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EDUCATIONAL EVENTS

April 28

AP Automation for the modern hospital Webinar Series

May 12

Social Media for Governing Boards: Opportunities and Pitfalls Webinar

June 3

Wisconsin Rural Health Conference Virtual

WHA Advocacy Day 2021: Virtual Format, Real Results

Nearly 1,000 hospital and health system leaders, providers, volunteers, clinical and non-clinical staff and trustees attended the Wisconsin Hospital Association (WHA) Advocacy Day virtual event on April 14, followed by three days’ worth of meetings between hospital representatives and state elected leaders to discuss key priorities for hospitals as lawmakers deliberate the 2021-2023 state budget.

In a recorded opening [address](#) to attendees, WHA President and CEO Eric Borgerding reflected on the year that has passed since the 2020 WHA Advocacy Day event was cancelled because of COVID-19.

“With little warning, this unrelenting virus clamped down on our state, straining the limits of our operations, finances and staffing, testing our resolve and resilience like never before,” Borgerding said.

Not only did conference attendees show their commitment to communities, they stood as strong advocates for their hospitals, their health systems, their patients and their colleagues, Borgerding noted, adding, “WHA is immensely proud to be your partner.”

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WHA President and CEO Eric Borgerding at WHA’s virtual 2021 Advocacy Day

Advocacy Day Keynote Speaker Encourages Attendees to Tell Their Story

Frank Sesno: “We have all been transformed”



Frank Sesno
Anchor and Washington Bureau Chief, CNN (1984-2009)
The George Washington University’s School of Media & Public Affairs

Former news anchor and CNN Washington bureau chief and current George Washington University Director of Strategic Initiatives Frank Sesno provided inspiration and encouragement in his keynote address to attendees of WHA’s Advocacy Day as they reflect on the challenges of the past year and the road to recovery from COVID-19.

In a presentation entitled *Surviving the Pandemic*, Sesno observed that while the pandemic ought to have brought people together, it did just the opposite. “This has polarized us. This is what you are all confronting. This is a war, and the frontlines are in the hospitals.”

Sesno stressed the importance of frontline health care workers telling their stories. “[Good stories] are compelling characters who overcome obstacles for the intended outcome of survival, health and getting back to normal life,” he noted. Storytelling,

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(Advocacy Day Keynote Speaker Encourages Attendees to Tell Their Story . . . continued from page 1)

Sesno added, can and should play an important role in building the trust necessary to overcome vaccine hesitancy. “We gain trust by telling our personal stories,” he said. This, combined with showing respect and listening, will help people gain comfort with taking the vaccine.

Sesno concluded his remarks by thanking hospitals for going above and beyond expectations this past year to save lives and make our communities safer.

Gov. Tony Evers to WHA Advocacy Day Attendees: “It Has Been a Challenging and Breathtaking Year”



Gov. Tony Evers offered his sincere gratitude to the nearly 1,000 attendees of the 2021 WHA Advocacy Day event for “taking care of patients, communities and the entire state” during this past year, underscoring the challenges that COVID-19 created, particularly for health care providers.

Offering encouragement and noting the state’s progress in vaccinating its residents against the virus, Evers observed, “There is light at the end of the tunnel. Wisconsin is a leader in getting shots in arms.”

The governor highlighted his Badger Bounce Back plan, which includes improving public health care infrastructure, deploying more funding for hospitals and public health and expanding the BadgerCare program.

“The health and wellness of our state and economy depend on the health and wellness of our people,” Evers asserted in his closing remarks.

Lawmakers Debate Impact of Medicaid Expansion, Discuss COVID Impacts during WHA Advocacy Day Legislative Panel

A bipartisan panel of the state Legislature’s budget-writing Joint Finance Committee participated in a legislative panel for WHA’s virtual Advocacy Day event. The panelists’ discussion included several issues impacting the state budget as well as a lengthy dialogue on the impacts of Medicaid expansion in Wisconsin and what we have learned from a policy perspective as our state responded to the COVID-19 pandemic.

“Wisconsin tends to be an asterisk in all the white papers on Medicaid expansion,” said WHA President and CEO Eric Borgerding. “Medicaid expansion has known and unknown impacts on access, provider reimbursement and state revenues,” he noted. Borgerding asked panelists their position on the governor’s proposal to expand Medicaid coverage to people living between 100% and 133% of the federal poverty line.

“We’ve already made clear that we are not looking to expand our welfare system here in Wisconsin,” said Assembly Co-Chair Mark Born (R-Beaver Dam). “I think we showed last budget that we can make even larger investments in health care without having to expand the welfare program.”

“We have a low number of uninsured individuals in Wisconsin compared to other states,” continued Born. “If we do expansion, we take a good number of people on private insurance now and put them onto the welfare program. We think that is a mistake. We think it has negative effects on their access to health care and it has negative effects on how hospitals and doctors are reimbursed.”

Sen. Jon Erpenbach (D-West Point) disagreed with the description of Medicaid expansion as welfare expansion. “It’s not welfare, it’s health care,” said Erpenbach. “If you take a look at the amount of money the state has turned down by not expanding Medicaid, it is staggering. In this budget, if we expand Medicaid and provide coverage for individuals making \$8 per hour, we will save \$620 million in general purpose revenue.”

Sen. Dale Kooyenga (R-Brookfield) discussed a hybrid approach to Medicaid expansion. “Let’s get people out of the range of poverty or lower-middle class, so they don’t need Medicaid,” said Kooyenga. He outlined three conditions that could lead to a

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(Lawmakers Debate Impact of Medicaid Expansion, Discuss COVID Impacts during WHA Advocacy Day Legislative Panel . . . continued from page 2)

potential compromise on Medicaid expansion that would: 1) use Medicaid expansion funding to cut taxes for individuals and encourage people to move into the middle class; 2) create a solvency fund for Wisconsin's Medicaid program in case the federal government cuts Medicaid; and 3) implement additional free market reforms related to overall cost that have been pursued in other states.

"Just having coverage doesn't mean you have access," said Rep. Evan Goyke (D-Milwaukee). "A number of people making \$13,000 to \$15,000 per year may have a workplace insurance program, but it doesn't mean it is good insurance or provides quality access."

Borgerding then asked the panel about the future of a state budget if it doesn't include Medicaid expansion and the revenues associated with expanding Medicaid.

"I think the governor has built his budget around Medicaid expansion, and I'm not going to give up on that item," said Goyke. "We need to have solvent and functional hospitals and providers around the state, so we need to make sure you are made whole by meeting the need for reimbursement rates."

"Our focus will be on making investments," said Born, disagreeing with Erpenbach's previous assessment that Medicaid expansion is about health care. "It's an insurance program; it's not health care. Health care is what your hospitals provide. Health care is what doctors provide. Our focus is on access to health insurance to help people get access to the quality health care we have in Wisconsin and making investments in that health care—not seeing how we can grow the welfare system."

"The money is there right now," said Kooyenga to do many of these health care priorities.

In referring to WHA-led telehealth reform legislation signed into law as 2019 Wisconsin Act 56, Kooyenga highlighted his work as lead author of this legislation that provides additional coverage for services through telehealth. "I swear we did not have a crystal ball. That was obviously a godsend as we dealt with COVID, and we must do more of this. While you can't replicate presence, you can provide more access based on using more telehealth type services," Kooyenga observed.

Borgerding acknowledged the support by everyone on the legislative panel of recently enacted legislation in response to the COVID-19 pandemic, enacting various "lessons learned" including critical provider licensure reforms for providers licensed in other states to practice in Wisconsin.

Asked about additional lessons learned from COVID-19, Erpenbach reflected, "There were procedures that were put off, elective surgeries that were put off. A lot of things stopped, but what did not stop is the quality of care and the dedication of the heroes of health care. It didn't stop with nurses; it didn't stop with doctors; it didn't stop with administrators—everyone was pulling together in a hospital to get us through this pandemic and reassure us."

"A lot of sectors stopped," Erpenbach continued. "A lot of our lives were put on hold. But not hospitals. Not doctors. Not nurses. Because they couldn't."

"WHA led with the data dashboard to give people a better understanding of COVID," said Born. "The thing that struck me the most after talking to you, Eric, and the hospital leaders in my area, is people's fear of going to the hospital and getting normal treatment and what that has done to put us behind on the care that people need. I'm not sure we know what the answer to that is if we find ourselves in a similar situation in the future, but it is certainly something that we need to work on. But I know our hospitals did everything they could with marketing campaigns to make sure people knew they could still get their care."



Pictured, clockwise from far left: WHA President and CEO Eric Borgerding (moderator), Sen. Dale Kooyenga, Rep. Evan Goyke, Sen. Jon Erpenbach, Rep. Mark Born.

Hospital Advocates Engage with 120 State Legislative Offices in Virtual Meetings



An important component of WHA's annual Advocacy Day event is making the voice of Wisconsin's hospitals heard loud and clear in the state Capitol with a unified message. Advocacy Day attendees did just that following a legislative issue briefing from WHA Senior Vice President of Government Relations Kyle O'Brien. Nearly 300 hospital advocates met virtually with 120 state lawmakers and legislative staff following the live Advocacy Day program on April 14, 15 and 16.

"Use your time during these meetings to tell your story. Remind legislators how important your hospital is to the community and how your hospital stepped up this past year during the pandemic," said O'Brien. "It is these stories, coming from you, that legislators will remember."

O'Brien encouraged those meeting with lawmakers to show pride for their hospital's response to the COVID-19 pandemic and to provide specific examples of stepping up to support the community through testing, vaccine administration and staffing, for instance. These perspectives from frontline workers would help provide context to requests of lawmakers to ensure that hospitals have the necessary resources to strengthen Wisconsin's health care safety net.

O'Brien also advised attendees to highlight the impact a cut in Medicaid reimbursement would have on access to quality health care in Wisconsin and to ask lawmakers to permanently reauthorize the \$40 million in general purpose revenue for the Disproportionate Share Hospital (DSH) Program to avoid a \$100 million cut for Wisconsin hospitals.

Missed Advocacy Day? We've Got You Covered

For those who were unable to attend WHA Advocacy Day 2021, a recording of the presentations, including Frank Sesno's compelling address and the bi-partisan legislative panel discussion, is available online.

Presentation recordings and information on event sponsor companies will be available on the post-Advocacy Day website through May 14.

Those who registered for Advocacy Day can use their LeaderPass login and password to access the website. Those who did not register for the event can obtain login credentials for the site at www.wha.org/AD-2021.

For questions, email education@wha.org.

Edgerton Hospital and Health Services Gives Back to Volunteers

Edgerton Hospital and Health Services (EHHS) CEO Marc Augsburger has welcomed the members of the hospital's Auxiliary back to the hospital if they have received a COVID-19 vaccination. Six Auxilians tuning into WHA's Advocacy Day from one of the hospital's conference rooms welcomed the good news, which did not end there.

"I felt that it would be nice to 'give back' to the Auxiliary, as they've had no opportunity to make any money over the past year," Augsburger said. "I decided to encourage the EHHS staff members and board to purchase an Auxiliary membership, whether \$15 annual or \$100 lifetime."



Edgerton Hospital and Health Services CEO Marc Augsburger (center) presents the EHHS Auxiliary with a donation of \$3,555.

Augsburger describes the \$3,555 raised for the Auxiliary in one month as a "win-win" for the hospital.

WHA Board Meeting Highlights Positive Hospital Advocacy Outcomes

Fresh off another successful Wisconsin Hospital Association (WHA) Advocacy Day, the April WHA board of directors meeting drew attention to progress on legislative priorities affecting the state's hospitals and health systems.

Health Care Leadership Education Update

WHA Chief Medical Officer Chris Green, M.D., and Vice President of Education and Marketing Leigh Ann Larson shared details on a proposed WHA Health Care Leadership Academy developed in conjunction with the University of Wisconsin Center for Professional & Executive Development (UW CPED). Such a program was first discussed at a WHA board retreat in 2019, after which WHA sought further input from members on the need for leadership education and the topics that should be included in a course of study designed for future health care leaders.

Based upon feedback from the board, WHA will continue to refine the details and logistics of the program with plans to open registration later this year.

WHA Priorities in COVID Legislation Signed into Law, State Budget Remains Focus of Advocacy

WHA Senior Vice President of Government Relations Kyle O'Brien updated the Board on a WHA priority dating back to November that was signed into law as 2021 Wisconsin Act 10 on March 25.

Among the features of Act 10 that help hospitals and health systems continue their response to the pandemic are the following WHA-led provisions:

- Permanently adopting, 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 to begin caring for patients immediately;
- Providing 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; and
- Clarifying 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, through Jan. 1, 2022.

WHA is preparing member education on these policies.

WHA remains focused in this upcoming state budget on permanent reauthorization of hospital payments through the Medicaid Disproportionate Share Hospital (DSH) program to avoid a \$100 million funding cut to state hospitals during the next state budget. To that end, O'Brien discussed a WHA-coordinated [open letter](#) from 108 hospital and health system leaders from across Wisconsin asking the Legislature's powerful budget-writing Joint Finance Committee to reauthorize DSH funding in the 2021-2023 state budget. O'Brien also highlighted in-person testimony provided by hospital leaders at all the Joint Finance Committee's public hearings on the budget bill held throughout the month of April.

Report from DQA Administrator Otis Woods

Guest presenter Otis Woods, who is the division of quality assurance administrator (DQA) for the Wisconsin Department of Health Services, provided reminders to board members on oversight issues related to their operations, noting that DQA has resumed hospital survey activities. Woods also reviewed for the board long-term care trends in Wisconsin.

Woods reflected on recent state and national activity related to and growing interest in "hospital at home" practices, including the provisions in Wisconsin Act 10 that adopt the Centers for Medicare & Medicaid Services Acute Hospital Care at Home waiver

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(WHA Board Meeting Highlights Positive Hospital Advocacy Outcomes . . . continued from page 5)

standards as state standards for hospitals and create an exemption from the home health agency licensing requirements for hospital at home services. These provisions sunset on Jan. 1, 2022. “Between now and the end of the year, we will be talking much more about this,” Woods noted.

WHA board members praised Woods for the flexibility and efficiency his division showed in implementing federal and state waivers to help hospitals with their initial and ongoing responses to the COVID-19 pandemic. Marshfield Clinic Health System CEO Susan Turney, M.D., noted the positive developments regarding hospital at home services. “We didn’t want a pandemic to have this come to fruition, but it has challenged us to push forward,” she said.

Joint Finance Committee Hears about DSH Reauthorization in Rhinelander ***Marshfield Clinic Health System’s Ty Erickson testifies at public hearing***



In a public hearing of the Joint Finance Committee held in Rhinelander, Ty Erickson, chief administrative officer at Marshfield Medical Center-Minocqua, testified to the need for lawmakers to reauthorize the Medicaid Disproportionate Share Hospital (DSH) program in the upcoming state budget.

“The DSH program helped us weather tremendous financial strain under the public health emergency brought on by COVID-19,” said Erickson. “Outside of the pandemic, it also helps us deal with the everyday challenge of providing care here in rural Wisconsin, where we have some of the sickest patients and lowest incomes. Programs like DSH allow rural Wisconsinites to have access to the same level of care that you receive in any of the larger metropolitan areas across the state.”

Without reauthorization of the Medicaid DSH program, hospitals in Wisconsin will experience a collective \$100 million cut in the next budget. Last week, [108 hospital leaders asked lawmakers to avoid this cut](#) by reauthorizing the DSH increase provided during the last state budget.

“For just Marshfield Clinic Health System, not reauthorizing the current level of DSH funding would result in a loss of \$5 million in care-delivery services over the biennium,” said Erickson to the committee.

“On behalf of our nearly 400,000 patients in rural northern and central Wisconsin, we would respectfully ask you to support reauthorizing this investment in our communities’ health care and permanently fund the DSH program,” said Erickson.

The Joint Finance Committee will be holding two more public hearings before beginning executive action on the state budget.

WHA Offers Webinar on New Law Enabling Immediate Practice for Providers from Other States

On Wednesday, May 5, from 12:00 noon to 12:30 p.m., the Wisconsin Hospital Association (WHA) will host a member webinar to discuss how organizations can use a new permanent statutory change that enables health care professionals licensed in another state to immediately start practice in Wisconsin while they seek approval of their regular license. WHA will also review new Department of Safety and Professional Services application forms to utilize the new temporary license process and note subtle differences between the old forms and the new forms.

During Wisconsin’s COVID response in 2020, Wisconsin intermittently authorized health care providers licensed in another state to immediately begin practicing in Wisconsin. That WHA request for flexibility addressed significant delays in getting health care providers licensed to practice in Wisconsin.

Recognizing the long-term benefit of retaining that policy and addressing licensure delays, WHA proposed legislation to make those COVID licensure flexibilities permanent. That legislation was passed by the Legislature and signed into law by Gov. Tony Evers in late March as 2021 Act 10.

The webinar is available to WHA members and is free of charge; however, advance registration is required. [Click here](#) to register.

FCC Announces New COVID-19 Telehealth Funding Opportunity

Beginning April 29, the Federal Communications Commission (FCC) will accept applications for [COVID-19 Telehealth Program Round 2](#) funding to support the costs of eligible telehealth services and devices. This Round 2 funding opportunity closes on May 6.

Although details of the application and potential funding amounts do not yet appear finalized, it seems that eligible health care providers will include non-profit hospitals, rural health clinics and skilled nursing facilities, among other providers.

Additional information on eligibility and the application process can be found on the [Universal Service Administrative Company website](#).

WHA Offers Webinar on Fighting Opioid Abuse

The Wisconsin Hospital Association (WHA) will host a webinar on May 3 focused on combatting the opioid epidemic.

The webinar will be presented by WHA's Physician Improvement Advisor Bobby Redwood, M.D. Dr. Redwood is an emergency and preventive medicine physician and chief of emergency medicine at Cooley Dickinson Hospital in Northampton, Mass.

[Reducing the Risk of Opioid Use Disorder, Overdose and Death](#)

May 3, 3021

12:00 p.m. – 1:00 p.m.

Topics addressed will include decreased opioid prescribing, alternatives to opioids, harm reduction (use of naloxone) and medication assisted treatment. The content stems from U.S. Centers for Disease Control and Prevention guidelines addressing person-centered practices and reducing the risk of opioid use disorder, overdose and death.

This webinar is sponsored by the Wisconsin Office of Rural Health. For more information and to register, click [here](#).

(WHA Advocacy Day 2021: Virtual Format, Real Results . . . continued from page 1)

Following Borgerding's welcome message, Gov. Tony Evers provided an update on the state's response to the pandemic, acknowledging the extraordinary challenges health care providers faced in preparing for and responding to COVID-19 and thanking hospitals and health systems for their efforts to treat those stricken by the disease and help administer vaccines to the state's residents.

"There are a heck of a lot of Wisconsinites who've made it home and who are reunited with their families because of the good work of our health care providers and frontline workers," Evers said.

The event's keynote address by internationally recognized journalist, anchor and talk show host Frank Sesno was followed by a bipartisan legislative panel moderated by Borgerding. Panelists included Rep. Evan Goyke (D-Milwaukee), Rep. Mark Born (R-Beaver Dam), Sen. Dale Kooyenga (R-Brookfield) and Sen. Jon Erpenbach (D-West Point).

In preparation for virtual meetings between hospital representatives and their elected leaders, WHA Senior Vice President of Government Relations Kyle O'Brien provided an issue briefing focused on the need for regulatory flexibility to deliver efficient and effective care to patients and the importance of Medicaid funding to the state's health system.

990 Attendees
132 Legislators Engaged
1 Unified Voice



#WHAAdvocacyDay

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