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EDUCATIONAL EVENTS

March 13 & 14, 2020
Physician Leadership Development Conference
 Kohler, WI

March 18, 2020
Advocacy Day
 Madison, WI

WHA-Backed Legislation Advances to Governor’s Desk

Two state legislative bills with strong WHA support gained final approval in separate legislative bodies this week in Madison.

Advance Directives and Team-Based Care

A WHA legislative priority, [Assembly Bill 287](#) addresses a regulatory bottleneck in Wisconsin’s health care workforce that results in unnecessary delays in acting upon a patient’s advance directive wishes for treatment. The bill helps address these delays by recognizing the education and training of nurse practitioners and physician assistants to make the medical diagnoses necessary to activate the patient’s written medical wishes. Under the bill, a physician must still confirm the diagnosis; a patient retains the option of requiring two physicians to complete any needed assessments.

The State Senate unanimously approved the bill in a voice vote Jan. 21; the State Assembly similarly approved the bill in November 2019. Gov. Evers is expected to sign the bipartisan bill into law.

Harm to a Health Care Worker – Penalty Enhancer

The State Assembly Jan. 21 approved by voice vote a bill enhancing penalties for causing intentional bodily harm to health care workers. [Senate Bill 163](#) increases the maximum penalty for such crimes from the current Class A misdemeanor to a felony; the state senate unanimously approved the bill in early November 2019. Originally drafted to cover harm involving nurses, the bill was amended – at WHA’s urging – to apply to all acts committed against any licensed health care professional working in a hospital.

The Jan. 21 State Assembly floor action saw some attempts by Assembly Democrats to amend the bill further; these attempts were unsuccessful. While the bill had bipartisan support in both houses, it is unclear whether the failed late amendment will influence Gov. Evers’ approval.

Bipartisan Group of State Lawmakers to Host WHA Workforce Capitol Briefing

State legislators, staff and health care leaders will have an opportunity Jan. 30, 2020 to attend [WHA’s 2019 Health Care Workforce Report](#) Legislative Briefing hosted by chairs and ranking members of the State Assembly Committee on Workforce Development and the State Senate Committee on Economic Development, Commerce and Local Government.

State Reps. Warren Petryk (R-Town of Washington) and Katrina Shankland (D-Stevens Point), and State Sens. Dan Feyen (R-Fond du Lac) and Janis Ringhand (D-Evansville) have invited their peers to learn about how health care’s use of their own workforce is changing, the gaps that need to be addressed and regulations that have been a barrier to fully leveraging all members of a patient’s health care team.

Past accomplishments and future possibilities will be highlighted by WHA President and CEO Eric Borgerding; WHA Vice President, Workforce and Clinical Practice Ann Zenk; Department of Workforce Development Assistant Deputy Secretary Danielle

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Williams and two WHA members: Bridgett Willey, PhD, UW Health Director, Allied Health Education and Career Pathways; and Donn Dexter, MD, Chair of Education, Mayo Clinic Health System Northwest Wisconsin Region.



Last year's WHA's workforce Capitol briefing, Jan. 21, 2019.

Attendees will hear from Drs. Willey and Dexter about how significant investments in graduate medical education, innovative training programs for allied health professionals and advanced practice clinicians and utilization of apprenticeship program funding will result in a stronger and more diverse health care workforce. ““This is vital work,” Borgerding notes. “Not only is our state’s health care workforce vital to securing high-quality health care, it’s also a key economic asset, drawing industry and growing jobs in other sectors for our state.”

Plan on attending the “WHA State of the Health Care Workforce” briefing Thursday, Jan. 30 from 9-10 a.m. in the State Capitol’s North Hearing Room, or via WisconsinEye live stream. WHA and WHA members will demonstrate exactly what approved legislation has meant for hospitals and engage lawmakers in the work ahead.

WHA members can stay informed on legislative priorities and progress, and important events like the annual WHA Health Care Workforce Report and legislative briefing by joining WHA’s [HEAT](#) network. Contact WHA Vice President of Advocacy [Kari Hofer](#) today to join. Contact [Ann Zenk](#) for questions about the “WHA State of the Health Care Workforce” briefing.

Agreement to Limit Substance Abuse Treatment Prior Authorization Announced



Rep. John Nygren

State Assembly Rep. John Nygren (R-Marinette) announced at a State Capitol press conference Jan. 21 that several health insurers in Wisconsin have agreed to remove various prior authorization requirements for substance abuse treatment.

“WHA is pleased to see health plans removing prior authorization requirements that have placed barriers on individuals seeking substance abuse treatment and added unnecessary administrative burdens to physicians and health care professionals

providing substance abuse services,” WHA President and CEO Eric Borgerding said in a statement following the press conference. “We thank Rep. Nygren for his continued dedication in fighting for patients who need addiction treatment.”

“We were able to accomplish this, most proudly, without legislation; this is due to the conversations and relationships that have been developed over a multi-year effort here in Wisconsin,” Rep. Nygren said. “Rather than having government tell people how to perform their business, having a one-on-one conversation about what is best to serve Wisconsin, I believe, is the best direction forward for us.”



Cynthia Valentin, Ph.D., speaks in favor of health insurers removing various prior authorization requirements for substance abuse treatment at a Jan. 21, 2020 press conference at the State Capitol.

Cynthia Valentin, Ph.D., Advocate Aurora behavioral health vice president of therapy services, told the press that removing prior authorization requirements would allow physicians and other health care professionals to “focus on treatment and not spend hours on paperwork.” She noted that practitioners and their patients have faced delays in treatment of hours to weeks due to prior authorization requirements. Removing prior authorization requirements will remove treatment barriers that have discouraged individuals “on the road to recovery,” Dr. Valentin said.

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Representatives from UnitedHealthcare, Anthem, WPS Health Solutions, Children’s Community Health Plan, Network Health, Quartz, Dean Health Plan, Security Health Plan and MercyCare Health Plans joined Rep. Nygren at the announcement. Several of the health plans indicated they had already removed prior authorization requirements for substance abuse treatment prior to the announced agreement.

“The major insurers in Wisconsin, many of our larger regional health plans in Wisconsin, are here,” Rep. Nygren said. “I believe it’s going to set an example for the others to follow and that will impact everyone long term.”

“Wisconsin has been a recognized national leader in efforts to combat opioid and substance abuse,” Dr. Valentin said. “Today’s announcement is a prime example of our state’s leadership to continue this recovery.”



Governor’s Task Force on Prescription Drug Prices Convenes in Milwaukee, Focuses on PBMs



The Governor’s Task Force on Prescription Drug Prices Jan. 22 meeting

Pharmacy benefit managers (PBMs) and their role in the pharmaceutical supply chain were the focus at the Jan. 22 meeting of the Governor’s Task Force on Prescription Drug Prices. PBMs are one component of the supply chain that also includes manufacturers, wholesalers, pharmacies, health plans and beneficiaries. PBMs play a role in the distribution of drugs by negotiating prices with drug manufacturers on behalf of health plans. PBMs receive rebates and administrative fees from drug manufacturers for the services they provide.

The task force heard from Dr. Neeraj Sood, professor and vice dean for faculty & research at the Price School of Public Policy, University

of Southern California and senior fellow at the USC Schaeffer Center for Health Policy & Economics of the University of Southern California. Dr. Sood described how the pharmaceutical supply chain operates, the dominance of three PBMs over the pharmaceutical market and ways to increase transparency in the interactions among the actors in the supply chain. Dr. Sood noted that while PBMs play a large role in health care, they are mostly unregulated. He recommended greater scrutiny of PBM drug pricing policies and believes more competition is needed throughout the distribution system to ensure savings are passed along to consumers.

The task force also heard from Robert Gallé, chief operating officer of IngenioRx, a PBM fully-owned by Anthem. He discussed IngenioRx’s efforts to provide research to clinicians about drug efficacy to assist them in prescribing decisions and showed outcomes that are reducing the cost of treating certain disease states, as well as improving patient health status.

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Brent Eberle, senior vice president and chief pharmacy officer at Navitus, a PBM created by Dean and SSM about 16 years ago, also presented information to the task force. He said that Navitus sees itself as operating as a pharmacy department of a health plan. Their goal is to be completely transparent about manufacturers' rebates. Navitus passes rebates through to the health plans rather than using "spread pricing," in which the PBM charges a payer more than it reimburses the pharmacy for a certain drug and retains the difference, as compensation for the services they provide. Instead, Navitus charges administrative fees to health plans rather than using spread pricing, with the goal of increasing transparency to the health plan.

The task force is scheduled to meet next Feb. 19 in Oshkosh and will address the role of health insurers and self-insured health plans in prescription drug pricing. Door County Medical Center CEO Brian Stephens, nominated by WHA, is a member of the task force.

Telemedicine Grant Program Makes Funds Available for Equipment Purchase

The Wisconsin Public Service Commission (PSC) has released an application for grant funds under their telemedicine grant program. The program allocates \$500,000 for grants for fiscal year 2020 for the purchase of specialized telecommunications equipment designed to augment or enhance the delivery of medical services. The 2020 application is due by 4 p.m. on Thursday, March 12, 2020. This same amount may also be available in fiscal year 2021.

Nonprofit medical clinics, hospitals and public health agencies are eligible to request a grant from the telemedicine grant program. A nonprofit medical clinic or hospital includes any medical facility that meets all the following criteria:

1. Is a nonprofit organization governed by a Board of Directors
2. Serves federally-designated health professional shortage areas, medically underserved areas, or medically underserved populations
3. Fulfills one, or both, of the following:
 - a. Provides service to all patients regardless of insurance status
 - b. Uses a sliding fee scale for uninsured patients based on income status

You can view application instructions [here](#). PSC staff will provide limited technical assistance to all prospective applicants as staff resources allow, until the time that a proposal has been officially submitted.

Contact WHA Vice President of Policy Development [Laura Rose](#) with questions about the program.

MedPAC: 340B Hospitals Treat Sicker Patients, but are Not to Blame for Higher Drug Costs

The nonpartisan federal Medicare Payment Advisory Commission (MedPAC) met recently to cover several topics. Among them was a 2018 inquiry from the U.S. House Energy and Commerce Committee on [whether MedPAC could find evidence](#) the 340B prescription drug discount program leads hospitals to increase the use of costlier prescription drugs to generate higher revenue margins. MedPAC reported that its analysis could not find a conclusive linkage.



MedPAC staff analyzed data from an Office of Inspector General report examining 340B spending related to cancer drugs. They found that while there is a potential for hospitals to earn higher margins from some higher-priced cancer drugs, this varied based on the type of cancer and some lower-priced drugs offering higher margins than higher-priced drugs. Staff also noted that some of the data provided limited insight, as the specific drugs were not named, and it was unknown whether any cheaper therapeutically-similar drugs were available as an alternative.

MedPAC staff also noted that the 340B hospitals typically care for patients with later stages of cancer and include a higher proportion of younger patients who select more aggressive treatments that are often costlier. For the types of cancer that did see a correlation with higher spending, the commissioners agreed it was more appropriately correlated to those higher-cost cancers rather than any incentive within the 340B Program. MedPAC noted that a 2015 U.S. Government Accountability Office report found similar correlations but was also criticized for not sufficiently controlling the differences in patient mix.

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MedPAC also looked at hospitals new to the 340B program to see whether their prescription drug spending grew. While the sample size was small, there was no indication of prescription drug spending growth in such hospitals from 2013-2017. Despite these conclusions, the commissioner asked staff to continue looking into whether there are any correlations with 340B spending related to hospital consolidation, physician ownership or hospital outpatient department billing. For more information, contact WHA's Director of Federal and State Relations [Jon Hoelter](#).

WHA Offers CMS Proposals to Remove Physician Co-Signature Burdens

WHA offered several recommendations in a [comment letter](#) to CMS Jan. 17 to address Medicare regulations that limit advanced practice clinicians from practicing at the top of their licenses in hospitals, adding to physicians' administrative burden. WHA's comment letter responded to a CMS solicitation for assistance in developing future reforms to the Medicare program, including removing burdensome requirements impacting physician assistant and advanced practice registered nursing practice.

"Regulatory burden creates additional cost on the health care system and limits the productivity of health care providers," WHA's letter to CMS Administrator Seema Verma said. "Wisconsin, like other states, has workforce challenges that impact our members' ability to meet the demands for care of our citizens, and regulatory burden directly impacts the amount of clinical care that physicians and non-physician professionals can provide in one day."

To address regulatory burden on physicians, advanced practice clinicians and team-based care delivery, WHA's comment letter recommended several clarifications to CMS's Hospital and Critical Access Hospital Conditions of Participation that would better recognize advanced practice clinicians' scope of practice and avoid unnecessary physician co-signatures.

WHA's proposals include clarification and alignment with other CMS policies regarding physician co-signature requirements for hospital admissions, certifications of care, history and physical performance, and discharge orders and summaries.

WHA's recommendations to CMS were drawn from presentations at WHA's Advanced Practice Clinician Conference held in September 2018 that highlighted problematic federal regulations limiting the ability of advanced practice clinicians from practicing to their full scope of practice in hospital settings.

If you have questions about CMS's solicitation or WHA's comment letter, contact WHA General Counsel [Matthew Stanford](#) or WHA Vice President Workforce & Clinical Practice [Ann Zenk](#).

Physician Leadership Development Conference, Kohler, WI - Register Today!

WHA is once again proud to be offering the Physician Leadership Development Conference in Kohler, WI on March 13 & 14, 2020. Check out this outstanding lineup:

- Dr. David Nash headlines Friday morning. Dr. Nash is an amazing speaker, and to some, the leading expert on the role of physician leaders in providing value-based care.
- Dr. Scott Rathgaber, Gundersen Health System CEO, will discuss his physician leadership journey from clinician to the CEO suite.
- Dr. Jay Bhatt, AHA CMO, and Elisa Arespachoga, vice president of the AHA's Physician Alliance, will lead a session on physician burnout titled "Regular or Extra Crispy? Lessons from the Field in Addressing Burnout."
- Bill Benjamin, a scientist at the Institute for Health and Human Potential, will discuss emotional intelligence.
- Marty Martin, Director of DePaul University's Health Sector Management MBA Program, will discuss physician performance management.
- Eric Borgerding, WHA president & CEO, will give an advocacy update during Friday's lunch focused on key issues impacting care delivery.



In response to attendee feedback, we have added additional speakers on Friday. Saturday morning will feature two educational tracks – one for developing physician leaders and another for senior physician leaders.

Please take a few moments to review the [conference brochure](#). [Register](#) and secure your hotel room today!

WHA Members-Only Website Updated

As part of WHA's upgrade to its website, www.wha.org, the members-only portion of the site has now been upgraded to enhance its usability, making information more easily available to WHA members. By accessing the page via the "[MEMBER LOGIN](#)" link (in the top right corner of the WHA home screen when on the laptop site; on the bottom of the page if accessing the mobile site), members can access various reports, directories, political action activities and other resources, depending on the role in the member's organization.

If you have not logged into the members-only site this week, **there has been a change in your login**. In order to enhance security for the members-only section, user ID logins have been changed to the user's work email address. You will no longer need to remember a special username. Your password does not change, so you should not have to do anything special to access the site other than using your work email and your usual password. If you don't remember your password, you can reset it using the "Forgotten password" link.

If you have any questions or problems, contact communications@wha.org.

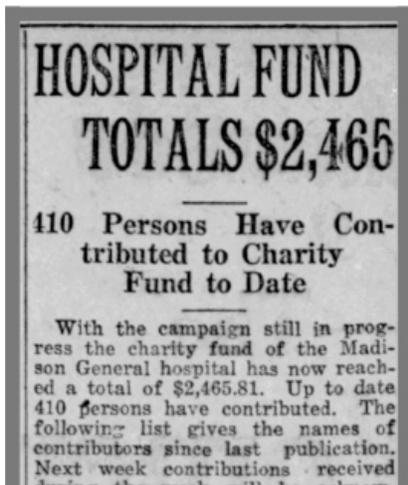
CELEBRATING 100 YEARS

WHA's Early Membership Drive Lives on Today

In the early years before the Internet, the Wisconsin Hospital Association offered personal memberships in addition to associate, institutional and honorary memberships. Newsletters were mailed to individuals. These memberships continued into the 1980s and 1990s when information could be acquired through electronic venues such as websites and email, so individual memberships were discontinued.

It's interesting to look at what the early WHA did with some of the proceeds raised via "individual membership:"

An article from The Capital Times, Madison, Wisconsin – 27 Dec 1920



Hospital Fund Totals \$2,465

410 Persons Have Contributed to Charity Fund to Date

"With the campaign still in progress the charity fund of the Madison General Hospital has now reached a total of \$2,465.81. Up to date 410 persons have contributed. (A list of contributors followed...) If you have not sent in your subscription, fill out the card which has been mailed to you and mail it to the Madison General hospital. The hospital association is making a mighty effort to enlist the cooperation and support of a large number of citizens of this city by asking them to become members of the association. A contribution of \$5 will entitle you to an active membership in the hospital association and the money will be used to care for some needy person."

From its earliest formation, WHA was truly conceived as an organization that would "promote the welfare of the people." That dedication of purpose continues today – just one example is the regular collection and promotion of hospital and health system [community benefit efforts](#) in communities from every corner of the state.

As a reminder, if your organization has historical items – photos, agendas, etc. – that you would like to share as part of WHA's 100th celebration, contact WHA Director of Communications [Tammy Hribar](#).

