



**Wyoming
Hospital
Association**

NEWS BRIEFS

Informational Newsletter for Wyoming Hospitals

WHA Calendar

WHA Golf Tournament Buffalo, WY	9/19
WHA Annual Meeting Sheridan	9/20-9/21

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AHA/WHA Advocate for Wyoming Hospitals

The AHA held its first national Regional Policy Board (RPB) in Washington DC this week. Hundreds of hospital CEOs, Board Members and state hospital association executives from around the country arrived in DC for two days of policy decision making and advocacy.

The Wyoming members of the RPB Doug McMillan, Andy Fitzgerald and Shelby

Nelson along with WHA President Eric Boley all descended upon the Hill to advocate for Wyoming hospitals and to make their voices heard. The message delivered included reauthorizing the CHIP program.

The importance of the Medicare Rural Extenders was an important topic and even more importantly was making sure the enhanced low

-volume Medicare payments and the ambulance add-ons were continued. Congressional delegates were made very aware of how important these programs are to the survival of many of our facilities. Each of the Wyoming representatives indicated that they understood and were supportive of continuing the programs and felt like the programs would be reauthorized.

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ACTION NEEDED

September 2017 · Washington, D.C.

Congress has a full slate of critical issues to address before the end of the federal fiscal year on Sept. 30. Urge your legislators to support patients and hospitals on the following five items:

Health Insurance Marketplace Stability

- More than 10 million Americans rely on the Health Insurance Marketplaces for affordable coverage.
- More than half of these consumers are eligible for reduced cost-sharing due to having lower incomes.
- Funding for these cost-sharing reductions (CSRs) is in jeopardy. As a result, fewer insurers may participate in the marketplaces in 2018 and those that do may increase premium costs for all consumers to make up for the loss of funding.

Help stabilize the Health Insurance Marketplaces by securing funding for the CSRs.

Children's Health Insurance Program (CHIP)

- CHIP and Medicaid provide health coverage for nearly 4 out of 10 children in the U.S. CHIP is authorized to operate until Oct. 1, 2019, but legislative action is needed to continue funding beyond September 2017.
- Failure to extend CHIP funding could result in coverage losses for millions of children and increased financial pressure for states that may lead to reductions in eligibility and benefits.
- Efforts to support CHIP should not reduce funding for other health care programs.

Extend CHIP funding through 2019.

Medicaid Disproportionate Share Hospital (DSH) Payments

- The Medicaid DSH program provides essential financial assistance to hospitals that care for our

nation's most vulnerable populations - the poor, children, the disabled and the elderly.

- Medicaid DSH is critical to our nation's hospitals, especially as the coverage anticipated under the Affordable Care Act (ACA) has not been fully realized.
- The ACA's mandated Medicaid DSH cuts will go into effect Oct. 1, 2017 without further intervention by Congress.

Stop the Medicaid DSH cuts.

Medicare Rural Extenders

- Rural hospitals serve approximately 51 million Americans and their patient mix makes them reliant on public programs and particularly vulnerable to Medicare and Medicaid payment cuts and regulatory uncertainty.
- The Medicare Access and CHIP Reauthorization Act contained several provisions important to rural hospitals and their patients, including extensions for: the enhanced low-volume hospital payment adjustment (through Sept. 30, 2017); the Medicare-dependent hospital program (through Sept. 30, 2017); and ambulance add-on payments (through Dec. 31, 2017).

Secure the future of these critical rural programs and policies by passing the:

- » **Rural Hospital Access Act of 2017 (S. 872/H.R. 1955)**
- » **Medicare Ambulance Access, Fraud Prevention, and Reform Act of 2017 (S. 967/H.R. 3236)**

The 340B Drug Pricing Program

- The 340B program allows hospitals to provide financial assistance to patients unable to afford their prescriptions; along with clinical pharmacy services, such as disease management programs or medication therapy management; and other medical services, such as obstetrics, diabetes education, oncology services and other ambulatory services.
- The Centers for Medicare & Medicaid Services (CMS) proposes drastically cutting Medicare payment for drugs acquired under the 340B program. These cuts would be devastating to the programs that improve access to care in communities and meet the goals of the Medicare program.

Oppose CMS's misguided proposal on the 340B program.



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WHA/AHA continued from front page

The 340b program was also a large topic and it was expressed how important the program is to Wyoming hospitals. The proposed CMS changes that will drastically cut payments to facilities are of huge concern and need to be stopped.

Members of the WHA need to continue to make sure this message is delivered. These important funds that hospitals receive through the 340b program allow hospitals to

provide services in communities that would have to be cut without that funding.

DSH cuts are also of major concern and would have a huge negative impact on many hospitals in the state. Congressional delegates again were told of the importance of this funding to ensure that the safety net hospitals in Wyoming are able to stay solvent and continue to provide much needed services in their communities.

WHA members are encouraged to make their voices

heard and to reach out to Senators Barrasso and Enzi and Representative Cheney. Let them know how important each of these items are to your facilities and what the cuts would mean to your ability to do business and offer the services needed to protect and care for those you serve.



WPH and Billings Clinic Partner on Catheterization Lab

West Park Hospital (WPH) and Billings Clinic are partnering to expand cardiology services offered at the new Cody Cardiology Center (CCC) which will include a new Cardiac Catheterization Laboratory (Cath Lab).

The Cody Cardiology Center will be located at West Park Hospital and the Cath Lab will include the newest x-ray technology systems, allowing physicians to merge different

imaging modalities to guide procedures including new high-end, real-time 3D imaging. Patients will be seen by their providers in the Cody Cardiology Center outpatient clinic setting.

The Cath Lab will provide the ability to perform diagnostic cardiac catheterizations to diagnosis and treat heart disease. Diagnostic procedures performed will include stress tests, cardiac catheterizations, pacemaker place-

ments and defibrillator placements.

“WPH is excited to partner with Billings Clinic to open a cath lab and expand cardiology services in Cody and throughout the Big Horn Basin Region. Billings Clinic brings nationally recognized cardiology services and resources that will soon be available in Cody through this joint venture with West Park Hospital,” states Doug McMillan, CEO of West Park Hospital.



Wyoming Hospital Association

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How to Help Texas and Florida

The Florida Hospital Association has established a fund to help hospital employees who experienced significant property loss or damage because of Hurricane Irma. For more information visit www.fha.org/donate.

The Texas Hospital Association continues to coordinate support for hospital employees impacted by Hurricane Harvey and the devastating flooding that followed. For more information visit www.tha.org.

All funds will be used to directly assist hospital employees in Federal Emergency Management Agency designated disaster areas; administrative services are being provided in kind so that 100 percent of donated funds will be used to assist hospital employees.