

WISCONSIN PUBLIC HEALTH AND HEALTH POLICY INSTITUTE

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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.

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STATE NEWS

WI GOP 100-Day Agenda Includes Several Health Care Items

The WI Republic leadership has announced its "100 day agenda" for the start of the 2005-2006 legislative session. The package includes several measures relating to health care,

The package includes:

- Exempt Health Savings Accounts (HSAs) from state taxation.
- Provide 100% tax deduction for individual health insurance premiums.
- Expand the health care co-op program that was authorized last session.

http://64.233.167.104/search?q=cache:rVezgVObcEJ:www.gazetteextra.com/statespending_freeze092704.asp+%22100+Day+Agenda%22+AND+Gard+AND+GOP+AND+Wisconsin&hl=en

In addition, the State Senate has elected its new leadership. Senator Dale Shultz (R-Richland Center) is the new Senate Majority Leader and Senator Judy Robson (D-Beloit), is the Senate Minority Leader. <http://www.wispolitics.com/index.iml?Article=26978>

Health Care Costs in Milwaukee Metro Area Exceed National Average in 2004

Health care costs in the Milwaukee metropolitan area increased by 15.7% in 2004, according to a report released by Hewitt Associates. This outpaces the national increase of 12.3%. The increase in the Milwaukee area was the seventh highest in the nation and follows a series of annual double-digit increases. The report also noted that employee contribution increases will keep pass with the general increases of the plan. Average employee contribution will increase from \$1288 to \$1481 in 2005.

<http://was4.hewitt.com/hewitt/resource/newsroom/pressrel/2004/10-11-04.htm>

The **Employer Health Benefits Survey** a collaborative effort of health care providers and businesses found similar results. Their recently released survey found a double digit increase despite what it described as "premium cost-shifting and reductions in coverage." The increases were especially high for small and medium businesses. http://www.bizjournals.com/industries/health_care/health_insurance/2004/10/18/milwaukee_story1.html?f=et162

Real Wages Decline as Health Costs Climb

Real wages for school district employees in southeast Wisconsin fell by 3% in 2003-04 according to a report issued by the Public Policy Forum. Only a nominal salary increase of .02% was allocated for salary increases in the eight-county southeast area. Increases in the cost of living in this period was approximately 3%. In the same period, employee benefit costs, largely health insurance, increased by 8%. This ranged from a 20% increase in Racine County to 5% in Waukesha County. Forum President Jeff Brown noted, "Employee benefits, especially the health care costs, are the key driver in municipal/public school financing. What you have is relatively less resources going where we want them to go, which is into the classroom."

<http://www.jsonline.com/news/state/oct04/270254.asp?format=print>

Milwaukee Business Engage in Health Care Goal Setting

The Milwaukee Metropolitan Association of Commerce, noting that rising costs of health care is the number one

business concern of its members, has set a goal of bringing annual increase in health costs to levels at or below the U. S. average. The health care team objective for 2004-06 is to selecting "a reliable way to bench mark Milwaukee's progress against other cities and the nation on key cost, performance and quality measures." For a copy of the overall Blueprint for Milwaukee's future see: <http://www.mmac.org/content/blueprint/healthcare.html>

WI Data on Health Insurance Released

The Department of Health and Family Services released it's annual survey on health insurance coverage. Some of the major findings in the survey are:

- An estimated total of 495,000 residents (9%) were uninsured during part of all of the past year.
- 212,000 (4%) were uninsured for all of the previous 12 months and 284,000 (5%) were uninsured for part of the year.
- At any point in time during 2003, an estimated 5 million WI residents were insured, and 323,000 (6%) were uninsured.
- The groups most likely to be uninsured (followed by the percent uninsured at any point in time in 2003) are: Hispanics (21%), the poor (14%), younger adults (11%), and people self-employed full-time (12%).

<http://dhfs.wisconsin.gov/stats/pdf/fhs03ins.pdf>

As well, Families USA issued a report in September titled "Health Care: Are you better off today than you were four years ago?" It includes state-by-state trends, including the following statistics relating to health care in WI:

- The number of nonelderly WI residents without health insurance at some point over a two-year period rose from 1,017,000 in 1999-2000 to 1,262,000 during 2003-04, an increase of 24%.
- The amount paid by the average worker for health insurance premiums rose by 49.3% in WI from 2000 to 2004, or 49.3%, while average earnings rose 12.2%.
- 252,000 nonelderly Wisconsinites incurred health care costs in 2004 that totaled one- quarter or more of their annual earnings, compared to 196,000 in 2000.

You can find the WI data at:

<http://www.familiesusa.org/site/DocServer?docID=4783>

Health Care Concerns Top Harris Poll Results

Concern about health care tops the state pre-election poll for the first time in its sixteen year history. Another indication of the seriousness with which people regard the health care crisis is their response to the question, what do they consider the issue that government should give the most attention. More than one out of three respondents (35%) said that health care was the most important, while only 17% said improving the state economy and 15% said improving education. Concern over taxes was at the lowest level in the polls history. Four out of five respondents said that they favored legal importation of drugs from Canada.

The poll was commissioned by the Wisconsin Policy Research Institute and conducted by Harris Interactive.

<http://www.jsonline.com/news/state/oct04/264352.asp>

Wausau School Vending Machine Ban Hailed

The Wausau School District's recently enacted ban on vending machines selling soda was hailed in an editorial in the *Wisconsin State Journal*. The editorial cited a recent study noting that for the first time Americans consume more calories from sugar-sweetened soft drinks than they do from milk. It also noted the link between high sugar consumption and childhood obesity. Also noted was that Wausau schools also redesigned physical education and evaluated school lunch for nutritional value. <http://www.madison.com/wsj/home/opinion/index.php?ntid=11715>

Illegal Sale of Cigarettes to Children Hits New Low

Wisconsin merchants sell cigarettes to children about 8% of the time according to a survey released by the Wisconsin DHFS. This is down from 18% one year ago, 22% two years and nearly 33% three years ago. The survey is

conducted as a result of the federal requirement that states conduct surveillance surveys of tobacco merchants to determine the level of sales. Failure to reduce sales to less than 20% can lead to elimination of federal funding for alcohol and drug rehabilitation programs. As a result of the high rates of sales in prior years, the state was at risk of losing more than \$10 million per year. Selling practices in the state are not uniform. The rate of sales by merchants in Milwaukee City are more than three times that of merchants in Waukesha County. <http://www.wiwins.paxis.org/>

Milwaukee ERs Send Patients Out for Care

Under a new policy instituted in the major care facilities for indigent patients in Milwaukee County, a patient seeking treatment for minor medical problems at the emergency room would be referred immediately to a doctor or clinic after the initial assessment.

The policy is controversial because it causes hospitals to strike a delicate balance between what is truly a patient's medical emergency and referring out what is not.

Critics, including primary care physicians and some hospital officials, contend the new policy will hurt the poor and the uninsured, those patients who are most likely to view the emergency room as their only source of medical care. Such patients will have to look elsewhere for treatment, which may include already overburdened community clinics or other emergency rooms that do not subscribe to the stricter triage policy.

http://www.bizjournals.com/industries/health_care/hospitals/2004/10/25/milwaukee_story2.html?f=et163

Audit Examines MA/BC Eligibility Determinations

The Legislative Audit Bureau (LAB) issued its audit report on the processes for determining eligibility for Medicaid and BadgerCare. In general, the audit shows that, contrary to the expectations of some legislators, people are not abusing the system to get benefits they are not entitled to. On the other hand, there are errors made by caseworkers both in finding people eligible and in denying eligibility. Although the portion of errors affecting eligibility were relatively modest, there is room for improvement.

The audit report only briefly discusses the new verification requirements for BadgerCare and the sharp decline in BadgerCare enrollment since those requirements were implemented. It appears to have been completed before there was much data available to determine the causes of the steep enrollment decline.

The report includes a 4-page letter from Secretary Nelson commenting on the findings and recommendations. Her letter lists 8 measures included in the DHFS budget request to address program integrity issues. It also cautions against reversing some of the program simplification measures that have been implemented in recent years, and cites the example of the Food Stamp program, where error rates have decreased after simplification changes were made.

For the full report, go to:

<http://www.legis.state.wi.us/lab/reports/04-11full.pdf>

For the highlights, go to:

<http://www.legis.state.wi.us/lab/reports/04-11highlights.pdf>

Doyle Says 94% of Seniors Better Off Staying in SeniorCare

Governor Doyle has issued a statement that about 94 percent of seniors in Wisconsin's SeniorCare program are better off staying in the program than trying the new federal Medicare prescription drugs benefit when it starts in January 2006. Governor Doyle made the announcement after he released a detailed report, compiled by the Department of Health and Family Services (DHFS), that compares SeniorCare to the new prescription drugs program under Medicare.

Press release:

<http://www.thewheelerreport.com/releases/Oct04/Oct6/1006govseniorcare.pdf>

DHFS report:

<http://www.wisgov.state.wi.us/docview.asp?docid=955&locid=19>

After DHFS issued its report, the federal department of Health and Human Services (HHS) issued a fact sheet contending that the Medicare drug benefit would be better in many respects, including the fact that it would cover more seniors.

<http://www.thewheelerreport.com/releases/Oct04/Oct7/1007hhssmedicare.PDF>

RESEARCH AND PROGRAM TOOLS

- **State Health Facts.**

Kaiser Family Foundation has revised and substantially updated the State Health Facts website. This site provides data on more than 400 health topics. The site has the capacity to make comparisons across states and the nation. Much of the information is obtained from Federal sources. For researchers, the site includes access to raw data files.

<http://www.statehealthfacts.org/>

- **Variations in health practice patterns and outcomes**

Health Affairs has published on its website, Healthaffairs.org, twenty papers on variations in health practice patterns and outcomes. The lead paper reviews the wide variation in practice patterns in the *US News and World Reports* reported leading hospitals. Another study indicates that the much higher intensity of care in academic medical centers does not lead to better outcomes. Also, James Weinstein and colleagues demonstrate the persistence of wide regional variations in frequency of surgery to treat degenerative loss in hips, spine and knees.

<http://www.healthaffairs.org>

- **Bureau of Health Information and Policy Catalogues Products and Services**

The newly reorganized Bureau of Health Information and Policy in the Division of Public Health has published a catalogue of their products and services. This report includes descriptions of the many reports and data services available in the Bureau and identifies the staff that work in each of the areas.

<http://dhfs.wisconsin.gov/stats/index.htm>

- **Student Paper on Rural Health.**

The Hermes Monato, Jr. Essay Prize of \$1,000 is awarded annually for the best rural health paper. It is open to all students of the University of Wisconsin. Students are encouraged to write on a rural health topic for a regular class and then to submit a copy to the Rural Wisconsin Health Cooperative as an entry by April 15th. Previous award winners and titles (and in some cases, a link to the paper) as well as judging criteria and submission information are available at <http://www.rwhc.com/essay.prize.html>

EVENTS

- **The WEA Trust Story: A Comprehensive Strategy for Health Promotion and Consumer Education.** Seminar and Discussion. Monday, December 6. 12-1 pm. Health Science Learning Center, UW Campus. contact Judy Knutson <jaknutso@wisc.edu>

Health Information Symposium, Wisconsin Division of Public Health

Thursday, January 20, 8:30 am - 4:00 pm, location TBD. Contact Debra Meister <meistds@dhfs.state.wi.us>

READING ROOM

Dispelling Myths about the Emergency Room Population

About 85% of emergency department patients have health insurance and about 83% have a regular source of health care, such as a primary care doctor, clinic or health maintenance organization, according to a study published in the *Annals of Emergency Medicine*. The study found that patients without health insurance were no more likely to seek emergency care than those with insurance, researchers said. Additionally, those without a usual source of health care were 25% less likely to have visited an ED than those with a private doctor, according to the study. The study also found that 79% of participants had incomes above the poverty level. <http://bcbshealthissues.com/proactive/newsroom/release.vtml?id=133655>

Disrespect Reported Toward Racial Minorities in the Health Care Setting

A study published in the September 2004 issue of the *Journal of Family Practice* found that minorities are significantly more likely than whites to report being treated with disrespect or being looked down upon in patient provider relationships. "R-E-S-P-E-C-T: Patient Reports of Disrespect in the Health Care Setting and Its Impact on Care" reports that perceptions of disrespect and of being treated unfairly within patient-provider relationships affect whether patients heed doctors' advice or return for treatment. These consequences are the unwelcome results of perceived racial discrimination and can be avoided if doctors strive to be respectful and culturally sensitive to the needs of their patients, regardless of ethnic or racial background.

http://www.cmwf.org/publications/publications_show.htm?doc_id=240955

Kaiser-Permanente: Is this the future of American Health Care Systems?

With 8.2 million members, 11,000 physicians and revenue of \$25 billion per year, Kaiser-Permanente may not be future of American health care but it plays a major role in shaping the current fabric of health services, especially in California. This staff-model HMO (where medical staff are directly employed by the HMO rather than contracted for services) provides relatively low-cost health coverage and is viewed as high quality with a focus on organizational and technological innovation. This discussion of Kaiser's current operations may provide an overview of the shape of health care systems to come. <http://www.nytimes.com/2004/10/31/business/yourmoney/31hmo.html>

Tobacco Buy-out but No Tobacco Regulation...

The *Washington Post* describes the current \$140 billion tobacco bill as follows: "The bill that Congress has produced is monstrous in just about every way. It absurdly rewards tobacco farmers and absentee landlords without imposing even the minimal regulation that the largest cigarette manufacturer had agreed to... If President Bush cannot bring himself to veto this terrible bill, it will hard to take him seriously."

<http://www.reuters.co.uk/newsArticle.jhtml?type=healthNews&storyID=6469852&src=rss/uk/healthNews§ion=news>

Alcohol Ads Increase Nearly 50% in Two Years

The number of alcohol ads on television increased from 209,000 in 2001 to 298,000 in 2003 according to an analysis of the Center for Alcohol Marketing and Youth (Georgetown University). The number of ads where children make up more than 30% of the audience increased from 24,512 to 36,344. Beer companies ran the most ads but distilled spirits advertising went from fourth place to second place in 2003. These data do not include advertising bought on cable television from distilled spirits manufacturers or advertising on Hispanic television networks. Alcohol used among 12-20 year olds has remained virtually unchanged for the past ten years. <http://camy.org/research/tv1004/>

Estimates of health care costs of treating obesity-related diseases

Health Affairs web-exclusive analyzes the effect of the increase in obesity on the increase in health care costs. The authors estimated obesity-attributable health care spending increases between 1987 and 2001. Increases in the proportion of and spending on obese people relative to people of normal weight account for 27 percent of the rise in

inflation-adjusted per capita spending between 1987 and 2001; spending for diabetes, 38 percent; spending for hyperlipidemia, 22 percent; and spending for heart disease, 41 percent. Increases in obesity prevalence alone account for 12 percent of the growth in health spending.

<http://content.healthaffairs.org/cgi/content/full/hlthaff.w4.480/DC1>

Childhood Obesity Study Released by Institute on Medicine

A report on childhood obesity released by the Institute of Medicine calls for healthier meals in schools and restaurants; more opportunities for physical education at schools and in communities; restrictions in television advertising to children; and education of health professionals and children to make better choices. The National Food Processors Association and the Grocery Manufacturers of America expressed opposition to some of its recommendations. <http://www.iom.edu/project.asp?id=5867>

Who Pays for Wal-Mart Employees' Health Care?

There is increased public scrutiny of the health care provided to the 1,300,000 employees of Wal-Mart. California claims that it pays \$32 million in health care costs for the uninsured employees of the corporation. Georgia officials found that more than 10,000 children of Wal-Mart employees were in the state's health program for children at an annual cost of nearly \$10 million to taxpayers. A North Carolina hospital found that 31 percent of 1,900 patients who described themselves as Wal-Mart employees were on Medicaid, while an additional 16 percent had no insurance at all. <http://www.nytimes.com/2004/11/01/business/01health.html>