



***KHA's Current Report***  
***October 6, 2023***

**President's Perspective – Hospital Leaders Gather in D.C. to Discuss Health Care Policies**

This week, I had the opportunity to attend the American Hospital Association's National Regional Policy Board in Washington, D.C. Kansas is part of RPB 6 with Iowa, Missouri, Nebraska, South Dakota, North Dakota and Minnesota. While RPB 6 meetings are normally held in our Midwest region, every three years, AHA convenes hospital leaders from all nine RPB regions in Washington, DC to discuss and explore pertinent topics facing hospitals and health care systems across the country.

AHA kicked off the event with an advocacy update touching upon multiple legislative and regulatory issues. One policy initiative is Congress' consideration of site-neutral payment policies. In the U.S. House of Representatives, three congressional committees have deliberated on the topic this year, and both the Energy and Commerce and Ways and Means Committees have advanced site-neutral payment proposals as part of larger bills. These bills have been packaged for consideration on the floor of the House as H.R. 3561, the PATIENT Act of 2023. While this bill contains many good provisions, such as a permanent fix for the Affordable Care Act's disproportionate share hospital payment cuts and an expansion of graduate medical education slots, KHA opposes the inclusion of site-neutral payment language. Congress has responded to our concerns by slowing down consideration of H.R. 3561 and including other important health care provisions in the recently passed short-term budget bill.

Thus far, the U.S. Senate has shown far less interest in site-neutral Medicare payments for hospital outpatient departments. However, a bill introduced by Health, Education, Labor and Pensions Committee Chairman Bernie Sanders (I-VT) in July had a provision that would have limited HOPDs from billing insurance plans for certain procedures beyond the median in-market rate charged by non-hospital providers. A second draft of this bill, introduced in September and cosponsored by Senator Marshall, contained no such provision, but this version, which passed the committee on a 14-7 vote, would prohibit hospitals from charging facilities fees for telehealth visits. No floor action on this bill is expected any time soon.

There are several arguments against site-neutral payments, including the perspective that site-neutral payments are, in reality, Medicare cuts that will not only harm hospitals but also the patients they serve. Additional advocacy topics highlighted included safeguarding the 340B Drug Discount Program, protecting the health care workforce against violent acts, exposing the disadvantages with the Medicare Advantage program and pushing back on the Centers for Medicare & Medicaid Services' proposed rule on nursing home staffing ratios.

As part of the National RPB, we also had the opportunity to delve deeper into a few focused areas. The small group breakout sessions touched upon creating innovative and creative financial pathways for hospitals; exploring patient safety initiatives; and placing the responsibility with collecting patient cost-sharing responsibilities on health insurers. There were many imaginative ideas and suggestions offered by attendees. During the session on financial pathways, attendees considered attribution models (hospital services or insurance-based), as well as dedicated payment streams for essential services that are often unreimbursed or under-reimbursed (behavioral health and population health). While several questions remain regarding the details of any new payment model, the discussion afforded attendees the opportunity to understand the impact on patients, hospitals and the health care system.

While at the AHA National RPB, we also took advantage of meeting with the Kansas Congressional Delegation to emphasize several of the KHA advocacy priorities. Top among them included the protection of the 340B Drug Discount Program; rejecting site-neutral payment policies; and supporting flexibilities to support the health care workforce. Another topic discussed revolved around CMS' proposed nursing home staffing ratios. The draft policy will likely have a detrimental impact on the Kansas health care system. At present, many Kansas hospitals are already challenged to transfer patients to post-acute care settings. Requiring a minimum staffing ratio for nursing homes will inevitably exacerbate this issue, including diluting the availability of beds in nursing homes.

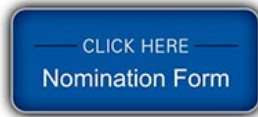
Kansas hospitals were well represented at the AHA National RPB. I would like to thank the Kansas delegates who participated in the meeting. including Sherri Vaughn, MD, The University of Kansas Health System, Kansas City; Melissa Atkins, Graham County Hospital, Hill City; Alan Verrill, MD, AdventHealth South Overland Park, Overland Park; and Larry Van Der Wege, Lindsborg Community Hospital, Lindsborg. Thank you for your leadership and representation of Kansas hospitals.

*--Chad Austin*

### **Nominations Open for KHA Committees through Oct. 20**

The Kansas Hospital Association needs your insight and expertise to guide the work of the association, including shaping our strategic priorities, advocacy positions and essential resources for members. Please consider volunteering yourself and/or a member of your staff to serve on one of KHA's committees in 2024. Please complete the first two questions on the survey if you are unable to make a nomination.

The deadline for nominating is Friday, Oct. 20, 2023. Nominations must be approved by the CEO or administrator.



This year, we need nominations for the following committees:

- Behavioral Health
- Communications
- Convention
- Data
- Health Care Finance and Reimbursement
- Hospital Leadership and Governance
- Hospital Physician Leadership
- KHA-PAC
- Optimal Health
- Policy and Advocacy
- Quality and Patient Safety
- Rural Emergency Hospital
- Workforce

Member involvement is the single biggest indicator of a successful association. Your organization's participation will make a difference. If you have any questions, please contact [Cindy Samuelson](#) or [Susan Pattie](#) at (785) 233-7436.

--Cindy Samuelson

### **Registration Now Open: Rural Health Symposium – Nov. 16**

Register now, and plan to attend the Rural Health Symposium on Nov. 16, at the [Hilton Garden Inn](#) Hays in Hays.

Rural health care providers are constantly faced with new challenges and fewer resources. The purpose of this symposium is to provide attendees with the skills, ideas and information necessary to survive in the rapidly changing world of rural health care.

Target Audience: This symposium is designed for senior-level administrators, hospital trustees and others interested in rural health issues.

Session topics will include:

- Compassionomics: The Revolutionary Scientific Evidence that Caring Makes a Difference
- Financial Picture of Hospitals
- State Programs to Support Rural Communities
- Sustaining Rural Communities



--Hayley Finch-Genschorck

### **Registration Open for the Hospital Board Chair Leadership Program – Oct. 24 and Nov. 28**

The Kansas Hospital Association and governWell are pleased to bring KHA members a new program designed for new board chairs and chair-elects. Learn about the board chair's leadership role; how to build purposeful agendas; facilitation and executive sessions; the Open Meetings Act; the board chair/CEO relationship; board conduct; board orientation, learning and development; and board self-assessment.

This virtual program will include two 90-minute sessions on Zoom and an optional individual coaching session. Attendance will be limited to 50 trustees. Trustees will have access to breakout rooms to connect with others in their location and similar facilities. This education is for trustees only. Trustees will need to have a video connection and be able to use the chat feature in Zoom. Session resources will be shared with attendees' CEOs in advance of the program.



--Hayley Finch-Genschorck

### **New 2024 OSHA Electronic Recordkeeping Requirements**

The U.S. Department of Labor announced a final rule requiring certain employers, in designated high-hazard industries, to electronically submit injury and illness information – that they are already required to keep – to the department's Occupational Safety and Health Administration.

The [final rule](#) takes effect on Jan. 1, 2024, for certain employers, (see the [OSHA Fact Sheet](#) for additional information) and now includes the following submission requirements:

- Establishments with 100 or more employees, in certain high-hazard industries, must electronically submit information from their Form 300-Log of Work-Related Injuries and Illnesses and Form 301-Injury and Illness Incident Report to OSHA once a year. These submissions are in addition to the submission of Form 300A-Summary of Work-Related Injuries and Illnesses.

Appendix B to Subpart E of Part 1904 – Designated Industries for § 1904.41(a)(2) Annual Electronic Submission of Information From OSHA Form 300 Log of Work-Related Injuries and Illnesses and OSHA Form 301 Injury and Illness Incident Report by Establishments With 100 or More Employees in Designated Industries.

6219 – Other Ambulatory Health Care Services  
6221 – General and Medical Surgical Hospitals  
6222 – Psychiatric and Substance Abuse Hospitals  
6223 – Specialty Hospitals (except psychiatric and substance abuse hospitals)  
6231 – Nursing Care Facilities (skilled care facilities)  
6232 – Residential Intellectual and Developmental Disability, Mental Health and Substance Abuse  
6233 – Continuing Care Retirement Communities and Assisted Living Facilities for the Elderly  
6239 – Other Residential Care Facilities  
6243 – Vocational Rehabilitation Services

An OSHA representative will provide an overview of this new rule change at the upcoming KHA Worker's Compensation Fund and Safety Seminar in Wichita, Oct. 19-20.



--Ronni Anderson

### **RSV Vaccine – A New Maternal Indication Brief Webinars**

Pfizer's Vaccines U.S. Medical Affairs team is providing brief educational webinars entitled, *Pfizer RSV Vaccine – A New Maternal Indication*. Beginning this week, these live sessions will be conducted on Tuesdays, Wednesdays and Thursdays. On-demand content will be available soon. Session topics include:

- RSV burden of disease in infants
- Mechanism of Maternal Immunization
- ACIP Recommendations and Clinical Considerations
- Clinical Trial Data: Safety and Efficacy
- Question and answer session

Click on the following link for the live schedule and other educational resources: [RSV Vaccine Educational Webinars led by Pfizer Vaccines U.S. Medical Affairs](#). Continuing medical education is NOT associated with this event.

--Karen Braman

### **2024 Health Observances Calendar Is Now Available**

The Kansas Hospital Association and the Society for Healthcare Strategy and Market Development are pleased to bring you the [2024 Calendar of Health Observances & Recognition Days](#). An example of providing practical, timely resources supporting KHA's vision, "Optimal Health for Kansans," this calendar is designed to help you plan your 2024 community health events, internal and external communications, social media campaigns and more. The calendar is easy-to-navigate and interactive featuring more than 230 health observances and recognition days!

Don't miss the chance to receive calendar updates from SHSMD sponsor Baldwin Publishing. Not only do they provide you with a Health Observance Guide with ALL the content you need to post every day for the following month, but they also give access to healthy recipes, cooking videos, branded cookbooks, recipe calendars and wellness content and solutions. We hope you find the calendar useful.

*--Jan Fenwick*

### **Novavax COVID-19 Vaccine Authorized by FDA for Age 12 Years and Older**

On Oct. 3, the Food and Drug Administration [announced](#) the agency had authorized the Novavax 2023 – 2024 COVID-19 Vaccine, Adjuvanted. The original monovalent Novavax COVID-19 Vaccine is no longer authorized for use in the U.S. Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula), is authorized for use in individuals 12 years of age and older as follows:

- Individuals previously vaccinated with any COVID-19 vaccine: one dose of Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) is administered at least two months after receipt of the last previous dose of an original monovalent (Original) or bivalent (Original and Omicron BA.4/BA.5) COVID-19 vaccine.
- For individuals not previously vaccinated with any COVID-19 vaccine: two doses of Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula), are administered three weeks apart.
- Immunocompromised individuals: an additional dose of Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula), may be administered at least two months following the last dose of a COVID-19 vaccine (2023-2024 Formula). Additional doses of Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula), may be administered at the discretion of the health care provider, taking into consideration the individual's clinical circumstances. The timing of the additional doses may be based on the individual's clinical circumstances.

For detailed information, see the [fact sheet for health care providers](#).

*--Karen Braman*

### **Position Available**

[Rural Health Clinic Director](#)

[Phillips County Health Systems](#)

1150 State St., P.O. Box 607

Phillipsburg, KS 67661-0607

Contact: [Lisa Stone](#), Organizational Development Director

Phone: (785) 540-4914  
Fax: (785) 543-6272  
Email: [lstone@phillipshospital.org](mailto:lstone@phillipshospital.org)  
Website: [www.phillipshospital.org](http://www.phillipshospital.org)

**Apply Online Today!**  
CLICK HERE

The Phillips County Medical clinic director plays a crucial role in ensuring the efficient and effective operation of a rural health care medical clinic within a health system. This position requires strong leadership, organizational skills and a deep commitment to improving the health and well-being of the local population. The rural health clinic director will oversee daily operations, manage staff and coordinate patient care to provide high-quality, patient-centered health care services to the community.

If you have a management position available in your organization and would like it posted in *Current Report*, email the information to [Jan Fenwick](mailto:Jan.Fenwick@kshealthjobs.net). Also, don't forget to check out [www.kshealthjobs.net](http://www.kshealthjobs.net) for other health care openings in Kansas.

--Jan Fenwick

### **Federal and National News**

#### **CMS Announces Drug Manufacturers for Price Negotiation Program**

The Centers for Medicare & Medicaid Services [announced](#) the [drug companies](#) that manufacture all 10 drugs [selected](#) for the Medicare Drug Price Negotiation Program for the first cycle have chosen to participate. The [negotiations](#) with participating drug companies for the selected drugs will occur in 2023 and 2024 with an effective date beginning in 2026.

#### **HRSA Accepts Loan Repayment Program Applications**

The Health Resources and Services Administration is accepting applications for the [National Health Service Corps Students to Service Loan Repayment Program](#). Students in their last year of medical, nursing or dental school may be eligible to receive loan repayment assistance through the program. In return, recipients provide at least three years of service to an NHSC-approved site in a designated health professional shortage area. The application cycle is open through Thursday, Dec. 7.



### **Congress Enacts Stopgap to Keep the Government Open**

Congress enacted a continuing resolution to prevent a government shutdown from occurring on Oct. 1. The legislation will extend the government funding for 45 days through Friday, Nov. 17. [The Continuing Appropriations Act, 2024](#), also will delay the Medicaid Disproportionate Share Hospital payment cuts until Saturday, Nov. 18.

### **CMS Corrects FFY 2024 PPS Payment and Policy Updates**

The Centers for Medicare & Medicaid Services released four correction notices revising wage index values because of correcting one hospital's reported wage data. The correction affects the Medicare federal fiscal year 2024 [acute inpatient](#), [inpatient psychiatric facility](#), [inpatient rehabilitation facility](#) and [skilled nursing facility](#) prospective payment system.

### **CMS Requests Comment on State Medicaid Mental Health Parity**

The Centers for Medicare & Medicaid Services and Children's Health Insurance Program services are [requesting public comments](#) on methods and processes for assessing mental health parity under state Medicaid programs. Comments are due Monday, Dec. 4.

### **U.S. Households Can Order Free At-Home COVID-19 Tests**

U.S. households can again receive four [free at-home COVID-19 tests](#). Tests may show expired dates on the box; however, the Food and Drug Administration has [extended those dates](#). Orders may be placed [online](#) or by calling (800) 232-0233. Orders will ship free beginning the week of Monday, Oct. 2.

### **MLN Connects Provider eNews Available**

The Centers for Medicare & Medicaid Services issued the following updates to MLN Connects Provider eNews:

- [Administration Moves Forward with Medicare Drug Price Negotiations to Lower Prescription Drug Costs for People with Medicare](#)
- [CMS Requests Public Input on Coverage of Over-the-Counter Preventive Services, Including Contraception, Tobacco Cessation and Breastfeeding Supplies](#)
- [Action Plan for Sickle Cell Disease Month](#)
- [CMS Burden Reduction News & Insights Fall Newsletter](#)
- [New COVID-19 Treatments Add-On Payment Ended Sept. 30](#)
- [Clinical Laboratory Fee Schedule: Submit Your Comments](#)
- [DMEPOS: New Provider Enrollment Appeals & Rebuttals Contractor Starts Oct. 9](#)
- [Help Detect Breast Cancer Early](#)



## Before You Go ...

- The American Hospital Association posted a [complimentary, on-demand webinar](#), *Supportive Teams for Managing Mental Health and Suicide Prevention at Work*. The webinar provides models, frameworks and guidelines for creating a safe and supportive environment for team members.
- Washington University's [Center for Advancing Health Services, Policy and Economics Research published research](#) documenting the reduction in uninsured hospital care subsequent to Missouri's Medicaid expansion. The percentage of inpatient and emergency room services for adults ages 19 to 64 that were covered by Medicaid has risen steadily since the expansion of Medicaid coverage to this group in July 2021. This clearly corresponds to a reduction in the percentages of these services provided to uninsured adults during the same period.