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## EDUCATIONAL EVENTS

### March 29

*Wisconsin Hospital Association Health Care Workforce Virtual Forum*

### March 31

*Leading the Conversation: DEI in Healthcare Conference Webinar*

### March 31

*Review of Act 209 – New Felony Penalties for Violence and Threats Against Health Care Workers Webinar*

*Watch for full coverage of WHA’s 2022 Advocacy Day in next week’s edition.*

## WHA Applauds Speaker Vos, Majority Leader LeMahieu and Gov. Evers for Passing and Enacting AB 960 into Law

Gov. Tony Evers on March 23 signed into law Assembly Bill 960, which was led by Speaker Robin Vos (R-Rochester), Senate Majority Leader Devin LeMahieu (R-Oostburg), Rep. Gae Magnafici (R-Dresser) and Sen. Van Wanggaard (R-Racine), making threats of violence towards a health care worker a Class H felony. The effective date of the new law, [2021 Act 209](#), is March 25, 2022.

“Health care workers are better protected under this new law,” said WHA President and CEO Eric Borgerding. “WHA’s members across the state express appreciation to Speaker Vos and Senate Majority Leader LeMahieu for authoring this important law and making passage of Assembly Bill 960 a priority at the end of session.”

“WHA is also grateful to Gov. Evers for signing Assembly Bill 960 into law, showing health care workers that they are vital to our state and important to protect,” continued Borgerding.

WHA recently published the [2022 edition of its annual workforce report](#), which reveals that 13 out of the 17 positions surveyed had higher hospital vacancy rates in 2021 than in 2020. WHA’s report noted that seven of these positions had vacancy rates exceeding 10%.

“Threats against health care workers cause hospital staff to choose between caring for patients in the hospital or leaving the hospital altogether,” said Borgerding. “With significant workforce challenges in Wisconsin hospitals, we cannot afford to lose providers because they fear threats in the workplace. This new law will send a strong message to the public that threats against health care workers are taken seriously and not tolerated in Wisconsin.”

## DHS to Study Wisconsin’s Long-Term Care System

The Wisconsin Department of Health Services (DHS) is planning to engage an independent organization to study Wisconsin’s long-term care. DHS recently briefed WHA on the study.

WHA expects a key issue in the study to be the current system’s inability to place a substantial number of patients who are ready to be discharged from hospitals but need post-acute care services. WHA will be providing input.

Policymakers must consider how DHS can better target the substantial reimbursement and funding increases nursing homes have received and may receive in the future, which, despite being substantial, did not help to avoid a backlog of hospital patients waiting for a post-acute care placement under current reimbursement methodology.

*(continued on page 2)*

## ***(DHS to Study Wisconsin's Long-Term Care System . . . continued from page 1)***

During the height of the surge, more than 600 patients each day remained in hospitals waiting for a nursing home bed, which was more than one out of every 10 hospital beds occupied by someone who did not need to be in the hospital.

WHA anticipates the study will look beyond and in addition to funding to consider long overdue structural and regulatory reforms that would support improved access to post-acute care for patients and preserve hospital capacity for patients needing hospital care.

WHA President and CEO Eric Borgerding observed that weaknesses in the long-term care system existed prior to the pandemic and continue, affecting access to all levels of care. "We look forward to working with DHS on this crucial examination of the issues," he said.

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## **OCI Takes Action Against Unlicensed Business Selling Limited Term Health Plans**

On March 22, the Wisconsin Office of the Commissioner of Insurance (OCI) announced that Salvasen Health, LLC, would no longer be permitted to issue new policies or renew existing policies in Wisconsin. The action was effective on Jan. 31, 2022.

According to the announcement, Salvasen was not licensed to conduct insurance business in Wisconsin and had been issuing limited benefit health plans which did not meet the coverage requirements of the Affordable Care Act (called "minimum essential coverage") that have been in effect for the past eight years.

The company, based in Houston, Texas, agreed to pay a financial penalty of \$14,000 and agreed to cease writing and renewing insurance policies in Wisconsin. Other states such as Minnesota, Massachusetts, Colorado and Nevada have taken similar steps to protect consumers.

About 900 people in Wisconsin had a Salvasen product at some point, with just over 200 active policyholders at the time the product was terminated. Consumers who have lost coverage as a result will become eligible to enroll in a health plan through the federal exchange marketplace during a special enrollment period. Additional information is expected from the federal government regarding the dates for that special enrollment period.

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## **WHA Health Care Workforce Forum to Seek Collaborative Solutions to Worker Shortage**

WHA will host a complimentary webinar to explore challenges and opportunities to sustain and strengthen Wisconsin's health care workforce.

[Wisconsin Hospital Association Health Care Workforce Forum](#)

March 29 | 9:00 a.m. – 10:00 a.m.

Addressing the health care workforce shortage that has been building in Wisconsin and has been exacerbated by COVID-19 will require a concerted and sustained strategy involving health care organizations, educators and policymakers. This strategy must encourage, support and advance health care workers in their pursuit of fulfilling and meaningful careers.

WHA Senior Vice President of Workforce and Clinical Practice Ann Zenk will discuss the impact the Silver Tsunami, the Great Resignation and a persistent pandemic that pushed hospital occupancy to its limit has had on Wisconsin's health care workforce.

This WHA member-only virtual event will lay the foundation for a day-long forum being planned for September 2022 for WHA members and other key stakeholders to discuss the workforce challenges confronting hospitals and health systems and to learn about innovative strategies to address these challenges from expert speakers and from each other.

More information and online registration are available [here](#). Contact WHA Vice President of Education and Marketing [Leigh Ann Larson](#) with questions.

# Acts of Violence Against Health Care Workers is Now a Felony in Wisconsin

## *Understanding and communicating Act 209 provisions*

WHA has created resources and learning opportunities to help members interpret and promulgate the stipulations of Act 209, recently signed into law, which makes threats and acts of violence against health care workers a Class H felony.

WHA's legislative act summary of new [Act 209](#) can be accessed by WHA members through the [Legal Resources](#) section of the [WHA Member Portal](#), or directly by clicking [here](#). The written summary available to WHA members details key elements of the new law and highlights other potentially applicable criminal laws that could be applied in special cases of battery, harassment or intimidation against health care workers.

WHA will also hold a webinar for WHA members on Thursday, March 31 from 12:00 – 12:45 p.m. to review details of the new law, including WHA's efforts to promote the law to deter violence and threats against health care workers. The webinar will also outline who is protected, what actions are prohibited, how the new law compares with current law and how it can be applied by law enforcement. Entitled *Review of Act 209—New Felony Penalties for Violence and Threats Against Health Care Workers*, the webinar is offered to WHA members at no cost, but pre-registration is required. More information on the webinar, including registration, is available [here](#).

In addition, as specified by Act 209, the Wisconsin Department of Justice has posted [model language](#) that health care facilities may post at its entrances alerting persons to the penalties under this section.

Questions about the new law can be directed to WHA General Counsel [Matthew Stanford](#).

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## WHA Member Health Systems Urge Congress to Make Hospital at Home Program Permanent

WHA and its members are urging Congress to make the federal Acute Hospital Care at Home waiver program permanent. In a [March 21 letter](#) to leaders of the U.S. Senate Committee on Finance and U.S. House Ways & Means Committee, WHA and its members wrote in support of the Hospital Inpatient Services Modernization Act ([H.R. 7053/S. 3792](#)), bipartisan legislation introduced by Sens. Tom Carper (D-Del.) and Tim Scott (R-S.C.) and Reps. Earl Blumenauer (D-Ore.) and Brad Wenstrup (R-Ohio).

The Acute Hospital Care at Home (AHCAH) program was rolled out by the federal Centers for Medicare & Medicaid Services (CMS) in November 2020 and has since grown to include [more than 90 health systems and over 200 hospitals](#) in 34 states, including Wisconsin. It allows hospitals to provide a hospital level of care in the comfort of a patient's home for certain acute-level conditions that have been approved by CMS and were developed in consultation with academic and provider industry leaders. Currently, hospitals that are part of four different health systems in Wisconsin have been approved for waivers under the program, and more are expected to join pending the future status of the program.

While Congress recently approved legislation that would extend Medicare's telehealth coverage flexibilities for 151 days after the federal public health emergency (PHE) expires, it did not address other programs relying on the PHE waivers, such as the AHCAH program. The legislation would extend the AHCAH program for two years after the PHE expires with the hope that a permanent program could be developed by the end of that period and in coordination with CMS. Without passage of this legislation, hospitals and patients alike would lose the ability to participate in the program once the PHE expires.

WHA was joined by 10 health systems with a Wisconsin presence, all of which are either currently utilizing the AHCAH in Wisconsin or other states or are taking a serious look at beginning the program. The letter urges the committees to work quickly to advance this legislation and also to contact U.S. House and Senate leadership to ensure it is addressed before the PHE expires. WHA also contacted Wisconsin's full congressional Delegation with a copy of the letter of support and a request for them to cosponsor this legislation.

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

## President Signs FY 2022 Spending Bill Including Temporary Telehealth Extensions and 340B Flexibilities



On March 15, President Joe Biden signed into law an omnibus FY 2022 spending bill to keep the federal government funded through Sept. 30, following a deal reached in Congress on March 8.

As a temporary measure to continue Medicare telehealth flexibilities, the funding bill included an extension of the key Medicare telehealth flexibilities for 151 days following the yet-to-be-determined end of the federal public health emergency.

The latest 90-day extension of the federal public health emergency ends on April 16; however, the Department of Health and Human Services has informed states it would give them at least 60 days' notice before ending it. Thus, many expect the public health emergency will be extended by the administration at least through July.

Under the bill signed into law, key telehealth flexibilities that would continue for 151 days following the end of the public health emergency include:

- Continuation of the waiver of Medicare originating site and geographic restrictions;
- Continuation of the Medicare waivers that expanded the types of practitioners eligible to provide telehealth services (occupational therapists, physical therapists, speech language pathologists and audiologists); and
- Continuation of Medicare waivers allowing for audio-only telehealth services.

The omnibus bill also includes funding for several telehealth studies that some have identified as a means to help support more reasonable Congressional Budget Office cost estimates for making these changes permanent. There are multiple bipartisan bills that would make Medicare telehealth reforms permanent, but the Congressional Budget Office cost process continues to slow advancement of the bills.

“As has occurred before in the context of other bills impacting Medicare reimbursement, there may be one or more temporary ‘extensions’ before a permanent fix is passed,” said WHA Vice President of Federal and State Relations Jon Hoelter. “Agreement on a temporary extension of telehealth flexibilities following the eventual end of the public health emergency is welcome news and does not indicate that permanent changes are off the table in Congress. WHA continues to advocate to the Wisconsin Congressional delegation for making these telehealth flexibilities permanent,” Hoelter added.

The omnibus spending legislation also included flexibilities for 340B hospitals that rely on their disproportionate share hospital mix for entry into the 340B discount drug program. Specifically, it included legislation authored by Wisconsin U.S. Sen. Tammy Baldwin that would allow such hospitals to not lose access to 340B discounts as a result of changes in patient mixes due to the COVID-19 pandemic. While it is unclear how many hospitals in Wisconsin were at risk of losing their 340B status, [WHA supported](#) this legislation to provide more certainty to hospitals during the unprecedented and often unforeseen challenges that came about during the pandemic.

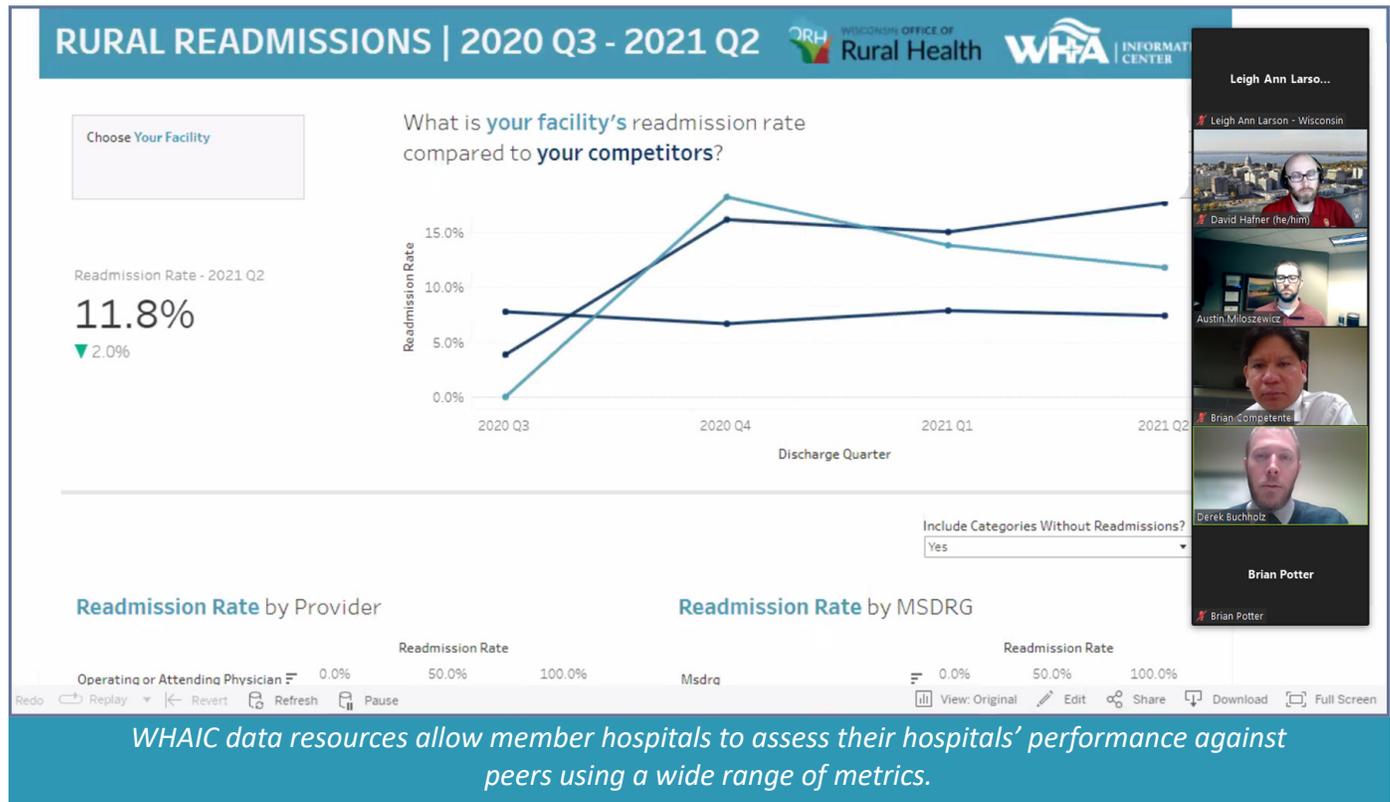


Questions about the telehealth extensions, can be directed to either WHA General Counsel [Matthew Stanford](#) or WHA Vice President of Federal and State Relations [Jon Hoelter](#).

# WHA Health Care Leadership Academy Attendees Learn Value of WHAIC Data Tools to Decision Making

In a March 22 virtual session entitled *Data Tools for Everyday Use*, WHA Health Care Leadership Academy participants received an overview of the data resources available to help them in their leadership roles through the Wisconsin Hospital Association Information Center (WHAIC).

WHAIC Vice President Jennifer Mueller, Director of Operations Brian Competente and Data Visualization Analyst Derek Buchholz discussed WHAIC's many different data tools, demonstrated their functionality, and talked about how health care leaders can use these tools to better support their respective hospitals. Participants particularly enjoyed the hands-on portion of the session where they were able apply different scenarios to the tools to see them in action.



If you are interested in learning more about the WHA Health Care Leadership Academy, including the 2023 program, contact WHA Vice President of Education and Marketing [Leigh Ann Larson](#).

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