

**University of Wisconsin Population Health Institute
ADVISORY BOARD MEETING SUMMARY**

Thursday, February 13, 2014
10:00 AM to 1:00 PM
Rural Wisconsin Health Cooperative

Staff Present: Bridget Catlin, Andrew Fisher, Donna Friedsam, Robin Lecoanet, Paul Moberg, Karen Timberlake

Members Present: Tim Bartholow (via phone), Kurt Eggebrecht, Sen. Julie Lassa via phone), Dr. Demond Means (via phone), Greg Nycz, Chris Queram, Ayaz Samadani (via phone), Annette Severson, Greg Simmons, Tim Size, Jeff Stone, Dick Tillmar

Members Absent: Bevan Baker, Steve Brenton, Cheryl DeMars, Curt Gielow, Sen. Terry Moulton, Rep. Sandy Pasch, Peggy Rosenzweig,

Review of Minutes: The minutes were approved.

Welcome & Introductions: Karen Timberlake and Tim Size

Karen welcomed members of the Advisory Board. RWHC Executive Director Tim Size welcomed Board members to RWHC and gave a brief overview of their activities.

Dr. Demond Means Youth Poverty Project

Dr. Demond Means gave an overview of a Youth Poverty Project he is working on as a co-chair of the Milwaukee County Social Development Commission. He asked for Board members to provide perspective and assistance.

Milwaukee is the 4th most impoverished city in the country and the focus of the Commission is to see the effect on youth as a result of poverty, especially persistent, generational poverty. The Commission is looking at physical and mental health, educational attainment, and barriers created by a culture of poverty. The goal of the project is to draw awareness to the fact that poverty has adverse effects on young people and to develop a series of policy recommendations for leaders and local and state level. Additionally, the services provided to the community by the Social Development Commission should be reevaluated at a time that budgets have been cut and programs have been eliminated.

Some further resources recommended by Board members included the Harvard Center on the Developing Child, which has studied children and poverty and the impact of poverty and toxic stress on health, from newborn age and up. Other recommended resources include a National Conference of State Legislatures and Pew partnership to compile a list of best practices on early childhood learning, Karen Bogenschneider who does work on early childhood development; and Dean Bob Diehl at Marquette, who is working on a conference on poverty and community outreach.

County Health Rankings and Roadmaps: 2014 and Beyond: Bridget Catlin

Bridget Catlin led the discussion on the County Health Rankings and Roadmaps, beginning with acknowledging the hard work of the Rankings and Roadmaps team, and support from RWJF and local, state, and national partners.

Rankings overview

The Institute has been ranking the health of counties in WI since 2003 and went national with funding from RWJF in 2010. The Rankings are based on a model of population health that emphasizes the multiple factors that contribute to long, healthy lives.

Counties are given two ranks – Health Outcomes (health right now) and Health Factors (conditions that determine how healthy communities will be in the future). The Rankings team views the media as partners and they are actively engaged for attention. Media help disseminate the rankings to communities. The Rankings team can offer data and guidance, assisting communities to implement programs that have been shown to work, leading to improvements in health.

What's new for 2014?

Tweaks have been made to the logic model. Housing and Transit have been added under Physical Environment. Drug Use has been added under Health Behaviors. This reflects the need to acknowledge the increasing problem with prescription and other drugs, problems especially plaguing rural communities.

On the website, users can see state level resources and links to further data. The website is a starting point and communities are encouraged to drill down. State specific resources are categorized and can be drilled down by demographic group, geographic area, to the zip code level. Students and staff working on the Rankings team are always searching for further resources and constantly gathering stories from communities. They are making an effort to contribute to the science base as well. One new feature in 2014 is Measuring Progress, a new tool that helps communities to see if the changes they are making are having an impact.

Roadmaps overview

The Roadmaps are focused on the right side of logic model – how to get communities to work on improving health. The Roadmaps team has a set of tools, guidance, and coaches that help communities focus on what is important, and make sustainable change. The toughest part is implementation but there are tools and guidance for each step. Active engagement of the business community is sought. It takes whole communities to take evidence-informed action, to innovate and contribute to the evidence base, and to focus on health factors, policy, and systems change.

The Roadmaps to Health Prize has now been transformed into the RWJF Culture of Health prize. This breaks down the division between public health and healthcare. The message now is building a culture of health across the nation. There will be an increase in the number of winners of the prize.

The Rankings and Roadmaps will be renewed this year. Capacity for Roadmaps will be expanded across the country to allow for regional coaching. A Health Gap index will be released in 2015.

2014 Engagement Strategy

For the release of the Rankings and Roadmaps in March, each state has a team to coordinate outreach. In Wisconsin, Karen Timberlake is the leader. There will be media outreach and phone calls to community leaders and op-eds across the state. Involving the business community in outreach as well as county-level officials is important. Outreach should involve personalized content from allies.

Healthy Community Design – Bridget Catlin and Karen Timberlake

Karen Timberlake and Bridget Catlin are in discussion with stakeholders about creating a certification program for Healthy Communities, in the same vein as national certification programs like LEED, bike friendly communities, safe communities, well city, playful city, or Tree City.

UWPHI is currently working with Ken Carlson of Sauk Prairie Memorial Hospital, who is working on community benefit programs. A set of standards that could be shown to community leaders that show what elements make a healthy community could catalyze further activities. The hospital is looking for help with the science to understand what these elements are. The designation would help communities move forward and would recognize work that has already happened.

It is important to include all stakeholders in this kind of discussion, such as HMOs, business community, schools, employers, and local governments. This could be viewed as a tool for economic development.

Affordable Care Act and Medicaid Reforms – Donna Friedsam

Donna Friedsam presented an overview of projected gains and losses in health insurance coverage through Medicaid and the Marketplace. Through June 2015, it is expected that there will be about 733,000 newly covered people in Wisconsin, with 107,000 projected to join Medicaid, and 626,000 expected to gain coverage through the Marketplace. As of February 1, 2014, 56,000 have selected a plan. 20% of those are ages 18-34. 70% of enrolled are going for the silver plan and thus are eligible for further cost-sharing subsidies. 89% of those enrolled are eligible for federal subsidies. It is unknown how many of those 56,000 who have selected plans are moving from Medicaid or were uninsured. The focus in outreach and enrollment has been getting Medicaid transition to the Marketplace, possibly with a loss of focus on getting coverage for the uninsured.

Questions for further study include: why premium rates vary across the state, and also between states like WI and MN, as well as how does being newly insured affect health. Network adequacy in rural areas is a big issue that is being addressed by organizations such as WHA, which established a Network Adequacy Council.

Other important questions involve the “actuarial death spiral” – this problem has likely been overstated by opponents and the numbers look good enough to avoid problems. Additionally, it is important that transitions in coverage be handled well. Disruptions in coverage have a negative impact on health.

Wisconsin has very wide variations in cost between regions. The Insurance Commissioner is undertaking a study of these variations and reviewing drivers of healthcare costs. Wisconsin has the lowest Medical Loss Ratio rebates in the country, at \$26 per family. From an actuarial standpoint, health plans are pricing products responsibly. For many issues, it is just too early to draw conclusions. There are many issues to study but not enough data yet.