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WHA Raising Awareness of Safe, Accessible Emergency Care

As Wisconsin citizens continue to shelter at home during the COVID-19 pandemic, WHA is ramping up efforts to remind the public and policymakers that people experiencing potentially life-threatening health conditions should not hesitate to utilize Wisconsin’s safe and available emergency departments.



WHA engaged this week with multiple media covering the effects of the pandemic. WHA President and CEO Eric Borgerding on April 29 discussed the availability of the state’s emergency departments with [Milwaukee’s TMJ4](#), stressing how public perception is likely skewed due to coverage of national and overseas hotspots showing conditions much different than what has happened in Wisconsin.

“We really need to make sure that folks know our EDs, our urgent care facilities . . . have been open, safe and accessible all during the pandemic,” Borgerding said.

Borgerding and WHA Chief Medical Officer Mark Kaufman, MD also appeared on a Metropolitan Milwaukee Association Chamber of Commerce (MMAC) [daily briefing](#) on *(continued on page 2)*

EDUCATIONAL EVENTS

May 5, 2020
Open Meetings in the Age of Technology
Webinar

May 12, 2020
Resiliency Webinar: Signature Strengths at Work
Webinar

Visit www.wha.org for more educational opportunities

State Gives Updates, Recommendations on Hospital PPE Supply

As the COVID-19 pandemic continues to strain the state’s supply of personal protective equipment (PPE), the State of Wisconsin has created a system for prioritizing distribution of state-acquired PPE. The state also recently announced a partnership that could help hospitals and clinics decontaminate certain N95 respirator masks, extending their useful life.

PPE Process

The state’s Emergency Operation’s Center (SEOC) – the central hub of state government COVID-19 activity – sent a message to numerous health care entities explaining that the state is prioritizing PPE distribution to those providing direct patient care, such as hospitals, clinics and long-term care providers. To streamline the distribution process, county and tribal emergency management directors are now in charge of the state-obtained PPE distribution process.

According to the SEOC message, care providers are expected to “make reasonable attempts to source PPE and other needed supplies locally and through existing supply channels” before approaching the state for PPE. At that point, providers are encouraged to reach out their local director for more information. Those directors can be found starting on page 17 of [this directory](#). *(continued on page 2)*

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N95 Respirator Masks – Decontamination Update

This week the state’s Department of Health Services sent an alert to numerous health care entities with news of a public/private partnership allowing the state to obtain a decontamination system for N95 respirators, which could extend the life of this PPE by several-fold.

In partnership with the Federal Emergency Management Agency (FEMA) and the Defense Logistics Agency in the U.S. Department of Defense, the state is expected to receive access by mid-May to a [Battelle CCDS Critical Care Decontamination System](#). The system uses hydrogen peroxide gas to decontaminate up to 10,000 N95 respirator masks daily.

The N95s must be NIOSH-certified and cannot be cellulose based.

The state is developing a process to collect, decontaminate and then return N95 respirator masks to qualified health care personnel and will provide further details soon. In the meantime, Wisconsin health care providers interested in using the Battelle CCDS should retain used N95 masks for future decontamination, making sure to mark each mask with the name of the person to whom it was issued.

CMS Launches Burdensome 340B Survey Despite Hospital Concerns

CMS proceeded with its plan to launch a survey of 340B hospitals starting April 24 and closing on May 15, 2020. This decision came despite [strong objections from WHA](#) and other hospital groups who expressed [concerns](#) with the regulatory and compliance burden hospitals already face, and the fact that results from the survey would be used to weaken, rather than strengthen, the 340B program. WHA had requested CMS to withdraw the survey even before hospitals were facing new challenges and staffing strains from the COVID-19 response.



The 340B prescription drug program helps hospitals stretch scarce federal resources by requiring drug manufacturers to sell qualifying outpatient drugs at a discount to hospitals and other eligible entities. With rising prescription drug costs increasingly accounting for a larger percent of hospital expenses, the 340B program has provided a welcome respite to rising prescription drug costs that are otherwise outside of a hospital’s control.

According to [instructions on the CMS website](#), other than critical access hospitals, all hospitals enrolled in the 340B program in either the last quarter of 2018 or first quarter of 2019 are required to complete the survey by May 15. The survey itself requests acquisition cost data for 340B drugs and is being collected by CMS in response to a [federal judge declaring](#) the agency could not legally reduce hospital reimbursements in the 2018 OPDS rule without first obtaining cost acquisition data.

Contact WHA Director of Federal and State Relations [Jon Hoelter](#) with questions.

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April 28, sharing in-depth analysis of [WHA’s COVID-19 data dashboard](#) and what it reveals about Wisconsin health care’s effective response to the pandemic. Borgerding discussed how some state hospitals and systems have started to carefully phase back in to providing care temporarily halted due to federal guidance in mid-March.

Borgerding and Dr. Kaufman’s presentation and analysis was followed by MMAC’s discussion of state government’s response to the pandemic and its effects with State Assembly Speaker Robin Vos (R-Rochester) and Senate Majority Leader Scott Fitzgerald (R-Juneau).

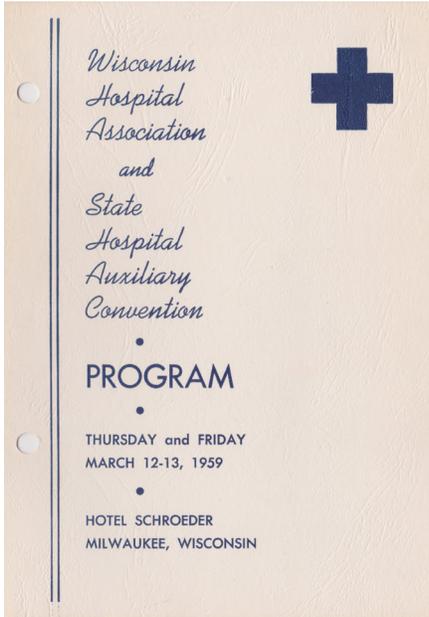
Meanwhile, WHA’s Government Relations department has been proactively working with the entire Wisconsin State Legislature and staff, helping provide suggested social media messaging elected officials can use on their Facebook, Twitter and LinkedIn accounts. Legislators have been especially active on social media during the pandemic and can effectively engage with their constituents to remind them how important it is to utilize available and safe emergency care.

For more information about WHA’s messaging during the COVID-19 pandemic, contact WHA Vice President of Communications [Mark Grapentine](#).

1959 Annual Convention in Milwaukee

Currently WHA holds annual events for the membership to gather, learn and advocate – Advocacy Day, the Physician Leadership Development Conference and the Wisconsin Rural Health Conference. For many years WHA also held an annual convention that included the entire membership and often partnered with allied groups.

During convention, the annual business meeting was held, in addition to education and awards. Members had a chance to meet and collaborate. A banquet was held, with formal dress in the early years. These conventions were held for over 90 years.



In 1959, the annual convention was held at the Hotel Schroeder in Milwaukee in conjunction with the State Hospital Auxiliaries (now known as the Partners of WHA). There was separate programming for WHA and the auxiliaries. However, they came together for lunch. In that 1959 brochure the auxiliaries were given the instruction, “Now Stop! Don’t Leave and Shop!” Auxiliaries have operated successful and profitable gift shops in hospitals for many years so they couldn’t be faulted for wanting to find a bargain while in Milwaukee – perhaps to take home for their local gift shops?

In those early meetings and through the 1960s there was also a session entitled the “Small Hospital Seminar,” suitable for the small hospitals in WHA’s membership. In 1977, sensitive to special constituencies with the membership, WHA developed the first annual

conference solely for executives and trustees of small and rural hospitals.

During that convention in 1959, they also “adopted a program of increased dues for the purpose of setting up a full-time state office with staff.” A committee was appointed to study location and selection.

See the [brochure](#) from the 1959 Convention.

Next week: In 1960 WHA opened its first dedicated office space in Madison and hired its first full-time staff member.

W. H. A. Plans State Office With Full Time Secretary

The Wisconsin Hospital Association at its annual meeting adopted a program of increased dues for the purpose of setting up a full time state office with staff.

President Karl H. York has appointed a committee to study

1. Location
2. Selection of a full time executive secretary.

The committee consists of:

Warren Von Ehren, Bellin Memorial Hospital, Green Bay

Robert M. Jones, Waukesha Memorial Hospital, Waukesha

Harold C. Guntner, Memorial Hospital, Menomonie

Monsignor Edmund J. Goebel, Director of Catholic Hospitals, Milwaukee

Institutional members having been requested to file their choice of location for the state office have replied in great numbers. All of these are now in the hands of the above named committee for evaluation.

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