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EDUCATIONAL EVENTS

January 2021

Chargemaster Coding Updates and Implementation for 2021
Self-study module series

January 2021

Critical Access Hospital Conditions of Participation 2020: Ensuring Compliance
Recorded webinar series

March 12, 2021 (Virtual)

September 14-15, 2021 (In person)
2021 Physician Leadership Development Conference

WHA, Health Care Groups Support Keeping State Masking Policy

Senate Votes to Overturn State Public Health Emergency, Assembly Delays Vote on Resolution

Wisconsin lawmakers in the state Senate voted this week to overturn an [executive order](#) by Governor Tony Evers declaring a public health emergency for COVID-19, action that would cause a statewide face covering mandate that would have otherwise lasted through March 20, 2021, to be nullified.

Assembly Republicans, who were scheduled to act on the resolution on Jan. 28, delayed action on the resolution following news from the nonpartisan Legislative Fiscal Bureau that the resolution may jeopardize additional federal funding and benefits for the state’s FoodShare program. Under Wisconsin law, the Legislature can overturn any declared public health emergency by a Governor through a joint resolution passed in both the Senate and Assembly.

A coalition of health care provider organizations—the Wisconsin Hospital Association, the Wisconsin Health Care Association, LeadingAge Wisconsin, the Wisconsin Assisted Living Association and the Disability Service Provider Network—released on Jan. 26 a memo that expressed opposition to the Legislature’s action and support for the governor’s masking order. These organizations joined a total of 42 Wisconsin lobbying organizations registered against the joint resolution. *(continued on page 6)*

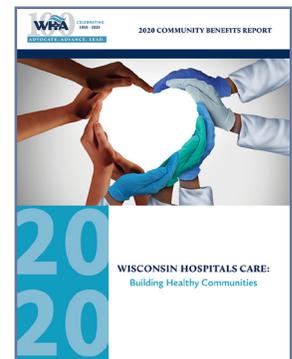
Wisconsin Hospitals Delivered Nearly \$2B in Community Benefits and Charity Care

Hospital COVID-19 responses included in annual WHA Community Benefits Report

The Wisconsin Hospital Association (WHA) [2020 Community Benefits Report](#) details the many ways hospitals and health systems in Wisconsin add value to their communities beyond standard measures of health care quality, including investments of nearly \$2 billion in community benefits in fiscal year 2019.

WHA’s Community Benefits Report tabulates costs Wisconsin hospitals incur through charity care provision and financial losses resulting from administering public health programs as well investments made in community health improvement services, cash and in-kind donations and other community building activities. These and other investments by Wisconsin hospitals in their communities totaled \$1.99 billion in 2019.

The report also highlights the intangible benefits hospitals deliver to their communities through civic engagement, sharing stories from each WHA member hospital and health system relating to charity care, free clinics, hospital-supported initiatives and—new in this year’s report—fighting COVID-19. *(continued on page 2)*



“Serving our communities well means going out of your way to help others, knowing that a greater cause is served when we look out for one another,” said WHA President and CEO Eric Borgerding. “That is why Wisconsin’s health care providers naturally seek, create or otherwise take advantage of every opportunity to make a difference in the lives of the people they have the privilege of serving.”

This year’s report on the community benefits realized as a result of investments, programs and initiatives enacted by Wisconsin hospitals and health systems includes a period of time that saw uncontrolled spread of COVID-19 throughout Wisconsin, which pushed the state’s health care system to its limits. “During the height of virus spread, hospitals and health systems provided critical assistance to the state’s testing efforts, administering COVID tests within their facilities and in drive through sites in their communities,” said Borgerding. “Wisconsin health care providers are again stepping up to play an important role in administering vaccines to their communities, demonstrating resilience, creativity and leadership that will help speed our state’s pandemic recovery. If Wisconsin’s hospitals did not take on these public health responsibilities, they may not be happening in some areas.”

All the while, Wisconsin health care providers maintain strong community involvement, both within and outside their facilities, as reflected in WHA’s 2020 Community Benefits Report.

In addition to the printed Community Benefits Report, WHA is introducing this year an interactive version of the report so that members and stakeholders can view, celebrate and share the meaningful ways hospitals and health systems are enhancing the quality of life we all enjoy here in Wisconsin. Visit wha.org/community-benefits to learn more.

For more information about WHA’s Community Benefits Report and ways you can promote your hospital’s or health system’s community development programs and outcomes, contact WHA Vice President of Communications [Kelly Lietz](#).

Hospitals Continue to Face Significant Underfunding from Medicaid and Medicare

Hospitals in Wisconsin and nationwide continue to deal with significant shortfalls from government-funded Medicare and Medicaid programs according to a new report from the American Hospital Association (AHA).

The AHA’s Annual Survey of Hospitals for 2019—the most comprehensive financial survey of hospitals nationwide—collects data on an extensive array of topics, including government [underfunding of medical services](#). The updated annual report shows that in 2019 Medicare underpaid hospitals by nearly \$57 billion nationally, which is very similar to the level of Medicare underfunding from 2018. A recent Wisconsin Hospital Association (WHA) survey of Wisconsin hospitals and health systems showed that Medicare underpayments have steadily grown in Wisconsin from \$2.2 billion in 2017 to \$2.5 billion in 2018 and \$2.6 billion in 2019. Over the same time period, Wisconsin hospitals’ uncollected bad debt also grew from \$215 million in 2017 to \$228 million in 2018 and \$236 million in 2019. This is not surprising, as aging demographics mean that more Wisconsinites are shifting from commercial health insurance to Medicare, leading to hospitals caring for more patients at rates that do not cover the full cost of care.

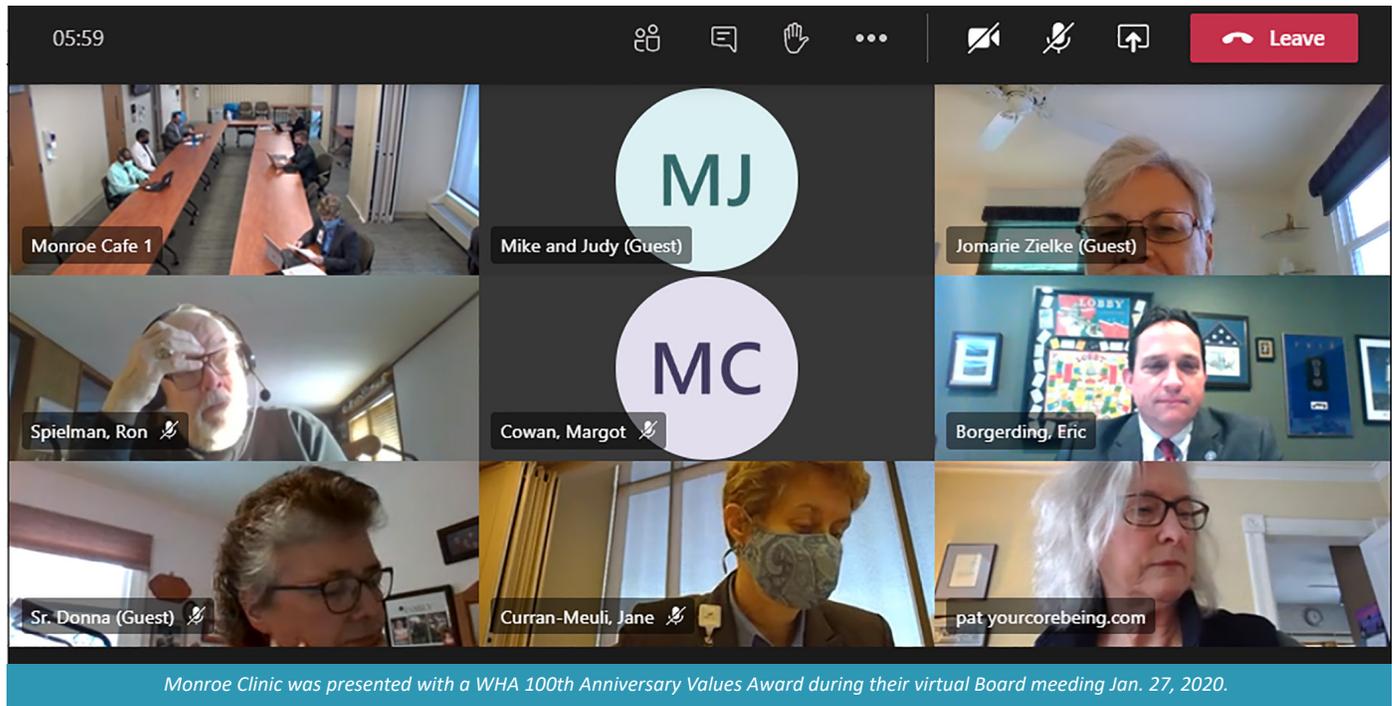
Wisconsin’s Medicare and Medicaid reimbursements continue to lag behind national averages. Nationally, Medicare paid about 87 cents for every dollar of care and Medicaid paid about 90 cents according to AHA’s survey. WHA’s own annual survey showed that Wisconsin hospitals received roughly 73 cents for each dollar of care provided under Medicare and 66 cents on the dollar under Medicaid. This failure by the government to pay the full cost of care results in a hidden health care tax on everyone else, creating a cost shift in the form of higher health insurance premiums for businesses and individuals.

In recent years, WHA has successfully advocated for growing Wisconsin’s Disproportionate Share Hospital (DSH) and Rural Critical Care (RCC) Medicaid supplemental payments, which help hospitals that see large numbers of Medicaid patients offset a portion of these losses. WHA continues to advocate for strengthening and protecting these programs that help Wisconsin maintain its well-deserved reputation for high-quality, high-value health care.

Monroe Clinic Presented with WHA 100th Anniversary Values Award

Monroe Clinic, a member of SSM Health, has been awarded a WHA 100th Anniversary Values Award by Wisconsin Hospital Association (WHA). The award was presented by WHA President and CEO Eric Borgerding at the clinic's board of directors meeting on Jan. 27.

In presenting the award, Borgerding highlighted Monroe Clinic's coaching model. "The coaching model, which is embedded into your culture, boasts the philosophy that 'every team needs a coach.' This demonstrates your commitment to staff retention, engagement and development. The ability of coaches to empower their teams is not a minor task, and it is evident that you do this consistently and with intention."



Borgerding also praised Monroe Clinic's LEAN process improvement and quality measures. "The example of Monroe Clinic's Imaging staff noticing that patients were receiving multiple needle sticks and knowing that there was a better way to manage this process demonstrates a patient-centric mindset. The resulting assessment that ultimately led to a new process that limits patient needle sticks shows collaboration and dedication to the overall patient experience."

Congratulations to Monroe Clinic and all of its hardworking staff for receiving this very well-deserved recognition and honor.

Nurse Earnings in Wisconsin Among Nation's Best

A recent [study](#) by business.org ranks Wisconsin 12th nationally for nursing salaries compared to average salaries in each state. According to the study, nurses in Wisconsin earn an average salary 48.6% higher than the state's average wage.

Wages relative to cost of living for an area are an important consideration for this vital segment of the workforce in choosing the best state in which to practice. In this regard, nurses in Wisconsin also fair well compared to the rest of the nation, with the state ranking third (tied with Ohio) for how nurse wages compare to living expenses. Only West Virginia and New Mexico ranked higher than Wisconsin on this measure.

More than 2.9 million nurses work in the U.S., earning an average salary of \$77,460 annually, according to the latest data from the U.S. Bureau of Labor Statistics. That salary is 45% more than the average salary for all other occupations across the country, with Wisconsin's 48.6% spread showing that nursing skills are highly valued in the state. Earnings are one important way health care employers can recognize, recruit and retain nurses, and this study shines a positive light on Wisconsin.

For questions about this study, or other workforce issues, contact WHA Senior Vice President of Workforce and Clinical Practice [Ann Zenk](#).

Grassroots Spotlight

WHA Virtual Roundtable with Congressman Bryan Steil

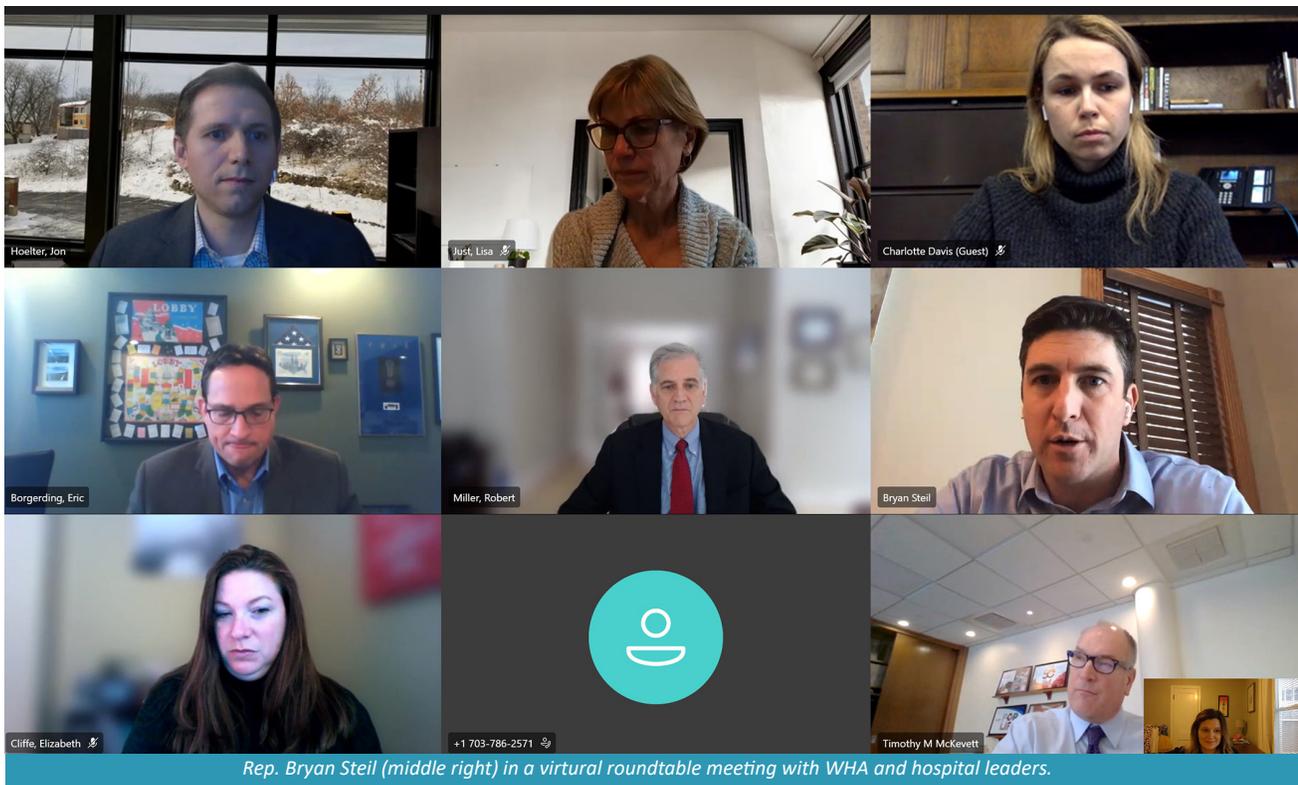
The Wisconsin Hospital Association (WHA) joined hospital and health system leaders in southeast Wisconsin for a virtual roundtable with Congressman Bryan Steil on Jan. 26.

Health care leaders gave Steil an update on the improving picture of hospital capacity, which Wisconsin has been fortunate to experience while other states across the country have seen caseloads climb. While hospital capacity has increased, Wisconsin hospitals and health systems are working through the initial challenges of the COVID vaccine rollout and are seeing large increases in demand for vaccinations now that the age 65+ population is eligible.

Congressman Steil described how he has been pushing the federal government to provide more transparency over the vaccine allocation process, noting that Wisconsin was near the bottom of states in the number of vaccine doses received on a per-capita basis.

WHA members in the 1st Congressional District reported that they have seen significant supply constraints that have impaired their ability to vaccinate to the fullest capacity their infrastructure will allow. They are eager to see supply lines improve and are optimistic that greater transparency in future allocations at the federal level will also aid planning efforts at the state level.

For more information, contact WHA Vice President of Federal and State Relations [Jon Hoelster](#).



CMS Releases Hospital Survey Priorities

The Centers for Medicare & Medicaid Services (CMS) has issued updated guidance regarding hospital survey limitations that, according to CMS, are to ensure quality of care oversight while providing hospitals the ability to focus on serving their patients and communities. In a memo to State Survey Agency Directors, CMS outlined the following limitations that will be in effect for 30 days, beginning on Jan. 20 (with the potential for 30-day renewals with additional notice):



- Hospital complaint surveys will be restricted to Immediate Jeopardy complaint allegations with CMS prioritizing onsite complaint investigations based on imminent danger to the patient, likelihood of noncompliance with the Medicare Conditions of Participation, and whether immediate action must be taken to protect the health and safety of patients. CMS, however, notes that it may authorize investigations anytime, as determined appropriate by the CMS Survey Operations Group Location.
- Hospital recertification surveys will be suspended except for a subset of hospital reaccreditation surveys. Accrediting organizations will be directed to suspend reaccreditation surveys for 30 days and should expect to receive guidance with additional information about a modified reaccreditation survey process.
- Hospital enforcement actions for deficiencies that do not represent immediate jeopardy will have their termination date extended for at least 30 days to remain consistent with the survey guidance. During this time, hospitals will be expected to continue to ensure safety and quality but will not be required to submit a plan of correction and will not receive a revisit survey. Hospitals that have an uncorrected incident of Immediate Jeopardy must demonstrate removal of the Immediate Jeopardy findings through an onsite survey. CMS wrote that hospitals can expect additional guidance on enforcement.

A copy of the CMS memo is available [here](#).

Gundersen St. Joseph's Hospital and Clinics – Hillsboro Receives WHA Foundation 2020 Global Vision Community Partnership Award



On Jan. 21, Wisconsin Hospital Association (WHA) Foundation Executive Director Leigh Ann Larson presented the 2020 Global Vision Community Partnership Award to Gundersen St. Joseph's Hospital and Clinics – Hillsboro for its school-based behavioral health program. Gundersen St. Joseph's Hospital and Clinics – Hillsboro is one of two recipients of the 2020 award, which includes a \$2,500 grant and commemorative plaque.

Gundersen St. Joseph's school-based behavioral health program was developed to address the barriers that exist in providing mental health services for school-aged students in the community. Utilizing qualified treatment trainees (QTTs), this program has proven to be sustainable and successful. A QTT is an individual who holds a master's degree in social work and is completing the required 3,000 hours of supervised therapy services to obtain the Licensed Clinical Social Worker credential with the state of Wisconsin. This program is currently serving the Hillsboro School District, the Wonewoc-Center School District and the Royall School District. The program has been a "win, win, win" for the students and their families, the schools and for Gundersen St. Joseph's. It is an excellent example of using creativity and collaboration to remove barriers to care.

The purpose of the Global Vision Community Partnership Award is to recognize and reward community partnership projects that work with a WHA member hospital(s) to meet an identified community health need in an innovative or creative manner.

WHA Webinar to Focus on Ongoing Business Challenges Related to COVID

Surviving the Pandemic: A Year in Review and Look Ahead

Feb. 25, 10:00-11:00 a.m.

As the COVID-19 pandemic moves into its second year, this webinar will reflect on the changes the virus has brought to our businesses and to our lives. Join Nutanix Healthcare Chief Technology Officer Cheryl Rodenfels and Account Executive David Kramer as they review funding challenges, priority changes and the socio-economic impacts that health care organizations have experienced. They will provide some thoughts on moving forward and will open the discussion to hear from participants about their experiences.

This webinar is brought to you by Wisconsin Hospital Association (WHA) corporate member Nutanix. The webinar will be recorded and placed in the WHA On-Demand Learning Center.

Learn more about this educational opportunity and [register to attend here](#).

WHA Physician Leadership Development Conference to Feature Separate Virtual and In-Person Events

In response to attendee feedback and continued prohibitions on public gatherings, the Wisconsin Hospital Association (WHA) is adapting its Physician Leadership Development Conference to include two distinct, but complementary professional development opportunities, one virtual and one in-person.

The Physician Leader Learning Day, a virtual conference, will take place March 12, 2021. The Physician Knowledge Sharing Event is planned as an in-person event in Kohler Sept. 14-15, 2021. Both events offer continuing medical education-certified instruction focused on developing leadership skills, while also providing a forum for discussion, networking and collegiality. Registration is inclusive of both sessions.



Complete event information and registration are available [here](#). For questions regarding this event or any other WHA educational opportunity, email education@wha.org.

(WHA, Health Care Groups Support Keeping State Masking Policy . . . continued from page 1)

“[We] agree that masking is an important tool to help Wisconsin resume pre-COVID-19 activities. Our organizations urge lawmakers to reconsider this effort to end the governor’s masking order, as the use of face coverings is a valuable method to decrease the likelihood of transmission of COVID-19,” wrote the organizations in their Jan. 26 memo. “We all share the same goal of getting back to healthy, thriving communities by overcoming this pandemic. But, we are not at the finish line yet.”

The resolution was approved in the Senate with vote of 18-13, with two Republican Senators voting with the Democrats in opposition. “I stand with opening our schools, and I stand with the health care providers in my district,” said Sen. Dale Kooyenga (R-Brookfield) according to reporting from WisPolitics.com.

Similarly, Sen. Rob Cowles (R-Allouez) expressed concerns with the impact that lifting masking requirements will have on the health care community. According to the same WisPolitics.com report, Sen. Cowles said, “...the health care community has suffered through this entire ordeal, and I wasn’t about to make it worse.”

The Assembly recessed session on Jan. 28, with plans to return to the floor during the week of Feb. 1 to consider further action.

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