Lights, Camera, Action!

Recently, SJMH was honored as one of eleven hospitals among 1500 across the U.S., who participated in the “HEN 2.0” program. SJMH was picked to highlight our success rate with pressure ulcer reduction. The American Hospital Association/Health Research and Educational Trust (AHA/HRET) sent a film crew to SJMH on Thurs., August 4, to film staff highlighting the positive patient outcomes of the project. Pictured at left is CEO Avah Stalnaker, being “miked-up” and at right, SJMH board member and ENT John Wyllie, M.D. talking to AHA representative, who was conducting the interviews.
From Farm to Fork Buffet

The Farm to Fork Buffet on Sat., July 30, was a great success and benefit to The Depot Farmers Market, one of the outreach activities for SJMH. A1 left, pictured front row are Abby and Jeb Tonkin, Julia Spelsberg, Kayla Facemire; standing Julie Bush, Brenda Tonkin, Eric Spelsberg, and Johnathan Spelsberg. A1 right are Janet Lockard and Dr. Peter Edgerton.

This is an official CDC HEALTH ADVISORY

Distributed via the CDC Health Alert Network
August 1, 2016, 10:00 ET (08:00 PM ET)
CEN-16-02835

CDC Guidance for Travel and Testing of Pregnant Women and Women of Reproductive Age for Zika Virus Infection Related to the Investigation for Local Mosquito-borne Zika Virus Transmission in Miami-Dade and Broward Counties, Florida

Summary
The Florida Department of Health (FL DOH) has identified an area with local mosquito-borne Zika virus transmission (active Zika virus transmission) in Miami (http://www.cdc.gov/zhik/infographic/Florida-update.html). Based on the earliest time of symptom onset and a maximal two-week incubation period for Zika virus, this guidance applies to women of reproductive age and their partners who live or in-transit to this area effective June 16, 2016. This is an ongoing investigation, and CDC is rapidly learning more about the extent of active Zika virus transmission in the area identified by the FL DOH. With the recommendations below. CDC is applying existing guidance to the occurrence of Zika virus transmission in this area of Florida. As more information becomes available, we will update these recommendations.

Recommendations
1. Pregnant women should avoid non-essential travel to the area with active Zika virus transmission identified by the FL DOH.
2. Pregnant women and their partners living in or traveling to the area with active Zika virus transmission identified by the FL DOH should follow steps to prevent mosquito bites (http://www.cdc.gov/zhik/prevention/avoid-mosquito-bites.html).
3. Women and men who live in or who have traveled to the area with active Zika virus transmission identified by the FL DOH and who have a pregnant sex partner should consistently and correctly use condoms or other barriers to prevent infection during sex or not have sex for the duration of the pregnancy.
4. All pregnant women in the United States should be assessed for possible Zika virus exposure during each prenatal care visit. Women with ongoing risk of possible exposure include those who live in or frequently travel to the area with active Zika virus transmission identified by the FL DOH or had sex with a partner who lives in or travels to the area with active Zika virus transmission without using condoms or other barrier methods to prevent infection. Each evaluation should include an assessment of signs and symptoms of Zika virus disease. (acute onset of fever, rash, arthralgia, conjunctivitis), their travel history as well as their sexual partner’s potential exposure to Zika virus and history of any illness consistent with Zika virus disease to determine whether Zika virus testing is indicated.
5. Pregnant women with possible exposure to Zika virus and signs or symptoms consistent with Zika virus disease should be tested for Zika virus infection based on time of evaluation relative to symptom onset in accordance with CDC guidance (http://www.cdc.gov/zhik/lab/referrals/mosquito-borne-diseases.html).
6. Pregnant women with ongoing risk of possible Zika virus exposure and who do not report symptoms of Zika virus disease should be tested in the first and second trimester of pregnancy in accordance with CDC guidance (http://www.cdc.gov/mmwr/volumes/65/mm1602e1.htm).
7. Pregnant women with limited risk and who do not report symptoms should consult their healthcare provider to obtain testing for Zika virus infection based on the elapsed interval since their last possible exposure to infection with CDC guidance (http://www.cdc.gov/mmwr/volumes/65/mm1601e1.htm).
8. Women with Zika virus disease should wait at least eight weeks and men with Zika virus disease should wait at least six months after symptom onset to attempt conception.
9. Women and men with ongoing risk of possible Zika virus exposure who do not have signs or symptoms consistent with Zika virus disease and are considering pregnancy should consult their healthcare provider. Due to the ongoing risk of possible Zika virus exposure, healthcare providers should discuss the risks of Zika, emphasize ways to prevent Zika virus infection, and provide information about safe and effective contraceptive methods. As part of their pregnancy planning and counseling with their health care providers, some women and their partners living in the area with active Zika virus transmission identified by the FL DOH might decide to delay pregnancy.
10. Women and men with limited risk and who do not report signs or symptoms consistent with Zika virus disease should wait at least eight weeks after possible exposure to attempt conception.

Background
Zika is spread to people primarily through the bite of an infected Aedes species mosquito (Ae. aegypti and Ae. albopictus). Zika virus can also be sexually transmitted. Zika virus infection during pregnancy can cause microcephaly and severe fetal brain defects, and has been associated with other adverse pregnancy outcomes. Most persons infected with Zika virus will not have symptoms, infants with microcephaly and other birth defects have been born to women with Zika virus infection who do not report symptoms.

CDC’s testing recommendations for pregnant women with ongoing or limited risk for possible Zika virus exposure who report clinical illness consistent with Zika virus disease (asymptomatic pregnant women) are the same. Symptomatic pregnant women who have been evaluated less than two weeks after symptom onset should receive serum and urine Zika virus RT-PCR testing. Symptomatic pregnant women who have been evaluated two to 12 weeks after symptom onset should first receive a Zika virus immunoglobulin (IgG) antibody test; if the IgG antibody test result is positive or equivocal (indeterminate), serum and urine RT-PCR testing should be performed.

Testing recommendations for pregnant women with possible Zika virus exposure who do not report clinical illness consistent with Zika virus disease (asymptomatic pregnant women) differ based on the duration of possible exposure. For pregnant women with ongoing risk for possible exposure and who are evaluated less than two weeks after first possible exposure, RT-PCR testing should be performed. For asymptomatic pregnant women with limited risk for possible exposure who are evaluated two to 12 weeks after first possible exposure and who test negative for Zika virus IgG antibody test, a Zika virus IgM antibody test should be performed two to 12 weeks after the exposure. Asymptomatic pregnant women with limited risk for possible exposure who are evaluated less than two weeks after first possible exposure should first receive a Zika virus IgM antibody test; if the IgM antibody test result is positive or equivocal, serum and urine RT-PCR testing should be performed. Asymptomatic pregnant women with ongoing risk for possible exposure to Zika virus should receive Zika virus IgM antibody testing as part of routine obstetrical care during the first and second trimesters, immediate RT-PCR testing should be performed when IgM antibody test results are positive or equivocal.

Further information on the interpretation of testing results and clinical management of pregnant women with laboratory evidence of possible Zika virus infection are available below.

For More Information
- Interim Guidance for Health Care Providers Caring for Pregnant Women
  MMWR: http://www.cdc.gov/mmwr/Volume65/Wk/mm6531e1.htm
- Interim Guidance for Prevention of Sexual Transmission of Zika Virus
  MMWR: http://www.cdc.gov/mmwr/Volume65/Wk/mm6532e1.htm
- Updated information on active transmission of Zika virus from the Florida Department of Health: http://www.floridahealth.gov/health-topics/zika.html

The Centers for Disease Control and Prevention (CDC) protects people’s health and safety by preventing and controlling diseases and injuries, enhances health decisions by providing credible information on critical health issues, and promotes healthy living through strong partnerships with local, national, and international organizations.

OTHER PICNIC PICTURES. The Editor of The General failed to put in a picture of one of our favorite people. Pictured above is Jane Eisenbeis, of Home Care with her grandson, Dakota Posey.
WEST VIRGINIA

MEDICAL EMPLOYEE APPRECIATION NIGHT

EVENT INCLUDES:
- SPECIAL PRICE FOR MEDICAL EMPLOYEES
- LIMITED PRE-GAME FIELD ACCESS PASSES
- SCOREBOARD RECOGNITION

EVENT PRICE:
- $55

ORDER DEADLINE:
- FRIDAY, AUGUST 26TH

FOR QUESTIONS: LEE HARRIS | 304.293.8641

Order Through Soc/Rec by Wed., Aug. 24 - $55 a ticket
Due to the continued rise in healthcare costs, the Medical Insurance Premiums are increasing for the New Plan Year beginning 9/1/2016. Please see the chart below showing the current rates through 8/31/16 and the new rates effective 9/1/16-8/31/17. SJMH paid $3,900,653 in claims for employees and family members from 4/1/16 - 3/31/16. Highmark BCBS is estimating a 16.5% increase in claims cost to $4,544,650 for the period of 4/1/16 - 3/31/17.

### NON-TOBACCO USER RATES

<table>
<thead>
<tr>
<th></th>
<th>NEW SEMI-MO PREMIUM</th>
<th>CURRENT SEMI-MO PREMIUM</th>
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<tbody>
<tr>
<td></td>
<td>FULL-TIME</td>
<td>PART-TIME</td>
</tr>
<tr>
<td>SINGLE</td>
<td>$57</td>
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</tr>
<tr>
<td>FAMILY</td>
<td>$150</td>
<td>$510</td>
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### TOBACCO USER RATES

<table>
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<th>NEW SEMI-MO PREMIUM</th>
<th>CURRENT SEMI-MO PREMIUM</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>FULL-TIME</td>
<td>PART-TIME</td>
</tr>
<tr>
<td>SINGLE</td>
<td>$80</td>
<td>$250</td>
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<tr>
<td>FAMILY</td>
<td>$195</td>
<td>$600</td>
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</table>

Medical premiums are only withheld the first & second pay periods of each month (24 pays), same as ALL.

**NO CHANGES TO DENTAL OR VISION** - premiums remain the same for the New plan year.

### DENTAL - both plans

<table>
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<tr>
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<th>MONTHLY</th>
<th>SEMI-MONTHLY</th>
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<tbody>
<tr>
<td>Single</td>
<td>25.20</td>
<td>12.60</td>
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<tr>
<td>Single+Spouse</td>
<td>49.38</td>
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<tr>
<td>Single + Child(ren)</td>
<td>58.54</td>
<td>29.27</td>
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<tr>
<td>Family</td>
<td>77.40</td>
<td>38.70</td>
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### VISION - Base Plan

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<th>MONTHLY</th>
<th>SEMI-MONTHLY</th>
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<tr>
<td>Single</td>
<td>6.78</td>
<td>3.39</td>
</tr>
<tr>
<td>Single+Spouse</td>
<td>10.78</td>
<td>5.39</td>
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<tr>
<td>Single + Child(ren)</td>
<td>11.00</td>
<td>5.50</td>
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<tr>
<td>Family</td>
<td>15.34</td>
<td>7.67</td>
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### VISION - Premier Plan

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<td>4.70</td>
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<tr>
<td>Single+Spouse</td>
<td>16.60</td>
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<tr>
<td>Single + Child(ren)</td>
<td>16.96</td>
<td>8.48</td>
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<tr>
<td>Family</td>
<td>23.44</td>
<td>11.72</td>
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The Staff Education position at SJMH has been filled by a Buckhannon resident.

Evelyn McCourt, RN, is a graduate of Davis and Elkins College and has thirty years of nursing experience mostly in the areas of Obstetrics, Education, and more recently Quality Improvement.

She and her husband, Sam, have two wonderful sons, Brad and Matthew. She noted, “I am blessed to be ‘MiMi’ to three precious grandchildren, Kian, Asher and Allison. I love the outdoors and Mountaineer football and basketball.”

She also said, “I enjoy working in a smaller hospital and appreciate the family feel and contributing to a team.”

Evelyn’s email address is emccourt@stonewallhospital.net
**We want to know what songs motivate you.**

**Eye of the Tiger**

**Fight Song**

**I Will Survive**

What makes you move and groove and work to be better?

Email your song titles and artists to Rachelle

rnicolson@stonewallhospital.net

Can’t wait to hear from you!

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** BENEFIT OPEN ENROLLMENT **

**Coming Soon!!** The ONE-time opportunity to make Benefit changes outside of a “Change in Status” will be available beginning Thursday August 11 at 12:01 am and ending Thursday August 25 at 11:59 pm.

This will be a **MANDATORY ENROLLMENT** for ALL Full-time and Part-time as well as PRN employees that have been offered Health Insurance. All other PRN employees will not even be in the system.

**Reason for the Mandatory Enrollment**, we have moved from the EBIX/ Benergy Enrollment software we have used the last 4 years to Paylocity’s Enrollment software called Enterprise Web Benefits. Human Resources has worked diligently to ensure all your benefits made the transfer without issues. The Beneficiaries you had in EBIX however, DID NOT transfer over.

Therefore, when going through your enrollment, PLEASE assign your beneficiaries. You took life insurance to provide loved ones financial assistance in the event of your death – **Please make sure they will properly receive it.**

Paylocity Web Pay and Web Benefits have one **Single Sign-on**. If you are currently viewing your pay stubs on-line please log-in the same way. In the upper left corner, click on the Gray “Web Pay” box. This will drop down a menu where you will select Enterprise Web Benefits.

You will see a menu on the left side and all your benefits listed on the right side.

![Menu Example](image)

An example of how Beneficiary options could be listed. If you have a beneficiary that is NOT a dependent you would need to add them to list of choices. Make your designations add up to 100%. The “Second (or Contingent) Beneficiaries” would only apply IF you and your Primary Beneficiaries die simultaneously OR they pre-deceased you & you failed to change your designation.

![Beneficiary Options](image)

<table>
<thead>
<tr>
<th>Relationship</th>
<th>Name</th>
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</thead>
<tbody>
<tr>
<td>(Employee)</td>
<td>My Estate</td>
</tr>
<tr>
<td>(Spouse)</td>
<td>Michael Hager</td>
</tr>
<tr>
<td>(Child)</td>
<td>All Living Children Equally</td>
</tr>
</tbody>
</table>

**Open Enrollment link should appear like:**

![Open Enrollment Link](image)

**Welcome to your enrollment!**

Enrollment Deadline: 8/25/2016

Start Your Enrollment

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**Pats On The Back Recognition:**

Amanda Workman

and

William Griffith

**WVU Game Planned**

Members of the Social/Recreation Committee are planning a trip to WVU for a game in October. The annual Medical Employee Appreciation Night will be Oct. 22, WVU versus TCU with a cost of $55 per person. Reservations should be made and paid by August 24.

**Volunteers Needed**

The Theresa Snaith Hospital Auxiliary is always looking for new volunteers to help with activities at SJMH. One of the most important jobs for the group is to man the Hospital Gift Shop. If there are people who would be interested in joining the Volunteers, please contact the SJMH Marketing Office at 269-8167.

**Golf Tournament**

The annual SJMH charity golf tournament is planned for Tues., Oct. 11, at Stonewall Resort. The tournament has been the funder for over $200,000 in scholarships to students pursuing degrees in healthcare.
PAYLOCITY WEB PAY PORTAL

COMPANY INFORMATION
  Café Menus
  Upcoming SJMH Events

NEWS
  Weekly Newsletters
  Other Info Flyers
  Recognize Co-Workers

HI, “YOUR NAME”
  Personal Profile–edit
  Demographic Changes
  Public Profile – add/edit

PAY
  Pay Stubs
  W-2
  Direct Deposit Accounts
  Tax Forms
  Check Calculator – What ifs

TIME OFF
  Accrual Balances

BENEFITS–Learn about them
  Benefit Plan Summaries
  Dependent Changes-edit
  Emergency Contact-edit
  Required Notices to YOU

APPLICATION
  Configure Self Svc Portal
  User Preferences
  Employee Training Docs
  Internal Applicants
  This will soon replace our internal transfer form

CAREER
  Skills – can add
  Education – can add
  Reviews

EMPLOYMENT
  Employment Status
  Dept / Position

NOVATIME PORTAL

VIEW TIMESHEET

ENTER MILEAGE EXPENSES
  Once approved by Supr. will drop to your timesheet for payment on next pay period.

SCHEDULE

ACCRUAL BALANCES

POINT BALANCE-(OCCURRENCES)

REQUEST TIME OFF

RECEIVE MESSAGES

SEND MESSAGES

VIEW YOUR PROFILE
  Make changes in Web Pay

CALENDAR HISTORY OF:
  TIME WORKED
  VACATION DAYS TAKEN
  SICK DAYS TAKEN
  HOLIDAYS TAKEN
  PERSONAL DAYS TAKEN
  ABSENCES

NOVATIME APP

CLOCK IN/OUT
  At any SJMH Facility

VIEW TIMESHEET

VIEW SCHEDULE

VIEW ACCRUAL BALANCES

REQUEST TIME OFF

VIEW/SEND MESSAGES

APPROVE/SUBMIT TIMESHEET

WEB BENEFITS

BENEFITS ENROLLED IN
  As of any Date Selected

MAKE LIFE EVENT CHANGES

UPDATE BENEFICIARIES

OPEN ENROLLMENT CHGS

BENEFIT CALCULATOR

LIBRARY OF BENEFIT PLAN SUMMARIES

TIMECLOCKS - ICONS

PUNCH IN/OUT

TRANSFER DEPT/JOB
  List will appear to choose

EDUCATION CLOCK IN

SUPERVISOR

CHARGE NURSE

SUPR. AND CHARGE NURSE

CALL BACK–will pay OT

SLEEP STUDY CALL BACK

ULTRASOUND CALL BACK

NUCLEAR MED CALL BACK

MAINTENANCE CODE

PACU CODE

VIEW TIMESHEET

VIEW SCHEDULE

VIEW ACCRUAL BALANCES

VIEW POINT BALANCES

PAYLOCITY APP

PAY-VIEW PAYSTUBS

ALL THE PORTAL FEATURES ABOVE

WHERE DO I FIND...???

VIEW/SEND MESSAGES

APPROVE/SUBMIT TIMESHEET

VIEW TIMESHEET

BENEFITS ENROLLED IN

MAKE LIFE EVENT CHANGES

UPDATE BENEFICIARIES

OPEN ENROLLMENT CHGS

BENEFIT CALCULATOR

LIBRARY OF BENEFIT PLAN SUMMARIES

WHERE DO I FIND...???
Meet & Speak to vendors with any benefit questions or concerns.

Friday, August 19 from 7am to 2pm
Outside on Ground Floor

Open Enrollment changes must be made online in Paylocity Portal–Web Benefits Menu Link
During the following dates: 8/15 12:01 am – 8/26 11:59 pm

No Changes to Benefits?
You still must designate beneficiaries in NEW WebBenefits system

Meet & Speak to vendors with any benefit questions or concerns.

Come register to win one of the many DOOR PRIZES