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EDUCATIONAL EVENTS

September 21

CMS Pharmacy and Medication: Complying with the Hospital CoPs and Changes
Webinar

October 13

Mind the Gap: Repairing the U.S. Healthcare Workforce
Webinar

October 20

SHIP Bag Lunch Webinar Series Session 2: How Does Your Hospital Stack up Against Its Peers: A Focus on Quality Metrics
Webinar

WHA Joins Local Hospital Leaders for Fort McCoy Army and State Dept. Medical Roundtable

Stress the need to expand health care capabilities inside Fort McCoy

WHA President and CEO Eric Borgerding and Vice President of Federal and State Relations Jon Hoelter joined area hospital leaders from Mayo Clinic Health System, Gunderson Health System, Tomah Health, the Tomah VA, and Black River Memorial Hospital at Fort McCoy on Sept. 9 for a meeting with U.S. Army medical staff and U.S. State Department representatives to discuss coordination and capacity of medical care for the Afghan refugees currently housed there. Staff from Monroe County Public Health Department and the Wisconsin Department of Health Services also participated.



Colonel Matthew Fandre, a family practice doctor and Fort McCoy Task Force surgeon, thanks area hospitals for their generous support of Operation Allies Welcome.

According to staff from Fort McCoy, the base is currently housing about 13,500 refugees as guests until they can be resettled at a community of their choosing in the
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DHS Again Asks Nursing Homes, Hospitals to Use EMResource Bed Tracking System

The Wisconsin Department of Health Services’ (DHS’s) Division of Quality Assurance and Division of Public Health again is asking all nursing homes, hospitals, EMS providers and others to use the EMResource Bed Tracking System during the COVID-19 pandemic.

In a [memo](#) to nursing homes, hospitals, emergency medical service (EMS) providers and local and tribal health departments, DHS wrote, “The EMResource Bed Tracking System tracks bed availability, identifies the number of patients pending post-acute care discharge, and provides a real-time picture of bed capacity in both hospitals and nursing homes across the state.” DHS said the system “has the ability to save hospitals and nursing homes many hours of searching for beds by phone and email.”

DHS hopes the system will help hospital discharge teams find the right place for each person at the right time and allow nursing home admission coordinators to have the opportunity to receive patient referrals and focus on transition of care. DHS also believes reporting the data is critical to making decisions on staffing resources statewide.

To register with EMResources, [click here](#). For questions or more information about the program, contact DHS at DHSEMRResource@dhs.wisconsin.gov.

DQA Highlights Pandemic-Related Guidance and Flexibilities

WHA and the Rural Wisconsin Health Cooperative (RWHC) met with Wisconsin Division of Quality Assurance (DQA) staff this week to exchange information and share resources on various issues important to Wisconsin hospitals.

During the meeting, DQA discussed the Centers for Disease Control and Prevention (CDC) [Interim Infection Prevention & Control Recommendations for Healthcare Personnel During the Coronavirus 2019 \(COVID-19\) Pandemic](#), which the CDC updated on Sept. 10, and related survey findings. In particular, DQA encourages hospitals to review the screening requirements for individuals entering hospitals and source control (personal protective equipment – PPE) capacity standards.

CDC is hosting a webinar on Sept. 17 in which the agency will review and answer questions on the updated guidance. Registration for the webinar is available [here](#).

DQA also provided two other documents hospitals might find useful: [OSHA Lessons Learned: Frequently Cited Standard Related to COVID-19 Inspections](#) and the [DHS Medical Stockpile Access Policy and Request Form](#).

DQA recognized ongoing health care workforce challenges and highlighted the flexible training opportunities available for temporary nurse aides and emergency nurse aides during the pandemic and DQA's work to approve emergency training sites. Information about these opportunities is available [here](#).

Related to the increasing number of hospital inpatients, DQA said hospitals again have been contacting the agency about expanding services and locations temporarily. [DQA Memo 20-001](#), which establishes the process for hospitals to expand their acute care inpatient services and locations temporarily during the pandemic, and [DQA Memo 20-002](#), which provides clarification and guidance to hospitals regarding the Centers for Medicare & Medicaid Services (CMS) issuance of blanket waivers of Medicare regulations under Section 1135 of the Social Security Act, have been updated and remain in effect.

DQA also provided helpful details concerning the hospital certificate of approval application process, survey activity and trends and DQA staffing.

Telehealth Widely Embraced at Wisconsin Health News Panel

WHA-championed Medicaid parity statute highlighted as key to Wisconsin's pandemic response

A Wisconsin Health News virtual panel discussion on Sept. 14 on the future of telehealth covered a wide range of telehealth policy topics, with all panelists agreeing that the COVID pandemic significantly jump-started the widespread embrace of telehealth services.

The diverse panel included Jim Castellano, telehealth and virtual care manager at Marshfield Clinic Health System; Jim Jones, state Medicaid director at the Wisconsin Department of Health Services; Rep. Amy Loudenberg (R-Clinton); John Nygren, executive director at Wisconsin Association of Health Plans; and Dr. John Schneider, chief medical officer at Milwaukee County Behavioral Health Division.

The ability of telehealth services to expand access to care was universally touted by the panelists, and panelists noted that while the widespread use of telehealth emerged during the COVID pandemic, services delivered by telehealth will be here to stay in the long term.

Many of the topics discussed during the panel presentation touched on multiple public policy issues engaged in by WHA, including implementation of the 2019 Act 56 Medicaid telehealth parity law, continuation of Medicaid coverage for audio-only telehealth services, addressing telehealth barriers in Wisconsin's licensure rules, geographic-based telehealth limitations in Medicare and private insurer coverage and payment of telehealth services.

The WHA-championed 2019 Act 56 Medicaid telehealth parity law was particularly cited by Medicaid Director Jones as critical to the ability of Wisconsin's Medicaid program to quickly pivot to expand telehealth access early in the COVID pandemic. That legislation was developed over several months by WHA's Telehealth Task Force. Rep. Loudenberg was a co-author of the legislation.

"I don't know who had a crystal ball, but thank goodness the Legislature and the governor enacted legislation that changed the telehealth landscape with Act 56 back in November 2019," said Jones. "In March, all of a sudden we are in a pandemic, and we need to make sure our members are able to receive services. So, we ripped the band-aid off. We said that any service that could be provided via telehealth and did not require an in-person interaction could be done under the telehealth policies that were out there."

WHA's Telehealth Forum meets monthly to discuss telehealth topics and guide WHA's telehealth advocacy efforts. WHA members can contact WHA General Counsel [Matthew Stanford](#) or Vice President of Federal and State Relations [Jon Hoelster](#) to participate.

Wisconsin Hospitals State PAC & Conduit Annual Campaign Reaches 72% of Goal

See full contributor list

The Wisconsin Hospitals State PAC & Conduit continues its annual fundraising campaign with a total of \$233,179 contributed to date by 167 individuals. That is 72% of its goal of raising \$325,000 from 300 individuals in 2021.

See the 2021 contributor list to date on page 5.

“Join your peers across the state in supporting candidates for state office who value hospitals and health systems by making a personal contribution to the Wisconsin Hospitals State PAC and/or Conduit,” said WHA Vice President of Advocacy Kari Hofer. “Now is the time to make your personal contribution as the annual campaign heads into the final quarter of the year,” Hofer continued.

The Wisconsin Hospitals State PAC & Conduit annual campaign runs through Dec. 31, 2021. Individuals can make a one-time contribution or set up a recurring contribution to spread out their commitment through the year. To ensure your name is on the next list, you can make a personal contribution online at www.whconduit.com or by contacting WHA's [Kari Hofer](#) at 608-268-1816 or [Nora Statsick](#) at 608-239-4535.



WHA Resource Spotlight

WHA Expert Speakers Bureau

To help keep hospital and health system leadership teams and boards of trustees abreast of health care industry trends, challenges and opportunities, the Wisconsin Hospital Association hosts an expert speakers bureau. WHA members and partner organizations are welcome to include an expert from WHA as a speaker in a regular meeting or annual leadership or board retreat.

WHA experts are regularly featured in the media and as presenters at annual gatherings of physician leaders, nurse leaders, health care finance leaders and human resource professionals in Wisconsin, as well as for the Wisconsin Chapter of the American College of Health Care Executives.

The perspectives and expertise of WHA staff on health care topics, issues and initiatives can add value to meetings, with presentations on a wide range of subjects:

- Current legal and regulatory updates
- State legislative and budget updates
- Federal legislative updates
- Strategies to improve your advocacy efforts
- Health care reform
- COVID-19
- Behavioral health
- Dental care access
- Post-acute care
- Reimbursement
- Health care workforce
- Quality and patient safety
- Data visualization and analysis
- Emergency preparedness

Additional topics can be covered, and WHA is happy to tailor an address to specific organizational requests. Contact WHA Vice President of Education and Marketing [Leigh Ann Larson](#) to learn more.



WHA President and CEO Eric Borgerding (bottom right) participates in Fort McCoy discussion with local hospital leaders, including Dr. Paul Mueller (center) and Tia Meyer from Mayo Clinic Health System.

U.S. While it is unclear how long the resettlement process will take, it is expected that more evacuees will cycle in as current Fort McCoy guests are resettled. Fort McCoy officials estimated about 60,000 Afghan refugees are currently being housed in seven military bases across the U.S., with another 65,000 currently housed in other countries, many of whom may ultimately come to the U.S. for resettlement.



Dr. Paul Mueller and Tia Meyer from Mayo Clinic Health System (left) participate in a discussion about Fort McCoy's medical capabilities. Also participating are Dr. Greg Meekins and Karen Long (center) from Tomah VA, and Dr. Ryan Westergaard, CMO from WI DHS.

Colonel Michael Poss, garrison commander, provided a brief background on the history of Fort McCoy and explained it was chosen as a site due to its ability to quickly scale up and provide housing for a large number of guests. Colonel Matthew Fandre, the Task Force McCoy surgeon who oversees medical operations thanked the area hospital leaders for their immense assistance, noting the operation could not succeed without their support. He acknowledged the base's medical operations have experienced many growing pains and issues to iron out as planners are developing systems to care for the guests' many medical needs. He expressed his gratitude to hospitals for going above and beyond what was expected of them.

Dr. Mary Reed, who is a family practice doctor that works for KBR, the federal contractor providing health care provider staffing for the medical clinic at the base,

apologized for the burden the surrounding hospitals and health systems have had to deal with due to guests needing hospital care outside of Fort McCoy. She said the clinic currently has about 200 staff (though not all are medical) and that it has been gradually adding more clinical capabilities.

During the discussion, Borgerding said the main concern he has heard from hospitals has been over the tight capacity that has resulted from a health care system severely stressed with the recent COVID surge. Borgerding stressed the importance of Fort McCoy expanding and keeping as much medical care as possible on the base itself to preserve capacity for the area's health care system.

"Both WHA and area hospitals are very proud to help with this important effort, to answer the call, and they are playing a critical role right now," Borgerding said during the roundtable discussion. "But when you add the equivalent of another Tomah and

(continued on page 6)

Political Action Fundraising Campaign Contributors

Contributors \$10,000+ (Leaders Circle)

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Size, Tim & Pat Rural Wisconsin Health Cooperative
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Waal, Shelly Froedtert Health
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(continued on page 6)

(Political Action Fundraising Campaign Contributors . . . continued from page 5)

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		Wonder, Christine	Edgerton Hospital & Health Services

WHA Joins Local Hospital Leaders for Fort McCoy Army and State Dept Medical Roundtable . . . from page 4)

another Sparta to the area with little notice, there must very soon follow additional resources, more care capability brought into Fort McCoy so that more services are delivered at the fort and fewer supplies and other resources are requested from already stressed area hospitals and health systems.”

Colonel Fandre said they are trying to minimize the need to send guests outside of Fort McCoy as much as possible and have been trying to streamline operations and reduce unnecessary emergency department calls and admissions. However, he said top brass have determined they will not be establishing a full military hospital on the base, but only currently plan on maintaining largely primary care clinical capabilities.

One of the issues raised by local hospital leaders was the fact that some guests are showing up without proper identification, creating challenges for continuity of care. Fort McCoy staff acknowledged that is an issue they are working to resolve. They aim to ensure all guests who are transferred to hospitals are first screened by the Fort McCoy clinic and sent out with proper ID and documentation. Colonel Fandre thanked hospital leaders for hosting a daily morning coordinating call to help resolve these and many other issues.

The meeting closed with a bus tour of the base, including the sites of ongoing medical screenings. While Fort McCoy staff were not able to account for the total number of medical screenings completed, they acknowledged that was a work in progress, including accounting for the number of pregnant Afghan women. Borgerding noted that WHA had been working with the Wisconsin Department of Health Services and the Wisconsin Congressional Delegation to urge support for additional resources to be sent to Fort McCoy to boost onsite health care capacity, including its prenatal and post-partum medical capabilities and minimize complications with hospital births. He said WHA will continue to follow this closely and advocate for more resources to support area hospitals.

Contact WHA Vice President of Federal and State Relations [Jon Hoelter](#) with questions.

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