



***KHA's Current Report***  
***February 21, 2025***

**President's Perspective – Equipping Hospital Board Members for Today's Opportunities and Challenges**

Trustees play a significant role in transforming health care. Strong leadership and governance skills are needed to navigate the opportunities and challenges hospitals face. Board service can be challenging, as the broad range of board responsibilities is complex and so is the hospital and health care industry.

I encourage hospitals to encourage their board members to attend this year's [Critical Issues Summit for Hospital Boards](#), March 6-7 in Wichita. The summit brings together hospital leaders and trustees from across the state to promote the importance of good governance practices. It will feature top-notch speakers, educational sessions and discussions on the most critical topics facing hospitals today. [If you haven't registered, do so today.](#)

Here is a little more on the sessions we will be covering.

**Board and Governance Best Practices** – Karma Bass will explore the key practices that distinguish high-performing boards and how they transition from good to great. Participants will learn practical tips for enhancing their board's effectiveness, improving decision-making and fostering a culture of collaboration and accountability.

**Legal and Ethical Considerations in AI Health Care Applications** – Susan Frew, an AI expert and entrepreneur, will provide practical insights into navigating legal challenges, ensuring patient privacy and fostering trust in AI-driven health care solutions. With AI rapidly transforming the industry, understanding compliance with regulations like HIPAA and maintaining ethical integrity is essential.

**Empowering Rural Communities Through Meaningful Engagement** – Drawing on the successes in Cowley County, Yazmin Wood will focus on how rural communities can engage in meaningful conversations around health equity, using examples from Kansas to reduce stigma and misconceptions.

**Policy Issues Impacting the Health Care Sector** – Tara Mays will provide an update on the latest policy developments, share insights into legislative strategies and discuss how health care professionals can actively engage in advocacy to influence change.

Strengthening Health Care Governance: Best Practices for Hospital Boards – Barbara Lorschach will facilitate a panel of Kansas trustees and CEOs on how they leverage Kansas governWell to support their boards in driving quality care, patient safety, compliance and financial sustainability.

Reframing Resilience: Connecting to the Present, Others and Oneself – Everyone in society has a shared human connection. We all have been through something, are currently going through something or will inevitably go through something. Paul Long will share how we leverage that foundation to connect more to the present, to others and ourselves.

This event also allows members to recognize board members for their dedication and service. KHA implemented the [Trustee Accountability and Recognition Program](#) in 2010 to help hospitals demonstrate their accountability to legislators, attorneys generals and their communities. We encourage hospitals to recognize trustees at this year's [Critical Issues Summit](#) by completing a [recognition form](#) by Feb. 28. We hope to see you and your board members on March 6-7.

--Chad Austin

### **Virtual Abstraction Training – March 27**

The Medicare Beneficiary Quality Improvement Project is a set of rural quality measures for Critical Access Hospitals to gauge their outcomes against other CAHs. Using these measures, hospitals can develop initiatives to improve outcomes and ensure they provide every patient with the highest quality of care. However, navigating the data collection process connected to MBQIP can be complicated. Join us from 10 a.m. to noon on March 27, when the Kansas Department of Health and Environment, in partnership with the Kansas Hospital Association and Healthworks, offers virtual abstraction training.



--Jennifer Findley

### **Hospital Pricing and Billing Resources**

To help patients understand key health insurance concepts and avoidable billing issues, the Kansas Hospital Association has produced two briefs your hospital can utilize as educational resources. [These briefs](#) can be included on your payment and price information webpage or during financial counseling sessions to help patients navigate the complex insurance and payment process. If you have any questions, please contact [Shannan Flach](#) at (785) 233-7436.

--Shannan Flach

## Excellence in Workforce Strategies – Group Implements Culture Change through Positivity and Engagement



Strategies addressing workforce recruitment and retention are essential to providing optimal health in Kansas. The Workforce Strategies Award recognizes a team of employees, providers or volunteers who have significantly contributed to the well-being, retention or recruitment of health care workers at their facility.

The Patterson Health Center Lemonheads is a group of dedicated health care workers whose mission is to promote well-being and appreciation for the everyday

accomplishments of their fellow workers, celebrate wins (big and small) and find silver linings among the most challenging days.

Formed during the COVID-19 pandemic, the Lemonheads built their mission and vision on the books, *Pickle Pledge: Creating a More Positive Healthcare Culture-One Attitude at a Time* and *The Florence Prescription: From Accountability to Ownership*, a strategic guide that helped create an organizational culture that is more emotionally positive, empowered and engaged. This inspiration came after going to a seminar on building culture and ownership in health care by Joe Tye. Instead of using his pickle pledge idea, the PCH group decided they could do great things with lemons; thus, the Lemonheads were born. Some days are sour and some are sweet, depending on what you add to it!

The PHC Lemonheads challenge every employee to commit to turning complaints into constructive contributions. By planning group events, recognizing contributions and promoting positive morale, the Lemonheads have become significant and impactful leaders at PHC.

"The Lemonheads consistently demonstrate compassion, empathy and respect, profoundly impacting our patients, visitors and staff. For instance, the Lemonheads developed a program called "Lemonade Maker," an initiative that allows employees to recognize the everyday contributions of co-workers when they go above and beyond. People want to do good. This recognizes them and hopefully rubs off on someone else to do something nice" said Sarah Teaff, CEO of Patterson Health Center.

The PHC Lemonheads work hard to promote an environment of cooperation and collaboration. Under the leadership of Heather Reames, the director of nursing, the Lemonheads initiated monthly games, prizes, recognition and a quarterly barbecue that allowed staff to come together, eat and share. They also organized the annual Christmas party. This has improved team dynamics and allowed PHC to consistently appreciate the entire staff.

"Since the inception of the Lemonheads program, employee engagement survey scores have improved, and staff feel their contribution is recognized and that their ideas matter. As a result of these positive changes, turnover has steadily declined. The program is a testament to the improvement in morale and well-being of our staff," said Teaff.

The Lemonheads consist of nursing staff, business office staff, administration, dietary staff, RT, PTA and x-ray staff. "It was important to find people throughout the facility that are well-liked and that others will listen to, Reams said."

After a long, complicated merger of two hospitals, a pandemic and CEO turnover, the Lemonheads were tasked with shifting the culture from one focused on defeat to one focused on everyday miracles and acts of kindness.

"Any culture change is a marathon, not a sprint. The Lemonheads consistently show up for staff, planning events, promoting PHC values and making sure we are turning lemons into lemonade every day," said Teaff.

--*Shelby Stacy*

### **KDHE Zero Suicide Program Survey**

[Zero Suicide](#) is a nationally recognized framework for transforming safer suicide care in health and behavioral health systems that aligns with [accreditation standards](#). The Kansas Department of Health and Environment's Zero Suicide Program is conducting a [survey](#) of health and behavioral health systems. The survey hopes to capture those interested in adopting Zero Suicide, the needs of Kansas organizations currently implementing Zero Suicide, and ways in which KDHE might support suicide prevention efforts in Kansas communities.

Additional information on the Zero Suicide framework can be found at the [Zero Suicide Toolkit website](#). The due date to complete the survey is March 7. Questions or concerns about this survey can be addressed to [Lauren Gracy, KDHE](#).

--*Sally Othmer*

### **Payment for Medicare Part B Preventive Vaccines and Administration for RHCs**

Medicare's [MLN Matters MM13923](#), released on Jan. 16, 2025, includes important information for rural health clinics regarding Medicare Part B coverage of preventive vaccines. Medicare Part B pays for pneumococcal, influenza and COVID-19 vaccines and their administration in RHCs and federally qualified health clinics at 100 percent of reasonable costs under section 1833(a)(1)(B) of the Social Security Act. For RHCs, Medicare does not include the costs associated with these vaccines and their administration when the All-Inclusive Rate is determined, and Medicare does not subject them to the payment limit.

Starting Jan. 1, 2025, Medicare Part B pays for hepatitis B vaccines like they do pneumococcal, influenza and COVID-19 vaccines in RHCs and FQHCs. Starting July 1, 2025, RHCs and FQHCs can bill for all four types of Part B preventive vaccines: pneumococcal, influenza, hepatitis B and COVID-19 and their administration at the time of service with or without a qualifying visit. RHCs and FQHCs can bill HCPCS code M0201 for an in-home additional payment for Part B preventive vaccine administration only if a home visit meets all the requirements of both [42 CFR 405 Subpart X](#), for RHCs and FQHCs services provided in the home, and [42 CFR 410.152\(h\)\(3\)\(iii\)](#), for the in-home additional payment for Part B preventive vaccine administration.

Medicare requires RHCs and FQHCs to reconcile annually payments received at the time of service with the facilities' actual vaccine and vaccine administration costs on their cost reports, including any additional in-home costs. Medicare Part B pays the claims like other Part B vaccine and vaccine administration claims:

- Vaccine products at 95 percent of the Average Wholesale Price
- Vaccine administration according to the National Fee Schedule for Medicare Part B vaccine administration

The Part B vaccine administration fee schedule includes locality-adjusted payment rate files for codes G0008, G0009, G0010, 90480 and M0201, with the annual update applied for the calendar year 2025. You can find these files on the [CMS Vaccine Pricing page](#) under the "Seasonal Flu Vaccine" tab for the influenza, pneumococcal and hepatitis B payment rates and the "COVID-19 Vaccines & Monoclonal Antibodies" tab for the COVID-19 vaccine payment rates.

For more information, review [MLN Matters MM13923](#).

--Karen Braman

### **OSHA Withdraws COVID-19 Reporting and Recordkeeping Requirements for Employees**

The Occupational Safety and Health Administration has announced it is no longer enforcing its COVID-19 recordkeeping and reporting requirements for employees, according to a [memo issued on Feb. 5, 2025](#).

An excerpt from the memo reads:

"... effective immediately and until further notice, OSHA will not cite employers for violations of the requirement to establish, maintain and provide copies of a COVID-19 log under 29 CFR § 1910.502(q)(2)(ii) and (q)(3)(ii)-(iv) or to report COVID-19 fatalities and hospitalizations under 29 CFR 1910.502(r)."

Employers are still required to follow normal recording and reporting of work related COVID-19 hospitalizations or fatalities that meet typical recordkeeping and reporting criteria like any other workplace injury or illness.

If you have any questions, contact Chris Saiya, safety program manager, Kansas Hospital Association Workers' Compensation Fund at (785) 233-7436 or [csaiya@khsc.org](mailto:csaiya@khsc.org).

--Chris Saiya

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The Chief Financial Officer will provide financial vision and leadership in developing and implementing the Citizens Medical Center, Inc. financial management program. The CFO provides leadership for financial planning, management of financial risks, record-keeping and financial reporting. Oversee revenue cycle management, ensuring efficient billing, collections and reimbursement processes. Provide strategic financial guidance to the CEO and board of directors, ensuring alignment with the organization's mission and long-term goals. Manage financial risks and implement strategies to mitigate financial exposure, especially regarding regulatory changes and reimbursement challenges. Collaborate with other C-suite executives to drive operational efficiencies, cost control measures and sustainable growth. Prior CFO experience and a master's degree in a field related to business and/or financial administration are preferred. Must have at least five years of experience in a leadership position that promotes the development of skills outlined in [this job description's](#) Essential Functions and Experience and Strengths sections.

Email [Jan Fenwick](#) if you have a management position available in your organization and would like it posted in *the Current Report*. Also, check out [www.kshealthjobs.net](http://www.kshealthjobs.net) for other health care openings in Kansas.

--Jan Fenwick

## **Federal and National News**

### **Study Examines Trends in Treatment for Substance Use Disorders**

Despite the profound consequences of substance use disorders, treatment rates remain critically low. The prevalence of individuals who needed SUD treatment increased from 8.2 percent in 2013 to 17.1 percent in 2023. Additionally, the percentage of individuals receiving treatment dropped from 9.3 percent in 2013 to just 6.5 percent in 2020.

An [article](#) entitled, *Trends in Treatment Need and Receipt for Substance Use Disorders in the US*, published in JAMA Network Open discusses these statistics, what might be driving these trends and how health care providers can continue to support these patients appropriately.

### **HRSA Accepting Grant Applications for Rural Residency Planning and Development Program**

The Health Resources and Services Administration is accepting [grant applications](#) for the Rural Residency Planning and Development program through Thursday, April 10. This program supports the creation of accredited rural residency programs to train more physicians in rural areas and address workforce shortages.

The RRPD also provides startup funding to help establish sustainable programs through stable funding sources like Medicare and Medicaid. The program will fund as much as \$750,000 to eligible applicants.

### **MLN Connects Provider eNews Available**

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

- [Complex Non-Chemotherapeutic Drug Administration: Determining Payment for Services](#)

### **Before You Go ...**

- Buprenorphine is the gold standard for the treatment of opioid use disorder, reducing mortality by more than 50 percent. Any provider in the United States can prescribe buprenorphine; however, prescribing numbers remain low. The authors of a [study](#) published in *JAMA Open Network* discuss the pros and cons of low-dose initiation.