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EDUCATIONAL EVENTS

- March 24**
 Update on Ligature Risks, Suicide Prevention, Restraints and Seclusions Webinar
- April 14**
 Advocacy Day
 Virtual

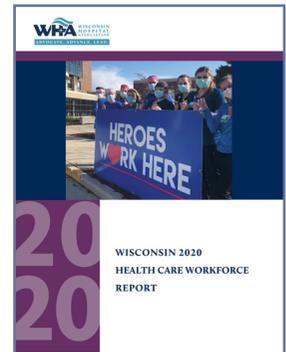
Visit www.wha.org for more educational opportunities

COVID-19 Accelerated Wisconsin’s Health Care Workforce Challenges

WHA Health Care Report details increasing demands on worker pool

COVID-19 acted as an accelerant to long-standing trends challenging the state’s health care workforce, according to the Wisconsin Hospital Association’s [\(WHA’s\) 2020 Health Care Workforce Report](#).

“Hospitals and health systems stepped up to fight a protracted surge of COVID-infected patients requiring complex care while also continuing to deliver babies, attend to accident victims and treat chronic diseases,” WHA’s 17th annual industry workforce report notes, crediting Wisconsin’s health care professionals for resilience and creativity in the face of an indiscriminate global pandemic that has claimed more than 6,000 lives and sickened hundreds of thousands of people across the state. The report also details the physical, mental and emotional toll that the prolonged stress of the pandemic has taken on Wisconsin’s overburdened health care workforce.



Included in WHA’s 2020 Health Care Workforce report is a detailed analysis of the pipeline of workers in a broad range of health care subspecialties. Entry-level positions like nursing assistants, practical nurses and technicians registered some of the highest vacancy rates. Advanced practice clinicians also saw high vacancy levels. COVID-19, the report notes, magnified the impact of these shortages.

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WHA’s Virtual Advocacy Day Registrations Top 600 One Month Out

Virtual event platform is now open for registered attendees



Attendance for the Wisconsin Hospital Association’s (WHA’s) Advocacy Day on April 14 has topped 600 attendees with one month until the live event. The virtual platform being used for the event, LeaderPass, opened to all registered attendees on March 15. Attendees are encouraged to log into the site prior to the live Advocacy Day event to familiarize themselves with the platform.

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Two-Part WHA Physician Leadership Development Conference Kicks Off with Inspirational Messages from National Thought-Leaders

Physicians and physician leaders attending the Wisconsin Hospital Association (WHA) Physician Leadership Development Conference on March 12 gained insights and practical advice on leading their teams and preparing for emerging health care trends from three respected health care visionaries in the first of this year's two-part conference. The virtual conference will be augmented with an in-person gathering Sept. 14-15 in Kohler, Wis.

The first speaker to address the 115 physicians and physician leaders in attendance, David Nash, M.D., is founding dean emeritus and the Dr. Raymond C. and Doris N. Grandon Professor of Health Policy at the Jefferson College of Population Health (JCPH). JCPH is dedicated to developing future health care leaders.



Dr. Nash reflected on the history of quality improvement and the culture of training and practice before providing a view of future trends relevant to the evolution of health care practice. He described how Dr. Ernest Codman, a surgeon from Boston, was ridiculed for suggesting that physicians pay attention to the quality of their work and that physicians make efforts to continually improve their results. Attendees were reminded that that medical errors still occur and that teamwork is crucial to optimal outcomes. Good teams, Nash noted, have a shared purpose, function in a safe environment, are open to diverse viewpoints and solve problems by negotiation. In the U.S., health care is focused on treating illness, Nash observed, suggesting that health care leaders should expand their approach to include promoting health and healthy lifestyles. Such a change would decrease cost and waste, would engage patients in their care, would decrease burnout among health care providers and would improve the health of the population, according to Nash.

The conference's second speaker, J.P. Pawliw-Fry, has leveraged a passion for helping people manage their emotions to develop science-based skills and tools to build a culture of exceptional leadership. His organization surveys more than 38,000 people per month. Pawliw-Fry noted that leading under pressure requires courage and adaptability. Some organizations procrastinate when faced with problems, resulting in delayed solutions. Pawliw-Fry cited three critical characteristics in high-performing leaders: intellectual capacity, technical skill and emotional intelligence, the latter being twice as important as the other two combined. He contrasted responses to stress between areas of the brain—the amygdala and the neocortex—drawing a parallel to a quote from author John Gardner: "The world loves talent but pays off on character." Physicians with excellent character will have emotional intelligence and will lead with a reasoned approach to the problem, rather than an emotional response from the amygdala, Pawliw-Fry related, adding that a good leader function is present when the leader is present, is communicating well, engenders trust and asks for the opinions of the team members.



Marty Martin, a highly sought-after international presenter, trainer and facilitator currently serving as director and associate professor of the health sector management MBA program at DePaul University in Chicago, rounded out the conference by addressing topics ranging from managing physician performance to elements of teamwork. Martin's remarks included a discussion of high-functioning organizations and individuals. He noted that the road to reaching one's maximum potential must be built on a bedrock of respect of the individual, a commitment to excellence and a rejection of mediocrity. Among the forces fueling effective leadership, according to Martin, are positive feedback and integrity. He closed his

presentation with a discussion of managing conflict and disruptive behavior.

WHA members who were not able to join this first installment of the Physician Leadership Development Conference are welcome to join the September in-person event. [Contact](#) the WHA education department to learn more.

(WHA's Virtual Advocacy Day Registrations Top 600 One Month Out . . . continued from page 1)

“Resources and content have been added to the event site for attendees to explore, providing an opportunity for attendees to familiarize themselves with the platform early,” said WHA Vice President of Advocacy Kari Hofer. “We plan to roll out more resources as we get closer to April 14 to help prepare advocates for the day,” Hofer added.

An email is sent to all registered attendees with instructions for creating a LeaderPass account. For questions about Advocacy Day or to obtain instructions to create a LeaderPass account, contact WHA staff at education@wha.org.

Registration for Advocacy Day is open until April 13. There is no cost to attend, but pre-registration is required. [Learn more and register here.](#)

State Assembly Moves Forward on WHA-Supported COVID-19 Legislation

Senate holds committee hearing on companion bill

Wisconsin lawmakers moved forward on COVID-response legislation addressing several regulatory barriers hospitals and other care providers have faced throughout the COVID-19 pandemic. The legislation, Assembly Bill 148 and Senate Bill 202, received a unanimous voice vote in the Wisconsin state Assembly and was heard before a Senate Committee on March 17.

In a press statement following Assembly floor action, Wisconsin Hospital Association (WHA) President and CEO Eric Borgerding applauded the Assembly’s vote and called on the state Senate to act. “Today, challenges related to discharging patients, licensing providers and regulatory barriers to deliver care in alternate settings remain as hospitals implement evolving strategies to care for COVID and non-COVID care patients. Assembly Bill 148 removes these barriers and will help hospitals and health systems continue to improve their response to the pandemic for their communities.”



Dr. Narayana Murali (on screen), chief clinical strategy officer at Marshfield Clinic Health System, testifies in support of SB 202.



WHA President and CEO Eric Borgerding testifies before the Senate Health Committee on SB 202.

Rep. Nancy VanderMeer (R-Tomah), the lead author of Assembly Bill 148, discussed the continued need for AB 148 to “allow our health care providers to continue to productively manage their organizations through the COVID situation.”

“Our state’s hospitals have been both the front line of the fight and the last line of defense during the pandemic, serving as the COVID safety net for all Wisconsin. While we are in a better place compared to this fall, we are not out of this pandemic—and our state’s hospitals remained prepared to go wherever COVID may head,” said Borgerding.

With full approval by the state Assembly, the bill now needs approval by the Wisconsin state Senate, where the Senate Health Committee held a public hearing on the legislation at the same time as the Assembly’s floor vote.

“The Medicaid provisions are designed to do a better job making whole our state’s hospitals, who have been under immense pressure as they’ve worked to be sure that they serve the health care needs of the people of Wisconsin to the best of their ability,” said Senate Health Committee Chair and lead author of Senate Bill 202 Sen. Pat Testin (R-Stevens Point) during the committee’s public hearing. “There’s no question that hospitals went above and beyond. But while hospitals made sure people got the care they needed, our reimbursement system wasn’t designed to account for these measures. This bill makes sure that we can appropriately reimburse hospitals for care in these situations. And in addition, it provides a path for reimbursement for hospital care provided in a home setting,” said Testin.

SSM Health Regional President, WHA Board Member Damond Boatwright to Lead HSHS

WHA President and CEO Eric Borgerding calls Boatwright “an inspirational leader”



Damond Boatwright

SSM Health Wisconsin’s Regional President and Wisconsin Hospital Association (WHA) board member Damond Boatwright has accepted the CEO position at Hospital Sisters Health System (HSHS), where he will succeed Mary Starman-Harrison.

As CEO of HSHS based in Springfield, Ill., Boatwright will oversee system operations of 15 hospitals, numerous community-based health centers and clinics that employ nearly 2,300 physician partners and more than 13,000 associates in Wisconsin and Illinois. He will start his role at HSHS in June.

In announcing Boatwright’s appointment, HSHS Board Chair Bill Murray said, “Damond’s leadership record [at SSM] is exemplary. I am confident he will provide the leadership needed to help HSHS continue working through the uncertainties of the COVID-19 pandemic and beyond. Damond is committed to moving HSHS forward as an integrated health care ministry, ensuring that high-quality health care is accessible to all our communities.”

“Damond has been an inspirational leader, not only to SSM Health, but also to Wisconsin’s entire health care system,” said WHA President and CEO Eric Borgerding. “His devotion to the health care profession and the mission of providing accessible care to all is truly remarkable. He has been a valuable resource to WHA and to me personally. I am proud to know Damond and am certain that he will continue to advance health care excellence in his new role.”

In a message to SSM employees, Boatwright reflected, “Please know that while I am excited to begin this new chapter, I am also profoundly grateful to each of you for the work we have accomplished together during my seven years in Wisconsin.”

Boatwright joined SSM health in Wisconsin as regional president of hospital operations in February 2014. In this role, he is responsible for overseeing all hospital operations within SSM Health’s integrated care delivery network in the Wisconsin region.

Boatwright has been a member of the WHA board of directors since 2015 and served as board chair in 2019. He is chair of WHA’s advocacy committee and is a member of the association’s nominating committee and budget committee. His past board committee memberships include the WHA issues advocacy committee and subcommittee on health care reform. He is a regular participant in both the WHA annual Advocacy Day and annual board planning sessions. He received WHA’s Distinguished Service Award in 2020 for his exemplary commitment to both WHA and the communities it serves.

HHS Expands Medical Professionals and Students Authorized to Administer COVID Vaccines

On March 12, The U.S. Department of Health and Human Services (HHS) added several new classes of professionals and students to its list of qualified persons that may serve as COVID-19 vaccinators pursuant to the Public Readiness and Emergency Preparedness (PREP) Act.

In its amended PREP Act declaration, HHS newly authorized the following providers to serve as vaccinators:

- Dentists, emergency medical technicians (advanced and intermediate EMTs), midwives, optometrists, paramedics, physician assistants, podiatrists, respiratory therapists, and veterinarians;
- Recently retired members of the above professionals and pharmacists, if they were in good standing upon expiration of their license; and
- Medical students, nursing students, and students of the other eligible health care professions with proper training and professional supervision to serve as vaccinators.

In previous amendments to the PREP Act declaration, HHS had included nurses, pharmacists, pharmacy interns and pharmacy interns in its list of qualified persons to administer COVID-19 vaccines.

The amendment to the PREP Act declaration also clarifies that observers should be experienced in administering intramuscular injections.

State preemption and liability protections

The declaration under the PREP Act preempts state laws that would otherwise prohibit such providers from administering a COVID-19 vaccine and provides certain liability protections.

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“This amendment thus expands the pool of vaccinators to individuals who have or can obtain training and the capability to administer vaccines even if prescribing, dispensing and administering vaccines is not within the scope of their license or usual responsibilities, allowing states, territories, local areas and tribes to use these individuals in their vaccination programs,” states the HHS amendment.

“As qualified persons, these health care professionals and students in health care profession training programs will be afforded liability protections in accordance with the PREP Act and the terms of this amended declaration,” states the HHS amendment. “Second, to the extent that any state law that would otherwise prohibit the healthcare professionals and students in healthcare profession training programs who are a ‘qualified person’ from prescribing, dispensing or administering COVID-19 vaccines or other Covered Countermeasures, such law is preempted.”

Full details and requirements can be found in the [HHS Seventh Amendment to PREP Act Declaration](#).

Additional information regarding federal expansion of eligible vaccinators can be found in this [White House Fact Sheet](#) and the [HHS COVID Vaccination Workforce page](#).

Contact WHA General Counsel [Matthew Stanford](#) for more information.

Sen. Baldwin Introduces 340B Legislation Supported by WHA



Sen. Tammy Baldwin

On March 17, U.S. Sen. Tammy Baldwin [unveiled](#) legislation to protect 340B hospitals from unforeseen changes due to COVID-19.

The legislation is supported by the Wisconsin Hospital Association (WHA) along with a number of health care groups and a bipartisan group of U.S. senators, including John Thune (R-N.D.), Debbie Stabenow (D-Mich.) Rob Portman (R-Ohio), Shelley Moore-Capito (R-W.Va.), and Ben Cardin (D-Md.). Specifically, it would allow 340B hospitals to maintain their 340B eligibility during the COVID-19 pandemic regardless of fluctuations in patient mixes outside of their control.

“Our hospitals, health care workers and the patients they serve need certainty during this ongoing COVID-19 pandemic, and we must work together to limit disruptions to our health care system,” said

Sen. Baldwin. “The 340B program has served Wisconsin well by helping to lower drug prices for hospitals and health clinics serving vulnerable communities that would otherwise not be able to afford prescription drugs.”

While the legislation was originally introduced in the middle of the pandemic amidst more uncertainty, the hope is it will be able to pass as an upcoming bill or in an upcoming larger package to provide more certainty as hospitals emerge from the worst of the pandemic.

“The 340B prescription drug discount program helps hospitals stretch scarce federal resources, better enabling them to fulfill their missions of providing life-saving care to their communities. Given the immense challenges COVID has created for hospitals and health systems, more than ever our members are now looking for certainty that important federal programs like 340B will not go away,” said Wisconsin Hospital Association (WHA) President and CEO Eric Borgerding. “This legislation will give hospitals one less thing to worry about as they continue to fight an unprecedented pandemic by ensuring fluctuations in patient mixes caused by COVID will not threaten their 340B savings. WHA greatly appreciates Senator Baldwin’s leadership on this important issue.”

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

Congressman Kind Introduces Legislation to Protect Rural Health Clinics



On March 12, U.S. Congressman Ron Kind [introduced legislation](#) to fix an unintended error impacting rural health clinics (RHCs) in the 2020 year-end COVID package, the Consolidated Appropriations Act, 2021.

As reported in a [prior edition](#) of *The Valued Voice*, the year-end COVID package reformed how RHCs are reimbursed in an attempt to narrow the gap between capped and uncapped RHCs. Unfortunately, while the bill intended to ensure no RHC would see a payment cut as a result of the change, a drafting error would result in taking away cost-based reimbursement from RHCs who came online after 2019 and paying them the lower capped rate.

Congressman Kind's legislation would insert the intended date of Dec. 31, 2020, into the federal statute. So long as an RHC had an application on file with the federal government prior to that date, it would not be penalized with the lower rate.

The Wisconsin Hospital Association (WHA) is aware of a number of members who were impacted by this change and has supported efforts to fix it. WHA is also supporting [legislation](#) introduced in the U.S. House of Representatives to extend the date delaying the 2% Medicare sequester cuts, which also includes this legislation protecting RHCs.

Contact WHA Vice President of Federal and State Relations Jon Hoelter for more information.

Economic Advantage Summit Offers Strategies to Maximize Resources

Register now for March 23 webinar

Attendees to the upcoming Nutanix Economic Advantage Summit webinar will learn how to save valuable budget, time and manpower and redistribute resources toward more high-value initiatives. The online session taking place at noon on March 23 will help attendees maximize returns on their infrastructure while reducing complexity and costs over time.

New Nutanix President CEO Rajiv Ramaswami will share his cloud vision in his first major Nutanix event. Attendees will also receive real-life insights from customers in a CIO Perspective Panel in this 100% business-focused event.

Topics to be covered in this webinar include:

- Working together for rapid transformation
- Cutting costs and shifting savings to innovation
- Accelerating time to market
- Innovating with automation
- Driving workplace efficiency

To register for the Economic Advantage Summit, click [here](#).

Deadline to submit WHA Foundation Simulation Lab Scholarship Application is March 26

Don't miss the opportunity to submit an application for the 2021 Wisconsin Hospital Association (WHA) Foundation Simulation Lab Scholarship program.



The WHA Foundation is offering up to 20 scholarships to Wisconsin member hospitals, allowing them to designate an interdisciplinary team to participate in clinical simulation training focused on stroke, severe sepsis/septic shock or high-risk OB delivery. The WHA Foundation has agreements with two high-fidelity clinical simulation labs located within the state, making them available to scholarship recipients for these training sessions.

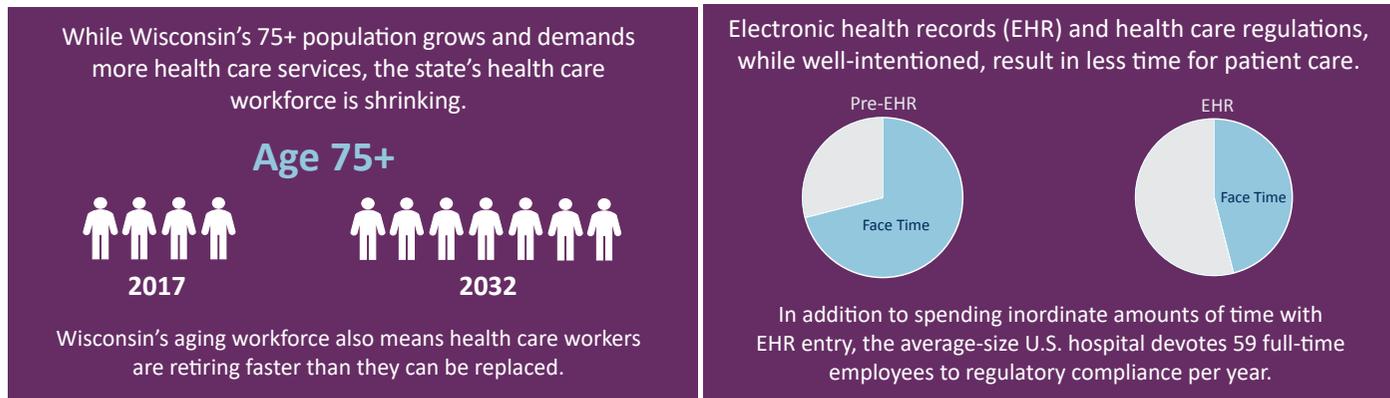
Find out more about the program and submit your application [here](#).

For questions about this scholarship opportunity, contact WHA Foundation Executive Director [Leigh Ann Larson](#).

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“This year’s report shows the continued impact of an aging population on the state’s health care workforce. This, combined with the overwhelming effects of a global pandemic, creates an urgency for solutions to maintain the resilient workforce needed to sustain Wisconsin’s high-quality health care,” said WHA President and CEO Eric Borgerding. “Wisconsin’s health care quality isn’t just happenstance. It requires a dedicated and skilled workforce, smart use of technology and regulatory and licensing reforms that help us make the best and safest use of both.”

WHA’s 2020 Health Care Workforce Report breaks down the workforce supply and demand equation and draws attention to an increasing need for health care services by an aging population. Unfortunately, this same demographic trend increases the risk of a disproportionate number of retirements among health care workers relative to new professionals entering the field. This dual pressure on the state’s health care workforce has a name reflective of the concern it is creating within the industry: the “Silver Tsunami.”



While the full effect of COVID-19 on the health care workforce in Wisconsin cannot yet be fully assessed, the report highlights historic trends as well as pandemic-fueled adaptations driving change in health care planning and delivery, including new technologies and workforce innovations that increase the capacity of the state’s current health care workers. It also argues for removing regulatory barriers that impede care delivery and promotes regulatory flexibility to optimize the available workforce.

“Wisconsin’s health care workforce must grow, but with a shrinking supply of workers, it cannot grow fast enough to keep up with rapidly increasing demand,” noted WHA Senior Vice President of Workforce and Clinical Practice Ann Zenk. “COVID-19 magnified the need for Wisconsin to carefully target growth to the professions most in demand, and to use those professionals to the full extent of their education, training and experience. We must also provide the health care workforce with technology tailored to clinical need, not weighed down by regulatory requirements.”

Based upon the report’s findings, WHA recommends that health care organizations, educators and policy makers pursue the following strategies to support the state’s health care workforce and sustain the excellent health care Wisconsin is known for:

- Build public-private partnerships to “Grow Our Own” Wisconsin health care workforce.
- Break down barriers to top-of-skill practice.
- Bolster acceptance and utilization of telemedicine and technology.
- Reduce regulatory burden and increase regulatory flexibility.
- Support care in the best setting—inpatient, outpatient or post-acute.

WHA also recommends taking stock of the state’s public health infrastructure shortcomings in preparation for the inevitable next global health emergency.

Download the full Wisconsin 2020 Health Care Workforce Report [here](#).

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