

# *Aspirus Stanley Hospital & Clinics Volunteers*

## *Spring Newsletter*

Hello ASH Volunteers,

Trying to get back into some kind of “normal” as President of Aspirus Stanley Hospital & Clinics Volunteers! This winter was a strange one, especially for Wisconsin, but what a wonderful winter weather wise anyway! I have enjoyed the beautiful warmer weather we have been having. I think it has confused nature, it isn't sure what season we are in! Maybe it even has us confused! I don't remember a winter like this, but have heard there was at least one other winter like this.

I would like to thank Diane Finn for all her help with us volunteers. She has been great! We also have another volunteer opportunity to help Diane out. She has put several copies of newspapers in our room for us to go through and cut out all Aspirus articles. She will have instructions as to exactly what she would like us to do to help her out. Volunteers can come in at any time to do this, and stay for as long as you would like. You will not have to call and tell anyone when or if you are coming in. If you do not know where our room is, just ask at the front and they will tell you or show you where it is.

Donella

### **Scholarships**

We have our scholarship applications out to the four high schools in our service area and are awaiting any applicants replies. Diane Finn will be collecting them and getting them ready for us to vote on. The deadline is April 19, 2024, after which we will be asking who would like to take part in voting for the winners.

The vote was to go with two \$600 scholarships, which will be awarded at the schools' awards night sometime in May. The actual check for the winners will be sent to them and the school they are attending sometime in January 2025, when the student sends a copy of their first semester grades and second semester grades.

### **Get Together/Meeting**

I would like to have us get together at Martino's sometime in April, to discuss what we want to do for a second fund raiser.

I found out that a patient was wondering if there was going to be a book fair again. I have Diane Finn looking into this for us, to see if we would be allowed to have a vendor come into the hospital. I know that several employees loved our book fairs in the past and I'm sure they would be very happy to see them come back!

This is something we could talk about over a lunch at Martino's, as well as any other possible fund raiser we could do.

I would invite our three prospective members so they could meet all of us and find out a little more about what we do as volunteers.

Email me at [donnorchrist@charter.net](mailto:donnorchrist@charter.net) and let me know available days you have in April. I know this is kind of early to commit, but I would like an idea so if we have too many of us to meet out in the front area, we may be able to reserve the back room at Martino's.

### **West Central District**

We are still considered a part of Partners of WHA, the state Partners and also the West Central District.

With the closing of Sacred Heart and St. Joe's hospitals, these two volunteer groups are no longer Partner organizations. There are now only two organizations in West Central District, Aspirus Stanley Hospital & Clinics Volunteers and Cumberland Healthcare Volunteer Partners. We may be combining with the Northwestern District, who also have just two organizations left.

There will be a West Central District Spring Meeting in Ladysmith on April 23. If any of you are interested in attending with me, please let me know.

### **Greeting and Serving Coffee**

Thank you to the volunteers who are doing this service to hospital patients and visitors. When I am up there volunteering, I have found patients and visitors do appreciate that we are there, and so do all the hospital staff. I feel that patients and visitors feel more welcome when we are there.

I also have found that there are a few people who may not have people to talk to and do enjoy stopping and visiting a while with me. It seems to mean a lot to them.

## **HEAT**

I encourage all of you to go to the Partners of WHA's website and join HEAT.

HEAT is a Partners of WHA program that allows us as volunteers to easily communicate our wishes on public policy issues that come before our senators and representatives. These issues are ones that affect our hospitals, and we can help by responding to all HEAT alerts.

When you sign up for HEAT, you will receive emails whenever an issue comes up concerning hospitals and healthcare.

Please sign up for HEAT today.

## **Valued Voice**

### **Public Policy Education Report**

#### *Continuing Impacts on Wisconsin 340B Hospitals*

Wisconsin has roughly 20 critical access hospitals which are continually impacted by health care public policy, most recently the outrageous drug pricing to consumers and reimbursements to regional 340B pharmacies.

According to articles in WHA's The Valued Voice newsletter in June of last year, the U.S. Supreme Court had decided in favor of this same group of critical access hospitals. Historically, in 2018, the Outpatient Prospective Payment System, a function of the U.S. Department of Health and Human Services (HHS) cut payments of about \$40 million annually to around 20 Wisconsin 340B hospitals. After some bouncing around, this case came before the U.S. Supreme Court. The Supreme Court ruled that HHS had acted unlawfully because the federal statute does not give HHS authority to create different payment rates for different types of hospitals unless it first surveys hospitals to determine their average acquisition costs.

HHS attempted to survey hospitals amid the 2020 litigation but did not do so prior to the financial cuts to hospitals in 2018. Unfortunately, the court did not lay out a remedy for repayment to 340B hospitals, but instead, to remand the case for further proceedings consistent with their opinion. That deadline was set by HHS to be September 5, 2023.

On July 7, 2023, HHS released its proposed remedy for paying back the 340B hospitals sums paid at the beginning of 2018. The Centers for Medicare & Medicaid Services (CMS) is proposing to pay back those impacted hospitals in a single sum. From 2018 to 2022, the budget neutral process had to offset

higher payments received

by the non-340B hospitals and proposed to offset those higher payments over a period of 16 years into the future. WHA joined the American Hospital Association and other hospital groups in urging CMS to hold non-340B hospitals harmless in recouping those payments. WHA President and CEO Eric Borgerding wrote, "Hospitals were not responsible for CMS's decision to make their prior unlawful payment cuts and they should not be penalized for the decision of CMS." WHA also noted that CMS had no legal basis for recouping payments that had already gone out, based on prior years' payment rules. Unfortunately, CMS proposed to reduce the outpatient payments to those non-340B hospitals for 16 years until the full amount of 340B repayments are offset.

The deadline to offer comments on this proposed remedy by HHS was September 5, 2023. Finally, on November 2, 2023, HHS issued its final rule outlining its remedy. HHS will repay those impacted 340B hospitals in one lump sum payment in the first quarter of 2024. Those non-340B hospitals who had received the larger payments will be required to make repayment over the next 16 years.

I apologize for this rather technical summary. I have done so with the intent to shine a light on the important role WHA plays in the massive intricacies and analysis employed to ensure quality and fair health care for Wisconsin residents.

Bill McCullough, PPE Chair

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### **Community Health Education Report**

#### **Bipolar Disorder Basics**

Bipolar disorder (BP) is a chronic, relapsing illness characterized by recurrent episodes of manic behavior or depressive symptoms with intervals that are relatively symptom free. The onset of bipolar disorder usually occurs during adolescence or in early adulthood. Bipolar disorder has a lifelong impact on patients' overall health, quality of life and day-to-day functioning.

Diagnosed cases of bipolar disorder are rising among adults and children. According to research reviewed by Joseph Blader and Gabrielle Carlson, bipolar disorder-related hospitalizations are more frequent among adults and female adolescents. Male children show a higher risk for bipolar disorder than female children. Children's bipolar diagnoses

usually are more general and not reflective of a prevailing mood state. Adults' bipolar disorder diagnoses are based on outward depressive and psychotic behaviors.

There are two major types of bipolar disorder, Bipolar I and Bipolar II. Bipolar I is defined by episodes of depression along with episodes of mania, while Bipolar II is characterized by episodes of depression and hypomania. The main difference between the two types is the severity of the manic symptoms. Full mania causes severe functional impairment and can include symptoms of psychosis, often requiring hospitalization. Hypomania, on the other hand, is not severe enough to cause marked impairment in social or occupational functioning and rarely requires hospitalization.

Bipolar disorder (BP) has a big economic impact on United States health care. The estimated direct cost of bipolar disorder, according to The Economic Burden of Bipolar Disorder in the United States (2020), including inpatient care, outpatient care, pharmaceuticals, and community care is \$50.9 billion. In addition, the negative impact of bipolar disorder on functioning and quality of life results in indirect healthcare costs from loss of employment, loss of productivity, sick leave, and uncompensated care totaling \$158.5 billion. Bipolar disorder treatment is one of the costliest of all mental health conditions. This is the result of the need for frequent hospital stays for BP patients.

The diagnosis is complicated when the patient's initial presentation includes depressive symptoms which is true for 50% of the BP patient population. Up to 70% of patients diagnosed with BP have been initially misdiagnosed. Delayed identification of BP can result in poor clinical outcomes and increased costs. Delay in diagnosis is a specific problem for women with BP type II since the symptoms of hypomania may not be readily apparent. In addition, misdiagnosis during the postpartum period is common and women originally diagnosed with postpartum depression may be diagnosed with BP at a later time.

Treatment for BP is often conventional mood stabilizers such as lithium, valproate, lamotrigine, and carbamazepine. Lithium has been the primary treatment for BP for over 60 years. Its effect on bipolar disorder depression is limited and it does not have rapid affect in reducing acute mania. However, lithium is the only drug proved to reduce the risk of suicide in patients with BP. Sodium valproate is the most commonly used mood stabilizer for patients

with BP. It can be paired with lithium to treat patients needing maintenance therapy. There is some controversy over the use of antidepressants to treat bipolar disorder. When antidepressants are prescribed, specific protocols are followed to gradually taper the dosage slowly after remission of depression.

An obstacle in the successful treatment of bipolar disorder is the patient's willingness to take prescribed medications as directed. It is not uncommon for bipolar disorder patients to stop taking medication when their symptoms lessen and/or disappear.

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### **Spring Tour Schedule**

During the month of April, Partners President Sharon Scott and President-elect Julie Steiner will travel our beautiful state attending district meetings. To be efficient and financially responsible, the meetings have been grouped according to their respective locations.

#### **Date District/Location**

**Wed., April 3** Southern District, Beloit

Thurs., April 4 Western District, Prairie du Chien

Wed., April 10 Southeastern District, Menomonee Falls

Thurs., April 11 Lakes District, Waupaca

**Wed., April 24** Northwestern and West Central Districts, Ladysmith

Thurs., April 25 North Central District, Wausau

### **Save the Dates: Convention 2024, Oct. 1-3**

**Save the dates of October 1-3, 2024 for "Volunteers-Diamonds in the Rough." We will gather again at the Stevens Point Holiday Inn and Conference Center** to enjoy our time together. Plan to attend some educational workshops and listen to enlightening speakers. More information will be forthcoming in future Reaching Out newsletters. Start making plans to attend!

Sheree Schaefer  
Convention Chair