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EDUCATIONAL EVENTS

December 10, 2019

Enhancing Resilience: Survival of the Kindest
Free Member Webinar Series

December 12, 2019

Discharge Planning: Compliance with the New CMS Hospital & CAH CoPs
Webinar

WHA Workforce Report Highlights “Silver Tsunami” in Health Care Workforce, Patient Mix

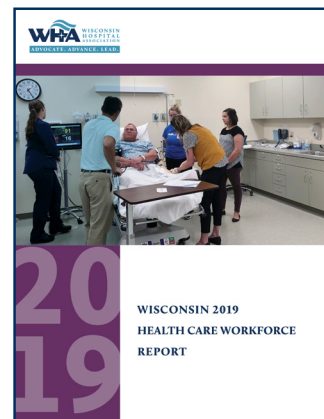
Also includes recommendations to help combat troubling demographic trends

Sounding the alarm on an aging patient population and shrinking health care workforce, WHA on Dec. 2 released the [Wisconsin 2019 Health Care Workforce Report](#). The annual report has the latest facts and data showing the continuation of concerning demographic, employment and regulatory trends in Wisconsin while suggesting potential remedies to help combat our state’s “Silver Tsunami.”

Among the major challenges identified in this year’s report:

- The escalating demands of an aging population – *the population over age 75 will increase by 75% from 2017-2032, increasing the number of those requiring more intensive health care.*
- Increased competition over a shrinking workforce – *the population under age 18 will grow by only 3.5% from 2017-2032.*
- A rapidly changing environment – *hospitals have moved from paper to electronic health records in just a decade, and 75% of hospitals now provide access through telemedicine. With rapid technology changes come challenges.*
- Increased regulatory demand – *meeting regulatory demands requires 59 FTEs for an average-sized hospital; physicians and advanced practice clinicians devote more time to the electronic health record than they do face-to-face with patients.*

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Keynote Announced for March 18 Advocacy Day



Frank Sesno

WHA is pleased to announce that Frank Sesno will be the featured keynote speaker at the March 18, 2020 annual Advocacy Day event.

Sesno is an internationally-recognized journalist with more than 30 years of experience reporting from around the world. Well-known as a television anchor, White House correspondent and talk show host with CNN, he is also a nationally-renowned moderator who has engaged some of the world’s leading personalities. Sesno currently serves as director of The George Washington University’s School of Media and Public Affairs, where he leads nearly two dozen world-class faculty and teaches journalism ethics, documentary, sustainability reporting and “the art of the interview.”

Sesno is a frequent analyst on television and in print on the subject of American politics and media. He has hosted and produced documentaries for both The History Channel and PBS.

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(Keynote Announced for March 18 Advocacy Day . . . Continued from page 1)

Sesno is a member of the Council on Foreign Relations and serves on the Board of Trustees at Middlebury College. He is a past trustee of The Potomac School and the Robert F. Kennedy Memorial Journalism Award committee. Sesno graduated cum laude with a B.A. in American History from Middlebury College. He has received honorary doctorates from the Monterey Institute of International Studies in California, Middlebury College, and Eckerd College.

Look for 2020 Advocacy Day registration to be available in the new year.

Wisconsin Hospitals PAC & Conduit Approaches 2019 Goal

See full contributor list

To date, the Wisconsin Hospitals State PAC & Conduit 2019 campaign has raised \$313,975. That is 98% of its aggressive goal of raising \$320,000 for 2019, leaving \$6,025 remaining to reach goal. More than 290 individuals have made a personal contribution. Of those, 92 individuals contribute at one of the club levels, \$1,500 and above, and 31 individuals are first-time contributors.



Look at the 2019 contributor list on pages 4-6 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 together and contributes to candidates and committees at the discretion of the Wisconsin Hospitals PAC.

To make sure your name is on the FINAL contributor listing for 2019, make your personal contribution before Dec. 31 at www.whconduit.com or by contacting WHA's [Kari Hofer](#) at 608-268-1816 or [Nora Statsick](#) at 608-239-4535

AHA, Others File Lawsuit to Block HHS Mandate Requiring Hospitals to Post Negotiated Rates

The American Hospital Association (AHA) was joined by the Association of American Medical Colleges, Children's Hospital Association, and Federation of Hospitals in filing a lawsuit Dec. 4 to block a new federal requirement that hospitals post their proprietary rates negotiated with insurance companies. The requirement stemmed from a final rule published by the U.S. Department of Health & Human Services (HHS) on Nov. 15 that would require hospitals to post all negotiated rates for all health care services by Jan. 1, 2021. AHA's suit asks for an immediate injunction stopping the reporting requirement while the suit is ongoing, arguing that the requirement is so extensive that hospitals would have to begin planning for implementation immediately to meet the deadline. The lawsuit challenges HHS' authority to define a standard charge as a negotiated rate and raises the claim that such compelled disclosure is a violation of the First Amendment due to the requirement's mandate of specific speech.

In the filing, the AHA notes that "America's hospitals and health systems are committed to providing patients with the financial information they need to make informed decisions about their health care," pointing out that HHS' requirements could lead to patient confusion when out-of-pocket expenses differ from amounts disclosed under the rule due to coinsurance and deductible requirements. Additionally, the suit cites prior statements from the Federal Trade Commission suggesting that making proprietary rates public "would offer little benefit but could pose substantial risk of reducing competition in health care markets." Instead, hospitals have called on HHS to bring together providers and insurers in a cooperative, voluntary fashion to help encourage how to best get patients the type of health care cost information that would be most meaningful.

While the lawsuit makes many of the provisions of the final rule uncertain, WHA is already exploring how it can assist Wisconsin hospitals in fulfilling whatever requirements eventually become law. For example, Wisconsin hospitals have posted price transparency information for more than 15 years on Wisconsin's [PricePoint](#) website. The website already includes standard charges for many of the most-utilized health care services and allows consumers to compare all hospitals across the state. WHA is exploring what opportunities might exist in utilizing PricePoint to provide consumers even more meaningful information to better enable them to compare costs across hospitals. WHA is also finalizing its Transparency Task Force report, which will include best practices many Wisconsin hospitals already use voluntarily to provide consumers with meaningful cost information, including up-front cost estimates in advance of receiving planned health care services.

For more information, contact WHA Director of Federal & State Relations [Jon Hoelter](#).



The WHA Transparency Task Force convened its final meeting Dec. 5 to discuss its forthcoming report on price transparency best practices and recommendations for policymakers. See next week's *Valued Voice* for additional details on the report.

WHA Responds to Ways & Means Rural and Underserved Task Force Request for Information

The Wisconsin Hospital Association responded to a recent request from the U.S. House Ways and Means Committee Rural and Underserved Communities Health Task Force [Request For Information](#), recommending Congress explore ways to partner with hospitals and health systems on areas important to providing care.

In its [letter to the task force](#), WHA recommended needed improvements in the following areas:

- Addressing Workforce Shortages
- Patient Volume Adequacy in Rural Areas
- Quality Initiatives
- Social Determinants of Health
- Telehealth
- Post-Acute Care
- Behavioral Health
- Unnecessary Regulations

WHA recommended Congress consider adjusting or removing the federal cap supporting funding for graduate medical education to help reduce health care workforce shortages. Congress should also consider removing Medicare's site restrictions on reimbursing for telehealth to relieve workforce shortages, as a recent [workforce report](#) released by WHA finds that we are not likely to be able to train enough physicians to keep pace with projected upcoming demand as the baby-boom generation continues to retire (see story on page 1). This demographic issue also impacts hospitals' revenue in terms of having an adequate volume of commercial patients to offset the growing number of Medicare patients hospitals care for while being reimbursed at levels below the cost of providing care. This can also be particularly challenging to hospitals serving a high number of Medicaid patients, such as inpatient psychiatric units that serve very few private-pay patients.

WHA also noted the work of the Superior Health Quality Alliance (SHQA) and CMS' important efforts to support initiatives to help hospitals improve quality of care. As hospitals and public health agencies collect better data and better understand how social determinants of health impact patient outcomes, this gives policymakers more opportunities to support efforts to improve the overall quality of health care.

Lastly, WHA recommended the committee explore unnecessary regulations that restrict hospitals' and health systems' ability to provide more telehealth services, prevent hospitals from being able to offer proper post-acute and long-term-care services, or hamper efforts to more efficiently utilize a hospital's space by sharing it with other non-hospital providers.

WHA looks forward to working with policymakers on the Ways and Means task force to advance these areas of reform that WHA and its members have long supported. For more information, contact WHA Director of Federal & State Relations [Jon Hoelster](#).

Be Safe in the Cold!

With all the snow Wisconsin received the past few weeks, many are getting ready to get outside for some winter fun! When you get outside, be careful, bundle up and stay safe.



According to the [WHA Information Center](#), there were 18,803 winter-related emergency room visits to Wisconsin hospitals in winter 2018. In addition to frostbite and exposure to the cold, some of those emergency room visits included:

- 12,522 falls due to ice and snow
- 878 visits related to downhill skiing, cross-country skiing, snowboarding, sledding and tubing
- 114 visits related to ice skating

For additional information to stay safe and healthy in the winter, visit the [CDC website](#).

(WHA Workforce Report Highlights “Silver Tsunami” in Health Care Workforce, Patient Mix . . . Continued from page 1)

The report includes recommendations for health care leaders, educators and policymakers to consider while reviewing WHA’s report: strategically-targeted workforce recruitment and retention, leveraging team-based health care delivery, wise use of technology and keeping a wary eye on regulatory burdens – those already on the books as well as new regulations that are proposed.

Key among the recommendations: state and federal policymakers must weigh any proposed regulation against the expected benefit. Even regulations proposed for a seemingly-positive purpose can instead hinder hospital and health system efforts that reflect the unique needs of their communities. Wisconsin’s health care system has evolved throughout the state via different strategies – and usually in ways that are not the result of “one size fits all” regulations.

Contact WHA Vice President of Workforce and Clinical Practice [Ann Zenk](#) for more information.

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