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## WHA Members Discuss Strategies for Maximizing Telehealth Opportunities

***Telemedicine Work Group meeting focused on removing barriers to expand patient access***

The WHA Telemedicine Work Group met April 25 to provide input as WHA continues to refine its telehealth agenda, which is broadly aimed at facilitating sustainable reimbursement for telehealth services, supporting a regulatory infrastructure conducive to the use of telehealth, and providing education to WHA members on innovative telehealth strategies to improve patient access to high-value health care.

Andrew Brenton, WHA assistant general counsel, led the Work Group through a discussion of Wisconsin and federal laws regulating telehealth and governing the reimbursement of telehealth services. Work Group members noted that regulatory barriers exist within Medicare and Medicaid that prevent hospitals and health systems from maximizing the use of telehealth. *(continued on page 6)*

## WHA-Spearheaded Health Care Workforce Grants Highlighted at WisHHRA

***WHA government relations team provides annual legislative update at WisHHRA's statewide conference***

Kyle O'Brien, WHA senior vice president, government relations, and Ann Zenk, WHA vice president, workforce and clinical practice, provided the annual legislative update to hospital and health care human resources staff at the Wisconsin Healthcare Human Resources Association's (WisHHRA's) annual statewide conference in Sheboygan April 26.

"Health care policy change must support teams, technology and top-of-license practice, and reduce regulatory burden so we can continue to provide high-quality high-value health care in Wisconsin," Zenk noted. Legislative accomplishments shared from Wisconsin's recently completed legislative session include a WHA-championed

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*Ann Zenk speaking at WisHHRA's annual conference*

**Share to Compare Employee Benefits Benchmarking Survey Now Open**  
***Benchmarking provided by WHA premier partner LMC Insurance***



*Insurance & Risk Management*

Since 1981, WHA has provided its members with employee benefit and insurance advisory services—first through its wholly-owned subsidiary and now through LMC Insurance & Risk Management (formally ISG Advisors). As WHA's Premier Partner, LMC provides WHA members with industry-leading insurance, risk management and employee benefit programs. LMC's health care team helps hospitals and health systems navigate today's complex benefits and insurance markets with thoughtful strategic planning and technology-based solutions.

One of LMC's key goals is to provide meaningful information and advice to help WHA members make better-informed benefits decisions. To achieve that goal, LMC invites you to participate in this year's employee benefit survey at (<https://bit.ly/2K8TpzA>).

Employee benefits are important for your recruiting and retention efforts, but it is also a significant expense. To ensure you are providing benefits that are both competitive and economical, it helps to know how your benefits compare to other hospitals and other employers in your geographic area.

Have you ever asked yourself the following questions?

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## Continued from page 1 . . . Share to Compare Employee Benefits Benchmarking Survey Open

- How do my employee benefits compare to other employers?
- What types of things are employers doing in the post health care reform era?
- Are my wellness and disease management plans on par with my peers?
- What is the prevalence of high-deductible health plans?
- What cost control strategies have other employers been using?

For 13 years, LMC Insurance & Risk Management has partnered with a highly-respected third party actuarial firm to provide valuable benchmarking. Called Share to Compare, this annual survey provides valuable benchmarking data that will help you make appropriate changes to your plans without compromising your ability to attract and retain your most valuable asset, your employees.

More information about this survey is provided at [www.lmcins.com/share-to-compare.html](http://www.lmcins.com/share-to-compare.html). WHA members who complete the survey will receive their own customized benchmarking results detailing how their benefits compare to other hospitals and how they compare to other employers in the Midwest and nationally.

Questions about the survey may be directed to Ali Clark at [ali.johnson@lmcins.com](mailto:ali.johnson@lmcins.com).

## WI Attorney General Speaks at WHA Southern Region Dinner

**Schimel: WHA member and staff partnership essential to addressing key state issues**



WI Attorney General Brad Schimel speaking at WHA's Southern Region dinner April 23, 2018.

At a dinner with 40 WHA Southern Region hospital leaders and board members in Madison April 23, Lisa Schnedler, president/CEO at Upland Hills Health in Dodgeville and president of the WHA Southern Region, introduced the dinner's guest speaker, Wisconsin Attorney General Brad Schimel. In her opening remarks, Schnedler commended Schimel for his work on the award-winning "Dose of Reality" campaign and his willingness to partner with health care to address Wisconsin's opioid abuse epidemic.

During his remarks, the Attorney General applauded

hospitals and health systems for the contribution they make in their local communities and at a state level "... not just in providing great health care, the best in the country, but in partnering with our office and other parts of government to work on important issues." Schimel noted health care leaders' support in combating the opioid crisis, WHA's advocacy in reforming Wisconsin's emergency detention processes, and the importance of upholding the constitutionality of Wisconsin's non-economic damages cap in medical liability cases.

Health care leaders in attendance were appreciative of progress made in emergency detention processes, but during the question and answer session noted there is still much work to be done to break down barriers and improve access to and reimbursement for mental health services in Wisconsin.



AG Brad Schimel shakes hands with Lisa Schnedler, president of the WHA Southern Region

## Federal Grants Available for Hospitals to Expand Delivery of Telehealth Services

The U.S. Department of Agriculture, Office of Rural Development, is accepting applications for Distance Learning and Telemedicine Grants that can help hospitals and health systems build infrastructure to expand the use of telehealth services to provide more accessible, high-value health care.

According to the federal agency, the grants are designed to help hospitals and other eligible organizations acquire equipment, technology, or other assistance to better allow “rural residents [to] tap into the enormous potential of modern telecommunications and the Internet for . . . health care,” which the agency describes as a key “to economic and community development.”

Among other uses, grant recipients may use funds to acquire broadband transmission facilities, audiovisual and interactive equipment, computer hardware and software, network components, and similar infrastructure.

The deadline for applying for this federal grant opportunity is June 4. For more information, including how to apply, see: [www.rd.usda.gov/programs-services/distance-learning-telemedicine-grants](http://www.rd.usda.gov/programs-services/distance-learning-telemedicine-grants).

## 2019 IPPS Proposed Rule Released by CMS

### *WHA's PricePoint positioned as a solution for proposed new transparency rules*

CMS released the 2019 Medicare Inpatient Prospective Payment System (IPPS) proposed rule April 24. The rule is open for public comment until June 25, and rule provisions would take effect October 1, 2019.

WHA staff are in the process of analyzing the rule and will provide more details in the weeks ahead. A brief summary of the key provisions follows below.

#### **Hospital rate changes**

- Acute care hospitals participating in CMS quality programs will receive a 1.75 percent operating payment rate increase.
- Updates are made to uncompensated care, capital and low-volume hospital payments.
- Uncompensated care payments will increase by \$1.5 billion compared to fiscal 2018.

#### **Price transparency**

- Hospitals are required to publish a list of their standard charges online, and the rule specifically seeks feedback on what information should be reported. Public transparent reporting of hospital prices has been a Wisconsin strength for over a decade, achieved through the use of WHA's innovative transparency tool PricePoint ([www.WiPricePoint.org](http://www.WiPricePoint.org)), which is currently licensed to 10 other states.

#### **Meaningful measures**

- Numerous measures deemed duplicative, excessively burdensome or “topped out” are eliminated.
- Documentation requirements are reduced.
- Accounting for social risk factors is improved.

#### **Meaningful use update**

- Meaningful use will shift to a focus on interoperability and flexibility, and the rule specifically seeks feedback on enhancing interoperability.

The CMS fact sheet on this rule is available at: [www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2018-Fact-sheets-items/2018-04-24.html](http://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2018-Fact-sheets-items/2018-04-24.html).

## **Kearny County Hospital CEO Benjamin Anderson to Keynote 2018 Wisconsin Rural Health Conference, June 27-29**

Registration is now open for the 2018 Wisconsin Rural Health Conference, scheduled June 27-29, at The Osthoff Resort in Elkhart Lake. This year's opening keynote is Benjamin Anderson, CEO of Kearny County Hospital, a critical access hospital in a racially diverse and medically underserved area in southwest Kansas. Since arriving at Kearny County Hospital in 2013, Anderson has received national acclaim for his work in physician recruitment, health promotion, women's health initiatives and rural health care delivery innovations. In 2014, Anderson was named one of *Modern Healthcare's* Up & Comers, which recognizes young executives who have made significant contributions in the areas of health care administration, management and policy.



*Benjamin Anderson*

In addition, a variety of breakout sessions will give attendees the opportunity to examine and discuss models changing the delivery of and access to rural health care, public policy issues affecting rural health care, and ways in which data and technology are improving health care for rural populations. The conference will once again include the popular education track focused on governance issues, including new ways for boards to approach strategic planning, essential components for a successful and sustainable hospital foundation, and understanding some of the future reimbursement models that will impact hospitals.

Make attendance at this year's conference a priority by registering today. A full agenda and online registration are available at [www.cvent.com/d/3gqkxj](http://www.cvent.com/d/3gqkxj).

## **Post-Acute Care Conference: Early Bird Discount Through May 5**

Registration is open for "Post-Acute Care: Working Together Across the Care Continuum for Positive Patient Outcomes," and attendees can take advantage of a \$50 early bird discount if they register by May 5. Online registration is available at [www.cvent.com/d/rtqb1d](http://www.cvent.com/d/rtqb1d).

The one-day conference will bring together partners in the continuum of care—hospitals, skilled nursing facilities, and home health providers—to share best practices for transitions of patients to post-acute care settings and innovative strategies for overcoming obstacles that can impede successful care transitions and result in positive outcomes for discharged patients.

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, will provide the opening keynote presentation at the statewide conference.

In collaboration with LeadingAge Wisconsin, LeadingChoice Network and the Wisconsin Association for Home Health Care (WIAHC), WHA will host this conference Tuesday, June 5 at the Radisson Paper Valley Hotel in Appleton. A full conference brochure and online registration can be found at [www.cvent.com/d/rtqb1d](http://www.cvent.com/d/rtqb1d).

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

## Celebrate National Hospital Week May 6-12: “Caring is our Calling”



The Wisconsin Hospital Association joins hospitals from across the country in celebrating National Hospital Week May 6-12. This year’s theme is “Caring is our Calling,” recognizing the more than 100,000 people who care for patients, families and communities every day in Wisconsin’s hospitals and health systems.

National Hospital Week celebrates hospitals, health systems, and the women and men who support the health and well-being of their communities through dedication and care from the heart. Celebrating National Hospital Week provides an opportunity to thank all the dedicated individuals—physicians, nurses, therapists, engineers, food service workers, volunteers, administrators and so many more—for their contributions.

“This week we stop to acknowledge the people who comprise our dedicated, remarkable workforce for providing the high-quality, high-value care that has become a standard in Wisconsin,” said WHA President/CEO Eric Borgerding. “Their commitment to their profession and to the higher calling of compassion and care for others is an invaluable asset in communities across our state.”

The American Hospital Association has created a digital toolkit and a template for a #MyHospital social media campaign that organizations can use during the week

WHA will be active on its social media channels throughout Hospital Week. Watch for posts on Facebook and Twitter.

## Prescription Drug Take-Back Day is April 28

April 28 is National Prescription Drug Take-Back Day. Hundreds of law enforcement agencies across the state are participating in this event. Wisconsin hospitals and health systems are encouraged to help promote their local “take-back” event.

Unused or expired prescription medications should never be flushed or poured down the drain. These potentially dangerous pharmaceutical substances can contribute to contamination of our water supply if not disposed of properly. National Take-Back Day is a safe, convenient, and responsible way to dispose of unused or expired prescription drugs. Last fall’s Take-Back Day event collected a record-setting 912,305 pounds of prescription drugs.

For more information and materials on Drug Take-Back Day, visit: <http://doseofrealitywi.gov/drug-takeback>. The page contains information and instructions on Drug Take Back, along with a locator map (<https://doseofrealitywi.gov/drug-takeback/find-a-take-back-location>).

## 26th Annual \$2,500 UW Rural Health Prize: June 1 Deadline

The Hermes Monato, Jr. Prize of \$2,500 is awarded annually for the best rural health paper. It is open to all students of the University of Wisconsin (any campus) as well as those who have graduated since last June 1.

Students are encouraged to write on a rural health topic for a regular class and then submit a copy to the Rural Wisconsin Health Cooperative as an entry by June 1.

Previous award winners as well as judging criteria and submission information are available at [www.rwhc.com/Awards/AnnualMonatoEssay.aspx](http://www.rwhc.com/Awards/AnnualMonatoEssay.aspx).

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83 percent increase in the Medicaid Disproportionate Share Hospital (DSH) program, WHA's advocacy work to create a new Rural Critical Care supplement recognizing that hospitals without OB services still provide an essential safety net for Wisconsin citizens and communities, and the WHA-crafted Rural Wisconsin Initiative grants to grow clinical training opportunities for advanced practice clinicians and allied health professionals.

O'Brien described how WHA garners bipartisan support for important legislative action, such as defeating a worker's compensation fee schedule two times in the last three legislative sessions.

All of the activity seeking a government-imposed medical fee schedule by its proponents has distracted from the real work to be done to reform the worker's compensation process in Wisconsin," O'Brien said, noting that in the one legislative session where a fee schedule wasn't proposed, the Legislature was able to adopt some of the best reforms to worker's compensation in over two decades. "As HR professionals, you know that real work needs to be done on the obstacle course worker's compensation currently creates for employees, employers and health care providers."

Human resources leaders were encouraged to engage directly with WHA staff and their lawmakers on important human resources-related issues and many other issues that impact our ability to continue providing high-quality, high-value health care in Wisconsin. O'Brien and Zenk encouraged attendees to sign up for WHA's free grassroots engagement program, called HEAT ([www.wha.org/heat-grassroots-advocacy.aspx](http://www.wha.org/heat-grassroots-advocacy.aspx)).

As one WisHHRA attendee noted, "WHA's legislative updates keep us current on state and federal issues that affect health care, help us see where we need to lend our voice and show us how something simple, like joining HEAT, can make our voices heard."

For more information on how a member hospital or health system can take advantage of training grant programs for advanced practice clinicians or allied health professionals, contact Zenk at [azenk@wha.org](mailto:azenk@wha.org) or (608) 274-1820.

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For example, Work Group members noted Medicare does not pay for delivery of telehealth services to patients located in urban areas, and neither Medicare nor Medicaid pay for telehealth services provided to the patient's home. Members explained that enabling payment for telehealth to the home can increase the likelihood of care plan adherence; avoid more expensive emergency department visits and hospitalizations; and remove transportation burdens, especially for patients with chronic care management needs.

The Work Group also discussed telehealth educational programs that would be valuable for WHA to offer to its members in 2018. "Our goal at WHA is to provide educational content on innovative telehealth strategies that advance WHA members' ability to maximize opportunities for utilizing telehealth to provide more accessible, cost-effective care," said Brenton.

Among the uses of telehealth that Work Group members are interested in exploring in more detail through WHA-provided education is the use of telehealth in long-term care facilities to reduce transfers to the emergency room or inpatient settings.

WHA's Telemedicine Work Group will continue to meet throughout 2018.

For more information, contact Andrew Brenton, WHA assistant general counsel, at [abrenton@wha.org](mailto:abrenton@wha.org) or 608-274-1820.