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Bipartisan Leaders Tackle Budget, Medicaid and Workforce at Advocacy Day

Legislative panel highlights collaboration — and clear differences — on key health care priorities.

L to R: WHA 2026 Board Chair Brian Stephens, Senate Minority Leader Dianne Hesselbein, Assembly Minority Caucus Chair Lisa Subeck, Assembly Speaker Robin Vos, Senate Majority Leader Devin LeMahieu, WHA President and CEO Kyle O'Brien.

WHA's 2026 Advocacy Day featured a bipartisan legislative panel moderated by WHA President and CEO Kyle O'Brien, with candid discussion spanning the state budget, Medicaid policy, workforce challenges and the broader political environment. Joining O'Brien on stage were Senate Majority Leader Devin LeMahieu (R-Oostburg), Senate Minority Leader Dianne Hesselbein (D-Middleton), Assembly Minority Caucus Chair Lisa Subeck (D-Madison) and Assembly Speaker Robin Vos (R-Rochester).

State Budget and Hospital Assessment

O'Brien opened the conversation by reflecting on last summer's state budget negotiations, which ultimately included critical Medicaid funding increases and authorization for Wisconsin's enhanced hospital assessment.

Speaker Robin Vos acknowledged the intensity of the negotiations.

"It was long and laborious and challenging and frustrating," Vos said, adding that compromise is rarely easy. Despite halted negotiations at one point, he said bipartisan talks ultimately led to agreement, including tax relief measures and "more money into Medicaid."

Senate Majority Leader Devin LeMahieu said the hospital assessment deadline created urgency in finalizing the budget.

"It was essentially the hospital assessment that helped us put that firm deadline and the urgency to get the budget done in the end."

Senate Minority Leader Dianne Hesselbein described the final days as fast-moving and collaborative, noting lawmakers were closely tracking federal timing.

"We knew we had to get the budget done," she said, describing active communication with Wisconsin's congressional delegation to ensure federal alignment. "Negotiations were hard… we didn't get everything we wanted. They didn't either… But at the end of the day, I think we all learned important things."

Assembly Minority Caucus Chair Lisa Subeck, who ultimately voted against the budget, said budgets reflect broader values.

"At the end of the day… the budget just wasn't good enough. So, I voted against it," while still acknowledging progress on hospital-related provisions.

"Next-of-Kin" Legislation

The panel also discussed bipartisan efforts to advance "next-of-kin" legislation to help hospitals discharge incapacitated patients who do not have an established health care power of attorney.

Subeck, who has championed the bill and serves on the Assembly Health Committee, described it as a model of bipartisan problem-solving.

"This is one of those bipartisan efforts that I'm really pleased that we were able to work on," she said. "We are actually able to take bipartisan pieces of legislation where we agree on the problem… and get to a solution that works."

She emphasized both the personal and systemic importance of reform. "The reality is our current system isn't working. It's not working for patients. It's also not working for hospitals."

Subeck credited extensive stakeholder engagement — including hospitals, counties and courts — for helping refine multiple versions of the proposal. "There have been a number of versions of the legislation… and amendments along the way to be good partners with our counties, be good partners with our courts."

She also noted the bill includes a sunset provision to allow lawmakers to revisit and evaluate the policy in the future.

LeMahieu acknowledged that amendments and concerns from some members stalled the bill last session. He said the Senate is reviewing the updated version this session, which was amended by the Assembly. "We'll be taking a look at all those bills that came over [from the Assembly] and seeing where the support is…so we'll see what the amendment does and see if we can get it through."

The latest version of the legislation now awaits action by the state Senate. The state Assembly passed the next-of-kin legislation with a strong bipartisan vote of 77 – 18 at the end of February.

Medicaid Expansion Debate

The panel turned to Medicaid expansion, prompting clear philosophical differences.

Subeck said she has long supported expansion and fears Wisconsin missed out on federal funding over the years due to not expanding but has concerns about whether expansion would benefit Wisconsin due to changes made by the current Congress and the Trump administration. That's why she was pleased that the budget looked for alternatives, like the hospital assessment, to bring in more federal dollars. "I'm not sure, just given the actual lay of the land federally now, that we gain much [from expansion] in this moment….certainly in the framework that we were in, I think it made a lot of sense…At this point…we alternatively tried to take advantage of some of the hospital assessment options that were available to us, and that was really important."

Speaker Vos strongly opposed expansion, framing the issue as a long-term fiscal challenge. "We have more spending than we can afford. That is a guaranteed, absolute truth."

Vos argued that expanding Medicaid shifts costs to private payers: "Every person you put on Medicaid means somebody has to pay higher rates in the private sector."

Hesselbein countered with a story about a working family facing rising health insurance costs after federal subsidy changes. "She doesn't think she can make her payment… And so she's not going to have anything for her family of four."

"That's what really keeps me up at night," she added.

Workforce Pressures

O'Brien connected the policy discussion to WHA's newly released 2026 Workforce Report, noting Wisconsin's aging population and payer mix shifts. "For every one-point shift… from commercial to Medicare… it's about a $280 million reduction in revenue to the hospital."

Lawmakers agreed that workforce shortages remain one of the most pressing long-term challenges facing the state.

Hesselbein stressed that Wisconsin must remain an attractive place for families and professionals if it hopes to compete for talent.

"We have to make sure that Wisconsin is a destination that people want to move to," she said, pointing to strong K–12 schools and higher education as key components of workforce recruitment and long-term economic vitality.

Subeck emphasized that solving the issue requires more than recruitment alone. "We need to figure out not only how do we bring people here, but once people are in the field… how do we keep them?" she said.

Retention, she argued, must be part of the equation. She pointed to administrative burdens — including prior authorization requirements — as contributors to burnout across health professions.

“People don’t get into the medical field to do paperwork. They get into the medical field to treat patients,” Subeck said.

LeMahieu pointed to demographic realities and interstate competition. “Successful people can choose to live where they want to live,” he said, noting tax policy as a factor in mobility.

Vos highlighted Wisconsin’s medical liability system as a competitive advantage in physician recruitment. Vos, who announced recently he is not running for re-election, voted to re-establish Wisconsin’s non-economic damages caps in 2025 after the Supreme Court had overturned the existing stator cap. “When [the cap] went away, it was a huge disincentive and people left Wisconsin.” “Reinstating malpractice caps, he said, helped restore stability to care and made Wisconsin more competitive to recruit and retain physicians and other care providers.”

A Bipartisan Exchange

Throughout the discussion, leaders engaged in direct — and often spirited — exchanges, particularly on Medicaid policy and federal reforms. Yet the tone reflected ongoing working relationships and shared responsibility for policymaking.

The panel underscored a central theme for the 1,100 hospital advocates in attendance: while philosophical differences remain, bipartisan collaboration continues to shape Wisconsin health care policy — from hospital funding to discharge reform to workforce development.

As O’Brien noted throughout the conversation, many of the issues discussed would be part of the advocacy conversations hospital leaders bring to the Capitol.

IN THIS ISSUE

EDUCATION EVENTS

Mar. 12, 2026
Spring 2026 Annual Survey Training

Mar. 13, 2026
2026 Physician Leadership Development Conference

Mar. 16, 2026
Wisconsin Rural Health and Substance Use Clinical Support (RHeSUS) Program Offerings