

UW POPULATION HEALTH INSTITUTE
formerly Wisconsin Public Health & Health Policy Institute
E-NEWS - October 2005
Vol. 5, No. 7

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Information for E-news is compiled from several sources, including web sites 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 Journal*, Wispolitics.com, Handsnet, Blue Cross/Blue Shield, *The New York Times*, *Milwaukee Journal-Sentinel*, *Milwaukee Business Journal*, *Wisconsin State Journal* and others.

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STATE NEWS

GAO: Wisconsin Cities Rank Highest Nationally in Physician Prices

Eight of the 10 U.S. cities with the highest prices for physician services are located in Wisconsin, reports the U.S. Government Accountability Office. The GAO report, which was requested in 2002 by former Rep. Tom Barrett (D-Wis.) and Rep. Paul Ryan (R-Wis.), examined claims paid in 2001 to 2.1 million federal employees who were younger than age 65 and enrolled in the Federal Employees Health Benefits Program (FEHBP). GAO report: <http://www.gao.gov/cgi-bin/getrpt?GAO-05-856>

Highlights - <http://www.gao.gov/highlights/d05856high.pdf>

The GAO reports that La Crosse is the highest priced (#1) in the country on the list of adjusted physician price index (index= 1.48, or 50% above the national average), followed by Wausau (+46%),

Eau Claire (+42%), Madison (+41%), and including Janesville, Green Bay, Fox Valley, Racine, Sheboygan, Milwaukee, and Kenosha all in the top 18.

- For the adjusted hospital price index, Milwaukee-Waukesha ranks #5 in the country, while La Crosse ranks 10.

- On the adjusted FEHBP spending index: Milwaukee-Waukesha ranks 22 in the country (index = 1.197) and La Crosse ranks 31.

The low Wisconsin ranking on spending index demonstrates the finding that GAO discusses in the report generally: That prices contribute to about one-third and utilization to about two-thirds of the variation in spending between metropolitan areas in the highest and lowest spending quartiles. Higher physician prices were associated with lower physician utilization. At the same time, GAO did not find a similar offsetting relationship between price and utilization for hospital spending. This would suggest that, in Wisconsin, the higher physician prices are being offset by lower overall utilization relative to other states' metropolitan areas, thus lowering Wisconsin's ranking in the overall spending category.

Cost Shifting: GAO reports that it did not find any evidence that price variation was due to cost shifting, where providers raise private sector prices to compensate for lower prices from other payers. In fact, they found that physician prices were, on average, lower in areas with lower Medicaid payments and a higher percentage of uninsured. GAO did not find a relationship between hospital prices and Medicaid payments or percentage of uninsured.

This finding contradicts the argument that has been advanced for several years by provider groups who have been calling for increased payments to providers by government programs to eliminate what they refer to as the "hidden tax" resulting from underpayment by Medicaid and Medicare. For more on the report, see this article in the Sept. 14 Journal Sentinel: <http://www.jsonline.com/news/state/sep05/355863.asp>

An article in the *Wisconsin State Journal* reports on the arguments of local health care providers who contend that the results are misleading due to small sample number of federal employees in Wisconsin and other methodological issues. <http://www.madison.com/wsj/home/local/index.php?ntid=54321&ntpid=2>

Health Care Cooperative to be Launched in Milwaukee Area

Wisconsin's first health care cooperative will organize small businesses, non-profit organizations and individuals into a large group with the big-business bargaining power. The intent is to increase bargaining power and negotiate affordable health insurance plans. Co-op Care of Southeastern Wisconsin also plans to serve farm families, the self-employed and early retirees. A second cooperative is in the works for northwestern Wisconsin, in the Eau Claire area. <http://www.jsonline.com/news/metro/sep05/353477.asp>

Journal Sentinel Editorializes that Public Health School Belongs in Milwaukee

A Sunday, September 25 Editorial by the Milwaukee Journal-Sentinel opines that a School of Public

Health, currently planned as an extension of the UW Medical School in Madison, should be established in Milwaukee. The newspaper states that Milwaukee is "ground zero" in public health problems and these problems should be addressed first hand "while also training the army of public health workers" "The most logical place for such a school is at the University of Wisconsin-Milwaukee."

This position puts UW-Madison on a collision course with Milwaukee as Madison seeks approval from the Board of Regents to establish a school of public health integrated with its medical school.
<http://www.jsonline.com/news/editorials/sep05/358032.asp>

Queram Resigns Alliance to Lead Quality Collaborative

Chris Queram, the 12-year CEO of the The Employer Health Care Alliance Cooperative, has resigned his position and will be assuming the role of President and CEO of The Wisconsin Collaborative for Healthcare Quality (The Collaborative). The Alliance released a statement on September 26 lauding Queram's leaderships. Questions should be directed to Cheryl DeMars at 608.210. 6621.

BadgerCare Enrollment's Plunge Due to Paperwork and Verification Hurdle: DHFS Report
The Wisconsin Department of Health and Family Services reports that over 25,000 people lost BadgerCare coverage from April 2004 to June 2005. DHFS has now released a report addressing the employer verification requirement in BadgerCare and how this has affected the major decline in BadgerCare enrollment. The report concludes that the steep drop in BadgerCare enrollment from nearly 114,000 people in the spring of 2004 to fewer than 90,000 -- is largely because of the employer verification requirements that began in mid-May 2004. (Enrollment appears to have bottomed out at 88,725 in June; it climbed by about 900 people over the next two months.) The DHFS analysis found little if any evidence that the additional paperwork actually succeeded in weeding out ineligible participants; instead it seemed to be deterring enrollment of eligible families.

DHFS Report <http://dhfs.wisconsin.gov/aboutDHFS/OSF/Evaluation/BadgerCareEVP9-05.pdf>

WCCF Press Release: http://www.wccf.org/pdf/BadgerCare_EnrollChanges2_PR.pdf

AP story http://www.wisinfo.com/postcrescent/news/archive/local_22586900.shtml

The *Milwaukee Journal Sentinel* reported that businesses that don't return paperwork about employees in Wisconsin's health care program for the working poor soon face financial penalties for failing to do so, as state officials attempt to stem a tide of declining enrollment in the program.
<http://www.jsonline.com/by/news/sep05/355548.asp>

Nearly Half of Medicaid Budget is Spent on 10% of Recipients

Of the Medicaid program's 2004 annual budget, 46% was spent on only 10% of the participants. This small group of high-cost patients is mostly comprised of premature infants, long term residents of nursing homes, and recipients in facilities for the developmentally disabled. Improvements have been made since 1994 at which time 10% of Medicaid users consumed 71% of the annual budget. Steps being taken to reduce costs include providing access to prenatal care for all women in Wisconsin, moving patients from nursing homes to residential facilities, and improving safety in

nursing homes. <http://www.jsonline.com/news/state/sep05/353115.asp>

Census Bureau Report Ranks Wisconsin First in Poverty Growth

Wisconsin has shown the highest increase in average poverty rate growth of all fifty states. The rate increased from 8.3% in 2001-, to 9.2% in 2002-03, to 11% in 2003-04. Roughly 14% of Wisconsin's children are living in poverty. http://www.wccf.org/pdf/Census_Poverty_PR083005.pdf

Keg Registration and Deposit Proposed in La Crosse

The Alcohol Oversight Committee of La Crosse voted to propose an ordinance requiring keg registration. The ordinance would prohibit anyone from purchasing more than two kegs for any one address within a 48 hour period. A fine on unregistered kegs would prevent people from purchasing them outside of the city for underage parties. Store owners doubt the ordinance will curb underage drinking, and are worried about its impact on business. <http://www.lacrossetribune.com/articles/2005/08/31/news/z1keg.txt>

"Project Fresh Light" Aims to Fight Adolescent Substance Abuse

The Wisconsin Department of Health and Family Services has been awarded \$1.2 million to screen and treat adolescents with substance abuse issues. "Project Fresh Light" will work with the Wisconsin Office of Justice Assistance to help youth entering the juvenile justice systems. The Department will target the abuse of meth-amphetamines, opiates, inhalants, marijuana and alcohol. The project will initially help 5,500 adolescents per year in eleven Wisconsin counties. <http://dhfs.wisconsin.gov/News/PressReleases/2005/090105AdolesSubstAbuse.pdf>

Rural Clinics Fear Cap Ruling Will Affect Recruitment

Following the Supreme Court decision to eliminate caps on awards in medical malpractice cases, the Marshfield Clinic is worried about recruiting doctors in rural locations. Marshfield Clinic reports that recruitment is already difficult for the clinic, which services 28 counties that are at least partially designated as Medically Under served Areas or Health Professional Shortage Areas or both. <http://www.madison.com/tct/news/stories/index.php?ntid=53482&ntpid=7>

RESEARCH AND PROGRAM TOOLS

National Governors' Recommendations for Medicaid Reform

The National Governors' Association (NGA) has issued its recommendations for "Short-term Reform," of Medicaid, which are very similar to those previously delivered by the NGA to the Medicaid Commission. The NGA recommendations are likely to play a significant role in the Congressional deliberations on cutting MA spending.

<http://www.nga.org/Files/pdf/0508MEDICAIDREFORM.PDF>

Under the NGA recommendations, Medicaid and SCHIP Cost-sharing could increase to up to 5% of

household income for families between 100 and 150% of poverty, and up to 7.5% of income for families above 150% of poverty.

A new report examines the impact of the cost-sharing proposals for children's health care coverage. It concludes: Between 500,000 and 1.5 million children would lose health coverage if Congress adopts the NGA proposal; and almost all of the Medicaid savings from allowing states to charge premiums and co-pays would derive from fewer children being insured and children receiving fewer necessary health services. http://www.kaisernetwork.org/daily_reports/rep_index.cfm?DR_ID=32526

2005 Employer Health Benefits Survey

The Kaiser Family Foundation and the Health Research and Educational Trust document s changes in workplace health coverage, including a look at high deductible health plans, health reimbursement accounts, and health savings accounts. <http://www.kff.org/insurance/7148/index.cfm>

Income, Poverty, and Health Insurance Coverage in the United States: 2004 Report Released
The data compiled from the 2005 Annual Social and Economic Supplement to the Current Population Survey reveal that median household income and the number of uninsured persons remained stable, while the nation's poverty rate rose slightly.

http://www.census.gov/Press-Release/www/releases/archives/income_wealth/005647.html

HIV/AIDS 2005 Fact Sheet Updates

The four updated fact sheets include: The Global HIV/AIDS Epidemic, The HIV/AIDS Epidemic in the United States, Medicaid and HIV/AIDS, and Medicare and HIV/AIDS. <http://www.kff.org/>

New DHFS report on Health Insurance in Wisconsin

Wisconsin Health Insurance Coverage 2004 contains the findings from the 2004 Family Health Survey. <http://dhfs.wisconsin.gov/stats/pdf/fhs04ins.pdf>

Births to Teens in Wisconsin, 2004

Now available on the DHFS website at <http://dhfs.wisconsin.gov/births/index.htm>

Webcast on Medicaid Reform and Indian Health

A webcast from the Kaiser Foundation explores the impact of Medicaid reform on Indian health programs. http://www.kaisernetwork.org/health_cast/hcast_index.cfm?display=detail&hc=1492

Child Health Report

Child Health USA is the Health Resources and Services Administration's annual report on the health status and service needs of America's children. The book is a compilation of secondary data for 59

health status indicators, and provides both graphical and textual summaries of data and addresses long-term trends.

<http://www.mchb.hrsa.gov/mchirc/chusa/>

National Women's Health Indicators Database

National, regional, state and county data are available by gender, race, ethnicity and age at the National Women's Health Indicators Database. The website allows users to customize tables, graphs and maps. <http://www.4woman.gov/statedata/>

EVENTS

Community and Culture: Health Outreach Worker and Medical Interpreter Programs:

October 9-12, 2005, Monona Terrace Convention Center, Madison
Health Education Training Center Programs 2005 National Workshop

www.ahec.wisc.edu

Roy F. Weston Distinguished Global Sustainability Lecture: October 3, 2005

"Water Pollution and Human Health." Rita Colwell, Chair of Canon US Life Sciences and professor at University of Maryland, College Park, and Johns Hopkins University Bloomberg School of Public Health. Reception to follow. TITU Memorial Union, 5:30-6:30 PM

Information: 265-9119

Conference Explores the Problems of Evidence in Evidence-Based Medicine October 14, 2005

"A Matter of Facts: Transcending Disciplinary Problems of Evidence in Evidence-Based Medicine." Sponsored by the RWJ Working Group on Transdisciplinary Studies of Health and Society; registration required. Waisman Center Conference Room, 9 AM to 5 PM iftikhar@wisc.edu

Producing & Measuring Quality Health Care in Medicaid and for At-Risk Kids

Friday, October 28, 2005, 8:00 AM to noon

UW-Madison, Health Sciences Learning Center, Alumni Hall auditorium

with keynote speakers Winston F. Wong, MD, MS., Clinical Director, Community Benefit

Kaiser Permanente National Program Office and Nikki Highsmith, MPA, Senior Vice President

Center for Health Care Strategies *Panelists:* Representative Curt Gielow, Chair, Legislative Committee on Medicaid Reform; Mark Moody, Wisconsin State Medicaid Director; Julie Schuler, MD, MPH, Medical Director, Sixteenth Street Community Health Center, Milwaukee; Tina Ellis-Coyle, Marshfield Clinic

Registration and Information: <http://wccf.org/CPF/index.htm>

The Transformation of Health Care and the Role of the University

November 17-18, Monona Terrace Convention Center

Produced by the UW Population Health Institute, with sponsorship from the

Wisconsin Partnership Fund for a Healthy Future and the UW Medical Foundation

Registration: <http://www.pophealth.wisc.edu/uwphi/news/05%20ConferenceRegForm.pdf>

Information: http://www.pophealth.wisc.edu/uwphi/news/TransformationHC_0591.pdf

READING ROOM

Director of the FDA's Office of Women's Health Resigned Over Plan B Delay

Dr. Susan F. Wood resigned in protest of Food and Drug Administration commissioner Lester M. Crawford's decision to indefinitely delay approval of over-the-counter sales of the morning after pill, known as Plan B. The Senate agreed to vote on Dr. Crawford's nomination for commissioner in exchange for a firm decision, for or against Plan B, by the FDA. Despite this agreement, the commissioner overruled the recommendations submitted by an advisory committee and the FDA's regulatory staff to approve the drug. <http://www.nytimes.com/2005/09/01/national/01pill.html>

Routine Screening for Genetic Risk of Breast or Ovarian Cancer in General Population Discouraged
The U.S. Preventive Services Task Force recommends against physicians routinely referring women for testing to detect specific BRCA1 and BRCA2 gene mutations associated with breast and ovarian cancer. Only women with family histories putting them at risk are advised to seek genetic counseling and possible DNA testing. The Task Force does recommend that all women, starting at age 40, be screened for breast cancer using mammography as the potential harms of genetic testing include false-positives. <http://www.ahrq.gov/news/press/pr2005/brcagenpr.htm>

Resident Physicians Lack Adequate Cross-Cultural Training

A survey of resident physicians found most unprepared to provide specific components of cross-cultural care. While almost all of the residents felt prepared to treat clinical conditions and perform procedures in their specialty, many expressed unease about caring for patients who are immigrants, who have beliefs conflicting with Western medicine and whose religious beliefs affect treatment.

<http://jama.ama-assn.org/cgi/content/abstract/294/9/1058?etoc>

Worker's Health Problems Reduce U.S. Economic Output by \$260 Billion per Year

A Commonwealth Fund survey estimates that in 2003, health impacted worker productivity to the tune of \$260 billion. Approximately 5,372 million days of work are lost to ill health, including inability to work due to disability or chronic disease, sick days used for own illness or that of a family member, or sub-par productivity caused by working while ill. Furthermore, workers not allotted sick days are at increased risk for job-related injuries due to lack of concentration while sick and are more likely to spread infectious diseases to co-workers. [http://www.cmwf.org/](http://www.cmwf.org/usr_doc/856_Davis_hlt_productivity_USworkers.pdf)

[usr_doc/856_Davis_hlt_productivity_USworkers.pdf](http://www.cmwf.org/usr_doc/856_Davis_hlt_productivity_USworkers.pdf)

Inhaled Insulin Examined for Diabetics

An FDA advisory committee considered an inhaled form of insulin, Exubera, being developed by Pfizer, Sanofi-Aventis and Nektar Therapeutics. Concerns about the drug center on its impact on long-term pulmonary function and safety issues for diabetics who smoke or have lung disease. Another alternative to injected insulin being considered by the committee is a tablet form, Pargluva developed by Bristol-Myers Squibb. <http://tinyurl.com/bcau7>

Smoking Linked to Age-Related Macular Degeneration

Researchers in the United Kingdom have found a two-three fold increased risk of developing age-related macular degeneration for cigarette smokers. Patients surveyed were not aware of the link between cigarettes and late-life blindness, which may be another strong incentive to quit. <http://my.webmd.com/content/Article/111/110030.htm>

BMI Reporting Requirement in Pennsylvania Schools

The Pennsylvania state Health Department is now requiring school nurses to compute students' body-mass index during annual growth screenings. Parents will receive the results, along with an explanation and encouragement to share the information with their family physician. Pennsylvania now joins Arkansas, California, Florida and Missouri in this effort to curb growing childhood obesity. http://www.ctv.ca/servlet/ArticleNews/story/CTVNews/1127052778483_21/

College Campuses Ranked by Fitness and by Fatness

Men's Fitness magazine and the Princeton Review surveyed over 10,000 college students from 660 campuses. Students were asked about college weight gain, workout regimens, and whether their campus facilities encouraged healthy habits. Brigham Young University in Utah ranked number one in fittest college campuses, followed closely by the University of California, Santa Barbara; Boston University; University of Vermont and Northwestern University. Conversely, the fattest schools are University of Louisiana at Lafayette, followed by University of New Orleans, Mississippi State University, Southern Illinois University at Carbondale and Portland State University. Ways that campuses encouraged fitness and health include: healthy meal programs, access to health education and facilities, fitness trainers, and sometimes physical education courses as graduation requirements. <http://www.startribune.com/stories/1556/5605353.html>

Dental Health Worsens Among Poor, Young Children, But Improves Among Adults, Teens

http://www.kaisernetwork.org/daily_reports/rep_index.cfm?DR_ID=32529

The New York Times Reports on the study:

<http://www.nytimes.com/2005/09/13/health/13teet.html?>

Two Studies Show Flu Treatments Less Effective than Expected

The first paper, put out by the Cochrane Vaccine Fields project, revealed that vaccines showed at best a "modest" ability to prevent influenza or its complications in elderly people. The second, from the CDC, points out that many strains of the influenza viruses have developed resistance to the only class of cheap antiviral drugs available. This has major implications for agencies and governments planning to stockpile these antiviral drugs in preparation for epidemic and pandemic strains of the flu. <http://www.nytimes.com/2005/09/22/health/22flu.html?th&emc=th>

Medicare Advantage Saves Millions for Medicaid

A study by Emory University for the Blue Cross and Blue Shield Association shows the value of Medicare Advantage to low-income and minority Medicare beneficiaries. Medicare Advantage

requires lower out-of-pocket expenses and enrollees receive additional benefits not covered by traditional Medicare. About 18% of all Medicaid-eligible Medicare beneficiaries choose the MA plan; without MA, Medicaid costs would increase by \$792 million annually. <http://bcbshealthissues.com/relatives/100381.pdf>

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