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**Bipartisan Legislative Panel Talks Medicaid Expansion, Dental Access, and Opioid Addiction Treatment at WHA's Advocacy Day**

**Nearly 1,000 health care professionals, advocates and volunteers attend WHA's Advocacy Day**

Four Wisconsin lawmakers participated in a panel during WHA's 2019 Advocacy Day on April 17. The panel, moderated by WHA President/CEO Eric Borgerding, included a bipartisan group of lawmakers: Rep. Evan Goyke (D-Milwaukee), Rep. John Nygren (R-Marinette), Sen. LaTonya Johnson (D-Milwaukee), and Sen. Howard Marklein (R-Spring Green). All panelists serve on the Legislature's powerful budget-writing Joint Committee on Finance.



*WHA's 2019 Advocacy Day Legislative Panel, from left: WHA President/CEO Eric Borgerding (moderator); Sen. LaTonya Johnson; Sen. Howard Marklein; Rep. John Nygren; Rep. Evan Goyke*

Borgerding tied the panel's conversation around three major issues currently facing the Legislature: Medicaid expansion and Governor Evers' budget, dental access, and opioid abuse. *(continued on page 3)*

**EDUCATIONAL EVENTS**

**June 12-14, 2019**  
*Wisconsin Rural Health Conference*  
 Wisconsin Dells, WI

**Throughout 2019**  
*Health Care Workforce Resilience*  
 Free Member Webinar Series

**Hospital Advocates Meet with 130 State Legislators to Discuss Health Care Policy**

**Nearly 500 hospital advocates meet with their state lawmakers and legislative staff**

An important component of WHA's Annual Advocacy Day event is not just hearing speeches about the current state of affairs in politics and health care, but making the voice of Wisconsin's hospitals heard loud and clear in the State Capitol with a unified message. Advocacy Day attendees had the opportunity to do just that following a legislative issues briefing from WHA Senior Vice President of Government Relations, Kyle O'Brien. Nearly 500 hospital advocates visited 130 state lawmakers and legislative staff on Advocacy Day.

"Use your time at the Capitol to tell your story today. Remind legislators how important your hospital is to you and your community," said O'Brien. "It is these

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stories, coming from you, that legislators will remember. Your presence today will make a difference.”

O’Brien asked those visiting with lawmakers to make three main points during their visit:

1. Remind legislators that high-quality, high-value health care is an asset to Wisconsin’s economy because it helps to attract great talent for all industries;
2. Urge lawmakers to address the increasing Medicaid cost-shift, known as the Hidden Health Care Tax, and use the progress presented in Governor Evers’ budget to increase hospital reimbursement.
3. Ask legislators to modernize telehealth laws to improve care and reduce costs.



WHA Senior Vice President of Government Relations Kyle O'Brien briefs attendees going on legislative visits.



WHA Advocacy Day Attendees on their way to the capitol to meet with their legislators.

## Dr. Bobby Redwood Leading Antimicrobial Stewardship One-Hour Webinars on May 6 and July 22

CME and CNE continuing education credits available; [register online](#)

WHA Physician Improvement Advisor Bobby Redwood, MD, is back with the Antimicrobial Stewardship Journal Club. Join this two-part educational webinar series for conversation focused on clinical decision making and population health considerations.

Each one-hour Journal Club includes a review of current literature, a discussion of case scenarios, and time for questions. Participation is complimentary to WHA members, but pre-registration is required. Both CME and CNE continuing education credits are available for these webinars.

### May 6 - Journal Club #1

#### HCAP is Out! Review of the New IDSA Pneumonia Guidelines

Participants will learn about defining community-acquired and hospital-acquired pneumonia, define ventilator-associated pneumonia, and why health care-associated pneumonia (HCAP) is no longer a clinical entity

### July 22 – Journal Club #2

#### Dr. Redwood Takes Requests: Antimicrobial Stewardship Principles in the Management of COPD, Cdiff and Tickborne Illnesses

Participants will learn about defining the NICE criteria for COPD, explain when testing for CDI is appropriate, the risks associated with long-course antibiotics for Lyme disease, and why treating “chronic Lyme disease” is not recommended.

The series is intended for physicians, advanced practice providers, nurses, quality improvement leaders, and others with a special interest in the Club topic being discussed. [Online registration](#) is now available.

## Lawmakers Hear Support for Hospital Reimbursement Increases at Final Public Hearing



HSWS Eastern Division's David Lally testifies before the Joint Finance Committee on April 24, 2019 in Green Bay.

Wrapping up its final public hearing of the biennial budget, the Legislature's Joint Finance Committee heard—yet again—from hospital advocates asking the Legislature to support hospital reimbursement increases included in the Governor's proposed budget.

David Lally, Director of Business Development & Advocacy for Hospital Sisters Health System, [testified in front of the committee](#) in support of various provisions in the state budget.

"The Governor's budget includes significant investments in hospital reimbursement rates—an increase of \$365 million over the biennium for Wisconsin hospitals and \$69 million for behavioral health provider reimbursement rates," said Lally. "We ask you to support these increases."

In total, hospital advocates testified at all four public hearing sites and were joined by more than 100 hospital and health system leaders through letters of support for various elements of the Governor's budget proposal, including a \$58 million additional state commitment to the Medicaid Disproportionate Share Hospital (DSH) program.

To contact your local elected official and voice your support for hospital reimbursement rates in the Governor's budget, please visit the WHA [HEAT Action Center](#).

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*(Bipartisan Legislative Panel Talks Medicaid Expansion, Dental Access, and Opioid Addiction Treatment at WHA's Advocacy Day . . . continued from page 1)*

### Mixed thoughts on Medicaid expansion for Wisconsin

Governor Evers' budget and Medicaid expansion—a topic that has received a lot of attention during the existing budget debate—received broad support from Democrats on the panel, because of the investments that can be made through additional state savings, while Republicans raised concerns with the impact that proposal would have on the private-sector due to shifting 40,000 people from commercial insurance coverage to Medicaid.

"I do support Medicaid expansion because it will cover the individuals in my district, which is extremely imperative for the lower income families in my district," said Sen. LaTonya Johnson.

On the other hand, Sen. Howard Marklein believes there is more learning to be done on expansion's possible impacts on hospitals in his rural district, but also on the state.

"Some people have made up their minds on whether to take it or not, but I am keeping an open mind. A lot is going to be dependent on the economics both at a state level and at a local level," Marklein said.

Rep. Nygren responded with more skepticism for expansion, drawing on the current Medicaid cost-shift and its growing impact on hospitals if more individuals are covered with Medicaid reimbursement rates.

"About 40,000 people already have subsidized care that is reimbursed at private insurance rates. With expansion, you would be taking them off of private insurance and putting them on Medicaid, which under reimburses for costs," Nygren said. "I believe the estimate is about \$1 billion a year in shift that takes place. So that has to be part of the conversation."

Rep. Evan Goyke joined Johnson in supporting Medicaid expansion using the significant investment in health care, proposed under Evers' budget, as the driving factor for his position.

"Under the Governor's proposed budget, \$324 million of general purpose revenue that is saved is reinvested back into our health care system in a way that leverages an additional 1.6 billion dollars." Goyke continued, "We do not reach that level



Sen. Howard Marklein

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of reinvestment without expansion. We do not have the dollars in our general fund to leverage that amount of money to be reinvested into Wisconsin health care without expansion.”

### **Democrats stand firm on their positions, but open to seeing a “Plan B” for Medicaid expansion**

Borgerding asked the panel, starting with the Democrats, whether they would consider a “Plan B” to Medicaid expansion, an alternative. Goyke stood firm on his position, “Medicaid expansion finances the enormous new investment in health care in Wisconsin.”

He continued to explain that the investment is not just for rural and urban hospital reimbursement, but also programs that address population health, calling Medicaid expansion the foundation to addressing these challenges.

Johnson reacted similarly, expanding on Goyke’s remarks to talk about how Medicaid expansion provides better access to primary care providers addressing the state’s health disparities.

“Because those individuals are not able to seek primary care or preventative care, they’re being seen in urgent care and in the emergency rooms, which is significantly more expensive,” Johnson said.

Borgerding then turned to the Republicans on the panel, asking them what it means for health care if they reject Medicaid expansion, as presented in Evers’ budget and if they would be open to discussing a “Plan B.”

Marklein reassured attendees that health care is a priority for him and members of the Joint Finance Committee; however, without Medicaid expansion, prioritizing dollars could be a challenge.

“It will be a matter of if we don’t take Medicaid expansion, prioritizing those things where we’ll get the most bang for our buck and are good policy choices,” said Marklein. “I think in the end, if there is a ‘Plan B’, health care will still be a priority either way.”

Nygren reiterated his concerns with expanding Medicaid but was open to an alternative. He said, “If there is a ‘Plan B’, we all have to agree there are positives for increasing reimbursement, but at the same time, understand it’s not equal across the board and there are going to be losses in many situations.”

Nygren added, “I think there is a middle ground we can get to, but we are not there yet.”

### **Panelists’ top health care items in Evers’ Budget, common ground in mental health**

Borgerding asked the panel to share their top items in Evers’ budget, as it relates to health care. Both Johnson and Nygren reported mental health.

“Mental health is a huge piece, as well as funding for mental health in our schools,” Johnson said.

Nygren agreed with Johnson on mental health, but also added dental health. He said, “Wisconsin has some of the best health care in the nation, but our dental access is one of the worst.”



Marklein named reimbursement calling out several items, including increases for nursing homes, personal care workers, and DSH payments. “Some of our hospitals have a very, very high proportion of Medicaid patients. And whether it’s through DSH payments or some other reimbursement balancing formula, we have got to make sure that we recognize the financial obligation and compensate for the additional costs.”

Goyke brought it back to Medicaid expansion, but specifically named a small portion of funding for addressing social determinants of health. “We’ve got to have a better understanding of how our environments and how poverty affects our health outcomes.”

### **Panel agrees on dental access need, but has hesitations for dental therapist licensure bill**

Borgerding then asked the panel to share their thoughts on an upcoming bill that creates a license for dental therapists to serve as midlevel providers, with the goal of increasing access to primary and restorative dental care for Medicaid patients.

Nygren, a sponsor of the bill, believes access to dental care, especially for people on Medicaid is a growing problem and sees the dental therapist bill as one solution. “Being 50th in dental access is just no longer and never should have been acceptable to us and our state government.”



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Goyke acknowledged the need but expressed reservations with the bill's level of training. He said, "Before I go back to my community and say that I support this, I need to be assured that it will be as good or better care than somebody who has private insurance is able to access. I won't support and settle for something that is lesser than, simply because I represent a community in poverty."

Johnson reiterated Goyke's position saying, "We want our impoverished families to have access to quality care. I'm not saying that I am against dental therapists, but we want to make sure that the people we are allowing to treat our low-income families have the qualifications that those families deserve."

Marklein also responded with hesitations, but related to its ability to bring dental access to rural communities of Wisconsin. "Dental therapists go to where the people are, and there are not a lot of people in rural communities. I am not that convinced that a lot of dental therapist are going to end up in rural Wisconsin, where I think we need it," said Marklein.



*Reps. Nygren and Goyke share a lighter moment during an otherwise serious and substantive policy focused discussion.*

### **Progress made in addressing opioid addiction, but more needs to be done**



*Rep. John Nygren*

Borgerding's final topic for the panel was on opioids. He praised the group for progresses made due to bipartisan legislation that addressed the ongoing epidemic in the state. He began with Nygren, as he has been a leader on this issue, asking him what is next and how Wisconsin continues to do better.

Nygren said, "We need to expand access within our current structure. The implementation of the hub and spoke commission, which WHA and others were involved in, is one way we can do better." He called out the shortage of providers as one area of focus, but continued to other areas, such as housing and employment.

Goyke agreed with Nygren on the shortage of providers. He sees a pathway for bipartisanship, saying "Abuse and poverty overlay and there are a lot of things we can do directly in the health care system. I think it would be bipartisan, but there is a more macroeconomic issue that is going on in both very rural and very urban parts of the state that we need to address."

Johnson drew on access to services as a top way to combat the issue. "Access to resources is extremely important and making sure those dollars are there," Johnson said.

Marklein ended the session by praising Nygren for his work and stressed the importance of continuing to address it. "There was a day when providers were rewarded for managing pain and if you didn't, you'd be dinged on your reimbursement. That didn't make a whole lot of sense, but fortunately we don't have that today. We are moving away from that, and we just need to keep making progress."