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WHA Board Tackles Forward-Looking Agenda

While it may be early in the year, according to WHA President/CEO Eric Borgerding, several of the goals and initiatives set for WHA for 2018 have already been completed successfully and progress is being made on others.



WHA Board of Directors meeting April 12, 2018

Speaking at the April 12 WHA Board meeting, Borgerding and WHA's public policy and advocacy staff briefed the Board on key WHA priorities that were passed and enacted into law before the end of the state's legislative session in March. In addition, the Board provided input on other components of WHA's forward-looking advocacy agenda.

"In even-numbered years, after the end of the state's legislative session, WHA spends a significant amount of time developing an advocacy agenda in preparation for the beginning of the next legislative session the following year," Borgerding said. "Receiving Board input on WHA directions, strategies and initiatives helps to inform our advocacy agenda, which is focused on looking forward to ensure Wisconsin hospitals and health systems can best continue serving their local communities." *(continued on page 3)*

Registration Open for Statewide Post-Acute Care Conference, June 5 *Early bird discount available through May 5*

On June 5, in collaboration with LeadingAge Wisconsin and the Wisconsin Association for Home Health Care (WIAHC), WHA is hosting a statewide conference intended to bring together partners in the continuum of care to share best practices for transitions of patients to post-acute care settings.

"Post-Acute Care: Working Together Across the Care Continuum for Positive Patient Outcomes" will open with a presentation by nationally known transitions-of-care expert Eric Coleman, MD, MPH, professor of medicine and head of the Division of Health Care Policy and Research at the University of Colorado. In addition, this important, one-day conference will include representatives from throughout the continuum of care—hospitals, skilled nursing facilities, and home health care providers—as presenters on the day's agenda, sharing their innovative strategies for overcoming obstacles that can impede successful care transitions and result in positive outcomes for discharged patients. *(continued on page 2)*

Continued from page 1 . . . Registration Open for Statewide Post-Acute Care Conference, June 5

This conference will be held on Tuesday, June 5, at the Radisson Paper Valley Hotel in Appleton. A full conference brochure is included in this week's packet and online registration is available at www.cvent.com/d/rtqb1d. An early bird discount is available to all who register by May 5, so register today.

Content questions can be directed to Laura Rose at lrose@wha.org, and registration questions can be directed to Kayla Chatterton at kchatterton@wha.org or call 608-274-1820.

Register now for Virtual Journal Club for Clinicians *Focus on antimicrobial stewardship*

Judicious use of antimicrobials is key to preventing hospital-acquired infections and curbing the epidemic of multi-drug resistant organisms; however, the best available evidence can sometimes be buried in 20+ page clinical guidelines. As a clinician, it can be difficult to know the best way to stay current on the dos and don'ts of antimicrobial stewardship. In an effort to assist, WHA is offering a four-part virtual Journal Club on antimicrobial stewardship topics for clinicians.

The series includes the following sessions, with content appropriate for physicians, advanced practice providers, nurses and quality professionals:

- When to Test and When to Treat...A Deep Dive on Asymptomatic Bacteriuria
Was offered April 12; Available via recording
- Evidence-based Strategies to Avoid Prescribing Unnecessary Antibiotics
June 11, 12-1 pm CST
- Evidence-based Strategies to Prescribe Antibiotics More Effectively
August 13, 12-1 pm CST
- Pre-op Urinalysis Before Orthopedic Surgery...What is the Current Evidence
October 15, 12-1 pm CST

The series will be hosted by Robert Redwood, MD, MPH. Dr. Redwood is WHA's physician improvement advisor, works full time as an emergency and preventive medicine physician at Divine Savior Hospital in Portage and is chair of the hospital's antimicrobial stewardship committee.

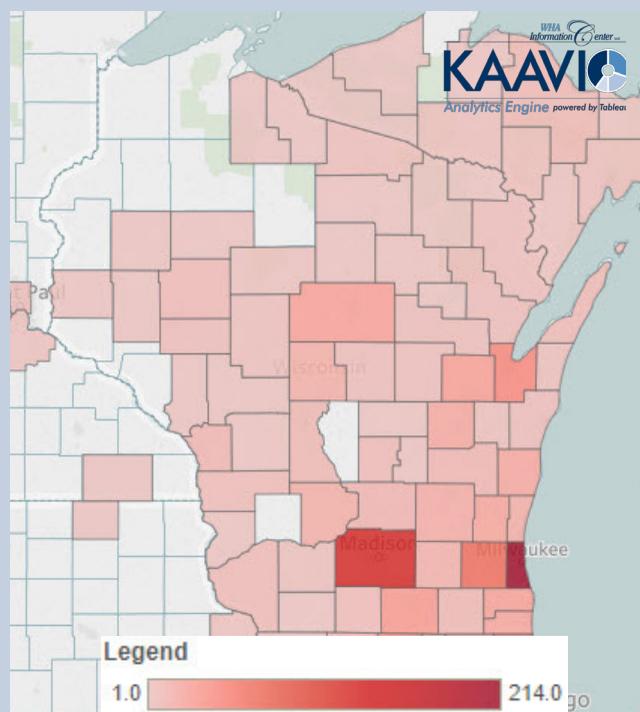
The virtual Journal Club series will utilize Zoom technology, allowing participants to see each other and converse, as well see the presenter and his material. Those participating in the live sessions have the ability to earn continuing education credit. The sessions will also be recorded and available for future viewing. To register for individual sessions or the full series, visit www.whareg4.org/WebJournalClub. There is no cost to participate in the Journal Club, but pre-registration is required.

Mark your calendars and feel free to spread the word. For questions about content, email Beth Dibbert at bdibbert@wha.org. For registration questions, contact Kayla Chatterton at kchatterton@wha.org or call 608-274-1820.

Fast Facts from the WHA Information Center

April is Donate Life Month

National Donate Life Month was instituted by Donate Life America (www.donatelife.net) and its partnering organizations in 2003. It features an entire month of local, regional and national activities to help encourage Americans to register as organ, eye and tissue donors, and to celebrate those who have saved lives through the gift of donation.



WHA Information Center (WHAIC) reported 1,222 kidney transplants and 164 heart transplants performed over the past three years in Wisconsin hospitals. The map provides the rate of visits per 1,000 population of the counties within this timeframe for transplants performed.

According to the U.S. Department of Health & Human Services, as of April 12, 2018, there were 125,575 people waiting for lifesaving organ transplants in the U.S. Of these, 102,936 await kidney transplants and 4,036 await heart transplants.

Think about registering to be an organ donor. One donor could save up to eight lives.

Data provided by the WHA Information Center (WHAIC). WHAIC (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.

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Board Discusses Reducing Regulatory Burden, “Top-of-License” Practice

The Board provided input to help guide the achievement of a key element of WHA’s 2018 goals focusing on integrated physicians and clinics—reducing regulatory burden impacting physician and professional practice.

WHA Chief Medical Officer Chuck Shabino, MD, said that as WHA member health systems large and small employ greater numbers of physicians, WHA is increasingly focused on addressing issues directly impacting physician practice such as physician regulatory burden.

“Working to enable physicians to spend more time with patients and less time with paperwork is a focus of WHA and WHA’s Physician Leaders Council in 2018,” said Shabino.

The Board provided several insights into the impacts, opportunities and challenges of advancing an agenda to address physician regulatory burden. A key theme of the Board’s input was working to increase policymakers’ awareness of the impacts of regulation on physicians’ ability to meet care demands in their communities as a means to discourage new regulation and requirements impacting physicians’ time.

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Many of the comments also echoed the input provided by WHA's Physician Leaders Council April 3, including the importance of addressing prior authorization burdens and advancing appropriate team-based care reforms that can remove burden caused by regulations requiring physician action when the action could be performed by a nurse practitioner, physician assistant, or other professional.

Board Discusses Strategy for Medicaid Reimbursement & Related Issues

Lisa Ellinger, WHA vice president, public policy, told the Board that the WHA Medicaid Work Group (MAWG) will convene later this month and throughout the summer to develop a Medicaid policy strategy for the next legislative session. Ellinger explained that the MAWG has provided valuable and informative feedback during the past several legislative cycles and that WHA is seeking input from the Board to help guide the work of the MAWG as it identifies and develops Medicaid reimbursement-related advocacy priorities.

"We have to have serious conversations about diversifying WHA's agenda in the Medicaid space and think beyond the four walls of the hospital," said Borgerding. "WHA's advocacy strategy should align with where Wisconsin's health care delivery system is evolving."

As Ellinger reviewed current Medicaid enrollment and funding and facilitated a Board discussion on Medicaid reimbursement and related issues, Board members noted interest in strategies involving post-acute care, care coordination, administrative burdens, lack of standardization, and social determinants of health care.

The Board also talked about the need to improve access to behavioral health care. The Medicaid population has the greatest need for behavioral health care, but there are many barriers to access. Improving provider reimbursement and enabling providers to deliver more care via telemedicine would create more access for this vulnerable population.

Spring Legislative Session has Impact on WI Hospitals, Health Care Providers

In addition to discussing development of WHA's forward-looking advocacy agenda, Board members received an update from WHA's public policy and advocacy staff regarding key WHA priorities enacted into law before the end of the state's legislative session in March.

Kyle O'Brien, WHA senior vice president, government relations, briefed the Board on WHA's advocacy work on a bill proposed by Gov. Scott Walker to create a \$200 million reinsurance program for the individual health insurance market, aimed at reducing premiums and increasing health plan participation in the state. The bill, which was signed into law at Tomah Memorial Hospital in late February, included a WHA-lobbied amendment to remove a mandatory lapse from the Medicaid program that could have reduced hospital or health care provider reimbursement anywhere between \$50 million and \$80 million.

In addition, O'Brien informed the Board that efforts to enact a medical fee schedule in Wisconsin's worker's compensation program gained very little traction in the state Legislature this session, ultimately stopping completely after a Senate committee hearing that lasted over five hours and included public testimony from hospital leaders, physicians and other health care providers who opposed a fee schedule in worker's comp. O'Brien applauded the work of member hospitals and health systems who partnered with WHA to defeat this legislation, working since mid-2017 to engage with state lawmakers all over the state.

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WHA President Eric Borgerding and WHA 2018 Board Chair Bob Van Meeteren at the April 12, 2018 Board meeting in Madison.

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O'Brien expects proponents of a medical fee schedule, including Wisconsin Manufacturers & Commerce, to pursue the legislation again in the 2019-2020 legislative cycle. O'Brien stated that WHA will continue to meet with legislators throughout 2018 to lobby against the proposal and, instead, focus legislators' efforts on areas of needed reform in the system that can benefit health care providers and patients.

Ellinger also briefed the Board on recent announcements from the Centers for Medicare and Medicaid Services, including more flexibilities for states to establish essential health benefits for health plan offerings in the insurance exchange, network adequacy standards and "hardship exemptions" for people in counties with one or no marketplace insurers.

WHA General Counsel Matthew Stanford discussed WHA's engagement in a case being heard by the Wisconsin Supreme Court considering the constitutionality of Wisconsin's medical liability non-economic damage cap enacted on a bipartisan basis in 2005. He discussed the impact a loss of the cap would have on Wisconsin's ability to attract an adequate physician workforce to provide health care services to communities throughout Wisconsin. Stanford reported the Supreme Court will hear oral arguments next week, and a decision may come as early as June 2018.

Stanford also discussed the enactment of legislation that WHA recommended to a bipartisan group of legislative authors addressing liability concerns raised by hospitals and physicians when a health care provider disagrees with a law enforcement officer or county crisis agency determination to not proceed with an emergency detention of a patient. The bill was signed into law in March by Gov. Walker as Wisconsin Act 140. A WHA Act Summary for this new law is available to WHA members in the member portal. For more information about the member portal, contact Tammy Hribar in WHA's Communications Department at thribar@wha.org.

Board Approves Measure Changes to WHA's CheckPoint Program

The Board approved the recommendations of the WHA Measures Team, which is comprised of hospital and health system quality improvement leaders from across the state, to make several changes to the quality measures included in WHA's public reporting quality program, CheckPoint. Among these changes, the Board approved the addition of three measures to CheckPoint:

- 30-day coronary artery bypass graft (CABG) readmission,
- 30-day chronic obstructive pulmonary disease (COPD) mortality, and
- Health care worker influenza immunization rate.

Beth Dibbert, WHA chief quality officer, provided the Board with an overview of possible federal grant opportunities to address patient safety and reduce provider burden across care settings.

"Strategically, we need to create, broaden and solidify partnerships with care providers across Wisconsin to align resources and minimize duplication of efforts," Dibbert said.