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EDUCATIONAL EVENTS

- September 11-12, 2019**
Health Equity and Literacy Workshop
Madison, WI
- September 24, 2019**
WCMEW 2019 Summit: Workforce Innovations for Now and Into the Future
Oshkosh, WI
- September 30, 2019**
Promoting Professional Accountability and a Culture of Safety and Respect
Webinar

Grassroots Spotlight

WHA Talks Surprise Billing with Congressman Steil at Mercyhealth - Walworth

The Wisconsin Hospital Association met with Congressman Bryan Steil of Wisconsin's 1st Congressional District for a health care roundtable discussion September 6.



The event was hosted at Mercyhealth Hospital and Medical Center-Walworth in Lake Geneva. WHA Director of Federal and State Relations Jon Hoelter kicked off the discussion with some background on issues important to WHA and its members. Hoelter stressed the importance of adequate reimbursement under Medicare, noting that while Wisconsin hospitals are known for delivering some of the best health care in the country, they receive on average only 75 cents on the dollar for treating Medicare patients. This is particularly challenging in Wisconsin, where hospitals receive significantly lower Medicare reimbursement than most states.

The group also discussed concerns about recent issues making it more difficult for hospitals to serve their communities, such as site-neutral payments. Hospitals in Congressman Steil's district are projected to lose more than \$70 million over the next 10 years due to the Centers for Medicare & Medicaid Services (CMS) creating a rule that WHA and others contend goes counter to law established by

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DHS Announces Second Round of APC, Allied Health Grants

Wisconsin's Department of Health Services (DHS) has [announced](#) the award of the second round of grants to help rural health care providers increase the number of advanced practice clinicians (APCs) and allied health professionals. These WHA-supported grants are modeled after a successful matching-grant initiative crafted by WHA to expand capacity for physician residency experiences in Wisconsin. The APC and allied health professional grant programs were first authorized in the 2017-2019 state biennial budget through legislation aimed at improving rural health care.

Grants totaling over three-quarters of a million dollars were awarded to eight Wisconsin health care organizations.

Providers receiving the APC grants:

- Aspirus - hospitals located in central Wisconsin
- Hospital Sisters Health System (HSBS) Eastern Wisconsin Division/Prevea Health - hospitals located in Northeast Wisconsin
- Marshfield Clinic Health System - Marshfield, Wisconsin
- SSM Health - hospitals located in South Central Wisconsin

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Grant Funds will Enhance Perinatal Care

Review team collaborates to improve maternal outcomes

With the support of WHA and other Wisconsin health care stakeholders, the Wisconsin Department of Health Services (DHS) has been awarded a five-year, \$1.8 million grant from the Centers for Disease Control and Prevention (CDC). This grant will allow DHS to increase investment in the existing [Wisconsin Maternal Mortality Review Team](#) (MMRT). This Wisconsin task force convenes experts who meet quarterly to identify strategies that can decrease pregnancy complications, reduce maternal deaths and lessen disparities in Wisconsin.

In addition to submitting a letter of support, WHA has committed to DHS to:

- Serve on the task force, and assist in the development of the strategic plan,
- Assist with disseminating recommendations from the Task Force and with implementing recommendations from the Wisconsin Association for Perinatal Care/Wisconsin Perinatal Quality Collaborative, and
- Directly support the work of the Wisconsin Maternal Mortality Review Team, for example, by offering WHA staff responsible for quality and patient safety as active participants.

“WHA and its members appreciate DHS’s successful pursuit of these CDC grant funds to help the MMRT expand its work and spend more time developing recommendations to improve pregnancy outcomes,” noted Eric Borgerding, WHA president and CEO. “This team exemplifies the collaboration that is the hallmark of Wisconsin’s health care improvement efforts.”

Wisconsin Hospitals State PAC & Conduit 2019 Campaign Update

See full contributor list

The Wisconsin Hospitals State PAC & Conduit 2019 campaign is now at 66 percent of its aggressive goal of raising \$320,000, with \$213,159 raised to date. More than 200 individuals have contributed, 25 of whom are first-time contributors. More than half of those contributing are at the \$1,500 level or higher.

Contributions can be made online as a one-time contribution or set up as a recurring donation in smaller amounts at the frequency of your choice: biweekly, monthly, or quarterly. Support at any level is welcome.



Take a look at the full 2019 contributor list on pages 4 - 5 to see who made the list.

To ensure your name is on future contributor listings, make your personal contribution today at www.whconduit.com or by contacting WHA’s [Kari Hofer](#) at 608-268-1816 or [Nora Statsick](#) at 608-239-4535.

September is Prostate Cancer Awareness Month



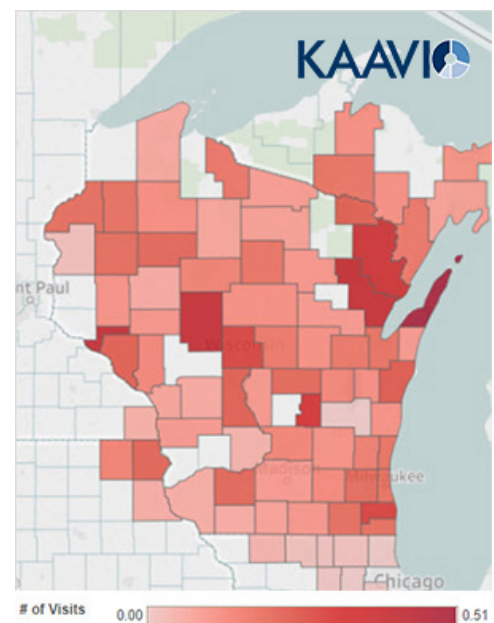
Prostate cancer is one of the most common cancers in men, after skin cancer. Data from the WHA Information Center collected from April 2018 - March 2019 showed there were 935 inpatient stays for prostate cancer in Wisconsin and 53,252 outpatient visits,

which included outpatient surgery, emergency room, observation and ancillary services over the same period.

The patient county heat map indicates the number of visits per 1,000 population on inpatient stays over the same period.

According to the American Cancer Society, there are more than 2.9 million men in the U.S. who count themselves as prostate cancer survivors. In 2019, the American Cancer Society estimates over 174,650 deaths from prostate cancer.

[Click here](#) for more information on prostate cancer.



Providers receiving the allied health grants include:

- Hospital Sisters Health System (HSHS) St. Clare Hospital and HSHS hospitals located in Northeast Wisconsin
- Marshfield Clinic Health System, Marshfield, Wisconsin
- Oregon Mental Health Services, Oregon, Wisconsin
- Upland Hills Health, Inc., Dodgeville, Wisconsin

Eric Borgerding, WHA president and CEO notes, “These grants make training opportunities available to expose more individuals to rural communities and help address rural workforce shortages. This ‘grow our own’ strategy is another great example of bipartisan policymaking to support the workforce needed to sustain Wisconsin’s top-quality health care.”

Grassroots Spotlight (cont’d from page 1)

Congress. The rule stipulates that CMS will pay hospitals no more than it pays other settings for certain services provided in hospital outpatient departments, despite the fact that hospitals typically serve sicker patients, have higher regulatory costs, and have other costs for staffing 24/7 emergency departments that other settings do not. By changing the rules mid-game, CMS has made it very difficult for hospitals like Beloit Health System, noted Sharon Cox. She said their health system purchased clinics that were previously struggling financially in an effort to keep care closer to the community, but the site-neutral payment cuts will hamper that effort.



Jen Hall, Mercyhealth; Eric Borgerding, WHA; Sharon Cox, Beloit Health System; Elizabeth Cliffe, Ascension WI; Jon Hoelter, WHA; Mike Wallace, Fort Healthcare; Congressman Bryan Steil; Lindsay Punzenberger, Children’s Hospital of WI; Jeremy Levin, RWHC; Michelle Abey, Stoughton Hospital; Jim Nemeth, Mercyhealth; Pat Cranley, Mercyhealth; Paul Van Den Heuvel, Mercyhealth

The group also stressed the importance of the 340B prescription drug discount savings program. Lindsay Punzenberger from Children’s Hospital of Wisconsin and Elizabeth Cliffe of Ascension Wisconsin noted how the 340B program costs the federal government nothing, but saves money for hospitals and allows them to stretch scarce federal resources. This helps hospitals fund important services in their communities, such as behavioral health, that often operate at a loss.

The topic then turned to a discussion on current concerns about surprise billing legislation being debated in Washington, D.C. Eric Borgerding, WHA president and CEO, noted that while WHA and its members have been supportive of reducing instances of surprise billing, there are serious concerns about one element in current legislation that would reimburse providers at the local median in-network rate. Jim Nemeth, vice president of finance at Mercyhealth, shared how a similar reimbursement scheme in Illinois’ worker’s compensation program makes that area of care much more challenging than in Wisconsin, where government has not artificially restricted reimbursement for needed services.

Mike Wallace of Fort Healthcare echoed those concerns and explained how a median in-network rate would function as a ceiling for negotiations because insurers would have no incentive to negotiate a higher rate with providers, knowing they could always keep a provider out of network in order to pay a lower rate. This could hurt access to local providers as insurers would have incentives to keep providers out-of-network. Congressman Steil said he appreciated hearing WHA’s thoughts on this issue, noting he has been hearing a lot about it lately and expects it will continue to receive a lot of attention when he and his colleagues return to D.C.

For additional information, contact WHA Director of Federal and State Relations [Jon Hoelter](#).

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