



# E-News

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The Wisconsin Public Health and Health Policy Institute's E-News is available monthly during the academic year. Check our website for additional information and updates: <http://www.pophealth.wisc.edu/wphi>

Information for E-news is compiled from several sources, including websites and lists from the Wheeler Report, Wisconsin Council on Children and Families, Agency for Healthcare Research and Quality, Kaiser Family Foundation, Commonwealth Fund, Milbank Quarterly, Health Affairs, Urban Institute, Wisconsin Medical Society, Wispolitics.com, Handsnet, Blue Cross/Blue Shield, New York Times, Milwaukee Journal-Sentinel, Milwaukee Business Journal, Wisconsin State Journal and others.

### Request for Submissions:

Please help us to help you stay up to date on what kinds of health policy research are going on in Wisconsin. To include your events, research or other important public health or health policy research activities in a future issue of the Institute's E-news, or if you have any comments about this publication, send an e-mail to Judy Knutson at: [jaknutso@facstaff.wisc.edu](mailto:jaknutso@facstaff.wisc.edu).

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## State News

### Businesses Initiating Major Preventive Programs

A wide variety of business and institutions in the public, private and non-profit sectors are taking health prevention programs seriously and investing significant resources for long-term success. Deb Seyler, head of the Milwaukee Wellness Council, which has added 70 employer-members this year noted, "To cut costs, businesses "tinker with co-payments, increase premiums and deductibles, and reduce benefits as well as renegotiate with providers. Now they are down to the last thing on the list, and that is prevention." In Menasha, employees at Advent Health Services can enroll in a Wellness Program that includes diet instruction, walking and exercise programs and smoking cessation. <http://www.jsonline.com/bym/news/jun04/236261.asp>

For Fox River Valley News: [http://www.wisinfo.com/postcrescent/news/archive/biz\\_16346823.shtml](http://www.wisinfo.com/postcrescent/news/archive/biz_16346823.shtml)

### Wisconsin Medical Society Appoints New CEO

The Wisconsin Medical Society has appointed a physician as CEO and Executive Vice President. Dr. Susan Turney, an internist at the Marshfield Medical Clinic, is the first physician and also the first woman to hold the position of CEO in the Wisconsin Medical Society's 150 years. Dr. Turney currently serves on the WMS Board of Directors and is a delegate to the AMA. She will begin her position on August 2, 2004. See [www.wisconsinmedicalsociety.org](http://www.wisconsinmedicalsociety.org)

### Four Thousand Uninsured Children Targeted For MA/BC Enrollment

Governor Doyle and Wellpoint Foundation announced the provision of \$500,000 grants to community organizations to spur enrollment of low-income, uninsured Milwaukee children and their families in Medical Assistance and Badgercare. The pilot programs funded by Wellpoint, parent company of Blue Cross/ Blue Shield, is focused on overcoming specific barriers to enrollment. These include overcoming language and cultural barriers, perceptions of bureaucratic complexity and the belief that people who are currently healthy do not need insurance. Organizations interested in applying for the outreach efforts can apply to WellPoint until mid-July. You can find a press release from the Governors office at:

<http://www.thewheelerreport.com/releases/June04/Jun15/0615govhealthfutures.pdf>

### Prisoner Health Costs Increase 500% in 11 years

Following state health care cost trends, costs for health care for prisoners has increased from \$10 million in 1992 to \$61 million in 2003. While half of that overall increase can be attributed to a tripling of the inmate population, other factors such as population aging add significantly to the cost spiral. For example, cost per inmate increased from \$1362 in 1992 to \$3378 now. Some of the increases in cost is due to the onset of chronic diseases such as Hepatitis C, which previously could not be effectively treated but which now can be treated but at a price of \$14,000 for the medication. Despite the high costs the cost per single inmate continues to be substantially lower than the single insurance policies bought in the private sector. The mean cost of a single policy in

Milwaukee in January 2004 was \$4500, while in Wisconsin Rapids a similar policy with a \$750 maximum subscriber pay-out was \$4620- 25% higher than correctional system costs.

<http://www.jsonline.com/news/state/jun04/234920.asp>

### **Collaborative for Healthcare Quality Doubles Membership**

Eleven new health providers have joined the Wisconsin Collaborative for Healthcare Quality, a voluntary statewide consortium providing businesses and consumers with data on health care quality and cost. The new members double the number of health care providers previously participating. The new members are Advanced Healthcare and Columbia-St. Mary's, Milwaukee; Memorial Hospital and Medical Associates, Menomonee Falls; University of Wisconsin Hospital and Clinics and University of Wisconsin Medical Foundation, Meriter Hospital and Physicians Plus Insurance Corporation, Madison; Sacred Heart Hospital and Luther Midelfort-Mayo Health System, Eau Claire, Affinity Medical Group, Fox Valley- Oshkosh and Wausau Hospital. The Collaborative has agreed to a set of common measures of healthcare quality outcomes and by publicly reports performance of healthcare delivery organizations against these measures. The 2003 Progress Performance Report can be found at:

<http://wchq.org/reports/>

For more information on the Collaborative.

<http://www.thewheelerreport.com/releases/June04/Jun22/0622wicollaborative.PDF>

### **State Sues Drug-Makers for Overcharging**

Attorney General Peg Lautenschlager sued the major pharmaceutical companies for systematically overcharging state residents. The system of using a wholesale price and then sharply discounted prices for favored purchasers is in violation of the state's wholesale price and trade laws. As an example, Lautenschlager cited her albuterol inhaler (used for asthma) which is sold at wholesale for \$72.90 but is sold at \$23.00 to certain businesses. The complaint charges that when businesses such as pharmacies, physicians or hospitals may in certain cases buy the drugs at sharply lower prices, they seek reimbursement at the published "wholesale" price.

Spokespersons for the pharmacy industry stated that pharmacy regulation is a function of the federal and not state government. <http://www.jsonline.com/news/state/jun04/234237.asp>

### **State Employees Increasingly Accept Change in Insurance Payment**

Half of the state union bargaining units have now accepted significant employee contributions to their health insurance premiums. While these unions do not account for half of the employees (some of the units are many times the size of others), some of the bargaining units are considered "major" units, including the 3000-member social services unit. The minimum contribution is \$45 for a family plan and \$18 for a single plan. These changes are concurrent with a wage freeze in the first year of the agreement, one percent in the second year and a \$250 lump sum payment. One major unit, the correctional officers, have offered to take a wage freeze in both years of the agreement in return for no contribution to the premium. The state rejected the proposal.

<http://www.madison.com/wisconsinstatejournal/biz/75820.php>

### **Wisconsin Child Well-Being Ranking Declines**

National ranking of Wisconsin children's well-being fell from fifth to 11th according to a survey, KIDS COUNT DATA BOOK, released by Wisconsin Council on Children and Families. The survey, published by the national Casey Foundation, found that in a number of areas, well-being of children has declined in the last two years. For example, after a decline in childhood poverty from 1990 to 2000, the poverty rate increased from 11.2% to 13.5%. At the same time, the percent of children in single parent families increased from 18.1% to 21.1%. Other indicators showing substantial increase is Medicaid enrollment increasing from 15.3% to 22% in the past three years.

A number of indicators have improved. Infant deaths declined from 8.4 per thousand births in 1991 to 6.6 per thousand births in 2001. Also children attending four-year-old kindergarten doubled from 11% in 1995 to 23% in 2002. School lunch participation and enrollment in WIC remain virtually unchanged. The full report including detailed data at the county level can be found at

<http://www.wccf.org/projects/wiskids/2003/2003wiskids.htm>

### **TABOR Dead for FY03-04 Session**

The controversial proposed budget amendment, the so-called Taxpayer Bill of Rights or TABOR, was removed for a possible vote in a Spring special session, ending its chance for a state referendum in either 2005 or 2006. It would likely be placed on the ballot 11/06 to coincide with the gubernatorial election. Different versions of the measure would have sharply limited spending and/or tax increases for local and state government, including schools. It was believed by many health provider and consumer organizations that the measure would, over both the short and long-term, reduce funding available for Medicaid as well prevention programs. It is believed that many Republican Senators openly and quietly opposed any of the versions of the bill. It was strongly opposed by local elected officials as well as a broad coalition of tax-funded organizations. <http://www.jsonline.com/news/state/jun04/235897.asp>

### **Uninsured <age 65 in Wisconsin in 2002-03 estimated at 25%**

The number of uninsured in Wisconsin and nationally is vastly higher than commonly believed according to a study released by Families USA. The study, One in Three: Non-Elderly Americans Without Health Insurance, re-estimates health insurance estimates the number of people who did not have health insurance at any point during the previous two years. The study of Wisconsin found that one in four adults under the age of 65 were without health insurance for all of part of the two-year period. This is more than double the previous estimate of 11% uninsured at all or some of the time. Of those 1.3 million uninsured, 59% went without health insurance for six months or longer. Nearly 80% of the uninsured were members of working families, the remaining were actively seeking employment or were too sick to work. There were also wide racial and ethnic disparities to the problem. A majority of Hispanics were without health insurance while 44% of blacks and 22% of whites went uninsured. Interestingly, 14% of households with income in excess of \$75,000 were uninsured. Wisconsin's uninsured rate of 25% is substantially lower than the national average of 32.2% or the highest state rate, Texas, with 43%. The full report can be found at [http://www.familiesusa.org/site/DocServer/82million\\_uninsured\\_report.pdf?docID=3641](http://www.familiesusa.org/site/DocServer/82million_uninsured_report.pdf?docID=3641)

### **Senator Feingold to Focus on Health Care in Next Session**

Following passage of the campaign finance effort, Senator Russ Feingold says that he will turn his attention to reforming the health care system, should he win the November election. Primary elements of his plan include a guarantee that an individual must have coverage at least as good as what is offered in the Federal Employee Health Benefits Program, which covers members of Congress. Second, Every state would be required to submit a plan to Congress that details how they will obtain comprehensive health coverage. At the option of the state, this could be done in phases, possibly with a first phase of strengthening and expanding coverage and a second phase of going that last stretch to coverage for all citizens. For more information visit: [http://www.russfeingold.org/health\\_care\\_proposal.php](http://www.russfeingold.org/health_care_proposal.php)

## **Research & Tools**

### **Center for Health Policy and Program Evaluation to Join Forces with the Wisconsin Public Health and Health Policy Institute (WPHI)**

The Center for Health and Program Evaluation (CHPPE), focused on applied research and evaluation of health and human services programs will merge with the Wisconsin Public Health and Health Policy Institute (WHPI) on July 1st. CHPPE Director, Paul Moberg, Ph.D. will be come Deputy Director of the WHPI. Patrick Remington, MD, MPH, will continue to direct the Institute. The new and invigorated organization will continue to focus on "stimulating, creating, and communicating useful public health and health policy research and analysis".

### **Wisconsin HMO Profits Reported**

Wisconsin HMO profits posted a profit of \$44 million for the first quarter of 2004, according to a report issued by the Office of the Commissioner of Insurance. Twenty of twenty-one HMOs made a profit in the quarter. The largest profit was made by Touchpoint, acquired by United Health Care in this quarter. Touchpoint recorded a profit of \$18.3 million or 40% of the profits recorded. HMOs reported income of \$1.09 billion for the quarter.

The OCI press release and can be found at: <http://oci.wi.gov/pressrel/0604hmo.htm>.  
For financial statements of HMOs: [http://oci.wi.gov/hmo\\_info/quarstat/quar1\\_04.htm](http://oci.wi.gov/hmo_info/quarstat/quar1_04.htm)

**The Wisconsin Patient Safety Institute has made a variety of materials available, including WPSI's model high-alert medications policy & procedures and resources from the 2003 Forum.**

If you have read or used the high-alert medications resources, a brief form can be completed online at <http://www.wpsi.org/projects/feedback/projectsfeedback.aspx>

The materials can be found in the RESOURCES section of the WPSI web site at <http://www.wpsi.org/resources/wpsipublications/wpsipublications.aspx>

For more information about the project and the high-alert medications team, visit the completed projects section of the WPSI web site at <http://www.wpsi.org/projects/completed/completed.aspx>

Also, see highlights of the 2003 Patient Safety Forum: <http://www.wpsi.org/forum/2003highlights/2003highlights.aspx>

**Wisconsin Minority Health Report Release Scheduled for July 5**

The Wisconsin Department of Health and Family Services released a letter, dated May 14, 2004, that updates the progress in the long-awaited Minority Health Report. Included within is the following, from Denise Carty, the Minority Health Officer for the Department: "I am pleased to report that our Department has completed the review of the report, and we have placed the document on a "fast track" toward its publication and release to the general public. A few more weeks are required to make final edits and have the report printed. Therefore, I anticipate that the report will be available on or about July 5, 2004."

For more information, contact Denise Carty at [cartydc@dhfs.state.wi.us](mailto:cartydc@dhfs.state.wi.us)

## Events

**National Wellness Conference, UW-Stevens Point, July 10-15.** The focus of the 29th National Conference is "Creating an Optimal Wellness Environment". This year the conference will introduce six Learning Communities designed to increase social networking and information sharing. Communities will include groups in: worksite wellness, health care and healing, community wellness and underserved populations, wellness education, wellness coaching and personal growth. For more information contact. [http://www.nationalwellness.org/TheConference2k4/index.php?id=227&id\\_tier=1](http://www.nationalwellness.org/TheConference2k4/index.php?id=227&id_tier=1)

**The 14th Annual Children Come First Conference** will be held in Waukesha on July 27-29), and focus on children with serious emotional disorders and their families. The main conference is July 28-29 at the Country Inn Hotel, but there will also be a Pre-Conference Training on July 27. The conference includes entry level and advanced workshops in wraparound, mental health and AODA, family-based services, suicide prevention, and education. Two Special Programs for Kids and Sibs! and ½ Day Training on Advanced Wraparound Techniques July 27. Featuring Peter Alsop, family entertainer and psychologist, and 7th Annual Children Come First Awards Luncheon July 28, featuring Secretary of DHFS Helene Nelson. Cost of this two-day conference is \$135 (\$85 one day). Info and registration: [www.wccf.org/CCF](http://www.wccf.org/CCF). For more info: Mark Wehrly: [mwehrly@wccf.org](mailto:mwehrly@wccf.org), or 608-284-0580 ext 308

## Reading Room

### **Alcohol Abuse Up, Alcoholism Down**

The number of American adults who abuse alcohol or are alcohol dependent rose from 13.8 million (7.41 percent) in 1991 to 17.6 million (8.46 percent) in 2001-2002, according to the 2001-2002 study directed by the National Institute on Alcohol Abuse and Alcoholism (NIAAA). Approximately 4% of Americans are considered alcohol dependent- with about twice as many men as women suffering from the condition. Alcohol abuse is characterized by failure to fulfill major role obligations at work, school, or home, interpersonal social and legal problems, and/or drinking in hazardous situations. Alcohol dependence, also known as alcoholism, is a condition characterized by impaired control over drinking, compulsive drinking, preoccupation with drinking, tolerance to alcohol and/or withdrawal symptoms. The study said that alcohol misuse and addiction in 2001-2002 was significantly higher among men than women, as well as among individuals in the 18-29 and 30-44 age groups. In addition, there was a significant increase in alcohol misuse among black and Hispanic men, and Asian women aged 18-29 years. Alcohol -addiction rates significantly increased among black women and Asian men aged 18-29. For the NIAA release: <http://www.nih.gov/news/pr/jun2004/niaaa-10.htm>

**In a related development...**A University of Minnesota research found that 79% of bars and retail outlets sold alcohol to actors who portrayed being drunk. Nearly all states outlaw sales of alcohol to people who appear intoxicated. Traci Toomey, the researcher, said that the findings underline the need for training sellers and bartenders so that they are comfortable refusing an intoxicated buyer.

<http://www.jointogether.org/sa/news/summaries/reader/0%2C1854%2C571464%2C00.html>

### **Public Employee Retiree Health Benefits Questioned**

New accounting standards recommended to state and local governments will require them to account for the full costs of health care costs promised to retirees. Government officials and employee groups fear that this will force governments to roll-back benefits as occurring in the private sector. The new rules, recommended by the Government Accounting Standards Board, a group that sets the standard for government bond-buyers, would force governments to account for billions of dollars of promised benefits that are now unaccounted for. Currently, only 38% of private employers offered retiree benefits last year, down from 66 % in 1988. In contrast, about three quarters of state governments and one half of local governments provide health benefits to retirees. This new accounting standard coupled with the April ruling of the EEOC allowing employers to reduce or eliminate health coverage for retirees who qualify for Medicare may further endanger retiree health care benefits.

<http://www.nytimes.com/2004/06/21/health/21HEAL.html>

### **Health Plans Increasingly Cover Birth Control**

Group health insurance plans have increased their coverage of birth control pills and other contraceptives by 200% since 1993. This change is due to new federal and state requirements, lawsuits demanding coverage and the high usage and coverage of Viagra. State law changes that now cover 31 states apparently accounts for 30-40 percent of the change. In 2000, the EEO found that employers' failure to include prescription drugs constitutes sex discrimination.

<http://www.washingtonpost.com/wp-dyn/articles/A38979-2004Jun13.html?referrer=emailarticle>

### **Federal Mental Health Parity Bill Dead for this Session**

A federal bill, called the "Wellstone Mental Health Parity Bill" was blocked by House Republicans and will likely not come up for a vote this year. Senate Republicans blocked the same measure in 2003. The bill would expand a 1996 law prohibiting health plans that offer mental health coverage from setting lower annual and lifetime spending limits for mental treatments than for physical ailments. The proposed legislation also would require equal treatment for copayments, deductibles, and limits on doctor visits. In 2002, President Bush stated that mental health should be treated for insurance purposes the same as physical health. A lobbyist for the National Alliance for the Mentally Ill attributed the loss to lobbyists for insurers and employers. For more information visit:

[http://www.advocate.com/new\\_news.asp?ID=12751&sd=06/12/04-06/14/04](http://www.advocate.com/new_news.asp?ID=12751&sd=06/12/04-06/14/04)

**In a related development,** Milwaukee Medical Society called on Milwaukee County to provide more funds for more beds for psychiatric patients.

“Emergency rooms are not the safest or best places to have patients wait. They need to be in a secure environment to protect themselves and others. They need to be with professionals who meet their special needs” said Dr. Mary Alice Houghton, MD, a psychiatrist and author of the report. County Executive Scott Walker responded “the largest health care providers have largely abandoned care for these (poor and mentally ill) patients”. The County announced an interim plan to triage care and entered into an agreement with a private hospital in Waukesha. [http://www.thewheelerreport.com/releases/June04/](http://www.thewheelerreport.com/releases/June04/Jun18/0618milwaukeemedbeds.PDF)

<http://www.jsonline.com/news/metro/jun04/239661.asp>

### **Smoking Confirmed to be Really Bad**

A fifty-year longitudinal study of 35,000 British doctors found that smoking reduces life expectancy by an average of 10 years. Previous studies estimated seven years lost. However, the study by Drs. Richard Doll and Richard Peto is the longest and most authoritative study of the effects of smoking. On a more optimistic note, the study also found that smokers who quit at 30 have virtually the same longevity as non-smokers and that quitters at 50, lose, on average, four years rather than 10. The effects of smoking are particularly striking after age 60. The study found, 88 percent of nonsmokers were still alive at age 70, compared with 71 percent of smokers. However, 65 percent of nonsmokers were alive at age 80 in contrast to only 32 percent of smokers. <http://www.washingtonpost.com/wp-dyn/articles/A61981-2004Jun22.html>

<http://www.washingtonpost.com/wp-dyn/articles/A61981-2004Jun22.html>

### **Youth Smoking at Ten-Year Low**

A survey of the nation's high-school students by the Centers for Disease Control and Prevention (CDC) finds that the teen smoking rate has dropped to its lowest level in more than a decade. While the relative decline in youth smoking has been as substantial in Wisconsin as nationally, the overall current level remains higher here. For example, in 1993, nationally 14% and in Wisconsin 16%, of high school students were described as frequent smokers. By 2003 this declined nationally, to 10% and in Wisconsin to 12%. Similarly, in 1993, nationally, 28% and in Wisconsin, 32% were described as infrequent smokers (once in the past month). By 2003, this declined nationally to 22% and in Wisconsin to 24%. Overall, males and females smoke at about the same rate. White students smoke at about double the rate of black students. White females smoke at almost three times the rate of black females.

<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5323a1.htm>

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