BRANDED CONTENT

JULY 20, 2026

# HEALTHCARE

## A Roundtable Discussion

**ASHER GARFINKEL**
VP, Community Outreach
ALS Network

**KIMBERLY A. KERRY**
Partner
Dentons

**KARL A. SCHMITZ**
Partner; Co-Chair, Business Department
Hooper, Lundy & Bookman, P.C.

**SAMUEL R. MAIZEL**
Partner
Dentons
MODERATOR

**ROGER SHARMA, CPA, MBA**
President & CEO
Emanate Health

**JOHNESE SPISSO**
President, UCLA Health
CEO, UCLA Hospital System
Associate Vice Chancellor, UCLA Health Sciences

**ROBERT STONE**
CEO
City of Hope

**ROBERT MILLER**
Partner; Co-Chair, Business Department
Hooper, Lundy & Bookman, P.C.
MODERATOR

HEALTHCARE ROUNDTABLE

The healthcare industry as a whole has become particularly innovative over the last few years, and has made specific improvements, enhancements and adjustments to protocols, all while providing services that are the most essential to those in need. Responsibility has fallen squarely on the shoulders of the healthcare sector to lead the way through the industry's evolution while providing answers and best practices for the people and businesses of the Los Angeles region and beyond. To better explore the many pressing health-related issues, the Los Angeles Business Journal has discussed insights, suggestions and best practices with six healthcare experts and thought leaders from the region.

## What is your outlook for the future of the healthcare system – for the remainder of this year and beyond?

**SPISSO:** The healthcare industry will continue to evolve rapidly, shaped by advancing technology, financial pressures, and changing workforce and patient expectations. Patients increasingly desire convenient, seamless access and more personalized care. At the same time, innovations such as artificial intelligence are improving efficiency, safety and clinical decision-making. Rising costs will remain a key challenge, requiring health systems to deliver high-quality care while maintaining affordability. At UCLA Health, we are focused on addressing these dynamics by advancing innovation, expanding access, and implementing strategies that enhance both efficiency and the overall value of care for the communities we serve.

**STONE:** We live in a wondrous era where new medicines are helping patients beat their disease. But we have to remember that these breakthroughs only matter if they reach those patients who need them the most, as quickly as possible. For cancer patients, "wait" is a four letter word. And today, far too many patients are not receiving the latest treatments that could give them the best chance to survive a cancer diagnosis. I remain deeply optimistic about the future of health care, but optimism must be matched by urgency. We have a responsibility to advance science, accelerate cures and ensure those breakthroughs reach more patients.

**KERRY:** The healthcare system will likely face challenges in the near term, driven by continued financial pressure from reductions in federal healthcare payment programs, ongoing staffing shortages, and increased labor and operational costs. AI is being introduced to help providers and health systems streamline processes and operations, but it will take time before those efforts produce measurable cost savings. Looking beyond this year, I believe the system needs to shift its focus toward wellness and preventive care, rather than concentrating on treating disease after it occurs. It should also keep leveraging advances in technology and research to move toward personalized, patient-specific treatment rather than a "one size fits all" approach, while finding suitable ways to offset ongoing payment and cost pressures. Further, the healthcare system must address patients' desire to age at home by expanding outpatient and at-home care options, and prepare for an anticipated physician shortage.

## How does Southern California's healthcare outlook differ from other parts of the country?

**SCHMITZ:** Nearly half of LA County residents are on Medi-Cal. The Big Beautiful Bill and expected State budget cuts will hit Medi-Cal providers very hard and very soon. Medi-Cal enrollment has already seen a steady decline (thereby increasing the number of uninsured). This puts additional financial strain on Medi-Cal providers. I serve as a board member of a local Federally Qualified Health Center (FQHC) that serves over 90% Medi-Cal patients, and we are seeing this happen in real time. We are grappling with how to fill a gigantic Medi-Cal budget hole coming in the last half of 2026 and 2027 so we can continue to provide critical healthcare in our community.

## How is consumerism impacting the healthcare industry and how are hospitals and health systems responding?

**SHARMA:** As information becomes more readily accessible, patients are able to take a more active role in making informed decisions about their health care. Each health system takes a unique approach to addressing the rise in consumerism based on the population it serves. Within our patient population at Emanate Health, we have seen an increased demand for convenience and personalization when it comes to the services we provide. Here are examples of our responses. With many busy families in our service area, we offer convenience through same-day appointments with our primary care providers across our clinics as well as after-hours care for our pediatric patients. We also have a very diverse population that, in turn, increases the demand for personalized assistance. In response, we created our patient liaison team, which offers free, one-to-one guidance for our community, from finding a doctor to understanding health coverage to navigating the health system.

## What can the healthcare sector do to prepare for a potential future crisis such as another pandemic scenario?

**KERRY:** To prepare for a potential future crisis, such as another pandemic, the healthcare sector should draw on the extensive data and lessons learned during COVID-19. Healthcare systems have extensive information on supply chain disruptions, surge capacity, staffing, and patient outcomes that AI can analyze to build predictive models and scenario simulations anticipating where future strain is likely. Using these models, health systems should run simulation exercises to stress-test response plans, cross-train staff so personnel can work across roles during a surge, expand telemedicine to manage patient volume without in-person visits, and strengthen supply chains through diversified sourcing and strategic stockpiles. Health systems should also study how federal and state governments responded to COVID-19, since that track record provides insight into how they are likely to respond in a future crisis. Establishing these frameworks in advance, rather than reacting in real time, will allow providers to respond faster and more effectively.

"Healthcare must become easier to navigate. Organizations should reduce administrative barriers, improve communication among providers, expand access to care navigators/managers, and integrate support services."

— ASHER GARFINKEL


# KEEP ON DISCOVERING LIKE LIVES DEPEND ON IT

Behind every breakthrough is a question someone refused to stop asking. A cell someone refused to stop studying. From developing an affordable blood test that uses DNA found in the bloodstream to detect multiple cancers, to pioneering AI research to transform the future of medicine, our researchers see more than data. They see the patients whose lives depend on what they find next.

UCLA Health

Keep on rising

HEALTHCARE ROUNDTABLE

"Health systems should keep leveraging advances in technology and research to move toward personalized, patient-specific treatment rather than a 'one size fits all' approach, while finding suitable ways to offset ongoing payment and cost pressures."

— KIMBERLY A. KERRY

### When you look at all the innovation happening within the healthcare industry today, what trends are you most optimistic about?

**SPISSO:** When looking across the healthcare landscape, I'm particularly optimistic about the shift toward more predictive, personalized and proactive care and UCLA Health is at the forefront of advancing both science and its clinical application. One of the most promising areas is genetic and precision medicine, including breakthroughs like CRISPR, which offer the potential to treat, and in some cases cure, disease at its source. These advances are transforming how we approach conditions such as sickle cell disease and other inherited disorders that have historically required lifelong management. At UCLA Health, this momentum aligns closely with our commitment to translating innovation into real-world impact. We are focused on advancing next-generation therapies, expanding access to clinical trials, and ensuring that cutting-edge discoveries meaningfully improve outcomes for the diverse communities we serve.

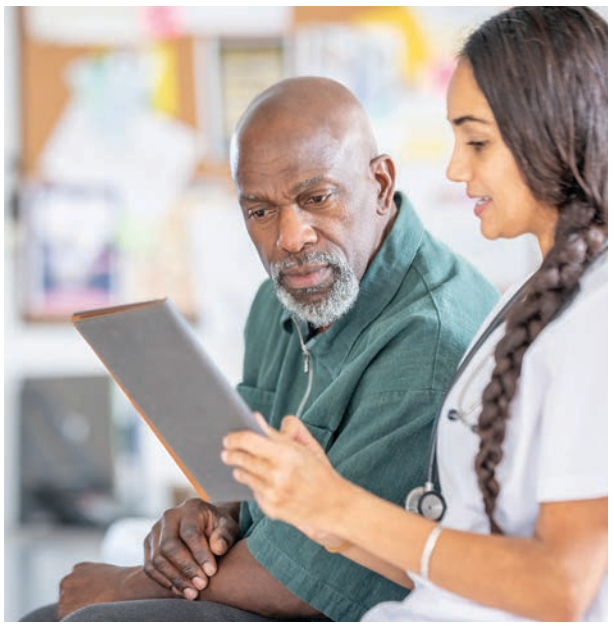
**GARFINKEL:** The greatest opportunity lies in bringing care closer to where people are. Telehealth, remote monitoring, artificial intelligence, and data sharing are making it easier to deliver more personalized, coordinated care, especially for people living with complex diseases like ALS. The ALS Network is encouraged by the growing emphasis on multidisciplinary care models that bring specialists, therapists, social workers, and care navigators/managers together for each individual. On the research side, advances in genetics, biomarkers, and precision medicine are opening new possibilities for earlier diagnosis and more targeted therapies. Innovation is most meaningful when it not only extends life but also improves quality of life for patients and families throughout their journey.

**STONE:** I'm very optimistic about the combination of extraordinary scientific progress and our growing ability to bring that progress to more patients. We're seeing remarkable advances in precision medicine, immunotherapy and cell-based therapies that are changing how we treat cancer and vastly improving outcomes. That includes personalized, precise treatments that are targeted toward each patient's specific cancer and genetic makeup. And we are finally making progress against some of the hardest to treat cancers – such as the new pancreatic cancer medicine that could more than double survival for many pancreatic cancer patients. This is an incredibly hopeful moment. When we look toward the future, we will see many cancers increasingly considered treatable and cured. Equally important, those cures will be available to everyone who needs them. That is an incredibly hopeful future—and one that is closer than many people realize.

### What should patients take into consideration when selecting their care providers and hospitals?

**STONE:** It's important to remember that patients are not a stakeholder in our healthcare system, they are the purpose. Yet too often the patient perspective is lost. I hear over and over again what patients are looking for from a provider: They want an expert in their specific disease, access to the latest treatments and trials, and to be treated with dignity. Patients should never have to choose between expert care and receiving world-class expert care. That's why City of Hope has expanded into a national system with cancer centers in five markets across the country, with an NCI-designated comprehensive cancer center at our core in Los Angeles. Yet regardless of where a patient gets their care across our network, we take their hand and never let go throughout their cancer journey. It's a privilege to stand alongside our patients and help them get back to their families and their lives.

**GARFINKEL:** Patients should look beyond convenience and consider whether a provider or hospital offers coordinated, patient-centered care. For those living with complex conditions like ALS, access to a multidisciplinary team, including specialists, therapists, respiratory care, nutrition, social work, and care navigation, can significantly improve both quality of life and the overall care experience. It's also important to evaluate how well providers communicate, involve patients and families in decision-making, coordinate across specialties, and connect individuals with clinical trials, community resources, and support services. The strongest healthcare partnerships are built on trust, expertise, compassion and a commitment to treating the whole person, not just the diagnosis.



"As information becomes more readily accessible, patients are able to take a more active role in making informed decisions about their health care. Each health system takes a unique approach to addressing the rise in consumerism based on the population it serves."

— ROGER SHARMA

### How would you describe the current legal landscape for healthcare organizations?

**SCHMITZ:** Health care organizations face a complex legal landscape that is rapidly becoming more complex. While the current federal administration moves to deregulate agencies like CMS, California and many other states have moved in the opposite direction by adding new regulations that target private equity in health care, regulate the development and use of artificial intelligence by providers and payers, and strengthen protections against corporate lay entities practicing medicine. For example, in recent years, we have seen California add laws that scrutinize a wide variety of health care transactions for potential anticompetitive effects and other negative impacts on the cost of, access to, and quality of health care.

**KERRY:** The current legal landscape for healthcare organizations is defined by heightened regulatory enforcement. The federal government is reshaping government payment programs while intensifying its focus on fraud, waste and abuse. This increased scrutiny is resulting in a marked increase in investigations and enforcement actions against

Please see page 38

HOOPER LUNDY BOOKMAN

ATTORNEYS AT LAW

BUSINESS TRANSACTIONS

# DEAL LAWYERS KNOW CONTRACTS. WE KNOW HEALTH CARE TRANSACTIONS.

As a national boutique law firm dedicated exclusively to representing health care providers and suppliers, we don't just navigate the rules of this market - we help shape them.

## REPRESENTATIVE CAPABILITIES

Hospital & Health System Mergers & Acquisitions

Physician Group Governance & Affiliations

Innovative Care Model Implementation

Digital Health & AI Development

MSO & Friendly PC Operations

## CO-CHAIRS, BUSINESS TRANSACTIONS


**KARL A. SCHMITZ**

**Partner**

Los Angeles

kschmitz@hooperlundy.com



**ROBERT F. MILLER**

**Partner**

Los Angeles · San Diego

rmiller@hooperlundy.com


## HEALTH LAW FROM EVERY ANGLE

BOSTON DENVER LOS ANGELES SAN DIEGO SAN FRANCISCO WASHINGTON D.C.

hooperlundy.com

# City of Hope's gut research transforms cancer care.

## Groundbreaking research reveals how the microbiome shapes treatment, protects health and supports recovery

Two cancer patients can walk into the same doctor's office with similar diagnoses, similar treatment plans and a shared hope that medical science will control and cure their cancer. While their paths may look nearly identical, key factors within their bodies could help determine how each story unfolds.

Doctors can explain part of that difference by studying the cancer itself, including its stage, genetic features and how far it has spread. Increasingly, researchers are also studying the patient's own biology, including the gut microbiome, to understand how the body responds to treatment.

Made up of bacteria, fungi and other microorganisms in the digestive tract, the gut microbiome helps with digestion and interacts closely with the immune system. Researchers believe this connection could be important to understanding how cancer develops, why patients respond differently to treatment and how recovery can be supported.

At City of Hope, one of the largest and most advanced cancer research and treatment organizations in the United States, scientists are making the microbiome a growing focus of cancer research.

### Why the gut matters in precision treatment

Precision cancer care has long matched treatment to the molecular features of a patient's disease. Microbiome research adds another layer, looking at how the body may respond once treatment begins.

Cancer treatment can disrupt the microbiome in ways researchers are still working to understand. Chemotherapy, antibiotics, hospitalization and stem cell transplantation can shift the balance of microbes in the gut, with possible ties to inflammation, immune function and treatment-related complications.

Early studies suggest the microbiome may be influenced in ways that support treatment and recovery.

"We have plenty of evidence, in retrospective fashion, in preclinical fashion, but now also with first-in-human trials, relatively small cohorts, sometimes even with just a few patients, that a manipulation of the gut microbiome can improve outcomes," said Marcel van den Brink, M.D., Ph.D., president of City of Hope Los Angeles and City of Hope National Medical Center.

Understanding the microbiome could help clinicians identify patients at higher risk for complications or test ways to help the body tolerate treatment. City of Hope researchers are studying its role in stem cell transplantation, kidney cancer, nutrition and diet.

### Inside City of Hope's microbiome work

City of Hope's Microbiome Program brings together cancer researchers, clinicians, computational scientists and nutrition experts to study how discoveries in the lab might translate to patients. Their work spans blood cancers, stem cell transplantation and solid tumors. In transplant care, studies are examining whether changes in gut bacteria help explain complications that occur as the immune system rebuilds. Research in kidney cancer and nutrition is testing whether the microbiome can be safely modified to support treatment response or recovery.

"It turns out that these cancer therapies rely on a normal microbiome to work effectively. So, we're trying to figure out why, and can we do something about it?" said Robert R. Jenq, M.D., director of the City of Hope Microbiome Program. "If we can understand that it could start to reshape how we think about cancer treatment altogether."

City of Hope recently convened a scientific symposium and executive roundtable on microbiome research with U.S. Health and Human Services Secretary Robert F. Kennedy Jr., NIH director Jay Bhattacharya, M.D., Ph.D., senior National Cancer Institute officials and leaders from major comprehensive cancer centers. Participants described the field as a "moonshot" opportunity to move microbiome discoveries closer to cancer prevention.

### What this could mean for cancer patients in Los Angeles

As the research advances, patients could see its impact in decisions already part of cancer care, including how physicians use antibiotics during treatment, which patients need closer monitoring around stem cell transplantation and how clinical trials test new microbiome-focused approaches.

In Los Angeles, that link between research and care matters, since patients often travel long distances for specialized treatment while balancing work, caregiving and recovery. Anchored by its Duarte campus and a regional network across Southern California, City of Hope gives patients access to specialized cancer expertise. Each year, more than 700 cancer-focused clinical trials help move emerging science carefully toward care.

With more people surviving cancer and living longer, research that helps clinicians understand the whole patient could play a larger role in recovery, follow-up care and long-term support.

## Pursuing cancer cures at the speed of life.

Learn more about cancer care, research and treatment options at City of Hope Los Angeles at **cityofhope.org/locations/los-angeles.**

City of Hope®


BEST HOSPITALS
U.S.News & WORLD REPORT
CANCER
2025-2026
Neil and grandson
City of Hope Cancer Patient
We focus on curing cancer.
You focus on life.
Pursuing cancer cures at the speed of life.
From diagnosis through survivorship, our more than 2,000 experts are focused on one thing—ending cancer. As one of the nation's largest and most advanced cancer research and treatment organizations, we deliver outcomes that exceed national standards.
cityofhope.org
City of Hope®
© 2026 City of Hope

health systems and providers. This requires health systems to remain laser-focused on compliance, since noncompliance can trigger these costly investigations and penalties at a time when financial pressures are already significant. At the same time, organizations are utilizing AI to streamline operations, but this introduces security and privacy risks that create additional regulatory exposure. There is also heightened antitrust scrutiny of health system consolidations, as regulators seek to ensure patients are not harmed by reduced competition.

## How about the insurance landscape? What changes are you seeing there?

**SHARMA:** Legislative mandates have dramatically altered the insurance landscape. In the past decade, many gained coverage under Medi-Cal expansions and ACA's Covered California only to lose coverage under the Big Beautiful Bill. The new bill, for instance, has brought both patients and providers a multitude of new challenges, such as increased marketplace premiums, decreased funding for Medi-Cal, elimination of the low-income special enrollment period, and more. These changes disproportionately impact health systems, such as Emanate Health, whose payer mix is largely comprised of government payers. Several aspects of the landscape have continued to evade change. The industry's negotiating imbalance persists due to growing payors, and overall costs continue to climb. Additionally, the complexities of obtaining and maintaining health coverage continue to be barriers to patients. To help our community navigate these challenges, Emanate Health offers free, personalized assistance and resources through our Get Enrollment Moving (GEM) program and patient liaison team.

## Will outpatient care continue to trend upwards? Why or why not?

**KERRY:** Yes, outpatient care will continue to trend upwards for several reasons. First, cost and efficiency considerations are driving this shift, as federal rules incentivize outpatient growth through site-neutral payment policies, and outpatient settings offer significant cost savings compared to hospital inpatient stays. Second, advances in medical technology, including robotic-assisted procedures, now allow more complex surgeries to be performed routinely at outpatient surgery centers rather than hospitals. Third, demographic changes are increasing demand, as an aging population requires ongoing management of chronic conditions, and certain conditions are well suited to outpatient care. Finally, consumer expectations are shifting toward convenience and efficiency, with patients increasingly preferring care close to home rather than traveling long distances to a hospital.

**SPISSO:** There will continue to be an increased desire for outpatient care, driven by patient preference for convenient, accessible care and technological advancements allowing for more procedures outside of hospitals. This shift reflects a broader industry move toward providing care closer to where patients live and work. At UCLA Health, we are committed to increasing access to high-quality healthcare. UCLA Health provides comprehensive primary and specialty care, along with top-tier hospital services, to residents along the Central Coast and Southern California, with nearly 300 clinic locations and five hospitals. Recent investments reflect this commitment. In 2024, UCLA Health expanded its network with the opening of UCLA West Valley Medical Center, adding beds, operating rooms, and an ambulatory surgery center. Looking ahead, the opening of the UCLA Stewart and Lynda Resnick Neuropsychiatric Hospital later this year will further increase access, strengthen community-based services, and advance innovation in behavioral health care.

> "The healthcare industry will continue to evolve rapidly, shaped by advancing technology, financial pressures, and changing workforce and patient expectations. Patients increasingly desire convenient, seamless access and more personalized care."
>
> — JOHNESE SPISSO

**SHARMA:** Emanate Health's three hospitals have served the San Gabriel Valley for over a century, and we provided mostly inpatient services for the majority of our existence. In recent years, however, we identified three key drivers of outpatient care: the value patients place on convenient access to care, advancements in medicine and technology, and cost incentives driven by industry policies. As these drivers show every sign of continuing, we expect to sustain a growing demand for outpatient services. For the past decade, Emanate Health implemented a series of responses to this trend. We built a robust integrated delivery system that yields streamlined, cost-effective care for the people we serve. To increase our community's access to top-tier care, we opened nearly 20 ambulatory clinics offering primary and specialty care throughout the region. Furthermore, we prioritized investing in our care team and state-of-the-art technology to facilitate the best possible outcomes for our patients.

## What changes would meaningfully expand access to new treatments for more people?

**STONE:** The most meaningful way to expand access to life-saving treatments starts with closer partnerships with other healthcare organizations, insurers, biopharma industry, policymakers and other partners. Real change must start with recognizing that cancer is the competition, not other providers. Organizations should not keep their knowledge, research and tools to themselves. Cancer touches everyone, and it's simply a challenge that's too great for any one organization to tackle alone. We need to encourage closer partnerships between academic centers and community providers, make it easier to access a clinical trial regardless of where they live, and help patients get the right diagnosis from an expert in their disease type the first time. We can only make those changes a reality by working together across the healthcare system.

## How are organizations successfully implementing value-based delivery to reduce the cost of care while also improving quality?

**SHARMA:** Emanate Health is a nonprofit health system serving a population of over one million in the San Gabriel Valley. Our payor mix is comprised of approximately 85% government payors, namely Medi-Cal and Medicare. As such, we face greater impacts than many others do from challenges in the health care industry and changes in payor policies. While containing costs, Emanate Health has managed, over the past decade, to successfully transform care quality, elevate the level of care and augment the scope of services and pro-

DENTONS

# Leading the Future of Health Care and Life Sciences

In a global health care market approaching US$7 trillion annually, organizations need legal counsel that can navigate complex regulatory, transactional, and operational challenges across jurisdictions. Dentons combines a deep health care industry focus with a global platform to help providers, health systems, insurers, pharmaceutical and medical device companies, digital health innovators, and investors seize opportunities and manage risk worldwide.

Our team counsels health care organizations on mergers and acquisitions, transactions, nonprofit governance, compliance, privacy, digital health, reimbursement, financial distress, and regulatory matters, and represents clients in high-stakes litigation, investigations, whistleblower defense, financial restructurings, taxable and tax-exempt financings, and government enforcement actions.

Global reach. Industry insight. Practical solutions. Dentons helps health care and life sciences organizations thrive in an increasingly complex and interconnected marketplace.

**For more information about the Dentons Health Care Team, please contact:**

**Kimberly A, Kerry**
Partner
kimberly.kerry@dentons.com

**Samuel R. Maizel**
Partner
samuel.maizel@dentons.com

601 S Figueroa St #2500, Los Angeles, CA 90017
(213) 623-9300

**dentons.com**

HEALTHCARE ROUNDTABLE

> Providers that develop and maintain financially sustainable care delivery models are better positioned to provide patients with access to high-quality care, enabling them…to hire and retain a talented workforce and plan for future patient needs."
>
> — KARL A. SCHMITZ

grams that we provide to our community. We achieved this by focusing on investing our resources into our staff, patient facilities, infrastructure and technology. The development of meaningful quality metrics and robust data analytics have also facilitated our success. Furthermore, we have built strong partnerships over the years with our stakeholders, including physicians, and these have helped us ensure that we are aligned in achieving our goals.

## Discuss the importance of sustainability in healthcare.

**SCHMITZ:** Health care providers that develop and maintain financially sustainable care delivery models are better positioned to provide patients with access to high-quality care, enabling them, for example, to hire and retain a talented workforce, plan for future patient needs, and respond to unexpected emergencies or circumstances. However, maintaining financial stability is increasingly difficult as provider reimbursement stagnates, compliance requirements increase, and inflation raises operating costs. These challenges require organizations to proactively manage finances and look for ways to do more with less.

**SHARMA:** Sustainability is the key to ensuring that we can be here to serve our community for years to come. Emanate Health's three hospitals have served the San Gabriel Valley for over 100 years, and we have laid the groundwork to ensure we can serve our community for the next century. For many years, we have followed the Triple Aim and focused on maintaining a balance among providing excellent care and elevating our communities' health with managing the cost pressures of our industry. Emanate Health has managed to walk this tightrope through strategically evolving to meet the ever-changing health care needs of our community members. For the areas we have identified are community health needs, we have invested in bringing in top-tier providers, building state-of-the-art facilities and procuring cutting-edge technology. We have also greatly invested in our team members, who play significant roles in ensuring we deliver excellence while managing costs.

## What investments have made the biggest impact on improving patient satisfaction in recent years?

**GARFINKEL:** The greatest returns have come from investing in people and connection. Expanding multidisciplinary care, strengthening care navigation via our concierge care management services, increasing access to support groups, and providing direct assistance for equipment and everyday needs have significantly improved the experience of people living with ALS and their families. We've also invested in virtual education and online communities, allowing individuals to connect with experts and peers regardless of where they live. These investments reduce isolation, improve access to reliable information, and help families feel supported beyond the clinical setting. Patient satisfaction grows when people feel seen, heard and connected to a community that understands their journey.

## What's one change you believe hospitals or providers must make now to stay competitive or relevant in the future?

**SHARMA:** Hospitals and health care providers must understand two things to stay relevant: to know why we exist and to understand the needs of the people we serve. Our mission serves as our North Star in everything we do: Emanate Health exists to help people keep well in body, mind and spirit by providing quality health care services in a safe, compassionate environment. We keep our community well by ensuring they can access world-class providers, facilities and care closer to home through us. Many institutions, including Emanate Health, conduct community health needs assessments. The key lies in what we do with this information. We have built state-of-the-art facilities, expert teams across each specialty and new programs tailored to the specific health care needs of our community. For instance, we are opening a new ED-ICU later this year to meet our aging community's growing critical care needs.

**SCHMITZ:** The current and likely future reimbursement models will require hospitals and providers to become proficient in value-based care delivery, which in turn requires proficiency in organizing and acting on data-driven insights. Gathering, understanding and tracking your data will be paramount in this effort. Understanding and harnessing the power of artificial intelligence may be the key to unlocking and understanding your data. This will require providers to understand new regulatory paradigms for artificial intelligence use, such as rules governing the use of autonomous AI in clinical care and the adoption of emerging and digital technologies in care delivery.

## What should be done today to enhance the patient experience?

**GARFINKEL:** Healthcare must become easier to navigate. For people living with ALS, time and energy are precious, making coordinated care essential. Organizations should reduce administrative barriers, improve communication among providers, expand access to care navigators/managers, and integrate support services such as mental health resources, caregiver education, equipment assistance, and community programs. Patients also deserve greater transparency, timely access to specialists, and opportunities to participate in decisions about their care. Technology can help, but it should always complement, not replace, the human relationships that build trust, compassion and confidence during some of life's most difficult moments. Policy and legislative advocacy should be pursued to reduce barriers to accessing benefits and to increase access to home health.

**KERRY:** Healthcare organizations should utilize AI to streamline administrative and clinical workflows, such as documentation, scheduling, and routine follow-up communications. By shifting these tasks to technology, providers can spend more time engaging directly with patients rather than on activities that AI can handle more efficiently. This shift should improve not only the quality of provider and patient interactions, but also help reduce provider burnout. In addition, healthcare organizations should continue to focus on improving patient care coordination and communication across the care team, and ensuring patients have timely access to their own health information. Investing in these areas should lead to a more patient-centered health system where technology supports instead of replaces the patient-provider connection. Maintaining the human connection is at the core of quality patient care.

## What are some evolving best practices in terms of prevention and early diagnosis as ways of stopping serious illness?

**SPISSO:** At UCLA Health and in the health care industry, we will see a continued focus on population health management. This includes analyzing and addressing the factors that influence the health of a whole population, including social, environmental and behavioral determinants, with the aim of preventing disease and promoting wellness at a community level. Socioeconomic and environmental factors significantly influence up to 80% of health outcomes, highlighting their critical role in our patients' overall well-being. UCLA Health has undertaken several strategies to improve population health, including screening our patients in the domains of food needs, transportation, financial strain, prescription and medical bills, housing, intimate partner violence, and utilities needs and working to connect them with needed resources. By addressing these underlying factors, we are working to prevent illness, improve outcomes, and promote long-term wellness across the communities we serve.

Emanate Health®

# Your Community.
# Your Hospitals. Your Doctors.

## Bringing world-class care closer to home.

**Inter-Community Hospital**

**Queen of the Valley Hospital**


**Foothill Presbyterian Hospital**

Emanate Health provides award-winning care to the one million residents of the San Gabriel Valley in California. Our nationally-recognized teams and top-rated doctors provide specialized care in areas such as behavioral health, cancer, cardiovascular, neuroscience and stroke, orthopedics, sports medicine and women's health. The health care system has been voted "Best Hospital" and "Favorite Hospital" for multiple years by the community as well as "Best Place to Work". In 2025 and 2026, Newsweek and Plant-A-Insights Group recognized Emanate Health on multiple "America's Greatest Workplaces" lists. Our providers are consistently among the "Top Doctors" in Los Angeles County, and our services have received awards and recognitions throughout the years.

**Learn more or schedule an appointment at emanatehealth.org**

**Or follow us at:**

**@EmanateHealthNow** **@EmanateHealth_** **Emanate Health** **@EmanateHealth_**

**Emanate Health exists to help people keep well in body, mind and spirit by providing quality health care services in a safe, compassionate environment.**

HEALTHCARE ROUNDTABLE

> We live in a wondrous era where new medicines are helping patients beat their disease. But we have to remember that these breakthroughs only matter if they reach those patients who need them the most, as quickly as possible."
>
> — ROBERT STONE

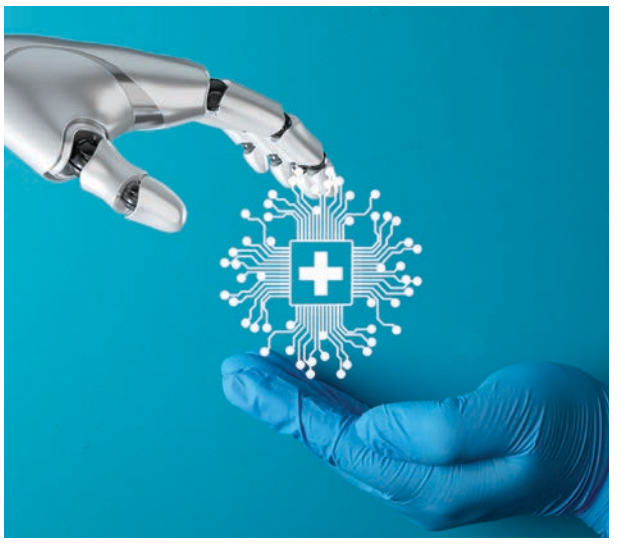
### How are clinical trials here in the Los Angeles region making an impact?

**STONE:** Clinical trials give patients access to innovative therapies years before those treatments become widely available, while helping researchers answer some of the most important questions in cancer care. We often talk about health research in terms of "bench to bedside". At City of Hope, it's actually more like "bedside to bench … and back to bedside". What that means is that our researchers take learnings from our hundreds of clinical trials in California, constantly improve the treatments we're developing, and then quickly make them available to patients across our network. One example is the new pancreatic cancer medicine daraxonrasib. We participated in the Phase 3 trial that showed how this breakthrough treatment can extend survival. Our researchers are building on those insights to drive breakthroughs for other cancers – while our clinical trials network works to quickly make the new pancreatic cancer treatment to patients who are eligible to receive it.

### What's one strategic initiative your organization is focused on over the next few years to stay ahead?

**GARFINKEL:** The ALS Network is focused on creating a more connected ALS ecosystem that brings together care, advocacy, research, and community support. By expanding partnerships with leading ALS clinics, researchers, healthcare systems, and organizations across the country, we're making it easier for people living with ALS and their families to access comprehensive services while helping accelerate research participation. We're also investing in digital platforms like ALS-together, a Slack community that strengthens connections, reduces isolation, and delivers trusted resources regardless of geography. Our goal is to ensure every person affected by ALS has access to the support, information and opportunities they need throughout their journey.

**SCHMITZ:** Rather than diversifying, our strategy is to go deeper. HLB is a single-practice firm: health care law is the only thing we do. In a market full of generalists, that focus is our edge and not a limitation. Our priority is maintaining and



expanding the cutting-edge expertise we've already built and remaining at the forefront of the conversation around issues shaping health care law and policy across the country. Every one of our transactional lawyers is a health care lawyer first. When a client brings us an AI-enabled diagnostic tool or an algorithm making coverage determinations, we're not learning health care regulation and AI simultaneously. We already understand the framework, from fraud and abuse laws, reimbursement considerations, and overlapping regulatory regimes to emerging rules around AI and technology. That head start allows our clients to move faster and with more confidence. In our view, depth beats breadth.

# *New High Blood Pressure Guideline Emphasizes Prevention to Reduce Risk*

Preventing and managing high blood pressure with healthy lifestyle behaviors, such as following a heart-healthy diet including reducing salt intake, staying physically active, maintaining a healthy weight and managing stress—combined with early treatment with medication to lower blood pressure if necessary—are recommended to reduce the risk of heart attack, stroke, heart failure, kidney disease, cognitive decline and dementia, according to a new clinical guideline published last year in the American Heart Association's peer-reviewed journals Circulation and Hypertension, and in JACC, the flagship journal of the American College of Cardiology.

The new guideline replaces the 2017 guideline and includes new or updated recommendations for blood pressure management based on the latest scientific evidence to achieve the best health outcomes for patients.

The new guideline reflects several major changes since 2017, including use of the American Heart Association's PREVENT (Predicting Risk of cardiovascular disease EVENTs) risk calculator to estimate cardiovascular disease risk. It also provides updated guidance on medication options, including the early treatment for high blood pressure to reduce the risk of cognitive decline and dementia; use of specific medications including the possible addition of newer therapies such as GLP-1 medications for some patients with high blood pressure or obesity, and recommendations for managing high blood pressure before, during and after pregnancy.

High blood pressure (including stage 1 or stage 2 hypertension) affects nearly half (46.7%) of all adults in the U.S., is the leading cause of death in the US and around the world. The blood pressure criteria remain the same as the 2017 guideline:


- normal blood pressure is less than 120/80 mm Hg;
- elevated blood pressure is 120-129/80 mm Hg;
- stage 1 hypertension is 130-139 mm Hg or 80-89 mm Hg; and
- stage 2 hypertension is ≥140 mm Hg or ≥90 mm Hg.

"High blood pressure is the most common and most modifiable risk factor for heart disease," said chair of the guideline writing committee Daniel W. Jones, M.D., FAHA, dean and professor emeritus of the University of Mississippi School of Medicine in Jackson, Mississippi. "By addressing individual risks earlier and offering more tailored strategies across the lifespan, the 2025 guideline aims to aid clinicians in helping more people manage their blood pressure and reduce the toll of heart disease, kidney disease, Type 2 diabetes and dementia."

"This updated guideline is designed to support health care professionals—from primary care teams to specialists, and to all clinicians across health systems—with the diagnosis and care of people with high blood pressure. It also empowers patients with practical tools that can support their individual health needs as they manage their blood pressure, whether through lifestyle changes, medications or both," Jones said.

The new guideline reaffirms the critical role healthy lifestyle behaviors play in preventing and managing high blood pressure, and it encourages health care professionals to work with patients to set realistic, achievable goals. Healthy behaviors such as those in Life's Essential 8, the American Heart Association's metrics for heart health, remain the first line of care for all adults.

Specific blood pressure-related guidance includes:

- Limiting sodium intake to less than 2,300 mg per day, moving toward an ideal limit of 1,500 mg per day by checking food labels (most adults in the U.S. get their sodium from eating packaged and restaurant foods, not the salt shaker);
- Ideally, consuming no alcohol or for those who choose to drink, consuming no more than two drinks per day for men and no more than one drink per day for women;
- Managing stress with exercise, as well as incorporating stress-reduction techniques like meditation, breathing control or yoga;
- Maintaining or achieving a healthy weight, with a goal of at least a 5% reduction in body weight in adults who have overweight or obesity;
- Following a heart healthy eating pattern, for example the DASH eating plan, which emphasizes reduced sodium intake and a diet high in vegetables, fruits, whole grains, legumes, nuts and seeds, and low-fat or nonfat dairy, and includes lean meats and poultry, fish and non-tropical oils;
- Increasing physical activity to at least 75-150 minutes each week including aerobic exercise (such as cardio) and/or resistance training (such as weight training); and
- Home blood pressure monitoring is recommended for patients to help confirm office diagnosis of high blood pressure and to monitor, track progress and tailor care as part of an integrated care plan.

Addressing each of these lifestyle factors is especially important for people with high blood pressure and other major risk factors for cardiovascular disease because it may prevent, delay or treat elevated or high blood pressure.

*Learn more at heart.org or ACC.org.*

HEALTHCARE ROUNDTABLE

# Collaboration Forms to Advance Women's Health

The US Department of Health and Human Services (HHS), through its Office on Women's Health, recently announced a formal Memorandum of Understanding (MOU) with the American Urological Association, the American Urological Education and Research, and the Urology Care Foundation (together, the AUA) to promote the appropriate and evidence-based use of local estrogen therapy in postmenopausal women, particularly those experiencing genitourinary syndrome of menopause (GSM) and recurrent urinary tract infections (UTIs).

The collaboration reflects a unified commitment by both institutions to improving women's health, preventing disease, and enhancing quality of life through safe and effective therapies. Together, HHS and the AUA will exchange information, develop educational resources, and work collaboratively to reach health care providers and women across the country.

"This collaboration represents an important step forward in addressing a significant and often undertreated women's health concern," said Dorothy A. Fink, MD, principal deputy assistant secretary for health and director of the HHS Office on Women's Health. "Many postmenopausal women are not aware that local estrogen therapy is a safe and effective treatment for GSM and recurrent UTIs. By joining forces with the AUA, we can ensure that clinicians and patients alike have access to clear, evidence-based guidance."

Postmenopausal estrogen decline causes predictable physiological changes — including thinning of the urogenital epithelium, loss of glycogen and protective lactobacillus flora, elevated pH, and increased susceptibility to bacterial colonization — that significantly raise the risk of recurrent UTIs, urosepsis, urinary urgency and frequency, pelvic pain, and sexual dysfunction.

Recurrent UTIs in postmenopausal women carry serious complications, including:

- Repeated antibiotic exposure and growing antimicrobial resistance
- Emergency department visits and hospitalization
- Life-threatening urosepsis
- Evidence demonstrates that local estrogen therapy restores urogenital tissue health, lowers pH, reestablishes protective flora, and significantly reduces recurrent UTIs, thereby lowering the risk of progression to systemic infection and sepsis. Reducing UTI frequency directly decreases morbidity, health care utilization, and
- potentially mortality.

Local estrogen therapy has been shown to:

- Strengthen urogenital tissue
- Improve lubrication and elasticity
- Reduce dyspareunia
- Improve sexual desire and enhance orgasmic satisfaction
- Decrease urinary urgency and frequency
- Reduce urinary incontinence
- Diminish chronic pelvic discomfort

Under the MOU, HHS and the AUA will collaborate over an anticipated period of up to five years. Key commitments include:

- HHS will increase clinician education and public awareness regarding GSM and local estrogen therapy
- The AUA will share expertise on the diagnosis and management of GSM and its impacts on women's health
- Both parties will jointly educate health care providers and women on the appropriate and evidence-based use of local estrogen therapy in postmenopausal women, and assess the impact of the initiative

The MOU is effective for an initial period of one year and may be extended by mutual agreement for up to five years. It may be terminated by either party upon 60-days written notice.

*Learn more at HHS.gov.*