



HOSPITAL AND HEALTH SYSTEMS *Hotline*

• VERMONT ASSOCIATION OF HOSPITALS AND HEALTH SYSTEMS • 148 MAIN STREET • MONTPELIER, VERMONT 05602 • 802-223-3461 •

OCTOBER/NOVEMBER 2002 PRESIDENT'S MESSAGE



The November elections ushered in new political eras in both Washington D.C. and Montpelier. These changes will no doubt add new twists and opportunities to our ongoing federal and state health care debates.

With the new GOP control of Congress and the White House, the prospects for some health care issues will

change dramatically. The patient's bill of rights legislation for example, had been inching closer to passage over recent years. That progress will likely evaporate. On the other hand, Medical malpractice and tort reform legislation has gone nowhere until recently. With the new political landscape, this issue will now leap to the forefront of Congress' health agenda. Voters will also see tax credits proposed as the favored solution for covering the uninsured, although disagreements will linger on the parameters for which health coverage bought on the market ought to qualify for federal subsidies.

Prescription drug reform will also be in next year's legislative limelight, but passage still is not a sure bet. Republican leaders have advocated for a prescription drug benefit that would be based on private insurers to manage. As such, the bill the House passed earlier this year (H.R. 4954) on prescription drugs would likely be resurrected in the 108th Congress. Democrats favor expanding Medicare to include prescription drugs, leaving Republicans hard pressed to secure the 60 Senate votes they'll need to avoid a filibuster on this issue.

The big question for most providers is: Will Congress pass the provider relief bill that they failed to pass just before the elections? Last year, the House had passed \$30 billion in payment relief and the Senate unsuccessfully tried several times to pass a \$43 billion compromise measure under unanimous consent. When the

108th Congress begins in January, this debate will begin anew when the Bush Administration unveils its FY 2004 budget in early February. The Bush Administration health care priorities will no doubt be tempered by the war on terrorism and a growing federal budget deficit.

Even with that reality, GOP leaders are already talking about a Medicare bill as a mass vehicle to "fix" a number of health care issues – and provider advocates hope to include payment relief into that bill. New committee developments are also favoring northern New England hospitals. The new Senate Finance Chairman, Senator Grassley (R-IA), hails from a rural state. Senator Grassley has pledged to build Medicare equity for low-cost states (like Vermont), that were "shortchanged under the current payment formula."

Senator Judd Gregg (R-NH) will also be the incoming chairman of the Senate Committee on Health, Education, Labor and Pensions (HELP). Sen. Gregg says he is committed to helping the uninsured and working insured find access to affordable health coverage. He also has pledged to work with Sen. Grassley to improve access to affordable prescription and generic drugs and to craft a drug benefit under Medicare. If federal legislators take action to create a Medicare bill early in the 108th Congress, Vermont hospitals and other health care providers will still have a promising avenue for Medicare relief.

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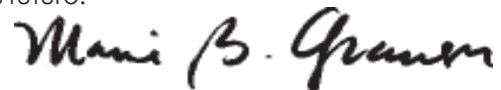
The newest member of our federal "delegation" is also central to our state legislative agenda – Governor-elect Jim Douglas. Governor-elect Douglas is already keenly aware of his key role in federal health care issues. His health care advocacy for Vermont will be critically important on issues such as: health care access, federal Medicaid payments and waivers, Medicare payments, and area wage issues.

Governor-elect Douglas will have plenty of health care issues to keep him engaged in Montpelier as well. With Democrats controlling the Senate and a close margin favoring Republicans in the House, not much will happen without considerable compromise. In fact, aside from passing a very difficult budget this year, not much at all may happen.

The Association has already been busy laying the groundwork for what we hope will be a positive legislative session. A key focus will be changes to the Certificate of Need (CON), and Budget regulations. The recent turmoil at Fletcher Allen has presented health care policymakers with an interesting opportunity. Should they "react" to Fletcher Allen's failure to fully apply for a CON permit with criminal penalties and global mandates? Or should legislators take in the broader question of how to learn from this issue? Just as Fletcher Allen now must take the appropriate steps to rebuild their community's trust and support, the Association must also help legislators dialogue and consider whether to create an improved regulatory structure that promotes trust, ensures oversight and balances cost-control with innovation. Last week's Public Oversight Commission's (POC)

roundtable discussion on their role in the CON and budget processes was a good first step. We look forward to continuing the POC's discussion and will work to create other opportunities in the legislature and in the public debate.

Many other health care issues will be heard in the legislature's health care and finance committees, with Medicaid topping the list. The Association will be sending out position papers and other materials to our board in early December for their use and review. We look forward to many lively health care discussions throughout Vermont this session and hope they will bring us closer to a shared health care vision for Vermont's future.



LEGISLATORS ENTHUSIASTIC ABOUT HEALTH POLICY DAY IN DECEMBER

Post-election interest in the "Health Policy Day for Legislators" that VAHHS is co-sponsoring on December 14th has been very enthusiastic, with almost twenty legislators already registered. More than twenty health care and business organizations have co-sponsored this event, including: The Vermont Medical Society, The Snelling Center, AARP, COVE, The Vermont Business Roundtable and others. This educational day for legislators is wholly focused on health care, under the premise that legislators who understand health care better will make better health care decisions.

We'll begin the morning with a broad overview by Dr. Stuart Altman, followed by a "past is prologue" discussion of Vermont's health care history by Dr. Churchill Hinds. Dr. Altman will then speak at lunch about future health care trends, with the afternoon reserved for dialogue groups on present-day health care issues. Dr. Altman is an economist with more than 35 years of health care experience. Among his many accomplishments, he served for more than twelve years as the Chairman of the Prospective Payment Assessment Commission (ProPAC). ProPAC was responsible for advising Congress on Medicare issues. Dr. Altman now teaches at the Heller School for Social Policy and Management at Brandeis University. Dr. Churchill Hinds, a seventh generation Vermonter, has a PhD in hospital and health administration. He is currently the President and CEO for one of the largest home health agencies in northern New England – the VNA of Chittenden and Grand Isle Counties. Dr. Hinds has also served as the Deputy Secretary for Administration and the Commissioner of Finance and Management in Vermont.

This event is open to new and returning legislators. To attend or if you have any questions please contact Martha Buck at VAHHS (802-223-3461).

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BECOME A CRITICAL CARE NURSE!

By Kathleen Scacciaferro, RN, MSA
Nurse Manager of Critical Care,
Fletcher Allen Health Care

Critical Care nursing is exciting, challenging and very rewarding! Become a Critical Care Nurse! The Critical Care Nursing Internship Program was developed to provide Registered Nurses the necessary knowledge and skills in the specialty of critical care nursing. The goals of the statewide program are 1) to increase the number of nurses who are skilled as critical care nurses to meet our increasing census and acuity of critically ill adults in Vermont hospitals; and 2) to decrease our dependency on very expensive, nonresident, "traveler" nurses.

The Critical Care Nursing Internship Program was first offered to meet the growing need for the specialty of critical care nursing at Fletcher in November 1998, by Dottie Flowers, RN, Critical Care Nurse Educator and Kathleen Scacciaferro, RN, MSA, Critical Care Nurse Manager. The competency-based program combines didactic and a clinical preceptorship. The first three 20 week programs offered at FAHC were very successful in recruiting nurses nationally as well as offering continuing education for FAHC nurses to provide specialized care of the critically ill adult. Thirty nurses completed the Critical Care Nursing Internship Program in the first two years.

The additional need to bolster the number of critical care nurses statewide was identified through networking with my colleagues from the Vermont Organization of Nurse Leaders. Labor market research validated this need. Consequently, I initiated the H1B High Tech Education Grant proposal process with the Vermont Department of Employment and Training with statewide support. The H1B grant was awarded to the Vermont Department of Employment and Training, through the Vermont Human Resource Investment Council. The grant is administered through the Vermont

Association of Hospitals and Health Systems (VAHHS). With the growing nursing shortage, particularly in specialty areas such as critical care, this program is very timely.

The FAHC Critical Care Nursing Internship Program is now offered to nurses at all 16 Vermont hospitals. The didactic portion of the program is a 96-hour, 6 credit critical care nursing course, through the University of Vermont School of Nursing. The grant covers the costs of tuition and course materials. Over 6 weeks, we use a combination of interactive television to deliver lectures throughout the state and live presentations at UVM. Advanced Cardiac Life Support (ACLS) is included. Additionally, the program is web-enhanced with the syllabus, course outlines, associated articles, competencies/testing, group e-mail, and other resources available on-line. Participants can access the web site from home, their hospital or from UVM. Preceptors at the sponsoring hospitals orient the nurse intern to their critical care areas using skills checklists available on the web site. At FAHC, the nurse interns orient to both the Medical Intensive Care Unit and the Surgical Intensive Care Unit for a total program of 20 weeks. The clinical preceptor time varies depending on the patient populations cared for by sponsoring hospitals. The Critical Care Internship Program includes a two-year commitment to work at the sponsoring hospital in critical care.

We have offered four Critical Care Nursing Internship Programs since the grant award in December 2000. There have been 55 participants.

Brattleboro Memorial Hospital	1
Central Vermont Medical Center	1
Fletcher Allen Health Care	33
Mt. Ascutney Hospital and Healthca	2
North Country Hospital	1
Northwest Medical Center	1
Porter Hospital	2
Rutland Regional Medical Center	7
Springfield Hospital	4
Veteran's Administration Hospital	3
Total	55

CMS OPEN DOOR CONFERENCE CALLS

The Center for Medicare and Medicaid Services (CMS) has scheduled a series of open door conference calls on various health topics. The Dial-In number for all of these calls is: 800-837-1935. Recordings of the calls are available for 72 hours after the call at: 800-642-1687. The access code for this Encore Feature is the call ID number of the meeting. All calls are Eastern standard time:

Hospital

ID 2813702 Wednesday, 12/4/02 at 10:00 AM

Home Health

ID 2813934 Tuesday, 12/3/02 at 10:00 AM

Physician

ID 1639827 Monday, 12/16/02 at 2:00 PM

For further information about these meetings, see CMS' Forum web page:
www.cms.hhs.gov/opendoor/schedule.asp.

The U.S. Department of Labor has recognized the Critical Care Nurse Internship Program as one of six exemplary H1B programs in the nation. The two year grant period has been extended for a third year to meet our goal of offering this program to 95 Vermont nurses. Come join us in career growth and advancement in critical care!

Future programs will be offered April 2003 and September 2003. For more information and applications for the Critical Care Internship Program, please contact Dottie Flowers at FAHC (802) 847-3539 or Beatrice Grause at VAHHS (802) 223-3461.

"It's very rewarding to see both the classwork and the clinical work come together when you have a patient."

Leigh Sears, RN

VERMONT RECRUITMENT CENTER NEWS

The VRC ended the fiscal year by placing 20 physicians, 5 NP/PA providers and 28 Locum Tenens matches. Placements were geographically made in each hospital service area. More providers were placed in group practices and clinics.

The VRC begins the year with 21 primary care needs, 39 specialists and 18 allied health needs. Nationwide the shortage areas are for Urologist, Orthopedic Surgeons, Dermatologists, Cardiologists and Rheumatologists. Vermont has multiple needs in all of these disciplines. Workforce shortage areas continue to grow in allied health as well as nursing and dental.

To continue to build our candidate pool the VRC will continue conducting many sourcing techniques as well as mailings, residency program visits and on-line web sites.

Retention is strong in Vermont but we will be valuable to provider overload if we continue to have a high vacancy rate.

The VRC will be attending the Prim-Med convention in Boston in November. Other convention travel will take place throughout the year.

Loan debt for the class of 2003 is \$152,000. In 1995 loan debt was \$85,000. Vermont continues to have loan forgiveness for medical providers through the Department of Health and the Freeman Foundation. Both programs are administered by the Area Health Education Centers (AHEC).

The Freeman Medical Scholar Program continues to be a critical program for all Vermont sites. We applaud the Freemans and thank Dr. Mildred Reardon and Laurie Hurowitz for their assistance with the Freeman Scholars.

The VRC's web site is now applicant friendly. Candidates can now register with the VRC on line. This is a great time saving benefit for the candidates.

Activity is high with 23 candidates interviewing at 16 sites.

For more information contact Dee Rollins.

EXPLORING HEALTH CAREERS

Sponsored by Southern Vermont AHEC

TUESDAY, DECEMBER 10, 2002 - 8:30-3:00 - EQUINOX HOTEL, MANCHESTER, VT
For a brochure and registration information call 802-886-2115 or 888-758-06-76
www.southernvermontahec.org email: ttemple@vermontel.net