

Wisconsin Rural Health Conference 2003

Building Momentum, Forging Ahead

June 25-27

Conference

In Review



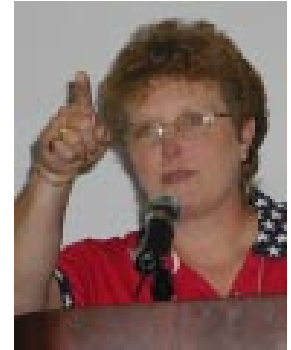
For the second year, the Wisconsin Hospital Association in collaboration with the Wisconsin Office of Rural Health, Wisconsin Primary Health Care Association and the Rural Wisconsin Health Cooperative sponsored the Rural Health Conference. Setting a new attendance record at a WHA Rural Conference, more than 267 conferees gathered at The Kalahari in Wisconsin Dells June 26-27, 2003.



*Barb Duerst, RN, MS,
director, Wisconsin Office
of Rural Health*

WHA Rural Hospital Council Chair Bobbe Teigen welcomed the participants acknowledging the "commonality among all of us here." She encouraged hospitals to maintain a strong network and share experiences. She thanked the 33 exhibitors, which included 29 WHA corporate members for their continued support of rural hospitals.

Barbara Duerst, director, Wisconsin Office of Rural Health, said she was pleased with the synergy that has been created as a result of building partnerships with other associations and organizations that work on issues related to rural health.



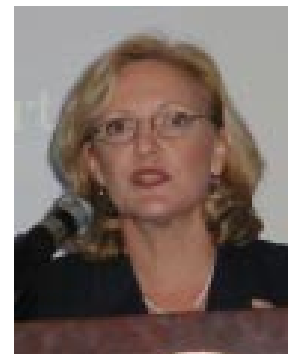
*Bobbe Teigen, chair, WHA
Council on Rural Health*

The Perfect Storm For Rural Health Issues

The past few months have created "the perfect storm" for rural health, according to Marcia Brand, Ph.D., director of health resources and services administration at the Federal Office of Rural Health Policy in Washington DC. "Politics, policy and personalities at the federal level have turned into an opportunity for rural health that we might never see again," according to Brand.

"Secretary Thompson understands rural America, President Bush has been explicit in his support of rural America and the Senate has been a friend to rural health," according to Brand. "We are going to get a lot of things that we have wanted so we can figure out what to do better next. There probably won't be another great big fix for rural anytime soon."

Brand said in addition to health issues, access to oral health, mental health and transportation are key priorities in rural communities.



*Marcia Brand, Ph.D.,
director of Health Re-
sources and Services
Administration*

"The past few months have created 'the perfect storm' for rural health. Politics, policy and personalities at the federal level have turned into an opportunity for rural health that we might never see again."--Marcia Brand

State Budget Enters The Final Stretch

The state budget took center stage as Eric Borgerding, WHA senior vice president, Mari Freiberg, associate director, Wisconsin Primary Health Care Association, and Tim Size, executive director, RWHC presented their perspectives on events brewing under the capitol dome.

The stage is set for the final and most important phase of the state budget as it has now reached the Governor's desk. Borgerding said the good news is that there were no across the board cuts to the medical assistance (MA) reimbursement rates and no enrollment caps, freezes or benefit reductions in MA or BadgerCare. He said WHA remains hopeful that the rural health supplement and Graduate Medical Education are funded in the budget.

-continued.

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State budget cont'd...



Eric Borgerding, Senior VP, WHA

“With a physician shortage on the horizon, it is important to support GME because it supports rural and family medicine in 33 hospitals in Wisconsin,” Borgerding said. “Without GME, Wisconsin will have a difficult time retaining and attracting physicians.”

Borgerding’s view on the problem that just won’t go away? “Will cost shifting for rural and all other hospitals get worse? Absolutely. Cost shifting will be exacerbated. The legislature understands that it is a hidden tax,” Borgerding explained. “Combine that problem with the fact that there is less tolerance on the part of employers and private payers to continue to foot this bill.”

Freiberg thanked WHA for their support of her smaller organization and congratulated the WHA public policy team for their successes at getting funding restored for several key programs. “For you to be represented by a team that was able to get anything restored” in the current state budget environment was amazing,” Freiberg told the audience.

The Wisconsin Primary Health Care Association advocates for community health centers and for health centers that serve migrant or homeless populations. Freiberg said one of the big issues facing rural areas is access to oral health.

RWHC’s Size predicts a private payer revolt against cost shifting and said new dollars will be needed to replace a slowly dying “subsidy” from the private sector. “We are increasingly entering into price competition in rural hospitals and we can’t come into that marketplace with a heavy cost shift.” A shift, described by Size, that is greater in the rural hospitals than for their urban counterparts.

“Will cost shifting for rural and all other hospitals get worse? Absolutely. Cost shifting will be exacerbated. The legislature understands that it is a hidden tax.”--Eric Borgerding

Wisconsin Hospital Quality Reporting Program



Pictured left to right: Tim Size, RWHC; Dana Richardson, WHA; Greg Simmons, MetaStar; Ed Kramper, MD, WHA

Dana Richardson, WHA vice president for quality programs; RWHC’s Tim Size; and Greg Simmons, president, MetaStar, discussed the movement to provide quality reports on health care providers. Richardson compared the move away from defined benefit plans to defined contribution plans as being similar to the changes that occurred within retirement plans where the employer managed the retirement plan to now, where employees make their own investment decisions.

“Employees will pick what they want to spend their money on, and through our quality reporting program, we will provide them with information on the quality and safety of care in our hospitals,” according to Richardson.

Simmons said MetaStar is currently working with the Centers for Medicare and Medicaid Services on two quality projects—nursing homes and home health care. He said CMS is very interested in quality and that the response from nursing homes and home health care providers to participate in MetaStar-sponsored quality improvement projects has been very positive. MetaStar is also partnering with WHA on the hospital quality reporting program.

“By publicizing comparable quality measures we encourage consumers to use this information to make informed decisions,” Simmons said.

Size reviewed his involvement with the LeapFrog workgroup that looked at alternatives to applying the current “Three Leaps” to rural hospitals. The workgroup told the LeapFrog Board that the ICU and Medication Safety leaps were not applicable to rural hospitals and that they should use measures developed by the National Quality Forum instead to determine comparable levels of quality. Action by LeapFrog is pending.

Rural Conference Breakout Sessions

New Critical Access Hospital Initiatives

Bonnie Laffey, RWHC director of programs/services; Cathy Frey, Advance Consulting; Mary Kay Grasmick, WHA vice president, communications; and moderator George Quinn, WHA senior vice president, presented their work to date on three new initiatives for critical access hospitals that focus on EMS, incident reporting and public relations and marketing.



Pictured left to right: Cathy Frey, Advance Consulting LLC; Mary Kay Grasmick, VP Communications, WHA; Bonnie Laffey, RWHC director of programs/services; George Quinn, Sr. VP, WHA



Robert Dwyer, DDS, chief medical officer, DHFS

Improving Oral Health in Rural Communities

A key issue in rural communities is ensuring that all populations have access to oral health. The dental access crisis in Wisconsin for persons with few resources is very real. Robert Dwyer, DDS, chief medical officer, DHFS and Ray Myers, chair, Healthy Smiles for Wisconsin and assistant administrator at St. Joseph's Hospital in Chippewa Falls, shared their perspectives on the issue and offered steps that communities can take to help patients access dental services.

Provider-based Clinic vs. Rural Health Clinic Issues

"Put in a nutshell, traditional Medicare reimbursement is not adequate to reimburse the cost of care. Medicare pays about 60 cents on the dollar and rural areas care for a disproportionately high number of Medicare patients" according to Jeff Bramschreiber, CPA at Wipfli Ullrich Bertelson. But additional reimbursement may be available based on how the rural hospital structures their relationship with their medical groups. Bramschreiber indicated that changing relationships with a provider group is not easy. In addition to meeting the defined requirements, these changes may impact the provider's direct reimbursement.



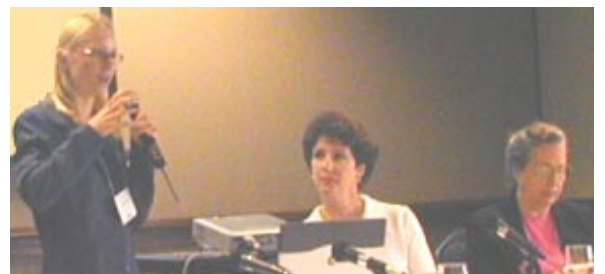
Jeff Bramschreiber, CPA, Wipfli Ullrich Bertelson LLP

"Medicare pays about 60 cents on the dollar and rural areas care for a disproportionately high number of Medicare patients."--Jeff Bramschreiber

Successful Community Health Initiatives

Three community health programs, two of which are specifically designed to meet the needs of underserved populations were presented by Susan Noble, Connect for Healthy Kids, Platteville; Alice Elm and Barbara Stoddard, Great Lakes Inter-Tribal Council for the Honoring Our Children Project; and Amy Tabernero, from the Hispanic/Latino Health Outreach Program, Waupaca.

The Honoring Our Children Project is designed to increase the chances of infant survival through outreach to families and community education. Connect for Healthy Kids seeks to increase the physical, social, emotional and cognitive health of children and families in Grant County through centralized coordination of services. The Hispanic/Latino program is a collaborative project designed to increase by 50% access to and utilization of health care services.



Pictured left to right: Amy Tabernero, Hispanic/Latino Health Outreach Project; Susan Noble, Connect for Health Kids; Barbara Stoddard, Honoring Our Children Project



Dr. Steven Barzci, interim director, VA Geriatric Research, Education and Clinical Center

Geriatric Care: How to Better Serve Seniors in Rural Communities

Steven Barzci, MD, interim director, VA Geriatric Research, Education and Clinical Center said a large number of Wisconsin’s more senior residents live in rural communities, which will pose special challenges to rural health care providers. Barzci presented information about demographics and said it will be important for physicians in training to understand the delivery of care to older patients.

Effective Governance for Hospital Trustees: Improving Board Performance

David Hoffman, Ph.D., president of Hoffman and Associates, provided his insight on effective governance for hospital trustees. Hoffman stressed that achieving good governance is the result of making a long-term commitment to development of governance skills. Critical competencies of high performing boards include understanding the organization from a strategic, contextual, analytical, political, educational and interpersonal context.



David Hoffman, PhD, president, Hoffman & Associates, Ltd., Health Care Consulting

Trustee Education Session

WHA President Steve Brenton shared with hospital trustees the results of a recent WHA membership survey that outlines quite clearly what hospital CEOs believe should be top Association priorities.



WHA President Steve Brenton addresses trustees at an education session.

Brenton also discussed with the group some of the key issues that hospitals face, including: the state budget, Medicare reimbursement, health care costs and workforce.

Rural Health Advocacy 101

Stephanie Vance, AdVanced Consulting, led a lively session in effective advocacy by first outlining the essentials of advocacy: relationships, support, concise information and clear messages. Once the essentials were uncovered, Vance led a legisla-

tive debate, encouraging all participants to adopt a role in the debate simulation. Participants took on the roles of legislators, lobbyists, journalists, conservatives, liberals and undecided. Through timed debates, floor statements and lobbying, those attending experienced what a lawmaker faces during a legislative session. Vance closed by encouraging attendees to build an advocacy plan within their organizations and use it to move hospital issues forward.



Stephanie Vance, AdVanced Consulting

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