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WHA Speaks in Favor of Protecting Telehealth at Senate Committee Hearing

The Wisconsin Hospital Association (WHA) spoke in favor of legislation to protect telehealth from being regulated differently than in-person care at a May 26 Senate Committee on Insurance, Licensing and Forestry hearing.

Sen. Dale Kooyenga (R-Brookfield) and Rep. Amy Loudenbeck (R-Clinton), lead authors of the 2019 WI Act 56 Medicaid telehealth legislation, introduced [Senate Bill 309](#) to create a definition of telehealth in the Department of Safety and Professional Services (DPS) statute that would be consistent with the Medicaid definition of telehealth. WHA General Counsel Matthew Stanford, [speaking on behalf of WHA](#), noted that the very favorable patient satisfaction and quality data on telehealth make it clear that demand for telehealth will continue well beyond the pandemic.

However, different licensing and examining boards at DPS have begun to contemplate creating rules specific to telehealth, ostensibly to support telehealth practice in Wisconsin. While the Psychology Examining Board has simply proposed clarifying that licensure and professional and practice standards be the same for telehealth as they are for in-person care, the Occupational Therapy Credentialing Board has proposed creating a number of telehealth-only requirements regarding informed consent, collaboration and technology training, to name a few.

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Last Chance to Register for Wisconsin Rural Health Conference

The Wisconsin Hospital Association (WHA) premier event the Wisconsin Rural Health Conference is only one week away. Those who have not yet done so are encouraged to register today. Conference information and registration can be found at www.wha.org/Rural.



[Wisconsin Rural Health Conference](#)
 Thursday, June 3, 2021
 8:30 a.m. - 3:30 p.m.

This year's virtual conference will focus on the coping and resiliency skills of health care staff, public policy issues affecting rural populations and how uncovering our unconscious biases can help provide better patient experiences and outcomes.

Questions or requests for additional information can be sent to education@wha.org.

EDUCATIONAL EVENTS

June 3
 Wisconsin Rural Health Conference
 Virtual

September 14-15 (In-person)
 2021 Physician Leadership Development Conference
 The American Club, Kohler

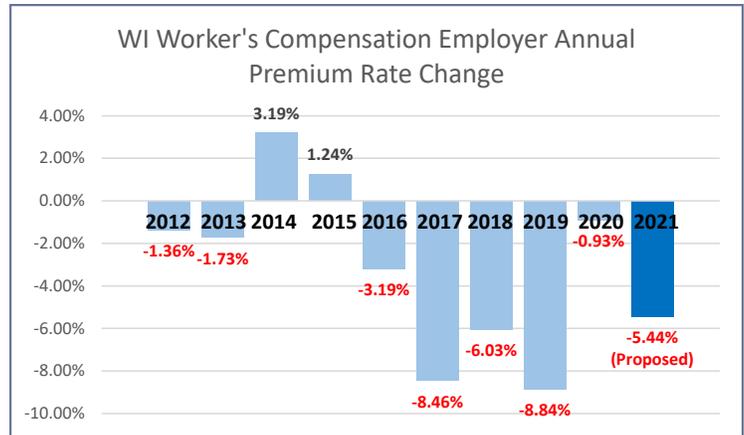
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WCRB Proposes Sixth Consecutive Workers' Comp Premium Rate Reduction

Eighth reduction in 10 years

The Wisconsin Compensation Rating Bureau (WCRB) announced on May 21 that it would recommend to the Office of the Commissioner of Insurance (OCI) an overall 5.44% decrease in worker's compensation premium rates for the rate year that begins October 1, 2021. WCRB, an association of insurers, is a licensed rate service organization recognized in statute. OCI, which generally adopts WCRB's proposed rates, is expected to announce its action on rates later this summer.

WCRB's proposed rate reduction follows five consecutive years of falling rates: 3.19% in 2016; 8.46% in 2017; 6.03% in 2018; 8.84% in 2019; and .93% in 2020. This year's proposed rate reduction, like recent years, is reportedly due to the frequency of injuries declining and medical costs remaining flat.



“Wisconsin continues to shine when it comes to the trends in workers’ compensation premiums for employers,” said Wisconsin Hospital Association President and CEO Eric Borgerding. “Not only is overall cost of workers’ compensation insurance continuing to drop for Wisconsin businesses, when a worker is injured at one of those businesses, they get great health care and are back to work sooner.”

(WHA Speaks in Favor of Protecting Telehealth at Senate Committee Hearing . . . continued from page 1)



Gundersen Health System Clinical Manager of Virtual Care Jessica Easterday joins WHA's Matthew Stanford in speaking in favor of legislation to protect telehealth at the Senate Insurance, Licensing and Forestry committee hearing.

In speaking to the committee members, Stanford noted concerns from WHA's Telehealth Work Group that these rulemaking efforts could be the start of a rush of new telehealth rulemaking that could result in a “patchwork quilt of telehealth regulations from multiple DSPS boards.” He said that the Medicaid telehealth legislation was governed by a simple premise: telehealth is health care, and “if telehealth is health care, then it should be regulated the same as in-person health care.” Stanford said WHA is pleased to be working with the bill authors on an amendment that would add similar protections found in the Medicaid statute and placing these protections in the DSPS statute so that telehealth would not be regulated differently than in-person care.

Joining WHA in addressing the committee was Gundersen Health System Clinical Manager of Virtual Care Jessica Easterday, who is also a member of WHA's Telehealth Work Group. Easterday voiced concerns that the various boards at DSPS might impose additional requirements for telehealth that will require staff to

bear the added operational and regulatory burden of ensuring compliance with several different practices. This could create barriers to timely patient care. She said she supported an amendment to SB 309 as described by WHA that would prevent such a scenario from occurring and would reduce unique compliance burden on telehealth services.

Contact [Stanford](#) or WHA Vice President of Federal and State Relations [Jon Hoelter](#) with questions.

Wisconsin Hospital Leaders Share Strategies to Maximize Vaccinations

More than 120 hospital members registered to participate in a May 26 Wisconsin Hospital Association (WHA) webinar designed to share experiences and best practices related to vaccine encouragement.

As Wisconsin is now experiencing more vaccine supply than demand, the webinar, *Strategies to Move the Vaccine Acceptance Needle*, focused on successful initiatives implemented by health care leaders in different markets to promote acceptance of the COVID-19 vaccine for their staff and communities.

WHA Senior Vice President of Workforce and Clinical Practice Ann Zenk noted in her welcome remarks, “Just like everything else COVID, vaccination has been a roller coaster ride, with demand far outweighing supply in the initial months and supply beginning to outweigh demand in April.” Zenk continued, “We virtually skipped that hoped-for phase of supply and demand equilibrium.”

The slide, titled "Our vaccine journey", features a purple line graph with six points representing key milestones in the vaccination process. The milestones are as follows:

- November 2020:** Pre Planning & DHS registrations
- December 2020:** Rapid ramp up, inventory management, site expansion; Focus on employed & affiliated phase 1a eligible groups
- Jan -Feb 2021:** Additional vaccine access, site expansion, phase expansion per DHS; Open to community that meet eligibility
- March 2021:** Begin community outreach for eligible populations
- April-May 2021:** Begin 12-week de-escalation planning for mass vax clinics with concurrent ramp up of primary care and retail sites
- June + 2021:** Wrap up and Sustain. Evolve model to fit with long-term clinical operations

The slide also includes the Ascension logo and the name Vanessa Freitag (Guest) in the bottom left corner. The Zoom interface at the bottom shows a grid of participants, including Vanessa Freitag, Vincent Lyles, Cindy Rouser, Samantha LaMuro, Leigh Ann Larson, Nadine Allen, Christa A. Krause, and Ann Zenk. A caption below the grid reads: "Ascension Wisconsin Vice President of Pharmacy and Lab Vanessa Freitag shares details of and lessons from her health system's vaccination journey."

Ascension Wisconsin Vice President of Pharmacy and Lab Vanessa Freitag described how the Ascension vaccine planning team’s “Now and Next” philosophy has helped this state-spanning health system keep a step ahead in the evolving vaccination picture. Prairie Ridge Health Vice President of Employee and Support Services Ann Roundy shared how making vaccine readily available within their Columbus hospital and rural clinic resulted in steadily rising vaccination rates. Door County Medical Center (DCMC) Chief Nursing Officer Christa Kraus and Medical Center Outpatient Services Coordinator Michelle Johnson presented the strategies DCMC and its community partners employed to achieve the second-highest county vaccination rate in the state.

Participants and presenters all agreed that as the vaccine supply and demand equation changes, Wisconsin hospitals and health systems must continue to shift their strategies to ensure that vaccine can reach willing arms within their workforces and the communities they serve.

WHA Workforce Council Tackles Workplace Violence Prevention

The Wisconsin Hospital Association's (WHA's) Council on Workforce Development met May 21 and picked up work the group had started before COVID, including workplace violence prevention strategies.

In November 2019, the council completed an assessment of workplace violence in member settings and the strategies and resources Wisconsin hospitals and health systems are devoting to violence response and prevention. The group welcomed back Mike Cummings, a health care security consultant, to its May 2021 meeting.

Cummings led the group in a review of its assessment findings. The participants validated their findings and formulated implementation plans for the top recommendations from the November 2019 assessment.

Over the next few months, WHA will complete these implementation plans by creating options to share workplace violence reduction policies, procedures, templates and resources, perhaps via the WHA member portal. WHA and the Council on Workforce Development will also provide opportunities for hospitals and health systems to share solutions they've implemented to reduce and prevent violence in their settings.

As part of its review, the council had an opportunity to utilize a COVID-19 lesson learned—a customizable security training program used by the Hospital Emergency Response Coalitions (HERCs) to rapidly provide guidance and skills to registration staff and screeners confronted by more aggressive behavior when asking visitors and patients to comply with COVID safety requirements. Council members agreed this type of education is an important component of safety training for hospitals big and small, rural and urban.

The council's May meeting also featured a presentation by Heroes for Healthcare Community Engagement Manager Joyce Mallory, who shared information about the organization's initiative to grow the health care workforce by facilitating military members' integration into the civilian workforce. More information about Heroes for Healthcare can be found [here](#).



The council also discussed the new permanent statutory change that enables health care professionals licensed in another state to immediately start practice in Wisconsin while their Wisconsin license application is being processed. WHA General Counsel Matthew Stanford noted the state is really leveraging the credentialing processes already in place at health care employers. A summary of this new Wisconsin law can be found in the legislative and regulatory summaries posted within the legal resources section of the [WHA member portal](#).

WHA Senior Vice President of Workforce and Clinical Practice [Ann Zenk](#) can be contacted for further information about the WHA Council on Workforce Development.

Merritt Hawkins Releases Results of Final-Year Medical Residents Survey

What type of setting would medical residents prefer in their first practice? How many recruiting offers do they receive, and what level of income do they expect to earn?

Merritt Hawkins, the nation's leading physician search firm and gold-level corporate member of the Wisconsin Hospital Association, provides answers to these and related questions in its survey of final-year medical residents. Conducted every other year, the survey offers insights into the practice plans and preferences of physicians completing their training.

Key findings of the survey as well as information on how to receive the full survey results are available [here](#).

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