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**Registration Coming Soon: WHA’s Advocacy Day - March 23, 2022**

*Sponsorship opportunities available*



Mark your calendar now for WHA’s Advocacy Day 2022, scheduled for Wednesday, March 23, 2022. WHA will again deliver this event to advocates across the state virtually. Registration is coming soon. Stay tuned for more updates on the [WHA website](#).

WHA encourages and invites hospital CEOs, CFOs, managers, nurse executives, quality managers, hospital volunteers, hospital trustees, WHA Hospitals Education & Advocacy Team (HEAT) grassroots members, Partners of WHA members, WHA corporate members and any other hospital staff interested in helping to shape the future of health care in Wisconsin communities to attend. Last year’s virtual Advocacy Day hosted 990 participants, and this year’s event will surely, again, be one not to miss.

*(continued on page 4)*

**EDUCATIONAL EVENTS**

**Open Until January 28**  
*Chargemaster Coding Updates and Implementation for 2022*  
Self-study module series

**January 26**  
*Mega Healthcare Conference*  
Kalahari Resort, Wisconsin Dells

**January 26**  
*Governance Megatrends: What is the Impact on Your Board?*  
Webinar

**Wisconsin Hospitals PAC & Conduit Sets New Fundraising Record in 2021**

*Total contributors tops 300*

The Wisconsin Hospitals State PAC & Conduit closed out its 2021 fundraising campaign at 105% of its \$325,000 goal, raising \$339,930 and setting a new record for annual fundraising. The campaign also reached its aggressive, new goal in 2021 of engaging 300 individual contributors, a 20% increase in participation over 2020. The overall average individual contribution in 2021 was \$1,133. Of the 300 contributors, 91 were first-time contributors with an average contribution of \$317.



“Thanks to the strong dedication and commitment of our state’s health care leaders, the Wisconsin Hospitals State PAC & Conduit was not only able to exceed its fundraising goal, but also dramatically increase individual participation in 2021,” said Mike Wallace, 2021 chair of the WHA Advocacy Committee. “Engaging more individuals in political advocacy is crucial for sustaining and growing this important program, and the growth in 2021 is extremely encouraging,” Wallace added.

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*(Wisconsin Hospitals State PAC & Conduit Sets New Fundraising Record in 2021 . . . from page 1)*

Fundraising efforts for 2022 will officially kick off just prior to WHA's Virtual [Advocacy Day](#) on March 23. Individuals can submit contributions before March 23 online at [www.whconduit.com](http://www.whconduit.com).

All contributors to the Wisconsin Hospitals State PAC & Conduit 2021 campaign can be found on pages 6-8. For more information and to get involved, contact WHA Vice President of Advocacy [Kari Hofer](#).



## **I'm a hospice physician in Wisconsin. I'm still watching people die from COVID. Please get the facts and get vaccinated.**

*By: Nick Turkal, MD*



None of us expected the pandemic to last this long. We are all tired of masks, sick of restrictions, and of hearing the horror stories of people dying of a virus unnecessarily.

I am a hospice physician, and sadly, I am seeing COVID patients dying of lung failure, kidney failure and a variety of other problems. The most frequent cases are patients who cannot clear their COVID pneumonia and die from hunger for air. Suffocating is a terrible way to die. There is nothing much worse than not being able to breathe. We can ease patients' pain, but we cannot change the outcome.

This is an article about the facts of the pandemic—and it is an urgent request for action by all readers.

**Fact:** The past two years have been difficult for most all of us. More than 800,000 Americans have died from COVID-related illness (the true number is likely much higher). In Wisconsin, we have lost more than 10,000 family and friends to COVID. That number grows each day.

**Fact:** There are about 2,100 Wisconsinites in the hospital with COVID [as of Jan. 6, 2022]. In July of 2021, that number was about 100. There are about 475 Wisconsinites in ICU beds [as of Jan. 6, 2022]. In July, there were 20.

**Fact:** The vast majority of severely ill patients with COVID are unvaccinated.

**Fact:** Hospitals and health systems in Wisconsin are now in a crisis. The crisis is twofold: a lack of ICU beds for COVID and non-COVID patients, and a critical shortage of workers to care for patients. The rate of employees leaving health care in Wisconsin has risen 30%. The rate of burnout in nurses, physicians and other professionals has been well documented.

**Fact:** People are not getting all of the health care services they need, because health care systems are overwhelmed with COVID patients. This means delays in surgical cases for cancer and heart patients. As of last summer, the CDC estimates that 41% of U.S. adults had delayed health care services because of the pandemic. While mainly an annoyance until now, it will soon reach a crisis.

**Fact:** The COVID virus has been more difficult to control than expected. The omicron variant is much more contagious than delta. It is likely that there will be more variants that continue to keep this virus in our community. This is what viruses do — they mutate to “outsmart” us.

**Commentary:** My colleagues locally and nationally are simply running out of steam. They are working long hours and feel a sense of failure because they are telling patients and families that they cannot solve the problems of COVID. The virus overwhelms the body, and people die. Part of the frustration for health care workers is that the very sick and dying are almost all unvaccinated. We have all seen the deathbed pleas from COVID patients, wishing they had been vaccinated. However, in this highly politicized world, even those pleas don't seem to sink in with people who aren't vaccinated. Next time you see a health care worker, please thank them for all that they do each day. Ask them not to give up on their profession.

*(continued on page 3)*

*(I'm a hospice physician in Wisconsin. I'm still watching people die from COVID. Please get the facts and get vaccinated. . . . from page 2)*

Commentary: I choose to wear a mask and be vaccinated for the safety of others, as well as myself. Even though I am vaccinated and have received a booster shot, I know that I could become infected with COVID and pass it along to someone else. I couldn't sleep at night if I felt that my actions might have caused someone else's death. I take precautions for my granddaughters (one of whom is too young for vaccination), for my relatives, for my friends, for my neighbors, and for the strangers that I meet in the grocery store.

**What responsible Wisconsin citizens can do:**

Put the masks back on. When you are in indoor spaces, like grocery stores, you WILL be close to people with the virus. They can transmit the virus before they have symptoms. Masks remain a good way to protect others and yourself. I encourage employers to reinstitute masking policies for employees and guests. Simply put, this saves lives.

If you have been exposed or have symptoms, get tested. If you are positive, please isolate yourself according to CDC guidelines. This disease variant, omicron, spreads so easily. We all need to take extra steps to make certain we are not spreading the virus.

Please, please, please get vaccinated. Vaccines have helped us defeat smallpox, polio and other viral diseases. The solution to COVID is to get everyone vaccinated. More boosters may be necessary. If you won't do this for yourself, do it for your family.

Think about this: How many people have you heard of dying from the vaccine? Likely no one. Have you heard of someone dying of COVID? Likely you have.

Please do the right thing. We have safe and effective vaccines that can help prevent serious infection and death. Let's take advantage of that and end this pandemic.

*Dr. Nick Turkal is the former CEO of Aurora Health Care. He is a practicing hospice physician in Wisconsin, and a national health care consultant. Eric Borgerding, president and CEO of the Wisconsin Hospital Association, contributed to this piece.*

This column originally appeared in the [Milwaukee Journal Sentinel](#) on Jan. 5, 2022.

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## **After Hospitals Push Back, United Clarifies ED Policy**

### ***No immediate changes in coverage for emergency care***

After releasing a new policy bulletin in which UnitedHealthcare (UHC) provided vague criteria that would have allowed the company to deny coverage for care delivered in an emergency room, the insurer backtracked just before its scheduled implementation on Jan. 1. This followed several communications from the American Hospital Association urging UHC to reconsider.

As [previously reported](#), under the now rescinded policy, the insurance company would have taken into account the final diagnosis and "other pertinent information" in determining after the fact if a patient's decision to go to the emergency department really was an emergency. Providers were particularly concerned with the term "other pertinent information," which could have given the company significant latitude to deny coverage after the fact. This uncertainty would make patients reluctant to seek emergency care.

In its [response](#), UHC CEO Brian Thompson clearly stated, "there is no new policy regarding coverage criteria for emergency care being implemented on January 1, 2022." He also wrote that the company "has no intention of implementing any such policy for its fully insured business."

"We are pleased that UHC has issued a clarification on its policy. We hope that any future policy changes from the company are much more limited and take into account what is best for the patient, which is not to put up barriers for patients to seek and obtain the care they need," said WHA Senior Vice President of Public Policy Joanne Alig.

## WHA Introduces Social Determinants of Health Webinar Series

In collaboration with WHA Information Center (WHAIC), the WHA quality team is offering a four-part social determinants of health (SDOH) webinar series that will provide hospitals and health systems valuable information to help improve health outcomes in their communities.

### The Journey to a Healthier Wisconsin

Jan. 26  
12:00 p.m. – 12:50 p.m.

April 27  
12:00 p.m. – 12:50 p.m.

July 27  
12:00 p.m. – 12:50 p.m.

Oct. 26  
12:00 p.m. – 12:50 p.m.

SDOH can have a profound impact on health outcomes; and yet, developing and sustaining processes to build a culture of health remains a challenge. Currently, no standardized SDOH collection exists, resulting in incomplete data and gaps in important information, placing health care systems at a disadvantage when seeking to effectively identify, prioritize and intervene on SDOH.

This collaborative series will help hospitals and health systems build the case for capturing “Z codes” to track SDOH data. Z codes are a special group of codes provided for the reporting of factors influencing health status and contact with health services. The webinars will also feature tools to assist with using the data in a meaningful way and include perspectives from organizations around the state who have begun to successfully implement strategies that are driving improvement in health outcomes through identification of health disparities.

More details and registration information for this educational series will be available at [www.wha.org](http://www.wha.org) soon.

For questions, contact WHA Clinical Quality Improvement Director [Jill Lindwall](#) or WHAIC Vice President [Jennifer Mueller](#).

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*(Registration Coming Soon: WHA’s Advocacy Day - March 23, 2022 . . . from page 1)*

### Sponsorship opportunities available

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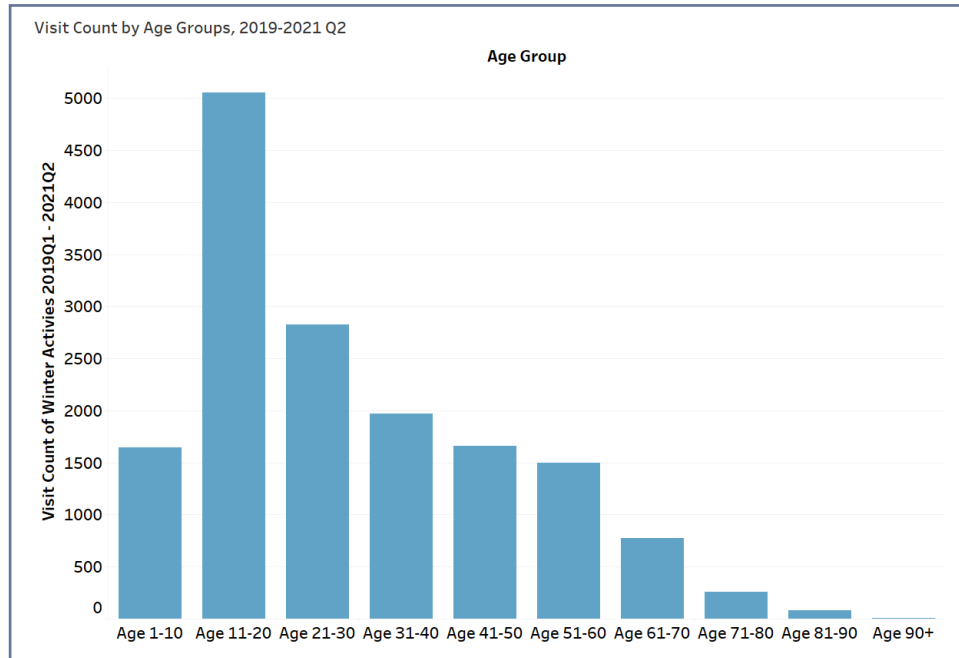
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# Fast Facts from the WHA Information Center: Winter Sports Injuries



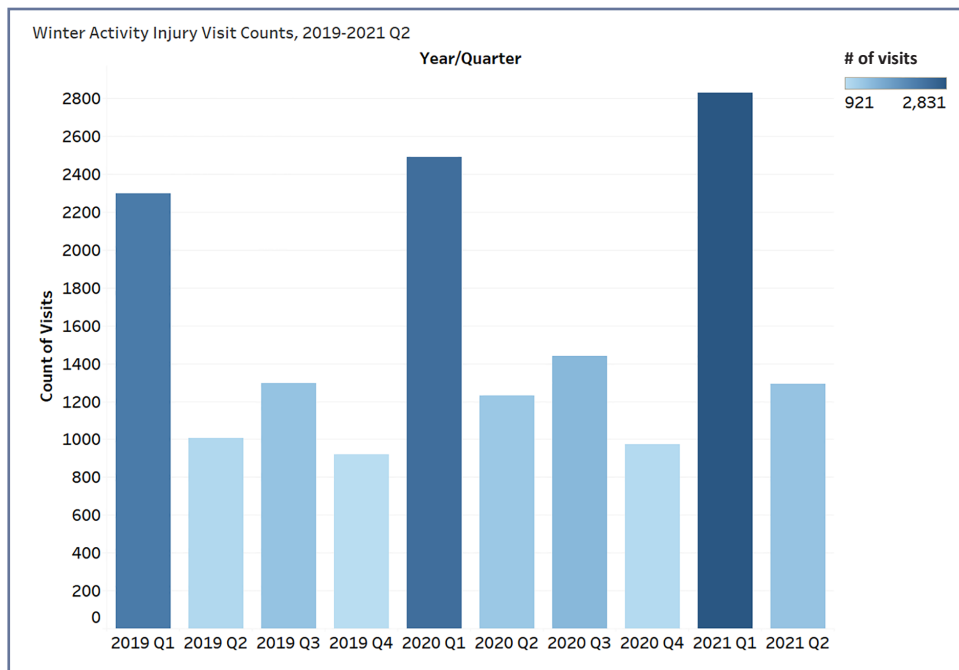
Winter in Wisconsin allows for many opportunities to get outdoors and enjoy the wonders that the snow and cold weather have to offer. Whether it is downhill skiing, sledding or any other activity, there are potential dangers that come with winter activities. In 2018, the U.S. Consumer Product Safety Commission reported roughly 200,000 people treated at hospitals for winter sports injuries nationally. The sport with the most injuries was downhill skiing, followed by snowboarding. Other common activities that have a high count of injuries are snowmobiling, sledding and ice skating.

The WHA Information Center analyzed Wisconsin data from January 2019 to September 2021 to determine how patients in Wisconsin are impacted by winter sport activity injuries. Snowmobiling accidents had the highest count of visits to hospitals during this time period. The activities with the second most visits during these years were downhill skiing and sledding. There is a definite trend of higher visit counts from January to March when analyzing quarterly data. The number of winter sport injury visits decrease dramatically after the main winter months. Males had more hospital visits for winter sports injuries than females—males account for almost 70% of all visits. The age group that had the highest count of visits was 11-to-20-year-olds.



Following are some tips from the Centers for Disease Control and Prevention to help avoid winter sport injuries:

- Wear appropriate protective gear, including goggles, helmets, gloves and padding.
- Check that equipment is working properly prior to use.
- Pay attention to warnings about upcoming storms and severe drops in temperature.
- Warm up thoroughly before playing or participating. Cold muscles, tendons and ligaments are vulnerable to injury.
- Never participate alone.



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