President Obama’s Deficit Plan Calls for $320 Billion in Medicare and Medicaid Cuts

President Obama’s $3 trillion deficit reduction proposals, released on Monday, September 19, contain $320 billion in Medicare and Medicaid cuts over the next ten years. This package of deficit reduction measures is intended to influence the work of the deficit reduction “Super Committee” and help to cover the cost of the President’s $447 billion jobs and tax change package, the American Jobs Act.

Specifically, the President’s proposals call for $248 billion in Medicare cuts, including reductions in medical education and bad debt, and $72 billion in Medicaid cuts, including significant curbs on states’ use of provider assessments, the federal government’s overall share of Medicaid costs, and Medicaid Disproportionate Share Hospital (DSH) payments.

These proposed reductions are in addition to the provider cuts enacted as part of the Patient Protection and Affordable Care Act, which will have a negative financial impact on Connecticut hospitals. CHA is now modeling the impact of this latest round of proposals on Connecticut hospitals.

Final Session Planned for Stop BSI Project Teams

On Monday, October 17, 2011, the CHA PSO will celebrate the achievements of the Stop BSI project teams, which have been participating in the national Stop BSI project initiative since January 2009. Fourteen hospitals enrolled seventeen intensive care units (ICUs) that have been actively engaged in the national Stop BSI initiative, which is aimed at eliminating central line-associated infections (CLABSI) in ICU settings by standardizing processes around the insertion, maintenance and removal of central lines, and measurably improving the culture of safety on the participating unit utilizing the Comprehensive Unit-Based Safety Program (CUSP). During this final meeting, teams will not only celebrate their accomplishments, but review tools that will assist them as they move into the sustainability and spread phases of their work. Project faculty from the Health Research and Educational Trust and Johns Hopkins Quality and Safety Group will be in attendance and lead sessions devoted to the science of sustaining and spreading change. The session is open to Stop BSI participating teams.

For more information about the program or the Stop BSI project, please contact Alison Hong, MD, hong@chime.org.

CHA Joins On the CUSP: Stop CAUTI Initiative

This November, Connecticut hospitals will join the national Stop CAUTI project, which is designed to reduce catheter-associated urinary tract infections (CAUTIs) by implementing evidence-based interventions and the Comprehensive Unit-Based Safety Program (CUSP), based on the model of the Stop BSI project. CHA PSO members are invited to join this national initiative. Information to familiarize participants in the project will be the subject of a series of national conference calls beginning in November, with the active portion of the project beginning in January 2012.

For more information on the project or to participate please contact Alison Hong, MD, hong@chime.org.
CHA's Frayne Presents at CBIA Business Roundtable

The Connecticut Hospital Association’s Senior Vice President of Health Policy, Stephen Frayne, presented at yesterday’s Connecticut Business and Industry Association Healthcare Update roundtable in Cromwell. Frayne joined several other healthcare executives to discuss the continued implications of healthcare reform on both our state’s residents and healthcare systems.

Frayne pointed out that Connecticut businesses have done an excellent job providing employees with health insurance, with roughly 61% of those with health insurance obtaining it from their employers. As a result of the continued poor economy and loss of private sector jobs, more individuals are losing access to employer-sponsored insurance and instead relying on government-subsidized plans. This movement towards Medicaid is a particular problem because government traditionally underfunds this program.

Frayne also discussed the effect of the recession on hospitals’ care delivery and finance. With Connecticut hospitals currently operating at a margin 25% lower than other New England states and a staggering 40% lower than the national average, Frayne described the “delicate balancing act” hospitals must perform to both provide adequate services and stay afloat fiscally. He also detailed how the future of hospitals, employers, and insurers are linked and noted that, if the economy improves and the reforms work, hopefully a better balance can be achieved. However, if reforms and the economy force more residents to shift into Medicaid programs, hospitals will find it very difficult to make ends meet. The prospects would be even dimmer if federal and state deficit reduction plans make further cuts to already poorly funded programs.

More information about the September 21 session is available on the CBIA website. Another CBIA Healthcare Update Roundtable is scheduled for September 30 in Norwalk. For additional information, please click here.

CHA to Launch Diversity Collaborative on October 25

On Tuesday, October 25, CHA is launching a unique “Diversity Collaborative” to structure and coordinate activities for increasing diversity in hospital governance and senior management, improving cultural competence in the delivery of care, and increasing supplier diversity. The October 25 kickoff symposium, From Intent to Impact, features a guest panel of renowned experts, community partners, and stakeholders, and will be hosted by Christopher Dadlez, CEO, Saint Francis Hospital and Medical Center, and Chairman, CHA Board of Trustees. The symposium will mark the start of a multi-year program of team engagement, conference calls, education programs, data sharing, and identification of and reporting on best practices and results.

CHA is following the Institute for Healthcare Improvement collaborative model, in which hospitals work together on identified improvement strategies, sharing ideas and progress through a project website, a collaborative ListServ, and education sessions. To date, CHA has successfully used this model in quality and patient safety collaboratives focused on reducing multiple drug-resistant organisms, preventing patient falls, reducing pressure ulcers, and reducing heart failure readmissions. An important part of this CHA Diversity Collaborative will be data collection and use of metrics for accountability in tracking performance and progress in making sustainable change. CHA believes that collective and inclusive work on addressing disparities and diversity will result in long-term, substantive change.

For more information on CHA’s Diversity Collaborative, contact Marie Spivey, EdD, CHA’s Director of Health Equity, at spivey@chime.org.

October Business Opportunity Expo Focuses on Supplier Diversity and Minority Business Enterprises

One of the goals of the CHA Diversity Collaborative is increasing supplier diversity within Connecticut hospitals. To help meet this goal, CHA has been partnering with the Greater New England Minority Supplier Development Council (GNEMSDC) for the last two years in developing enhanced opportunities for minority businesses to work with CHA member hospitals. The GNEMSDC is a local not-for-profit organization that certifies minority businesses, and is dedicated to fostering business relationships between certified Minority Business Enterprises (MBEs) and potential buyers. The GNEMSDC has been instrumental in the development of CHA’s Supplier Diversity Program, through which hospitals can access contracts for goods and services offered by certified MBEs.

On October 3-5, the GNEMSDC’s premier annual event, the Business Opportunity Expo, will be held at MGM Grand at Foxwoods. This promises to be a great opportunity to learn more about supplier diversity and make direct contacts with certified MBEs. The three-day event includes town hall meetings, keynote presentations, corporate and MBE “showcases,” and a trade show highlighting local and regional minority businesses. To learn more or register for the event, click here.
Primary Care Access Authority Holds Its Final Meeting

The State-Wide Primary Care Access Authority held its final meeting on September 21. Established in 2007, the Authority was charged with determining what constitutes primary care services; conducting an inventory of the state's existing primary care infrastructure; developing a universal system, which maximizes federal financial participation in Medicaid and Medicare, to provide primary care services, including prescription drugs, to state residents; and developing a plan for implementing the system. During the Authority's last meeting, members focused on their final recommendations, which were presented to Senate President Pro Tempore Donald E. Williams, Jr. (D-Brooklyn). Key recommendations include:

- Connecticut should compile primary care workforce data and encourage online licensure. The licensure process should also include foreign language competency so as to ensure cultural and linguistically appropriate standards.
- Non-licensed personnel should be able to administer routine medications and vaccinations.
- The state should support the growth of access points, including school- and community-based health clinics.
- Connecticut should align reimbursement rates so that primary care and behavioral health are administered in an integrated fashion.
- The state should institute an all-claims database, and join with other states in a nationwide all-claims database.

For more information about the Authority, click here.

Education Updates

Save the Date: Fourth Learning Session of the Heart Failure Readmissions Collaborative

Please save the date for the fourth learning session of the Reducing Heart Failure Readmissions Collaborative. Scheduled for Friday, November 4, 2011, this session will feature presentations from regional and national experts on best practice strategies to improve transitions of care and reduce preventable hospital readmissions.

The learning session will be open to participating teams and other members of the hospital community. For more information please contact Alison Hong, MD, hong@chime.org.

Compliance Update: Expanded OFCCP Jurisdiction Over Hospital and Healthcare Providers, Tuesday, September 27, 9:00 a.m. - noon

Recent decisions by the Office of Federal Contract Compliance (OFCC) have expanded the agency's program jurisdiction over hospitals and healthcare providers, triggering affirmative action obligations and the possibility of intrusive OFCCP compliance audits. This half-day program will discuss and distinguish three cases relevant to the issue of OFCCP jurisdiction: OFCCP v. Bridgeport, OFCCP v. UPMC Braddock, and OFCCP v. Florida Hospital of Orlando—a case that is now on appeal. The session will describe specific compliance requirements that come into play if jurisdiction is established. Requirements that are triggered under Connecticut law for those hospitals that may have contracts with certain State agencies will also be reviewed.

In addition, new NLRB notice requirements, along with the proposed NLRB quick election rule, and the proposed US Department of Labor "persuader" rules will be discussed. John G. Zandy, a partner at Wiggin and Dana and chair of its Labor, Employment and Benefits Department, will present the program.

Click here to view the brochure. Click here to register. For more information, contact CHA Education Services at educationservices@chime.org.

Navigating Medicare Cost Report Changes for Acute Care Hospital Filing, Thursday, September 29, 9:00 a.m. - 4:15 p.m.

Co-sponsored by CHA and the Connecticut Chapter of the Healthcare Financial Management Association (HFMA), this program will provide participants with an update on changes to the Form 2552-10, as well as insight into new worksheets, changes in software, transferring prior year data, utilizing the PS&R reconciliation tool, and much more. The program also provides time for an open discussion of current events (taxes, DSH Audits, DSH & Supplemental Payments, ASO Developments, etc.). Speakers from the National Government Services, Inc. (NGS), Medicare Administrative Contractor (MAC) for Connecticut and New York, and Health Financial Systems (HFS) will present this program.

Click here to view brochure; and here to register. For more information, contact CHA Education Services at educationservices@chime.org.

OPPS Proposed Rule for 2012, Wednesday, October 5, 2011, 8:30 a.m. - 12:00 p.m.

The Centers for Medicare and Medicaid Services (CMS) released the 2012 Outpatient Prospective Payment System (OPPS)
Proposed Rule on July 5, 2011. Among the rule highlights are refinements to physician supervision requirements, the status of APC payment rates including updated APC assignments for CPT codes new in 2011, drug reimbursement, and additional Composite APCs. The 2012 rule requires hospitals to continue to report quality data for the 12 Hospital Outpatient Quality Reporting (OQR) measures for 2012 and 11 additional measures already established through 2014 and contains nine additional measures through 2014. This program will provide a comprehensive overview to help reimbursement, revenue cycle, billing, regulatory, and HIM professionals evaluate OPPS changes for CY 2012. Click here to review brochure. Click here to register. For more information, contact CHA Education Services at educationservices@chime.org.

Save the Date:  2011 Nurse Leadership Forum, Thursday, October 13, 2011, 9:00 a.m. - 3:45 p.m.

This year’s Nurse Leadership Forum has an impressive line-up of nationally recognized speakers, presenting on high-interest topics. A former hospital and clinic CEO, Barbara Balik, RN, EdD, will deliver the keynote address based on research findings and strategies from the book she co-authored, The Heart of Leadership: Inspiration and Practical Guidance for Transforming Your Healthcare Organization. Vicki George, RN, PhD, former CNO at Dartmouth-Hitchcock Medical Center, and author of Peer Review in Nursing – Principals for Successful Practice will outline strategies for peer review within an organizational setting. Joe Tye, MS, MBA, CEO of Values Coach, former COO for a large community teaching hospital, and author of several books including The Florence Prescription, will discuss the application of leadership principles to the task of transforming today’s hospitals, enabling them to thrive in a turbulent and competitive world.

The forum will also feature sessions on developing systems that integrate the patient experience into quality improvement initiatives, and a practical approach to addressing the operational issues of shared governance. Further details coming soon.