



NEWS BRIEFS

Informational Newsletter for Wyoming Hospitals

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WHA Calendar:

Legislative Reception Little America	2/9

Other Events:

Legislature Begins	1/10
National HFMA Meeting Las Vegas	1/15-1/18

Impact of Repeal While Keeping ACA Cuts

The 115th Congress is underway, and discussions about repealing the Affordable Care Act (ACA) are taking place in earnest. Congress and President-elect Trump’s administration have made repeal and replace one of their top legislative priorities, with a goal of having a bill on the President-elect’s desk by Feb. 17.

Please reach out to your representative and senators today and urge them to preserve health coverage by simultaneously repealing and replacing the ACA.

It’s important to communicate that we understand the ACA needs changes and that hospitals have offered solutions to fix it; and we are committed to working with them on legislation that achieves a shared goal of improving America’s health care system through patient-centered care.

If Congress decides to reconsider the ACA without simultaneously providing similar coverage, then we encourage that they include in such legislation the prospective repeal of funding reductions to Medicare and Medicaid payments for hospital services that were included in the ACA.

Yesterday, Congressional Republicans introduced their 2017 budget resolution,

providing reconciliation instructions that would begin the process to repeal and replace parts of the ACA. The process of reconciliation requires only 51 votes for passage in the Senate rather than the usual 60 votes.

The instructions to Committees of jurisdiction do not provide policy details about how to repeal the ACA and the instructions do not preclude the Committees from adopting any specific policy.

The instructions require the Committees of jurisdiction to provide an overall amount in savings, but the Committees also can spend money on specific policies if, overall, the reconciliation legislation reduces the federal deficit.

For more on the impact of ACA repeal on hospitals and health systems, see the report from health economics firm Dobson | DaVanzo released Dec. 6 by the AHA and the Federation of American Hospitals.

That report estimates the financial impact from 2018 – 2026 on hospitals under the most recent repeal bill, H.R. 3762. The report found hospitals overall would:

- face a net negative impact of \$165.8 billion regarding coverage losses;
- suffer a loss of \$289.5 billion in Medicare infla-

tion updates if the payment reductions in the ACA are not restored; and

- experience \$102.9 billion in cuts if the ACA’s Medicare and Medicaid DSH payment reductions are not restored.

Please discuss with your lawmakers how losses of this magnitude with repeal of ACA coverage cannot be sustained and would adversely impact patients’ access to care and hospitals’ and health systems’ ability to continue to provide services, and could potentially result in job losses.

You can find this report and the accompanying letter to the President-elect on our webpage dedicated to the transition – www.aha.org/transition2017.

There you will find additional resources such as talking points, archives of our recent webcasts and a run-down of key figures in Congress and the new administration. New resources are being added daily, so please check back often.





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



Margie Molitor

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CRMC Launches new Website

Cheyenne Regional Medical Center (CRMC) has launched a new website that features several enhancements recommended by patients, employees and community members.

“One major change was to make the new website user-friendly on mobile devices, tablets and desktop computers,” said Hillary Hardy, CRMC’s webmaster and

manager of marketing and communications.

“The information being displayed will adjust to whatever device is being used,” Hardy said. “This is critical since people access our site using different kinds of devices.”

The website was also redesigned to make navigation easier, with many of the links to hospital services, local physicians and clinic locations prominently displayed.

played.

The overall look of the site has also been updated with a more appealing, fresher design.

“The website is a reflection of who we are as a health system,” Hardy said. “With that in mind, we’ve designed the new site to be patient-focused, informative and friendly.”

HSCMH Names Molitor CEO

The Board of Trustees of Hot Springs County Memorial Hospital (HSCMH) has announced that Margie Molitor, RN, FACHE has accepted the permanent position of CEO beginning January 1, 2017.

Molitor was hired June 2016 as the interim CEO by HealthTechS3 which contracts with the hospital.

Prior to her interim assignment at HSCMH, Molitor was the interim

CEO at Big Horn County Hospital District in Basin, Wyoming. She began her career as a registered nurse, and was a chief nursing officer for 14 years followed by 10-plus years in CEO work. She earned her nursing degree from South Dakota State University, and worked for Banner Health for 24 years, all of it in small hospitals in South Dakota, Utah, Nebraska and Wyoming.

Molitor, who is accredited as a Fellow of the Ameri-

can College of Healthcare Executives, went to work for HealthTechS3 in 2014 and has held several interim CEO assignments in the last several years.

Hospital Board Chairman Bill Williams commented, “Both the current hospital board and the newly elected district board were very pleased that Margie was willing to shed the “interim” title for the permanent CEO position at Hot Springs County Memorial Hospital.”

CMS Issues EHR Attestation Worksheets

The Centers for Medicare & Medicaid Services has released worksheets to help eligible hospitals and professionals in Modified Stage 2 of the Medicare Electronic Health Records Incentive Program log their meaningful use measures for calendar year 2016.

CMS also issued additional guidance to help eligible hospitals in the Medicare EHR Incentive Program and Hospital Inpatient Quality Reporting Program submit 2016 electronic clinical quality measures for the “device, order not done” field.

Eligible hospitals and professionals must attest to meaningful use of EHRs in 2016 to avoid a payment adjustment in 2018. The 2016 attestation period for the Medicare EHR Incentive Program opened today and runs through Feb. 28.