

THE FRIDAY

MAILING

Iowa Hospital Association

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EMTALA Focus of February 20 Workshop

Requirements for Iowa's trauma system and hospital based ambulance services will be reviewed on February 20 at Scheman Building, Iowa State Center, Ames, IA. Nancy Ruzicka, bureau chief, Iowa Department of Inspections and Appeals, kicks off a one-day workshop with an overview of EMTALA regulations and implications for Critical Access Hospitals (CAH's) and hospital-based ambulance services. Following this session, Barbara Person, J.D., Baird Holm, will discuss current case law related to EMTALA, CAH's, and hospital based ambulance services. Afternoon sessions led by Mary Jones and Tim Peterson with Iowa Department of Public Health will identify the implications of the "out of hospital trauma triage destination decision making protocol" for Iowa's trauma system.

The target audience for this workshop includes: CAH's hospital-based ambulance services, Hospital Administrators, CFO's, Nurse Execs, Trustees, EMS Physician Medical Directors, EMS Ambulance Service Program Directors (hospital based), Emergency Department Nurse Managers/Trauma Coordinators, and Emergency Department Physician Medical Directors

Enclosed with this week's *Friday Mailing* is a program brochure. To have additional brochures mailed, contact Carol Gander (515) 288-1955 (ganderc@ihaonline.org) at IHA. Register for any IHA program online at www.ihaonline.org. Click on *Upcoming Events*, *2001 Education Calendar, February*, and locate the program you are interested in attending.

AHA Annual Survey

The AHA Annual Survey online is finally here! The AHA Annual Survey contacts should have received your hospital's username and password the third week in December. New to this year's online survey: IHA Swing Bed Addendum Form and the Iowa Department of Public Health Form. All hospitals must complete the AHA Annual Survey as well as the utilization and financial information to comply with the Department of Public Health's reporting requirements.

The AHA Annual Survey will be due on the following dates:

- Hospitals with a June fiscal year end: **January 31, 2001.**
- Hospitals with a September or October fiscal year end: **February 15, 2001.**
- Hospitals with a December fiscal year end: **March 15, 2001.**

If you have any questions about the 2000 AHA Annual Survey or need to extend your survey deadline please contact Jill Goehring (goehringj@ihhs.org) at IHA.

Antibiotic Resistance Rises in Iowa

The percentage of a common type of infection that is resistant to treatment by antibiotics is rising in Iowa, according to a state survey. Data from surveillance of the state's most serious infections, recommended by the Iowa Task Force for Antibiotic Resistance, shows that 27 percent of all invasive pneumococcal infections were resistant to penicillin in the year 2000, this compares to 24 percent during the year 1999.

Pneumococcus is a leading cause of illness in young children and the elderly. It causes ear infections, sinusitis, pneumonia, and one of the most fatal forms of meningitis. Because of the infections' resistance to antibiotics, they are becoming harder to treat.

One of the primary causes of antibiotic resistance is antibiotics' inappropriate use, often for treating viral colds and coughs. Antibiotics are ineffective against those disorders, and should not be used. It's also important for patients receiving appropriate antibiotics to finish all the medicine prescribed. That reduces the chances of microbes escaping the antibiotic and becoming resistant to subsequent treatment. The number of antibiotic-resistant infections is increasing in Iowa, and that's alarming. The Taskforce for Antibiotic Resistance is concerned about this trend even though the numbers are not large. Below are Task Force recommendations to help these infections from continuing to increase.

What you can do to Reduce Antibiotic Resistance

- Do not request antibiotics for viral illnesses such as colds, cough, or flu.
- Take all antibiotics given to you by your physician, even if you are no longer feeling ill.
- Prescribed antibiotics should be targeted to specific bacteria.
- Antibiotic treatment of animals should be limited to those ill or at risk, treating the fewest animals indicated.
- Be vaccinated with appropriate vaccines.

Pneumococcal Facts

- Pneumococcus is a bacteria which causes ear infection, sinusitis, pneumonia, and meningitis.
- It is becoming more difficult to treat these bacterial infections.
- Vaccines are available for children and the elderly to help prevent infections, hospitalization, and death.
- Vaccination is recommended for children and adults aged 65 or older, as well as for anyone at high risk for pneumococcal infection, such as those without a spleen. Ask your doctor for more information.
- In the year 2000, in Iowa, pneumococcus caused serious infections, such as meningitis, in more than 385 people and in over 530 individuals in 1999. Bacterial ear infections are much more common, and pneumococcus is the cause of approximately 40 percent of these infections.

President's Message

Two years of successful advocacy efforts focused on gaining payment relief from the balanced budget act (BBA) of 1997 most likely means that the issue is no longer viable with Congress. That's unfortunate because for Iowa hospitals, the BBA took an estimated \$600 million out of future Medicare payment funding streams. Payment relief via the 1999 Balanced Budget Relief Act (BBRA) and the 2000 Benefits Improvement and Protection Act (BIPA) will restore only \$200 million in lost payments. Hence, Iowa hospitals must still absorb a *\$400 million payment deficit* for a state with an estimated aggregate Medicare margin of **-13%** for FY 2000.

In addition to the BBA relief "fatigue" environment in Washington D.C., the Medicare payment advisory commission's (MEDPAC) annual release of hospital financial data claims a national 5.9 percent overall Medicare profit margin based on preliminary 1999 data. Although Iowa hospitals can convince members of the Iowa Congressional Delegation that that's just not the case in Iowa, this MEDPAC announcement has a chilling impact on the overall Washington environment as it relates to new BBA relief issues for 2001. Further shaping this "big picture" is the growing workforce crisis. That issue is being vigorously managed, at least in the short term, with higher wages and salaries and skyrocketing contract labor costs. Recently released information from the Federation of American Hospitals predicts that wage and benefit costs will increase 6-8 percent over the next 12 months and that contract labor costs will explode 30-40 percent. This bad news comes at a time when Medicare is scheduling yet another meager and inadequate 3 percent inflation adjustment for FY 2002.

So having made a strong case that Iowa hospital payment issues continue to require special attention from Congress, the IHA Board on January 18 approved a comprehensive 2001 federal advocacy agenda that will include:

- ✓ Medicare inflation adjustments for *all* hospitals sufficient to address growth in hospital expenses;
- ✓ Medicare fee-for-service equity relief; and
- ✓ Cost + Medicare payment for rural hospitals for *all* Medicare services.

Over the next few weeks, this **President's Message** will provide greater detail on each component of this 2001 federal advocacy plan which will be shared with all members of the Iowa Congressional Delegation as well as national and regional organizations sharing our interest in furthering this important agenda.

--Steve Brenton

DATABANK May Be Received

Thanks to the following hospitals for submitting their December 2000 DATABANK input forms by the January 22, 2001 due date. If you don't see your hospital here, there is still time to submit your monthly input form. You can either submit your form via the Internet (www.databank.org) or fax it to Jill Goehring at (515) 283-9366.

Adair County Memorial Hospital*	Mary Greeley Medical Center*
Alegent Health Community Memorial Hospital	Mercy Iowa City*
Alegent Health Mercy Hospital-Corning*	Mercy Hospital of Franciscan Sisters
Audubon County Memorial Hospital*	Mercy Medical Center – Clinton*
Avera Holy Family Health*	Mercy Medical Center –Des Moines*
Baum-Harmon Mercy Hospital*	Mercy Medical Center – Dubuque*
Belmond Medical Center*	Mercy Medical Center – New Hampton*
Boone County Hospital	Mercy Medical Center – North Iowa
Cass County Memorial Hospital*	Mercy Medical Center – Sioux City*
Central Community Hospital*	Merrill Pioneer Community Hospital*
Clarinda Regional Health Center*	Mitchell County Regional Health Center*
Clarke County Hospital*	Northwest Iowa Health Center*
Community Memorial Hospital – Clarion*	Orange City Health System*
Covenant Medical Center	Ottumwa Regional Health Center*
Crawford County Memorial Hospital*	Palmer Lutheran Health Center, Inc.*
Davis County Hospital	Pella Regional Health Center*
DeWitt Community Hospital	People's Memorial Hospital*
Dickinson County Memorial Hospital*	Regional Health Services of Howard Co.*
Ellsworth Municipal Hospital*	Regional Medical Center*
Floyd County Memorial Hospital*	Sartori Memorial Hospital
Floyd Valley Hospital*	Shenandoah Medical Center
Fort Madison Community Hospital*	Sioux Center Community Hospital/Health Center*
Franklin General Hospital*	Sioux Valley Memorial Hospital*
Genesis Medical Center*	Skiff Medical Center*
Great River Medical Center*	Spencer Hospital*
Greene County Medical Center	St. Luke's Health System, Inc.*
Guthrie County Hospital*	Story County Medical Center*
Guttenberg Municipal Hospital	Trinity Regional Hospital*
Hegg Memorial Health Center	Unity Health System
Jefferson County Hospital*	Veterans Memorial Hospital
Jennie Edmundson Hospital*	Virginia Gay Hospital*
Keokuk County Health Center*	Wayne County Hospital*
Lucas County Health Center*	Winneshiek County Memorial Hospital*

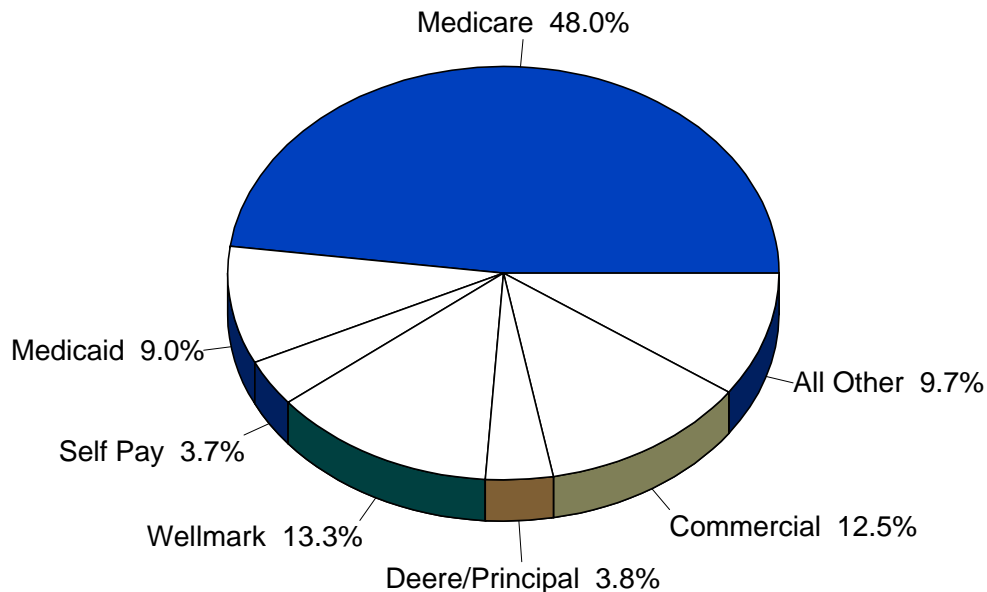
* Indicate hospitals that have submitted over the Internet.

Thompson Confirmed as HHS Secretary

Former Wisconsin Governor Tommy Thompson was confirmed as President Bush's Secretary of Health and Human Services by a unanimous Senate vote on January 24. Thompson takes over from Donna Shalala in guiding the nation's health care policies. Among issues Thompson indicated he plans to address are reforming the Health Care Financing Administration, eliminating overly burdensome regulatory provisions, Medicare prescription drug benefits, and a patient's bill of rights.

Medicare Accounts for the Highest Number of Discharges in Iowa Hospitals & Health Systems

Medicare recipients accounted for 48.0 percent of acute discharges in Iowa hospitals and health systems in January-October 2000 according to data from the IHA DATABANK Program. Persons with Wellmark coverage and commercial insurance accounted for 13.3 percent and 12.5 percent of discharges, respectively. Persons with Medicaid coverage accounted for 9.0 percent of discharges. Self pay accounted for 3.7 percent of discharges and Deere/Principal accounted for 3.8 percent of discharges. Contact Perry Meyer (meyerp@ihaonline.org) at IHA with any questions.



Member -Abilia

Eric Crowell has been named President/CEO of Iowa Methodist Medical Center, Iowa Lutheran and Blank Children's Hospital. A Des Moines native, Crowell currently serves as President/CEO of Iowa Health System's Trinity Regional Health System in the Quad Cities. Crowell will assume his new duties on February 26.

The Iowa Hospital Association has earned a Red Feather Circle Award for its successful campaign from the United Way of Central Iowa. IHA is one of only 73 companies in Central Iowa to receive this award, based upon both a percent of employees contributing and the average employee gift exceeding a specified dollar amount.

Medicaid to Hold Waiver Training

The Iowa Department of Human Services (DHS) will hold ICN training on February 7 from 8:30 a.m. to 2:45 p.m. to provide information regarding the six Medicaid home and community based waiver programs. These waivers provide service funding and individualized supports to maintain eligible consumers in their homes or communities that would otherwise require care in a medical institution and include many services provided by hospitals, such as home health, nursing care, respite, counselor services, and adult day care.

The training has been developed to assist persons who have some degree of familiarity with the waivers and have specific questions and training requests. The agenda will cover items such as locating waiver information on the DHS website, providing consumer directed attendant care in an assisted living facility, tracking waiver respite hours, and the relationship between the Department of Health and the waiver programs. A complete agenda is enclosed in this week's *Friday Mailing*, along with a list of ICN sites to view the program. Two additional ICN training sessions will be held later this year on June 6 and October 3.

Outpatient Compliance Program Planned for April

To ensure your hospital's compliance with the policies of Medicare's ambulatory payment classification (APC) system, IHA is offering a one-day program *APC Institute: Outpatient Compliance Action Plan and Regulatory Update*. Recommendations for monitors; an update on the most recent HCFA releases on APC policies and procedures; and tools for addressing APC policy, source of the policy, recommended action, and hospital data needed to ensure compliance, will be provided. Lolita Jones, one of the country's leading authorities on hospital outpatient and ambulatory surgery center coding, billing, reimbursement, and operations, will serve as faculty.

Plan to attend this informative program on April 4, 2001 at the Scheman Building in Ames, IA. Registration materials will soon be available, as well as online registration at www.ihaonline.org Contact Carol Gander (ganderc@ihaonline.org) at 515/288-1955 for more information.

IHA Information Center Staff

You know the IHA Information Center is *the* source for health care data in Iowa, but did you know our staff is our greatest resource and we are here to assist you. Since 1986 the Information Center staff have gathered, analyzed, and interpreted data about Iowa hospitals and health systems. Whether you are trying to decide which database to utilize or how to read a Patient Origin and Destination Study, the Information Center staff is available to fulfill data request, interpret information, and determine what data products/services to use. We can assist you in answering the data questions you have as well as help you ask the right questions in your search for data. The

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Information Center staff is committed to providing high quality data products and services, and a quick response to your data requests. For more information on the IHA Information Center call (800) 240-1046 or email us at InformationCenter@ihaonline.org

Enclosures for this week's *Friday Mailing*:

1. *Newsstand*
2. *Legislative Bulletin #3*

For institutional members only:

3. *ServiSharings*
 4. *EMTALA brochure*
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“ HCFA is a mess ”

*--Senator Don Nickles, R-OK, speaking at the
Thompson Senate hearings.*