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WHA Urges Congress to Get Provider Relief Funds to Hospitals

WHA is urging Wisconsin’s congressional delegation to support legislation that would ensure the rest of the Provider Relief Fund (PRF) dollars get to hospitals as soon as possible.

[H.R. 5963](#), the Provider Relief Improvement Act, was recently introduced in the U.S. House of Representatives by Reps. Abigail Spanberger (D-Va.), Cindy Axne (D-Iowa), Anthony Gonzalez (R-Ohio), Mariannette Miller-Meeke (R-Iowa), and Nancy Mace (R-N.C.). This legislation would improve the utility of the PRF by granting health care providers more flexibility to use PRF dollars through the remainder of the COVID-19 public health emergency. The legislation would also:

- Require HHS to distribute all remaining PRF funds no later than March 31, 2022;
- Extend the deadline for using PRF awards through the end of the COVID-19 Public Health Emergency;
- Require HHS to return funds it recouped from providers at the first June 30, 2021, reporting deadline; and
- Permit funds to be used for additional COVID related expenses, such as workplace security and safety measures.

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MEB Rule as Drafted Would Cost Millions and Exacerbate Workforce Challenges

WHA submitted comments to the Medical Examining Board raising concerns about a proposed rule creating new chaperone duties for physical examinations by physicians.

“WHA has received concerns that as currently drafted, the proposed rule would significantly exacerbate current critical health care workforce shortage challenges, and substantially increase health care staffing costs assuming necessary staff could even be hired to fill the new staffing positions contemplated by the rule,” wrote WHA Senior Vice President of Workforce and Clinical Practice Ann Zenk.

“Based on information received from our members, the proposed rule as drafted would likely result in the need for several hundred new staff statewide with new statewide annual staffing costs of several million dollars,” said Zenk in the comment letter.

“It is important to note that Wisconsin and the United States are currently experiencing severe health care workforce challenges,” wrote Zenk. “Creating an additional widespread need for ancillary health care staff to provide the contemplated chaperone services will further exacerbate health care workforce shortages.”

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WHA's comment letter was submitted as part of the economic impact analysis stage of rulemaking. Under Wisconsin statute, agencies are required to conduct an economic impact analysis, including gathering comments from the private sector, on their proposed rules. Following completion of an economic impact analysis, the Medical Examining Board must have an additional public hearing and public comment period on the whole of the rule.

Working with WHA, a group of WHA members also submitted their own comments as part of the Medical Examining Board's 14-day economic impact comment period. Altogether, that sample size alone indicated annual costs in the tens of millions of dollars and hundreds of new employees to implement the proposed rule.

WHA also noted in its comment letter that the rule could be revised to drastically reduce its staffing and cost impact and welcomed working with the board to discuss potential modifications.

"We believe that the draft proposed rule could be revised to address the board's goals and intents more precisely, and address much of the staffing and cost concerns," wrote Zenk. "As the board develops its economic impact analysis and moves into the next steps in the rulemaking process, WHA welcomes further discussion with the board, including potential modifications of the proposed rule."

At its November meeting, the Medical Examining Board noted that they had received several comment letters on the economic impact analysis, and the board took action to extend the original 14-day economic impact comment period to Jan. 3, 2022.

Contact either WHA Senior Vice President of Workforce and Clinical Practice [Ann Zenk](#) or WHA General Counsel [Matthew Stanford](#) with questions.

Agency/Traveler Staff Utilization and Expense Continue Sharp Rise

Federal policymakers urge White House to take action as Wis. COVID hospitalizations jump 41% in November

With COVID hospitalizations jumping 41% in just November and adding to already-high inpatient censuses, many are finding it necessary to fill workforce gaps by working with staffing agencies. Rising utilization of agency staffing is not only contributing to rapid wage inflation but is also exacerbating workforce shortages as employees leave hospitals and health systems to make more money at temporary staffing agencies.

WHA has been working on multiple strategies at a state level to provide needed workforce relief to Wisconsin health care facilities, including urging the Wisconsin Department of Health Services (DHS) to renew a cost-sharing program when [agency staffing](#) must be utilized and working with the Wisconsin Department of Safety Professional Services (DSPS) to [expedite health care licensure](#). WHA has also helped elevate its members' concerns about post-acute care bottlenecks and has worked with members to ensure effective communication and problem-solving to provide health care to 13,000 guests at Fort McCoy and minimize reliance and stress on hospitals in that area.

WHA has also been in regular contact with Wisconsin's federal delegation, urging members to support hospitals and health systems given the growing workforce challenges and making them aware of the strain the temporary nurse staffing agencies are putting on staffing costs and morale. This week, a bi-partisan group of four members of Congress authored a [letter](#) sent to the White House urging action to address a situation that is unsustainable. The letter asks the Biden administration to review the activities and structure of these staffing agencies for potential anticompetitive behavior, such as price collusion, and to see if they violate relevant consumer protection laws. The letter also requests information on how much of the COVID-19 relief funds and Federal Emergency Management Association (FEMA) reimbursement may be directly or indirectly going to pay the higher wages associated with these traveling staffing agencies.

WHA continues to work with its members and state and federal partners to search for and implement strategies to address new and urgent workforce shortages. Contact WHA Senior Vice President of Workforce and Clinical Practice [Ann Zenk](#) or Vice President of Federal and State Relations [Jon Hoelter](#) to discuss workforce issues or to share topics to address.

Bill Would Create Loan Repayment Program for Preparedness Workforce

On Nov. 18, Sens. Tammy Baldwin (D-Wis.), Susan Collins (R-Maine), Jacky Rosen (D-Nev.) and Lisa Murkowski (R-Ala.) introduced the [Bolstering Infectious Outbreak Preparedness Workforce Act](#), legislation that would authorize \$50 million for a new student loan repayment program for infectious disease clinicians and bio-preparedness health care professionals. Under the legislation, physicians, clinical pharmacists, physician assistants, advanced practice registered nurses and other qualified individuals may receive up to \$50,000 in loan repayment for each year of service, up to a total of \$150,000.

“The American Hospital Association thanks Sens. Baldwin, Collins, Rosen and Murkowski for leading this important bipartisan effort to support the infectious disease and outbreak preparedness workforce, including those in America’s hospitals and health systems,” [said](#) AHA Executive Vice President Stacey Hughes. “This legislation will also help attract new workers to these critical professions, including by incentivizing them to practice in areas with workforce shortages and in communities dealing with sustained hardship. We look forward to working with the sponsors to move this bill forward.”

Gundersen Moundview Team Honored for Care of State Representative

Wisconsin State Assembly Rep. Scott Krug (R-Rome), who experienced a medical emergency in January 2021, recently honored the Gundersen Moundview Hospital and Clinics staff who cared for him in the emergency room with a First Responder of the Year Award.

“On January 4, 2021, I was scheduled to be sworn in for a sixth term in the Wisconsin State Assembly,” shared Rep. Krug. “Instead, I ended up in Gundersen Moundview’s emergency room due to an allergic reaction I had while at home. I had hives, was itchy and had taken Benadryl for this, but it wasn’t helping. I started to feel short of breath, so my wife drove me to the ER.”

“He was in anaphylactic shock when he arrived,” said Bobbi Meyer, RN, of Gundersen Moundview. “His breathing was labored, he had hives all over his body and his blood pressure had dropped to a life-threatening level because his body was fighting to keep him alive. It took two doses of epi and multiple bags of IV fluids before he was stabilized.”

“In my career, this is the worst anaphylactic reaction I have ever encountered,” said Christy Short, DO. “Rep. Krug’s anaphylactic reaction had also caused a metabolic imbalance that required several medications to further correct electrolyte abnormalities. Given the critical nature of his illness, we felt he needed a higher level of care to continue to correct and monitor his condition. We arranged for him to be transported to Gundersen in La Crosse.”

“Later that day, I was sworn in for my new term in office while I was in a hospital bed at La Crosse,” Rep. Krug reflected. “Thanks to Dr. Short, Bobbi and the team at Gundersen Moundview who saved my life, I am still here today and able to serve those who elected me to office.”

The First Responder of the Year Award was created to highlight the work of emergency services staff in local communities. Wisconsin state representatives select individuals from each district who were nominated for the award.

Congratulations, Bobbi and Dr. Short, and thank you for providing great care.



Pictured, L to R: Bobbi Meyer, RN; Rep. Scott Krug; Christy Short, DO

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WHA sent out an Action Alert to the WHA Hospitals Advocacy & Education Team (HEAT) grassroots network on Nov. 18, who responded with nearly 300 messages so far to Wisconsin federal representatives requesting they cosponsor this legislation.

An October 2021 study by the Urban Institute and Robert Wood Johnson Foundation estimated that nearly \$27 billion in additional funds remain unspent from the PRF. Given the added pressures hospitals are facing with another surge in COVID cases from the delta variant, this legislation would provide much needed relief.

On Nov. 23, the Department of Health and Human Services (HHS) [announced](#) they had begun distributing \$7.5 billion in rural payments to health care providers authorized in the [American Rescue Plan Act](#) that passed in March of 2021. The agency also announced the Phase 4 PRF payments would soon be going out to health care providers. This is welcome news as hospitals deal with an unprecedented health care workforce shortage that has dramatically increased staffing costs, particularly as more hospitals must fill positions with traveling nurses.

WHA is continuing to advocate for additional assistance at the federal level. Contact WHA Vice President of Federal and State Relations [Jon Hoelter](#) with questions.

To learn more about WHA's Hospitals Education & Advocacy Team (HEAT) and to receive future Action Alerts, sign up [here](#) or contact WHA Vice President of Advocacy [Kari Hofer](#).