



## ADVOCATE. ADVANCE. LEAD.

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November 19, 2020

Tony Evers  
Governor, State of Wisconsin  
State Capitol, Room 115 East  
Madison, WI 53707

Robin Vos  
Assembly Speaker  
Wisconsin State Capitol, Room 217 West  
Madison, WI 53708

Devin LeMahieu  
Senate Majority Leader-elect  
Wisconsin State Capitol, Room 409 South  
Madison, WI 53707

Janet Bewley  
Senate Minority Leader  
Wisconsin State Capitol, Room 206 South  
Madison, WI 53707

Gordon Hintz  
Assembly Minority Leader  
Wisconsin State Capitol, Room 201 West  
Madison, WI 53708

Dear Governor Evers and Legislative Leaders:

We know that all elected officials want to make Wisconsin a better place. While our policymakers may disagree on how to accomplish this, we believe you all share the same motivation and intention to preserve and improve the quality of life we enjoy in Wisconsin.

Each day we, like you, are looking at the state's COVID-19 positive test, hospitalization and death data and know we must do much better as a state and with greater urgency. And each day our members, their incredible staffs, and an increasing number of people across Wisconsin are living these terrible statistics. As of this past Monday:

- Our state had 2,274 COVID patients sick in hospital beds – *double what it was just four weeks ago and six-times what it was eight weeks ago.*
- Wisconsin saw a net increase of 174 COVID patients in hospitals – *the single largest one-day increase, so far, and the third new single day record in past several days.*
- Our intensive care units (ICUs) had 456 COVID patients, another awful new record and over four-times what it was just two months ago. *The capacity to serve our sickest patients in Wisconsin is shrinking by double-digits nearly every day.*
- Most concerning, yesterday 92 COVID deaths were reported, by far the largest single day number, and total COVID deaths reached 2,741, more than doubling in just two months.

The undeniable cause of these clear and urgent trends is the community spread of COVID, which according to many experts is worse in Wisconsin than nearly anywhere else in the country. Indeed, on September 19, Wisconsin had a total of 101,227 confirmed COVID cases – *it took us roughly seven months to reach that number.* Just 36 days later, the number of cases had doubled to 201,046. Just 18 days after that, we hit 301,165 COVID positives in Wisconsin, *triple the number we had just two months ago.*

In a recent Wisconsin media interview, Dr. Deborah Birx, White House Coronavirus Response Coordinator, pulled no punches about the situation in Wisconsin:

*“Your case numbers are extraordinarily high, your rate of hospitalizations are extraordinarily high and we know what follows that is a high rate of fatalities. Not only that it’s high, it’s the rate of increase that has us very concerned. We are really asking people in this moment to do everything they can to save their own life and the lives of people they love. What you’re doing is not enough to flatten that curve.”*

With few tools available right now to curb spread other than increasingly urgent public appeals, our COVID numbers are growing rapidly and predict, quite accurately so far, a health care crisis in Wisconsin that without significant, swift, and unified action will become a catastrophe. This is hard to fathom for many across the state, but for those fighting this ever-growing battle in our hospitals, the data simply illustrate the human tragedy playing out in front of them every day.

No one is more burned-out from COVID-19 than the health care heroes who staff our state’s hospitals, yet they go to work every day to save lives. They are tired from working months of long hours behind masks, face shields and gowns, yet remain dedicated to their co-workers, patients and communities. But their exhaustion, and increasingly their frustration, is compounded by the still unmitigated spread of COVID. The spike in cases, surge in hospitalizations and increasingly strained health care workforce is a devastating combination that calls for unity and action.

We agree with Dr. Birx and a growing number of your colleagues, that Wisconsin needs to do more. We need you, the state’s top elected officials, to come together immediately with unified actions to *slow demand for care* by mitigating the spread of COVID-19 and to *increase the capacity for care* by making significant investments in our workforce and care sites and further streamlining regulatory policies.

We ask that you take the following steps in any legislation or other actions, and we urge you to act soon:

- **Slowing the Spread of COVID-19:** The challenges described above are not exaggerated; the daily headlines about Wisconsin are accurate. In health care, we are trained to identify the root cause of a problem, fix it, and produce a better outcome. Community spread of COVID-19 is the clear root cause of the crisis now gripping Wisconsin and striving for common ground and unified action to slow it down must be our top and immediate priority.

Since previous efforts aimed at slowing the spread of COVID have been met by legal challenges and court battles, it’s now time for all our elected leaders to come together quickly on a statewide COVID spread mitigation strategy. This could include things like a statewide mask policy, taking steps to affirm the authority of counties and municipalities to adopt their own strategies, considering legislation to implement an updated version of WMC’s Back to Business Plan, or a combination of all the above.

- **Addressing Immediate Care Capacity & Workforce Needs:** Another chief priority is addressing the rapidly deteriorating capacity situation at hospitals caused by the spread of COVID-19. Hospitals in this state cannot control the number of patients who come through their doors and, at the same time, they are facing significant staff vacancies due to COVID-19 exposure in the community. Just last week, the *La Crosse Tribune* reported that Gundersen Health System had 469 staff out on one day alone due to COVID-19 exposure or infection. *This is one of many examples across Wisconsin* that if not addressed will have catastrophic consequences as demand for COVID-19 and other care grows.

Hospitals are taking every possible step to address their workforce needs, including hiring temporary agency/traveling staff which, when available, are two- to three-times normal staffing costs. In fact,

FEMA requires hospitals to pursue and pay for agency staff and use all possible staff resources before receiving federal workforce support. The need to hire very expensive temporary staff is rapidly growing, caused by absences resulting from unmitigated spread of COVID-19 and community exposure. However, even these temporary resources are becoming difficult to secure.

As proposed this week by Governor Evers, we strongly support providing \$105 million in additional resources to bolster the frontline hospital workforce and increase care capacity. Hospitals are using every tool available to them right now to maintain staffing and surge capacity, yet because COVID continues to rage across Wisconsin, it is not enough.

This week, the State provided \$80 million to long-term facilities to assist with their staffing and other costs due to COVID-19. We applauded this action in the hopes it will result in nursing homes accepting the many hospital inpatients ready to be discharged but waiting for placement. We must now respond with a similar commitment for our state's severely challenged hospitals.

- **Establishing More Alternate Care Facilities for Hospital COVID and Other Patients:** Admissions to Wisconsin hospitals are rising at an unprecedented pace as COVID-19 spreads unchecked across Wisconsin. We are grateful for the State's foresight in choosing to utilize federal resources, both through FEMA and through the CARES Act, to open an Alternate Care Facility (ACF) in West Allis. This facility is being operated with superb leadership from Ms. Deb Standridge and, after some fine-tuning of admissions criteria and other refinements, admissions to the West Allis ACF are rising and it will continue to be an important safety valve for closer hospitals, but the needs are immediate everywhere.

Wisconsin needs to open additional/regional ACFs in other parts of the state that are closer to surging patients. The most significant limitation on greater utilization of the West Allis ACF is the reluctance of patients to be transferred to a facility that for many is too far away from their home. By opening additional/regional ACFs we can free-up precious hospital capacity in other overwhelmed areas of the state so they can continue providing care to both COVID and non-COVID patients.

- **Maintaining & Expanding Testing Capacity & Contact Tracing:** No one knows the importance of testing and tracing better than hospitals and health systems. In fact, Wisconsin's hospitals, clinics and nursing homes continue performing the majority of patient and community testing in Wisconsin. However, that is putting increasing strain on the health care system. The State needs to sustain and expand its public health and community testing and contact tracing throughout the state to prevent further spread of COVID-19. We need thousands more contact tracers to more effectively mitigate spread. Further, to maintain community testing sites, the Governor and leaders of the Assembly and Senate should request the Trump Administration continue federal deployment of the National Guard at 100% federal funding for COVID-19 testing for at least another six months.
- **Medicaid/Regulatory Reform – Aligning State and Federal Policies:** A growing number of Wisconsin hospitals are at or near capacity as noted above. At the same time, there are many hospital inpatients ready and waiting to be discharged to a nursing home. On the outpatient side, hospitals are working to arrange care to protect patients while applying state and federal rules that do not align. During a public health emergency, hospitals need every tool available to expand capacity and provide care safely, this includes the ability to arrange outpatient care to best control the spread of the virus and new options for discharging inpatients to relieve hospital capacity pressure.

To help address these issues, Wisconsin's Medicaid program, like the Medicare program, should reimburse hospitals for health care services provided in all hospital outpatient department settings and for swing-bed (post-acute) level services provided by rural and urban hospitals.

- **Permanently Removing Licensing Barriers for Health Care Workforce, Including Recently Lapsed or Out-of-State License Holders:** Currently, out-of-state health care license holders have been granted the ability to be licensed in Wisconsin quickly through a streamlined licensure process. This process should remain in place as hospitals use all tools to meet workforce demands and ensure we have the frontline health care workers when needed most. The Department of Safety and Professional Services' waivers currently in place are slated to expire on January 20, 2021, unless the federal public health emergency is extended. The DSPS process makes sense not only during a public health emergency, but also under normal circumstances as the licensure process continues to be a barrier to care.

As noted above, Wisconsin faces a public health crisis the likes of which we have not experienced in three generations. A crisis of this magnitude caused by a virus that is so clearly raging across all of Wisconsin demands a unified and substantial response. Your joint leadership is critical to improve this situation, allowing everyone to get back to our way of life sooner.

We appreciate your consideration of these proposals and requests. As we have throughout this pandemic, WHA stands ready to be your partner, to engage and assist our elected leaders in crafting, enacting and implementing these and other critically needed actions to fight this debilitating pandemic.

Sincerely,



Eric Borgerding  
President and CEO