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Register: Free Webinar on MAPS PSO Top Patient Safety Issues Is May 13

Falls are a perennial concern for patient safety professionals, while virtual nursing and artificial intelligence (AI) represent two major emerging issues with patient safety implications. A [complimentary webinar](#) on May 13 will address these three top issues.

All members are encouraged to attend the webinar offered by the Midwest Alliance for Patient Safety (MAPS) Patient Safety Organization (PSO), a non-profit subsidiary of IHA. During the program, from 2-3:30 p.m. CT, expert presenters will discuss:

- How an individualized patient care plan can prevent falls;
- The impact of virtual nursing in multiple care settings; and
- How artificial intelligence is becoming a part of patient care.

The three issues come from MAPS' annual white paper outlining the top 10 patient safety concerns to address each year. The white paper, a benefit for MAPS membership, includes best practices, strategies and resources to guide patient safety professionals in their efforts to improve care and patient outcomes.

See our [summary flyer](#) of the top 10 issues for 2024. The webinar will also highlight each top 10 issue. Continuing education credit is available for nurses and nurse leaders.

The webinar will benefit nurses, advanced practice nurses, certified nursing assistants, clinical educators, patient safety officers, quality and patient safety leaders, risk managers, physicians and physician assistants, and pharmacists. [Register today.](#)

[Contact us](#) with questions.

## Medicare Advantage Session at IHA Small & Rural Hospitals Meeting

Heavily marketed by insurance companies and third party brokers, Medicare Advantage (MA) plans have significantly grown their enrollment, now providing coverage for over 33 million Americans over age 65. Nearly 40% of MA enrollees reside in rural communities.

As MA plans expand, hospitals nationwide have expressed alarm over claims-payment practices. The [2024 IHA Small & Rural Hospitals Annual Meeting](#) will address the challenges of MA for rural and critical access hospitals that are "especially impacted" by "prior authorization, payment audits and delays and denials of patient care by some MA plans," according to the American Hospital Association.

Kevin Thilborger, of the Nashville-based consultancy Unlock Health, will lead the MA session during the one-day meeting on June 27 in Springfield. Thilborger has assisted health systems of all sizes in assessing and implementing fee-for-service, pay-

for-performance and capitation contracts.

In the session, "Medicare Advantage Contracting Considerations and Implications," Thilborger will:

- Explore the complex landscape surrounding MA plans; and
- Identify variables for hospital leaders to better assess MA contracts.

After Thilborger's presentation, you'll hear from a panel of hospital and health system leaders on their efforts to drive change with MA and strengthen their organization's financial stability. See our [program brochure](#) to learn more about the annual meeting. [Click here](#) to register.

In addition, IHA is offering a small and rural webinar series with its remaining sessions on [May 14](#), [Aug. 20](#) and [Nov. 19](#). The May 14 session will focus on empowering middle managers, who are uniquely positioned to connect hospital priorities to daily activities. [Click here](#) to register for the webinars.

[Contact us](#) with questions.

#### Expanding Access to Care in Rural Communities With 340B Savings

It's been over 30 years since the federal 340B drug discount program required pharmaceutical companies to sell drugs at a discount to healthcare organizations. Yet, in 2020, pharmaceutical companies began restricting the ability of 340B hospitals to distribute discounted drugs through contract pharmacies.

At Carle Health, an eight-hospital system based in Urbana serving mainly rural communities, those restrictive measures have caused its volume of 340B-priced prescriptions to dwindle to almost nothing. As a result, the health system has lost a vital funding source for its efforts to expand access to care and to provide free and discounted care and medications.

Carle Health hospitals use savings from the 340B program to offer a variety of initiatives that benefit patients and stretch scarce federal resources, just as the 340B drug discount program intended. These initiatives include:

- Assisting patients in obtaining transportation for healthcare services;
- Providing the opioid overdose reversal drug Narcan to local police departments and to families of patients with opioid use disorder;
- Expanding high-quality healthcare in rural communities for both primary care and specialties;
- Establishing the Transitional Care Clinic to provide intensive intervention services to medically complex patients immediately following hospitalization; and
- Providing laboratory services to individuals living with HIV in the East Central Illinois HIV Care Connect program.

Like many hospitals and health systems across Illinois, Carle Health is confronting increased operational costs. Yet the health system remains committed to providing patients with high-quality care and supportive services to help them achieve optimal health.

IHA is advocating for [Senate Bill 3727](#) to prohibit drugmakers from interfering with hospital pharmacy contracts. See our 340B [landing page](#), "Increasing Access to Affordable Drugs," for more hospital stories, and an [infographic](#) and [fact sheet](#) on the impact of drugmaker restrictions.

[Contact us](#) with questions.

#### Reminder: Hospital Report Card Preview Webinar April 29

As a reminder, hospital staff are invited to participate in a complimentary Illinois Dept. of Public Health (IDPH) webinar from 10-11 a.m. CT this Monday, April 29. The webinar will assist hospitals as they prepare to submit the [Illinois Hospital Report Card and Consumer Guide to Healthcare](#) (Hospital Report Card).

Prior to publishing new facility-specific data online, IDPH provides facilities with 30 days to review their data and submit any necessary corrections or clarifications before publishing the next Hospital Report Card update in summer 2024.

The webinar will:

- Give updates on the submission process;
- Provide general hospital reporting information;
- Offer a live demo facility preview process; and
- Answer questions on the Illinois Hospital Report Card.

[Click here](#) to register. For questions regarding this preview, including login access for additional users, contact IDPH's Division of Patient Safety and Quality at [dph.hrcpreview@illinois.gov](mailto:dph.hrcpreview@illinois.gov).

Following the webinar, a notice of the 30-day preview will be sent to hospitals to review their data. The notice will contain instructions for login access. Facilities should follow the instructions to log into the system and either acknowledge approval of their data or request corrections. Failure to respond before the deadline will imply approval of the data.

#### New National Strategy for Suicide Prevention

On Wednesday, the U.S. Dept. of Health & Human Services (HHS) [released details](#) of a plan for more than 200 actions across the federal government to address high rates of suicide. HHS underscored that suicide is an urgent and growing public health crisis. More than 49,000 people in the U.S. died by suicide in 2022. That's one death every 11 minutes. Populations in the U.S. disproportionately impacted by suicide include non-Hispanic American Indian and Alaska Native youth, middle-aged and older adults, non-Hispanic white males, rural populations, and veterans, among others. In particular, rural communities continue to see increases in suicide rates. According to 2023 data from the Centers for Disease Control and Prevention, [suicides in non-urban environments increased 46%](#) between 2000 and 2020.

#### COVID-19 Information

The Illinois Dept. of Public Health (IDPH) has launched a weekly [Infectious Respiratory Disease Surveillance Dashboard](#) that will be updated weekly on Friday. This report provides the public with the latest data on hospital visits, seasonal trends, lab test positivity and demographic data.

[Click here](#) to visit the IDPH COVID-19 resources webpage. IDPH will continue to report the weekly number of people with COVID-19 admitted to hospitals from emergency departments, deaths and vaccinations, with COVID-19, influenza and respiratory syncytial virus information also reported through the dashboard of the [Illinois Wastewater Surveillance System](#).

#### Briefly Noted

Yesterday, the Food and Drug Administration (FDA) approved Pivya (pivmecillinam) tablets for the treatment of female adults with uncomplicated urinary tract infections (UTIs). "Uncomplicated UTIs are a very common condition impacting women and one of the most frequent reasons for antibiotic use," the FDA said in a [statement](#). Pivya will provide an additional treatment option for uncomplicated UTIs in females 18 years of age or older. Approximately one-half of all women experience at least one UTI in their lifetime.

#### Leading the News

*Doctors and patients loathe 'step therapy' rules, but insurers say they're necessary. An Illinois bill would prohibit the practice.* Chicago Tribune [reported](#) (4/25) that, "It's not uncommon for health insurance companies to impose requirements, which are called step therapy or 'fail first.' Step therapy is when a doctor prescribes a treatment or medication for a patient, but the insurer requires the patient to instead try different treatments or medications first. Only when the first medications or treatments fail to work, will the insurer agree to cover the ones originally prescribed. It's one of a number of health insurance practices that Gov.

J.B. Pritzker has set his sights on reforming this legislative session. A bill now making its way through the state legislature would prohibit health insurance plans from requiring step therapy for prescription medications and procedures, among other reforms.”

#### *How leaders are building the healthcare workforce pipeline*

Becker's Hospital Review [reported](#) (4/24) that, “The workforce is top of mind for hospitals and health systems, and executives are investing in retention and upskilling to address shortages and reduce reliance on contract labor. While leaders understand they must address short-term workforce needs, they also understand they must build a robust talent pipeline with candidates who are ready to fill roles years down the road.”

#### *US Chamber of Commerce sues to block FTC noncompete ban*

Becker's Hospital Review [reported](#) (4/24) that, “The U.S. Chamber of Commerce is asking a federal court to halt the Federal Trade Commission’s noncompete ban, alleging it violates the law in ‘numerous ways.’”

#### *A new metric may provide insight into healthcare disparities*

Becker's Hospital Review [reported](#) (4/24) that, “A Johns Hopkins Bloomberg School of Public Health study suggests nearly 80% hospitals admit a significantly different proportion of Black Medicare patients age 65 and older compared to those admitted to any hospital in that market — which could point to racial sorting.”

#### *25 most expensive hospital drugs*

Becker's Hospital Review [reported](#) (4/24) that, “Keytruda (pembrolizumab) was nonfederal hospitals’ costliest drug expense in 2023, according to research published April 24 in the American Journal of Health-System Pharmacy.”

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