



FORT WAYNE

Summer 2025 • Volume 23, Issue 2

MEDICINE

QUARTERLY

*Official Publication of the
Fort Wayne Medical Society*



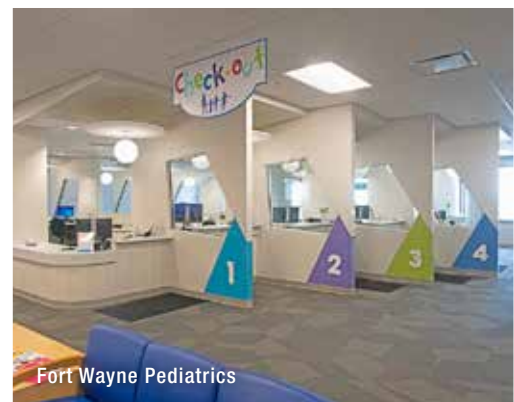
ISMA
INDIANA
STATE
MEDICAL
ASSOCIATION

Gov. Mike Braun (seated, center) held a ceremonial signing on July 8 of SEA 475, the law banning noncompete clauses in physician contracts with hospitals. The law took effect July 1 and applies to contracts entered on or after that date. Looking on (L to R): Cami Pond; ISMA Vice President of Government Affairs John Ruckelshaus; Sen. La Keisha Jackson (D-Indianapolis); ISMA fellow Isaac Meng; House Public Health Chairman Brad Barrett, MD (R-Richmond); ISMA President William Pond, MD; Rep. Ethan Manning (R-Logansport), the bill's House sponsor; bill author Sen. Justin Busch (R-Fort Wayne); ISMA Board of Trustees Chair Teresa Lovins, MD; Sen. J.D. Ford (D-Indianapolis); Rep. Becky Cash (R-Zionsville); ISMA Director of Policy and Government Affairs Doug Boyle; ISMA fellow Irish Starkey; ISMA Executive Vice President Julie Reed, JD.

BUILDING ON TRUST



- ✓ Design/Build
- ✓ Interior Renovations
- ✓ Build/Lease
- ✓ Maintenance



PARTNERING FOR A LIFETIME

7701 Opportunity Drive
Fort Wayne, Indiana 46825
(260) 489-1234
shawneeconstruction.com



SHAWNEE
Construction & Engineering



Center for Colon & Rectal Care

Treating:

Colon cancer • Rectal cancer • Anorectal • Irritable Bowel
Fecal incontinence • Inflammatory bowel disease • And more

Personalized, compassionate care. Quicker return to activity.

**We are happy to offer our patients care at all hospital systems in the area.
Call to schedule your colonoscopy today!**

Lutheran Campus

7988 W Jefferson Blvd
Fort Wayne, IN 46804



Dupont Campus

2518 E Dupont Rd
Fort Wayne, IN 46825

(260) 436-0259

•

ccrcfw.com



Highly specialized. Highly personalized.

Society Officers

President:

Joel Valcarcel, MD

President-Elect:

Preeti Dembla, MD

Immediate Past President:

Gregory Pond, MD

President FWMS Foundation:

Sharon Singleton, MD

Chairman of the Board:

David Donaldson, MD

Secretary:

Erin Jefferson, DO

Treasurer:

Edgardo Rivera Rivera, MD

Executive Director:

Joel Harmeyer

Board of Trustees:

Angela Grab, MD

Stephanie Kidd, DO

Molly Kelly, MD

Emily Krach, DO

Brianna Serbus, MD

David Smith, MD

Melvin Susanto, MD

Joshua Wallet, MD

Scott Yen, MD

Ex-Officio:

Michael Yurkanin, MD —

President, Parkview Hospital Medical Staff

David Paris, MD —

President, Lutheran Hospital Medical Staff

Andrew Offerle, MD —

President, Dupont Hospital Medical Staff

Zachry Waterson, DO —

Director, Fort Wayne Medical Education Program

Tonya Hughes —

President, FWMS Alliance

Dave Albin, MB —

ISMA, Director of Membership & Marketing

Indiana State Medical Association

ISMA President:

William Pond, MD

ISMA Past President:

David R. Diaz, MD

ISMA President Elect:

Ryan Singerman, DO

Delegates:

Farrukh Adhami, MD

Dinesh Agnihotri, MD

Sara Brown, MD

Isa Canavati, MD

David Donaldson, MD

John Ducker, MD

Sampath Ethiraj, MD

Donald Giant, MD

Tom Gutwein, MD

Erin Jefferson, DO

Tyler Johnson, DO

Rebecca Kaminski, DO

Stephanie S. Kidd, DO

Joshua Kline, MD

Steven Ko, MD

Justin McGee, MD

Scott Myers, MD

Gregory Pond, MD

William Pond, MD

Edgardo Rivera Rivera, MD

Brianna Serbus, MD

Eric Shoemaker, DO

Kara Vonderau, MD

Zachry Waterson, DO



Fort Wayne Medical Society

Mission Statement

The Fort Wayne Medical Society is committed to the goals of the American Medical Association, the purpose of which is the preservation of the art and science of medicine, the personal development of member physicians and the protection and betterment of the public health.

The Fort Wayne Medical Society is committed to the principles of physician autonomy and self-determination in the practice of medicine.

The Fort Wayne Medical Society is committed to fulfilling the role of an active cohesive leader of the healthcare resources of our community by maintaining and assuring the quality, availability and the responsible economic utilization of our healthcare resources.

The Fort Wayne Medical Society is committed to active involvement in the decision-making process regarding medical, social, political and economic issues affecting patients and physicians within hospital and all various inpatient and outpatient settings.

Contents

Society Officers 4

FWMS Mission Statement 4

Editor’s Note 6

ISMA Noncompete Agreement FAQ 7

Fort Wayne: A Rising Hub for Medical Tourism? 8

2025 Legislative Update: New Laws to Take Effect July 1..... 9-11

Understanding the Corporate Transparency Act (CTA)
for Executives..... 12-13

2025 ISMA District 12 Annual Meeting Summary 14

The Peggy F. Murphy Community Grief Center: A Vital Resource for
Grieving Adults – What Physicians Should Know..... 15-18

Neighborhood Health Ribbon Cutting 19

Ribbon Walk raises \$120,001 to help local people with cancer..... 22-23

Hospital News – Lutheran Health Network 24-25

Bue Agilis..... 26

Hospital News – Parkview Health..... 27-29

List of Advertisers

Shawnee Construction & Engineering IFC

Allied Physicians 3

Fort Wayne Medical Society Mission Statement..... 4

Dulin, Ward & DeWald, Inc. 13

Stillwater Hospice 18

Turnstone..... 18

Xplor..... 20

Sperry Van Ness Parke Group 21

Cancer Services 23

Lutheran Health Network 24

The Towne House Retirement Community 30

Linke Urology + Robotics IBC

Parkview Packnett Family Cancer Institute OBC

Fort Wayne
Medical Society
Staff



Joel Harmeyer
Executive Director
joel@fwms.org



Lindsey Liepold
Office Manager
lindsey@fwms.org

www.FWMS.org

Fort Wayne Medicine Quarterly is the official publication of the Fort Wayne (Allen County) Medical Society, Inc.

For advertising rates and information, contact Joel at the Executive Office:

Phone: 260-420-1011 • Fax: 260-420-3714
709 Clay Street, Suite 101
Fort Wayne, IN 46802
joel@fwms.org

The views expressed in *Fort Wayne Medicine Quarterly* articles are those of the authors and do not necessarily represent those of the Fort Wayne Medical Society.

Editorials are welcome and members are encouraged to respond to an opinion that might be different from their own.

References from articles will be included, if space allows. When not included, references can be obtained through the editor.



Remembering Fen-Lei Chang, MD, PhD

Right before we sent this issue to the printer, we learned of the passing of Fen-Lei Chang, MD, PhD. Dr. Chang was a past FWMS president, FWMEP board member, ISMA delegate, and our society's first Chairman of the Board. His contributions to both the Fort Wayne Medical Society and FWMS-Foundation are profoundly appreciated and will be greatly missed. We are dedicating the fall edition of *Fort Wayne Medicine Quarterly* to remembering Dr. Chang. I encourage you to send along your thoughts, regardless of length, so that we may include them.

On a personal note, Dr. Chang was part of the committee that hired me and was the FWMS chairman for most of my time here. I'll be forever grateful for his constant encouragement, kindness, and the trust he bestowed, particularly as I was learning the position. As the best leaders do, his confidence gave me the freedom to implement new ideas and initiatives. As I got to know him more, Dr. Chang's wonderful sense of humor came through. At events, I started a "selfie" ritual with him (see photo to the right). He would complain, and attempt to delay it, but eventually he would pose with me, flashing that unforgettable smile.

Encourage others, trust and praise colleagues, and don't take yourself too seriously, are all valuable lessons I learned from Dr. Chang.



Please consider sharing your memories of Fen-Lei Chang. Together, let's honor this wonderful man. Please send your memories to me via email at joel@fwms.org.



ISMA
INDIANA
STATE
MEDICAL
ASSOCIATION

Visit
ismanet.org/convention
to register

ISMA 176th Annual Convention

Sept. 26-28, 2025

**Embassy Suites – Noblesville
13700 Conference Center Dr. South**



NONCOMPETE AGREEMENT FAQ

WHAT IS A NONCOMPETE AGREEMENT AND HOW DOES IT IMPACT MY ABILITY TO PRACTICE?

Answer: Most noncompete agreements ban you from working elsewhere as a physician providing similar services within a certain geographic area and for a specific period. The term can include both outright prohibitions and indirect restrictions. Indirect restrictions include financial penalties, repayment obligations, employer consent requirements, and other provisions designed to restrict a physician's practice.

ARE NONCOMPETE AGREEMENTS BANNED FOR CERTAIN SPECIALTIES IN INDIANA?

Answer: Yes. Beginning with agreements signed on or after July 1, 2023, noncompete agreements are specifically banned for "primary care" physicians. Primary care is defined to include family medicine, general pediatric medicine and internal medicine. While other specialties are not covered by the "primary care" ban, they may fall under other noncompete bans — depending on the timing of the agreement and the identity of the employer.

ARE NONCOMPETE AGREEMENTS BANNED FOR CERTAIN EMPLOYERS IN INDIANA?

Answer: Yes. For agreements entered into on or after July 1, 2025, regardless of specialty, noncompete agreements are banned for: (1) hospitals; (2) parent companies of hospitals; (3) affiliated managers of a hospital; (4) and health systems. "Health systems" are defined as any entity that shares ownership, governance or membership with a hospital or hospital parent company. The term "affiliated managers of a hospital" is not defined in the legislation, and its full scope will not be known until interpreted by the courts.

HOW DOES THE DATE OF MY INDIANA EMPLOYMENT CONTRACT AFFECT A NONCOMPETE AGREEMENT?

Answer: The date is important. For contracts entered into on or after July 1, 2025, noncompete agreements are banned for physicians employed by hospitals, health systems, and their affiliated employers — regardless of specialty. For contracts entered into on or after July 1, 2023, they are banned for primary care physicians — regardless of the type of employer. For contracts signed before those dates, the general rules regarding noncompete agreements apply — some are enforceable, and others may not be. If a contract entered into before July 1, 2023, or July 1, 2025 (as applicable), contains a noncompete agreement, renewals or extensions may still include noncompete provisions without violating the ban.

MY EXISTING CONTRACT CONTAINS A NONCOMPETE AGREEMENT. CAN I REMOVE IT?

Answer: Indiana's 2023 and 2025 legislation did not invalidate pre-existing noncompete agreements. Those agreements remain binding, and there is no automatic right to remove a noncompete provision. However, parties may amend an agreement if they mutually agree to do so.

MY EMPLOYER SAYS I CAN BE BOUND TO A REPAYMENT AGREEMENT FOR THE FIRST THREE YEARS OF EMPLOYMENT. IS THAT TRUE?

Answer: Yes, with limitations. For agreements entered into on or after July 1, 2025, provisions requiring repayment of training expenses, bonuses, or other amounts are considered a form of prohibited noncompete agreement. Such repayment provisions may, however, be enforceable during the first three years of employment. For agreements signed before July 1, 2025, a repayment provision may be enforceable depending on the language of the agreement.

I AM NOT COVERED BY THE NEW PRIMARY CARE OR HOSPITAL-FOCUSED BANS ON INDIANA NONCOMPETE AGREEMENTS. ARE THERE CIRCUMSTANCES UNDER WHICH AN EXISTING NONCOMPETE CAN BE INVALIDATED?

Answer: Yes. To be enforceable in Indiana, a noncompete agreement must meet several requirements. These include a reasonable time limit, geographic scope and activity restriction, and a legitimate protectable interest by the employer. Further, to be valid, all non-competes must include specific provisions for patient notices, ongoing access to patient records, and reasonable noncompete buyout amounts. Noncompete agreements entered into on or after (and possibly before) July 1, 2023 — regardless of specialty — may be invalidated to the extent: (1) the contract naturally expired; (2) the employer terminated the employment without cause; or (3) the physician terminated the employment for cause.

I WAS NOT AWARE OF MY NONCOMPETE WHEN I SIGNED MY CONTRACT, DOES THAT GET ME OUT OF THE AGREEMENT?

Answer: Generally, no. Indiana law does not excuse individuals who sign a contract without reading or understanding it.

HOW DO I KNOW IF MY EMPLOYER CAN BIND ME TO A NONCOMPETE AGREEMENT??

Answer: Yes. We suggest consulting with a qualified attorney to determine whether your employer can bind you to a noncompete agreement or whether your existing agreement is enforceable.

The above should not be construed as legal advice or a legal opinion on any specific facts or circumstances. This content is intended for general informational purposes only. You may wish to consult your own attorney regarding your specific situation and legal questions. ISMA thanks Scott Morrisson, JD and Krieg DeVault LLP for their assistance in preparing this document.

(317) 261-2060 | www.ismanet.org

Not an ISMA member? www.ismanet.org/JoinUs



Fort Wayne: A Rising Hub for Medical Tourism?

Edgardo Rivera Rivera, MD



As a practicing physician in Fort Wayne, I have seen firsthand the quality, commitment, and innovation that defines our healthcare community. Fort Wayne is not just a city with good hospitals—it is a community poised to become a regional leader in medical tourism, but only if we really want it. This vision is grounded in the strength of our healthcare systems,

our strategic geographic location, and our capacity for growth. But achieving this future will require coordinated effort among stakeholders, thoughtful investment, and a unified vision.

Fort Wayne is home to a robust and diverse healthcare ecosystem, including major hospital systems like Parkview Health and Lutheran Health Network and Indiana University Health among others. These institutions provide not only comprehensive general care but also advanced specialty services such as cardiovascular surgery, oncology, pediatrics, orthopedics, and neurological care. Many of these departments are staffed by nationally and internationally renowned physicians who have chosen to build their careers in Fort Wayne due to the supportive professional environment and high standard of patient care.

Unlike many larger urban centers, Fort Wayne offers a distinct advantage: space and scalability. Our healthcare facilities have the physical room to grow, and the economic flexibility to expand at a lower cost when compared to larger cities. This makes it feasible to develop new centers of excellence, surgical hubs, and integrated care campuses that can cater to a wider regional and even international population. The ability to attract patients from surrounding states is enhanced by our proximity to major cities such as Chicago, Indianapolis, Columbus, Detroit, and Cincinnati—all within a three-hour drive.

Furthermore, the cost of healthcare delivery in Fort Wayne can be significantly lower than in many large metro areas when cost of transportation, lodging, meals and others are taken into account. Lower overhead costs, lower cost of living for staff, and a collaborative physician community allow us to maintain affordability while delivering top-tier care. For patients facing long wait times or higher costs in their home cities, Fort Wayne represents a logical and attractive alternative.

To fully leverage these advantages, we must navigate several critical pathways. First, we must deepen our engagement with city and state government to align healthcare infrastructure projects with regional development plans.

Incentives for facility expansion, streamlined licensing processes, and support for marketing Fort Wayne as a medical destination will be vital. The City of Fort Wayne and Allen County leadership have shown great interest in public health and economic innovation—we must now bring medical tourism into that dialogue.

Second, we must engage with professional organizations such as the Fort Wayne Medical Society and the Indiana State Medical Association. These groups can serve as unifying platforms for physicians, helping us to advocate collectively for the necessary policy shifts, funding, and strategic alliances. They can also foster physician-led initiatives that emphasize quality improvement, patient experience, and outcomes, all of which are hallmarks of successful medical tourism programs.

Equally important is the need to partner with local universities and colleges to support workforce development. As demand grows, so too must our pipeline of trained healthcare professionals—not only physicians and nurses, but also allied health providers, administrative staff, and medical hospitality coordinators. Continuing establishing and expanding to new training programs in conjunction with local educational institutions can ensure that we have the talent needed to sustain this growth.

Physicians, too, must see themselves as both caregivers and ambassadors for this new chapter in our city's healthcare narrative. We must champion innovation in practice models, invest in technologies that enhance patient experience, and commit to building a culture that supports wellness for all. Fort Wayne's medical community already demonstrates excellence—our challenge now is to package that excellence in a way that is accessible, attractive, and valuable to those beyond our immediate geography.

The potential benefits extend far beyond hospital walls. Medical tourism can generate significant economic ripple effects, from hotel stays and dining to transportation and local shopping. It can also position Fort Wayne as a city that values health and well-being, not only for its residents but for all who visit. In turn, this reputation can attract new businesses, support real estate development, and enrich our cultural landscape.

In closing, Fort Wayne stands at a unique crossroads. We have the tools, talent, and opportunity to redefine what regional healthcare leadership looks like. By working together across sectors—medicine, government, education, and business—we can elevate our city into a model of 21st-century medical tourism. It is not a dream—it is a logical next step in our evolution as a center for care, compassion, and community.

2025 Legislative Update: New Laws to Take Effect July 1 | Brandon J. Almas



The 2025 legislative session concluded following adoption of the State's biannual budget in the early morning hours of April 25, 2025. It was a session marked by significant policy shifts in the areas of government spending, property tax relief, education, health care, and juvenile law.

More than 1,200 bills were introduced, with approximately 20% of them becoming laws. Below is a summary of some of the key bills from the 2025 legislative session, most of which took effect July 1.

FISCAL MATTERS

The most significant bills from the 2025 legislative session include HEA 1001, which establishes the State's budget for the next two years, and SEA 1 and HEA 1427, which address property tax relief. The State's budget bill required significant 11th hour work after revenue forecasts projected a \$2 billion reduction in the amount of anticipated tax revenues over the two-year budget term. While the impacts of these far-reaching bills are still being evaluated, below is a brief summary of the key changes:

HEA 1001

- Fully funds school choice program and eliminates income caps, starting with the 2026-2027 school year.
- Increases the tax on cigarettes by \$2.00 per pack (from \$1.00 to \$3.00).
- Reduces spending across most state agencies by 5%.
- Reduces funding for local public health agencies from \$100 million per year to \$40 million per year.
- Cuts funding for public television and public radio to the tune of approximately \$7 million.
- Amends the process for appointment of the Indiana University Board of Trustees so that all Trustees are now appointed by the Governor.

SEA 1 and HEA 1427

- Caps real estate tax levies at the prior year's level unless the local governing body approves an increase following a public hearing.
- Creates a new supplemental homestead credit of 10% of the property tax liability, up to a maximum \$300 beginning in 2026.

- Creates up to \$250 in additional credits for disabled veterans and \$150 for seniors on fixed incomes.
- Increases the business personal property tax exemption from \$80,000 in 2025 to \$2,000,000 starting with the 2026 assessment year.
- Removes the existing 30% depreciation floor for business personal property first placed in service after July 1, 2025.
- Requires that referendums and local public questions can only be placed on the ballot during general elections.
- Mandates that school districts must share operational revenue with charter schools, unless they are determined to be exempt from the revenue sharing requirements.

Of the foregoing changes, many observers believe that public schools will be the most significantly impacted. Nonpartisan estimates project a loss of approximately \$744 million in public school funding from 2026 to 2028.

Anecdotally, some school districts are already looking at ways to absorb the shortfall. Following a recent failed referendum, Central Noble Community Schools notified stakeholders of a plan to reconfigure operations, including moving 5th grade students to the Jr/Sr high school building and moving all second grade students at Wolf Lake Primary School to Central Noble Elementary. The Superintendent also proposed a new transportation plan that includes eliminating service to students within an expanded walk zone and introduced the possibility of transitioning to a four-day instructional week as a possible cost-savings measure.

EDUCATION

HEA 1002 was promoted as a deregulation effort intended to streamline Indiana's education code. According to the bill's author, Rep. Bob Behning, the goal was to remove directives and provide additional flexibility for schools and districts. Specific changes include allowing the Governor to appoint a Secretary of Education without regard to advanced degrees or education experience (as was previously required) and removing a requirement for high school students to take at least one semester of an ethnic studies course. In total, the bill eliminates or modifies over 60 different educational requirements and programs.

continued on page 10

HEA 1348, authored by Rep. Tim Wesco, now recognizes diplomas from nonaccredited institutions and from homeschooling as meeting state requirements for completion of high school. The bill also prohibits state agencies and higher education institutions from rejecting students or treating them differently based solely on their having received a diploma from a nonaccredited school.

HEA 1041 requires state educational institutions and private post-secondary educational institutions that sponsor athletic programs to designate each team or sport as either (i) a male, men's, or boy's sport, (ii) a female, women's or girl's sport, or (iii) a coeducation or mixed team sport and prohibits students from participating on a team or sport that does not match the student's biological sex at birth.

HEA 1064 removes language from the Indiana code that prohibited students from enrolling in certain schools primarily for athletic reasons.

HEA 1498 re-establishes a school accountability system that assigns schools a letter grade of A-F based on school performance. The bill requires the State Board of Education to develop the new framework for the A-F grading system by the end of 2025 and provides guidance on measuring school performance, including prioritizing students earning diploma seals.

SEA 146 increases base starting teacher pay by \$5,000 to \$45,000.00, beginning June 30, 2025. It also increases the percentage of each school corporation's budget that must be allocated toward teacher salaries from 62% to 65%.

HEALTH CARE

HEA 1003 focuses on preventing Medicaid fraud, drug pricing regulation and billing transparency. The bill authorizes the Medicaid Fraud Control Unit to investigate provider fraud, with the goal of ensuring that Medicaid funds are used properly. It also prohibits entities that participate in the 340B Drug Pricing Program from charging individuals more for prescription drugs than the acquisition cost, which could reduce expenses for certain low-income patients.

HEA 1004 aims to drive down health care costs for patients by setting pricing targets for five (5) of Indiana's largest non-profit health systems. The list of impacted health systems includes Indiana University Health, Ascension, Franciscan Health, Parkview Health, and Community Health Network. The bill requires the office of management and budget to determine Indiana's national average hospital prices and requires the foregoing health systems to bring their prices in line with the statewide averages by 2029. If any hospital system fails to bring its

prices in line with the statewide average, they risk facing a one-year revocation of their state nonprofit status.

REAL ESTATE

The 2025 legislative session included a few changes to Indiana's landlord-tenant law. Under HEA 1079, a warehouseman or storage facility may now sell a tenant's personal property if the property remains unclaimed forty-five (45) days after the landlord delivers a notice to the tenant including an order from the court authorizing the removal of personal property and the identification and location of the warehouseman or storage facility (current law requires a warehouseman or storage facility to wait 90 days before the property may be sold). HEA 1115 allows a landlord to obtain an order for emergency possession of premises if the court finds, by a preponderance of evidence, that: (i) a tenant or the tenant's guest has committed a crime that affects the health and safety of another tenant, the landlord, or an agent of the landlord; or (ii) a tenant provided materially false information to induce the landlord into leasing or giving possession of the rental unit to the tenant.

HEA 1347 amends the list of items property owners are required to disclose as part of the seller's residential disclosure form (State Form 46234) to include whether the property is located within a locally designated historic district and whether the property is subject to a conservation easement.

DEVELOPMENT

Under HEA 1037, municipalities cannot enact or enforce a rule that is more stringent than the requirements of Indiana's Construction Stormwater General Permit ("CSGP"). Although the CSGP contains comprehensive requirements for managing erosion, sedimentation, and runoff from construction activities, its provisions are generally limited to projects that involve land-disturbing activities greater than one (1) acre. Under HEA 1037, municipalities will generally not be permitted to impose the same requirements contained in the CSGP on sites under one (1) acre or impose requirements that are stricter than those contained in the CSGP, even if the site is greater than one (1) acre. The bill does allow municipalities to issue a stop work order to a person conducting a land disturbing activity on a site that is less than one (1) acre if the person fails to control dust or sediment from leaving the site and the person has failed to correct the condition within forty-eight (48) hours following written notice from the municipality.

EMPLOYMENT

SEA 475 prohibits hospitals, hospital systems, affiliated managers of hospitals, and parent companies of hospitals from requiring physicians to enter into noncompete

agreements after July 1, 2025. This bill still allows for nondisclosure agreements intended to protect confidential information and trade secrets. It also still allows agreements regarding non-solicitation of employees, as long as the restriction does not exceed one (1) year after the physician's employment ends. SEA 475 does not affect noncompete agreements that were originally entered into before July 1, 2025.

FAMILY LAW

HEA 1605 was a bill aimed at achieving comprehensive reform of Indiana's juvenile law. Among other things, the bill (i) requires the Office of the Secretary of the Family and Social Services to share certain information with the Indiana Department of Child Services ("DCS") to allow DCS to respond more quickly to child abuse/neglect cases, (ii) adds new categories of drug exposure, including exposures to fentanyl-containing and fentanyl-related substances, as grounds for a CHINS determination, (iii) expands the list of individuals who can attend and participate in CHINS hearings to include an individual with whom the child is placed and a representative of a licensed child placing agency, (iv) creates rebuttable presumptions that a child is in need of services if the court finds that the child's parent is subject to an order requiring the parent to participate in a drug rehabilitation or that the parent has exposed the child to certain types of drugs, including fentanyl and fentanyl-related substances, (v) expedites the timeframe for initial termination of parental rights ("TPR") hearings, and (vi) requires DCS to perform criminal background checks on parents or household members and share the results with the court before reunification.

PROBATE AND ESTATE PLANNING MATTERS

HEA 1081 makes it easier for charitable organizations that have been designated as a beneficiary of an individual retirement account, retirement account, brokerage transfer on death account, annuity, or life insurance policy to obtain the funds without jumping through hoops. Under this bill, a financial institution or insurance company in control of the funds must transfer the funds directly to the charitable organization upon receipt of an affidavit that (i) certifies the charitable organization's 501(c)(3) status, (ii) includes a copy of a corporate authorization authorizing the receipt of funds, (iii) includes a W-9, and (iv) includes a copy of the deceased individual's death certificate or other proof that the individual has died.

HEA 1088 adds to the list of actions a personal representative can take in an unsupervised administration without approval of the court, the ability to distribute in kind all or part of the decedent's interest in a retirement plan or account that the estate is a beneficiary of or has an interest

in to a distributee. HB 1088 also redefines the handling of certain nonprobate transfers as "direct postmortem transfers." Under this change, a direct postmortem transfer is a transfer of an asset to a testamentary trust if any of the following circumstances apply: (1) the asset transferred to the trust is a distribution of death proceeds under a life insurance policy or annuity; (2) the testamentary trust is a designated beneficiary of an individual retirement account, employee benefit plan governed by ERISA; or (3) the transfer is a distribution from another trust, the result of a disclaimer, a transfer on death pursuant to IC 32-17-14, or a decanting distribution. In the cases of direct postmortem transfers, the transfer is considered effective upon the decedent's death regardless of when the will is admitted to probate and does not constitute part of the decedent's estate or subject to claims of the estate except in limited circumstances.

HB 1213 was a response to HB1034 from the 2024 legislative session. Under that law, the property and casualty insurance coverage on property transferred by a transfer on death instrument after December 31, 2024 was automatically extended to the beneficiary for a period of 60 days. Under HB 1213, the legislature clarified that commercial lines of property insurance do not transfer to the beneficiary. HB 1213 also excludes the casualty and liability coverage from carrying forward to the beneficiary.

ELECTIONS AND VOTING

SB 10 specifies that identification documents provided by educational institutions will not be accepted for proving eligibility to vote. High school and college-aged students will now be required to obtain a state issued ID or driver's license to be eligible to vote.

SB 287 requires candidates for school board to declare their party affiliation or specify that they are not associated with any political party. While proponents of this bill argued that party affiliations will improve transparency by providing additional information about each candidate's background and their ideas, opponents argued that party affiliation is unrelated to decisions regarding how to best educate Indiana's children.

Barrett McNagny LLP is a full-service law firm with a dedicated team that can help you navigate the impacts of any new laws on you or your business. If you have any questions about the 2025 legislative session and what these laws mean for you, please contact one of our professionals today.

About the Author:

Brandon J. Almas is a member of Barrett McNagny's Real Estate and Economic Development team. He can be reached at bja@barrettllaw.com or 260-423-8819.

Understanding the Corporate Transparency Act (CTA) for Executives | Lewis W. Ostermeyer



The Corporate Transparency Act (CTA) mandates that many businesses report beneficial ownership information (BOI) to the Financial Crimes Enforcement Network (FinCEN). This requirement is codified in 31 USC § 5336 and is crucial for CEOs, CFOs, and other

executives to understand.

Reporting Company Obligations:

- Any “Reporting Company” must report specific BOI to FinCEN. For companies formed after January 1, 2024, this includes information on both the “Applicant” and Beneficial Owners.
- The required information includes each Applicant and Beneficial Owner’s full name, date of birth, address (business or residential), and an identifying number from a document such as a driver’s license or passport.

Definition of a Reporting Company:

- A Reporting Company is defined as any “corporation, limited liability company, or other similar entity that is: (i) created by the filing of a document with a secretary of state or a similar office under the law of a State or Indian Tribe; or (ii) formed under the laws of a foreign country and registered to do business in the United States by the filing of a document with a secretary of state or a similar office under the laws of a State or Indian Tribe...” This text includes both foreign and domestic entities.
- Exceptions include highly regulated entities such as governmental entities, banks, credit unions, insurance companies, and public utilities. Additionally, entities with over 20 employees in the U.S. and more than \$5 million in gross receipts, or those that have been inactive for over a year and are not owned by a foreign person, are also exempt.

Who is an Applicant?

An Applicant is:

- Any individual who files an application to form a corporation, LLC, or similar entity under state or tribal law.
- Any individual who registers or files an application to register a foreign entity to do business in the U.S. by filing with the secretary of state or similar office under the laws of a State or Indian Tribe.

According to FinCEN FAQs, there can be up to two Applicants for each Reporting Company: the individual who directly files the formation document and the person primarily responsible for directing or controlling the filing.

Who is a Beneficial Owner?

A Beneficial Owner is:

- An individual who exercises substantial control over the entity or owns/controls at least 25% of the ownership interests.
- Employees acting solely in their capacity as employees are not considered Beneficial Owners.
- Lawyers providing general legal services and counseling are also typically not considered Beneficial Owners unless they have substantial control over decision-making.

Reporting and Penalties

- All reported information must be updated within one year of any changes.
- Penalties for willfully providing false BOI or failing to report complete or updated BOI can include fines up to \$10,000 or imprisonment for up to two years. There is a safe harbor clause if inaccurate information is corrected within 90 days.

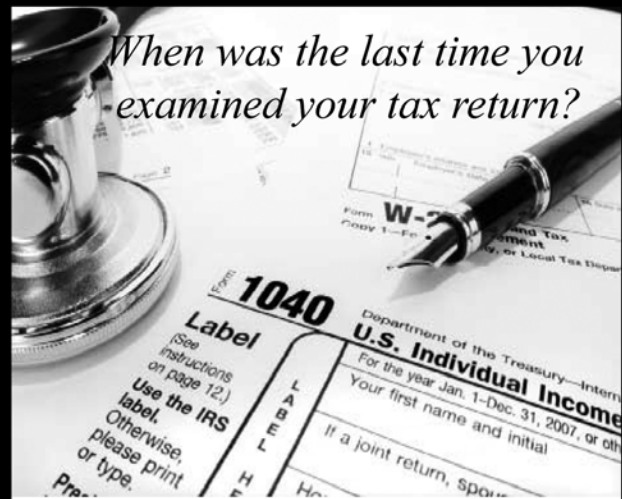
Legal Challenges and Current Status

- The CTA was first challenged by National Small Businesses United (known as the National Small Business Association or NSBA) in the United States District Court for the Northern District of Alabama. The Court issued an injunction that applied only to the NSBA plaintiffs, which is still in effect.
- The next major legal challenge was in the Eastern District of Texas in *Texas Top Cop Shop Inc. v. Garland*. In this case, the Court held that the CTA was unconstitutional and issued a nationwide injunction. This nationwide injunction was overruled by the Fifth Circuit on December 23, 2024, but 3 days later, a merits panel of the Fifth Circuit vacated the stay and reinstated the nationwide injunction. The Supreme Court ultimately stayed this injunction.
- However, on January 7, 2025, another Texas District Court issued a nationwide injunction in *Smith v. United States Department of the Treasury*. This injunction remains in effect.
- As of March 26, 2025, the Treasury Department, under Secretary Scott Bessent, announced the suspension of CTA enforcement for domestic entities, focusing only on foreign owners of foreign Reporting Companies. This suspension is discretionary and could be reversed by future administrations.

Understanding these requirements and staying compliant with the CTA is essential for executives to avoid significant penalties and ensure their businesses operate within the legal framework. For further guidance, consulting with legal professionals specializing in corporate law is recommended.

About the Author:

Lewis W. Ostermeyer is a business and transactional attorney with Barrett McNagny.



Tax Planning & Preparation Audit Representation

Call Us Today For A Free
Initial Tax Consultation

DWD

Dulin, Ward & DeWald, Inc.
CPAs & ADVISORS

Convenient
Dupont & I-69
Location

260.423.2414
www.dwdcpa.com

2025 ISMA District 12 Annual Meeting Summary |



Next, Julie Reed, JD, ISMA executive vice president, thanked Dr. Pond for his extraordinary work, weekly if not more often visits to the Statehouse to meet with legislators and testify on behalf of ISMA's 10,000 members. Reed then discussed expiring resolutions as well as ongoing resolution progress, both of which are available in ISMA Pulse. She reminded attend-

Members and guests gathered for the annual district meeting on the evening of June 26 at sycamore Hills Golf Club in Fort Wayne.

District 12 President and Interim Alternate Trustee Stephanie Kidd, DO, presided over the meeting and thanked Trustee Sara Brown, MD, Interim Trustee Eric Shoemaker, DO, Alternate Trustee Edgardo Rivera-Rivera, MD, as well as Rhonda Sharp, MD and Lisa Hatcher, MD, who serve on the AMA delegation. District members who serve on various ISMA committees were thanked, including Thomas Bond, MD, Craig Hamilton, MD, Erin Jefferson, DO, Zachary Waterson, DO, Ahsan Mahmood, MD, Dara Spearman, MD and Robert Wilkins, MD.

Dr. Kidd then thanked members of ISMA leadership in attendance, including William Pond, MD, ISMA President, Ryan Singerman, DO, ISMA President Elect, both from District 12, and then Elizabeth Struble, MD, Chair of the Commission on Legislation and ISMA Board of Trustees Chair Teresa Lovins, MD.

Dr. Kidd then introduced Doug Boyle, ISMA director of policy and government affairs, who provided a legislative update from the most recent General Assembly session. He highlighted key ISMA accomplishments, including a ban on noncompete clauses for most physicians, progress on reforming prior authorization, the addition of a \$2-per-pack cigarette tax, Medicaid funding, and the defeat of several bills that would have expanded the scope of practice for nonphysician providers such as advanced practice registered nurses, pharmacists and certified registered nurse anesthetists.

Dr. Pond also added his insights into the legislative advocacy work on the noncompete legislation and thanks all physician members for their efforts that generated over 1,200 contacts to legislators during the 2025 General Assembly session on that and other bills.

ees of the June 29 deadline for resolutions, previewed the 176th ISMA Convention scheduled for Sept. 26–28, and mentioned the upcoming Physician Wellness Symposium taking place on the first Friday of the convention.

Reed also had other ISMA staff introduce themselves, including Evan Bartel, JD, general counsel, Katie Kluger, physician relations manager and Dave Albin, vice president of membership and marketing, who also commended Fort Wayne Medical Society staff Joel Harmeyer and Lindsey Liepold for their work in serving physicians within the district.

Dr. Lovins then spoke about the recent work of the ISMA board of trustees, including the completion of seven board studies or actions directed by the House of Delegates. These reports will be available in ISMA Pulse in the near future.

Dr. Lovins also led a strategic planning session for the 2026–28 cycle, asking physicians in attendance to share their thoughts on ISMA's strengths, weaknesses, opportunities and threats as part of a statewide initiative to gather input for the next three-year strategic plan.

During the business portion of the meeting, Dr. Kidd and Dr. Rivera-Rivera oversaw the election for the district's leadership positions before adjourning for the evening.

Election Results: all new terms begin at Convention in September

Trustee – Eric Shoemaker, DO – 3-year term, uncontested

Alternate Trustee – Edgardo Rivera-Rivera, MD – 3-year term, uncontested

Alternate Trustee – Josh Kline, MD – 1-year partial term, uncontested (completes Dr. Shoemaker's previous term as alternate)

District President – Stephanie Kidd, DO – 2-year term, uncontested

The Peggy F. Murphy Community Grief Center: A Vital Resource for Grieving Adults - What Physicians Should Know

For the past decade, the Peggy F. Murphy Community Grief Center, a service of Stillwater Hospice in Fort Wayne, has stood as a vital community resource for adults experiencing grief. Designed with compassion, inclusivity, and accessibility in mind, the Center provides no-charge, specialized bereavement support to individuals navigating the often-overwhelming landscape of loss.

As a physician, your role in recognizing and addressing grief-related complications is critical. By understanding the services offered through the Peggy F. Murphy Community Grief Center and the risks of untreated grief, you can make informed referrals that support your patients' emotional and physical health during one of the most vulnerable times in their lives.

The Consequences of Untreated Complicated Grief

While many individuals gradually adapt to loss with time and support, others experience a prolonged and intense form of grief known as complicated grief or prolonged grief disorder (PGD). When unaddressed, PGD can significantly impair emotional, cognitive, and physical functioning.

Emotional Effects

Untreated complicated grief is associated with a range of serious psychological outcomes:

- **Clinical Depression**

Prolonged grief often overlaps with or leads to major depressive disorder, particularly when the mourner feels persistent guilt, worthlessness, or despair. *Source:* Shear, M. K., Simon, N., Wall, M., et al. (2011). Complicated grief and related bereavement issues for DSM-5. *Depression and Anxiety*, 28(2), 103–117. doi:10.1002/da.20780

- **Anxiety and PTSD Symptoms**

Complicated grief may present with generalized anxiety and trauma-like symptoms, especially after unexpected or traumatic loss. *Source:* American Psychiatric Association. (2022). *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision (DSM-5-TR)*.

- **Substance Abuse**

Grief-affected individuals may self-medicate using alcohol or drugs to suppress painful emotions.

Source: National Institute on Drug Abuse. (2020). Grief and substance use: Clinical challenges. Retrieved from nida.nih.gov

- **Suicidal Ideation**

Persistent yearning for the deceased and lack of future-oriented thinking are significant predictors of suicidal thoughts. *Source:* Szuhany, K. L., Malgaroli, M., & Simon, N. M. (2021). Prolonged grief disorder: Course, diagnosis, and treatment. *Harvard Review of Psychiatry*, 29(6), 416–426. doi:10.1097/HRP.0000000000000305

continued on page 16

Physical Health Effects

The toll of prolonged grief can manifest in several health-compromising ways:

- **Weakened Immune System**

Bereaved individuals exhibit reduced natural killer cell activity and other immune function deficits.

Source: Irwin, M., Daniels, M., Bloom, E. T., et al. (1987). Impaired natural killer cell activity during bereavement. *Brain, Behavior, and Immunity*, 1(1), 98–104.

- **Cardiovascular Risk**

Grief has been linked to increased blood pressure, arrhythmias, and higher risk of myocardial infarction, particularly in the first 30 days post-loss. *Source:* Mostofsky, E., Maclure, M., Sherwood, J. B., & Mittleman, M. A. (2012). Risk of acute myocardial infarction after the death of a significant person in one's life: The case-crossover study. *Circulation*, 125(3), 491–496.

- **Sleep Disorders**

Complicated grief frequently disrupts normal sleep cycles, contributing to insomnia and reduced REM sleep.

Source: Germain, A., Shear, M. K., Hall, M., et al. (2006). Sleep disturbances in complicated grief: A case-control study. *Journal of Traumatic Stress*, 19(2), 311–318.

- **Appetite and Weight Changes**

Grieving individuals often experience major shifts in appetite, which can contribute to malnutrition or metabolic disorders. *Source:* American Psychological Association. (2021). Understanding grief: Physical symptoms. Retrieved from apa.org

- **Exacerbation of Chronic Illness**

Stress from unresolved grief has been shown to negatively impact the management of chronic conditions like diabetes, hypertension, and arthritis. *Source:* Buckley, T., Bartrop, R., McKinley, S., et al. (2009). Prospective study of early bereavement on psychological and physiological functioning in cardiovascular patients. *Journal of Behavioral Medicine*, 32(6), 557–564.

As a primary care provider, you are often the first to observe these warning signs in your patients. Understanding when grief crosses the threshold from natural mourning into pathological grief can prompt timely referrals that may prevent long-term complications.

Comprehensive Grief Support Services at the Center

The Peggy F. Murphy Community Grief Center offers a robust menu of services tailored to the unique and often complex needs of grieving adults:

- **Individual Counseling:** Licensed therapists provide one-on-one grief counseling. These sessions use a companioning model where we walk alongside the grieving person as they travel the path of grief. Our counseling sessions are trauma-informed and tailored to the individual's experience of loss.
- **Support Groups:** Facilitated peer groups offer shared healing spaces for those experiencing similar types of loss—such as spouse/partner loss, child loss, suicide loss, even a group for those grieving pet loss.
- **Educational Workshops:** Sessions focus on topics like the stages of grief, coping mechanisms, family dynamics after loss, and anticipatory grief. We offer these workshops to other nonprofit agencies to ensure all who are in need know of our services.

- **Memorial and Remembrance Events:** Structured opportunities for ritual, reflection, and honoring loved ones foster a sense of closure and community.
- **Resource Referrals:** For grief experiences beyond the scope of the Center—such as legal aid, housing assistance, or more intensive psychiatric care—staff provide compassionate and appropriate referrals.

These services are available at no cost to the grieving person, and clients do not need to have previously used Stillwater Hospice services to be eligible.

Innovative Healing Approaches

Recognizing the diverse ways individuals process grief, the Grief Center also offers unique complementary healing modalities that blend body, mind, and spirit:

- **Grief Hikes:** In partnership with ACRES Land Trust, these guided walks through natural settings promote gentle movement, reflection, and conversation.
- **Sound Bath Sessions:** Using frequencies and resonant sound, these sessions aim to calm the nervous system and facilitate emotional release.
- **Soma Dance:** This movement-based practice allows participants to express grief physically in a safe, structured, and rhythmic environment.

These approaches can be particularly helpful for patients who struggle with verbal expression or who benefit from experiential and somatic healing strategies.

An Inclusive and Accessible Approach

A hallmark of the Peggy F. Murphy Community Grief Center is its commitment to inclusivity. Services are available to any adult grieving a loss, regardless of income, background, race, religion, or prior relationship with Stillwater Hospice. The Grief Center is also LGBTQ+ affirming, trauma-informed, and culturally sensitive, ensuring a welcoming environment for all.

How Physicians Can Help

As a trusted provider, you are in a key position to identify patients at risk for complicated grief. Indicators to watch for include:

- Intense sorrow lasting beyond 6–12 months
- Avoidance of reminders of the loss
- Feelings of purposelessness or identity confusion
- Self-neglect or loss of interest in daily activities

When these symptoms arise, a referral to the Peggy F. Murphy Community Grief Center can be a life-changing—and in some cases, life-saving—intervention.

Integrating grief support into your practice might include:

- Including grief assessments in annual check-ups
- Asking about recent losses during intake
- Providing Grief Center brochures or referral cards
- Following up after the death of a patient's loved one

continued on page 18

Conclusion

Grief is a universal human experience, but its impact can be deeply personal and, at times, debilitating. The Peggy F. Murphy Community Grief Center exists to offer meaningful support to grieving adults at no cost, helping them find resilience and community in the aftermath of loss.

By recognizing the physical and emotional risks of untreated complicated grief and connecting your patients to appropriate support, you enhance your role not only as a clinician, but as a compassionate guide during one of life's most profound transitions.

Contact Information:

- Phone: (260) 435-3261
- Email: GriefCenter@stillwater-hospice.org
- Address: 5920 Homestead Road,
Fort Wayne, IN 46814
- Website: stillwater-hospice.org/grief-support



Choose Stillwater HOSPICE


Stillwater Hospice is a nonprofit, local organization dedicated to serving you and your patients through hospice and grief support services.

Learning more about how you or your patients could benefit from our compassionate services is just a phone call away.


stillwater-hospice.org • (800) 288-4111

SERVING PATIENTS IN 12 NORTHEAST INDIANA COUNTIES.





Turnstone




CREATING POSSIBILITIES

TURNSTONE'S SERVICES AND ITS TEAM OF EXCEPTIONAL PROFESSIONALS WORK INTENTIONALLY AND PASSIONATELY TO MEET THE NEEDS OF YOUR PATIENTS WITH DISABILITIES OF ALL AGES. TURNSTONE CLIENTS HAVE ACCESS TO THE RESOURCES THEY NEED TO LIVE THEIR MOST ACTIVE AND HEALTHIEST LIFE.

Turnstone's breadth of services include:

- SPEECH THERAPY
- OCCUPATIONAL THERAPY
- PHYSICAL THERAPY
- PHYSICAL AQUATIC THERAPY
- EARLY LEARNING CHILD CARE
- PARALYMPIC PIPELINE SUPPORT
- ADAPTIVE SPORTS & RECREATION
- HEALTH & WELLNESS
- ELITE FITNESS TRAINING
- ADULT DAY SERVICES
- MEMORY CARE
- CASE MANAGEMENT



**TURNSTONE.ORG
260.483.2100**

Neighborhood Health Ribbon Cutting



July 7, 2025 we opened our doors to the community to celebrate our official ribbon cutting and the open house in our Community Room at our new Oxford location.





AVAILABLE FOR LEASE

MEDICAL OFFICE IN NORTHEAST INDIANA

A modern approach through team-work, collaboration, and deep roots to the medical community sets Xplor apart from the competition. Allow knowledgeable team to navigate the market while you get back to doing what you do best, improving lives and creating a healthier tomorrow.

NEAR W HAMILTON RD!



BRIDGEWATER MEDICAL OFFICE

14417 ILLINOIS RD, FORT WAYNE 46814
3,185 SF | \$20.00 PSF (FULL SERVICE)



IN/OUT TAKE RECEPTION

LARGE WAITING ROOM WITH SEPARATED
IN-TAKE, OUT-TAKE WINDOWS



LARGE PRIVATE OFFICE

OPEN PRIVATE OFFICE TO ACCOMMODATE
MULTIPLE PHYSICIANS



5 EXAM ROOMS

SPACIOUS, HIGH CEILING, AND LARGE WIN-
DOWS FOR ABUNDANT LIGHT



ENTRANCE TO OFFICE



LARGE LOBBY



BREAKROOM



LAB & STORAGE



LARGE PARKING LOT



ONSITE FITNESS CENTER!

LIFEPLEX WELLNESS CENTER

2855 MILLER DRIVE, PLYMOUTH, IN 46563
3,3904 - 7,968 SF | \$20.00 PSF (MOD. GROSS)



TRIAGE BAYS



IN-TAKE LOBBY



NURSE STATION/STORAGE



SPECIALTY ROOMS



LARGE PATIENT ROOMS



PT TREATMENT

XPLOR COMMERCIAL REAL ESTATE
127 W BERRY ST, STE 700 | FORT WAYNE, IN 46802

XPLORCOMMERCIAL.COM

SCAN
CODE
FOR MORE
DETAILS!





BROKERAGE. PROPERTY MANAGEMENT. MAINTENANCE. DEVELOPMENT. INVESTMENT. CONSULTING.

SPECIALTIES REQUIRE FOCUS

We served our fellowship in Commercial Real Estate.

We have dedicated 35 years to perfecting our trade so we can help you focus on yours. At Sperry Van Ness Parke Group, we understand that it's hard enough to run a successful medical practice today without having to worry about facility management or maintenance. Let us do what we do best, so you can

focus on your specialty—taking care of your patients. As a full service real estate company, not only can we help you take care of your existing property, but we can also help you relocate when you need more space. To find out more about what Sperry Van Ness Parke Group can do for you, call us or visit us online.



SVNIC is a franchisor, and all SVN offices are independently owned and operated.

Ribbon Walk raises \$120,001 to help local people with cancer



*Dianne May,
President & CEO*

Cancer Services of Northeast Indiana held their annual Ribbon Walk on May 3, 2025. Total, the fundraising walk raised \$120,001 to help local people with cancer. All donations stay local and directly support families throughout Northeast Indiana.

That morning, more than 500 community members attended the event to honor cancer survivors in their life or remember loved ones who passed away from cancer.

Funds raised will help thousands of families who will be impacted by cancer this year. Cancer Services offers a variety of practical, emotional, and financial supports, many available at no cost regardless of income or insurance status.

“This year, Ribbon Walk raised the most amount of money it ever has, and we have every donor and walker who joined us to thank for that

success,” President & CEO Dianne May commented. “Thank you also to the dozens of volunteers who helped us get ready and the generous local businesses who sponsored the event. Together the community is ensuring that people with cancer don’t need to face it alone.”



Special thanks to the following Ribbon Walk sponsors:

Official Event Sponsors: Fort Wayne Medical Oncology and Hematology, Fred Toenges Footwear & Pedorthics, LC Nature Park (sponsorship provided by an LC Nature Park board member), Natera, Parco, Inc., and Steel Dynamics

Advocates: Fire Police City County Federal Credit Union, Fort Wayne Newspapers, Lear Corporation, and Parrish Leasing

Hosts: Ambassador Enterprises, Brotherhood Mutual, Buchanan Hauling & Rigging, Inc., Glo Magazine, The Hagerman Group, Lakeside Book Company, Lutheran Health Network, Radiation Oncology Associates, and Shambaugh & Sons LP

Partners: Bulldog Consulting Services, Erie Insurance, Hires Automotive Center, Hylant of Indiana, McMahon's Best One Tire and Auto, Partners 1st Federal Credit Union, PHP of Northern Indiana, Inc., Pizza Hut of Fort Wayne, State Bank, Trademark Title, and Wayne Pipe & Supply

Save the date for next year's Ribbon Walk on
May 2, 2026.



About Cancer Services of Northeast Indiana

Cancer Services' mission is to enhance the quality of life of those affected by cancer by providing meaningful resources, information, and compassionate assistance. Cancer Services of Northeast Indiana helps people who live in Allen, Adams, DeKalb, Huntington, Kosciusko, LaGrange, Noble, Steuben, Wabash, Wells, and Whitley counties.

Photos by Jeremy Garner, JBG Photography



Doctors know best
the emotional and
financial toll of cancer
on their patients.

Cancer Services of
Northeast Indiana can help.

- Healthcare supplies, nutritional drink, and durable medical equipment
- Advance care planning
- Exercise classes, support groups, and more
- Financial assistance
- Oncology massage
- Transportation to cancer treatments
- Low cost mental health counseling

*Encourage your patients
to contact Cancer Services.*



Warsaw Location Now Open:

Cancer Services West
2190 North Pointe Dr., Warsaw, IN 46582

(260) 484-9560

www.cancer-services.org

*We are proud to be an independent
nonprofit serving our local community.*

► Lutheran Hospital Among Nation's Top Performing Hospitals for Treatment of Heart Attack Patients

American College of Cardiology NCDR Chest Pain - MI Registry Platinum Performance Achievement Award recognizes sustained, high level performance in quality of care

Lutheran Hospital has received the American College of Cardiology's NCDR Chest Pain – MI Registry Platinum Performance Achievement Award for 2025. Lutheran Hospital is one of only 323 hospitals nationwide to receive the honor.

The award recognizes Lutheran Hospital's commitment and success in implementing a higher standard of care for heart attack patients and signifies that Lutheran Hospital has reached an aggressive goal of treating these patients to standard levels of care as outlined by the American College of Cardiology/ American Heart Association clinical guidelines and recommendations. "This distinction underscores our unwavering commitment to delivering high-quality, evidence-based cardiovascular care. The recognition reflects not only clinical excellence, but also the coordination, dedication, and diligence of our entire multidisciplinary team—including emergency medicine, cardiology, nursing, and quality improvement staff—who have worked tirelessly to optimize protocols, reduce treatment times, and improve outcomes for patients experiencing acute cardiac events," said Vijay Chilakamarri, MD, FACC of Lutheran Health Physicians.

"Achieving this level of performance required rigorous data tracking, ongoing performance improvement, and above all, a shared passion for saving lives. We thank every team member for their hard work and collaboration in making this achievement possible," added Dr. Chilakamarri.

To receive the Chest Pain – MI Registry Platinum Performance Achievement Award, Lutheran Hospital has demonstrated sustained achievement in the Chest Pain – MI Registry for two consecutive years (2023 and 2024) and performed at the highest level for specific performance measures. Full participation in the registry engages hospitals in a robust quality improvement process using data to drive improvements in adherence to guideline recommendations and overall quality of care provided to heart attack patients.



Innovative Cardiac Care

Our dedicated specialists deliver innovative, life-changing solutions for countless cardiac conditions:

- Cardiac ablation using pulmonary vein isolation (PVI)
- Cardiac resynchronization
- Complex percutaneous coronary intervention with mechanical support
- ECMO
- GDMT for heart failure
- Left atrial appendage (LAA) occlusion
- Ventricular assist device (LVAD)
- Wireless sensor for heart failure monitoring



Lutheran Hospital is owned in part by physicians.

"It is an honor to award Lutheran Hospital with the Platinum Performance Award for their valuable national leadership and dedication to meeting comprehensive performance measures in patient care," said Michael C. Kontos, MD, FACC, chair of the NCDR Chest Pain – MI Registry Steering Subcommittee, and cardiologist at Virginia Commonwealth University Medical Center. "The receipt of this award indicates that Lutheran Hospital remains committed to providing top quality, guideline-driven care for heart attack patients. Their success ensures patients are receiving the highest quality cardiovascular care."

The Centers for Disease Control estimates that over 800,000 Americans suffer a heart attack each year. A heart attack occurs when a blood clot in a coronary artery partially or completely blocks blood flow to the heart muscle. Treatment guidelines include administering aspirin upon arrival and discharge, timely restoration of blood flow to the blocked artery, smoking cessation counseling and cardiac rehabilitation, among others.

► **Lutheran Health Network Celebrates New Medical Facility in Fort Wayne**



Lutheran Health Network held a ribbon cutting at 1215 Healthcare Place in Fort Wayne to celebrate its newest healthcare facility serving the community in and around southwest Allen County.

The 15,700-square-foot facility will house medical services, including seven family and internal medicine physician offices with both male and female providers and lab services for Lutheran Health Physician patients, as well as imaging and x-rays. The clinic will be arranged into two pods of 12 examination rooms, and the lobby seating is large enough to hold 70 patients or family members.

"It is with a lot of excitement that I announce the grand opening of our newest facility at 1215 Healthcare Place in Fort Wayne," said Nicole Rexroth, chief executive officer of Lutheran Health Physicians. "This expansion represents a significant milestone for Lutheran Health Physicians and a testament to our unwavering commitment to providing accessible, high-quality healthcare to the communities we serve. We've designed this space with our patients' comfort and care at the forefront, creating an environment that promotes healing and well-being."

Providers at this location will offer comprehensive and continuous care for patients of all ages, from newborns to seniors. The facility will have an on-site imaging suite open to any outside patient who wishes to use a LHN facility, lab draws (for LHP patients), and testing offering a wide range of services to patients under one roof.

"With seven primary care providers at this location, we feel we will be able to focus on the care of a wide range of patients in this growing area. 1 in 3 people do not have a primary care provider, so building a lasting relationship with someone who understands you or your family's unique health needs is a vital part of supporting a healthy lifestyle in years to come," said Dr. Patrick Holly, Lutheran Health Physicians' medical director.

While the building maintains a more traditional look, it was constructed to prioritize patient comfort and efficiency by MKM architecture and design. "We're happy to partner with Lutheran Health Network in the design of their new Illinois Road location. MKM believes that well-being is essential for communities to thrive, and Lutheran Health Network's continued investment to expand access to healthcare in Fort Wayne and provide more options for where to receive care enhances the community's overall well-being," said Andrew Mitchell, principal at MKM architecture and design. For more information on this project: <https://www.lutheranhealth.net/lutheran-health-network-illinois-road>

► **"Baby Boom" in June for Dupont Hospital, Record-breaking Number of Deliveries**

Dupont Hospital is proud to announce a significant milestone in its commitment to supporting growing families, having had a record-breaking 281 deliveries in June. That achievement marks the highest number of births in the hospital's 24-year history and tops the previous all-time high of 272 deliveries that occurred in August of 2024.



This peak in deliveries underscores Dupont Hospital's role as a leading birthing center in Northeast Indiana and Fort Wayne, providing comprehensive services for expectant mothers and their newborns.

"This is a happy time for us, we love being a part of the community's birth story. This is a reflection of trust and confidence the community has placed in us and our team's exceptional maternal and newborn care," said Brent Parsons, Chief Executive Officer of Dupont Hospital. "Our dedicated team of obstetricians, nurses, neonatologists and support staff have worked tirelessly to ensure every delivery was a positive and memorable experience. "Each birth represents a new family beginning their journey and we are honored to be a part of such a special moment in their lives. We hope they continue to trust us with their care along the way. We are grateful for their support, which truly allows us to nurture the next generation," said Sarah Lawrence, MSN, RN, and Director of The Birthplace at Dupont Hospital.

Dupont Hospital's Maternity Care starts with a birth navigator program and offers popular childbirth classes. They host a specialized level III perinatal care for high-risk mothers and infants as well as advanced fetal monitoring systems and a 33-bed neonatal intensive care unit - just in case. Postpartum and breastfeeding support are also available to expectant mothers so they can relax knowing they'll be cared for every step of the way. More information on maternity care: <https://www.theduponthospital.com/maternity-care-services>

Dupont Hospital looks forward to continuing its legacy in maternal and newborn care, welcoming even more families in the years to come.



Blue Agilis is lowering the cost of care and improving quality by accelerating the adoption of evidence-based practices in healthcare. We have demonstrated a savings of \$11 PMPM in Total Cost of Care while simultaneously achieving:

- 42% Reduction in Patient Harm Events
- 17% Reduction of Unnecessary Readmissions
- 13% Reduction in Avoidable ED Visits
- 84% Increase in Discharge to Home Rate
- 19% Increase in Annual Planned Visits
- 33% Increase in Gap Closure

We leverage our evidence-based approach, localize workflows to scale and sustain solutions, and improve healthcare provider, care team and patient satisfaction - all leading to lower cost of care.

From the Midwest to the US

Blue Agilis grew out of the successful Great Lakes Practice Transformation Network where we initially honed our skills to engage over 15,000 providers in 2,200 practices serving 10+ million patients in the hard work of practice transformation. We identified the key drivers and best practice workflows that led to successful outcomes across a wide variety of settings. The number of providers, practices, and other care settings continues to grow quickly.

Better Health Outcomes for All - Now

We have a passion for improving the healthcare system by accelerating the adoption of evidence-based practices, lowering the administrative burden, and streamlining the patient and provider experience. We focus on the “nitty gritty” of improvement: Designing and implementing localized Smarter Workflows that people will actually perform consistently. Our suite of tools and dedicated team enable this hard work to be optimized based on each of our client’s distinct needs.

Example Use Cases

- Evaluate workflows and behaviors of practices to predict their performance in value-based care contracts. The easy qualitative assessment allows us to prioritize practices with the most to gain and tailor recommendations to generate the fastest, largest improvement.
- Streamline workflows to increase capacity of providers to see more appropriate patients, improve access, and reduce out-of-network referrals. Identifying and eliminating unnecessary work increases satisfaction and enables providers to focus on the most important things.
- Build evidence-based practice into the workflows in a customized way that can be easily adopted, increasing adherence and producing better outcomes. We take the time to connect the new methods into workflows in an integrated way instead of simply adding one more thing to the workload.

▶ Parkview Health welcomes Jim McCann as Director of Employer Solutions Business Development



Parkview Health is pleased to formally announce Jim McCann as the new director of Employer Solutions Business Development. Bringing more than 30 years of experience in the medical insurance industry, McCann offers a deep understanding of group health, dental, vision and life insurance products, along with a proven ability to build strong partnerships and drive strategic growth.

Throughout his extensive career, Jim has held sales and leadership roles with major health insurance providers, including Blue Cross Blue Shield of Ohio, Anthem BC, Humana, United Healthcare, and Physicians Health Plan of Northern Indiana, Inc. (PHP). Most recently, he served as director of sales at PHP, where he led top-performing teams, launched targeted broker training initiatives, and played a key role in growing membership and improving retention among large employer groups.

Since joining Parkview Employer Solutions earlier this spring, McCann and his team have focused on cultivating strategic relationships with insurance brokers, consultants, and third-party administrators (TPAs) across Indiana and Ohio. He will continue to strengthen Parkview's connections with employer groups – enhancing partnerships and driving program innovation.

"Jim's ability to bridge the gap between employer needs and meaningful health outcomes makes him a valuable addition to our team," said Dr. Jason Row, chief value transformation officer, Parkview Health. "His deep understanding of the insurance landscape, combined with our clinical insight, allows us to deliver more effective care strategies for our employer partners."

"As Employer Solutions continues to grow, Jim's leadership will be key to strengthening our relationships with brokers and employer groups, and expanding access to innovative, value-driven care options across Parkview's service area," added David Jeans, senior vice president of payer, employer, and health plan strategies.

McCann is known for his enthusiasm in tackling the complexities of health care and insurance. "Call me crazy, but I enjoy the challenge," he said. "I love strategizing with brokers and clients to design benefits that truly fit their needs, finding the right service, with the right provider, and at the right price. That balance is the big challenge. However, the reward is delivering better outcomes for healthier employees."

Outside of work, Jim maintains a wide range of interests and hobbies. He's an avid pickleball player, a classic and muscle car enthusiast, and enjoys DIY home remodeling projects. He also has a passion for the arts, particularly theater and ballroom dance. These varied interests not only reflect Jim's energy and creativity but also serve as common ground to connect with clients on a personal level – something he believes is just as important as the business strategy.

▶ Parkview Health named 'Best and Brightest in Wellness' for third consecutive year

For the third consecutive year and the seventh time since 2017, Parkview Health has been named among the Best and Brightest in Wellness by the National Association for Business Resources (NABR).

Parkview is one of only 30 companies nationally to be recognized by the NABR in 2025.

The Best and Brightest in Wellness award is given to companies that excel in making their workplaces healthier and more productive. Winners are evaluated based on various categories, including wellness program culture, environment, employee input, financial wellbeing, leadership commitment, physical and mental health.

The winning companies have excelled in implementing innovative health programs, offering comprehensive benefits, and fostering a culture that prioritizes the wellbeing of their employees. Their efforts have significantly improved the health and happiness of their workforce, setting a benchmark for other organizations to follow.

"Parkview's dedication to improving the health and wellbeing of our communities applies to both our patients and our co-workers," said Dena Jacquay, chief administrative officer, Parkview Health. "Parkview takes a holistic approach to wellbeing, supporting both the physical and mental health of our co-workers, encouraging belonging and building bonds with their colleagues. We continually listen to our co-workers and work to create new opportunities that respond directly to their needs."

Parkview's MyWell-Being department provides a variety of services, including health and lifestyle programs to help people eat better or get more active with physical activity challenges and intramural sports opportunities. Since the pandemic, Parkview also introduced new programs including a volunteer time off program that can also be used for mental health days; renewal workshops that provide tips to re-energize individuals in their personal and professional lives; and the Parkview Pups program, which brings certified therapy dogs into facilities to visit co-workers and boost their spirits.

"Keeping our co-workers energized and engaged allows them to bring their absolute best to their jobs every day," said Dr. Ray Dusman, president, physician and clinical enterprise, Parkview Health. "That energy feeds directly into the quality care they're able to deliver to their patients. We're proud to continue our Best and Brightest in Wellness streak as our well-being team members continue to find new ways to serve our co-workers."

To browse available opportunities at Parkview, visit <https://www.parkview.com/careers>.

► Parkview Health celebrates first Internal Medicine residency graduates, prepares to welcome new class at white coat ceremony

Parkview Health recently celebrated a significant milestone in its Graduate Medical Education (GME) program, hosting the graduation ceremony for its first class of internal medicine resident physicians and latest class of transitional year residents. The event took place Friday, June 6, at Parkview Mirro Center for Research and Innovation, where faculty, family and friends gathered to honor the graduates' accomplishments and dedication to exceptional care.

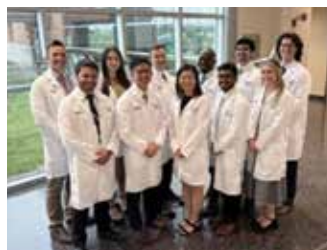
"As our first internal medicine cohort crosses the stage, it marks the fulfillment of years of hard work — not just by our residents, but by the entire team that helped bring our vision for GME to life," said Dr. Susan Steffy, chief medical officer and designated institutional official for Parkview Health's GME program.

Internal Medicine Graduates

- Michael Campbell, MD
- Donna Dodds, MD
- Brandon Gordon, MD
- Priya Hotwani, MD
- Haider Khalil, MD
- Aqsa Khan, MD
- Nang Lin, MD
- Samina Martin, MD
- Rodolfo San Juan, MD
- Payal Shukla, MD
- Wasay Siddiqui, DO
- Supreet Singh, DO
- Sivaprakash Sivaji, DO
- Katie Wyatt, DO
- Jose Zelaya, MD

Transitional Year Graduates

- Thomas Akurugo, MD
- Samantha Andryk, DO
- Christian Daake, MD
- Andrew Fox, MD
- Griffin Elzey, MD
- Kreigh Elzey, MD
- Mahmood Kedo, MD
- Nicholas Nguyen, MD
- John Reed, MD
- Abdurrahman Roussi, MD
- Kevin Roy, DO
- Chaenny Sim, MD



"As they move on to the next phase of their careers, these physicians will leave a lasting imprint on our community," said Dr. Ray Dusman, president of physician and clinical enterprise at Parkview Health. "We're proud to have been part of their journey."

Looking Ahead: Welcoming the Next Class

On Friday, June 27, Parkview will host a white coat ceremony to welcome its newest class of resident physicians. The event symbolizes the beginning of each physician's clinical training and

their commitment to ethical and compassionate care.

Parkview GME now includes seven program tracks, including family medicine, psychiatry, general surgery, internal medicine; obstetrics and gynecology; physical medicine and rehabilitation; and transitional year. All programs are accredited by the Accreditation Council for Graduate Medical Education (ACGME).

This ceremony will mark the fourth class of individuals to make the transition from student to physician through the program. Parkview GME is growing again, with the addition of two new residency programs, family medicine and psychiatry, who will introduce their first class of residents in 2026.

"From day one, we emphasize teamwork, learning and service to others," said Dr. Scott Yen, program director for the internal medicine and transitional year residency programs. "The white coat ceremony is a powerful reminder of what it means to be a healer, and we're excited to pass the torch to our next generation of residents."

By the end of the ceremony, Parkview GME will have inducted a total of 122 resident physicians since launching in 2022.

2025 Incoming Resident Physicians

This year's resident physicians and their programs are as follows:

Obstetrics and Gynecology

- Emily Ferguson, DO – Lincoln Memorial University, DeBusk College of Osteopathic Medicine
- Maria Mace, DO – West Virginia School of Osteopathic Medicine
- Carlene Murphy, DO – Pacific Northwest University of Health Sciences, College of Osteopathic Medicine
- Giannina Rokvic, MD – University of Kentucky College of Medicine
- Camden Smith, DO – Nova Southeastern College of Osteopathic Medicine

General Surgery

- Austyn Colter, MD – Indiana University School of Medicine
- Sanjana Eranki, MD – Rutgers Robert Wood Johnson Medical School
- Jessie Honey, MD – George Washington University School of Medicine and Health Sciences
- Fernando Juarez Casso, MD – Universidad Panamericana Escuela de Medicina Internal Medicine
- Sanket Chaudhari, MD – Saint James School of Medicine
- Syed Muhammad Ibne Ali Jaffari, MD – Shalamar Medical & Dental College

- Shayan Khurram, DO – Marian University College of Osteopathic Medicine
- Niloy Lahiri, MD – Indiana University School of Medicine
- Steven Liu, MD – Eastern Virginia Medical School
- Priyanka Mohnani, MD – Government Medical College Surat
- Saria Mokhtar, MD – Red Sea University Faculty of Medicine and Health Sciences
- Muneebah Munir, MD – Dow International Medical College
- Nicholas Nguyen, MD – Indiana University School of Medicine
- Nathan Schmitt, DO – Liberty University College of Osteopathic Medicine
- Eithar Shabbo, MD – Ahfad University for Women School of Medicine
- Mohammad Umer, MD – King Edward Medical University
- Arpitha Venkatareddy, MD – S.S. Institute of Medical Sciences & Research Centre, Davangere
- Nasser Zbeeb, MD – St. George's University School of Medicine

Transitional Year

- Praneet Dara, DO – Des Moines University, College of Osteopathic Medicine
- Apurva Jolepalem, MD – Ohio State University College of Medicine
- Isa Malik, MD – University of Toledo College of Medicine
- Miles Menuck, DO – Michigan State University College of Osteopathic Medicine
- Tija Passley, DO – NYIT College of Osteopathic Medicine
- Andrea Patete, DO – Lincoln Memorial University, DeBusk College of Osteopathic Medicine
- Chase Permann, DO – Marian University College of Osteopathic Medicine
- Alec Smith, MD – Indiana University School of Medicine
- Alexa Stynchula, DO – Marian University College of Osteopathic Medicine
- David Wang, DO – Marian University College of Osteopathic Medicine
- Anthony Wilson, DO – Lincoln Memorial University, DeBusk College of Osteopathic Medicine
- Kaitlin Ziadeh, MD – Wayne State University School of Medicine

According to the Indiana Graduate Medical Education Board, continued investment in the state's physician pipeline is critical to meeting increasing demand, especially in rural and underserved areas, and for improving health outcomes and quality of life for all Hoosiers. To learn more about the Parkview Health Graduate Medical Education program, visit parkview.com/GME.

▶ Parkview Health chief legal and compliance officer recognized with Distinguished Barrister award

Parkview Health chief legal and compliance officer David Storey was recently recognized with the Distinguished Barrister award from Indiana Lawyer.

The Indiana Lawyer, an Indianapolis-based state-wide legal news outlet, hosts the annual Leadership in Law program to recognize experienced and up-and-coming Hoosier attorneys. The Distinguished Barrister award honors lawyers with at least 20 years of practice who have not only made significant contributions in their careers but also help to lead younger generations into the law. This year, 17 Indiana attorneys were named Distinguished Barristers.

"As Parkview continues to navigate the increasingly complex regulations regarding healthcare and adapts to ongoing changes in the law – including those likely to be disruptive or damaging to hospitals and healthcare providers – Parkview is blessed to be led by an experienced, talented and dedicated attorney like David Storey," said Rick Henvey, CEO, Parkview Health. "David's dedication and expertise over the last 15 years have helped Parkview grow into the system that it is today."

Storey joined Parkview in 2010 and has assisted Parkview through more than a decade of growth. Storey started his career at Parkview working on the development of Parkview Regional Medical Center (PRMC) and has since led multiple community hospital affiliation agreements, to the expansion of Parkview Physicians Group (PPG) and the providers who have been welcomed into the system.

Storey and his teams play a vital role in advancing Parkview's quality and safety initiatives. As the leader of compliance and risk management, he ensures legal requirements are met while proactively identifying and mitigating risks to improve safety across the system.

"Parkview's compliance teams are great partners with our quality and safety leaders," said Dr. Jeffrey Boord, chief quality and safety officer, Parkview Health. "By working with David and his legal and compliance teams, Parkview is able to institute best practices that create safer workplaces for our patients as well as our co-workers."

Storey leads a legal team of attorneys, multiple paralegals and support staff, and hosts summer internships for students interested in practicing law as a career.

Outside of Parkview, Storey keeps active in the community with past and present board positions for numerous organizations, including the Allen County Bar Association, Northeast Indiana Area Health Education Center; Family and Children's Services, Fort Wayne Civic Theatre and Arts United.





Whether you're joining us for a short-term stay to recover from surgery or an illness, or for long-term skilled nursing, the Rehabilitation Center at The Towne House understands your drive to regain your strength and independence.

As northeast Indiana's only retirement community to earn national accreditation in person-centered care, our dedicated physical, occupational and speech therapists focus on your abilities, not disabilities. They are committed to helping you overcome obstacles and accelerate healing, while supporting your emotional, social and spiritual well-being... sort of like your personal yogi. ***Call today to arrange a tour.***

Get back to your independent self in no time.



The **TOWNEHOUSE**
Retirement Community
A BHI SENIOR LIVING COMMUNITY

2209 St. Joe Center Road • Fort Wayne, IN 46825 • 260-483-3116 • www.TowneHouse.org





Accepting New Patients

Convenient location

**Appointments within
one week**

**Accepting all major
insurances**

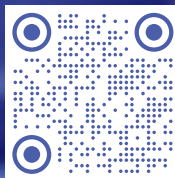
Fast turn around time

**Excellent provider
communication**



7920 W Jefferson Blvd, Suite 200
Fort Wayne, IN 46804

DrLinke.com
260-702-9515



An **expert** approach to fighting gynecologic cancer.



Christina
Duncan-Lothamer,
DO



Bogna
Brzezinska, MD



Anya
Menzies, MD

Meet our team of fellowship-trained specialists.

Providing greater expertise for your fight against gynecologic cancer. That's what we do at the Parkview Packnett Family Cancer Institute. Here, our Gynecologic Cancer Care Team is fellowship-trained and focused exclusively on battling gynecologic cancers including cervical, ovarian, uterine and more — utilizing the latest cancer-fighting treatments, state-of-the-art diagnostics and a collaborative approach to care that puts you at the center. It's expertise from a team of women dedicated to caring for women like you. Right here at Parkview.



PARKVIEW

PACKNETT FAMILY
CANCER INSTITUTE

parkview.com/cancer

Fort Wayne Medical Society
709 Clay Street, Suite 101
Fort Wayne, IN 46802