

# KHA's Current Report November 3, 2023

# President's Perspective – Celebrate National Rural Health Day

The National Organization of State Offices of Rural Health sets aside the third Thursday of every November to celebrate National Rural Health Day.

National Rural Health Day is an opportunity to "Celebrate the Power of Rural" by honoring the incredible efforts of rural health care providers, communities, organizations, State Offices of Rural Health and other stakeholders dedicated to addressing the unique health care needs of rural America.

Kansas rural hospitals provide essential health care services to a growing population of rural Medicare beneficiaries. More than 900,000 people call rural Kansas home. They provide care 24 hours a day year-round. They ensure Kansans receive the right care, at the right place, at the right time. They not only care for the health of their communities but also contribute to the economic fiber of those communities.

Here are just a few facts about the delivery of health care in rural Kansas.

- 103 Kansas community hospitals are rural
- These hospitals treat more than 64,543 patients annually
- Hospitals and health services are one of the largest employers in the state
- More than 319,488 emergency room visits take place in rural hospitals
- Rural hospitals deliver more than 8,416 babies annually

Rural Kansas is a great place for mission-minded health professionals to provide individualized care. We celebrate all those who go the extra mile to care for rural Kansans!

In an effort to recognize and raise awareness of the innovative rural health infrastructure in Kansas, Governor Laura Kelly has signed a proclamation to mark Nov. 16, as National Rural Health Day in the Sunflower State. She recognized that Kansas rural communities are a fixture for living and working in this state, and rural hospitals are the economic foundation of their communities.

KHA is celebrating National Rural Health Day at the Rural Health Symposium on Nov. 16 in Hays. Topics to be covered at the symposium include Compassionomics: the revolutionary scientific evidence that caring makes a difference, hospital financial strategies, sustaining rural communities and networking roundtables.







#### --Chad Austin

# KHA Comments on Proposed Minimum Staffing Requirement for Long-Term Care

On Sept. 6, 2023, the Centers for Medicare & Medicaid Services published its proposed minimum staffing standards in the <u>Federal Register</u>. The rule would establish minimum staffing standards for long-term care facilities. <u>The Kansas Hospital Association's comment letter</u> points out the impact of the COVID-19 pandemic on staffing, which makes compliance with the proposed regulations in Kansas nearly impossible. KHA suggests a better way to improve safety in long-term care facilities would be to focus on the underlying issues of workforce shortages, insufficient payment rates and regulatory burdens.

The comment period for the rule ends on Monday, Nov. 6. Comments can be submitted to <a href="http://www.regulations.gov/">http://www.regulations.gov/</a>.

--Audrey Dunkel

## Kansas Mobile Integrated Health/Community Paramedicine Summit – Nov. 29

The Kansas Emergency Medical Services Association, United Methodist Health Ministry Fund and Mid-America Regional Council Emergency Rescue are sponsoring the Kansas Mobile Integrated Health/Community Paramedicine Summit in Topeka on Nov. 29. The purpose is to develop a vision for what community paramedicine may look like for rural hospitals and federally-qualified health centers in Kansas. Speakers include national and regional experts with experience in developing community paramedicine programs. There is no charge to attend, but space is limited. Interested individuals are encouraged to <u>register</u> as soon as possible.

--Ron Marshall

# HFMA and KHA All Payers Workshop – Dec. 7-8

The <u>Sunflower (Kansas) Chapter</u> of Healthcare Financial Management Association and the Kansas Hospital Association invite you to attend the All Payers Workshop on Dec. 7 and 8, at the Hampton Inn & Suites and Kansas Star Casino in Mulvane.

The workshop includes presentations from Wisconsin Physician Services, Veterans Administration, TriWest, Optum, UnitedHealthcare, the Kansas Department of Health and Environment, Farm Bureau, Marting Law, Medical Recovery Services, Continuum, KHA, Kansas Division of Workers' Compensation, KanCare managed care organizations (Aetna, Sunflower Health Plan and UnitedHealthcare), Commercial and Medicare Advantage Insurers (Blue Cross and Blue Shield of Kansas, Aetna and Ambetter).

This is an in-person-only event. See the <u>agenda</u> and an <u>event summary</u> for more details. The registration fee is \$100 per person for all attendees.



--Shannan Flach

## LMH Health Receives Inaugural Health Equity Innovation Award

On Oct. 27, at its <u>annual Health Equity Summit</u>, KFMC Health Improvement Partners presented its <u>Health Equity Innovation Award</u> to <u>LMH Health</u> in Lawrence. The summit, in collaboration with multiple state partners, brings together equity leaders and health champions from across Kansas to strengthen and accelerate the shared mission of fairness and optimal health outcomes for all people.

The Health Equity Innovation Award is presented annually to recognize organizations or individuals who have created and implemented new and inventive ways to reduce health disparities and promote health equity in their community. These innovations can include technology-based solutions, community health worker programs, culturally-tailored interventions, social determinants of health interventions, collaborative partnerships and more.

Nominees were evaluated by a panel of independent judges from various sectors that are affected by health disparities and inequities. Other Kansas health care organizations nominated for the award include:

- KAT Residency Program at Heartland Dermatology and Skin Cancer Center, Salina
- Holton Community Hospital, Holton
- Labette Health Diabetes and Endocrinology Clinic, Parsons
- Phillips County Health Systems Phillipsburg
- Stormont Vail Health, Topeka
- Sunset Home Senior Living Community, Concordia

To learn more about the Kansas Health Equity Summit, visit <a href="kfmc.org">kfmc.org</a>.

--Karen Braman

# **Required Medicaid Provider Revalidation Needs Completed**

The Kansas Department of Health and Environment conducted <u>provider revalidation</u> with a small test group of providers. KDHE is working to address the process challenges found during testing and prepared a comprehensive strategy based on the test group findings before resuming provider revalidation in full. In the interim, please continue to update your contact information with the <u>Kansas Medical Assistance Program</u>. If you have questions about the status of your provider revalidation, call (800) 933-6593 or email <u>kansas-provider-enrollment@gainwelltechnologies.com</u>.

--Shannan Flach

# **Call for Rural Hospital Innovation Grant Applications: Round Two!**

The Kansas Department of Health and Environment's Office of Primary Care and Rural Health is preparing for the second cycle for Rural Hospital Innovation Grant applicants. Many rural hospitals are struggling and need to find ways to adapt so they can be prepared for the health care needs of their community now, and into the future. Approximately \$4 million in funding is available for use in transitional assistance related to changing a hospital's current health care delivery model to a model more appropriate for the community that the hospital serves.

Since being passed by the Kansas Legislature in 2021 and funded with \$10 million from the American Rescue Plan Act, the State Office of Primary Care and Rural Health implemented the Rural Hospital Innovation Grant. The grant is available to rural hospitals in Kansas counties for projects with the purpose of strengthening and improving the health care system by innovating and transitioning their model of care in a way that increases access to health care services. The grant is intended to improve the long-term viability of Kansas rural hospitals, allowing them to continue providing the essential services needed to its residents to achieve optimal health.

Currently, more than \$6 million dollars are set to be awarded. The second round of applications is being accepted now with awards planned for December 2023. More information and instructions to apply can be found online.

--Jennifer Findley

# **HRSA Reminds 340B Hospitals about Child Site Registration**

The Health Resources and Services Administration is reinstating a requirement for hospitals in the 340B Drug Pricing Program to register their off-site outpatient departments, known as child sites, with the 340B Office of Pharmacy Affairs to access 340B pricing. HRSA previously provided flexibility regarding the registration of child sites during the COVID-19 public health emergency. The notice <u>includes</u> the following instructions:

"To be registered and continue to be listed in OPAIS as participating in the 340B Program, a hospital-covered entity's off-site, outpatient facility must (1) be listed as reimbursable on the hospital's most recently filed Medicare Cost Report and (2) have associated outpatient costs and charges on the most recently filed Medicare Cost Report."

Hospitals will have 90 days from the publication date to meet the notice requirements. --Shannan Flach

### HHS Update on Paxlovid and Lagevrio Transition to Commercialization

This week, the U.S. Department of Health and Human Services <u>notified</u> COVID-19 therapeutics manufacturers, distributors, pharmacies and the health care payer community that the commercialization transition process for Paxlovid and Lagevrio begins Nov. 1. For Paxlovid, during the transition and through the end of 2024, people who are uninsured and those who have Medicare or Medicaid coverage will continue to access Paxlovid with no out-of-pocket costs through Pfizer's new patient assistance program. Federal entities such as the Indian Health Service, the Department of Veterans Affairs and the Department of Defense will retain access to federally-acquired Paxlovid, as they have accessed the product for the last two years. HHS expects individuals with private insurance will continue to be able to access Paxlovid as coverage is established over the next few months. Pfizer also has stated it is setting up a co-pay savings program for those with private insurance, which will be independent of the patient assistance program.

Lagevrio is an option for eligible individuals who are unable to take Paxlovid or Veklury. HHS expects there to be commercial coverage for Lagevrio as well. For those who cannot afford the product, the Merck patient assistance program will be available to assist certain patients. For more information, see the <a href="https://example.com/hHS/">hHHS/</a> letter.

--Karen Braman

#### **Position Available**

<u>Patient Registration Supervisor</u> <u>Smith County Memorial Hospital</u>

921 E. Hwy 36

Smith Center, KS 66967 Contact: <u>Julie Haresnape</u> Phone: (785) 686-3155 Fax: (785) 282-6331

Website: <a href="www.scmhks.org">www.scmhks.org</a>
Equal Opportunity Employer

Apply Online Today! CLICK HERE The patient registration supervisor is responsible for supervising patient registration at Smith County Memorial Hospital and supervising patient registration and scheduling at Smith County Family Practice. The successful candidate for this position maintains efficient and orderly processes for admitting inpatients and outpatients. The admitting supervisor maintains open communication with other department managers. Qualifications include a high school diploma and three years of experience working in a hospital or physician's office registration department. Knowledge of Cerner is preferred.

If you have a management position available in your organization and would like it posted in *Current Report*, email the information to <u>Jan Fenwick</u>. Also, don't forget to check out <u>www.kshealthjobs.net</u> for other health care openings in Kansas.

--Jan Fenwick

#### **Federal and National News**

## HHS Proposes Rule to Establish Disincentives for Providers Who Information Block

The Departments of Health and Human Services released a proposed <u>rule</u> that establishes disincentives for health care providers who commit information blocking. Information blocking is when a provider "knowingly and unreasonably interferes with the access, exchange or use of electronic health information except as required by law or covered by a regulation."

The proposed disincentives include the following:

- Critical Access Hospitals reduce Medicare reimbursement from 101 percent to 100 percent of cost (excluding sequestration)
- Inpatient Prospective Payment System hospitals the annual market basket update would be reduced by 75 percent
- Merit-based Incentive Payment System physicians receive a zero score in the promoting interoperability performance category
- Advanced Accountable Care Organizations physicians would be deemed ineligible to participate in the program for a period of at least one year

Comments will be due 60 days after the date of publication in the Federal Register.

## CMS Releases CY 2024 Medicare ESRD PPS Final Payment and Policy Updates

The Centers for Medicare & Medicaid Services <u>released</u> the final calendar year 2024 Medicare End-Stage Renal Disease payment and policy <u>updates</u>. CMS estimates hospital-based ESRD facilities will receive an estimated 3.1 percent increase in Medicare payments while freestanding ESRD facilities will receive an estimated 2 percent increase. CMS estimates ESRD prospective payment system expenditures will increase by \$190 million in 2024 as compared to 2023.

#### Agencies Release Proposed Rules to Improve the Surprise Billing Payment Dispute Process

The Departments of Health and Human Services, Labor, and Treasury <u>released</u> a <u>proposed</u> <u>rule</u> to improve the federal Independent Dispute Resolution process. As part of the No Surprises Act, the IDR is designed to create protections against out-of-network balance billing practices. The newly proposed rule "addresses specific issues critical to improving the functioning of the federal IDR process in response to feedback and challenges noted by interested parties." If finalized, the <u>rule</u> would improve communications between payers, providers and certified IDR entities; establish new batching provisions; and change the administrative fee structure. Comments to the agencies will be due 60 days following publication in the *Federal Register*.

# **FMT Releases MBQIP Quality Measures Annual Report**

The Flex Monitoring Team released its <u>national</u> and <u>state</u> Medicare Beneficiary Quality Improvement Project Quality Measures Annual Reports based on 2022 data from Critical Access Hospitals. These reports feature The Medicare Beneficiary Quality Improvement Project quality data, including measures in all four MBQIP domains: patient safety/inpatient, outpatient, patient engagement and care transitions.

# ACA Marketplace Open Enrollment Begins Nov. 1; CMS Launches Window-Shopping

The Centers for Medicare & Medicaid Services <u>released</u> a reminder that the Affordable Care Act Marketplace open enrollment begins Nov. 1 and will close on Jan. 15, 2024. CMS reports that "thanks to the Inflation Reduction Act, nearly 15 million Americans are saving an average of \$800 a year on their health insurance premiums." CMS also states that four in five HealthCare.gov customers will be able to find health care coverage for \$10 or less per month for the program year 2024. CMS released additional details about the <u>2024 plan options</u>, the PY 2024 public use files and information about the Marketplace Quality Initiatives.

#### MLN Connects Provider eNews Available

The Centers for Medicare & Medicaid Services issued the following <u>updates</u> to *MLN Connects Provider eNews*:

- <u>Take Our Provider Survey Today</u>
- Calendar Year 2024 Home Health Prospective Payment System Final Rule
- Calendar Year 2024 End-Stage Renal Disease Prospective Payment System Final Rule
- Behavioral Health: Medicare Pays for 3 Services
- Lymphedema Compression: Medicare Pays for Treatment Items
- Diabetes: Recommend Preventive Services
- Flu Shots Can Take Flu from Wild to Mild

#### Before You Go ...

- The Centers for Medicare & Medicaid Services is hosting a webinar, FY 2024 Review of IPF-Specific Reports for Claims-Based Measures, at 1:00 p.m. Thursday, Nov. 9, for hospitals participating in the Inpatient Psychiatric Facility Quality Reporting program. Registration is required.
- The Centers for Medicare & Medicaid Services is hosting a webinar, *CY 2023 eCQM Reporting and Data Submission Updates*, at 1:00 p.m. Tuesday, Nov. 14, for hospitals participating in the Hospital Inpatient Quality Reporting and Medicare Promoting Interoperability programs. The presentation provides a high-level overview of electronic clinical quality measures reporting requirements and system changes for the calendar year 2023 reporting period. Registration is required.
- A recent <u>study</u> indicates a low rate of naloxone prescribing among emergency departments. The findings of this study should be seen as a reminder to prescribe naloxone to all patients presenting to the ED for any substance use disorder.