

## ***For Your Action***

14-04

July 28, 2014

To: LeadingAge Wisconsin Members

From: John Sauer, President/CEO  
Tom Ramsey, Vice President of Public Policy and Advocacy

Subject: **A CALL TO ACTION—2014 Advocacy Efforts**

*In its last fiscal year, Nursing Home “A” recorded a Medicaid deficit of just over \$1 million, or \$51.90 each day for its average daily census of 65 Medicaid residents. That loss, combined with declining Medicare revenues due to cuts at the federal level, forced Nursing Home “A” to take the following actions this year: 1) For a second year in a row, wages were frozen; 2) The anticipated addition of three needed CNAs was put on hold; 3) Employees were asked to pick up an additional 5% of their health care benefit costs; and 4) Admissions coordinators were directed to focus their attention on prospective private pay residents.*

*St. Albert’s Assisted Living Facility, a community-based residential facility (CBRF), has not received a rate increase from its Family Care managed care organization (MCO) in three years, following a 2% rate cut four years ago. With costs rising 2.3% per year on average over that four year period, fiscal necessity/reality forced St. Albert’s to cut one P.M. CNA, reduce an anticipated 1.5% across-the-board wage increase to .25%, and place a 10% cap on Family Care residents.*

We can debate whether these hypothetical scenarios are realistic; what they are intended to be are illustrative of the kind of information members should be sharing with their legislators and legislative candidates during this campaign season, that is if they are serious about the need for a 5% increase in nursing home Medicaid and Family Care rates in each year of the upcoming 2015-17 biennium.

The LeadingAge Wisconsin advocacy strategy for the 2015-17 legislative session was described in the June 27<sup>th</sup> edition of *eNews* ([www.leadingagewi.org/media/15607/en1412.pdf](http://www.leadingagewi.org/media/15607/en1412.pdf)): Focus on the problems facing long-term care providers and not the 5% “solution” during this campaign season, which is in full swing right now with the August 12<sup>th</sup> primary just weeks away and the November 4<sup>th</sup> general election less than three months after that.

And what is the most effective way to convey your message, to inform your legislators and legislative wannabees of the difficulties you face in caring for their constituents, indeed possibly their loved ones?

“Show ‘em.”

Invite them to your campus for a tour of your facility (ies) and “show ‘em” their constituents, aka your residents and staff. “Show ‘em” the faces of your residents and the compassionate way in which caregivers go about their tremendously difficult tasks. Try to ingrain in them through these tours a mental imprint of the faces of your residents and staff before you begin to discuss the challenges you face.

While you should share with them the “2012 Nursing Facility Medicaid Losses and Fact Sheet” ([www.leadingagewi.org/media/8828.snf1213loss.pdf](http://www.leadingagewi.org/media/8828.snf1213loss.pdf)), don’t place too much emphasis on that document; it points out generalities when what all legislators and elected officials are looking for is specifics, specifically “how do legislative actions or inactions affect your ability to provide quality care to their constituents” (and potential voters)?

Try to answer the universal question of all legislators, real or prospective: “How does what we do affect what you do?” But if you are to be convincing, you need to be specific. If the tables were turned and your legislators were seeking your help, what would persuade you to take an active role in seeking to provide that help, especially when so many others are sharing their stories in hopes of garnering that same help?

Is it more persuasive to convey the fact that the average Wisconsin nursing home loses \$50.91 per day for each Medicaid resident it serves or that my nursing home, in your legislative district, last year lost \$50.91 for each of the 65 Medicaid residents on average it serves daily and will have to freeze staff wages in light of that underfunding?

Is it more persuasive to state that these Medicaid deficits or Family Care rate freezes are a devastating, ultimately unsustainable blow to your ability to provide quality care than it is to explain specifically how and why these deficits are so devastating?

It’s perfectly understandable that a provider would be reluctant to air their “dirty laundry” in public but what if outlining the difficult actions you need to take to make ends meet is the only way to convince a public official to fight for your facility, its residents and staff? Because for all intents and purposes, it is the only way.

You’re asking an elected official to allot a substantial sum of taxpayer money to address the problems you’re facing: if you were that elected official, what would it take to convince you

to take that course of action and not provide that allotment to another seeking help? Put yourself in your elected officials' shoes and in the course of your discussions, share with them the information you would need to be convinced of the righteousness of your position.

The "2012 Nursing Facility Medicaid Losses and Fact Sheet" presents an excellent illustration of Medicaid underfunding of nursing homes but at the end of the day, those are only numbers. How do those numbers affect real people, in this case, the residents and staff of your nursing home and, not coincidentally, the constituents of your elected representatives? How do those devastating MA deficits translate into staffing patterns and staff wages and benefits? How will capping Family Care admissions affect access to individuals seeking quality care? Share those aggregate loss numbers, absolutely, but if those numbers are to have any real impact, their impact on real people also must be shared.

The LeadingAge Wisconsin advocacy strategy for 2015-17, the so-called "5% Solution," will fail if members do not collectively accept this "Call to Action." Purely and simply, without member buy-in and active participation, this strategy will not succeed, no matter how high your Medicaid deficits or Family Care losses might be. Every "special interest" has a story to tell, a legitimate story. Those that succeed are those that tell their stories.

As provided in our prior communiqués, here are the sources that identify incumbents and challengers for the upcoming elections:

- A listing compiled by the Government Accountability Board (GAB) of all candidates on the August 12<sup>th</sup> primary ballot by office and home address is available [here](#).
- Links to a candidates' list compiled by The Wheeler Report which is similar to the GAB list but also contains information on the campaign committees is available [here](#). These links might be of more value to facilities seeking to invite candidates for a visit to their communities because it contains campaign committee contact information, thus enabling contact without invading the candidates' privacy.

If we can further assist you in carrying out this message, please contact us at the LeadingAge Wisconsin office. In addition, please contact Tom Ramsey ([tramsey@LeadingAgeWI.org](mailto:tramsey@LeadingAgeWI.org)) when you've held a candidate meeting or have met with your legislator(s) and provide a brief overview of what was discussed and the response you received.

Thank you in advance *For Your Action*.