinger’s model as an integrated system with sophisticated health information technology, and a commitment to innovation and evidence-based care, will help prepare students for a new era in healthcare.

Last year, approximately 350 residents and fellows from many top institutions trained at Geisinger Medical Center (GMC) and Geisinger Wyoming Valley Medical Center (GWV) campuses.

Famiglio believes the recent growth in graduate medical education at Geisinger couldn’t come at a better time. “The nation is facing a potential physician shortage, but the challenge is even greater in rural communities,” she said. Half of those who study at Geisinger stay in Pennsylvania to practice medicine, and a third of those launch their careers at Geisinger.

“The experience here is a powerful one for students because they are introduced to the benefits and mechanics of working in an integrated health system and as members of inter-professional teams,” Famiglio said.

Geisinger’s residency program continues to expand, with the addition of a neurology program in 2011. “Stroke is a major health issue in our community,” Famiglio said. “We need neurologists and are facing a trend in which fewer of them are interested in hospital-based programs.” Residency programs in neurosurgery and anesthesiology are also in development.
In addition to training physicians, Geisinger recognizes the importance of nurses, certified nursing practitioners, physician assistants, pharmacists, and others in the team approach to patient care. To respond to the professional development needs of its workforce, the health system offers allied health programs including the School of Cardiovascular Technology, Dietetic Internship Program, Spiritual Care Residency Program, Nurse Practitioner Education, Physician Assistant Education (including a surgical residency, neonatology residency, internal medicine residency, and neuroscience residency), School of Radiological Technology, and the School of Phlebotomy. Educational opportunities are also offered for social workers, athletic trainers, administrative assistants, cardiac catheterization technicians, counselors, psychologists, and occupational therapists.

As a nursing education partner with Thomas Jefferson University and local colleges, universities and technical schools, Geisinger provides educator and preceptor partnerships, enhancing the practice of nursing throughout the health system and the region. Educational opportunities include an associate degree RN program, nursing doctorate program, and a certified nurse anesthetist program.

“Our focus is to facilitate the translation of students’ individualized academic skills into the kind of culture we’ve built at Geisinger,” said Susan M. Hallick, RN, Geisinger’s chief nursing officer. “Listening to patients and families, understanding transitions of care, and discovering that patients and experienced caregivers have much to teach them all contribute significantly to transforming dedicated and compassionate students into healthcare professionals.”
Geisinger pursues an ambitious research agenda with the long-term goal of directly impacting the health of its patients in keeping with the board-approved 10-year strategic plan for research. Systemwide research is conducted by clinicians who, in addition to providing patient care, also engage in numerous funded projects, including investigator-initiated research, collaborative research, and clinical trials, many of which are externally funded. National recognition has resulted in numerous collaborations with academic institutions, as well as membership in federally funded research networks and consortia. Research by clinicians, some of which is conducted in collaboration with scientists from the Geisinger research centers and institutes, ranges from etiology and genomics of disease to comparative effectiveness and optimizing healthcare delivery.

**Sigfried and Janet Weis Center for Research (Weis Center)**

The Weis Center, located on the Geisinger Medical Center campus, is Geisinger’s facility for laboratory-based biomedical research. Weis Center investigators strive to understand the molecular and genetic basis of a variety of disorders and work in partnership with collaborators in Geisinger’s clinical departments to translate this knowledge to patient care. Areas of research activity include obesity and metabolic disease, vascular disease, neurological disease, and cancer. The Weis Center is home to Geisinger Clinic Genomic Core, which maintains a research repository of biological samples from more than 35,000 Geisinger patients who have consented to allow their samples to be used for research. These samples, which can be linked to data in Geisinger’s electronic medical record system, are an invaluable resource for translational research.

**Geisinger Center for Clinical Studies**

Geisinger Center for Clinical Studies (CCS) focuses on expanding the number of research studies of new medicines, medical devices, procedures, and treatment strategies. CCS supports a number of trial designs, including pragmatic and traditional randomized, and observational and retrospective studies. These studies may be designed by Geisinger clinical investigators or outside organizations such as pharmaceutical companies and medical device manufacturers.

**Geisinger Center for Health Research**

Geisinger Center for Health Research (CHR) focuses on accelerating discoveries that improve population health, revolutionize the translation of knowledge into practice, and create healthcare solutions that are both patient-centered and economically sustainable.

A leader in the use of information technology to advance the quality and efficiency of and access to healthcare, areas of concentration include health services, epidemiology, medical informatics, pharmaco-epidemiology, genetics, environmental sciences, sociology, behavioral sciences, and statistics. Investigators use their expertise to leverage Geisinger’s unique population, electronic health record, geographic information system database, biobanked resources, and information technology to explore innovative healthcare models.

**Geisinger Obesity Institute**

The Geisinger Obesity Institute provides the structure to promote all obesity-related research activities across the system, whether by full-time researchers or staff that provide clinical care; train students, residents and fellows; and conduct translational and clinical research. The institute provides the infrastructure and resources for the recruitment of new investigators, the expansion of core resources to support research, and the development of programs and activities to create community, educational, and training opportunities. The institute coordinates research activities across the system to further enhance and leverage Geisinger’s capabilities by developing a targeted portfolio of research in basic science, genomics, clinical studies, and population-based obesity research.

**Geisinger Genomic Medicine Institute**

Geisinger Genomic Medicine Institute conducts research in genomic medicine to develop innovative prevention and treatment strategies that promise a new era of medical advances. This research is facilitated by access to the systemwide biobank, MyCode®, which capitalizes on Geisinger’s advanced ability to link genomic information with its electronic health record system in a way that protects patient identity. Researchers use the samples to study the genetic contribution to a wide range of human diseases, allowing researchers to pursue innovative approaches to disease prevention, diagnosis, and treatment.

The power of genomic analysis, in particular whole genome sequencing, holds great promise for patients with complex, undiagnosed medical conditions. Whole genome sequencing allows analysis of all the genes at one time. Institute researchers and clinicians are partnering to develop this testing modality, which has the ability to detect numerous rare and previously unidentified changes that could be responsible for a patient’s disease.
EDUCATIONAL LEADERSHIP

Linda M. Famiglio, MD, FAAP
Chief Academic Officer

Joseph J. Stella, DO, FACOS
Associate Chief Academic Officer
Osteopathic Medical Education

Douglas F. Kupas, MD, FACEP
Associate Chief Academic Officer
Medical Student and Resident Affairs

Mary Elizabeth Roth, MD, FACPE
Associate Chief Academic Officer
Northeast

Michelle Thompson, MD
Associate Chief Academic Officer
Graduate Medical Education

John R. Boker, PhD
Vice President
Faculty and Curriculum Development

Advanced Practice Council Leadership
Ronald Byerly, PA-C
Allison Mowery, CRNP
Jay Thomas, CRNA

GRADUATE MEDICAL EDUCATION PROGRAMS

Residencies

Program Director
Clinical Psychology ................................................. Paul Kettlewell, PhD
Dermatology ......................................................... Michele Maroon, MD
Emergency Medicine ............................................. Thomas Payton, MD
Family Medicine – GWV ........................................ Steve Evans, DO; APD and AOA PD
General Surgery ...................................................... Mohsen Shabahang, MD
Internal Medicine .................................................... Mary Harris, MD
Medicine – Pediatrics ............................................. Michelle Thompson, MD
Neurology .............................................................. Jonathan Housey, MD
Obstetrics/Gynecology ............................................. F. Joseph Swanson, MD
Ophthalmology ....................................................... Vincent Baldassano, MD
Oral & Maxillofacial Surgery ..................................... Robert Pellechia, DDS
Orthopedic Surgery ................................................ Gerry Cush, MD
Osteopathic Surgery – GWV ..................................... Joseph J. Stella, DO
Otolaryngology ......................................................... J. Scott Greene, MD
Pediatrics ............................................................... Paul Bellino, MD
Pediatric Dentistry ................................................... Lance Kisyb, DMD
Radiology ............................................................... Anne Dunne, MD
Urology ................................................................. Joseph Clark, MD

Fellowships

Program Director
Cardiovascular Medicine ......................................... Steven Steinshub, MD
Clinical Cardiology Electrophysiology ......................... Pugazhendi Vijayaraman, MD
Critical Care Medicine ............................................. Kenneth E. Wood, MD
Cytopathology ......................................................... Haiyan Liu, MD
Dermatopathology ................................................. Tammie Ferringer, MD
EMS ................................................................. David Schoenwetter, DO
Gastroenterology & Nutrition ..................................... Robert Smith, MD
Interventional Cardiology ......................................... James Blakenship, MD
Maternal Fetal Medicine ........................................... Michael Joseph Paglia, MD, PhD
Medical Physics ...................................................... Andrew J. Jones, PhD
Nephrology .......................................................... Michael Schultz, MD
Palliative Medicine .................................................... Neil Ellison, MD
Procedural Dermatology .......................................... Victor Marks, MD
Reproductive Endocrinology Infertility ......................... Jennifer Gell, MD
Rheumatology ........................................................ Thomas Harrington, MD
Sports Medicine – GWV .......................................... David Ross, MD
Vascular Surgery ..................................................... James Elmore, MD

Geisinger Physician Assistant
Residency Program

Program Director
General Surgery .................................................... Nevin Gorkis, PA-C
Internal Medicine ...................................................... Esther Klinger, PA-C
Neonatology .......................................................... Ray Hayes, MD
Neuroscience ........................................................ Wayne Rodrigues, PA-C

PCOM – Affiliated AOA Accredited

Program Director
Neurosurgery .......................................................... Steven A. Toms, MD

Non-Standard Fellowship Programs

Program Director
Addiction Medicine .................................................. David Withers, MD, PD
Advanced Endoscopy ................................................. David Diehl, MD (Fellowship)
Advanced Magnetic Resonance .................................. Michael Komar, MD (GI/Nutrition)
General Internal Medicine .......................................... Cathleen Wooner, MD
Minimally Invasive Surgery ........................................ Anthony Petrick, MD
Neuropsychology ..................................................... Brad Wilson, PhD
Obesity Medicine / Nutrition Support ......................... Christopher Still, DO (Nutrition)
Pediatrics Hospitalist ................................................ Paul Bellino, MD
Psychology Fellows ..................................................... Paul Kettelwell, PhD (Child Psych)

Geisinger trains approximately 350 residents at the Geisinger Medical Center and Geisinger Wyoming Valley Medical Center campuses. Of the 113 residents and fellows in Geisinger’s most recent graduating class, 14 decided to continue their training at Geisinger. The system offers programs that spotlight Geisinger’s unique and visionary attributes as an integrated delivery system, as well as health information technology, innovation, and education in medical specialties and clinical electives.

Geisinger has a long-standing commitment to medical education and takes seriously its responsibility to train physicians, nurses, and other healthcare professionals. The health system’s unwavering emphasis on academic excellence helps prepare well-trained medical providers. Geisinger serves as the clinical campus of Temple University School of Medicine and Philadelphia College of Osteopathic Medicine. Each year, more than 250 medical students from these and other top educational institutions complete their training at Geisinger. The system offers programs that spotlight Geisinger’s unique and visionary attributes as an integrated delivery system, as well as health information technology, innovation, and education in medical specialties and clinical electives.

20 are continuing their careers at other Pennsylvania training program as advanced residents or fellows. An additional 20 are continuing their careers at other Pennsylvania health organizations.

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Associate Chief Academic Officer
Osteopathic Medical Education

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Graduate Medical Education

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Vice President
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Advanced Practice Council Leadership
Ronald Byerly, PA-C
Allison Mowery, CRNP
Jay Thomas, CRNA

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Obstetrics/Gynecology ............................................. F. Joseph Swanson, MD
Ophthalmology ....................................................... Vincent Baldassano, MD
Oral & Maxillofacial Surgery ..................................... Robert Pellechia, DDS
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Psychology Fellows ..................................................... Paul Kettelwell, PhD (Child Psych)

Charlotte Collins, PhD (Adult Psych)
Geisinger and its employees are dedicated to enhancing the health and well-being of the residents of central and northeast Pennsylvania through high-quality, compassionate care provided to all who need it, regardless of their ability to pay. As a community-based, not-for-profit organization, Geisinger is proud to invest resources and energy into understanding and meeting the diverse health needs of the region.

Geisinger’s $277.5 million in community support represents approximately 13% of Geisinger’s operating expenses. This is more than double the amount of community services required to meet Pennsylvania’s standards as a charitable institution. More importantly, however, this significant level of community support has a positive impact on the health of people throughout the region.

In addition, Geisinger is the largest non-government employer in central and northeast Pennsylvania, contributing approximately $5.5 billion in annual economic impact to the state in 2011. Geisinger’s commitment to the personal and professional health and well-being of its employees remains paramount, as they and their families are a major component of the community the system serves.

The dedication, professionalism, and community commitment of the Geisinger family was highlighted when the region faced a challenging recovery from the devastation caused by Tropical Storm Lee in September 2011. With little warning, many communities in Geisinger’s service area experienced extreme weather-related disaster and flooding. A state of emergency was declared throughout the region, drinking water was contaminated, power was lost, neighborhoods were evacuated, and scores of homes and businesses were damaged, destroyed, or swept away.

Geisinger and its employees took action, providing organizational support to local agencies such as the United Way, American Red Cross, and Salvation Army, as well as consistent medical service and helping hands throughout the region. Not one life was lost in its service area as a result of the storm, and Geisinger is proud to have contributed to the safety of its community during this unprecedented natural disaster.

Geisinger employees are known for working together to “make it the best.” The challenges presented by the flood offered a considerable opportunity to personally demonstrate this distinctive team spirit.

**Nurses Rose to the Occasion**

During the crisis that was Tropical Storm Lee, Geisinger relied heavily on its nursing staff to provide the reliable care and resources that Geisinger patients deserve and have come to expect. Nurses at Geisinger’s medical centers and surrounding clinics worked extra shifts and stayed extended hours, all while dealing with the impact of the flood on their own families and homes, said Susan M. Hallick, RN, executive vice president and system chief nursing officer.

“We had nurses sleeping on cots at the Henry Hood Center for Health Research, the Pine Barn Inn, or at co-workers’ homes throughout the region,” Hallick said. “They did anything and everything necessary to support our patients and their families while maintaining the high standard of care our nurses exemplify each and every day. For this we are extremely grateful and proud of their efforts.”

**Emergency Department Teams Stepped Up**

During the weekend following the historic Susquehanna River flooding, Geisinger Wyoming Valley’s (GWV) emergency department (ED) treated a record number of patients. Operations Manager George Rittle commended the staff members for their tireless work. “The entire ED team worked diligently as we saw an extremely high number of patients, many of whom were multiple traumas,” said Rittle. “Everyone came together and managed the task at hand.”

Geisinger Medical Center (GMC) Operations Manager Lynn Fait shared similar praise for the Danville ED team, saying they offered constant support for one another during the taxing weekend. “I am so thankful for the devotion of our staff. In the midst of a crisis situation, they remained calm and positive,” said Fait. “Many of our staff members stepped up in a big way, volunteering to spend the night or coming back the next day to cover for those who could not get in to work.”

**Tetanus Clinics**

In the weeks that followed Tropical Storm Lee, Geisinger offered several tetanus vaccination clinics in communities affected by flooding.

In northeast Pennsylvania, Geisinger employees vaccinated 330 flood victims and disaster relief workers in Tunkhannock, West Nanticoke, and West Pittston. More than 30 employees from a variety of departments came together to help people in need.

In the Danville area, Geisinger offered vaccination clinics at the Bloomsburg YMCA, where more than 65 employees from a variety of departments participated. In addition to vaccinating 675 flood victims, volunteers, and first responders, Geisinger employees offered first aid, blood pressure screenings, and counseling.
**Life Flight Supplied Critical Air Link**

As storm damage and rising waters made roads and bridges inaccessible, Life Flight® provided aerial transport for critical medical supplies between GMC and GWV, including time-sensitive infusion medications from VITALine Infusion Pharmacy to patients at GWV’s Henry Cancer Center. Life Flight also transported physicians between the two medical centers as needed, thanks to cooperation among Geisinger labs, pharmacy, and VITALine as well as hospital command centers and ED teams.

“Our staff dedication and flexibility enabled us to have all five bases up and running within 48 hours,” said Life Flight Program Manager Jerry Splitt. “We are particularly grateful for the dedication of dispatcher Jeremy Reese, who worked 24 straight hours to ensure phone lines were covered.”

**HomeCare, Hospice Braved Flood to Deliver Care**

Despite full patient loads, staff members pitched in and picked up extra patients for those who were unable to make it to work. They started their day by 7:30 a.m. Thursday to make sure that everyone needing to be seen was properly cared for before the 4 p.m. mandatory evacuation deadline in many areas.

“The teamwork among the staff was amazing,” said Cheryl Russo, RN, nurse manager, Geisinger HomeCare. “All HomeCare employees worked together to keep the agency open, running smoothly and continued to deliver quality care to each and every patient despite the emergency situation going on around them. I am proud to be a part of this agency and especially proud to work with the amazing HomeCare staff. They are all truly Angels of Mercy.”
The Geisinger System

Geisinger Health System serves more than 2.6 million residents in 44 counties as a not-for-profit, fully integrated health service organization that is dedicated to excellence in care, education, research, and service. The physician-led system includes a multi-disciplinary physician group practice with systemwide aligned goals, successful clinical programs, a sophisticated information technology platform, a robust research program, and an insurance provider, Geisinger Health Plan.

Geisinger Clinic (GC) is widely regarded as a national model of healthcare delivery centered around a cutting-edge multispecialty group practice of more than 900 primary and specialty physicians who practice at Geisinger hospitals and non-Geisinger hospitals throughout the region.

Geisinger Medical Center (GMC), the largest tertiary/quaternary care teaching hospital in central and northeast Pennsylvania, has earned a reputation for providing leading-edge medicine and treating the most critically ill patients. GMC is licensed for 475 beds, including 89 pediatric beds in the Janet Weis Children’s Hospital. GMC maintains the region’s only Level I Regional Resource Trauma Center with additional qualifications in pediatrics. GMC offers a comprehensive array of highly specialized medical and surgical services, including neurosciences, cardiovascular services, transplantation, women’s health (in GMC’s Women’s Pavilion), pediatrics, orthopedics, and oncology.

Outpatient services, including endoscopy and same-day surgery, are available on GMC’s main campus, as well as at the GMC Outpatient Surgery Center-Woodbine Lane campus.

GMC’s Hospital for Advanced Medicine serves as an integrated center for the most critically ill patients. This 308,000-square-foot “hospital within a hospital” houses nine stories of patient-focused space, including acuity adaptable beds that can convert from intensive care to recovery as the patient progresses. The hospital offers state-of-the-art inpatient and physician office facilities with cardiovascular services residing within the building, a new 32,000-square-foot surgical suite equipped with sophisticated robotic and interventional medical equipment, and shell space for future growth. This hospital is LEED certified silver (Leadership in Energy and Environmental Design), with environmentally friendly designs, recycled materials used in its construction, and increased energy efficiency achieved by maximizing natural window light in patient rooms and offices.

Shamokin Area Community Hospital (G-SACH) merged into Geisinger Medical Center on January 1, 2012. Located in Coal Township, Northumberland County, G-SACH, a campus of Geisinger Medical Center, includes 45 acute care beds, 15 skilled nursing beds, and a 10-bed gero-psych unit.

Geisinger Wyoming Valley Medical Center (GWV) in Plains Township is an acute tertiary care center that brings advanced clinical services to northeast Pennsylvania.

Licensed for 243 beds, GWV’s state-of-the-art Critical Care Building houses the only Level II Trauma Center in Luzerne County. The GWV campus includes the Frank M. and Dorothea Henry Cancer Center, the Richard and Marion Pearsall Heart Hospital (an accredited Chest Pain Center), the Tambur Neonatal Intensive Care Unit, the Janet Weis Children’s Hospital Pediatric Unit, a transplant program, the Brain

Geisinger Health System Coverage Area

- Geisinger Medical Center
- Geisinger Wyoming Valley Medical Center
- Geisinger South Wilkes-Barre*
- Geisinger–Shamokin Area Community Hospital*
- Geisinger–Community Medical Center
- Geisinger Physician Offices
- Geisinger Health Plan coverage area

*Campus sites
& Spine Tumor Institute, and more. GWV’s Women’s Health Program and various specialty clinics are offered at facilities in close proximity to GWV’s main campus.

**Geisinger South Wilkes-Barre (GSWB)** is GWV’s regional ambulatory campus. It offers an array of same-day health services, including adult and pediatric Urgent Care Centers, inpatient and outpatient rehabilitation, same-day surgery, pain and sleep centers, and more.

**Geisinger-Community Medical Center (G-CMC)** is a leading provider of quality healthcare services in northeast Pennsylvania. Located in Scranton, G-CMC is home to Scranton’s only Level II Trauma Center and adult inpatient behavioral health unit. Licensed for 297 beds, G-CMC also features an array of clinical programs including orthopedic services and a broad range of other specialized surgical and radiological services.

**Geisinger Health Plan (GHP)** is the not-for-profit health insurance component of Geisinger Health System. GHP provides high quality, affordable healthcare benefits for businesses of all sizes, individuals, families, and Medicare beneficiaries. Preferred Provider Organization (PPO) and high deductible plans are sold through Geisinger Quality Options, Inc. Self-funded plans are sold through Geisinger Indemnity Insurance Company.

Based in Danville, GHP serves approximately 290,000 members in Pennsylvania and West Virginia. The provider network includes more than 4,900 primary care physicians, 40,000 specialists, and more than 110 hospitals.

An array of systems and strategies ensure continuous improvement in the quality of GHP’s programs and services. This high standard is reflected in GHP’s national ranking by the National Committee for Quality Assurance (NCQA). For the fourth year in a row, GHP and Geisinger Gold are the top-ranked private and Medicare health plans in Pennsylvania.* Nationally, GHP is ranked eighth and Geisinger Gold is ranked ninth for quality and service.

In addition, NCQA reviews GHP and awards an accreditation status. Following the most recent review, Geisinger Health Plan, Geisinger Gold, and Geisinger Choice with Referral received a three-year "Excellent" accreditation, the highest level of accreditation available.

GHP receives national attention for its ability to foster innovation, while uniquely and effectively managing medical costs and improving outcomes. As a result, many organizations are asking GHP to share this knowledge. The new insurance model is focused on improving quality, fundamentally changing the way care is delivered and paid for, and improving outcomes. By working with like-minded organizations, GHP is able to bring the innovation, quality, and better outcomes it is known for to businesses and individuals.

A new key strategy for GHP is to expand this innovation outside its traditional service area. In January 2012, GHP developed a relationship with West Virginia United Health System to provide the administration of health benefits for Morgantown-based WVU Healthcare employees and their dependents.

**Geisinger Medical Groups (GMG)** bring Geisinger expertise and advanced services to communities throughout central and northeast Pennsylvania through a network of 39 physician office locations. In addition to providing primary and specialty care, the medical groups offer patients the opportunity to participate in clinical trials and research initiatives in collaboration with Geisinger’s research centers, creating evidence that is both timely and directly relevant to clinical care. In conjunction with GHP, the medical groups also offer their own unique model of medical home, called ProvenHealth Navigator® – a program that embeds nurse case managers in the medical group offices in an effort to advance chronic disease prevention and care management that has resulted in reduced hospital admissions, readmissions, and emergency room visits.

**Henry Hood Center for Health Research**, located on the GMC campus, is focused on developing knowledge that is centered on a patient’s need to maintain or improve health. The Hood Center is home to Geisinger Center for Health Research, Geisinger Center for Clinical Studies, Geisinger Health Sciences Library, Research Administration, and a conference center.

**Sigfried and Janet Weis Center for Research** is Geisinger’s basic science research facility. Located on the GMC campus, the Weis Center conducts original and innovative research that contributes new knowledge to biomedical science, with a focus on molecular and cellular mechanisms. A major initiative of the Weis Center is the genomics core, a project carried out in collaboration with the Geisinger Center for Health Research.

**Geisinger Ventures (GV)**, the corporate venture arm of Geisinger Health System, is dedicated to leveraging Geisinger assets to commercialize Geisinger’s intellectual property into products and services. GV includes:

- AMC Health™
- CareworksTM Convenient Care
- Cernostics
- MedMining®
- Geisinger ProvenKnowledgeSM (consulting)

Geisinger Community Health Services (GCHS) is a not-for-profit organization that annually provides healthcare services to nearly 40,000 patients in the communities in which they live and work. GCHS is committed to advocacy, excellence, and innovation in the provision of services that complement and expand the continuum of care provided by the health system. GCHS programs include:

- Careworks Convenient Healthcare, which provides basic health services in retail or work site settings (also a Geisinger Ventures affiliate)
- Health Care Quality Unit nurses who educate community members and caregivers of intellectually disabled individuals
- LIFE Geisinger, which provides a comprehensive program of health and social services to the frail elderly
- Geisinger Home Care, which provides 24-hour care to those requiring skilled nursing; physical, occupational and speech therapy; medical social services; and maternal and newborn health services
- Geisinger Hospice, which provides end-of-life care and bereavement services to patients with life-limiting illness and their families
- VITALine Infusion Pharmacy Services, which provides high-tech infusion therapies in a home setting.

Life Flight® is a component of the system’s response to critical care transport needs, with seven air ambulances operating 24 hours a day, seven days a week from the following locations:

- Geisinger Medical Center, Danville
- Wilkes-Barre/Scranton Airport, Avoca
- University Park Airport, State College
- Williamsport Regional Airport, Montoursville
- 2003 Phoenix Road, Pottsville

Life Flight transported nearly 2800 patients to the nearest qualified trauma center in FY2011. Of those patients, 2246 were transported to GMC (Danville) or GWV (Plains Township).

International Shared Services, Inc. is a wholly owned, for-profit subsidiary of Geisinger Medical Management Corporation. It provides comprehensive clinical engineering and computer technology services to providers both within and outside Geisinger.

Marworth Alcohol & Chemical Dependency Treatment Center, located in Waverly, PA, is recognized as a national leader in the treatment of alcohol and chemical addictions. Marworth has 91 beds and provides three levels of treatment: outpatient, intensive outpatient with partial hospitalization, and inpatient detoxification and rehabilitation.
Geisinger-Assured Entities

Geisinger Assurance Company, LTD
A for-profit company domiciled in the Cayman Islands that provides reinsurance against liability arising out of system activities, including medical, legal, and general liability. Geisinger Assurance Company, LTD provides 100% of the reinsurance for the system’s primary liability coverage.

Geisinger Clinic
A 501(c)(3) not-for-profit corporation that operates a multispecialty group medical practice. Geisinger Clinic provides physician staff for patient care, education, and clinical research.

Geisinger Community Health Services
A 501(c)(3) not-for-profit organization designed to conduct charitable, scientific, and educational activities for the citizens of the communities served by Geisinger, including the operation of a Medicare-certified home health agency and the provision of healthcare services in a patient’s home or place of residence.

Geisinger-Community Medical Center
Geisinger-Community Medical Center describes the following:

Community Medical Center Healthcare System – The former parent entity that functions as a holding company for all G-CMC corporate entities.
Community Medical Center – A 501(c)(3) not-for-profit corporation owning and operating a hospital in Scranton.
Mountain View Care Center – A 501(c)(3) entity operating a long-term care, skilled nursing, and rehabilitation facility.
Medical Dimensions, Inc. – A not-for-profit corporation operating as a real estate holding company, which holds title to property, collects income there from, and transfers the entire amount less expenses to the System.
Community Medical Care, Inc. – A 501(c)(3) not-for-profit corporation that employs and engages physicians and other healthcare professionals who provide professional services.

Geisinger Health Plan
A 501(c)(4) not-for-profit health maintenance corporation operating health insurance product lines.

Geisinger Health System Foundation
A 501(c)(3) not-for-profit corporation that serves as corporate parent and coordinates and supervises the activities of all Geisinger-affiliated entities. The Foundation is not a licensed healthcare provider nor does it provide healthcare services to patients. It serves to ensure the system-affiliated entities have adequate financial resources to fulfill their missions and to initiate and administer grant and philanthropic support programs for all Geisinger entities.

Geisinger Indemnity Insurance Company
A for-profit corporation able to sell indemnity health insurance.

Geisinger Insurance Corporation, Risk Retention Group
A 501(c)(3) not-for-profit corporation domiciled in the state of Vermont and registered by the Pennsylvania Insurance Department to provide primary professional liability coverage for several entities of the Geisinger Health System Foundation (GMC, GC, GFW, GCHS).

Geisinger Medical Center
A 501(c)(3) not-for-profit corporation owning and operating a regional referral tertiary/quaternary care medical center in Danville.

Geisinger Medical Management Corporation
A for-profit, wholly owned subsidiary of Geisinger Health System Foundation.

Geisinger Quality Options, Inc.
A for-profit, wholly owned subsidiary of Geisinger Health System Foundation.

Geisinger System Services
A 501(c)(3) not-for-profit support service corporation providing financial services, human resources, information systems, internal audits, legal services, strategic planning, marketing, public relations, and facilities services.

Geisinger Wyoming Valley Medical Center
A 501(c)(3) not-for-profit corporation owning and operating an acute/tertiary care, open-staff community hospital in Wilkes-Barre.

HealthSouth/Geisinger Health System, LLC
A limited liability company representing a joint venture between Geisinger Medical Center and HealthSouth Corporation to develop, manage, finance, and operate a freestanding rehabilitation hospital (Geisinger Rehabilitation Hospital) and develop a network to provide outpatient rehabilitation centers and other programs to Geisinger Health System patients within the five-county area surrounding Geisinger Medical Center (Snyder, Union, Northumberland, Columbia, and Montour).

International Shared Services, Inc.
A for-profit, wholly owned subsidiary of Geisinger Medical Management Corporation. It provides high-quality, customized technology lifecycle management solutions to healthcare, government, education, and commercial clients in the Mid-Atlantic Region.

Marworth Alcohol & Chemical Dependency Treatment Center
A 501(c)(3) not-for-profit residential alcohol and chemical dependency detoxification and rehabilitation facility in Waverly, PA also operating outpatient and family addiction treatment programs.
Accreditations and Awards

One important indicator of quality is whether a hospital and its staff are recognized by independent organizations devoted to measuring healthcare quality. Listed below are some of the honors, accreditations, and awards given to Geisinger in 2011. For a comprehensive list go to www.geisinger.org/quality/qualitypressreleases.

The fourth annual Thomson Reuters 15 Top Health Systems study ranks Geisinger Health System as one of the top 15 health systems in the United States.

Geisinger Medical Center and Geisinger Wyoming Valley Medical Center are among the 2011 Top Performing Hospitals in the Premier healthcare alliance’s national QUEST® collaborative.

Geisinger HomeCare was named a 2011 HomeCare Elite home health agency.

Geisinger Medical Center and Geisinger Wyoming Valley Medical Center were awarded the National Research Corporation’s Consumer Choice Award for 2011–2012.

Geisinger Health Plan and Geisinger Gold have been named for the fourth year in a row the top-ranked private and Medicare health plans in Pennsylvania – and 8th and 9th respectively in the nation.

Geisinger Health System has been listed among the country’s “100 Most Wired Hospitals and Health Systems” for the ninth time.

Geisinger Health System was named to the Becker’s Hospital Review “100 Best Places to Work in Healthcare” list for 2011.

The Geisinger Medical Center Emergency Department has been named one of 20 institutions nationwide to receive the first annual Emergency Nurses Association Lantern Award.

The American Medical Group Association presented its 2011 Acclaim Award to Geisinger and three other honorees. Geisinger was recognized for Transforming Care Delivery: Patient-Centric, Value-Driven Innovation.

Geisinger has been included for the eighth time in the 2011 InformationWeek 500.

Geisinger Health System received the Association for Healthcare Resource & Materials Management’s 2011 Award for Healthcare Supply Chain Innovation.

Respiratory Care Services at Geisinger Medical Center received the Quality Respiratory Care Recognition Award.

Geisinger Health System earned the American Heart Association’s Gold Certification as a Start! Fit-Friendly Company.

Geisinger Medical Center received the 2011 Thomson Reuters 100 Top Hospitals®: National Benchmarks Award for overall organizational performance.

Sixty-two Geisinger Health System physicians in 27 medical specialties were named to the national Best Doctors list for 2011–2012.

Geisinger Health System was named to the 2011 SDI IHN 100, a list of the most integrated healthcare networks (IHN) in the nation.
RECRUITMENTS

Connie L. Bednar
Vice President, TPA Services

Edwin Bemmel, PhD
Senior Director, Research Finance

Chris Bliersbach
Associate Vice President, Division of Quality & Safety

Lyn Boocock-Taylor
Vice President, Office of Competitive Grants

James H. Brucker, PhD
Vice President and Chief Advancement Officer

Mark Erath, CPA, FACHE, FHFMA
Vice President, Finance and Chief Financial Officer, GMC

W. Andrew Faucett, MS, CGC
Director, Policy and Education, Genomic Medicine Institute

Daniel S. Horowitz, MD
Chief, Orthopaedic Trauma Surgery

Robert W. Komula
Vice President and Controller, GHP

Leon D Lamoreaux
Vice President, Government Programs Business Development

Michael Lesko, DO, MHCM, FACC, FACP
Chief of Cardiology-West

Joshua N. Liberman, PhD
Vice President, Research Operations

Barbara Maguire, CCE, MBA
Vice President, Clinical Engineering, Quality and Logistics, GHP

John McIlwaine, DO, FCCP
eICU Program Director, Critical Care Medicine

Eric Meadows, PhD
Senior Director, MedMining

Anne Moon, MD, PhD
Senior Scientist, Weis Center for Research Associate in Pediatric Critical Care, Department of Pediatrics, Geisinger Clinic

Andres Moreno De Luca, MD
Research Scientist, Genomic Medicine Institute

Randy B. Morris, FHFMA
Associate Vice President, GMC Financial Reporting

Matthew Nussbaum, MBA, MHA
Associate Vice President, Clinic Operations

Jason Renne
Vice President, Network Innovations, GHP

Frank Rubino
Vice President, Clinical Engineering, ISS Solutions

Atom Sarkar, MD, PhD
Director, Stereotactic and Functional Surgery and Director, Laboratory for Nanomedicine

Jo Ann Sevison
Director, Clinical Solutions, GHP

Jonathan Slotkin, MD
Director, Spinal Surgery and Director, Spinal Cord Injury Research

Earl P. Steinberg, MD, MPP
Executive Vice President, Innovation and Dissemination and Chief, Health Care Solutions Enterprise

Michael Suk, MD, JD, MPH, FACS
Chairman, Orthopaedic Surgery

Xiaojin Tang
Biostatistician, Research

Shawn E. Thamert
Director, Business Operations

Amanda Wehler, DO
Director, Transfusion Medicine

Heather J. Wiley Starankovic
Associate Vice President, Office of Institutional Advancement

Janet L. Williams, MS, CGC
Senior Genetic Counselor, Genomic Medicine Institute

Marc S. Williams, MD, FAAP, FACMG
Director, Genomic Medicine Institute

PROMOTIONS

John B. Bulger, DO
Chief Quality Officer

John Danella, MD
Director, Urology

Jonathan Darer, MD
Chief Innovation Officer

Dorothy Y. Fisher, MD, MGH, CMD
Medical Director, GHP, Medical Management

George Godlewski, PhD
Vice President, Division of Quality & Safety and Psychiatry

H. Lester Kirchner, PhD
Staff Biostatistician, Division of Medicine

DiAnne J. Leonard, MD, FACS
Trauma Director, Associate General Surgery and Critical Care

Victor James Marks, MD
Director, Dermatology Service Line

Matthew Nussbaum, MBA, MHA
Associate Vice President, Operations

George R. Rohrer, MD
Director, Ambulatory Redesign

Charmaine Tetkoskie, MHA, BSN, RN
Associate Vice President, Nursing Emergency Medicine Service Line
Geisinger ended fiscal year (FY) 2011* with an operating income, excluding interest expense, of $203.5 million, a 7.7% return on $2.7 billion of revenue. The economic benefit to Pennsylvania (from direct spending and an indirect ripple effect of spending) totaled approximately $5.5 billion, as reported by The Hospital and Health System Association of Pennsylvania. Despite the challenges of a weak economy, the uncertainty of healthcare reform, and continued reimbursement shortfalls, Geisinger provided $277.5 million (approximately 13% of operating expenses of the tax exempt organizations) of community benefits, including uncompensated care and care provided under government programs at less than cost. Revenue grew by 13.8% over FY10, a remarkable achievement in the current environment and the highly regulated, competitive healthcare industry. In addition, Geisinger invested $114.2 million in capital projects.

## Financial Summary FY11

<table>
<thead>
<tr>
<th>Geisinger earned</th>
<th>FY10 (millions)</th>
<th>FY11 (millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Customer premiums, services to patients, and general services</td>
<td>$5,627.0</td>
<td>$6,443.0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Geisinger did not receive full payments from</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicare and medical assistance</td>
<td>1,928.3</td>
<td>2,503.6</td>
</tr>
<tr>
<td>Charity to patients</td>
<td>75.7</td>
<td>78.5</td>
</tr>
<tr>
<td>Other patients receiving services under contractual arrangements or due to administrative allowances</td>
<td>1,293.3</td>
<td>1,209.9</td>
</tr>
</tbody>
</table>

| Total amount received                                 | 2,329.7        | 2,651.0        |

<table>
<thead>
<tr>
<th>Geisinger spent</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries and benefits</td>
<td>970.2</td>
<td>1,054.4</td>
</tr>
<tr>
<td>Contracted services</td>
<td>699.4</td>
<td>811.7</td>
</tr>
<tr>
<td>Supplies, utilities, and other expenses</td>
<td>448.1</td>
<td>489.3</td>
</tr>
<tr>
<td>Depreciation</td>
<td>84.6</td>
<td>92.1</td>
</tr>
</tbody>
</table>

| Total costs for patient treatment and rendering care to beneficiaries | 2,202.3 | 2,447.5 |

| Operating income                                      | 127.4          | 203.5          |
| Interest on debt, earnings on investments, and nonoperating gains (losses) | 74.0 | 191.8 |

| Excess of revenue and gains over expenses and losses   | 201.4          | 395.3          |

| Operating margin                                      | 5.5%           | 7.7%           |
| Total assets                                           | 2,430.9        | 3,108.2        |
| Total liabilities                                      | 1,324.9        | 1,596.2        |

| Accumulation of net worth from prior earnings          | 1,106.0        | 1,512.0        |

* July 1, 2010 – June 30, 2011
Geisinger Health System is one of the nation’s leading fully integrated health service organizations. Founded in 1915, Geisinger serves 2.6 million residents throughout central and northeast Pennsylvania.

Unless otherwise noted, statistics are for fiscal year 2011 (July 1, 2010 – June 30, 2011). Does not include G-SACH or G-CMC.

Geisinger includes
- Community practice sites: 39
- Service area: 2.6 million in 44 counties

Employees (systemwide)
- Full-time: 11,719
- Part-time: 2,689
- Head count: 14,408

Clinical staff breakdown
- Physicians/scientists: 880
- Advanced practitioners: 471
- Residents/fellows: 452

Nurses
- Registered nurses: 2,379
- Licensed practical nurses: 629

Licensed inpatient beds
- Geisinger Medical Center: 485
  (includes 336 beds at main campus,
  60 at the Hospital for Advanced Medicine,
  and 89 [41 NICU] at the Janet Weis Children’s Hospital)
- Geisinger Wyoming Valley Medical Center: 242
  (includes 20 rehabilitation beds at GSWB)
- Marworth Alcohol & Chemical Dependency Treatment Center: 91

Discharges from inpatient units
- Geisinger Medical Center: 26,211
- Geisinger Wyoming Valley Medical Center: 12,856
- Marworth Alcohol & Chemical Dependency Treatment Center: 1,358
- Total: 40,425

Life Flight®
- Air ambulances: 7
  (locations: GMC, Avoca, Williamsport, Pottsville, State College)
- Trips: 2,778 total flights

Emergency department visits
- Geisinger Medical Center: 32,726
- Geisinger Wyoming Valley Medical Center: 53,545
- Total: 86,271

Surgery cases (inpatient and outpatient)
- Geisinger Medical Center: 24,121
- Geisinger Wyoming Valley Medical Center: 11,343
- Total: 35,464

Average length of stay (days)
- Geisinger Medical Center: 5.0
- Geisinger Wyoming Valley Medical Center: 4.7
- Marworth Alcohol & Chemical Dependency Treatment Center: 20.0

Total births
- Geisinger Medical Center: 1,749
- Geisinger Wyoming Valley Medical Center: 1,382
- Total: 3,131

Finances
- Total revenue: $2.7 billion
- Current capital investment: $114.2 million
- Operating margin: $180.9 million

Outpatient visits
- Geisinger Medical Center: 822,583
- Geisinger Wyoming Valley Medical Center: 588,889
- Marworth Alcohol & Chemical Dependency Treatment Center: 4,127
- Community Practice Sites: 951,247
- Total: 2,366,846

Geisinger Health Plan
- 291,132 members

1 Geisinger physicians serve 31 counties; GHP provides services in 13 additional counties.
2 included in total employee head count
3 included in total employee head count
4 excludes nursery but includes NICU
5 includes emergency room visits
6 most recent figure available
Geisinger Health System Foundation
2011 Board of Directors

William H. Alexander* (Elected Chair – June 2011)
Frank M. Henry* (Chair, 1994 – June 2011)
Dorrance R. Belin, Esq.*
Karen Davis, PhD
E. Allen Deaver*
William J. Flood
Richard A. Grafmyre*
William R. Gruver*
Thomas H. Lee Jr., MD*
Joel S. Mindel, MD, PhD**
John D. Moran Jr.
Arthur M. Peters Jr., Esq.**
Robert E. Poole*
Richard A. Rose Jr.
Don A. Rosini*
Gary A. Sojka, PhD**
Glenn D. Steele Jr., MD, PhD (ex-officio)*
Robert L. Tambur
Gail R. Wilensky, PhD
* Executive Committee
** Emeritus

Geisinger Health Plan
2011 Board of Directors

Glenn D. Steele Jr., MD, PhD (Chair)
William H. Alexander
Alfred Casale, MD
Karen Davis, PhD
Earl D. Faura
Richard A. Grafmyre
R. Brooks Gronlund
Jean Haynes
Chris Holcombe
Jonathan P. Hoosey, MD
Thomas H. Lee Jr., MD
John D. Moran Jr.
Joseph J. Mowad, MD
Don A. Rosini
Maryla Peters Scranton
Frank J. Trembulak

2011 External Scientific Advisory Board for Genomic and Personalized Medicine at Geisinger

Atul Butte, MD, PhD
Nancy Cox, PhD
Philip Reilly, MD, JD
Alan R. Shuldiner, MD
Huntington F. Willard, PhD

Geisinger Health System
2011 Advisory Council

Don A. Rosini (Chair)
Nancy L. Rizzo (Co-Chair)
Susan Alcorn
Kendra Auker
Ron Beer
Stephen J. Benkovic, PhD
Albert Bothe Jr., MD
James Brucker, PhD
Lisa Davis
Andrew Deubler
Georgeann Eckstine
Karl Girtton
Sen. John Gordner
Richard A. Grafmyre
Roger S. Haddon Jr.
Susan Hallick, RN
Thomas R. Harkow
Chris Holcombe
Fred Kelly Jr.
Corinne Klose, RN
Cheryl Latorre
David H. Ledbetter, PhD
Mary Lenzini-Howe
Teri J. MacBride
Susan McDowell
E. Lynn Miller
John D. Moran Jr.
Lee Myers
Michael O’Keefe
Gayle Pollock
Charles M. Ross
Graham Showalter, Esq.
Gary A. Sojka, PhD
Thomas Sokola
David L. Soltz, PhD
Robert C. Spahr, MD
Glenn D. Steele Jr., MD, PhD
Frank J. Trembulak
Joanne E. Wade
H.W. Wieder Jr.
Kenneth E. Wood, DO

Geisinger Northeast
2011 Advisory Council

Eugene Roth, Esq. (Chair)
Susan Alcorn
Tom Bielecki
Albert Bothe Jr., MD
Kevin Brennan
Lisa Bryan-Smith
James Brucker, PhD
John Buckley
Charles M. Davis, MD
Dominick DeNaples
Andrew Deubler
Eberhard (Tim) Faber
William B. Flood
Thomas Gibbon
Patricia Graham
Christopher Hackett
Susan Hallick, RN
Jean Haynes
Marge Hennelly-Bergin, RN
Scott E. Henry
Michael Hirthler
David Jolley
Patrick judge
Jane Kanyock
David H. Ledbetter, PhD
Eric R. Linde
Peter Mailloux
Melanie Maskow Lumia
Catherine McGroarty, RSM
William F. Medico
E. Lynn Miller
Marilyn Millington
Juanita Namey
Lori Nocito
Adeline Orloski
Richard L. Pearsall
Steven B. Pierdon, MD
Nancy L. Rizzo
Conrad Schintz
J. Harvey Sproul Jr.
Glenn D. Steele Jr., MD, PhD
Larry Stetler
Robert Tamburro
Frank J. Trembulak
Joanne E. Wade
John Wiercinski

These leaders have joined Geisinger’s boards and councils as a result of the 2012 mergers with Community Medical Center and Shamokin Area Community Hospital.

Geisinger Northeast
Community Advisory Board

These leaders have joined Geisinger’s boards and councils as a result of the 2012 mergers with Community Medical Center and Shamokin Area Community Hospital.

Thomas R. Harlow
Chief Administrative Officer
Geisinger-Shamokin Area Community Hospital
Geisinger-Shamokin Area Community Hospital Community Advisory Board

Geisinger Health System Advisory Council

Earl D. Faura
Geisinger Health Plan Board of Directors
Geisinger-Shamokin Area Community Hospital Community Advisory Board

Robert P. Steigmeyer
President and CEO
Geisinger-Community Medical Center
Senior Leadership Council

Jeff Jacobson
Geisinger Health System Foundation Board of Directors

Virginia McGregor
Geisinger Health System Foundation Board of Directors
Henry L. Hood, MD  
(August 15, 1921-February 18, 2012)

Geisinger President & CEO Emeritus Henry Hood, MD, was a highly esteemed and much beloved leader in the Geisinger community from 1957–1991. Dr. Hood arrived at Geisinger Medical Center in 1957, where he founded the department of neurosurgery. He was president and chief executive officer of Geisinger from 1974–1991. His tenure as CEO was marked by tremendous vision, a commitment to medical education and research, and expansion that enabled Geisinger to continue advancing as an integrated health system well into the future. Dr. Hood’s vision for a basic science research institute led to the establishment of Geisinger’s Sigfried and Janet Weis Center for Research. Geisinger’s research program now includes a second research facility, the Henry Hood Center for Health Research, where scientists work to develop new care delivery models for rural populations.

Arthur M. Peters Jr., Esq.  
(June 3, 1928-September 4, 2011)

Arthur Peters served on the Geisinger Health System Foundation Board for 13 years and was also a member of the Geisinger Advisory Board and several board committees. Art was a Special Agent with the Federal Bureau of Investigation, photographer, pilot, and active in Danville and the surrounding community. Art and his wife Georgie were generous donors to the Henry Hood Center for Health Research and the Janet Weis Children’s Hospital. Geisinger Health System is enormously grateful to Art and Georgie, whose generous support of Geisinger carries on in the lives of those who turn to the system for quality patient care.

Janet C. Weis  
(April 13, 1919-January 3, 2011)

A philanthropist, travel enthusiast, and published author, Janet Weis was a long-time healthcare champion and generous supporter of Geisinger. She and her husband, the late Sigfried Weis, sponsored a formal research program in the early 1980s to bring the finest scientific minds in the country to Geisinger. These efforts led to the opening of the Sigfried and Janet Weis Center for Research, dedicated in 1987 in their honor. Their generosity in the early 1990s led to the 1994 grand opening of the Janet Weis Children’s Hospital. Sigfried and Janet Weis’ nearly $34 million of philanthropic support and significant personal involvement at Geisinger left a legacy that will benefit people in need for many years to come.