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WHA Encouraged by Governor's Health Care Reinsurance Program Supports state action to stabilize insurance market

In his State of the State address January 24, Gov. Scott Walker reiterated a plan he released earlier in the week that Wisconsin will seek a federal waiver to create a reinsurance program. The reinsurance program is designed to help mitigate the sharp premium increases that individuals purchasing coverage on the health insurance exchange have seen by providing financial support to insurers for some of their most expensive cases.

Walker estimates the total program will cost \$200 million in 2019. Of that amount, \$50 million would come from state dollars, and the federal government would cover the remaining \$150 million.

WHA President/CEO Eric Borgerding said the time to act to reduce premium increases is now and that WHA was encouraged by the Governor's proposal to create a reinsurance mechanism to stabilize insurance premiums.

"It seems increasingly unlikely Washington will act to either stabilize or offer an alternative to the Obamacare insurance markets. Rather than stand by and watch the piecemeal deconstruction of Obamacare unfold, WHA has called on the State to strike its own path as necessary, including taking steps to stabilize the individual health insurance market using the tools available to all states under

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WHA Medicaid Workgroup Proposal Heard in Assembly Health Committee Bill creates emergency department intensive care coordination program for Medicaid enrollees



WHA's Joanne Alig and Ascension's Linda Puccini testify in support of AB 871 to pilot provider care coordination services in the Medicaid program for high utilizers of hospital emergency departments.

WHA Senior Vice President, Policy & Research Joanne Alig joined a group of WHA members, including Ascension's Linda Puccini and Aurora's Robert Marrs, Jane Pirsig-Anderson and Andrew Hanus, to testify in front of the Assembly Health Committee January 25 in favor of Assembly Bill 871, legislation enacting an intensive care coordination pilot program in Medicaid.

The group of WHA members followed testimony from Reps. Jessie Rodriguez (R-Oak Creek) and Joe Sanfelippo (R-New Berlin), lead authors of the legislation, who used examples from work being done by Aurora Sinai, St. Luke's and Ascension - St. Joseph's Campus in Milwaukee to provide better care management for high utilizers of the hospital emergency department.

Alig informed the Committee the proposal was developed by a statewide WHA Medicaid workgroup in 2016, after seeing the positive experience with the programs established by these Milwaukee hospitals. Alig, Puccini and the team at Aurora testified that provider care coordination services are currently not reimbursed in the Medicaid program, requiring hospitals to self-fund or pursue grants to fund their work. Alig said the workgroup discussed policies that would support the ability of WHA members to expand current models and replicate this model in rural and urban parts of Wisconsin. *(continued on page 2)*

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At table, L to R: Robert Marrs, Jane Pirsig-Anderson and Andrew Hanus, Aurora Health Care

Puccini and Aurora's team said providers are in the best position to work with this small subset of patients, who frequent their emergency departments, and transition them back into an ordinary relationship with the enrollee's Medicaid managed care organization. These care management programs utilize a team of providers, including physicians, nurses and social workers, to establish a regular pattern of primary care for a high-utilizer patient.

Rep. Dave Murphy (R-Greenville) said the program could have significant impacts across the health care system, not just on providing better care for Medicaid patients but lowering the overall health care spend in Wisconsin—especially in the Medicaid program, as lawmakers need to figure out ways to save money and balance the state budget.

Sanfelippo said the bill was targeted at hospitals and integrated health care systems because they are in the position to work with all types of providers, including physicians, nurses and social workers, to operate a care coordination program.

WHA expects this priority legislation to receive a Committee vote in Assembly Health February 1 and be ready for floor action in the Assembly some time in February. WHA and member organizations are also working with members of the state Senate to move the bill in that chamber.

Congress Passes Stop-Gap Government Funding Measure *CHIP funded, other key programs not*

Congress passed and the President quickly signed into law a stop-gap measure funding government for three weeks, until February 9. Included in this Continuing Resolution (CR) was a six-year extension of the Children's Health Insurance Program (CHIP). Unfortunately, the CR did not include important Medicare extender payment policies, including the Medicare Dependent Hospital (MDH) and Low Volume Adjustment (LVA), or community health center funding.

Under the CR, CHIP is funded through 2023. States will continue to receive an enhanced matching rate, which began under the Affordable Care Act, through 2019. That rate will be reduced by half in 2020 and then revert to the normal CHIP matching rate in 2021.

"WHA strongly supports the CHIP program and is relieved CHIP funding was extended six years," said WHA President/CEO Eric Borgerding. "However, we are disturbed that Medicare extenders and other key funding issues have been left by the wayside even though their funding also expired last September."

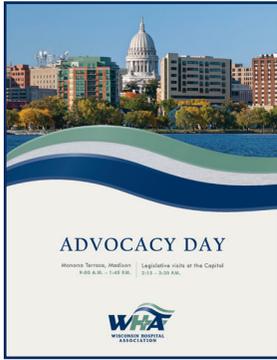
In Wisconsin, approximately 15 rural hospitals qualify as an MDH or LVA hospital. These programs were created to assist smaller, non-critical access hospitals with either very high or low Medicare populations.

"The MDH and LVA programs are targeted at a small set of hospitals that face unique circumstances," said Borgerding. "As such, not only are the programs a cost-effective way for the federal government to ensure access to care in rural areas, but the programs are essential for keeping these rural hospitals financially healthy."

Congress must now turn its attention to negotiating yet another stop-gap funding measure, as many do not foresee a full year funding agreement being negotiated by February 9. As Congress negotiates another CR and a longer-term funding bill, WHA urges the Wisconsin Delegation to protect and fund the MDH and LVA programs along with community health centers but without cutting other Medicare hospital payments to do so.

WHA Advocacy Day Registrations Pour In

Don't miss out on this great event, March 21



The Wisconsin Hospital Association's Advocacy Day registrations have already topped the 350 mark even though the event is still two months away! Make sure your hospital is assembling its group today. Registration and event details are available at www.whareg4.org/2018AdvocacyDay and www.wha.org/advocacy-day.aspx.

Join over 1,000 attendees to hear from top-notch speakers, like this year's morning keynote Mara Liasson, national political correspondent for National Public Radio (NPR), and luncheon keynote Gov. Scott Walker (invited). There will also be the ever-popular legislative panel discussion, and then attendees head up to the state capitol to meet with their elected officials and staff.

You won't want to miss this event. Advocacy Day takes place Wednesday, March 21, 2018 in Madison at the Monona Terrace. Advocacy Day is free, but registration is necessary. Register today for Advocacy Day 2018 at www.whareg4.org/2018AdvocacyDay. For Advocacy Day questions, contact Kayla Chatterton at kchatterton@wha.org or 608-274-1820.

Encourage Physician Leaders to Attend 2018 WHA Physician Leadership Development Conference



Physicians new to leadership roles within your hospital or health system often need an opportunity to learn important and practical leadership skills that will help them move beyond their clinical training and take a new approach to managerial decision making and problem solving, allowing them to be most effective in their new roles. WHA's annual Physician Leadership Development Conference can be that opportunity.

Registration is open for WHA's 13th annual Physician Leadership Development Conference, scheduled March 9-10, 2018 at The American Club in Kohler. Information and online registration are available at www.cvent.com/d/ktqI9j, and the conference brochure is included in this week's packet.

Make sure to identify your new and emerging physician leaders today and encourage them to register for this event. Early Bird discounted registration is available to those who register by January 31. For questions about the annual Physician Leadership Development Conference, contact Jennifer Frank at jfrank@wha.org or 608-274-1820.

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the ACA," Borgerding said in a statement released after the Governor's address. "Currently, there are 11 insurers participating in the exchange market, four fewer than last year. The individual market experienced a 36 percent average increase in premiums in 2018. That cannot continue. We welcome opportunities to stabilize our markets and allow consumers to have affordable insurance choices."

In his address to the state, the Governor also called on the Legislature to pass a law guaranteeing no one with pre-existing conditions is denied coverage.

"As the Governor noted in his State of the State speech, Wisconsin ranks first in the nation for quality, and according to the U.S. Census Bureau, the percentage of people with access to health coverage in Wisconsin is one of the best in the nation," Borgerding said. "From day one of the ACA repeal and replace debate, sustaining Wisconsin's coverage gains has been WHA's top priority. We are looking forward to working with the Governor and the Legislature to ensure our health care system continues to be a national model for high quality, safety and coverage."

CPOE Regulatory Flexibility Focus of February 7 Webinar

On February 7, WHA is offering a WHA member forum webinar entitled "Update on Computerized Provider Order Entry (CPOE) Reporting Under Federal Payment Programs." This complimentary webinar will review the current CPOE reporting requirements for hospitals and physicians under federal payment programs that require demonstration of meaningful use of electronic health record (EHR) technology: the Medicare and Medicaid EHR Incentive Programs for hospitals and physicians and the Merit-Based Incentive Payment System (MIPS) for physicians and other eligible clinicians. The webinar will explain, among other things, that hospitals and physicians are no longer required to report CPOE to avoid Medicare penalties.

This webinar, as well as the regulatory update that WHA recently published (see December 28, 2017 *Valued Voice* article at www.wha.org/wha-newsletter-12-28-2017.aspx#s2), is the result of discussions at the WHA Physician Leaders Council regarding physician time spent utilizing CPOE technology and confusion regarding regulatory requirements of CPOE usage under federal payment programs.

This complimentary webinar is open to all WHA hospital and corporate members, but pre-registration is required. An audio recording of the webinar will be available after the event, but you must pre-register to receive the recording. For more information and to register, go to www.whareg4.org/CPOEUpdate. For content questions, contact Andrew Brenton at 608-274-1820 or abrenton@wha.org. For registration questions, contact Kayla Chatterton at kchatterton@wha.org or 608-274-1820.

Invite Your Providers Today to WHA 2018 Physician Quality Academy, May 15-16

In an effort to ensure providers have access to training and resources necessary to successfully lead quality improvement initiatives, WHA is once again offering its WHA Physician Quality Academy in spring 2018. The 2018 Academy is scheduled May 15 - 16 at the WHA Training Center in Fitchburg.



Erik Dickson, MD, FAAFP, chief physician executive for HSHS Western Wisconsin Division, attended the Academy in 2017. "Attending the Physician Quality Academy provided the basics of quality measurement and improvement. I felt it was perfect for busy physicians to get a good understanding of quality and the importance of being involved in hospital quality committees," Dickson said about his experience at the Academy.

Hospital and health system leaders are encouraged to register their physicians and advanced practice providers who are involved in quality improvement for the Academy. To further enhance the learning, have them attend as part of a dyad, registering a nurse leader or quality improvement leader as well.

Over two consecutive days of training, Academy participants learn to design and conduct quality improvement projects utilizing proven improvement models; interpret data correctly; facilitate physician colleague engagement in quality improvement and measurement; and discuss quality requirements, medical staff functions and their link to quality improvement.

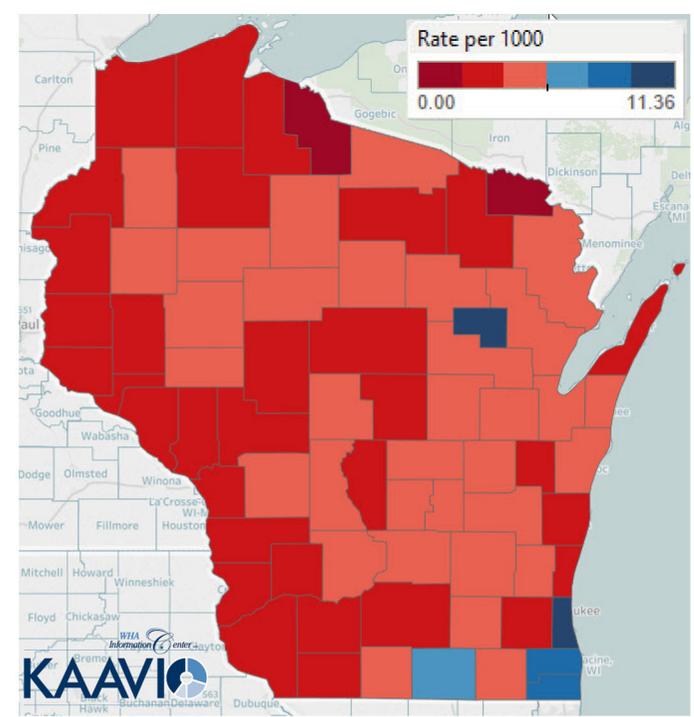
Registration is now open for the 2018 Academy. The agenda and online registration are available at www.cvent.com/d/mtqztx. An event brochure is included in this week's packet.

Fast Facts from the WHA Information Center

Auto Accidents Result in Over 30,000 ED Visits

Not only should you be careful driving through the snow and icy conditions this winter, but you should also be careful driving all year round.

In 2016, there were auto accidents that resulted in 32,661 emergency department (ED) visits at a Wisconsin hospital. Of those visits, 52 resulted in a death. The WHA Information Center has created a county-specific map displaying the rate of ED visits per 1,000 population due to auto accidents.



According to the Wisconsin Department of Transportation, 214,367 drivers were involved in reportable accidents—a 6.7 percent increase from 2015. Other 2016 statistics include:

- Reportable Accidents: 129,051
- Fatal Accidents: 524
- Injury Accidents: 31,066

Here are some driving safety tips from the National Safety Council:

www.nsc.org/learn/Pages/nsc-on-the-road.aspx

Data provided by the WHA Information Center (WHAIC). WHAIC (www.whainfocenter.com) is dedicated to collecting, analyzing and disseminating complete, accurate and timely data and reports about charges, utilization, quality and efficiency provided by Wisconsin hospitals, ambulatory surgery centers and other health care providers.