



**Wyoming  
Hospital  
Association**

# NEWS BRIEFS

Informational Newsletter for Wyoming Hospitals

Volume 47, Number 22

July 1, 2016

## WHA Calendar:

<b>WHA PAC Golf Tournament</b>	9/6
<b>WHA/LAW Annual Meeting &amp; Convention Cheyenne</b>	9/7- 9/8

## Other Events:

<b>Joint Labor Health and Social Services Committee</b>	8/25- 8/26
<b>Title 25 Joint Task Force Cheyenne</b>	7/7



Last week I made a mad dash back to DC to attend the AHA Rural Hospital Policy Forum on Capitol Hill. The event was organized to bring awareness to the plight of rural healthcare and the challenges our facilities are facing. Key speakers at the event included Senator Pat Roberts (co-chair of the Senate Rural Health Caucus), Senator Ron Wyden (ranking member of the Senate Finance Committee) and Senator Jon Tester (member of the Senate Rural Health Caucus). In addition to the addresses delivered by the senator there was a congressional staff panel including Erin Dempsey (Senior Health Policy Advisor, Senate Finance Committee) and Lisa Grabert (Professional Staff Member, Ways and Means Committee).

An update was given on the progress made by the AHA Small and Rural Pilot Programs that are being conducted around the country. AHA President, Rick Pollack kicked

## President's Message

the event off and AHA Executive Vice President, Tom Nickels briefed the audience on the AHA Rural Advocacy Agenda. The senators that were in attendance all represent states with very rural segments and realize the threat hospitals are facing and they are working to provide relief from a laundry list of the advocacy agenda items.

Included in the Rural Advocacy Agenda were items such as direct supervision, the 96-hour rule, IT and meaningful use, RACs, telehealth, and MACRA. Also included in the agenda was securing the future of critical rural programs and protecting patient access to care. Other items include maintaining CAH designation as currently defined, relieving hospitals from cuts to DSH, preserving the 340B Drug Pricing Program, ensuring CAHs are paid at least 101% of costs, exempting CAHs from the Independent Payment Advisory Board and allowing hospitals to claim the full cost of provider taxes and allowable costs.

It is generally felt that changes to the 96-hour rule and a permanent fix to the direct supervision issue are readily available and if Congress would give these two items attention there could be relief by the end of the year. At the end of the forum I was

able to meet with Senators Barrasso and Enzi and Representative Lummis to present talking points and to discuss the situation here in Wyoming. I received verbal agreement from all of them and their health aides that they would support measures to repeal the 96-hour rule and to get a permanent fix to direct supervision. They are very aware of the problems both of these issues create for our facilities here in Wyoming.

I encourage each of you to talk to our congress men and woman and let them know we need their help. During the holiday season there is a good chance we will run into them here in our state and our message needs to be loud, clear and we need to stand united in affecting these changes.

We are busy finalizing the program for the WHA/LAW Annual Conference to be held on September 6-8 here in Cheyenne. I think we've put together a great and informative program and hope you will all put it on your calendars and also plan on bringing your team to the meeting. I would also be remiss if I didn't acknowledge how grateful I am to live in this great country and how thankful I am to the service men and women that are protecting our freedom. I hope you will all have a wonderful 4th of July.



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

**Wyoming Hospital Association**

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## NBHH Ranked at the Top of all Hospitals in the State

Out of 27 hospitals in the state, North Big Horn Hospital (NBHH) was recently ranked among the cream of the crop on all measures of quality.

In several instances, it was ranked number one, according to a survey required by CMS (the Centers for Medicare and Medicaid Services) for all hospitals in Wyoming and the US.

The ratings called HCAHPS (the Hospital Consumer Assessment of Healthcare Providers and Systems) are derived from an inpatient satisfaction survey. The survey is conducted by telephone and follows

every patient's discharge from the hospital.

A professional survey company contacts patients and the results are published by CMS at [www.medicare.gov](http://www.medicare.gov).

In its most recent survey, NBHH received some of the highest satisfaction ratings possible compared to other hospitals in the Big Horn Basin and throughout the state, including communication between patient and provider, communication between nurses and patient, responsiveness of staff, how thoroughly instructions about medication were communicated upon discharge

and an overall rating of the facility.

How patients perceive their care falls on the shoulders of every single department at the hospital, explained Chief of Nursing Tina Toner. That perception begins at the time a patient registers and includes everything from the food they eat to how quiet their room is to the bill they receive for the service.

These impressions are recorded within a few days after a patient's hospital stay and, according to Toner, the only scores that count are "excellent" scores.

## Wyoming's First New Peer Specialist Training

Wyoming's first New Peer Specialist training will take place August 29 - September 2, 2016, in Cheyenne.

Peer Specialists are uniquely qualified via their own recovery experience from mental illness and/or addiction.

The inclusion of Peer Specialist services has been found to reduce involuntary hospitalization days, increase recovery skills, in-

crease positive client outcomes, and increase overall patient satisfaction. Peer Specialist services are recognized by the Centers for Medicare and Medicaid Services (CMS) as an evidence-based mental health model of care.

This New Peer Specialist training provides an opportunity for staff to advance work competencies in the Peer Specialist profession. There is no tuition cost and

small stipends are available.

This course is limited to persons with their own experience recovering from a significant mental illness and/or substance use or alcohol addiction. Attendees/applicants should be well grounded in their recovery. At least two years of recovery is recommended.

For more information e-mail [janet.jares@wyo.gov](mailto:janet.jares@wyo.gov) or call 1-800-535-4006

## CMS Issues Correction to new Fire Safety Requirements

The Centers for Medicare & Medicaid Services have published a correction to its recently updated fire safety standards for hospitals.

The May final rule adopted the National Fire Protection Association's 2012 Life Safety Code (with minor

amendments) and most chapters of its 2012 Health Care Facilities Code for hospitals and certain other facilities that participate in the Medicare and Medicaid programs.

The clarification states that hospital outpatient sur-

gical departments must meet Life Safety Code provisions applicable to ambulatory health care occupancies, "regardless of the number of patients served."