



KHA's Current Report
November 1, 2024

President's Perspective – No Matter the Election Outcome, Our Federal Priorities Remain the Same

I have no doubts that you are geared up to vote next week or have already cast your ballot in the 2024 general election. Seeing so many members talking about voting and using resources in the [We Care We Vote](#) Campaign [toolkit](#) has been encouraging. But it is also important to remember that regardless of the election fervor currently sweeping the country or the results on Nov. 5, Congress will return to D.C. the next week with much to complete before the end of the year.

Notably, Congress must reach some kind of budget deal by Dec. 20. As you might expect, how the lame-duck session plays out will have much to do with the election results. Any significant power shift – former President Donald Trump winning the presidency or either party gaining control of both chambers of Congress – would likely mean a continuing resolution to keep the federal budget stable at fiscal year 2024 levels and kick major budget decisions to the new president and incoming 119th Congress. A victory by Vice President Kamala Harris and split control of the 119th Congress may create a scramble to pass a full-year omnibus budget bill to develop new spending baselines for 2025.

Regardless of the election outcomes, our priorities for the Congressional lame-duck session are clear: do no harm to hospitals' budgets, keep current programs in place and do not extend sequestration as a revenue mechanism. Below are some key priorities and messages that will continue to be shared with the Kansas Congressional Delegation.

- No 4 percent pay-as-you-go sequestration cut should be enacted to "pay" for keeping hospitals open during the COVID pandemic. Congress must act year-to-year to waive this budgetary haymaker because they didn't permanently waive PAYGO for the pandemic-era sequestration holiday.
- No disproportionate share hospital cuts to non-Medicaid expansion states should be enacted. Such cuts would hurt hospitals already burdened financially by providing necessary care to many uninsured individuals.
- No use of Medicare site-neutral payment schemes as budgetary pay-fors. These make no sense since hospitals, unlike clinics, must operate under rigorous Emergency Medical Treatment and Labor Act standards.
- Permanently adopt the Medicare Dependent Hospital and Low-Volume Hospital programs at current levels. Without statutory change, MDH will expire and LVH eligibility will become far more restrictive.

- Permanently adopt telehealth waivers present in current law. Many of these will expire at the end of the year without congressional action.
- Extend the hospital-at-home program for another five years. This program is set to expire on Dec. 31.
- No sequestration extension as a pay-for. Extending sequestration beyond its 2032 end date is a budgetary gimmick that allows Medicare to pay for only 99 percent of its expenses instead of 100 percent.

Rest assured, our congressional delegation is aware of these priorities, and we look forward to working with them to make them a reality in the lame-duck session and beyond! Thanks again for your continued involvement in KHA's advocacy efforts! Thank you for your efforts to get the vote out and by voting yourself on Nov. 5 if you haven't already cast your ballot.

--Chad Austin

Phil Gwoke Speaking at the Rural Health Symposium – Nov. 21

We are thrilled to announce that Phil Gwoke, a leading expert in generational dynamics and a sought-after speaker, will be joining us as the keynote speaker for this year's Rural Health Symposium on Nov. 21, at the DoubleTree by Hilton Hotel Wichita Airport in Wichita.

When Generations Connect

Phil Gwoke

Currently, four different generations in the workplace need to work together. In this keynote, generational speaker Phil Gwoke talks about how to make people connect and bridge the gap between the different generations.

- Understand how generations differ in dynamics, motivation and communication patterns.
- Learn the best solutions to engage every generation and create a strong workforce where everyone feels empowered, valued and understood.

This symposium aims to provide attendees with the skills, ideas and information necessary to survive in the rapidly changing world of rural health care. It is designed for senior-level administrators, hospital trustees and others interested in rural health issues.



--Hayley Finch-Genschorck

Hospital Respiratory Data Reporting Requirement Begins Next Week

Most hospitals, including Critical Access Hospitals, must begin submitting weekly COVID-19, influenza and respiratory syntactical virus data starting the week of Nov. 3. Beginning in January 2025, freestanding and hospital-based inpatient rehabilitation facilities and inpatient psychiatric facilities will report annually.

Data collection forms and instructions, including the hospital respiratory data protocol, are available on the Centers for Disease Control and Prevention's respiratory [data website](#). The data is to be reported through the National Healthcare Safety Network system.

Hospitals may send questions to NHSN@cdc.gov using the subject line "Hospital Respiratory Data."

--Sally Othmer

Twelve Critical Controls to Win the War on Ransomware – Nov. 19

Join us from noon to 1 p.m. on Tuesday, Nov. 19, when ISG Technology's health care division members will discuss the 12 critical security controls you should focus on to protect your organization. They will also discuss maximizing every security dollar you have to spend. This session is for you if you don't have an unlimited security budget.

Topics include:

- The latest threats to Kansas health care organizations
- The 12 critical security controls
- Low-cost, no-cost security strategies
- How to assess your security posture
- How business and IT leaders can partner together

Who should attend?

Health care business and IT leaders are responsible for security, data protection and business continuity.

Panelists:

- Chris Swartz, solution architect, ISG Technology
- Walter Hirsekorn, cybersecurity consultant, ISG Technology



--Hayley Finch-Genschorck

Baxter Announces Expiration Dating Extensions for Specific Products Related to IV Solutions Disruption

As part of its efforts to mitigate the disruption to the supply of IV solutions after Hurricane Helene temporarily closed its North Cove, N.C., manufacturing plant, Baxter announced it is now authorized by the Food and Drug Administration to extend the use date of some products to provide a 24-month expiration from the manufacture date without relabeling the products. In a letter to customers, Baxter said the extended expiration date is based on Baxter's submission to the FDA, which includes container closure integrity data, container functional performance data and an analysis of product weight loss profiles for specific product codes. Please see the [Baxter document](#) that contains the complete list of Baxter product codes, lot/serial numbers, labeled expiration dates and extended expiration dates. The extended expiration dates apply only to product codes manufactured before Sept. 30, 2024.

--Ron Marshall

Building Healthy Communities: Affordable Strategies for Health Care Execs – Nov. 6

The Kansas Association of Health Care Executives is hosting a virtual educational event from noon to 1:30 p.m. on Wednesday, Nov. 6.

Health care organizations exist to serve the communities in which they reside. Though community health has always been a focus for these organizations, new regulations require them to take an active role. The health of a community or geographic population has a critical impact on a health care organization's planning, operations, financial sustainability, outcomes and success.

Because the key components of health care reform will be implemented through legislation, it will be even more critical that provider organizations are aware of and responsive to the health status and disease states most prevalent in their communities. A population-based focus is not only the right thing to do, but it may also be a financially astute course of action.

Moderator

- Austin Jackson, Ph.D., CSSBB, FACHE, director of strategy and business development, Stormont Vail Health

Panelists

- Mike Jensen, FACHE, chief strategy officer – SWKC Market, University of Kansas Medical Center
- Weston Tallman, MBA, chief financial officer, Hospital District #1 of Rice County
- Janeth Vazquez, director of Marketing, Southwest Medical Center

ACHE members pay only \$30, non-members pay \$50, and current students can participate at no charge. This event will be hosted on ACHE's platform, so after registering on EventBrite, you will receive an email with connection instructions.

Click to
Register

--Hayley Finch-Genschorck

APS Welcomes Vigilor from TRIMEDX to Its Roster of Services Provided to Hospitals

APS is hosting an introductory webinar at 1 p.m. on Monday, Nov. 25, for a new vendor, [Vigilor from TRIMEDX](#), a division of Indianapolis-based clinical asset management company TRIMEDX, which delivers clinical engineering services, clinical asset informatics and medical device cybersecurity. They offer services that help identify and mitigate cybersecurity and patient safety risks associated with connected medical devices.

Click to
Register

If you have questions or need additional information, contact [Dennis George](#) at (913) 327-8730.

--Dennis George

CEO Staffing Changes

The Kansas Hospital Association would like to inform you of the latest member hospital administrator changes since our last hospital list printout in September:

- Jeanette Filpi, interim chief executive officer, NW Kansas Managed Hospitals, Rawlins County Health Center, Atwood, and Goodland Regional Medical Center, Goodland
- William "Pat" Patton, administrator, Anderson County Hospital, Garnett, and Allen County Regional Hospital, Iola
- Krista Eylar, MBA, chief executive officer, Kanza Mental Health and Guidance Center, Inc., Hiawatha
- Lorraine Meyer, interim chief executive officer, Community HealthCare System, Inc., Onaga
- Debbie Gafford, interim chief executive officer, Menorah Medical Center, Overland Park
- Jeremy Drinkwitz, president, Mercy Hospital Pittsburg, Pittsburg
- Roddex Barlow, hospital president, Ascension Via Christi Hospitals Wichita, Inc. (St. Francis), Wichita

Our [Kansas Hospitals and Health-Related Facilities list](#) is available on the KHA website in PDF (Adobe Acrobat Reader format) at www.kha-net.org. A username and password are required. Click on Kansas Hospitals, CEO Directories, Kansas Hospital List and Kansas Hospitals and Health-Related Facilities List. Please contact [Cheryl Carson](#) at (785) 233-7436 if you have updates and provide the start date of the new administrator/chief executive officer, picture, birthday and press release/bio.

--Cheryl Carson

Position Available

[Chief Executive Officer](#)

[SCK Health](#)

6401 Patterson Pkwy., P.O. Box 1107

Arkansas City, KS 67005-1107

Contact: [Krista Carrillo](#), Human Resources Director

Phone: (620) 441-5902

Email: kristan@sckrmc.org

Fax: (620) 441-5953

Website: <http://sckhealth.org>

Apply Online Today!
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SCK Health is a 44-bed, city-owned rural emergency hospital with two off-site outpatient primary care clinics. Its mission is to meet the needs of its community by providing high-quality, accessible and compassionate care close to home. Services include outpatient surgical, orthopedics, podiatry, emergency medicine, laboratory, radiology, respiratory, occupational health, anesthesia, 24-hour acute care, general medicine, pharmacy, social services and more. This position serves as CEO for the board of trustees, is responsible for directing the overall operation of the SCK Health Network and establishes strategic plans and guides their implementation. The CEO promotes the clinics and medical center's vision and strategic plan to all assigned teams and ensures that reporting teams also promote the strategic plan and its tactics. Located within one hour of Wichita, Arkansas City is located on the Kansas/ Oklahoma border and is the gateway to the Cherokee Strip Land Run. An agricultural and business center, this progressive community has approximately 13,000 residents.

[Chief Executive Officer](#)

[Rooks County Health Center](#)

P.O. Box 389

Plainville, KS 67663-0389

Contact: [Heather Rinehart](#), HR Director

Phone: (785) 688-4431

Fax: (785) 434-2434

Email: heather.rinehart@rch.health

Website: <https://rookscountyhealthcenter.com>

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The Governing Board of Rooks County Health Center is accepting resumes and nominations for the administrator/chief executive officer position. The successful candidate must demonstrate a record of accomplishment in leadership, team building, fiscal responsibility, physician relationship-building, community involvement and be a strong communicator. The candidate must possess a minimum of a bachelor's degree, preferably in business administration or health care administration. Candidates should also have five years of experience in health care administration, preferably in a Critical Access Hospital. RCH offers a competitive salary and a comprehensive benefits package. If you want to join their dynamic team, please send resumes/CVs to Heather Rinehart as stated above.

If you have a management position available in your organization and would like it posted in *Current Report*, email the information to [Jan Fenwick](mailto:Jan.Fenwick@kshealthjobs.net). Also, don't forget to check out www.kshealthjobs.net for other health care openings in Kansas.

--Jan Fenwick

Federal and National News

MLN Connects Provider eNews Available

The Centers for Medicare & Medicaid Services issued the following [updates](#) to *MLN Connects Provider eNews*:

- [Medicare Shared Savings Program Continues to Deliver Meaningful Savings and High-Quality Health Care](#)