



Barb Hansen, MA, RN
Executive Director, WSHPCO
P. O. Box 361
Camas, WA 98607
Direct tel: 541.231.2440
hansen@wshpco.org

January 2021

Re: Washington State Hospice & Palliative Care Organization 2020 Membership

Dear Colleagues:

Thank you for your ongoing support of the Washington State Hospice & Palliative Care Organization. Your membership enables us to meet the continuing challenges we face together.

Over the past year, what a challenging time it has been to be working in hospice and palliative care! WSHPCO remains committed to being an organization which grows and changes to offer more support and services to our members. Each year the WSHPCO board members revisit our agency goals and objectives and we confirm our priorities for growing the agency and better serving its members. In the past, key areas of development were identified and a few were completed in 2020, despite the "PHE":

- Finishing the Palliative Care Road Map (as first identified in the 2018 plan) with our Public Policy Committee, Public Policy Director Leslie Emerick and Washington DOH staff;
- Working with the Public Policy Committee, the Palliative Care Networking group and Leslie Emerick to explore options for legislation regarding funding for palliative care.
- Providing cost-effective educational opportunities for WSHPCO members.

Services WSHPCO continues to provide on a regular basis include:

- Leslie Emerick's representation with state regulatory bodies through DOH, HCA and DSHS Roundtables, providing frontline membership perspective on the many issues discussed: CoNs, long term care, drug take-back, Rural Palliative Care Initiative, Adult Palliative Care Rules, VSED, pediatric palliative care
- Monthly or bimonthly networking calls for members: QAPI/Regulatory, Inpatient Hospice Directors/Managers, Public Policy, Volunteer Coordinators, Education/Conference Planning
- Monthly networking calls that are open to both members and other interested groups: Palliative Care Networking, Pediatric Palliative Care
- And—as we began in January of 2020: monthly networking calls for Hospice Medical Directors

Education remains a priority of WSHPCO and its members, offering high quality trainings and conferences multiple times throughout the year. WSHPCO hopes to again co-sponsor the annual Spring Intensive: Regulatory Update with the Oregon Hospice & Palliative Care Association next year. We are still hopeful we can once again meet in person for the annual fall conference "Expanding Dimensions in Hospice & Palliative Care". In 2019, through an agreement with NHPCO, we were able to offer CME to physicians at the fall conference. It is our plan to continue this arrangement for future conferences, as it was valued highly by participants.

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Other membership benefits include:

- Attendance at the annual Hospice Advocacy Intensive in Washington, DC
- Access to educational programs through webinars and on-site training
- Receipt of the weekly e-mail newsletter, WSHPCO eNews, which includes a brief summary of timely and pertinent journal and newspaper articles on end-of-life issues
- Listing on the Find a Provider page on our website at <https://wshpco.org/>
- Discounted rates at WSHPCO and Oregon Hospice & Palliative Care Association conferences

The past several years continued to bring a record number of regulatory changes in hospice. This was especially true in 2020 as we worked to ensure our members understood the CMS and state waivers issued as a result of the Public Health Emergency. We continue to face the challenges of payment reform, ever-increasing scrutiny by the Office of the Inspector General, the "MACs" and other CMS "subcontractors", continued changes and expansion in quality reporting requirements, as well as all the "usual" challenges in providing care for dying Washingtonians and their families. We work closely with our colleagues at the National Hospice and Palliative Care Organization, with the National Government Services Provider Outreach and Education Advisory Group and with the Council of States committee to stay abreast of current and proposed regulatory changes.

Our intention remains to help you lead through the challenges. It is our goal to:

- Be available to you when you need us and be responsive to your requests
- Keep you informed about our complex industry and the changes being proposed
- Provide great education and networking opportunities
- Advocate for your interests with external stakeholders who have the power to affect our work

In an effort to better serve both the public and our member hospice and palliative care providers, we continue to improve our website, enhancing it to be a dynamic resource for you. Meg McCauley, Director of Association Management, monitors our website daily. Please let her know if you have any suggestions or ideas for additional content or resources: mccauley@wshpco.org.

These are services and benefits you receive as a member of the Washington State Hospice & Palliative Care Association. For these reasons, we invite you to be an WSHPCO member for 2021. Thank you for your many contributions to people in our state. A Directory Update form and Staff Contacts form can be found [HERE](#) for you to complete and return with payment. You may also complete your membership information and pay your dues securely online [HERE](#). **Information collected on this form will be used to edit your listing on the WSHPCO website Directory and let us know who in your program we can include in our emails and networking groups.**

The **deadline for the dues and roster update is February 28, 2021**. If you have any questions, please contact Barb Hansen, WSHPCO Executive Director, at hansen@wshpco.org or 541.231.2440.

Best regards,



Barb Hansen, MA, RN



"To foster, advocate for, and promote quality hospice and palliative care."

WSHPCO • P. O. Box 361 • Camas, WA 98607 • 253.661.3739

2021 Provider Membership Dues Statement – please complete all information thoroughly; information provided here will be transferred to your website listing.

Definition of Hospice Provider Member: Any public or private agency, entity, center, institution or any distinct part of these organizations which is licensed by the state of Washington as a hospice agency or volunteer hospice and provides hospice care. Hospice Provider members have voting responsibilities and privileges.

Definition of Palliative Care Provider Member: Any public or private agency, entity, center, institution, which is providing palliative care services and is recognized as a distinct palliative care program and is licensed by appropriate state oversight, if required. Palliative Care Provider members have voting responsibilities and privileges.

Agency Name:

Admin/Director Name:

Email:

Address :

Tel:

City/State/Zip:

Counties Served:

Website:

Cities Served (please attach separate sheet if too many cities to list here):

Please check if your agency provides BOTH hospice AND palliative care services:

For Medicare-Certified Hospices - Calculate the amount due using the following formula per provider number:
 Number of Admissions from January 1 through December 31, 2020 multiplied by \$5.00. Programs with multiple sites are to include the main office and all branches for a total census. **Minimum Dues Payment is \$300.**

Number of patients admitted in 2020:

Multiplied by \$5.00 =

Total:

For Volunteer or State-Licensed Hospices and Palliative Care Programs (please check) – Annual dues = \$300

Volunteer Hospice

State-licensed Hospice

Palliative Care Program

PAYMENT INFORMATION (checks and credit cards accepted) *You may also renew and pay securely online at <https://wshpco.org/medicare-certified-hospice-program-form/>*

Credit Card #:

Check

Name on Credit Card:

Billing Address:

City/State/Zip:

Exp. Date:

Vcode #:

Signature:

Make checks payable to WSHPCO. Send your Provider Membership forms and payment to:

WSHPCO • P. O. Box 361 • Camas, WA 98607 • mccauley@wshpco.org • Direct/Cell: 503.890.7027

STAFF CONTACTS WSHPCO membership extends to the entire staff of the member organization. Members receive information, notices and access to various networking groups, list-serves, the weekly eNews, education and conference materials. Please let us know if there are changes to your information to ensure you receive important and timely information. Thank you!

Hospice/Palliative Care Leader, Director (automatically added to WSHPCO <u>Member Providers</u> + <u>QAPI/Regulatory</u> networking groups)				
Name(s)	E-Mail Address(es)	Optional: Add to Networking Groups (please check)		
		<input type="checkbox"/> Palliative Care	<input type="checkbox"/> Public Policy	<input type="checkbox"/> Pediatric Palliative Care
		<input type="checkbox"/> Palliative Care	<input type="checkbox"/> Public Policy	<input type="checkbox"/> Pediatric Palliative Care
Hospice Medical Director (automatically added to Member WSHPCO + Oregon Hospice & Palliative Care Organization (OHPCA) <u>Medical Directors</u> networking group)				
Name(s)	E-Mail Address(es)	Optional: Add to Networking Groups (please check)		
		<input type="checkbox"/> QAPI/Regulatory	<input type="checkbox"/> Palliative Care	
		<input type="checkbox"/> Public Policy	<input type="checkbox"/> Pediatric Palliative Care	
		<input type="checkbox"/> QAPI/Regulatory	<input type="checkbox"/> Palliative Care	
		<input type="checkbox"/> Public Policy	<input type="checkbox"/> Pediatric Palliative Care	
Hospice Volunteer Coordinator (automatically added to Member WSHPCO + OHPCA <u>Volunteer Coordinators</u> networking group)				
Name(s)	E-Mail Address(es)	Optional: Add to Networking Groups (please check)		
		<input type="checkbox"/> QAPI/Regulatory	<input type="checkbox"/> Palliative Care	
		<input type="checkbox"/> Public Policy	<input type="checkbox"/> Pediatric Palliative Care	
		<input type="checkbox"/> QAPI/Regulatory	<input type="checkbox"/> Palliative Care	
		<input type="checkbox"/> Public Policy	<input type="checkbox"/> Pediatric Palliative Care	
Hospice/Palliative Care QAPI/Regulatory Coordinator (automatically added to WSHPCO <u>QAPI/Regulatory</u> networking groups)				
Name(s)	E-Mail Address(es)	Optional: Add to Networking Groups (please check)		
		<input type="checkbox"/> Palliative Care	<input type="checkbox"/> Public Policy	<input type="checkbox"/> Pediatric Palliative Care
		<input type="checkbox"/> Palliative Care	<input type="checkbox"/> Public Policy	<input type="checkbox"/> Pediatric Palliative Care

Hospice/Palliative Care Clinical Contact (primary contact person, Patient Care Coordinator)

Name(s)	E-Mail Address(es)	Optional: Add to Networking Groups (please check)	
		<input type="checkbox"/> QAPI/Regulatory	<input type="checkbox"/> Palliative Care
		<input type="checkbox"/> Public Policy	<input type="checkbox"/> Pediatric Palliative Care
		<input type="checkbox"/> QAPI/Regulatory	<input type="checkbox"/> Palliative Care
		<input type="checkbox"/> Public Policy	<input type="checkbox"/> Pediatric Palliative Care

Hospice/Palliative Care Biller

Name(s)	E-Mail Address(es)	Optional: Add to Networking Groups (please check)	
		<input type="checkbox"/> QAPI/Regulatory	<input type="checkbox"/> Palliative Care
		<input type="checkbox"/> Public Policy	<input type="checkbox"/> Pediatric Palliative Care
		<input type="checkbox"/> QAPI/Regulatory	<input type="checkbox"/> Palliative Care
		<input type="checkbox"/> Public Policy	<input type="checkbox"/> Pediatric Palliative Care

Hospice/Palliative Care Social Worker

Name(s)	E-Mail Address(es)	Optional: Add to Networking Groups (please check)	
		<input type="checkbox"/> QAPI/Regulatory	<input type="checkbox"/> Palliative Care
		<input type="checkbox"/> Public Policy	<input type="checkbox"/> Pediatric Palliative Care
		<input type="checkbox"/> QAPI/Regulatory	<input type="checkbox"/> Palliative Care
		<input type="checkbox"/> Public Policy	<input type="checkbox"/> Pediatric Palliative Care

ADDITIONAL GROUPS, STAFF – Please add the additional staff persons to the following distribution lists:

Inpatient Hospice Directors, Managers Networking Group		
<i>Name(s)</i>	<i>E-Mail Address(es)</i>	<i>Job Description/Title</i>
QAPI/Regulatory Networking Group		
<i>Name(s)</i>	<i>E-Mail Address(es)</i>	<i>Job Description/Title</i>
Palliative Care Networking Group		
<i>Name(s)</i>	<i>E-Mail Address(es)</i>	<i>Job Description/Title</i>
Pediatric Palliative Care Networking Group		
<i>Name(s)</i>	<i>E-Mail Address(es)</i>	<i>Job Description/Title</i>
Public Policy Networking Group		
<i>Name(s)</i>	<i>E-Mail Address(es)</i>	<i>Job Description/Title</i>