



Healthcare Association
of Hawaii

MEMBER VALUE

FY 2011-2012

Unified voice for health care



BIRTHING CENTER ► CHILDREN'S HOSPITALS ► PEDIATRIC CARE ► HOSPITALS ►
URGENT CARE ► ORGAN TRANSPLANT ► WELLNESS CARE ► EMERGENCY ROOM
► MEDICAL SCHOOLS AND TEACHING HOSPITALS ► COMMUNITY HOSPITALS ►
PHARMACY ► BLOOD BANK ► ACUTE CARE ► HEART SERVICES ► INPATIENT
REHABILITATION ► DIAGNOSTIC LABORATORIES ► MEDICAL SUPPLIES ► BONE AND
JOINT CARE ► STATEWIDE EMERGENCY OPERATIONS ► SURGERY CENTERS ► SKILLED
NURSING FACILITIES ► ONCOLOGY ► HOME CARE ► ASSISTED LIVING ► HOSPICE





COLLABORATION
ADVOCACY HOSPICE
COMMUNITY
HOME CARE
LONG TERM **EDUCATION**
HEALTH CARE
REIMBURSEMENT
HAWAII PROVIDER
COMMITMENT
EMERGENCY SERVICES
BENEFIT VALUE
NATIONAL
ACUTE **QUALITY**
ACTION





Legislative Action

15 bills from HAH's legislative package passed the legislature in 2012.

- HB2275 Hospital Sustainability
- SB2466 / Act 156 Nursing Facility Sustainability
- SB2958 Bone Marrow Transplant
- HB2023 / Act 53 Center for Nursing Funding
- SB2320 Kupuna Care
- SB2779 Aging and Disability Resource Centers
- HB1953 Emergency Services Appropriation, Leeward Oahu
- SB2126 / Act 93 Health Care Licensing Consolidation
- HB1957 Health Information Law
- SB2816 Hospital Inspections
- SB2808 / Act 31 Medicaid Emergency Appropriation
- HB608 / Act 1 Organ Transplant Appropriation
- SB2383 SPRB for Queen's
- SB2939 SPRB for St. Francis
- SB2827 Trauma System Special Fund

Bill with Adverse Effect Stopped

- HB 1699 Meal Breaks

- Restoring budget cuts
- Increasing federal funds
- Stopping price controls
- Appropriating funds
- Streamlining accreditation



Signing ceremony for SB2466

HB2275 Hospital Sustainability Bill

- Brings in **\$21.5 million** in new federal funding for private hospitals.
- Public hospitals will retain CPEs, which will generate approximately **\$17.5 million** in federal funds.
- Allocation to State of 7% provides **\$2.8 million** to State [doubled to \$5.6 million with federal match if used for Medicaid services]. From the 7%, \$800,000 must be used for Medicaid covered services to benefit public and private hospitals.
- **Medicaid reimbursements would move from covering 70% of costs to 83%.**

SB2466 / Act 156 Nursing Facility Sustainability Bill

- Secures \$9.5 million in additional federal funds for private nursing facilities.
- Allocates 12% [\$1.4 million plus \$1.4 million federal matching funds] to DHS to support restoration of the 3% reimbursement cut implemented in 2011.
- Brings Medicaid reimbursement for nursing facilities from losing \$10 per patient per day to roughly covering costs.



Shaping National Policy

HAH secured co-sponsorship by all four members of Hawaii's Congressional delegation for important hospice and home health legislation.

The Hospice Evaluation and Legitimate Payment (HELP) Act (S.722/H.R.3506) would change existing Medicare hospice policy by: Testing and ensuring an appropriate transition to the new hospice payment system; Refining the hospice face-to-face encounter requirements; and Requiring surveys of hospice programs every three years.

The Home Health Care Planning Improvement Act (S.227/H.R.2267) is intended to allow nurse practitioners, clinical nurse specialists, certified nurse midwives, and physician assistants to sign home health plans of care.

To date, Hawaii is the only state in the nation to have its full delegation co-sponsoring both bills!

Advocating for Hawaii's best interests:

- Federal support for COFA migrants living in Hawaii
- Continued DSH payments
- Reauthorization of the Pandemic and All-Hazards Preservation Act
- Passage of the Medical Surge Capacity Act
- Transfer of unused Medicare GME slots to Hawaii
- Opposing cuts to Medicare and Medicaid
- Increasing Medicare and Medicaid reimbursement for Hawaii
- Children's hospital GME funding
- Rural hospital reasonable cost reimbursement for lab services
- Payment adjustment for low-volume hospitals
- Area wage index
- Health reform implementation
- Workforce issues



President & CEO George Greene with US Senator Daniel Inouye



Vice President & COO Rachael Wong with US Congresswoman Mazie Hirono



Hawaii hospice executives supporting HELP Act: US Senator Inouye with Jeannette Kojane, ED of Kokua Mau; Laura Varney, ED of Hospice of Kona; Brenda Ho, CEO of Hospice of Hilo; Lori Miller, ED of Kauai Hospice; and Ken Zeri, President & CPO of Hospice Hawaii



Quality

The HAH-led Hawaii Affinity Team is one of only 26 Hospital Engagement Networks (HEN) across the country selected for CMS Innovation Center's Partnership for Patient's initiative.

- \$180,000/yr 2-3 years towards quality improvement for providers in the state
- Hired a Hawaii Clinical improvement Advisor
- Working with HHIC and Premier on developing electronic data submission to avoid duplication of reporting

HAH received a \$70,000 grant in 2012 from the Agency for Healthcare Research and Quality (AHRQ) and the Health Research Education Trust (HRET) to continue work on the CUSP CAUTI project with Johns Hopkins.



Goals of the Hawaii Affinity Team:

- Reduce patient harm by 40% by 2013
- Reduce avoidable readmissions by 20%



Sharing best practices at the Partnership for Patients regional meeting in Hawaii

Member Visibility



Emergency Services

HAH Emergency Services is a Model for the Nation

- One of 3 federally recognized healthcare coalitions (along with Indianapolis and DC), basis for 2012 federal guidance
- Cited by Rand as best practice
- 2006 Centers for Disease Control and Prevention (CDC) designated as best practice – only one in the country
- Services has been recognized as a top-performer and model program by the United States Department of

Health and Human Services

- HAH Emergency Services Director sat on national expert panel to redesign Hospital Preparedness Program



HAH Emergency Services, a division of the Healthcare Association of Hawaii, provides emergency preparedness and operations management services to over 115 health care coalition members throughout the state of Hawaii including hospitals, nursing homes, assisted living facilities, home care and hospice, community health centers, air and ground ambulance, blood banks and clinical laboratories.

Emergency MANAGEMENT

Communications

Statewide warning and notification system consisting of Everbridge™ and a 24 hour, 7 day-a-week staff duty officer available to activate HAH services in an emergency. Statewide telecommunications system consisting of satellite-based radiotelephones, deployable radio and computer networks, patient tracking and an integrated digital crises information system known as WebEOC®.

Coordination

Statewide coordination of coalition response supported by the HAH Emergency Operating Center in Honolulu and area coordinators located in all county civil defense Emergency Operating Centers.

Response

Deploy emergency response teams (Hawaii Disaster Medical Assistance Team and Kalawao Rescue): casualty care, aeromedical transport, medical surge and incident management. Mobilize health care delivery systems: 20 and 50 bed acute care modules, disaster aeromedical staging facilities.

Logistics

Provide specialty logistical support with pre-positioned stockpiles of medical equipment, supplies, and pharmaceuticals on five islands.

Preparedness

Training programs delivered on-site, at the HAH training facility and in the field. Support for organizational, county, state and federal level disaster exercises. Technical assistance on matters of emergency planning, accreditation, emergency operations and management.



EDUCATION

HAH offered more than 22 free or reduced-rate educational opportunities for members in the 2011-12 fiscal year.

- **Joint Commission annual conference**
- Emergency Preparedness
- Webinars through AHA, AHCA and NAHC and best practice programs
- Transitions of Care Breakfast Meeting with Foundation Leaders
- Allscripts Care Management and HAH of Hawaii Leadership Summit
- Grant Funding Opportunities Educational Session
- Jim Champy Presentation – “Re-engineering Healthcare”
- CAUTI Conference
- Various ACO presentations to general membership and to member Boards of Directors
- Various Educational Sessions on Health Reform
- Educational Presentation on Value Based Purchasing by Dr. Betsy Thompson (CMS)
- Educational Session on Health Insurance Exchanges
- HCH Audio In-Service from Beacon Health
- Joint Commission Resources Workshop
- **Medicaid Stakeholder’s Healthcare Summit**
- LTC Educational Conference
- QIO Conference – HAH Presentation on Quality Initiatives
- HAH Annual Membership Meeting
- Joint Commission Update Presentation by Mark Crafton
- HMSA & Hawaii Hospitals (CEOs) by Premier - Quality Initiative
- **Regional Partnership for Patients Conference**
- QIO Conference “Achieving Healthcare Excellence Together”

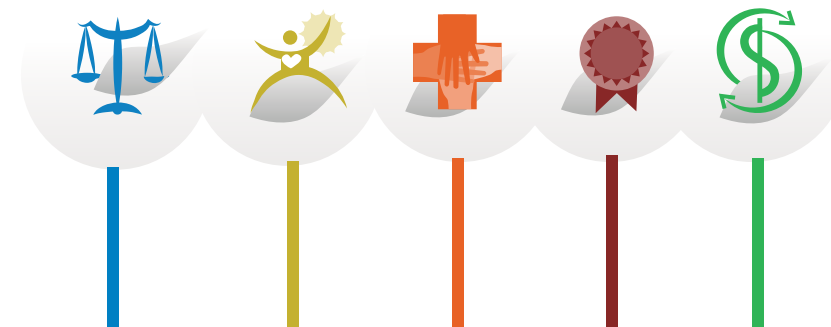


Leading Collaboration

Case in Point: Mitigating and managing the impacts of HMC Closures

Collaborations and systems already in place worked well in the crisis situation caused by the closure of Hawaii Medical Centers.

- The immediate needs of all patients at HMC facilities were met by skilled nursing facilities, care homes, and hospitals.
- HAH Emergency Services worked with Honolulu and state EMS to coordinate the distribution of affected patients.
- HAH’s emergency services team has been in touch with EMS daily to track response times and transport times.
- Emergency Management Committee has been working closely together to address the ongoing strain to remaining emergency departments.



Membership: Return on Investment

HAH leveraged **more than \$58 million** in direct monetary benefit for members this year.

\$250,000 statewide quality improvement - Partnership for Patients and HRET grant to reduce CAUTI

\$6.4 million restoration of 2011’s 3% cut to skilled nursing facilities

\$31 million in new federal funds through sustainability programs

\$17.5 million re-directed State funds to offset reductions in general fund appropriations to public hospitals

\$400,000 elimination of duplicate accreditation costs

\$3 million saved costs from lack of enforced meal breaks

Leveraged National Resources





The leading voice of health care since 1939