

## THE VALUED VOICE

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## WHA Testifies on COVID-19 Legislation Supporting Wisconsin Hospitals, Health Systems

Assembly Bill 148 scheduled for Assembly floor vote on March 16

During a meeting of the Assembly Health Committee on March 9, Wisconsin Hospital Association (WHA) President and CEO Eric Borgerding and other senior members of the WHA team <u>testified in favor</u> of <u>Assembly Bill 148</u>. The legislation, authored by Rep. Nancy VanderMeer (R-Tomah)—a former hospital board member at Tomah Health—would adopt five provisions intended to both support hospitals and providers while they continue the fight against COVID-19 and permanently remove regulations that have been barriers for care providers.



"We are pleased to note that all five provisions in Assembly Bill 148 have previously received support by Republicans and Democrats in the Legislature and Gov. Evers," said Borgerding in remarks to the committee. "And for good reason—they are proactive ideas largely born out of, or highlighted by, the pandemic, they leverage and apply lessons learned, and enable better utilization of resources by improving care."

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### **EDUCATIONAL EVENTS**

#### March 16

Key 2021 CMS Updates Webinar

#### March 16

WHA Information Center Data Tools for Everyday Use - 2021 Virtual Bag Lunch Webinar Series

Session 1: How Healthy is Your Community?
Webinar

Visit www.wha.org for more educational opportunities

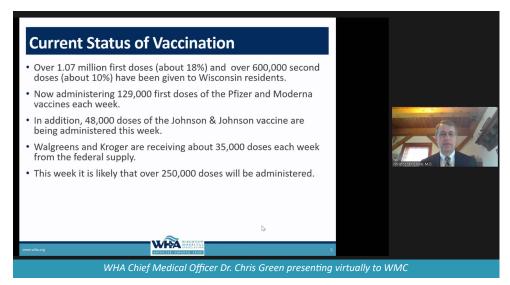
# WHA CMO Provides COVID Update to Statewide Business Group

Wisconsin Hospital Association (WHA) Chief Medical Officer Chris Green, M.D., provided an update on the COVID-19 pandemic to Wisconsin Manufacturers and Commerce members this week, discussing the impact of the virus's late-2020 surge on the state's hospitals and reflecting on progress the state has made on vaccinating its residents.

While noting progress in Wisconsin in reducing COVID spread and significantly decreasing hospitalizations resulting from the virus, Green highlighted the potential threats of variant strains that may come to dominate new cases in the coming months. Because of the increased infectiousness of these strains and while we continue our vaccination campaign, it is important to continue mitigation practices, including wearing masks, hand hygiene and social distancing, Green said.

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Green noted that pandemic-related restrictions would be lifted gradually as more and more people are vaccinated. This trend would apply to businesses as well, with the Centers for Disease Control likely to provide guidance to manufacturers and others about relaxing protective business practices in the weeks and months to come. "It will happen when infections are under control," he said, adding, "It will be a gradual process." The changes need to be made gradually to prevent a new virus surge and allow for a coordinated response at the first sign of an upward trend.

Businesses, Green noted, can play an important role in the state's vaccination strategy by encouraging employees to be vaccinated and continuing to observe safe behaviors within their facilities.

Asked for his general sense of where things are headed in terms of COVID-19, Green responded, "I am optimistic, particularly as our vaccination rate goes up, that we are going to reach herd immunity and suppress COVID."



### WHA Physician Leaders Council Reviews COVID-19, Vaccines and More

Tom Voelker, chair of the Wisconsin Hospital Association (WHA) Physician Leaders Council, introduced a varied discussion at the council's March 10 meeting, starting with an update on the COVID pandemic in Wisconsin. This included a discussion led by WHA Chief Medical Officer Chris Green, M.D., on the falling number of new infections in Wisconsin, the increasing availability of vaccines vaccine hesitancy and the emergence of COVID variants in Wisconsin. The council had an energetic dialog about staff burnout, quality improvement challenges in the context of the COVID pandemic, vaccine supply and behavioral health issues during the pandemic.

Vaccine demand varies throughout the state, as noted by participants in the call. It has dropped sharply in some regions, while rural areas report continued high demand among patients aged 65 and older. While vaccine hesitancy is a concern, systems are seeing high levels of acceptance among physicians and medical staff, but lower adoption among food service workers, for example. Members expressed enthusiasm for the Johnson & Johnson vaccine, which can easily be taken into the community through churches, community centers and other public spaces due to its common refrigeration requirements.

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#### (WHA Physician Leaders Council Reviews COVID-19, Vaccines and More . . . continued from page 2)

Next was a discussion of physician leadership, education and wellness by Dr. Green and a conversation about the health care workforce led by WHA Senior Vice President of Workforce and Clinical Practice Ann Zenk.

WHA Senior Vice President of Government Relations Kyle O'Brien then reviewed facility billing, placement of patients in skilled nursing facilities, the status of professional licensure reform and the Wisconsin state budget. WHA General Council Matthew Stanford next provided an update on initiatives related to emergency detention and telehealth and advocacy related to Suboxone/buprenorphine.



WHA Vice President of Advocacy Kari Hofer presented information on the upcoming WHA Advocacy Day taking place virtually on April 14.

Finally, WHA Vice President of Education and Marketing Leigh Ann Larson provided details on the WHA Physician Leadership Conference coming up on March 12, the Wisconsin Rural Health Conference scheduled for June 3 and the development of the WHA Leadership Academy. The latter will be presented in greater detail at the next Physician Leaders Council meeting on June 9.

## U.S. Senate and House Send \$1.9T COVID Relief Bill to President Biden's Desk

On March 6, the U.S. Senate passed H.R. 1319, the American Rescue Plan Act of 2021. The \$1.9 trillion bill is the fifth COVID relief package since the start of the pandemic, but the first to pass under the Biden administration.

As reported in last week's The Valued Voice, the package contains a number of important health care provisions, including \$9 billion in additional relief for rural hospitals and health care providers, additional subsidies to improve coverage on the Affordable Care Act (ACA) exchanges and for COBRA plans, and other additional funding to mitigate impacts of the COVID pandemic.

In addition to these health care provisions, the legislation also provides direct payments to most Americans and boosts child tax credits. It also includes more than \$350 billion in aid to state and local governments as well as \$130 billion to schools to

assist with safe reopening, and \$50 billion in aid to small businesses. It is unclear if the additional state and local aid will translate into assistance to health care providers akin to the relief for state and local governments passed last year under the CARES Act.

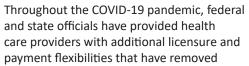
Unfortunately, the final legislation kept intact an earmark to the states of New Jersey, Rhode Island and Delaware that will artificially inflate their Medicare wage index, thereby sending artificially higher Medicare payments to those three states only. WHA has been working to restore fairness to the wage index ever since the "Bay State Boondoggle" passed in the Affordable Care Act and alerted Wisconsin's congressional delegation to this most recent attempt when the Senate legislation was unveiled last week. U.S. Sen. Ron Johnson worked with Sen. Marsha Blackburn (Tenn.) to introduce an amendment to strip this provision, but it failed on a party-line vote like most amendments offered.

The full bill passed under the Senate budget reconciliation process on a party-line vote as expected. The U.S. House quickly took up the bill and passed it on March 10 on a mostly party-line vote, with one Democrat joining all Republicans in objecting. President Biden has said he expects to sign the bill into law on Friday, March 12.

Contact WHA Vice President of Federal and State Relations Jon Hoelter with questions.

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unnecessary burdens on hospitals and helped to improve access while maintaining high quality care for patients. The new legislation includes the following provisions:

- Permanently adopts, even beyond the public health emergency, temporary licensure processes established during COVID-19 for out-of-state providers with a valid, unrestricted license in another state;
- Provides payments to hospitals for Medicaid patients who are ready to be discharged from the hospital but await a post-acute care placement through Jan. 1, 2022;
- Provides payments to hospitals for certain outpatient care delivered to Medicaid patients outside the inpatient facility through Jan. 1, 2022;
- Clarifies the ability for hospitals to deliver hospital services in a patient's home consistent with a Medicare-covered service, like those approved under the Centers for Medicare & Medicaid Services' Acute Hospital Care at Home program; and
- Provides the WHA Information Center with Medicaid claims data, helping hospitals better understand how care
  delivered outside the walls of a hospital is impacting care outcomes inside hospitals to reduce unnecessary utilization
  and Medicaid losses for hospitals.

The legislation is scheduled to be voted on by the full Assembly on March 16.

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