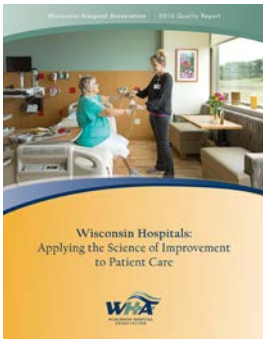


March 3, 2017

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## Wisconsin Hospitals Continue to Improve Quality, Reduce Infections, Increase Value

*Quality efforts aim to reduce readmissions, infections, falls*



Wisconsin hospitals continue to make significant progress to improve the quality of patient care by lowering some infection rates by nearly 60 percent and reducing hospital readmission rates according to a new report released March 2 by the Wisconsin Hospital Association (WHA).

“Wisconsin is consistently among the best states in the country in patient care quality rankings, and that serves to inspire us to

do better and to sustain the progress we have already made,” according to WHA Chief Quality Officer Kelly Court. “We are on the right road, but we still have a way to go to ensure every patient receives the best care possible every time.” *(continued on page 7)*

## WHA Board Subcommittee on Health Care Reform Discusses WHA Priorities

On February 27, the WHA Board Subcommittee on Health Care Reform met to discuss the latest developments in Washington and Wisconsin on health care reform and help set WHA’s priorities on ACA repeal and replace and Medicaid.



*The WHA Board Subcommittee on Health Care Reform meeting February 27, 2017*

“There is too much at stake to sit back and watch what happens,” said Mike Wallace, CEO of Fort Healthcare and the Subcommittee’s chair. “There is much uncertainty in the market today, and we are fortunate WHA has been a leader in providing clarity and is seen as a trusted, go-to source of information.” *(continued on page 2)*

## Gov. Scott Walker Confirmed As WHA Advocacy Day 2017 Luncheon Keynote

*Make sure your hospital teams are registered!*



*Gov. Scott Walker*

Gov. Scott Walker is confirmed as the luncheon keynote speaker at WHA’s Advocacy Day 2017, April 19 at the Monona Terrace in Madison. You won’t want to miss this event, perfectly timed to fall during

legislative action on the state budget. Assemble and register your hospital groups now at: [www.cvent.com/d/svqylc](http://www.cvent.com/d/svqylc).

“WHA is pleased to, once again, have Governor Walker as the luncheon keynote speaker at Advocacy Day,” said WHA President/CEO Eric Borgerding. “From the release of his proposed state budget to working with other governors and national leaders on potential changes to the Affordable Care Act, we know our attendees will want to be at Advocacy Day to hear from him.”

The morning keynote is Amy Walter who is known as one of the best political journalists covering Washington, D.C., having worked for multiple news outlets. Walter has built a reputation as an accurate, objective and insightful political analyst. The morning sessions will include the always-popular state legislative leader panel discussion.

Register for Advocacy Day with a legislative visit in the afternoon. WHA strongly believes the afternoon legislative meetings are the most *(continued on page 8)*

## Continued from page 1 . . . WHA Board Subcommittee on Health Care Reform Discusses WHA Priorities

As Congress and the President move toward repealing and replacing the ACA, WHA Board Chair Cathy Jacobson, president/CEO of Froedtert Health, appointed the Subcommittee earlier this year. The group is comprised of WHA Board members from across the state.

At the meeting, Joanne Alig, WHA senior vice president for policy and research, described the latest policy discussions at the national level, providing up-to-the-minute information about the draft House bill and Republican Governor's Association discussions that were reported in the news late last week. Alig described the latest considerations for Medicaid reform as well as details about potential policies being floated to help stabilize the insurance markets.

Subcommittee members noted that for Medicaid, whether through a block grant or per enrollee cap approach, establishing base funding is critical for Wisconsin. Wisconsin did not receive enhanced federal funding for its Medicaid expansion for childless adults with income below the poverty line, so base funding could be lower in a state like Wisconsin even though the state expanded coverage. The need to ensure that elderly and disabled populations are funded at an adequate level was also noted, in particular given the cost for that beneficiary group and the aging population in Wisconsin.

Further, the Subcommittee discussed the idea of replacing the current subsidies or tax credits for purchasing coverage that are based on income. The House draft bill from late last week would include refundable tax credits based on age, not income. Subcommittee members expressed concern that changes from income to age-based tax credits could negatively impact states like Wisconsin that relied on the subsidies to provide coverage for their low-income populations.

Importantly, the group also discussed the significant changes that have been occurring in health care since even before the ACA was enacted. Moving toward quality and value in health care is still a high priority for WHA members and must continue to be top of mind as changes are being contemplated.

The Subcommittee helped further clarify and identify priorities for WHA moving forward, and will continue to meet in the weeks and months ahead as necessary.

### Political Action Spotlight

#### **Start 2017 off Strong—Contribute Today to WI Hospitals State PAC & Conduit *Contribute \$250 or more and attend campaign's kick-off breakfast April 19***

The Wisconsin Hospitals State PAC & Conduit fundraising campaign broke all records in 2016 by raising a total of \$306,000. Thank you to the over 350 individual contributors for your support.

Starting 2017 off strong will be important in order to reach the aggressive 2017 fundraising goal of \$312,500. You can help the campaign today by making your 2017 contribution to the Wisconsin Hospitals State PAC, the Wisconsin Hospitals Conduit or to both. Log onto [www.whconduit.com](http://www.whconduit.com) to contribute. ***By contributing \$250 or more by April 19, you will receive an invite to a special kick-off breakfast event to be held that morning in Madison.***

Make your 2017 contribution by logging onto [www.whconduit.com](http://www.whconduit.com) or calling Jenny Boese at 608-268-1816 or Nora Statsick at 608-239-4535.

## WHA Board Officers Send Delegation Letter on ACA

*JFC Co-Chairs Darling, Nygren urge Congress to provide Medicaid funding equity*

In the past week, several important communications regarding changes to the Affordable Care Act have been delivered to members of the Wisconsin Delegation. Those letters were sent by officers of the Wisconsin Hospital Association's (WHA) Board of Directors and by the co-chairs of the State Legislature's budget-writing committee, the Joint Finance Committee. Both letters reiterate the fundamental need to provide states like Wisconsin with equity as well as protect important coverage gains for lower-income individuals.

"With Congress deliberating the repeal and replacement of the Affordable Care Act (ACA), we are united around two critical issues—achieving equitable Medicaid funding for Wisconsin and preserving our state's coverage gains," WHA Board officers Mike Wallace (Fort HealthCare), Catherine Jacobson (Froedtert Health), Robert Van Meeteren (Reedsburg Area Medical Center) and Eric Borgerding (WHA) wrote in their February 27 letter to the Wisconsin Delegation.

"...some 130,000 people in poverty, the vast majority of whom were previously uninsured, were enrolled in Wisconsin's Medicaid program...Despite this unequivocal expansion of Medicaid, Wisconsin did not meet the Obama Administration's definition of 'Medicaid expansion,' nor did we receive the enhanced federal funding that came with it," the letter continued.

"Insist that our state, which has now targeted and extended the Medicaid safety net to those in greatest need, be treated fairly by **making Wisconsin's expansion population eligible for the same federal funding rate as those states that adopted the ACA version of expansion.**"

Secondly, the WHA Board officer letter elaborated on the 225,000 individuals who have been able to access affordable coverage on the ACA's federal exchange.

"Part and parcel to Wisconsin's unique and successful approach to coverage expansion is helping connect individuals above 100 percent FPL to affordable coverage on the federal exchange. Wisconsin's uninsured rate has plummeted since 2014, the result of our approach to Medicaid expansion and robust use of subsidized coverage on the exchange. Of the 225,000 Wisconsinites who have gained coverage on the exchange, 85 percent have benefitted from its income-based premium subsidies. We are very concerned that many of these people will lose coverage if these subsidies go away...."

*(continued on page 4)*

### Governor Scott Walker in the News on ACA

Over the past few days, Gov. Walker has been in the news on repealing and replacing the Affordable Care Act, including making the points specific to the Medicaid program:

#### In an article written by Emily Cadei of *Newsweek* (2/24/17)

*"You can't cut Medicaid, there's just no way about it," Wisconsin Governor Scott Walker said on Friday, reflecting the reality a lot of top state executives are facing when it comes to the pending health care overhaul in Congress.*"

*"Walker said Friday he supports giving states more flexibility in terms of Medicaid spending, but he was lukewarm about the idea of block grants. 'To me, you could have something even short of that,' he said, 'as long as it doesn't set states up for failure.' That's a huge caveat."*

#### In an interview with *Fox News Sunday* with Chris Wallace as reported on by the *Milwaukee Journal Sentinel's* Annysa Johnson (02-26-17)

*"Wisconsin Gov. Scott Walker touted the state's program for health insurance coverage for the poor ...calling it 'a model of exactly what will happen' under plans to replace Obamacare."*

#### Remarks by President Donald Trump at the National Governor's Association

*"We're going to repeal and replace Obamacare, and get states the flexibility that they need to make the end result really, really good for them. A very complicated issue....And I spent a lot of time with Governor Walker and Governor Rick Scott the other day—we were talking about it. They're really very expert on the subject, and I want to thank them."*

## **Continued from page 3 . . . WHA Board Officers Send Delegation Letter on ACA**

In another ACA-related letter sent February 24 to the Wisconsin Delegation, Joint Finance Committee Co-Chairs Sen. Alberta Darling and Rep. John Nygren pointed out the impact Congressional decisions will have on the state budget and state taxpayers.

“In 2012, President Obama presented Wisconsin with a false choice of either expanding Medicaid or forgoing roughly \$280 million per year. We co-chaired the state’s budget committee when Governor Walker proposed striking our own path and making Wisconsin’s Medicaid program a safety net for those in greatest need.”

The “Wisconsin-focused approach” approved by Walker and the State Legislature at that time provided Medicaid coverage to all individuals living “in poverty”—with incomes below 100 percent of the federal poverty level—and resulted in some 130,000 individuals newly having access to Medicaid.

“While other states receive full federal funding for their Medicaid expansion, Wisconsin received no additional funding,” continued co-chairs Darling and Nygren in their letter. “You have an opportunity to correct this flawed decision by the Obama Administration. As you begin to discuss Medicaid block grants and per-capita limits, we ask that you take a serious look at the inequity in Medicaid funding.”

“We have done our part in Madison; now we need you to be our advocates in Washington, D.C.,” wrote the co-chairs.

Read the WHA Board Officer letter at:

[www.wha.org/pdf/2017BoardLettertoDelegationwMAP2-27-17.pdf](http://www.wha.org/pdf/2017BoardLettertoDelegationwMAP2-27-17.pdf).

Read the Darling/Nygren letter at: [www.wha.org/pdf/2017DarlingNygrenLetter2-24-17.pdf](http://www.wha.org/pdf/2017DarlingNygrenLetter2-24-17.pdf).

## **WHA to Serve on Connected Aging Communities Advisory Board**

The Wisconsin Hospital Association has been invited to serve on the Advisory Board for a new pilot project, “Creating Connected Aging Communities in Rural Wisconsin.” Beginning in 2017 and running through October 2018, the University of Wisconsin Extension will lead an endeavor to form two community pilots in rural Wisconsin to create a system for supporting senior citizens to live independently through the use of technology supported by a robust human network.

The goals of the pilot project are twofold:

- Facilitate and assist two communities to create a system for supporting senior citizens to live independently through the use of technology supported by a robust human network; and,
- Conduct applied research throughout the process to ensure the project can be sustained by and replicated in other Wisconsin communities and beyond.

The Advisory Board membership consists of individuals who bring expertise in four distinct areas: comprehensive health and wellbeing of senior citizens; rural community development in the broadest sense; meaningful use of technology; and public policy.

“WHA is excited for the opportunity to be involved in this innovative pilot program,” said WHA President/CEO Eric Borgerding. “This project has the potential to dovetail nicely with WHA’s work on issues related to post-acute care. If successful, this program will assist rural hospitals in helping elderly individuals gain access to needed supports, which will increase the likelihood of successful outcomes after hospital discharge.”

Laura Rose, WHA vice president of policy development, who is leading WHA’s efforts in post-acute care, will represent WHA on this new Board. The Board plans to meet in April.

## **Bipartisan, WHA-Supported Legislation will Expand Use of Dental Hygienists**

Several Wisconsin legislators, including Sens. Sheila Harsdorf and Tim Carpenter and Reps. Kathy Bernier, Joe Sanfelippo and Evan Goyke, are poised to introduce a bill that will change current law to expand access to preventive oral health care through dental hygienists. The Wisconsin Hospital Association (WHA) has joined a coalition of hospitals, health systems, dental hygienists, physicians and dentists in supporting this bill, which will fully leverage the skills and services of dental hygienists to enable them to provide care directly, without dentist supervision, in additional care settings including hospitals, medical clinics and nursing homes. This proposal is both a policy recommendation of WHA's Medicaid Policy Workgroup and one of WHA's priority agenda items for 2017.

Wisconsin's Medicaid program has struggled to provide access to essential oral health care for adults and children enrolled in the program. According to the Wisconsin Medicaid program's most recent access plan from December 2016, data shows the fee-for-service Medicaid population utilizes dental services at a low rate—with only 43 percent of children and 34 percent of adults utilizing dental services.

Safety net providers—including hospitals and low-income clinics—are helping to fill this access gap. WHA Information Center data from 2015 shows that over 33,000 emergency room visits were attributable to preventable dental conditions.

Expanding access to preventive oral health care could help to prevent avoidable hospital emergency department visits. By expanding practice settings for dental hygienists, passage of this legislation will further the important public health goal of expanding access to preventive oral health care for all Wisconsin residents.

The bill is being circulated for co-sponsorship through March 10, and the WHA government relations team expects the Legislature to take quick action on the bill yet this spring.

## **WHA Hosts Webinar on New CMS Regulations on Emergency Preparedness**

On Wednesday, March 15 from 12 - 1:00 p.m., WHA will host a Member Forum webinar discussing the regulations finalized in September 2016 by the Centers for Medicare & Medicaid Services (CMS) that establish emergency preparedness requirements for hospitals, long-term care (LTC) facilities and other health care providers. (See <https://www.federalregister.gov/documents/2016/09/16/2016-21404/medicare-and-medicaid-programs-emergency-preparedness-requirements-for-medicare-and-medicaid>.)

The rule, which must be implemented by November 15, 2017, adds regulations to existing Conditions of Participation that these health care organizations must meet in order to participate in Medicare and Medicaid. Specifically, the rule requires hospitals, critical access hospitals (CAHs), and LTC facilities to develop an emergency preparedness plan, communications plan, policies and procedures, and training and testing program and implement emergency and standby power systems.

The webinar will cover these new standards for hospitals, CAHs and LTC facilities. It is intended for emergency preparedness directors at WHA member organizations.

The webinar is complimentary, but pre-registration is required. To register for the webinar, visit: [www.cvent.com/d/p5gnl1](http://www.cvent.com/d/p5gnl1). For registration questions, contact Kayla Chatterton at [kchatterton@wha.org](mailto:kchatterton@wha.org) or call 608-274-1820.

## WONE Annual Convention for Nurse Leaders and Managers, April 26-28

The Wisconsin Organization of Nurse Executives (WONE) will host their annual convention for current and aspiring nurse leaders and managers April 26-28 at The Glacier Canyon Lodge at the Wilderness Resort in Wisconsin Dells.

With a focus on its theme of "Transforming Health Care: Leaders making the impossible possible," the convention will include a keynote presentation from Dr. Mark Taylor. Taylor is an award-winning speaker recognized internationally as an educator, expert and consultant who is at the forefront of transformation in educational practices and workplace management. His opening keynote will address the generational traits, issues and dynamics in the workplace with specific, immediately applicable suggestions for developing the most productive, positive and effective work setting for all workers.

This year's agenda also focuses on a variety of health care management issues, including managing escalating situations, benefits of palliative care on the community, understanding how to maximize the role of independent APNPs, understanding HCAHPS survey results and ways to inspire hope and commitment resulting in renewed passion for caregiving.

The convention includes opportunities to network with other nurse leaders and managers. A full convention brochure is included in this week's packet and is available online, along with online registration, at [www.cvent.com/d/mvqfjn](http://www.cvent.com/d/mvqfjn).

Anyone who has responsibilities for leading and managing RNs will benefit from the educational agenda and is welcome; you do not need to be an RN or a member of WONE to attend. For registration questions, contact Kayla Chatterton at 608-274-1820 or by email at [kchatterton@wha.org](mailto:kchatterton@wha.org).

### Fast Facts from the WHA Information Center

#### March is Brain Injury Awareness Month

Traumatic Brain Injury (TBI) is a major cause of death and disability in the United States, contributing to about 30 percent of all injury deaths. According to the Centers for Disease Control and Prevention, the top three leading causes for TBI are falls, unintentional blunt trauma and motor vehicle crashes.

According to data collected by the WHA Information Center, between October 2015 and September 2016 there were 7,834 inpatient admissions for treatment of traumatic brain injury in Wisconsin hospitals, 16,172 ER visits and 1,700 observation visits for the same diagnosis.

*Data provided by the WHA Information Center (WHAIC). WHAIC ([www.whainfocenter.com](http://www.whainfocenter.com)) is dedicated to collecting, analyzing and disseminating 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.*



## **Continued from page 1 . . . Wisconsin Hospitals Continue to Improve Quality, Reduce Infections, Increase Value**

Preventing patients from falling can be a challenge, but there was a 38 percent decrease in falls among the 79 hospitals that work closely with the WHA team of quality improvement advisors.

The same hospitals decreased catheter-associated urinary tract infections (CAUTI) by 56 percent. CAUTI is one of the most common hospital-acquired infections. Between 15-25 percent of hospitalized patients have a urinary catheter placed during their hospital stay so it affects thousands of patients in our state every year.

One of the most difficult infections hospitals fight is *Clostridium difficile* infection (CDI). CDI is a diarrheal illness that commonly occurs in people who have been on antibiotics. At risk individuals are those who are frequently hospitalized, older individuals, and those who are immune-compromised. Individuals with CDI are 77 percent more likely to be readmitted to the hospital.

The rate of CDI has been increasing in Wisconsin, as it has nationally, but the upward trend did not continue here in the first half of 2016, signaling that hospitals are finding new ways to successfully fight this infection.

When a patient has an infection, it puts them at risk for developing sepsis, which is the body's toxic response to infections. This response can lead to tissue damage, organ failure and death. Sepsis can develop in anyone, at any age, for any type of infection.

Wisconsin hospitals are aggressively working to reduce sepsis mortality through early detection and rapid aggressive treatment. The faster sepsis is identified, the better the chances are that the patient will survive this life-threatening condition. Sepsis can be hard to diagnose because the symptoms mimic other less serious conditions.

WHA has brought hospitals and patient advocates from across the state together to learn how to identify and treat sepsis. These combined efforts and an increased focus on sepsis has led to an 18 percent decrease in mortality-associated sepsis since 2013. Wisconsin hospitals have made such good progress in this very difficult area of clinical practice that they were featured on a Centers for Disease Control (CDC) national Town Hall Forum to share what they had learned with hospitals across the country.

"For more than a decade, Wisconsin hospitals have set competitive interests aside and have been working together to share best practices to improve quality in their hospitals," according to WHA President/CEO Eric Borgerding. "WHA has facilitated these efforts, and we have encouraged and fostered practices and initiatives among our member hospitals that have led to greater transparency and measurable improvement."

Borgerding is cautiously optimistic about the future of Wisconsin's health care delivery system.

"The health care environment is fraught with uncertainty in the short term, but as the dust settles, Wisconsin hospitals and health systems believe that their focus on delivering high-quality, efficient and cost-effective care is the bridge that will get us from where we are today to where we want to be tomorrow," Borgerding said.

Many factors influence whether a patient is readmitted to the hospital. Some are within the control of the hospital and care providers, others are not. The variation with each patient, which includes the support they have in the home and community, adds to the complexity of keeping patients from reentering the hospital. It requires hospitals to work with social services agencies, home health and long term care facilities. And, while Wisconsin's readmission rate is close to the national benchmark of eight percent, hospitals are committed to driving this rate even lower.

*(continued on page 8)*

## **Continued from page 7 . . . Wisconsin Hospitals Continue to Improve Quality, Reduce Infections, Increase Value**

Knowing that collaboration is a key to success in quality improvement work, this year WHA partnered with the Michigan Health & Hospital Association (MHA) and the Illinois Health and Hospital Association (IHA) to launch a joint quality improvement program—the Great Lakes Partners for Patients—as part of a Centers for Medicare & Medicaid Services (CMS) Hospital Improvement Innovation Network (HIIN) contract. This unique partnership unites the quality improvement strengths of three statewide hospital associations, guiding participating members through a variety of best practices, resources and collaboratives to reduce hospital-acquired conditions and readmissions over the course of three years.

Visit WHA's [WiCheckPoint.org](http://WiCheckPoint.org) site to see the rates for individual hospitals on many quality-related measures.

## **Continued from page 1 . . . Gov. Scott Walker Confirmed As WHA Advocacy Day 2017 Luncheon Keynote**

important part of the day. With the state budget process in full swing, this is your opportunity to make the voice of hospitals heard on priority issues like Medicaid, behavioral health and workforce funding. To prepare attendees for their meetings, WHA schedules all meetings and provides an issues briefing at Advocacy Day. Additionally, WHA will host an optional pre-event webinar on these legislative visits April 11 at 9:00 a.m.

Make sure you and your teams are registered before March 17 to be entered into our early bird drawing. Register today at: [www.cvent.com/d/svqylc](http://www.cvent.com/d/svqylc). For Advocacy Day questions, contact Jenny Boese at 608-268-1816 or [jboese@wha.org](mailto:jboese@wha.org). For registration questions, contact Kayla Chatterton at [kchatterton@wha.org](mailto:kchatterton@wha.org) or 608-274-1820.