



News and Views-Winter/Spring Issue, 1998

PRESIDENT'S CORNER *by Virginia Wyss*

The year of 1997-- and my second year as WAHQ President -- has again quickly drawn to a close. It was a busy and exciting year, and it has been my pleasure to work with a Board who has provided such strong leadership and taken major steps in advancing the organization.

I am pleased to report that our goals for 1997 have all been accomplished. These goals and their respective initiatives are as follows:

1. Continue liaison relationships.

WAHQ held a strategic planning meeting this past summer, inviting representatives from other healthcare organizations in Wisconsin. It was a productive forum to collaborate on healthcare quality issues. We were invited to join the Nursing Alliance Group and were offered management assistance from our PRO (MetaStar, Inc.).

2. Develop leadership council membership.

The Board selected Gloria Field, Diane (as WAHQ President) as your Leadership Council Representatives for this year. We all attended the first Leadership Council meeting in Orlando in September and will be keeping you updated throughout the coming year on NAHQ activities.

3. Hold two educational conferences.

WAHQ's Annual Educational Conference was held in March. This year's conference was titled "Quality Along the Continuum" and showcased Wisconsin initiatives and provided practical tools and information to use in our jobs. WAHQ also hosted the CPHQ Study Session in Brookfield in July.

4. Explore the use of the Internet and a WAHQ Web site.

I am pleased to report that our very own Web site is up and running for your use. Our address is <http://www.wahq.org>. Please type us in and get all the latest quality information. You can also e-mail us through the Web site.

5. On-going marketing to increase membership through NAHQ's offering of dual invoicing.

Our dual membership is up to the 50% level.

We hope that all of our attempts to market our organization will continue to increase our membership and visibility in Wisconsin healthcare sites.

Ballots have been mailed to the membership for election of Board members for the coming year. I encourage you to take the time to review the candidates biographies and vote. We will be seating the 1998 Board at the annual meeting during our Spring Conference on March 6. At this time, you should have already received information regarding the conference. We look forward to your attendance and sharing a great educational offering for the Healthcare Professionals of Wisconsin. (See "Education Update".) I hope to see all of you there to share plans for your organization this year -- your input is always valuable!

Upcoming Events

March 5 WAHQ Board Meeting, Crowne Plaza, East Towne, Madison

March 6 WAHQ Annual Conference, Crowne Plaza, East Towne, Madison

May 5-6, 1998 MetaStar Quality Conference, "Healthcare Value: Balancing Cost & Quality Wyndham Center, Milwaukee, WI

May 15 WAHQ Board Meeting Papa's Place, Baraboo

June 30 CPHQ Early Bird Application Deadline

Senate Bill 315 *by Virginia Wyss*

At press time, the fate of Senate Bill 315 is uncertain. In the past two weeks, Senators have been lobbied to pull the Bill out of the Joint Finance Committee on Health, Human Services, Aging, Corrections, Veterans and Military Affairs.

Hundreds of phone calls have been received by the Senators from physician across the state in a strong appeal to kill the Bill.

As quality resource professionals, you know the value and need for objective healthcare data. So we urge you to contact your Senators and lobby strong support of this important healthcare data Bill.

Following is an excerpt of testimony delivered by Diane Ebersberger, CEO of Employers Health Cooperative in Rock County.

If you have any questions or need more information regarding this bill, please call Diane at Employers Health Cooperative, (608) 754-8652.

[Testimony on Senate Bill 315 delivered by Diane Ebersberger, CEO Employers Health Cooperative, December 10, 1997](#)

Few concerns are more pressing to business owners today than healthcare costs and their impact on employers' ability to provide affordable, quality healthcare coverage to

help them recruit and retain employees. And few personal issues are more important to an individual citizen than his health and the decisions he must make in choosing healthcare providers who will help him stay healthy or treat a serious illness. A woman having a baby ought to be able to know what various obstetricians charge and whether a specific doctor's rate of c-section (with its surgical risk) exceeds norms and standards of practice. The first right in the Consumer Bill of Rights and Responsibilities recently developed through national consensus building and endorsed by President Clinton is the right for consumers "to receive accurate, easily understood information about their health plans, facilities, and professionals to assist them in making informed health care decisions". It's my understanding that the American Medical Association is among the supporters of the document, and, hopefully, consumers' and purchasers' need for objective, comparable data is so obvious that it is not debatable. The passage of Senate Bill 315 is absolutely critical in order to provide healthcare purchasers and consumers with the kind of information they need to manage costs, begin to evaluate quality and make intelligent decisions that will support a competitive healthcare marketplace.

The reason is simple. You can't manage what you can't measure. This maxim is so completely integrated into the thinking and quality processes of business that business leaders understand the imperative of having objective data to measure and improve performance and they expect to be held accountable for demonstrating performance to their customers. In industry, no supplier expects a customer to make a purchasing decision without information about the price and performance specifications of a product, and the cost of collecting and reporting performance data is accepted as a cost of doing business.

We currently have, through the Office of Healthcare Information, a way of collecting and reporting objective, comparable information on hospitals and surgery centers. Despite early concerns of those providers about the cost of collection, the quality and value of claims data, and how it would be used or misused, we have a success. Wisconsin's data base is respected nationwide. Businesses, coalitions, insurance companies and providers use the data extensively and effectively to negotiate price and to stimulate quality improvement evaluations related to the significant variation in utilization, charges, death, complication and procedure rates that can be found from the data. Data quality has improved tremendously, partly through the diligence of OHCI staff, but also because when data is published and used, providers are motivated to assure its accuracy. Hospitals and surgery centers have been able to provide the data relatively economically because they submit the same standardized information they use for billing claims. In fact, the only real, but very serious problem with the existing data is that it provides an increasingly limited picture of healthcare in Wisconsin because it has no information about the 60% of healthcare that is delivered in outpatient clinics and doctor's offices.

Senate Bill 315 addresses this and builds very logically on the success of the existing data base by simply suggesting that the current processes which hospitals and surgery centers have now complied with for several years be extended to other providers.

I understand that physicians have concern. They are really no different than the early concerns of hospitals and surgery centers that have been well

addressed through the OHCI and its Board. Senate Bill 315 affords the same thoughtful problem solving, even more, since the final decisions about data collection from other providers and assessments will also be subject to the Administrative Rules process. I understand the value of the Medical Society's and others' work to develop more meaningful outcomes measures of quality that get at patient satisfaction, functional development, return to work and other important indicators. But these measures are not ready and we cannot wait. Charges, death rates, complication rates, and procedure rates are also outcomes, and the use of them has had value in regard to inpatient care. The public should not be denied similar information regarding outpatient care because something better may be available in the future.

The support for this Bill is overwhelming from every one except the State Medical Society. For me, it seems to boil down to the issue of accountability. The predicted cost is reasonable, especially when the cost of not having this information available is considered. The need is clear, the track record of success in regard to inpatient provider data has been established, and now it is simply time for physicians and other providers to offer the public the same level of accountability for their charges and performance. Why should they be expected to provide any less?

Education Update *by Virginia Wyss*

WAHQ SPRING CONFERENCE

Exploring Acronyms of Quality Measurement is the title and subject of our Spring Conference to be held Friday, March 6 at the Crowne Plaza- East Towne in Madison, Wisconsin.

The need to demonstrate quality from the payors, public, and quality improvement professionals, has resulted in a proliferation of quality initiatives. These initiatives have sprung up in every arena of healthcare.

As quality professionals, it is necessary that we understand how quality enables others to better facilitate care and function in the new, fast paced world of mergers, partnerships, and relationships. This year, our conference is designed to enhance our knowledge and application of quality measurement initiatives across the continuum of healthcare.

This understanding should help us broad-en our views and relate to our colleagues. Our objectives for this year's attendees will be to:

- Describe the psychological and physiological benefits of humor.
- Describe the CHSRA project and its implications for quality in the long-term care setting.
- Identify existing external performance measures and identify the rationale for performance measurement.

- Identify relevant and useful indicators for measuring quality and identify key steps to implementation.

Conference Speakers

Stu Robert Shaw - Dr. Humor

Dr. Humor is a Professor of Psychology at the University of Wisconsin-LaCrosse and an Attorney. He began a personal journey in September, 1987 when he started a review of the research on the benefits of humor. On June 28, 1990 he announced the formation of the National Association for the Humor Impaired. The Association has received national attention from the press in over 144 newspapers, 124 radio stations and has been featured in magazines such as "Family Circle" and "Mature Outlook".

Jon B. Mayer

Mr. Mayer has been with the Milwaukee office of Milliman & Roberston, Inc. as Health Care Consultant since 1996. His clients include managed care plans, medical groups, and hospitals. He has extensive experience in managed care, ambulatory care, quality improvement and general management areas. He has assisted organizations in their administrative and clinical efficiency efforts, analyzing organizational processes and implementing changes successfully with a focus on customer service. Jon graduated from Marquette University with his B.S.N., received his M.S.N. from the University of WI-Oshkosh, and M.B.A. from the University of WI-Whitewater.

Susan A. Rosenbek

Ms. Rosenbek is the Director of Patient Care Service for the WHA-Patient and Patient Care Staff Advocate. Prior to this position, she was employed with American Family Insurance Group as a Medical Services Staff Specialist and was involved in resource research and development for medical bill evaluation. Her clinical background includes nursing management positions at Parkway Hospital, Meriter Hospital, and Madison General Hospital. She received her B.S.N. from the College of St. Teresa in Winona, MN and her Masters Degree in Health Service Administration from the College of St. Francis in Joliet, IL.

Cynthia Mochalski

Ms. Mochalski is the Account Manager/Information Services Manager for WHA/Primary Resources. Previously, she served as the Marketing Consultant/Analyst for Retail Target Marketing Systems, Inc. - a software company. She received her MBA from the University of WI-Milwaukee with an emphasis on marketing and information services.

Mary Ann Kehoe

Mary Ann Kehoe is the Executive Director of Good Shepherd Services, Ltd. in Seymour, WI. The organization consists of a 97 bed skilled nursing facility, a home health agency, a rehabilitation agency, a child care center and the community senior center. Ms. Kehoe, a RN and NHA, has practiced in long-term care for the last 23 years in a variety of roles. Currently, Mary Ann serves on the Wisconsin Association of Homes and Services for the Aging (WAHSA) Board of Directors where she acts as chairperson for the Health Issues Committee. Along with other quality projects, this committee has developed Quality Monitoring Pathway tools.

For registration information, contact WAHQ President Virginia Wyss (608) 752-3911

METASTAR TO HOST FORUM *by Kay Simmons*

"Healthcare Value: Balancing Cost and Quality" is the theme of the MetaStar quality conference being held May 5-6, 1998 at the Milwaukee Wyndham Center Hotel.

The conference is designed to provide information to quality improvement professionals, healthcare purchasers, business leaders, healthcare providers, health plan representatives and others interested in quality healthcare, cost and value. There will be thought-provoking panel and breakout sessions focusing on balancing quality improvement, cost and outcomes to achieve real value in health care.

The conference will feature highlights such as nationally-known David B. Nash, MD, MBA, FACP, speaking on outcomes management and quality of care improvements. Steve Wetzell, executive director of Buyers Health Care Action Group in Bloomington, Minnesota, will speak on quality and cost from the purchaser's perspective.

Two panel discussions will be featured as well. One discussion will focus on quality and costs, featuring representatives from the Midwest Business Group on Health, The Alliance, Health Care Network Wisconsin Health and Hospital Association and the State Medical Society. The second panel will focus on accreditation and quality with representatives from the American Health Quality Association, the National Committee on Quality Assurance, the AMA, and JCAHO.

The breakout sessions will feature speakers on various quality improvement projects, healthcare costs, healthcare and accreditation, and data and information.

This conference promises to provide two days filled with unique topics and inspiring speakers. Join MetaStar and your colleagues in Milwaukee on May 5-6. A detailed agenda and registration brochure will be available soon. For more information, contact MetaStar at 800-362-2320, extension 307.

CONGRATULATIONS MEMBERS!

Our Association would like to extend our congratulations to the following members for successful completion of the certification examination for CPHQ, and wish them continued success on the healthcare quality journey:

Lori Becker, Merrill, WI
Mary Bronsteatter, Merrill, WI
Mary Conti, Milwaukee, WI
Janice Giedd, Eau Claire, WI
Susan Grambsch, Loyal, WI
Robin, Haehlke, Wausau, WI

Betty Harnish, Ashland, WI
Dolora Herrera, Wauwatosa, WI
Patricia Huebschen, Beloit, WI
Margaret Keough, Appleton, WI
Sally Konkol, Wausau, WI
Deborah Kroll, West Allis, WI
Anna McCarthy, Janesville, WI
Mae McCarthy, Green Bay, WI
Rebecca McConley, Cottage Grove, WI
Deboarah Napiwocki, Stevens Point, WI
Wendy Potochnik, Wauwatosa, WI
Ruth Romaine, Menomonee Falls, WI
Susan Roy, Madison, WI
Susan Scholz, West Allis, WI
Sara Skiba, Milwaukee, WI
Cindy Sunstrom, Muskego, WI
Debra Zahrt, Wausau, WI

A reminder to these and all members that an added benefit of WAHQ is a \$75 reimbursement as acknowledgment of this achievement.

QUALITY Job Openings

DIRECTOR OF MANAGED & QUALITY CARE

Hospital in city of 12,000, approximately two hours from Minneapolis seeks candidates for this position:

Ideal candidate has a bachelors degree in a healthcare related field and experience in performance improvement. This person would manage: performance improvement, discharge planning/continuum of care, utilization management, peer review and risk management. This person would also be involved with JCAHO and directly supervise two assistants. Community is a college town with a good industrial base and excellent schools - nice, safe place to raise a family. Position has an excellent benefits package and salary. For more information, contact: Bob Derzon, Concorde Staff Source at 1-800-332-7773 or fax, 414-272-3852.

DIRECTOR OF QUALITY & PERFORMANCE IMPROVEMENT

Burlington Medical Center, a progressive regional medical center in southeastern Iowa seeks candidates for this newly created position:

Ideal candidate has a bachelor's degree in Business Administration or related degree with an emphasis in Quality Management or process controls. A master's degree is preferred. Experience in Continuous Quality Improvement (CQI) or Total Quality Management (TQM) in healthcare or related industry. Experience in data analysis and problem solving. Computer proficiency, leadership skills and ability to interact with multiple disciplines. Three to five years of managerial experience. Position reports directly to the President & CEO of Burlington Medical Center. Responsibilities include the facilitation, direction, promotion and support of continuous organizational quality and performance improvement through close working relationships with department directors, nurse managers, supervisors, and other hospital and long term care

employees. This position will also be responsible for directing hospital wide programs to monitor and continuously improve the quality of patient care and customer services.

Burlington, Iowa is a community of approximately 30,000 with a high quality of life, cost of living below the national average and plentiful housing availability. Forward a cover letter with salary requirements to: James Kammerer, Recruiter, Burlington Medical Cnt., 602 N. Third St., Burlington, Iowa, 52601.

Treasurer's Report by Linda Buel

Assets

Checking Account	\$ 1,681.59
Savings Account	\$ 4,840.01
Deferred Annuity	\$ 5,652.71
Liabilities	\$ 0.00
Overall Total	\$12,174.31

1998 WAHQ BOARD OF DIRECTORS

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Ginger Katzman (414) 473-1836

Secretary

Gloria Field (715) 346-5257

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