



NEWS BRIEFS

Informational Newsletter for Wyoming Hospitals

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November 11, 2016

WHA Calendar:

HFMA Meeting Cody	11/16- 11-18

Other Events:

Joint Corporations Committee Cheyenne	11/21- 11/22
Joint Labor Health & Social Services Committee Cheyenne	12/12- 12-13

Compact Extends EMS Licenses Beyond State Lines

One of the things the WHA has decided to work on this legislative session is the EMS licensure compact or REPLICA. We are working through some questions regarding the compact with the Attorney General and with the LSO. We are anticipating ironing out any wrinkles and presenting REPLICA to the Joint Labor, Health and Social Services Committee at their final meeting in December.

I'm hopeful we'll come away from that meeting with a committee bill that we can advocate for and pass during the upcoming legislative session. There is great value in putting REPLICA in place. The following is a great description of the compact and how it can benefit our state.

The following was written by Alexis Barker from the News Letter Journal.

A new agreement between participating states may make it easier for emergency medical service providers to operate across borders, but it will be up to the Wyoming State Legislature to determine if Wyoming is going to become part of that group.

State EMS Official Andy Gienapp, MS., NREMT-P with the Wyoming Department of Health has held meetings with the purpose of informing local EMS personnel of REPLICA

and the pros and cons of the national program.

REPLICA stands for recognition of EMS Personnel Licensure Interstate Compact and would give the ability to licensed EMS personnel to travel into another state and work as if they were licensed in that state.

A number of other benefits come with the program, including rapid information sharing about EMS personnel, new authority of criminal history checks, investigations, and adverse actions, and access to more comprehensive information about licensure history.

According to Gienapp, REPLICA is a model legislative language pertaining to EMS licensure. A minimum of 10 states, with seven states currently signed including Kansas, Virginia, Tennessee, Texas, Colorado, Utah and Idaho, must adopt the language through the regular legislative process for it to take effect. It will have a national advisory panel and consists of 23 organizations coming together to create a diverse organization.

In order to activate REPLICA, a contract must be created between states via the passage of the same legislation in multiple states specific to EMS. With that passage,

states extend a privilege to practice to individuals from other compact states as though they are licensed in their state under specific conditions.

With REPLICA, a home state is the state in which EMS personnel were originally licensed and the remote state is any other state that has signed onto the compact.

As part of the compact, the "home" state would have a number of obligations that must be completed, including receiving and investigating complaints about individuals, notifying the commission of any adverse action, and requiring the use of the National Registry of Emergency Medical Technicians (NREMT) examination as a condition of issuing initial licenses. It was maintained by Gienapp that EMS personnel who are already licensed are not required to take the NREMT, only new licenses.

Currently REPLICA is in the state's hands in the final form and local legislators will have the opportunity to review and discuss the compact and then make decision on whether to sign on or not.

Gienapp encouraged all local EMS personnel to contact local legislators and express their opinions either for or against REPLICA.



WPH to Host Medical Peer Review Conference

Due to overwhelming support and great participation last year, West Park Hospital is inviting all staff to attend their 2nd Medical Staff Peer Review and Professional Conduct Conference to be held April 20 - 21, 2017 at the Hospital in Cody.

The conference will mainly deal with creating effective processes and enhance

patient safety and physician success.

Faculty will be LeeAnne Mitchell and Rachel Remaley. Both LeeAnne Mitchell and Rachel Remaley are partners with the law firm of Horty, Springer & Matter, P.C. in Pittsburgh, Pennsylvania.

A few of the topics to be covered are:

- Characteristics of the Disruptive Doctor
- PPE Support Staff

- What are you Reviewing and Why
- Sexual Harassment and Assault
- Effectively Dealing with Reported Concerns
- Credentialing Physicians with Health Issues;
- Managing Physician Health Issues.

These are just a few of the topics to be covered during the two day program.

For more information, e-mail [kjacobson@wphcody.org](mailto:kjacobs@wphcody.org)



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

CMS Approves a 90-Day EHR Reporting Period for 2016

On November 1, CMS approved a 90-day electronic health record (EHR) reporting period in 2016 and for 2017 for all returning eligible professionals (EPs), eligible hospitals (EHs) and critical access hospitals (CAHs) that have previously demonstrated meaningful use in the Medicare and Medicaid EHR Incentive Programs, as part of the Hospital Outpatient Perspective Payment System

(OPPS). See all rule changes included in OPPS changes at cms.gov. MU changes are listed under section titled: Electronic Health Record Incentive Program.

You can now use any continuous 90-day period from January 1 to December 31, 2016 for meaningful use reporting this year.

Please remember that some meaningful use objectives, and audit documentation must happen during your

reporting period - so some of your tasks and documentation may need to be redone to align with the reporting period you are choosing.

A full list of tasks to walk you through 2016 MU reporting can be found at the Mountain Pacific Quality Health website at <http://mpqhf.com/blog/hts-2016-mu-checklist/>



AHA Debuts Video Series to Help Prepare for MACRA

The AHA has released a MACRA 101 video series to help hospital leaders and trustees prepare for the new Medicare physician quality payment program, for which performance measurement starts in 2017 under the Medicare Access & CHIP Reauthorization Act.

Also available as short MACRA Minute videos,

the series provides an overview of the program and offers strategies for working with physician leaders to educate staff about the coming changes.

"The AHA and its Physician Leadership Forum are ready to support the needs of the health care field as we implement MACRA's sweeping changes," writes Jay Bhatt, D.O., AHA senior

vice president and chief medical officer, in an AHA Stat blog post about the videos.

"The MACRA 101 video series is just one of many resources available at www.aha.org/MACRA. Watch for more information and tools in the coming weeks and months that will support the field through MACRA implementation."

Wyoming Hospital Association

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