WHA Aggressively Working on Multiple Federal Fronts  
*In DC June 10 to push changes to IPPS rule, FMAP increase and more*

The Wisconsin Hospital Association (WHA) is actively engaging on multiple federal fronts ranging from changes to proposed Medicaid increases for states to fighting extreme Medicare cuts to hospitals under the Inpatient Prospective Payment System (IPPS) rule, and traveled to Washington, DC June 10 to make the case for these and other issues.

**FY 2011 IPPS Proposed Rule (Behavioral Offset)**

In Washington, WHA advocated strongly against proposed Medicare cuts under the Fiscal Year 2011 IPPS rule. One of the more egregious provisions is a 2.9 percent coding “offset” that seeks to recoup half of the payments made in FYs 2008 and 2009 that the Centers for Medicare and Medicaid Services (CMS) claims is due to documentation and coding changes as the nation moved to the new MS-DRG coding system. For Wisconsin hospitals, the 2.9 percent cut amounts to over $51 million statewide (see box at right). *(continued on page 3)*

<table>
<thead>
<tr>
<th>Rep. Tammy Baldwin</th>
<th>$9.6 million</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rep. Steve Kagen</td>
<td>$5.0 million</td>
</tr>
<tr>
<td>Rep. Ron Kind</td>
<td>$4 million</td>
</tr>
<tr>
<td>Rep. Gwen Moore</td>
<td>$10 million</td>
</tr>
<tr>
<td>Rep. David Obey</td>
<td>$5.0 million</td>
</tr>
<tr>
<td>Rep. Tom Petri</td>
<td>$3.6 million</td>
</tr>
<tr>
<td>Rep. Paul Ryan</td>
<td>$4.6 million</td>
</tr>
<tr>
<td>Rep. Jim Sensenbrenner</td>
<td>$9.4 million</td>
</tr>
<tr>
<td>Total Statewide Impact</td>
<td>Cut of $51 million</td>
</tr>
</tbody>
</table>

**What Can You Do To Help?**

Contact Your Wisconsin House Member and ask him/her to sign onto the “Dear Colleague” letting fighting these cuts. The letter is being circulated by Reps. Joe Crowley (D-NY) and Pete Sessions (R-TX) to urge CMS to remove these cuts from the final IPPS rule. Contact Jenny Boese at jboese@wha.org with questions.

(continued on page 4)

New WHA/WCHQ Collaboration Announced

WHA and Wisconsin Collaborative for Health Care Quality (WCHQ) CEOs signed a memorandum of understanding this week that will merge the senior-level performance measures/quality staff position that each organization currently has vacant into a single position. The new chief quality officer will lead the common interests and vision of the groups and their shared commitment to improving performance via measuring and publicly reporting clinical and other measures.

“There are compelling reasons for WHA and WCHQ to collaborate on having a jointly-employed chief quality officer,” said WHA President Steve Brenton. “The new health reform legislation will accelerate performance measurement and improvement, thus presenting a real opportunity for Wisconsin to advance its nationally-recognized leadership in quality and transparency.”

Brenton also noted that Wisconsin has numerous local and regional integrated delivery organizations and that integrated systems require integrated measures. “Health reform will lead to future payment reform that will require the linkage of ambulatory, acute and post-acute measures into episodes of care that examine quality and resource use,” Brenton said. “We need to be proactive in anticipating the evolution of the measurement landscape, and this new arrangement positions us for the future.” *(continued on page 4)*
2010 Wisconsin Hospitals PAC and Conduit Fundraising Campaign Begins

We’re just three weeks into the 2010 fundraising campaign and the Wisconsin Hospitals PAC and Conduit booked more than $65,000. This total is $10,000 more than raised at this time in 2009. Of the total raised to date, 90 percent of the contributions have been directed to the Conduit.

Last year Wisconsin Hospitals PAC and Conduit supporters contributed just over $185,000.

The 2010 campaign goal is to raise $215,000 and increase the number of participants. “People are paying attention to elections and want to be involved,” said WHA Executive Vice President Eric Borgerding. “This is a dynamic election year with nearly 20 percent of the state Legislature retiring and some of the most competitive federal races in a long time.”

Watch for individual contributors’ names to be published in the June 18 edition of The Valued Voice. For more information contact Jodi Bloch at 608-217-9508 or Jenny Boese at 608-274-1820.

Health Reform Implications for Tax-Exempt Hospitals Focus of June 30 Seminar

As part of the sweeping reform of the U.S. health care system, tax-exempt hospitals must take swift action to ensure compliance with new requirements under the Patient Protection and Affordable Care Act of 2010 in order to maintain exempt status.

On June 30, join hospital tax-exemption experts David Edquist of von Briesen & Roper, Don Millis of Reinhart Boerner Van Deuren, and other experienced presenters at WHA’s seminar focused on the new requirements and the proactive measures necessary to protect a hospital’s tax-exempt status. In addition to highlighting the specific requirements related to Schedule H, community needs assessment and the financial assistance policies, the expert faculty will share insight on other important tax issues for non-profit hospitals, including recent property tax exemption challenges.

This seminar will be held June 30 at the Sheraton Hotel in Madison. Register today and take advantage of the special team discount. More information can be found in the brochure included in today’s packet. Online registration is available at www.wha.org/education/taxexempt6-30-10.aspx. For registration questions, contact Lisa Littel at 608-274-1820 or email llittel@wha.org.

CMS Schedules Accountable Care Organization Listening Session

June 24 open door forum

The Affordable Care Act passed with the intent to improve the health care delivery system through incentives to enhance quality, improve beneficiary outcomes, and increase the value of care. One of the key delivery system reforms in the Act is the encouragement of Accountable Care Organizations (ACOs). The Centers for Medicare and Medicaid Services (CMS) anticipates that ACOs will facilitate coordination and cooperation among providers to improve the quality of care for Medicare beneficiaries and reduce unnecessary costs.

While in Washington, D.C. June 10, WHA staff learned that CMS intends to hold its first ACO stakeholder listening session on June 24. The session will be a special open door forum; details will be posted on the following Web site: www.cms.gov/OpenDoorForums/05_ODF_SpecialODF.asp#TopOfPage

CMS intends to publish by this fall a Notice of Proposed Rulemaking that will provide further details of the program. To read more about the Act’s ACO initiative, see CMS’s Questions and Answers at: www.cms.gov/OfficeofLegislation/Downloads/AccountableCareOrganization.pdf.
Continued from page 1 . . . WHA Aggressively Working on Multiple Federal Fronts

In a letter sent June 7 from WHA President Steve Brenton to Wisconsin’s Congressional Delegation, Brenton said:

“With this coding offset, CMS is assuming that all increases in hospital payments are due solely to hospitals ‘upcoding’ their patients into more medically-severe codes. WHA and many others do not believe the CMS analysis reflects what has actually been real changes in case mix...[and] the proposed IPPS cut will result in hospitals being paid less in FY 2011 than in FY 2010.”

WHA as well as the American Hospital Association will submit comment letters to CMS on this rule by the June 18 comment deadline.

**FY 2011 IPPS Proposed Rule (CAH provider taxes; WHA spearheads multi-state coalition)**

WHA is also coordinating a multi-state effort to fight a proposed new policy CMS included in the comments of the FY 2011 IPPS rule related to critical access hospital (CAH) provider taxes. The new policy seeks to allow CAHs to only use the net expense of a provider tax on their Medicare cost reports. CMS indicates its contractors would make these determinations on a case-by-case basis.

“CMS contends this is a ‘clarification’ of previous policy and indicates it will have no financial impact on CAHs. WHA strongly disagrees with their characterization and views this as the new policy it is—and one that will cost Wisconsin’s critical access hospitals millions of dollars,” said WHA Executive Vice President Eric Borgerding.

While CMS could have articulated a policy of this sort in the past, it has never done so. Additionally, WHA believes there is no basis for CMS to claim this policy will have no financial impact. To the extent fiscal intermediaries will disallow provider taxes by offsetting revenue on cost reports they are currently auditing, CAHs will potentially owe millions of dollars to Medicare, dollars that they had every expectation they would be paid.

WHA is spearheading a coalition of the 22 states that are also impacted under the new policy. The coalition is discussing a potential “dear colleague” letter, individual letters from state associations, contacts to legislators and having legislators write CMS. In addition, WHA will submit its own comment letter to CMS on this provision by the June 18 deadline and discussed this issue with Members of Wisconsin’s Delegation while in DC June 10.

**Congressional Jobs Legislation (FMAP, SGR, “72 hour rule”)**

Legislation currently pending in Congress includes important provisions for hospitals, including extending Medicaid increases to states for another six months and stopping physician payment cuts for another 19 months. Unfortunately, that same legislation also includes a $3.7 billion cut to hospitals under changes to the “72 hour rule.”

The Medicaid increases, know as Federal Medical Assistance Percentages (FMAP), were originally included in the American Recovery & Reinvestment Act of 2009 (ARRA) to help stabilize the economy through 2010 as states struggled with ballooning Medicaid rolls. The Senate version of the “jobs” legislation includes extending the increases another six months until June 2011, though a final vote on the legislation has yet to be taken. The House version does not include the increases.

While these FMAP increases have worked as anticipated, Medicaid programs across the country, including Wisconsin’s, are still facing historic challenges, prompting many, including the nation’s governors, to urge extending these an additional six months. During a press conference June 9 with other state governors, Wisconsin Governor Jim Doyle indicated Wisconsin’s Medicaid program has seen a 26 percent increase and without the FMAP dollars our state will see “dramatic cuts to nursing homes and medical facilities.”  

(continued on page 4)
Continued from page 3 . . . WHA Aggressively Working on Multiple Federal Fronts

This is why WHA continues to aggressively push for the extension—through June 2011—of the FMAP increases and has hand-delivered letters in DC to Wisconsin’s Delegation and mobilized WHA’s HEAT grassroots network this week. At least 150 HEAT contacts have already gone out to Wisconsin’s two Senators—Kohl and Feingold—urging their support for the FMAP increase. If you have not contacted your legislators yet, please do so today.

Both the Senate and House versions address the SGR physician reimbursement formula by delaying a 21 percent Medicare payment cut for physicians that took effect June 1 and replacing it with a 2.2 percent rate increase for the rest of this year and an additional 1 percent increase in 2011.

Unfortunately, both the Senate and House versions include a change to Medicare’s “72 hour rule” to prevent hospitals from submitting separate Medicare reimbursement claims for inpatient and outpatient therapeutic care provided within three days of a hospital admission. This provision will cost the nation’s hospitals an estimated $3.7 billion. WHA has conveyed its opposition to this provision to Wisconsin Members of Congress.

Healthcare Quality Coalition (HQC)

WHA also joined more than a dozen other health care organizations from across the country in DC on June 10 to continue the push for reforming Medicare into a system that reimburses based on value (high quality, cost-efficient care) over volume. The coalition met with agency officials and Congressional members on various provisions originally included under health reform legislation, Patient Protection and Affordable Care Act.

Among the priority issues discussed were ensuring Accountable Care Organizations provisions do not further disadvantage high performing organizations like those in Wisconsin and elsewhere, and discussing several studies agreed to by the Obama Administration which will be undertaken by the Institute on Medicine related to quality/value and Medicare geographic payment adjustments.

Health Information Technology (Meaningful Use)

Finally, WHA continues to push for changes to proposed health information technology rules (HIT), which establish the requirements for hospitals and other providers to reach meaningful use and thereby, receive HIT incentive payments. WHA, AHA and others have strongly cautioned the federal Health & Human Services agency to lower the threshold for reaching meaningful use. In its comment letter, WHA alerted HHS that at this time, not one Wisconsin hospital surveyed indicated it could currently meet meaningful use and a full 50 percent indicated they would not meet meaningful use by 2015, the time when Medicare penalties kick in for failure to do so. HHS is expected to release final meaningful use rules are expected in late June or early July.

“There are so many crucial things happening right now in Washington that dictate an increased WHA presence,” said Borgerding, who recently returned from a third trip to the nation’s Capitol in the past several weeks. “We are ramping up our on-the-ground efforts on Capitol Hill and our grassroots machine back here in Wisconsin.”

Continued from page 1 . . . New WHA/WCHQ Collaboration Announced

WHA and WCHQ are now recruiting candidates for the chief quality officer position. The organizations agreed that the UW Health Foundation will serve as the employment home for the position, which will report directly to WHA President Steve Brenton and WCHQ President Chris Queram. Interested candidates are encouraged to apply online. A cover letter and resume should be submitted at www.uwhealth.org/careers and search for UW Medical Foundation openings. Interested candidates may contact Brenton at sbrenton@wha.org or Queram at cqueram@wchq.org.
Wisconsin Academy for Rural Medicine Continues to Grow, Attract Top Students

21 new medical students admitted to WARM; Program total now at 54

The Wisconsin Academy for Rural Medicine (WARM), a program within the University of Wisconsin School of Medicine and Public Health that admits students to medical school that are likely to practice medicine in rural Wisconsin, will soon begin its fourth year. The first group of WARM students, admitted in 2007, will complete their final year of medical school this fall, according to WARM Director Byron Crouse, MD.

“It is rewarding to see their continued commitment to rural health in Wisconsin as they are arranging for rotations at our Rural Training Track program in Baraboo and are starting to apply for their residency training,” according to Crouse. “I am looking forward to expanding the clinical experiences for the new group of third year students to our second regional site where they will be working with the Gundersen Lutheran system in La Crosse at four of their rural sites, in addition to students going to Marshfield and gaining rural experience in Rice Lake,” he added.

The most recently-admitted WARM students represent a variety of backgrounds, but all share a common interest in practicing medicine in a rural area. Two of the students—Phoebe DeVitt and Ryan Lyerla—have a parent that is a physician in a rural area. Nicole Martin’s mother is a dentist in a small town, while new WARM student Andrew Thorp is currently a nurse in Green Lake.

WHA Senior Medical Advisor Chuck Shabino said Wisconsin exports far too many physicians that are trained at one of the in-state medical schools. “The good news may be that we are able to attract out-of-state physicians to Wisconsin. The bad news is that as the national physician shortage increases, the competition for those physicians will intensify,” Shabino said.

Instead, Shabino advocates for a “grow our own” strategy, that is, attract Wisconsin students to medical careers, educate them in Wisconsin and retain them in practices here. This will require an increase in medical school admission numbers, preferential admission of Wisconsin residents who have an interest in practicing in Wisconsin, and establishing training experiences in underserved areas of the state.

For more information about WARM, visit www.med.wisc.edu/warm. A list of the newly-admitted WARM students and their hometowns follows.

- Michael Brenner, Durand
- Jeffrey Clark, Wausau
- Phoebe DeVitt, Soldiers Grove
- Anthony Dobner, Waukesha
- Samuel Evers, Mazomanie
- Carl Gladitsch, Bloomer
- Jordan Gozdialska, Spooner
- Jenna Ingersoll, Platteville
- Sarah Lamont, Rib Mountain
- Karyn Laursen, Onalaska
- Ryan Lyerla, Edgerton
- Nicole Martin, Florence
- Katherine Mijal, Prairie du Sac
- Breanna Nagle, Waupun
- Brad Peterson, Hartland
- Emily Ramharter, Stoughton
- Christopher Reiff, Cato
- Trista Stankowski-Drengler, Mosinee
- Levi Stodola, Rice Lake (Sarona)
- Andrew Thorp, Green Lake
- Jasmine Wiley, Clintonville
Final Chance to Register for Wisconsin Rural Health Conference, June 23-25

Next week is the last chance to register for the 2010 Wisconsin Rural Health Conference scheduled June 23-25 in Wisconsin Dells. This year’s event will feature the opening keynote session, “The U.S. Health Care Bubble and the Global Race for Value,” presented by Maureen Swan, nationally-recognized expert in identifying health care and consumer trends. Swan will focus on the long-term direction of health care in the U.S., the seismic industry shifts that will affect health care, and the top “must do’s” every health care organization must implement in order to thrive in the new era of health care.

In addition, this year’s conference will again have the popular governance education track, offering board of trustee members and their CEOs sessions focused on health care reform, a board’s role in quality and patient safety, strategic planning and the changing role of boards.

The annual Wisconsin Rural Health Conference is a great way for hospital executives, leadership staff and trustees to take advantage of quality education, close to home, at a fraction of the travel and registration costs of out-of-state events. A full agenda and online registration are available at www.wha.org.
Fitness Clinic integrates fun and health for results for children

For some children, an afternoon of playing the video game Dance Dance Revolution is simply a fun recreational activity. For patients at UW Hospital and Clinics’ Pediatric Fitness Clinic, bouncing around to the game’s lively music is not only an entertaining way to exercise but also a gateway to a healthier and more active lifestyle.

With childhood obesity rates skyrocketing in the United States today, health experts agree it’s time to take action to improve our children’s health. “Nearly one in five children are obese or overweight,” said Paul Montague, director of the Pediatric Fitness Initiative. “It’s important for children to learn healthy diet and exercise habits when they’re young so they can carry those behaviors into adulthood.”

For over six years, the Pediatric Fitness Clinic has given children and their parents the opportunity to work with pediatric physicians, exercise physiologists and nutritionists to make sustainable lifestyle and fitness changes. Whether running on a treadmill, playing interactive video games like Dance Dance Revolution or biking on a virtual course, the clinic staff works to integrate fun physical activity into children’s everyday lives. Patients and parents also receive nutritional counseling to learn appropriate portion sizes and healthy diet choices.

The Pediatric Fitness Clinic also works with other community organizations to spread the word about pediatric health. Members of the clinic staff serve on the Activate America Coalition Task Force, which advises several YMCA of Dane County programs, and work with 12 different community centers on fitness and nutrition programming. The Clinic also takes Dance Dance Revolution to community events to show children that physical activity and fitness can be fun.

Many patients are referred to the clinic by their pediatrician or family physician, while some hear about the clinic by word of mouth from their physical education teachers, parents or television. The clinic provides charity care to a significant portion of its patients.

With nearly 300 new patients per year, UW Hospital and Clinics’ Pediatric Fitness Center continues to thrive, as does the health of the children who attend. Patients who attended the clinic for one year lost an average of 4.2 percent body fat and saw an 11.3 percent increase in lean muscle mass. Efforts are currently underway to construct a new Center for Youth Fitness, a $1.7 million addition to expand the current clinic and serve the growing number of patients.

UW Hospitals and Clinics, Madison

St. Joseph’s Hospital’s peaceful prairie inspires yoga classes

The early morning sun and the expanse of flowering prairie outside St. Joseph’s Hospital provide the backdrop for free Saturday yoga sessions for residents in and around Washington County.

The hospital’s peaceful country setting and the large stone patio outside the Garden Café created an ideal location for the hour-long outdoor “Yoga on the Prairie” classes. St. Joseph’s Hospital worked with the local Kettle Moraine YMCA to offer the free classes taught by certified hatha yoga instructors from the Y. An average of 36 adults arrive each Saturday at 8 a.m., ready in their loose-fitting exercise clothes and toting yoga mats. The mats go down on the flagstones as the instructor begins to gently instruct the yogis through the various positions.

“The hospital and the YMCA are excellent community partners because of our shared interest in health and well-(continued on next page)
Weaving lives together - at the mall

Fond du Lac residents are making greater strides in healthy living, thanks to a collaborative effort between Agnesian HealthCare and Forest Mall.

Dorothy and Les Rieder are two of many area residents taking advantage of the “Mall Striders” walking club, which is co-sponsored by Agnesian HealthCare and allows participants to exercise by lapping the inside of the mall.

Les says they appreciate the healthy offerings. “It is important to have these types of programs because you only see your doctor if you get sick,” he says. “Here we can focus on wellness...get our blood pressure checked, talk to health care professionals and stay abreast of the latest health care information.”

As dedicated walkers, the Rieders come to the mall almost daily at 8 a.m., when the doors open. The exercise has helped each of them keep their high cholesterol in check. And, they add, it is just plain fun.

“Walking is important. It is the exercise we enjoy, and here at the mall it is convenient, secure and comfortable. We get to socialize with other walkers, plus it is a great way to start our day!” says Dorothy.

Agnesian HealthCare, Fond du Lac

Diabetes and Your Heart educational event

In honor of November being American Diabetes Month, Aurora Medical Center in Two Rivers hosted a seminar called “Diabetes and Your Heart.” Jillian Johnson, M.A., E.P.C., an exercise physiologist in cardiac rehabilitation at Aurora Medical Center, discussed “Exercise at Any Age.” Topics included the importance of proper exercise for heart health and diabetes management. A keynote speaker educated attendees on prevention, diagnosis and treatment of heart disease and diabetes.

Aurora Medical Center in Two Rivers

Wellness Works in West Allis – especially when you make it fun

The sun was shining, the breezes were balmy, and excitement was in the air on the morning of August 16, for the first annual Wellness Works in West Allis run/walk.

A crowd of 250 people of all ages, including neighbors, friends, families and Aurora caregivers got involved in this fun-filled event, which included the 3.1 mile/5K route through the neighborhoods surrounding Aurora West Allis Medical Center.

Free post-race exhibits and refreshments were provided in the Healing Garden of the Aurora Women’s Pavilion, where prizes were awarded to the top three male and female runners with the fastest running times. Entertainment was provided by the band Live Radio, and raffle prizes were dispensed to lucky recipients.

As they strolled around the grounds enjoying their coffees, waters, fresh fruits and other treats, attendees were able to participate in health assessments and blood pressure screenings, visit exhibits hosted by Aurora pharmacists and complementary medicine practitioners, all while learning to integrate healthy lifestyle changes into their lives.

Aurora West Allis Medical Center, West Allis

Looking forward to a healthier Cumberland

For over three years, the Cumberland Memorial Hospital has been a partner in the Healthier Cumberland Coalition’s goal of creating a healthier Cumberland. This partnership has consisted of donating staff time, meeting rooms, reduced fees on lab work, etc. June 30, 2009 marked the end of the Healthier Cumberland Coalition’s three-year grant. The grant has focused on increasing fruit and vegetable consumption, increasing physical activity, and many other aspects of total health. While they obtained a much smaller grant that will provide some funding, it will not provide nearly enough for the coalition to continue at the pace in which they have become accustomed to.

That is where the Cumberland Memorial Hospital has stepped in. The hospital has agreed to employ the Coalition coordinator and continue to supply the needed classroom space, lab work, etc. that the Coalition will need to keep up their pace. While this will be a greater financial commitment than it was in the past, the Cumberland Memorial Hospital is excited about the partnership and the fact that the Coalition has achieved sustainability after the original three-year grant.

We are all looking forward to a healthier Cumberland.

Cumberland Memorial Hospital, Cumberland
Wisconsin Hospitals Community Benefits (continued)

Innovative programs encourage healthier lifestyles
To tackle the weighty issue of obesity and lack of physical activity, Gundersen Lutheran, in collaboration with community partners, created Minutes in Motion. Participants in the free community-wide challenge were encouraged to move at least 30 minutes every day for six weeks. To build excitement, Gundersen Lutheran distributed weekly wellness tips and newsletters, and threw a celebration party with prizes. Last year, more than 3,000 participants clocked in with more than 3,780,000 minutes.

Gundersen Lutheran also sponsored several other wellness programs that encourage patients, employees and community members to optimize their health. Shoe Crew and the Gundersen Lutheran walking trails encourage regular exercise, Stress Less helps participants manage life’s everyday stressors with tools and tips on coping, and the 500 Club® and Winning Weighs® encourages healthier eating.

Gundersen Lutheran Health System, La Crosse

Health Trip — a community-wide wellness program
Health Trip — a community-wide exercise program engaging young and old – gets the Sauk Prairie community moving during the cold days of winter. The 16-week program, which runs from January to May, offers structure, support and information to nearly 600 adult participants as well as 600 school children annually.

Health Trip kicks off every year in January and works to get people into an exercise routine following the holidays, said Community Relations manager Amy Ryan at Sauk Prairie Memorial Hospital & Clinics (SPMHC). The hospital is a major sponsor of the event, along with the Sauk Prairie Community Center and a few area businesses.

SPMHC has been involved with Health Trip since inception more than a decade ago, according to Ryan. “We partnered with the Community Center to get it going as a wellness initiative, and it’s been so successful, we’ve seen similar programs start up in other communities,” she said.

During Health Trip, participants are challenged to complete 48 hours of exercise, 36 hours for those over 55 years old or with special health limitations. “For the 48-hour trip, it takes three hours of exercise per week to stay on track,” Ryan said.

They are also encouraged, rewarded and educated along the way. In January, the exercise program kicks off with a health fair in which SPMHC provides free cholesterol, blood pressure and glucose testing, along with massages and nutrition information.

Several free passes are provided to participants to use the Sauk Prairie High School pool, and SPMHC offers a special three-month membership to its wellness center. Additionally, local schools are open for walking and running.

At three points during the course of the 16-week Health Trip, participants turn in their exercise times and are rewarded with prizes for reaching milestones. A picnic in May allows all participants to celebrate their accomplishments together, while enjoying door prizes and a healthy dinner.

“Over the years, we’ve expanded the program into the grade schools,” said Ryan. “It gets youth out and exercising during recess.” The students record their activities and encourage their family members to become part of a family team.

Sauk Prairie Memorial Hospital & Clinics, Prairie du Sac

Competing hospitals join forces for worthy cause – Kids Fest
Too often competition minimizes the potential for good to happen. With dollars and cents acting as blinders, sometimes working for the greater good gets lost in the shuffle. That is not the case for the health care providers in the Spring Green area. Each year, competing health care facilities lower their competitive gloves and join together to put the community’s wellness in the spotlight. Employees from Richland Hospital, Spring Green Medical Center, River Valley Medical Clinic, Sauk Prairie Memorial Hospital and River Valley School District work together to provide a free day of information and activity.

Kids Fest was held at River Valley High School April 12, 2008. More than 100 parents and children ages 5-12 participated in hands-on activities and learned about the importance of staying well. Health care and program professionals were available to talk about how to get started or how to stay active with kids. They also answered questions about a wide variety of concerns, obstacles and challenges parents and kids face. Healthy snacks and refreshments were provided and many of the stations had giveaways.

(continued on next page)
Wisconsin Hospitals Community Benefits (continued)

In addition, the River Valley District Wellness Committee will be hosted the 2nd Annual Jeanene King Memorial Fitness Trail 5k Prediction Run/Walk.

So what is a Prediction Run? It is a fun way to participate in a race no matter what your age or ability is. Winners were based on their predicted time, not speed. All you needed to do is guess, before the race starts, how long it would take you to run or walk 3.1 miles. Then, record it on your registration form. It didn't matter if you took 15 minutes or an hour. The person closest to their predicted time was the winner.

All proceeds from the run went to the Jeanene King Memorial Fitness Trail Fund, a local non-profit fund set up to help the River Valley School district’s Wellness Committee with yearly maintenance and upkeep of the district’s fitness trail.

The Richland Hospital, Inc., Richland Center

Bellin Run reflective of health conscious community

Bellin Health’s efforts to promote health and fitness is reflected in record registrations (for the fourth straight year) for the Bellin Run, sponsored by the health system.

The race started in 1977 as a one-time event to celebrate an expanded hospital with an inaugural 880 registrants. Last year, 15,149 people registered for the 10K (6.2-mile) run. That record registration was surpassed this year as 16,746 people registered for the 33rd annual Bellin Run. It is the 4th largest timed 10K race in the nation.

Through the years, the Bellin Run’s emphasis on community health and fitness has been increasingly pronounced.

“It ties in with part of Bellin Health’s mission statement which encourages us to help steer individuals, their families and friends toward optimal health,” said race director Randy Van Straten, a Bellin employee. “Whether running, walking or using a modified wheelchair, participation in the Bellin Run is taking a step toward optimal health.”

About 93 percent of Bellin Run participants come from Northeast Wisconsin.

“That’s a lot of locals focused on health and fitness. We encourage them to carry this healthy experience with them throughout the remainder of the year,” he said. “Distance running requires training, making the Bellin Run a great springboard for incorporating healthy habits into people’s lifestyles.”

The Bellin Run has one of the nation’s highest race satisfaction scores, with 98 percent of poll respondents saying they would recommend the event to another person.

Running is one of the easiest activities an individual can do to improve his or her physical and mental health. A regular run or walk can help efforts to lose weight, fight disease and slow down the effects of aging. Running and walking also offer stress relief and help build confidence.

Bellin Health, Green Bay

Submit community benefit stories to Mary Kay Grasmick, editor, at mgrasmick@wha.org.

Read more about hospitals connecting with their communities at www.WiServePoint.org.