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## VHHA in Action

Each day, VHHA actively works on behalf of its members, their employees, and Virginians to advance the interests of Virginia's hospitals and health care systems. In the past week, these are some developments of interest to Virginia hospitals and health systems:

### **VHHA Holds Meeting of the Board of Directors' Executive Committee**

- The **Executive Committee** of the **VHHA Board of Directors** met this week for a discussion of issues of interest and importance to hospitals and health systems, including state legislative and federal policy issues.

### **VHHA Analysis Shows Hospitals Encounter Increasing Number of Patients with Drug Use Disorder**

- In recent years, the annual number of patients diagnosed with drug use disorder who are treated and discharged by Virginia hospitals has been on an upward trajectory, rising by 11.3 percent from 2020 (57,925 patient discharges) to 2024 (64,460 patient discharges). A new analysis from the **VHHA Data Analytics Team** also shows that trend tracks in year-over-year and average quarterly patient discharge numbers involving patients with a diagnosed drug use disorder. In 2020, the quarterly discharge average was 14,481. The average rose to 15,499 (a 7 percent increase) in 2021. It remained relatively flat (15,471) in 2022, then rose again to a quarterly average of 16,062 in 2023 and 16,115 in 2024. Over five years, the quarterly average increase was 11.3 percent. By year, the discharge counts are 57,925 (2020), 61,997 (2021), 61,884 (2022), 64,248 (2023), and 64,460 (2024). The analysis, which is based on data from the VHHA inpatient database and the **Center for Medicare & Medicaid Services (CMS)** drug use disorder diagnosis codes, also shows that more than half of the discharges (51.6 percent) involved patients covered by Medicaid, with 18.3 percent involving Medicare patients, and 12.6 percent among patients with commercial insurance. The highest volumes of patients identified in this study received care from facilities in the following localities: the City of Richmond (6.9 percent), Fairfax County (5.6 percent), Henrico County (4.6 percent), the City of Norfolk (4.4 percent), the City of Virginia Beach (4.4 percent), Chesterfield County (4.1 percent), the City of Roanoke (3.8 percent), the City of Newport News (3.2 percent), Prince William County (2.8 percent), and the City of Chesapeake (2.4 percent). An evaluation of other clinical conditions diagnosed among this patient population shows that mental diseases and disorders account for 27 percent of all discharges involving drug use disorders, followed by alcohol or drug use induced mental disorders (21.3 percent) – an indication of the frequency of dual diagnoses when a patient has a substance use disorder and a co-occurring mental health condition.

### **View Recording of Latest Webinar in EMS Drug Kit Transition Series**

- The latest webinar in a series focused on the upcoming drug kit transition affecting Virginia's EMS agencies in 2025 was held this week and it focused on "Shared Insights from Rural and Urban Agencies." View the webinar recording [here](#) and see presentation slides through this [link](#). The webinar series is hosted by the **Virginia Department of Health (VDH) Office of Emergency Medical Services (OEMS)** in collaboration with the **Virginia Hospital & Healthcare Association (VHHA)** and the **Virginia Society of Health-System Pharmacists (VSHP)**. Historically, Virginia hospitals and health systems have provided drug kit replenishment to EMS agencies. Federal regulatory changes at the **U.S. Food and Drug Administration (FDA)** and the **U.S. Drug Enforcement Agency (DEA)** will result in those drug kit services being discontinued.

### **VHHA in the News**

- VHHA actively engages with the news media to share public messaging and coordinate member media appearances to showcase the important work done by Virginia hospitals. That work is

reflected in recent coverage from the [Brunswick Times-Gazette](#), [NBC 12](#), [WRIC](#), [Bacon's Rebellion](#), [MSN](#), [WVVA](#), and the [Virginia Star](#).

## News Updates

### CMS Issues Medicare Advantage 2026 Final Rule, Prescription Drug Payment Policies

The **Centers for Medicare & Medicaid Services** (CMS) recently issued a [final rule](#) on Medicare Advantage (MA), Medicare Prescription Drug Benefit (Part D), Medicare cost plan, and Programs of All-Inclusive Care for the Elderly (PACE) programs for contract year 2026. CMS also released the calendar year (CY) 2026 rate announcement for the Medicare Advantage (MA) and Medicare Part D prescription drug programs that finalize payment policies. The final rule implements changes related to prescription drug coverage, the Medicare Prescription Payment Plan, dual eligible special needs plans (D-SNPs), Star Ratings, and other programmatic areas, including the Medicare Drug Price Negotiation Program. Read more [here](#). Under the finalized payment policies, government payments to MA plans are expected to increase on average by 5.06 percent from 2025 to 2026. This is an increase of 2.83 percentage points since the CY 2026 Advance Notice. Read more [here](#).

### CMS Asks Inpatient Psychiatric Facilities to Participate in Patient Assessment Instrument Beta Testing

Ahead of a future requirement on submitting patient assessment data, the **Centers for Medicare & Medicaid Services** (CMS) is asking inpatient psychiatric facilities (IPF) to voluntarily participate in a beta test of its IPF [patient assessment instrument](#) (PAI). The PAI is a new tool for reporting patient data. Beginning in 2028, IPFs will need to submit patient assessment data using the IPF-PAI to meet requirements of the CMS IPF Quality Reporting Program and receive full annual payment updates under the IPF prospective payment system. The beta testing process will occur this summer and fall. Participating IPFs are being sought from multiple regions across the nation. Questions about the development or testing of the IPF PAI can be sent to [IPF-PAI\\_testing@abtglobal.com](mailto:IPF-PAI_testing@abtglobal.com).

### CDC Offers Measles Guidance to Health Care Providers

In response to the ongoing measles outbreak, the **Centers for Disease Control and Prevention** (CDC) is offering health care providers guidance for treating patients with measles or suspected exposure. The guidance includes patient isolation, notification of appropriate public health agencies, collection of nasal or throat swab samples, and administration of supportive care such as Vitamin A treatment to patients with confirmed cases under the supervision of a care provider. From the start of the year through early April, the CDC has been notified of 607 confirmed U.S. cases of measles in 22 jurisdictions and six outbreaks (defined as three or more cases). The largest outbreaks have been in Texas and New Mexico, which account for more than 90 percent of cases. Most of the cases have been among children and adolescents who had not received a measles vaccine or whose vaccination history is unknown. Three measles deaths have been reported so far this year: one in an unvaccinated adult in New Mexico and [two](#) in unvaccinated school-aged children in Texas. Read more [here](#).

### FDA Approves Novel Treatment for Hemophilia A or B

The **U.S. Food and Drug Administration** (FDA) recently approved Qfitlia (fitusiran) for routine prophylaxis to prevent or reduce the frequency of bleeding episodes in adult and pediatric patients 12

years of age and older with hemophilia A or hemophilia B, with or without factor VIII or IX inhibitors (neutralizing antibodies). Hemophilia A and hemophilia B are genetic bleeding disorders. Patients with these hemophilias are unable to clot properly and may bleed for a longer time than normal after injury or surgery. Qfitlia does not replace the missing clotting factor. Instead, it reduces the amount of a protein called antithrombin, leading to an increase in thrombin, an enzyme critical for blood clotting. Qfitlia is administered under the skin (subcutaneously) starting once every two months. Read more [here](#).

### **Washington Seeks Deregulation Input Through Public Comment Period**

The **Office of Management and Budget (OMB)** is soliciting ideas for deregulation from across the nation through a 30-day public comment period. Those who submit comments are asked to identify rules to be rescinded and provide detailed reasons supporting those positions. The public comment period applies to all regulations currently in effect. Read more [here](#) and [here](#). In related news, **U.S. President Donald Trump** has issued a pair of executive orders that pertain to [reducing anti-competitive regulatory barriers](#) and [directing the repeal of unlawful regulations](#).

### **Federal District Court Blocks Nursing Home Staffing Requirement**

This week, a judge on the U.S. District Court for the Northern District of Texas struck down a rule from the **Centers for Medicare & Medicaid Services (CMS)** establishing minimum nursing home staffing standards. The rule required nursing homes to have a registered nurse (RN) onsite and available to provide direct care around the clock, and set a minimum of 0.55 hours per day for RNs, 2.45 hours per day for nursing assistants, and 3.48 hours per day for total nurse staffing. Read more [here](#).

### **U.S. House-Approved Budget Resolution Anticipates Medicaid Cuts**

This week, the **U.S. House of Representatives** approved a modified [budget resolution](#) that, among other things, directs the **U.S. House Energy and Commerce Committee** with jurisdiction of Medicaid and other health care programs to cut at least \$880 billion in spending over time. The recent House action is a necessary procedural step towards the reconciliation process in Congress of developing a longer-term spending plan. Various committees are now tasked with drafting legislation to align with the budget resolution. Earlier this year, Congress approved a [continuing resolution](#) to fund the federal government through Sept. 30 and avert a partial government shutdown.

## **Events**

### **Register for the VHHA Emergency Preparedness Summit on April 16**

Register now for the upcoming **2025 Virginia Healthcare Emergency Preparedness Summit** hosted by VHHA and the **VHHA Foundation** on April 16 at The Westin-Richmond. "Today's Challenges, Tomorrow's Impact" is the theme for this in-person event, during which participants can engage with speakers, sponsors, and support organizations from across the Virginia health care community about opportunities to strengthen the Commonwealth's preparedness for threats to the health care delivery system including severe weather, active aggressor incidents, crisis standards of care, and special pathogens response. Participants will have an opportunity to earn EMT continuing education credits and

up to five ACHE qualifying education hours toward initial certification or recertification of the **Fellow of the American College of Healthcare Executives** (FACHE) designation. Visit this [link](#) to register.

### **Register for the 2025 Virginia Healthcare Workforce Summit, a Virtual Event on May 13**

VHHA's **2025 Virginia Healthcare Workforce Summit** will explore innovative strategies for hospitals to adapt their practices, focusing on developing, recruiting, retaining, and supporting team members in a rapidly changing workplace. Sessions will delve into engaging and retaining a multi-generational workforce, building flexibility to meet evolving needs, fostering internal mobility and career development, and adopting cutting-edge models to address workforce challenges. Additional topics include advancing virtual nursing, leveraging artificial intelligence for workforce planning, and refocusing leadership approaches to empower teams. Register through this [link](#).

### **VHHA to Host April 30 Webinar Providing State Legislative and Budget Updates for Hospital Leaders**

The **VHHA Government Affairs Team** will host a webinar on April 30 at noon to provide a recap of the 2025 **Virginia General Assembly** session, including a briefing on policy and budget developments of concern to Virginia hospitals and health systems. The session will also feature a preview of Virginia's upcoming election cycle and a discussion of the evolving political landscape and how those changes could shape and impact health care policy. The webinar is open to all Virginia hospital and health system leaders. Register [here](#).

### **Register for May 6 Webinar from AblePay on Addressing Health Care Affordability Gap**

[AblePay Health](#), a [VHHA Solutions](#) endorsed partner, is hosting a webinar on May 6 at noon focused on how providers across the nation are addressing the health care affordability gap for organizations and patients. This presentation will showcase how the AblePay solution can boost revenue while enhancing overall patient experience. Real-world provider case studies offer valuable insights into how this program positively transforms patient payment behavior. Register for the webinar [here](#).

## **Podcast**

**VHHA *Patients Come First* Podcast Features Virginia Healthcare Emergency Preparedness Summit Biocontainment Speaker**

This episode of VHHA's *Patients Come First* podcast features **Christopher Sulmonte Jr.**, Administrative Director of Biocontainment at the **Johns Hopkins Special Pathogen Center**, who join us to discuss his work, the biocontainment process, his participation as a featured speaker during the upcoming **2025 Virginia Healthcare Emergency Preparedness Summit** on April 16, and more. Listen to the episode [here](#) and hear past episodes through this [link](#). Podcast episodes are also available through these podcast apps and networks: [Apple Podcast](#), [Amazon Music](#), [Spotify](#), [Pandora](#), [Stitcher](#), [TuneIn](#), [SoundCloud](#), [Blubrry](#), [iHeart Radio](#), [Deezer](#), [Podbay](#), [Overcast](#), [Pocket Casts](#), the [Virginia Audio Collective](#), the [Public Health Podcast Network](#), the [World Podcast Network](#), and the [Family Podcast Network](#). The podcast can also be heard on the radio airwaves – episodes air each Sunday at noon on 100.5 FM, 107.7 FM, 92.7 FM, and 820 AM across Central Virginia and 1650 AM in Hampton Roads, 105.1 FM and 1050 AM in Lynchburg, and Wednesdays at 1 p.m. on 93.9 FM in Richmond. Send questions, comments, feedback, or guest suggestions to [pcfpodcast@vhha.com](mailto:pcfpodcast@vhha.com).



## Around the State

**Harry Wiggins** has been named CEO of **Encompass Health Rehabilitation Hospital of Petersburg**, according to [reporting by Becker's Hospital Review](#). Prior to this role, Harry served as Senior Chief Nursing Officer for Encompass Health's MidAtlantic region and Chief Nursing Officer at **Encompass Health Rehabilitation Hospital of Richmond**.



For the third consecutive year, **Carilion Clinic** has been named to the *Fortune* magazine [list](#) of "America's Most Innovative Companies." The ranking is based on a methodology resulting in scores in three categories: product innovation, process innovation, and innovation culture. Read more [here](#).