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## EDUCATIONAL EVENTS

**September 30, 2019**  
*Promoting Professional Accountability and a Culture of Safety and Respect*  
Webinar

**November 21, 2019**  
*Preparing the Chargemaster for 2020 (registration opens soon)*  
Wisconsin Dells

**Monthly**  
*Health Care Workforce Resilience*  
Free Member Webinar Series

## WHA-Proposed Amendment Seeks to Protect All Health Care Providers from Violence

WHA shared its support in back-to-back State Capitol hearings recently for expanding a legislative proposal enhancing penalties for harm caused to a nurse to include all professionals who are licensed to deliver health care to Wisconsin patients.



Rose Russell, RN, SSM Health St. Mary's Hospital, shared her experience with violence directed at nurses and other health care professionals and noted to the Senate Committee on Judiciary and Public Safety, "In health care we function as a team. As nurses, we may have the most face time with patients, but we all have the potential to face violence."

WHA Vice President of Workforce and Clinical Practice, Ann Zenk, echoed Rose's sentiments the next day at the Assembly Committee on Criminal Justice and Public Safety. "Employers and professionals are partnering to take action to minimize risks

*(continued on page 6)*

## Assembly Committee Hears WHA Push for Telehealth Modernization

WHA members and staff appeared before a key State Assembly Committee this afternoon (September 24) promoting WHA-supported legislation that would improve Wisconsin's telehealth law. The bill, [Assembly Bill 410](#), enjoys bipartisan support from more than 60 state legislators and is a key WHA legislative priority for the remaining 2019-20 legislative session.

In [testimony](#) presented to the Assembly Committee on Medicaid Reform and Oversight this afternoon, a panel of WHA staff and expert members shared the major recommendations from WHA's Telemedicine Work Group which was created to help inform state policymakers how state law could better promote health care's ability to provide high-quality care to Medicaid patients at a potential cost savings to the state. The recommendations:

- Reimburse telehealth the same as in-person care when the quality of the care provided is functionally equivalent.
- Catch up to Medicare in the number of telehealth-related services that are covered.
- Cover in-home or community services.
- Increase access to behavioral health.

*(continued on page 2)*



Dr. Thomas Brazelton and Rachel Zorn from UW Health, Shana Kettunen from HSHS-Eastern Wisconsin Division and WHA General Counsel Matthew Stanford (all pictured at left) shared the WHA workgroup’s findings and provided real-world examples of how removing barriers in state law could allow more Medicaid patients to enjoy efficient, effective health care services via telehealth. Ms. Kettunen also shared a [video HSHS produced](#) showing telehealth-related caregiving in action.

The bill saw widespread support from a number of other organizations at the hearing and did not receive any opposition. The next step will be to have the committee vote on this legislation before it can come to the floor for a vote in the

full Assembly. A companion bill to AB 410, [Senate Bill 380](#), is currently in the Senate Committee on Health and Human Services, which is tentatively slated to hold a public hearing on this legislation the morning of October 9. Contact WHA’s [Matthew Stanford](#) or [Jon Hoelter](#) with any questions..

## **Federal Judge Rules CMS Site-Neutral Hospital Cuts Illegal**

On September 17, Federal Judge Rosemary Collyer issued a long-awaited [ruling](#) on the legality of the reimbursement cuts to off-campus hospital outpatient departments (HOPDs) made in the CMS 2019 outpatient prospective payment system (OPPS) rule. The ruling is a victory for hospitals and health systems who had argued CMS’ cuts went against federal statutes passed by Congress.

In the 2015 Bipartisan Budget Act, Congress reduced payments for new HOPDs to put them in line with non-hospital sites paid under the physician fee schedule. At the same time, Congress grandfathered existing HOPDs at the previous, higher rate. Nevertheless, in the 2019 OPPS rule, CMS cited a statute that allows them to reduce unnecessary utilization of services as giving them authority to reduce payments to off-campus HOPDs for clinic visit services. CMS has called this policy “[site-neutral](#)” payments, believing that Medicare should pay the same rate for similar services, regardless of where those services are delivered.

The idea of site-neutral payments fails to take into consideration that hospitals have historically been paid at higher rates in order to offset the higher costs they face for running 24/7 emergency departments, facing a higher regulatory standard and generally treating sicker, more medically-complex patients. WHA cited these facts in its comment letter to CMS last year, and even spearheaded a [letter to CMS](#) from members of Wisconsin’s Congressional delegation mentioning these concerns and calling out CMS’ actions as contrary to the clear intent of the law passed by Congress. Unfortunately, CMS went ahead with these cuts in their final rule, at an estimated impact of \$440 million in lower payments to about 40 Wisconsin hospitals over a 10-year period.

In response, hospital groups filed a lawsuit challenging that CMS could not use its authority to reduce unnecessary utilization of services in a manner that conflicts with the statute Congress passed directing how payments must be made under the outpatient rule. Judge Collyer agreed in her ruling, writing, “CMS was not authorized to ignore the statutory process for setting payment rates in the Outpatient Prospective Payment System and to lower payments only for certain services performed by certain providers.” Rather than ordering CMS to refund the payments to providers, Judge Collyer ordered CMS to determine a remedy and for both parties to submit a status update to the court by October 1.

While this is a huge victory for hospitals, there still may be a long legal road ahead if CMS appeals this decision. WHA will continue to keep a close watch on this issue and will provide updates as needed. For questions, contact WHA Director of Federal and State Relations [Jon Hoelter](#).

# WI Voters Concerned About Potential Federal Legislation on Surprise Billing

## Concerned legislation favors big insurance companies

Wisconsin voters are wary that federal legislation aimed at ending surprise medical billing may be letting health insurance companies off the hook. That's according to a memo from a GOP pollster for President Donald Trump who did polling on the issue in critical 2020 swing states.

According to a [story from the politics website "The Hill,"](#) the poll was conducted at the end of August and surveyed voters in Wisconsin, Michigan, and Pennsylvania. Fifty-six percent of Wisconsin voters feel health insurers should be most responsible for paying surprise medical bills, while less than 12% think providers should be held responsible. Even more telling is that a paltry 6% of voters in Wisconsin support a government program that would set rates to control costs, which is among the solutions presented in legislation passed in federal House and Senate committees. In fact, the pollster warned, "Any policy to address this issue that appears to side with the insurance companies could backfire because they are seen as the problem."

Using feedback from its [Transparency Task Force](#), which has met over the summer months and provided valuable feedback on current legislative proposals, WHA has made surprise billing a major advocacy effort, with [stops in Washington, D.C.](#) and [roundtables](#) in Wisconsin aimed at letting Wisconsin's [Congressional delegation](#) know the problems with legislation currently up for debate in Washington. WHA supports efforts to reduce instances of surprise billing by taking patients out of the middle. However, it has warned lawmakers that current proposals to institute government price controls would only reward insurance companies and could lead to challenges for hospitals and [lack of provider choices](#) for patients. The problems would be felt the most in rural hospitals that already run on thin margins and deal with provider shortages.

Instead, WHA has supported allowing insurers and providers to continue to work out billing disputes, while having an independent dispute resolution process serve as a backstop in cases where the two parties cannot reach an agreement—a process that seems to have seen positive results in states like Texas and New York that have had higher instances of surprise billing than Wisconsin. According to the poll, more than 3 out of 4 voters in Wisconsin agree with this approach.

What is perhaps most notable about the poll is that it was done for President Trump months after the President has come out publicly in support of having Congress and his administration work on solutions to end surprise billing, with his administration publicly saying it does not favor an arbitration approach. While the state of efforts in Washington is uncertain, WHA will continue to closely engage with lawmakers as Congress continues its work.

If you have questions regarding this issue, contact WHA Director of Federal and State Relations [Jon Hoelter](#).

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## Wisconsin Hospitals PAC & Conduit Reaches 69% of Goal

### See full contributor list



To date, the Wisconsin Hospitals State PAC & Conduit 2019 campaign has raised \$219,532.52. That is 69% of its aggressive goal of raising \$320,000 for 2019. 215 individuals have made a personal contribution. More than 50% of contributors contribute at one of the club levels, \$1,500 and above, and 25 individuals are first-time contributors.

"We are pleased to see new supporters stepping up as leaders in the industry, ensuring candidates who value hospitals are well-supported," said WHA Vice President of Advocacy Kari Hofer. "As September comes to a close and the campaign enters the final stretch, we are asking everyone—both new supporters and past supporters—to consider a personal contribution."

Take a look at the 2019 contributor list on pages 5 and 6 to see who made the list.

The Wisconsin Hospitals PAC & Conduit are bipartisan, supporting candidates who value hospitals and health systems regardless of their political affiliation. More than 90% of individuals who participate in the program contribute via the Wisconsin Hospitals Conduit where funds are disbursed to candidates or committees of the donors' choosing. The Wisconsin Hospitals PAC pools individuals' contributions and contributes to candidates and committees at the discretion of the Wisconsin Hospitals PAC.

To ensure your name is on future contributor lists, make your personal contribution today at [www.whconduit.com](http://www.whconduit.com) or by contacting [Kari Hofer](#) at 608-268-1816 or [Nora Statsick](#) at 608-239-4535.

## Global Vision Community Partnership Award

The WHA Foundation, Inc. is proud to announce the two recipients of the 2019 Global Vision Community Partnership Award.



The purpose of the Global Vision Community Partnership Award is to recognize and reward community partnership projects that work with a WHA member hospital(s) to meet an identified community health need in an innovative or creative manner.

### **School Based Mental Health Counseling**

#### ***Fort HealthCare, Inc.***

As an outgrowth of Fort HealthCare's integration of mental health into primary clinics, the School Based Mental Health Counseling Program began as a pilot project in 2016 to demonstrate the feasibility of a collaborative model to solve this community health need. In part due to the program's overwhelming amount of positive feedback from students, parents and school staff, the program has grown to the point of needing to hire a second full-time counselor in 2019 to accommodate expansion to full-time service in Whitewater, as well as adding the Cambridge School District to the program.

### **Jackson In Action**

#### ***Black River Memorial Hospital***

Jackson In Action is a community coalition that promotes healthy lifestyles for children, their families and the greater community. Formed in 2011, partners now include Black River Memorial Hospital, local school districts, Ho-Chunk Nation, UW-Extension, local law enforcement, Jackson County Public Health and Forestry and Parks, Lunda Community Center, the Boys & Girls Club, Friends of the Library, Hansen's IGA, and local coalition Together for Jackson County Kids. Jackson In Action provides low or no-cost resources for activities, some of which include the Pace and Pedal Duathlon, Laces to Leaders, Move With A Doc and a Hunter & Hiker Fitness Initiative.

Award winners each receive a plaque of recognition and \$2,500 to continue to fulfill the mission and activities of these valuable programs.

[WHA Foundation Inc.](#) thanks all nominations submitted for the Global Vision Community Partnership Award.

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## Preparing the Chargemaster for 2020: November 21, 2019 in Wisconsin Dells

Get ready to prepare your hospital's chargemaster for 2020 at WHA's one-day seminar "Preparing the Chargemaster for 2020," scheduled Thursday, November 21 in Wisconsin Dells.

This program will focus on helping you update your chargemaster for the 2019 reporting requirements and new chargemaster opportunities to keep you "in the know" for CPT and HCPCS coding revisions. As in previous years, it is anticipated every ancillary department of the facility's chargemaster will be impacted by the new coding changes. Discussions will focus on requirements with revisions, as well as strategies for department staff education. This year's program will be led by coding expert Glenda Schuler, back by popular demand.

This seminar is targeted to individuals responsible for APCs, Billing, Revenue Cycle Management and Chargemaster Maintenance. The following individuals are encouraged to attend: Coders/Managers/Directors, Chargemaster/APC coordinators, Revenue Cycle Managers, Perioperative Services Directors, Health Information/Medical Records Managers, Director of Patient Financial Services, Billing Office/Business Office Managers, Pharmacy Directors, Supply Chain and Purchasing Managers, Ancillary Departments, Materials Management, Nurse Auditors and Compliance Auditors

This program has prior approval of the American Academy of Professional Coders for 5.5 continuing education units.

This seminar will be held at Glacier Canyon Lodge at The Wilderness Resort in Wisconsin Dells on Thursday, November 21. Keep an eye out for registration to go live on [WHA's website](#) by the beginning of October. For registration questions, contact [Allison Taylor](#) at 608-274-1820.

## Political Action Fundraising Campaign Contributors

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***(WHA-Proposed Amendment Seeks to Protect All Health Care Providers from Violence . . . continued from page 1)***



to health care staff, and Wisconsin hospitals and health systems are always seeking further deterrents to violence against health care workers,” Zenk noted. “Thank you for taking this step to add one more strategy to this tool kit to keep not just nurses, but the entire patient care workforce safer.”

For additional information on amended Senate Bill 163, Assembly Bill 175 and other efforts underway to prevent violence against health care professionals, contact [Ann Zenk](#) at 608-274-1820.

Individuals who want to stay up-to-date on this and other important legislation as well as take action on those issues should contact WHA Vice President of Advocacy [Kari Hofer](#) or join WHA’s grassroots advocacy program, [HEAT](#).