

NEWS BRIEFS

Informational Newsletter for Wyoming Hospitals

Volume 42, Number 25

June 15, 2012

WHA Calendar:

WHA Board of Directors Meeting
Casper, WY **7/16**

Annual Meeting & Convention
Little America
Cheyenne **9/26-9/27**

Other Events:

Wyoming Quality Conference
Lander, WY **8/22-8/23**

Mid America Summit
Des Moines, IA **9/5-9/7**

Political Timelines & Regulatory Changes Threaten Rural Healthcare

A crisis is looming in rural healthcare, but it's not a particularly new situation, and the prospects for heading it off at the moment are dim, according to a senior director from the American Hospital Association.

John Supplitt, the AHA's Senior Director of the Section for Small or Rural Hospitals, delivered a sobering update of the current state of rural health affairs last week during the Western Region Flex Conference in Park City, Utah.

Many of the issues facing rural providers are political, others are regulatory, and nearly all are affected by shrinking timelines for resolution.

Politically, this perfect storm is comprised of elements rural hospitals have been facing for years: the potential expiration of the so-called 'Doc Fix', which prevents a dramatic reduction in physician Medicare payments; the expiration of the payroll tax cut; the expiration of the Bush tax cuts; and a probable need to once again raise the nation's debt ceiling.

Those issues are exacerbated by the reality that each of those items expires at the end of 2012. That means that Congress has fewer than six months to deal with a full

plate of complex problems.

That timeline is contracted even more because of the limited schedule that Congress will work between now and the end of the year. The political reality of an election year provides further complication, with both parties' national conventions scheduled immediately before and after Labor Day.

The result, Mr. Supplitt said, is likely to be another continuing resolution that funds government at some level, but that does not fully resolve any of these issues.

Additionally, a number of proposals have been developed, including the budget offered by Rep. Paul Ryan, R-Wis., that would significantly impact rural healthcare.

Rep. Ryan's budget passed the U.S. House of Representatives, but few believed it would pass the Senate, Mr. Supplitt said. Nevertheless, it laid out funding alternatives and made clear that Medicare and Medicaid are on the table in budget cutting discussions.

One such proposal from March 2011 would have eliminated the Critical Access Hospital Program, the

Sole Community Hospital Program and others. Total savings from those cuts, according to the Congressional Budget Office, would have been \$62 billion over 10 years.

Reducing CAH reimbursement from 101% of allowable costs to 100% of allowable costs would have netted less than \$2 billion in savings over 10 years.

Though such cuts would have little impact on government funding, the trend toward similar proposals is alarming.

"What we're hearing is that everything is on the table, and that everyone will feel the pain," Mr. Supplitt said.

And political differences are preventing Congress from making any real progress in resolving these problems, he said.

"Why put rural communities in harm's way for the sake of politics?" he said.

In addition to the political factors, a number of recent regulatory changes will impact rural hospitals as well. Rules regarding conditions of participation in Medicare, the J1 visa program, and community health needs assessments were among several examples of impending regulatory challenges.

Mr. Supplitt urged conference attendees to move beyond advocacy on behalf of rural hospitals and to become activists in protecting rural healthcare.





MEMBER SPOTLIGHT



NBHH Earns 'Top Performer' Status on Clinical, Safety Measures

North Big Horn Hospital in Lovell was recently recognized as a Top Performer on a number of clinical and patient safety measures.

The hospital has been achieving high marks on comparative benchmarks as part of the Quality Health Indicators program. NBHH has earned 'top performer' status on 10 of the 15 key measures.

QHI is a benchmarking program designed specifically for small rural hospitals to enable them to compare

themselves to other rural hospitals.

"We are excited because we are seeing some achievements in our quality program," said Tracey Walker, NBHH Quality Director. "The reason we participate in this program is because it allows us to compare ourselves to other critical access care hospitals."

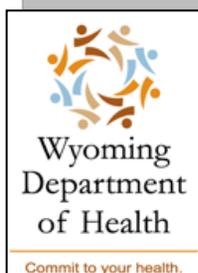
She said each department at the hospital has a quality plan and a calendar for improvement.

"We want to make sure

we are focusing on best practices and best clinical outcomes," said NBHH CEO Rick Schroeder. "The benefit of this reporting is that it tells us when we are focusing on the right things, and it tells us whether the efforts we are putting into correcting or improving are effective."

Rural hospitals in 15 states participate in the QHI program. In Wyoming, the QHI program is sponsored by the Wyoming Critical Access Hospital Network.

Don't forget to send us a story about your hospital so we can feature you in our Member Spotlight



HPP Funding Applications Due by June 22

Threats, whether caused by natural, unintentional, or intentional means, can rapidly overwhelm public health and healthcare systems.

It is imperative that governments, communities, health and emergency response systems, and other Emergency Support Function partners plan, prevent, protect against, respond to, mitigate, and rapidly recover from these threats.

The Wyoming Hospital Preparedness Program (HPP) has announced the availability of funds for fiscal year 2012 for healthcare emergency preparedness efforts in the state of Wyoming that are aligned with the Healthcare Preparedness Capabilities.

The purpose of the HPP grant is to increase medical surge capabilities and capacities in the healthcare system through overarching require-

ments and sub-capabilities that are divided into Level One and Level Two categories.

Complete applications along with requested documentation are due in the Wyoming Hospital Association office no later than 5 p.m. on Friday, June 22.

Applications and documentation can be faxed to (307) 632-9347, or emailed to jody@wyohospitals.com.

State to Host Zoonotic Disease Training

The State of Wyoming recently received a grant from the USDA to offer free educational presentations on zoonotic diseases to Wyoming health care providers.

Presentations are planned for 10 to 15 Wyoming hospitals and other locations by March 2013.

The presentations will be approximately 90 minutes in length, but could be shorter or longer depending on the

preferences of providers at specific sites.

The zoonotic disease topics could also be tailored according to the interests of providers. About 30 minutes of "core" information will be provided at every location, with the remaining time focused on optional topics of special interest in the area.

Core Zoonotic Disease topics include:

- Rabies Post Exposure Prophylaxis
- Colorado Tick Fever
- Hantavirus
- Lyme Disease
- West Nile Virus

For more information or to schedule a presentation at your facility, please contact: Walter E. Cook, B.S., D.V.M., Ph.D., via email at thecooks@wildblue.net, or by phone at (307) 421-4418.

Wyoming Hospital Association

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