

State Budget Committee Member Rep. Tony Kurtz Speaks to WHA Public Policy Council

Nearly 50 council members meet to discuss transparency, post-acute care

Wisconsin State Representative Tony Kurtz (R-Wonewoc), a member of the powerful budget-writing Joint Finance Committee, was a guest speaker at WHA's Public Policy Council meeting held Nov. 29, 2023. Kurtz was joined by nearly 50 Council members, half appearing in-person and another half appearing virtually.

Kurtz, the 2021 recipient of WHA's Advocate of the Year Award and a 20-year veteran of the United States Army, understands the importance of health care to local communities.

"I can't stress what your organizations mean to our small communities," said Kurtz. He went on to recognize the efforts hospitals are undertaking to address community needs, specifically calling out a recent investment by Reedsburg Area Medical Center to improve access to mental health care.



Rep. Tony Kurtz was the guest speaker at WHA's Nov. 29 Public Policy Council meeting.

Kurtz also went on to explain how hospitals always seem to be the face of health care costs, yet there are many other players that are in-between the patient and their providers who can impact the costs that businesses and patients pay for their care. "A business's insurance premium may be going up by 12%, but you are only realizing a 2% to 3% increase in your rates if you're lucky," said Kurtz.

Derek Daly, chief executive officer of Tomah Health and newly appointed member of the WHA Public Policy Council, commended Rep. Tony Kurtz's commitment to rural health care and said that Kurtz's comments about increase in premiums were consistent with his experience; the increases in revenues hospitals realize from payers doesn't match the increases that businesses are experiencing when paying for coverage.

Kurtz also recognized the unique circumstances that hospitals operate in, which includes caring for patients on Medicare and Medicaid that do not cover the cost of care. "If a business is losing money from one of their customers, they can stop doing

business with them," said Kurtz. "You can't."

Steve Massey, newly appointed chair of the Public Policy Council and president/CEO of Westfields Hospital & Clinic in New Richmond, discussed how graduate medical education programs are a critical tool to recruit and retain physicians into rural communities. Massey stated that Health Partners in northwestern Wisconsin would like to expand their existing family medicine residency program but is unable to secure state funding due to limitations established by the current state-administered graduate medical education program.

Massey asked Kurtz to support Assembly Bill 618, which would remove some of these restrictions.

President and CEO of Black River Memorial Hospital Carl Selvick talked about the cost and regulatory burden associated with creating state-level regulations when federal regulations already exist. Selvick asked Kurtz to oppose legislation that has been introduced to create new state-level standards for price transparency reporting.

"Years ago, WHA worked with us to oppose a new regulation that would have added unnecessary regulatory burden and cost when federal regulations already existed," said Selvick in reference to compound-pharmacy regulations being pursued by the state's Pharmacy Examining Board as a parallel to the concerns causing WHA's opposition to state-level price transparency regulations. "We are already heavily regulated by CMS. They are doing a great job enforcing these regulations. We don't need any additional legislation."

Post-Acute Care Issues Remain Chief Policy Priority for WHA

WHA's Policy Counsel Laura Leitch and Vice President of Federal and State Relations Jon Hoelter discussed current advocacy initiatives that would help address barriers to hospitals timely discharging patients to appropriate post-acute care settings.

Hoelter discussed ongoing conversations with lawmakers about a "next-of-kin" statutory proposal that would allow an incapacitated patient's loved ones to consent to the patient's admission to a nursing home for needed post-acute care instead of having to rely on an arduous legal process to access that care.

Hoelter said the current median case age upon disposition for a guardian case, according to the Wisconsin Court System's dashboard, is 43 days. Assuming an average length of stay of five days for hospital inpatients, that is the equivalent of about nine patients with acute-care needs who could have been admitted by the hospital for care. Delays in discharging patients from hospitals not only impact those patients and their families but also reduce access for patients who need a higher level of care.

"We also need to talk about how this policy impacts the number of patients sitting in our rural emergency departments who need care in other facilities," said Kyle Nondorf, SSM Health regional vice president for acute care operations, northern markets and a new member of the Public Policy Council.

Rural hospitals sometimes need to transfer patients in need of higher levels of care to larger, urban hospitals. When the larger, urban hospitals are at capacity because patients cannot be discharged, care for other patients can be delayed.

Leitch walked through the recently released Wisconsin Department of Health Services Long-Term Care Market Study 2023, which was prepared by the consulting firm Baker Tilly. The study includes several recommendations to improve Wisconsin's long-term care system, including reforming the Medicaid application process, revising the guardianship process, better planning for complex care populations, and addressing managed care organization discharge authorization processes.

Leitch said the Baker Tilly report quantified the number of "excess days" hospitals experienced due to patients waiting for a long-term care placement at 177,390 days, which they estimated cost hospitals \$484.7 million in 2022 alone.

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