WHA Wins National Award for Improving Health Care Quality and Safety in WI
Will receive AHA Dick Davidson Quality Milestone Award for Association Leadership

The Wisconsin Hospital Association (WHA) is slated to receive the 2014 Dick Davidson Quality Milestone Award for Allied Association Leadership for its work to improve health care quality, the American Hospital Association (AHA) announced June 10.

The award, given to state, regional or metropolitan hospital associations that demonstrate leadership and innovation in quality improvement and contribute to national health care improvement efforts, will be presented in July.

“Improving quality and patient safety is a never-ending quest for America’s hospitals and health systems,” said Rich Umbdenstock, AHA president/CEO, noting that Wisconsin’s efforts “exemplify the key role now played by hospital associations across the country in convening and supporting their members in the critical work of quality and safety collaboratives.”

According to the AHA, WHA demonstrated a comprehensive quality portfolio supported by strong leadership and governance. Along with 108 of its member hospitals, WHA developed strategic partnerships to advance quality care statewide. One example of their success was to prevent a recently-discharged patient from an unplanned return to the hospital within 30 days. WHA and their hospitals successfully reduced readmissions by 22 percent, exceeding the government’s goal of a 20 percent

WHA Showcases WI’s High-Quality, High-Value Health Care on New Website
www.wihealthcarevalue.org is a resource for employers, econ development professionals

A new website launched by the Wisconsin Hospital Association positions Wisconsin’s high-quality, high-value health care as a strong economic development asset. The site provides documentation that Wisconsin’s health care “is ahead of the curve,” and that Wisconsin’s health care is a factor in employers’ location decisions. In a recent statewide employer survey commissioned by WHA, Wisconsin employers ranked health care second only to education as the most important factor in their site selection process.

The website is the first phase of WHA’s commitment to promote Wisconsin’s health care as a key asset to the state’s economic development efforts. The content and direction of the website was heavily influenced by meetings with key stakeholders, including WHA members, employers, economic development organizations and the Wisconsin Economic Development Corporation (WEDC).

“Wisconsin is in a unique position where health care can truly be marketed as an economic development asset in every one of our communities,” according to WHA Executive Vice President Eric Borgerding. “This new website is just one phase of our multi-pronged campaign. It confirms our commitment to build awareness that our health care system delivers superior results, and it is a reason for locating to or expanding in, Wisconsin.”

View the new website at www.wihealthcarevalue.org.
The Wisconsin Hospitals Conduct and State PAC annual fundraising campaign has raised more than $107,000 from 127 individuals since the campaign’s May launch. This puts the 2014 campaign over 40 percent of the $265,000 goal—the highest goal ever set by the annual campaign. The 2014 Campaign’s progress is outpacing last year by more than $32,000.

In fact, the average contribution ($849 v. $789), the number of participants (127 v. 95) and Platinum Club members, those who contribute at $1,500 or more, (45 v. 37) are all outpacing last year’s numbers (and the 2012 election year) making for a strong launch to this year’s campaign.

All individual contributors are listed in The Valued Voice by name and affiliated organization on a regular basis. Thank you to the earliest of the 2014 contributors to date who are listed below. Contributors are listed alphabetically by contribution amount category.

The next publication of the contributor list will be in the June 27 edition of The Valued Voice. For more information, contact Jodi Bloch at 608-217-9508 or Jenny Boese at 608-274-1820. 
The WHA Information Center, LLC (WHAIC) has proven its worth many times over the past 11 years, a point that WHA Senior Vice President Brian Potter made during his presentation at the WHA Board meeting June 12. Potter said WHAIC is fulfilling its mission to collect, analyze and disseminate complete, accurate and timely data and reports about charges, utilization, quality and efficiency provided by Wisconsin hospitals, ambulatory surgery centers and other health care providers.

WHAIC began collecting data in January 2004 under a contract with the Wisconsin Department of Administration.

“WHAIC is able to provide incredibly strong support for our members and its other customers,” according to Potter. He emphasized that the quality, reliability and timeliness of the data is extremely helpful at a time when the health care landscape is in a state of constant flux.

The WHAIC issues several annual publications, including the often-cited Guide to Wisconsin Hospitals. The Guide to Wisconsin Hospitals provides detailed staffing, utilization, and financial information from data submitted by Wisconsin hospitals. It is based on the Annual Survey of Hospitals and the Hospital Fiscal Survey.

The hospital fiscal data was used to develop the price transparency tool, PricePoint, www.WiPricePoint.org. Launched in 2005, PricePoint was one of the first voluntary public reporting tools in the country.

The WHA Annual Workforce Report utilizes data gathered by WHAIC for the Department of Workforce Development’s Nursing Workforce Survey. That data is a critical element in helping hospitals and education facilities determine future workforce needs.

WHA incoming Chair Therese Pandl praised WHAIC. “Data reliability is key. It is terrific to have this trustworthy resource available to us as health care systems,” she said.

**WHA Board recognizes Brett Davis for leadership on Medicaid, health policy issues**

The WHA Board acknowledged former Wisconsin Medicaid Director Brett Davis for his leadership on several key policy issues related to changes in Medicaid eligibility, enrollment and the insurance exchange at their June 12 meeting.

“Brett has been a partner with WHA and our members during his tenure as Medicaid director,” said WHA President Steve Brenton. “His commitment to ensure that former Medicaid recipients were covered, as well as making the newly-eligible aware of the program, is commendable, and we are very grateful.”

Brenton added that Davis was also deeply involved in the creation of the Wisconsin State Health Information Network (WISHIN) and in supporting the development of the Wisconsin Health Information Organization (WHIO).

“I’m very humbled to be recognized today, but as you all know, it is a team effort,” Davis said. “The rollout of the ACA was not perfect—there is a lot of continuous improvement that must occur—but compared to a lot of other states, our transition was as smooth as could be expected.”

(continued on page 4)
Continued from page 3 . . . WHA Board

Brenton noted that while Davis was at the Wisconsin Department of Health Services, he was a key stakeholder and promoter of the Statewide Value Committee (SVC). Now that Davis has joined the private sector as vice president of provider relations at WPS, it is expected that he will continue to participate in the Committee and other important activities.

**WHA starts now on Medicaid strategy for next legislative session**

Medicaid remains at the top of WHA priorities, which means that work is already in progress on strategies to address policy and operational issues next session.

“We will focus on reimbursement. While we received some increases in the last state budget, we have seen a surge in Medicaid enrollment since April of this year,” according to WHA Executive Vice President Eric Borgerding. “We need to determine the impact that increase will have on hospital reimbursement and on other Medicaid policies to address those surges.”

Borgerding said there is a renewed commitment to address the “hidden health care tax” that was so prominent in messaging just a few years ago.

“We want to partner with our employers because they are the ones most directly impacted by cost shifting from Medicaid,” Borgerding said. “It is also imperative that we engage with candidates to ensure that they know the real impact the cost shift has on our employers and on our state’s ability to compete for economic development.”

“We need to keep this issue front and center with legislators,” Borgerding said, as he noted that dozens of seats in the Wisconsin Legislature are in play this election cycle.

WHA has built a positive, bipartisan rapport in the Capitol, which facilitates communication and cooperation. Most recently, Borgerding said, WHA hosted a legislative briefing on Wisconsin hospitals’ success in improving quality. (See story at [www.wha.org/Data/Sites/1/pubarchive/valued_voice/WHA-Newsletter-6-6-2014.htm#1](http://www.wha.org/Data/Sites/1/pubarchive/valued_voice/WHA-Newsletter-6-6-2014.htm#1))

On June 3, more than 60 legislators, staffers and representatives from other health care organizations attended a WHA-sponsored briefing at the State Capitol. The main points made at the briefing were:

- Statewide commitment to quality/delivering value
- Connect key pieces of recently enacting legislation to WHA’s policy agenda: enabling our members to deliver better care.
- Good health care legislation makes good politics, can be bipartisan
- Proving what we claim with data
- “We are constantly looking for what keeps Wisconsin ahead and how we stay there.”
- Wisconsin’s high-quality/high-value care is an asset for this state that should be both protected and touted.

**WHA campaign positions Wisconsin health care “ahead of the curve”**

The fact that Wisconsin’s health care is an asset to the state’s economic development efforts is well-known to WHA members, but now WHA is taking that message to a much broader audience, especially employers.

Elements of the campaign are coming together, including a new website, which Mary Kay Grasmick, WHA vice president, communications, shared with Board members. (See story on page 1.) WHA is working closely with key stakeholders to create channels for building awareness of Wisconsin’s position as a high-quality, high-value health care provider. WHA will continue to develop and unveil new communications and marketing tools for hospitals, economic development organizations and Chambers of Commerce.  

(continued on page 5)
Continued from page 4 . . . WHA Board

**WHA work well underway as DHS reforms hospital regulation**
The ink is barely dry on the new law that set in motion the reform of the hospital regulations—DHS 124. Laura Leitch, WHA senior vice president and general counsel, provided an historical perspective on hospital regulation, and then brought Board members to the present by explaining the reform process.

Leitch provided an overview of 2013 WI Act 236, that sunsets several subchapters of DHS 124 and establishes the Medicare Conditions of Participation as the state regulatory standard beginning July 1, 2016. WHA has created a task force that will help guide WHA’s positions as the Department of Health Services works to repeal and recreate DHS 124 between now and 2016.

**Network adequacy is on WHA’s watch list**
The exchange marketplace created a new way for consumers to purchase health insurance; however, the product was in some cases not what the purchaser expected. Network adequacy is garnering the interest and concern of state insurance commissioners, consumers, providers and insurers. Joanne Alig, WHA senior vice president, research and policy, said J. P. Wieske from the Wisconsin Office of the Commissioner of Insurance (OCI) is chairing a national committee comprised of representatives from other state insurance commissioner offices who are actively studying network adequacy concerns. Alig said WHA will continue to closely monitor this issue.

**WHA Partners for Patients project continues to advance quality improvements**
Hospitals continue to expand their work to meet the WHA Partners for Patients quality improvement goals. The WHA quality department will continue to offer education and assistance to member hospitals as they monitor Wisconsin’s progress toward meeting the national goals set by the Centers for Medicare and Medicaid Services (CMS). WHA Chief Quality Officer Kelly Court said planning has already started for 2015 related to the Partners for Patients initiative.

Board members congratulated Brenton, Court and her team on receiving the AHA Dick Davidson award for quality improvement. (See story on page 1.)

**Council reports**
**Workforce Development Council:** Chair Nicole Clapp recapped the last meeting and welcomed Jodi Johnson, WHA vice president, workforce and clinical practice as the new staff to the Council. Clapp shared the results of a recent survey of the Council members.

**Finance and Payment:** WHA Senior Vice President Brian Potter said the Council reviewed the HFMA brief on price transparency that specifies the roles of payers, hospitals and consumers. He said the PricePoint website is being updated to improve usability and navigation for consumers and providers.

**WHA Health Law Manuals Webinar Features Mental Health Issues**
WHA will continue its months-long complimentary webinar series on June 26 from 12-1:30 p.m. with a presentation of the WHA Mental Health Issues Manual. This webinar will address Chapter 51 of the Wisconsin Statutes, which regulates admission, both voluntary and involuntary, of patients for treatment of mental illness, developmental disability and drug or alcohol abuse. It will include a discussion of the heightened confidentiality requirements and special rights that apply to such patients.

WHA members are encouraged to register for this webinar on the WHA Mental Health Issues Manual as well as any or all of the other webinars in the series. Sign-up information and additional information about each of the remaining webinars in the series can be found at [http://events.SignUp4.net/HealthLawManual](http://events.SignUp4.net/HealthLawManual). Attorneys in attendance may earn CLE credit.

This webinar will be presented by Heather L. Fields and Nicole S. Rosen of the law firm of Reinhart Boerner Van Deuren. The Health Law Manuals are available for WHA members to view and download at [www.wha.org/healthLawManual.aspx](http://www.wha.org/healthLawManual.aspx). WHA members who would like to access the Manuals should contact [webmaster@wha.org](mailto:webmaster@wha.org) to request a username and password.
TCAB Hospitals Focus on Innovation, Clinical Excellence

The WHA-led Transforming Care at the Beside (TCAB) initiative is gaining momentum as changes that started as an idea from the front-line staff are implemented. The current group of hospitals participating in TCAB are reporting “quick wins” as Jodi Johnson, WHA vice president of workforce and clinical practice continues her round of visits with WHA member hospitals. Johnson most recently visited four hospitals in southern Wisconsin.

“The front-line staff at all the hospitals working on TCAB are doing exceptional clinical work, and they are sharing what they are learning with other units,” Johnson said.

Johnson’s four TCAB visits are summarized below:

Lakeview Specialty Hospital, Waterford, has focused on efficiency by condensing documentation of restraint use to one form. Staff were documenting on several forms until a front-line staff member shared an idea to revise the process. Embracing ideas proposed by staff is part of the TCAB vitality assessment that focuses on front-line staff engagement. The team placed pen lights in each patient room so nurses can check patients’ pupils, which is an important clinical assessment tool. The TCAB team also increased their time at the bedside by moving supplies closer to the patient.

Froedtert & The Medical College of Wisconsin Froedtert Hospital campus in Milwaukee has made significant progress on their goal to decrease the number of steps that are required by front-line staff as they provide patient care. With that goal in mind, the TCAB team identified several areas where necessary supplies could be placed closer to direct patient care areas. The isolation supply cart was the first quick win by placing it in the same place outside patient rooms and decreasing the number of carts needed by more than half. This one change decreased costs and improved efficiency. Fall prevention packets and availability of glucometers provided staff with other necessary supplies at their fingertips.

ProHealth Waukesha Memorial Hospital boasted several improvements in a short time period. The concept of “Break Buddies” has been received well. This concept ensures staff gets appropriate breaks during their shift while ensuring continuous patient care. Prohealth has placed signage to assist staff with equipment usage and began implementing an admission hand-off tool to improve nurse-to-nurse communication. An exceptional characteristic is that staff is receiving surveys to share their input regarding newly-implemented processes. Front-line staff input, and action on their suggestions, improves team vitality, which is key to TCAB success.

The TCAB program has readily spread to specialty units in several hospitals. Midwest Orthopedic Specialty Hospital (MOSH) has shaped the tools and pillars of TCAB to be applicable to their unique surgical departments. Specimen collection and printing of labels was a very cumbersome process involving many wasted steps by front-line staff. Reconfiguring the locations of the printers raised staff satisfaction and showcased the benefits of the TCAB process. MOSH will focus on the placement of supplies at the bedside and hand-off communication in the coming months.

“It is both impressive and exciting to see the desire and determination of frontline staff to capitalize on opportunities to improve patient care,” Johnson said.
Do They Really Know What You Mean?

WHA, in partnership with Health Literacy of Wisconsin, hosted a 90-minute interactive webinar June 11 featuring health literacy expert Paul D. Smith, MD from the University of Wisconsin School of Medicine and Public Health, and Steve Sparks, director of Health Literacy Wisconsin. More than 150 participants from 45 hospitals registered to hear Smith share research-based evidence that poor health literacy is a significant problem that impacts health care quality. There is also a cost associated with poor health literacy. A study from the University of Connecticut estimated that over $100 billion is lost due to poor communication between providers and patients.

Sparks highlighted key attributes of “health literate” organizations and shared opportunities available to health care providers to help patients better understand the care they receive. He introduced several evidence-based strategies that can be used to improve oral and written communications in an effort to increase patient compliance and understanding. Health Literacy Wisconsin also offers a number of programs to assist organizations with their efforts to become more health literate, available at www.healthliteracywisconsin.org.

The WHA Partners for Patients collaborative is offering an initiative to improve patient and family engagement. Health literacy is an important component of improvement in this area. For more information on this and other initiatives, visit the WHA Quality Center at www.whaqualitycenter.org.

Did You Miss the NG 2014 Annual User ID Recertification? Act Now!

All users of the Direct Data Entry (DDE) and DME (Durable Medical Equipment)/Claim Status Inquiry (CSI) Systems are required by Centers for Medicare & Medicaid Services (CMS) to recertify their access annually. National Government Services (NGS) began the 2014 initiative in January of this year.

Due to the number of users who did not respond, NGS, the Medicare Administrative Contractor for Wisconsin, announced that they have extended the deadline to allow more time for users to act before their logon IDs are terminated. NGS staff noted only 60 percent of affected providers have recertified as of the date of the meeting (June 11). Failure to recertify on a timely basis will lead to cash flow delays.

For a limited time beginning June 2, 2014, NGS will make a portal on the NGS website available to all DDE and DME/CSI users who have NOT recertified their logon ID. To recertify, access the web portal http://apps.ngsmedicare.com/applications/recert_2014cont.aspx. On June 16, 2014, the process of disabling IDs that have not yet been recertified will begin and will continue daily until all IDs that have not been recertified have been disabled.

If you have not recertified your ID by June 16, 2014, your access will be interrupted and will not be reinstated until that ID has been recertified. You will have until July 21, 2014 to recertify. If you have not recertified your ID by July 21, 2014, your access will be terminated from the NGS systems. If you use a third party billing agency, you need to forward this notice to them so that they can recertify their IDs. Logon IDs removed from the Medicare system for failure to recertify, must submit a Part A Logon Request or Claims Status Inquiry request online at www.ngsmedicare.com to reinstate the user ID. All forms must be submitted online, printed, signed, dated by the authorized official and faxed to 502-889-4701 within 10 business days of the online submission.
WHA, RWHC, ORH Discuss Regulatory Issues with DQA

DQA releases nurse aide training “bridge” program memo

Staff from the Wisconsin Hospital Association (WHA), Rural Wisconsin Health Cooperative (RWHC), and Office of Rural Health (ORH) met with the Division of Quality Assurance (DQA) to discuss various regulatory issues during the quarterly “Hospital Forum.” In addition to DHS 124, Life Safety Code, and other issues, DQA alerted the group to two recent memos.

DQA has released a memo providing information about the nurse aide training “bridge” program from 2013 Wisconsin Act 357. The new law allows the Department of Health Services to approve “bridge” nurse aide training programs designed for individuals who received nurse aide training of less than 120 hours in another state that, when combined with an instructional program in the other state, will result in the individual receiving substantially the same instruction as an individual who completes the 120 hour training in Wisconsin. DQA also discussed a recent memo from the Centers for Medicare and Medicaid Services concerning reporting requirements for deaths associated with restraint or seclusion.

Copies of the memos are available on the DQA website: www.dhs.wisconsin.gov/rl_DSL/Publications/BQAnodMems.htm.

Continued from page 1 . . . WHA Wins National Award for Improving Health Care Quality and Safety in Wisconsin

reduction. This eliminated readmissions for more than 3,500 patients and reduced health care spending by more than $34 million.

WHA also worked with birthing hospitals in Wisconsin to reduce early elective deliveries (EEDs), or babies born at the request of the mother or for non-medical reasons before 39 weeks gestation. Since mid-2012, Wisconsin hospitals have reduced EEDs by 78 percent, with an associated estimated cost savings of more than $210,000.

“Wisconsin is a recognized leader in health care quality and value. Our goal is to ensure that every patient in our state receives the finest care possible no matter where they go for that care. Through our collaboration on quality improvement, that goal is in range,” said WHA President Steve Brenton. “As much as hospitals have been able to significantly improve care, however, Wisconsin health care leaders are keenly aware that their work is far from over.”

“We are extremely honored to receive this award. It has been very rewarding for the entire quality team at WHA to work with our members to achieve such meaningful results and see how we have increased the knowledge and capacity for improvement in our state,” said WHA Chief Quality Officer Kelly Court. “The new partnerships we’ve formed and our shared commitment to improve the quality of care in every one of our hospitals will maintain Wisconsin’s position as a state that consistently delivers high-quality, high-value care.”

The award is named for AHA President Emeritus Dick Davidson, who strongly promoted the role of hospital associations in leading quality improvement during his tenure as AHA president and as president of the Maryland Hospital Association. Wisconsin and the Connecticut Hospital Association were the only two state hospital associations to receive the award this year.