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Clarence Erney, a resident of Allentown's Devon House, discusses his Medicare bill with Aimee Stewart, co-owner of Senior Solutions. Senior Solutions is a private health advocacy organization which helps elderly patients navigate the health care maze.

Patients have someone on their side

From care quality to bills, advocates address issues.

By KRISTIN LONG
The Express-Times

"Patient advocates, patient representatives, patient relations, customer service. There is a whole gamut of names," says Nancy Stevens, patient representative at Lehigh Valley Hospital. All describe the same basic service: helping patients address their health care concerns.

Clarence Erney, 89, was full of concerns when his wife, Nora, and sister-in-law, Gertie, were both diagnosed with Alzheimer's disease 10 years ago. Feeling dissatisfied with public agencies, Erney saw a newspaper ad for Senior Solutions in Allentown.

"I was desperate for help, that's how I got started. And then it just went on and on," Erney says.

Co-owner and President Sheila Saunders says Senior Solutions monitors patients' care wherever they may be, in hospitals, nursing homes, assisted-living facilities or private homes.

The business also incorporates other health care-related services into its care plan. Saunders' sister, co-owner Aimee Stewart, explains, "We are the hub of the

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Nancy Stevens, Lehigh Valley Hospital
patient representative

service wheel that includes financial planners, Meals on Wheels, physical therapists, hospices, nursing homes. We are the initiators of service. We come up with a plan and make sure it's implemented."

Saunders put Erney in contact with a geriatric assessment team at Lehigh Valley Hospital, which later diagnosed Nora's Alzheimer's. Then Saunders helped him choose the right nursing home for his wife.

The care manager also suggested Erney contact an attorney and bank so he could remain living in his Coopersburg home, which was technically owned by Nora and Gertie. He stayed there 10 years, until Senior Solutions recently helped him make the transition to Devon House in Allentown.

Saunders says she got the idea to start a private health advocacy program after working in public agencies. She and Stewart, both certified geriatric care managers, started Senior Solutions 11 years ago, at a time when private health advocacy was in its infancy.

Saunders and Stewart were the only care managers

at Senior Solutions when Erney first contacted them in 1991. "They prospered since then. I knew they would, because there are a lot of old people out there," he says.

Currently, they employ six or seven care managers and serve 80 to 90 clients regularly. In addition, they have about 80 home-health aides as part of their home care division, Caring Companions, established nine years ago, Stewart says.

Saunders points out several benefits of a private health advocacy service. It has more time to deal with day-to-day issues, such as renewing prescriptions, not just emergencies. Also, even in the cases of clients no longer seen regularly, the agency knows contact details in case of an emergency. Plus, the care manager is not looking to protect hospitals or nursing homes, so agency representatives are able to speak truthfully about the pros and cons of each path of medical care, Saunders says.

"Some people don't know the resources. We see things through professional eyes. We aren't afraid to approach the staff and say, "This room hasn't been cleaned in a week," Stewart says.

In addition, agencies are able to tailor the care to individual needs and pocketbooks. Clients are charged on the basis of how much time is spent with the patient, and the average price is \$90 per hour, Saunders

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says.

Agency representatives sit down with clients and figure out the least amount of time necessary to do an adequate job, usually spending more time with a client initially and less time after the critical situation has been remedied, she says.

Many clients find the cost of the service more than pays for itself. For instance, out-of-town children are spared the expense of finding a last-minute flight, renting a car, and missing work every time something happens to their parent, Stewart says.

Sandy Cregger of Caring Companions has seen many older people who have lost all of their money and now are dependent on the state.

"Senior Solutions allows people to maintain what money they have. It makes a difference that they know what channel to go to," she says.

Besides private health advocacy, there are many other avenues to pursue for information and guidance, often free of charge.

Hospitals employ patient advocates or representatives to address patients' issues. Stevens, one of two patient representatives at Lehigh Valley Hospital, says, "Whatever concerns the patient concerns me, from the parking lot to the bill."

Stephanie Dougherty, patient advocate at Hunterdon Medical Center, describes her job as clarifying misunderstood diagnoses, treatments or billing, and intervening between patient and caregiver. Being in the hospital is a profound, trying experience for most people, and she tries to make it as positive as possible for them, she says.

Patient feedback is not limited to strictly medical issues, but many patient advocates have a background in health care. Stevens, formerly an emergency room nurse, says her knowledge of the hospital system and medical language helps her address patients' needs.

Stevens made the transition from nurse to patient representative 25 years ago, when the position was

first established at Lehigh Valley Hospital. "At first it was tough, but now people understand the role more. Doctors warn their staff, 'She comes at it from the viewpoint of the patient,'" she says.

Dougherty thinks patient advocates will be in even greater demand in the future. "As hospitals and health care become more complex, there will be a greater need to help patients understand what's going on."

To alleviate panic about complex medical issues, the entire staff at Hunterdon Medical Center advocates for the patient at any point during treatment, Dougherty says. In fact, most concerns are resolved before they reach her desk. She only intervenes in about a third of the cases, she estimates.

The Pennsylvania Medical Society agrees that doctors and nurses are patients' best advocates, and therefore aims to protect the doctor-patient relationship, Chuck Moran of the Pennsylvania Medical Society says.

The medical society advocates for issues in many arenas, including helmet safety laws and affordable prescriptions, Moran says. They work primarily at the state level, but also join forces with national organizations, such as the American Medical Association, to advocate for national issues. Recently, they worked with the AMA when Pennsylvania was targeted for votes in favor of the Patients' Bill of Rights.

"No one should come between doctors and patients. If insurance companies do, they should be held liable," Moran says.

Martin Cohen, an injury lawyer in Easton, says insurance companies are almost always involved with his cases. Decisions are often based on bottom-line prices instead of medical care, he says.

People run into interference when they want a second opinion, because the insurance companies do not want to pay for an additional consultation. The quality of care can also be affected if an HMO has a relationship with a particular doctor or hospital, he says.

Most people seek his help after an injury has occurred, but his firm also