

IN THIS ISSUE

Dr. Scott Gottlieb to Keynote WHA's Advocacy Day 1

Coverage of COVID-19 Treatment Varies by Insurer 1

"What Cancer Patient Should Have to Go Through This?" 2

Bausch Joins WHA Quality Team 4

Insurance Commissioner Memo to Health Plans "Strongly Encourages" Telehealth Coverage Parity 4

WHA Post-Acute Care Workgroup Discusses Key Issues in First Meeting of 2022 5

Bipartisan Letter from Nearly 200 Members of Congress Asks Feds to Crack Down on Traveling Nurse Staffing Agencies 5

EDUCATIONAL EVENTS

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

March 23
WHA Advocacy Day 2022
Virtual

April 6
Patient Financial Engagement Solutions that Drive the Revenue Cycle
Webinar

Dr. Scott Gottlieb to Keynote WHA's Advocacy Day

Speaker sponsored by Quarles & Brady



Scott Gottlieb, MD

The opening keynote at WHA's annual Advocacy Day event will be delivered by Scott Gottlieb, MD. Quarles & Brady is sponsoring Dr. Gottlieb's appearance.



Gottlieb is a physician and former Commissioner of the U.S. Food and Drug Administration. His work focuses on advancing public health through developing and implementing innovative approaches to improving medical outcomes, reshaping health care delivery and expanding consumer choice and safety. Gottlieb serves on the boards of Pfizer Inc. and Illumina, Inc., is a resident fellow at the American Enterprise Institute and a partner at the venture capital firm New Enterprise Associates.

Gottlieb is widely published in leading medical journals and periodicals, including *The Wall Street Journal*, *The New York Times* and *The Washington Post*. He has held editorial positions on the *British Medical Journal* and the *Journal of the American Medical Association* and is a regular contributor to CNBC. *Fortune Magazine* recognized him as one of the "World's 50 Greatest Leaders" in 2018 and again in 2019. In 2018, 2019 and then again in 2020, *Modern Healthcare* named Dr. Gottlieb the "Most Influential Physician Executive and Leaders" in its annual survey of 50

(continued on page 6)

Coverage of COVID-19 Treatment Varies by Insurer

Patients encouraged to seek clarity from insurance companies on cost-sharing

As COVID-19 hospitalizations continue to stress Wisconsin's health care system, insurance coverage for COVID-19 testing and treatment varies depending on the type of care and where it is received. Whether for testing, vaccination or medical procedures, consumers should consult with their insurance companies to make sure they know what is covered and what services might have some sort of cost sharing.

As [recently reported](#) in *The Valued Voice*, the Biden administration is now requiring health insurers to cover or reimburse the cost of up to eight at-home testing kits per month for their enrollees. Medically necessary testing ordered by an in-network provider is also typically covered with no cost-sharing. Likewise, most individual and group insurance plans are required by the Centers for Medicare & Medicaid Services (CMS) to cover vaccine administration, whether from an in-network or out-of-network provider.

But when it comes to medical costs for treating someone who has COVID-19, insurer policies vary. Some health plans cover monoclonal antibody treatments with no out-of-pocket costs, while others charge cost-sharing fees. Further, in 2020, many insurers waived cost-sharing for medical services such as an inpatient hospital stay

(continued on page 2)

(Coverage of COVID-19 Treatment Varies by Insurer . . . continued from page 1)

for COVID-19, but most are now no longer waiving those cost-sharing requirements. An August 2021 [report](#) from Kaiser Family Foundation indicated that many insurers were phasing out such waivers. There have also been reports that starting Jan. 1, even more insurers are applying cost-sharing to these services.

As hospitals throughout the state continue to provide the highest quality patient care, it is important that consumers know what to expect in terms of their insurance coverage, and they can do that by visiting their insurer’s website or by calling their insurance company.

“What Cancer Patient Should Have to Go Through This?”

Senate hearing shines light on problems with white bagging



Nate and Koreen Holmes prepare for testimony to the committee.

Koreen Holmes was eight months pregnant when she was diagnosed with cancer. Her experience trying to get her medications after her insurance company implemented “white bagging” has caused her to lend her name to Wisconsin Senate Bill 753, which would prohibit insurers from unilaterally mandating that patients have their drugs white-bagged. On Jan. 20, Koreen and her husband Nate had the chance to tell their story in front of the Senate Committee on Insurance, Licensing and Forestry. “What cancer patient should have to go through this?” she asked.

Koreen and Nate were not alone in hoping to prohibit the practice. Not only did they have the support of their care team from HSHS, all told, over two dozen health care providers and

patient advocates also testified, asking the Senate committee to support SB 753 due to the significant problems they and their patients have experienced with the process of white bagging.

The practice that health care providers seek to prohibit relates to medications that need to be administered by a clinician, such as through an infusion. Health insurers are mandating that such medications be obtained through a separate pharmacy, outside of the hospital or physician office’s normal process for procuring, storing, preparing and handling those drug therapies. The medications are crucial in the treatment for a variety of conditions such as cancer, multiple sclerosis and rheumatoid arthritis.

Throughout the testimony, doctors, pharmacists, nurses and patient treatment coordinators described the treatment delays, frustration, costs and problems that result from insurer-mandated white bagging.



WHA’s Joanne Alig responds to questions from committee members, while WHA Board Chair John Russell looks on.

Reedsburg Area Medical Center Director of Pharmacy Hannet

Ambord said one of her patients had her medication delayed so many times that she just gave up, diminishing her quality of life and causing worse outcomes. Several of the other providers testifying were also pharmacists, including Carl Selvick from Fort HealthCare, who is himself a patient who relies on these medications.

Opposition to the bill stemmed from insurers and employers who allege that hospitals mark up drug prices and lack transparency. Wisconsin Hospital Association Senior Vice President of Public Policy Joanne Alig challenged those assertions, noting that white bagging doesn’t lower costs for providers; it actually adds a tremendous amount of complexity and

(continued on page 3)



Hannet Ambord, PharmD, testifies in support of SB 753 alongside Rep. Tony Kurtz.

("What Cancer Patient Should Have to Go Through This?" . . . continued from page 2)

administrative cost to the system. Alig explained that the practice is being implemented unilaterally by insurers outside of the contract negotiation process.

Bellin Health Executive Vice President and Chief Financial Officer Jim Dietsche described how his health system had just signed an agreement with one insurer, who then turned around and implemented white bagging within six months of that agreement. "When you sign an agreement, you expect those arrangements to be honored," he said.

Rural Wisconsin Health Cooperative Director of Insurance Contracting Michael Ballinger said he checked with human resource staff at his organization to see if the insurer they use for their employee's health care provided them with any information about the new white bagging requirements. They didn't. "They say this is about cost savings," he said. "But we didn't get a premium reduction. Where are the savings?"

Health care providers described numerous instances of delays in medications arriving, drugs being wasted and overall concerns about safety. Insurers claimed there are exceptions to their policies to address instances when a medication doesn't arrive on time, or for other problems. But time after time, health care providers challenged that assertion. HSHS Oncology Nurse Navigator Jessica Gugel described spending hours on the phone with the health insurance company trying to help Koreen and Nate Homes gain an exception for their case.

"Due to the broad negative impact I have witnessed way too many times, I chose to come speak today," said Aurora Health Care Director of Pharmacy Nick Ladell, speaking emotionally on behalf of all the patients he has worked with who've had their care negatively impacted by white bagging at Aurora West Allis Medical Center. "My heart is also pumping a lot; I wondered if this was going to happen because I'm normally a pretty good public speaker. I reflect on why my heart is pumping so hard, and it's because it is so important."

Many of those testifying were representatives from hospitals and health systems. Dr. Madelaine Feldman and Nilsa Cruz, both from separate independent rheumatology clinics and affiliated with the Coalition of State Rheumatology Organizations also testified in support of the bill.

Throughout the day, Senate committee members asked why the legislature should get involved in this issue. Hall Render attorney Todd Nova, who specializes in pharmacy practice matters, explained that "this is less about a private right of contract and more about the regulatory oversight of care delivery models being incentivized, or in fact, in most cases, being mandated by third-party payers."

In the end, Bellin Health Director of Oncology and Hematology Sarah Jensen noted that her organization currently allows white bagged drugs into their facility but isn't sure how much longer they will be able to do that over concerns about whether it is safe for patients. "The question keeps coming up about what if we can't fix it? I guess the alternative question is, what if nobody will provide it?"



Bellin Health's Jim Dietsche and Sarah Jensen testify to the committee in the final hour of public testimony on Senate Bill 753.



More than two dozen health care providers and advocates from across the state testified during an eight-hour hearing on Senate Bill 753.

Bausch Joins WHA Quality Team

Kristin Bausch, RN, BSE, CPDM, has joined the Wisconsin Hospital Association's Quality Department as clinical quality improvement manager.

Bausch has a Bachelor of Science degree in communication sciences and disorders as well as education from the University of Wisconsin-Whitewater and University of Wisconsin-Platteville, respectively. She also holds an associate degree in nursing from Southwest Wisconsin Technical College. Bausch has completed graduate work toward a Master of Business Administration in health care management and holds a certification in professional disability management. Prior to joining WHA, she case managed home therapy of educational and clinical home peritoneal dialysis and home hemodialysis of pediatrics and adults.

In addition, Bausch's experience includes nurse case management as a disability clinical specialist in short- and long-term disability leave and absence with accommodations and modifications, acute-care nursing in medical-surgical, outpatient services, urgent care, emergency department, and pre/post-operative services, post-acute care, long-term care including developmentally disabled and memory care, and home health care. Bausch's studies and interests have also journeyed into the aesthetic nursing and health industry. Bausch's personal experience has brought about her passion for specialty cares within the Spinal Muscular Atrophy (SMA) community related to pulmonary, neuromuscular, respiratory cares, and advocacy leadership. She volunteers as one of Wisconsin's Cure SMA chapter leaders, organizing and originating Madison's Walk-N-Roll, has contributed to advocacy work for the addition of SMA to Wisconsin's newborn screening, enjoys connecting families and individuals diagnosed with SMA, and serves as a parent ambassador speaker throughout the country.



Kristin Bausch

Insurance Commissioner Memo to Health Plans “Strongly Encourages” Telehealth Coverage Parity

The Wisconsin Commissioner of Insurance Nathan Houdek issued a [memo](#) to health plans on Jan. 20, 2022, strongly encouraging health plans to maintain telehealth coverage parity and “minimiz[e] out-of-network barriers for patients seeking telemedicine (i.e., telehealth) services.” The letter also reminds health plans of their obligations to maintain an adequate provider network for telehealth services.

Commissioner Houdek serves as the state's chief regulator of insurance and oversees the operations of the Office of the Commissioner of Insurance (OCI).

Speaking to telehealth coverage parity and COVID-19 impacts, Houdek wrote in the memo, “Where appropriate, health plan issuers are strongly encouraged to not deny coverage for a treatment or service provided through telehealth if that treatment or service is covered under the policy or plan when provided in person by a health care provider.”

Houdek noted the impact of COVID-19 on the capacity of health care facilities and a need for “robust” telemedicine programs to meet increased demand.

“Health plan issuers are reminded to review provisions in current policies regarding the delivery of health care services via telemedicine and ensure their telemedicine programs with participating providers are robust and will be able to meet any increased demand,” stated Houdek.

The memo also requested that health plans verify the adequacy of their provider networks to handle a potential increase in the need for telehealth services.

“If health plan issuers do not have sufficient telehealth providers in their network, health plan issuers are requested to develop a plan to address these shortfalls including making exceptions to provide access to an out-of-network provider at the in-network cost-sharing level,” stated Houdek. “Health plan issuers who lack access to telehealth services where in-person services are not available may be found by OCI to lack an adequate provider network as required by Wis. Stat. §§ 609.22 and 609.24 and Wis. Adm Code Ins 9.32.”

The memo from Commissioner Houdek can be found [here](#). If you have questions about this memo, contact either WHA General Counsel [Matthew Stanford](#) or WHA Senior Vice President of Public Policy [Joanne Alig](#).

WHA Post-Acute Care Workgroup Discusses Key Issues in First Meeting of 2022

During a recent meeting of the WHA Post-Acute Care Workgroup, Cassie Stremer, team leader for post-acute care for Bellin Health, and Mandi Pericak, manager for post-acute care for Gundersen Health System, provided the workgroup with an informative overview of their early experience with the current Wisconsin National Guard deployments aimed at decompressing hospitals. For a variety of reasons, nursing homes across the state have not been admitting some patients who are ready to be discharged from a hospital but need nursing home services post-discharge, creating a bottleneck for patients in the hospital and affecting hospital capacity.

Stremer and Pericak described working with their local nursing homes that have newly expanded capacity to accept discharges from hospitals. Over the last several weeks, National Guard service members have received nurse aide training and are being assigned to one of several nursing homes that have identified to the Wisconsin Department of Health Services (DHS) a significant number of closed beds in their facility that could be opened with additional staffing. Regarding the deployments, the workgroup also heard about the DHS Jan. 13, 2022, webinar that included information about the Wisconsin National Guard volunteer force, training and assignments. A recording of that webinar is available [here](#).

The workgroup discussed its priority issues and goals for 2022, including the annual WHA Post-Acute Care Conference scheduled for August. Workgroup Chair Diane Ehn, vice president of post-acute care for Froedtert Health, led discussions about identifying placement barriers and expectations for care transitions. Finally, the workgroup received updates about the DHS agency staffing assistance, Medicaid payments for prolonged stays, acute hospital care at home legislation and WisCaregivers 2.0.

Bipartisan Letter from Nearly 200 Members of Congress Asks Feds to Crack Down on Traveling Nurse Staffing Agencies



Ron Kind



Glenn Grothman

Questionable practices from health care staffing agencies are continuing to draw the ire of Congress. In a bipartisan letter from the United States House of Representatives, nearly 200 federal lawmakers asked White House COVID-19 Response Team Coordinator Jeffrey Zients to have federal agencies investigate whether the conduct of traveling nurse staffing agencies is anticompetitive and/or violates consumer protection laws. Congressmen Ron Kind and Glenn Grothman joined the letter from Wisconsin's congressional delegation.

The letter detailed concerns from members of Congress that nurse staffing agencies are using COVID-19 to drive up their profits at the expense of hospitals and the patients they serve. "We are writing because of our

concerns that certain nurse-staffing agencies are taking advantage of these difficult circumstances to increase their profits at the expense of patients and the hospitals that treat them," said the members in the letter. "We have received reports that the nurse staffing agencies are vastly inflating price, by two, three or more times pre-pandemic rates, and then taking 40% or more of the amount being charged to the hospitals for themselves in profits," the letter added.

WHA members have noted similar practices in Wisconsin. As [covered in a recent edition](#) of *The Valued Voice*, the topic came up in a recent WHA briefing to congressional staff. Wisconsin systems are increasingly losing employees to traveling staffing agencies, only to find out they end up working at a neighboring hospital across town. Many hospitals have offered staff retention bonuses to encourage staff to stay, but this is increasingly driving up hospital costs and negatively impacting morale for staff who end up making less than agency staff that have significantly less experience at their organization.

WHA is continuing to follow this issue closely. Contact WHA Vice President of Federal and State Relations [Jon Hoelter](#) with questions.

(Dr. Scott Gottlieb to Keynote WHA's Advocacy Day . . . continued from page 1)

physician executives, and *Time* magazine named him one of its "50 People Transforming Healthcare in 2018." Dr. Gottlieb is also the author of New York Times Bestseller *Uncontrolled Spread: Why COVID-19 Crushed Us and How We Can Defeat the Next Pandemic*.

Read Dr. Gottlieb's full biography [here](#).

"Quarles & Brady is always pleased to support WHA's Advocacy Day event, and this year we are thrilled to sponsor this very exciting keynote," said Quarles and Brady Partner Sarah Coyne. "Dr. Scott Gottlieb is a nationally respected leader in public health and health care policy, and his remarks are sure to be extremely relevant and timely," Coyne continued.

Advocacy Day 2022 will take place Wednesday, March 23, 2022, from 8:30 to 11:45 a.m. WHA will again deliver this event to advocates across the state virtually via the professional events platform LeaderPass. The keynote portion of the program, featuring Dr. Gottlieb, will be presented in a moderated discussion format with WHA President and CEO Eric Borgerding. Other elements of the program include the bipartisan legislative panel (to be announced soon), legislative issues briefing and grassroots legislative visits.

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.

There is no cost to attend Advocacy Day, but registration is required. [Register here](#).

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ADVOCACY DAY
MARCH 23, 2022

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