

UW POPULATION HEALTH INSTITUTE

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The UW Population Health Institute's E-News is delivered monthly. Check our web site for additional information and updates: <http://www.pophealth.wisc.edu/uwphi/index.html>. To subscribe or unsubscribe, reply to jaknutso@wisc.edu with the word "subscribe" or "unsubscribe" in the subject line.

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 Journal*, Wispolitics.com, 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

Governor Doyle Announces "Healthy Wisconsin" ReInsurance Program Initiative

On July 5, Governor Doyle signed an Executive Order 161 for the Healthy Wisconsin Initiative, which would create a state-wide re-insurance program for businesses and individuals. The program is aimed toward making purchase of health insurance more affordable. The Executive Order cites an existing New York program that has reduced premium costs for businesses by 30%.

Development of the program will be steered by a Council, co-chaired by Dr. David Kindig of the Population Health Institute and Emeritus Professor of Population Health Sciences at the University of Wisconsin-Madison School of Medicine, and Michael Weiden, Partner at Quarles & Brady, LLP. The Council will submit the program plan to the Governor by December 1, 2006. The July 5 signing ceremonies will be followed by a series of business round tables around the state where the Governor will hear from business leaders and members of the community about their troubles with the rising cost of health care and health insurance.

Executive Order: http://www.wisgov.state.wi.us/journal_media_detail.asp?locid=19&prid=2119

Issue Brief from RJWF State Coverage Initiatives Project: "The Role of ReInsurance in State Efforts to Expand Coverage"

<http://www.statecoverage.net/pdf/issuebrief1004.pdf>

Information on New York's existing program: http://www.cahi.org/cahi_contents/resources/pdf/n134NY.pdf

Wisconsin Employees' Insurance System Touted as "Best in Country"

The co-chairwoman of a state Senate panel on health care reform says the insurance system that serves 230,000 state and local government employees, retirees and their beneficiaries is blazing a path toward more efficient and less costly health care. "Wisconsin has a shining example" to offer, said Sen. Alberta Darling, R-River Hills. "The state changed to a three-tier insurance system and developed a prescription initiative that is very strong. This is the best in the country, and other states are looking at it." The state program has reduced cost increases to about half the level of most public and private sector employer plan increases during the past two years, officials said. <http://www.madison.com/tct/mad/topstories/index.php?ntid=89043&ntpid=0>

Milwaukee hospitals control the market; leverage higher prices

Health insurance plans in the Milwaukee area don't have the bargaining power to keep hospital prices in line with those in other Midwestern cities, according to the first in-depth analysis of the region's high health care costs. The study, released Wednesday, cited insurers' limited bargaining power as one of five significant factors leading to the area's higher costs.

Milliman Report: http://www.gmbfh.org/documents/GMBFH_and_Milliman_detail%20.pdf

Press Release: http://www.gmbfh.org/documents/GMBFH_06-28-06release-w-graph.pdf

Milwaukee Journal Sentinel editorial June 29 on Milliman report:

<http://www.jsonline.com/story/index.aspx?id=444398>

Milwaukee Journal Sentinel article: <http://www.jsonline.com/story/index.aspx?id=444100>

Large Variance Found Among WI Hospital Costs

The cost of providing medical care in the last two years of a dying patient's life can vary by more than 50% among Milwaukee-area hospitals, according to a major study released by researchers at Dartmouth College. The study, done by the Center for the Evaluative Clinical Sciences at Dartmouth Medical School, is the first to provide information on specific hospitals, including data on the number of days chronically ill patients are likely to spend in an intensive care unit and the number of physician visits they will have in the last two years. The study found that the additional services, such as more days in the hospital or physician visits, did not result in better quality care. Wisconsin overall has lower health care costs than the national average. Medicare spent an average of \$25,343 in the last two years of a patient's life in Wisconsin - 13% below the national average.

Dartmouth report: http://www.dartmouthatlas.org/data/download/perf_reports/WI_HOSP_perfrpt.pdf

Journal Sentinel article: <http://www.jsonline.com/story/index.aspx?id=424437>

Discount Set for Uninsured in Milwaukee

Uninsured patients at Wheaton Franciscan Healthcare's Milwaukee-area facilities will get a 45% discount under terms of a settlement. With the settlement comes the dismissal of two complaints against Wheaton Franciscan filed by the state attorney general's office last fall, alleging that uninsured patients were being overcharged compared to what clients of large insurance companies are billed.

<http://www.jsonline.com/story/index.aspx?id=420077>

Hospital Charity Care Increases in Milwaukee; Attributed to High Cost Sharing Plans and Increased Uninsured

The Business Journal of Milwaukee reports that the financial burden of providing free health care for the poor increased at nine of 12 Milwaukee-area hospitals in 2005, a trend industry experts said is likely to continue as the ranks of the uninsured rise and health plans become less generous. Hospital industry officials also pointed to broader economic problems that force more patients to seek free care. Most notably, out-of-pocket health care expenses have soared as high-deductible plans have become more common and personal income has remained flat.

<http://milwaukee.bizjournals.com/milwaukee/stories/2006/07/03/story2.html>

100,000 Lives Campaign a Success in La Crosse

Gundersen Lutheran and Franciscan Skemp were both among more than 3,000 hospitals that

participated in an 18-month "100,000 Lives Campaign" begun in December 2004 by the Institute for Healthcare Improvement. The chief quality officer at Gundersen Lutheran said 77 potentially unnecessary deaths may have been prevented during the 18-month period, and Franciscan Skemp's director of clinical quality management, said the hospital had 18 fewer deaths by adopting the standards.

<http://www.lacrossetribune.com/articles/2006/06/15/news/02news.txt>

Many Choose SeniorCare over Medicare Part D

One week after a deadline passed for a federal drug benefit program, more than 400 people a day continued to sign up for Wisconsin's drug program for senior citizens. These people, who number more than 100,000, still can switch to the federal drug program without penalties. May 15 was the federal deadline to sign up for the Medicare Part D program, but people who sign up for the state's SeniorCare program by that program's June 30 deadline still can enroll in Part D without paying late penalties. According to the state Department of Health and Family Services, more than 103,000 people had signed up for SeniorCare. According to a 2005 state study, 94 percent of SeniorCare participants would fare better under SeniorCare than under Medicare Part D. Almost 30 percent or 250,000 qualified Wisconsin seniors were not enrolled in a plan as of May 7, according to the Coalition of Wisconsin Aging Groups.

<http://www.postcrescent.com/apps/pbcs.dll/article?AID=/20060523/APC0101/605230624/1003>

Legislative Committee Approves Expanded Dental Hygienist Role

A Department of Health and Human Services rule change that allows dental hygienists to bill Medicaid for preventive dental services cleared the Joint Committee for the Review of Administrative Rules on Wednesday, June 14. The rule is scheduled to take effect on September 1, 2006. The change, which would certify dental hygienists and allow them to bill Medicaid for preventive services (specifically, prophylaxis, the topical application of fluoride and pit and fissure sealants) provided in public health clinics, schools, and technical schools that train hygienists. According to the Wisconsin Hospital Association, in a one-year period, Wisconsin hospitals treated more than 10,000 people in their EDs for preventable dental problems.

Wisconsin Hospital Association web page on Dental Access:

http://72.14.203.104/search?q=cache:ajJoTxHP-gcJ:www.wha.org/qualityAndPatientSafety/dental_access.aspx+Wisconsin+AND+%22dental+care%22+AND+access&hl=en&gl=us&ct=clnk&cd=2

Low Reimbursement Forcing Dentists Away from Low-Income Patients

Because they are reimbursed only 40 cents for every billable dollar Wisconsin dentists are taking on fewer lower income Wisconsin residents. This leaves many low-income residents without any type of dental care. Wisconsin Department of Health and Family Services figures show that in 2003 out of a total medical assistance budget of \$4.02 billion only \$26.4 million was spent on dental care. In 2005 only \$29.3 million was spent on dental care out of a 4.39 billion budget.

One action taken this month by the Legislature was to allow reimbursements to dental hygienists for teeth cleaning, fluoride treatments and for sealants. This decision was strongly opposed by the WDA who said in a press release that the move will lower standards of dental care in the state and does not address the urgent health care needs of low-income children and adults.

<http://www.rivertowns.net/>

New Federal Citizen Guidelines Takes Effect

The federal requirements for citizen documentation are scheduled to begin in July, but many aspects of the implementation plans remain ambiguous. WI DHFS is planning to put the requirements into place quickly, while striving not to adversely affect people who are eligible for benefits. A memo issued by Secretary Nelson outlines the DHFS plans. A copy is posted on the Covering Kids and Families website at: <http://www.ckfwi.org/documents/>

[DHFS memo to verify citizenship re Medicaid.pdf](http://www.ckfwi.org/documents/DHFS_memo_to_verify_citizenship_re_Medicaid.pdf)

A June 26 *Journal Sentinel* editorial provides a very negative critique of the new federal law. It concludes: "If, as predicted, the new regulations result in eligible people in need being dropped or blocked from the programs, Congress should have the backbone to revisit the legislation that created the requirement in the first place. And it should avoid future legislation that fixes problems that don't really exist, bills that aim at one group but do collateral damage to others."

<http://www.jsonline.com/story/index.aspx?id=440280>

A class-action suit was filed this week challenging the documentation requirements;

http://www.kaisernet.org/daily_reports/rep_index.cfm?DR_ID=38195

Kaiser Family Foundation's fact sheet (<http://www.kff.org/medicaid/7533.cfm>)

KFF report (<http://www.kff.org/medicaid/7534.cfm>) examining New York's experience.

"Click It or Ticket" Campaign a Success

Law enforcement agencies from throughout the state concluded their annual "Click It or Ticket" seatbelt enforcement campaigns. The sheriff's department conducted a survey in 2005 that showed 31 percent of passengers and drivers weren't wearing seatbelts. That number dropped to 13 percent in 2006. According to the Wisconsin Department of Transportation, a 2005 survey showed that statewide seatbelt use reached an all-time high at 73 percent. Growth in seatbelt use in Wisconsin, however, is tempered by the fact that the state remains well below the national average of 82 percent usage.

<http://www.thenorthwestern.com/apps/pbcs.dll/article?AID=/20060606/>

[OSH0101/606060350/1128](http://www.thenorthwestern.com/apps/pbcs.dll/article?AID=/20060606/OSH0101/606060350/1128)

Vets May Have Been Exposed to Viruses during Prostate Biopsies

More than 2,000 veterans who underwent prostate biopsies at Milwaukee's Zablocki Veterans Affairs Medical Center may have been exposed to deadly viruses such as HIV, the U.S.

Department of Veterans Affairs warned in a recent letter to those at risk. The department sent

letters dated May 8 to 2,075 men who had prostate biopsies at the center between 1989 and 2003 cautioning them that the equipment used to perform the procedure may not have been properly sterilized. The letter encourages the veterans to return to the center for a free blood screening. Zablocki is one of 21 VA medical centers nationwide where the Department of Veterans Affairs found potential sterilization problems with prostate biopsy equipment.

<http://www.jsonline.com/story/index.aspx?id=430679>

La Crosse Medical Centers Grounds to Go Smoke Free

La Crosse's two medical centers have decided to make their entire grounds smoke-free next year, while other La Crosse businesses are looking at similar changes. Officials at Gundersen Lutheran and Franciscan Skemp announced at a joint press conference that employees, patients and their families may no longer smoke outside on their grounds starting Jan. 1. Logistics Health Inc., will also have a smoke-free campus effective August or September, and Western Technical College will have a smoke-free campus sometime next year.

<http://www.lacrossetribune.com/articles/2006/06/05/news/00lead.txt>

Report: Childhood Well-Being Declines in Wisconsin

The 2006 National KIDS COUNT Data Book, released by the Annie E. Casey Foundation, shows that the well-being of WI children declined between 2000 and 2004, slipping to 13th best in the nation. The book ranks states on 10 key measures of children's health, education and economic condition. The national averages improved for 4 of the 10 measures, but Wisconsin improved on only 2.

The number of children living in extreme poverty nearly doubled in WI in the first half of this decade. Other negative trends in our state include increases in the dropout rate and teen suicide rate.

However, the study also reports that Wisconsin is a national leader in the area of child health coverage, with only 6% of children uninsured, compared with 11% nationally. In addition, Wisconsin's low birth rate among girls ages 15 to 19 ranks 10th best state in terms of teenage childbearing. <http://www.aecf.org/kidscount/sld/databook.jsp>

Wisconsin Kid's Count: <http://wccf.org/projects/wiskids/2005/2005wiskids.htm>

The *Milwaukee Journal Sentinel* and *WI State Journal* coverage can be found at the next two links:

<http://www.jsonline.com/story/index.aspx?id=442600>

<http://www.madison.com/wsj/home/local/index.php?ntid=89111&ntpid=3>

Task Force Reports on Women and Depression in Wisconsin

A report released by Lt. Gov. Barbara Lawton and her Task Force on Women and Depression in Wisconsin includes recommendations to improve both public and private prevention and treatment programs for depression. The task force asked that the governor and state legislature

pass legislation providing parity in insurance coverage for mental health.

<http://www.lt.gov.state.wi.us/section.asp?linkid=809&locid=86>

State Group Declares War on Obesity

A statewide coalition of public and private organizations launched a "long-term war against an epidemic of obesity" that is leading to serious health problems in Wisconsin. The Wisconsin Nutrition and Physical Activity State Plan is a blueprint that has been developed with a five-year federal grant of \$450,000 per year since 2003. It is a call to action that hopes to enlist businesses, schools, local governments, health care systems and, most of all, individuals to change patterns of eating and exercising. The plan, which details strategies for increasing physical activity, eating better, balancing calories with exercise and decreasing television viewing, is available at <http://dhfs.wisconsin.gov/health/physicalactivity/index.htm>

Oneida Tribe Concerned about PCB Dump

Leaders of the Oneida Tribe of Indians and the village of Ashwaubenon will keep an eye on plans to move toxic waste from the Fox River to a landfill adjacent to the tribe's casino, bingo hall and hotel. At issue is Georgia-Pacific's plan to dump PCBs from a hot spot in the Fox River near the De Pere dam to a company-owned landfill on Green Bay's west side. The paper company, then owned by Fort James, also took sludge to the landfill site in 1999-2001. The new sludge, though, would have higher concentrations of PCBs than the 1999 deposits. Also, the proposal calls for dumping more than twice the amount of sediment as the previous addition. In 1999, the tribe worked closely with Fort James to ensure the landfill cells were properly lined and sealed. The tribe will seek to be part of the planning process for the new wave of PCBs. <http://www.greenbaypressgazette.com/apps/pbcs.dll/article?AID=/20060524/GPG0101/605240593/1207>

Deer Tick Spreading in Wisconsin

A record number of 1,441 cases of Lyme disease were reported in Wisconsin last year. The deer ticks that transmit the bacteria have historically been found in the western part of the state, they're now also showing up in the east. With mild winters in recent years, the tick population appears to be thriving. Just 39 cases have been reported this year, including three in Dane County, according to an epidemiologist with the state Division of Public Health. However, most illnesses don't arise until June and July. Among deer ticks studied statewide, about 7 percent to 9 percent of nymphs and about 15 percent to 18 percent of adults carry the Lyme disease bacteria,. A pocket of adult ticks near Stevens Point was found to have a 50 percent infection rate. Infected deer ticks recently have been discovered in the Sheboygan area, and in Jefferson and Walworth counties in southeast Wisconsin. The western part of the state is still the hub.

<http://www.madison.com/wsj/mad/top/index.php?ntid=84828&ntpid=1>

Lawsuit Seeks Care for Inmates

The Taycheedah Correctional Institution in Fond du Lac has left hundreds of women vulnerable

to a highly contagious staph infection and subjected them to medical mistakes that have led to suicide or painful disabilities, according to a class-action lawsuit filed in federal court. Women at Taycheedah receive poor gynecological care, and pregnant women are required to "remain shackled for most of their labor and to be re-shackled immediately after childbirth," the suit contends. The lawsuit, filed by the American Civil Liberties Union, is the first class-action lawsuit on behalf of female prisoners in Wisconsin and names top state officials as defendants. It claims that medical and mental health services at the institution constitute cruel and unusual punishment and that mental health care services for women are "far inferior" to what male prisoners receive. More than 700 maximum- and medium-security prisoners are housed at Taycheedah. The action does not ask for monetary damages but is aimed at forcing the state to correct the problems.

<http://www.jsonline.com/story/index.aspx?id=420127>

RESEARCH & PROGRAM TOOLS

Health Care Cost Snapshots

The Kaiser Family Foundation two publications in a new online series called [*Snapshots: Health Care Costs*](#). The series uses charts, data and analysis to provide insight into key issues affecting the cost of health care in the United States and help in understanding policies to address it. The first snapshot, [*Comparing Projected Growth in Health Care Expenditures and the Economy*](#), examines the growing share of the nations economy consumed by health care spending and the potential for policy solutions to restrain that growth.

<http://www.kff.org/insurance/snapshot/chcm050206oth2.cfm>

The second Snapshot, [*Distribution of Out-of-Pocket Spending for Health Care Services*](#), takes a detailed look at out-of-pocket spending for health care, and, in particular, how out-of-pocket costs vary among different groups of people and for different services.

<http://www.kff.org/insurance/snapshot/chcm050206oth.cfm>

Medicare Drug Benefit Materials

The Kaiser Family Foundation has released new materials related to the impact of the drug benefit on both dual-eligible beneficiaries and other low-income beneficiaries.

- [*Transitions 2006*](#), a new video, depicts the experiences of three dual enrollees whose drug coverage shifted from Medicaid to Medicare and highlights the challenges they may face as insurers re-evaluate their plans every year.
- [*Observations On The Initial Implementation Of The Medicare Prescription Drug Program*](#), a new report based on a focus-group discussion with state Medicaid directors assesses continuing issues related to the interaction between Medicaid and the Medicare

prescription drug benefit for both dual enrollees and states.

- [*Toward Making Medicare Work For Low-Income Beneficiaries*](#), a new report examines how the assistance to low-income beneficiaries in the Medicare drug benefit interacts with state-level Medicaid assistance with Medicare premiums and cost sharing through the Medicare Savings Program. The report surveys all 50 state programs and assesses the implications of their varying eligibility requirements.
- Several new and updated fact sheets examining the Medicare drug benefit and dual-eligible beneficiaries.
- <http://www.kff.org/medicare/med051806pkg.cfm>

Consumer-Directed Health Care (CDHC) Resources

A new narrated slide tutorial presents the principles and different models of CDHC, such as Health Savings Accounts (HSAs). The tutorial also discusses financing and impact on health care spending and major policy issues for consideration.

http://www.kaiseredu.org/tutorials_index.asp#Consumer

A companion issue module presents and summarizes the latest research and policy analysis on CDHC. Topics include CDHC's impact on the marketplace and low-income populations, health insurance coverage, risk selection, and consumers' access to health information.

http://www.kaiseredu.org/topics_im.asp?id=500&imID=1&parentID=61

Resources for Improving Child and Adolescent Oral Health

The National Maternal and Child Oral Health Resource Center (OHRC) has produced two new resources -- a policy brief and an online learning tool -- to assist professionals working to improve oral health services for children and adolescents with special health care needs. The policy brief addresses the six critical indicators of a comprehensive system of care identified by the Maternal and Child Health Bureau: (1) medical home, (2) insurance coverage, (3) screening, (4) organization of services, (5) family roles, and (6) transition to adulthood.

<http://www.mchoralhealth.org/PDFs/CSHCNPolicyBrief.pdf>

The online learning tool includes five modules: (1) An Overview of Children with Special Health Care Needs, (2) Providing Optimal Oral Health Care, (3) Oral Health Supervision, (4) Prevention of Oral Disease, and (5) Behavior Management.

<http://www.mchoralhealth.org/SpecialCare>.

Logic Model Toolkit for State Flex Programs

A new logic modeling toolkit is now available for use by state Medicare Rural Hospital Flexibility Programs (Flex Programs) in planning for and managing their Flex programs. It provides a framework for assessing and communicating state-level Flex Program performance.

<http://www.flexmonitoring.org/documents/PLMToolkit.pdf>

Practice Guide for Healthy Development

A new manual, [*A Practical Guide for Healthy Development*](#), has been developed by the Healthy Development Learning Collaborative, a 12-month quality improvement initiative, to give pediatric offices step-by-step guidance on how to revise their office systems. The initiative was designed to help primary care practices in Vermont and North Carolina engage families in a partnership to promote positive developmental outcomes for the families' children. The Guide offers a number of newly tested and established resources--including checklists, surveys, bibliographies, and helpful links.

http://www.cmwf.org/tools/tools_show.htm?doc_id=372065&#doc372065

Science of Sex and Gender in Human Health

The Science of Sex and Gender in Human Health Online Course Web site was developed to help students, educators, health professionals, and researchers gain a basic scientific understanding of the major physiological differences between the sexes; the influences these differences have on illness and health outcomes; and the implications for policy, medical research, and health care.

<http://sexandgendercourse.od.nih.gov>.

Early and Periodic Screening, Diagnostic and Treatment Electronic Guide

The new edition of Knowledge Path: Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Services is an electronic guide to recent, high-quality resources about providing and strengthening EPSDT services. Produced by the MCH Library, the knowledge path includes guidelines for the frequency, timing, and content of health promotion and disease prevention services for infants, children, and adolescents. It is intended for use by health professionals, program administrators, and policymakers who are interested in obtaining timely information on this topic.

http://www.mchlibrary.info/KnowledgePaths/kp_EPSDT.html.

A State-by-State Look at How Federal Public Health Dollars Are Spent

Trust for America's Health (TFAH) offers a state-by-state breakdown of key health statistics and key federal public health spending, with a focus on health disparities across the states. TFAH suggests several models for increasing public health spending in the states, including a cost-sharing model where states could receive additional funding from the federal government based on performance in key health indicators. <http://healthyamericans.org/reports/shortchanging06/>

"Using Data on Race and Ethnicity to Improve Health Care Quality for Medicaid Beneficiaries"

This new CHCS brief provides practical examples from across the country to demonstrate how states are using data on race and ethnicity to improve the quality of care for Medicaid beneficiaries. http://www.chcs.org/publications3960/publications_show.htm?doc_id=378929

EVENTS

Town Hall Meeting on BadgerCare Plus

July 18, Superior Government Center, 1:00 - 2:30 pm

DHFS continues a series of town hall meetings about the BadgerCare Plus plan provide health insurance access to all children in Wisconsin, while expanding coverage to pregnant women with incomes up to 300% of the federal poverty level. These meetings are being co-hosted by WCCF and ABC for Health To read more about the plan, go to the DHFS website at: <http://dhfs.wisconsin.gov/badgercareplus/>

<http://dhfs.wisconsin.gov/badgercareplus/>

To RSVP please contact one of the following:

- Julie Laundrie, Wisconsin Council on Children and Families: jlaundrie@wccf.org
- Donna Wong, Wisconsin Department of Health and Family Services: wongdj@dhfs.state.wi.us
- Annie Trimmerger, Advocacy & Benefits Counseling for Health: (800) 585-4222 ext. 203

READING ROOM

Top 20 Cost-Effective Preventive Health Measures Identified

A new report lists the preventive health measures for saving the most lives for the least money: Top rank goes to taking aspirin daily to prevent heart attacks and strokes in men over 40 and women over 50, according to a study by the Washington-based Partnership for Prevention, an alliance of health insurers, state health departments, academics and trade groups. Immunizing children and discouraging people from smoking follow closely behind. Former Surgeon General David Satcher led the effort, which entailed a review of more than 8,000 preventive-medicine studies. The rankings are intended as a checklist for patients, doctors and insurers.

American Journal of Preventive Medicine, Volume 31, Issue 1, July 2006, Pages 52-61

http://www.sciencedirect.com/science?_ob=MIimg&_imagekey=B6VHT-4K5SD4M-4-1&_cdi=6075&_user=443835&_orig=browse&_coverDate=07%2F31%2F2006&_sk=999689998&view=c&wchp=dGLbVlz-zSkWW&md5=abf94700a4485a851c0ccd3c6b1d3cc8&ie=/sdarticle.pdf

http://www.sciencedirect.com/science?_ob=MIimg&_imagekey=B6VHT-4K5SD4M-8-1&_cdi=6075&_user=443835&_orig=browse&_coverDate=07%2F31%2F2006&_sk=999689998&view=c&wchp=dGLbVlz-zSkWW&md5=1b5a5916a027d7ce9d2ff51261e41628&ie=/sdarticle.pdf

Dr. Satcher's Commentary: http://www.sciencedirect.com/science?_ob=MIimg&_imagekey=B6VHT-4K5SD4M-9-1&_cdi=6075&_user=443835&_orig=browse&_coverDate=07%2F31%2F2006&_sk=999689998&view=c&wchp=dGLbVlz-zSkWW&md5=1b5a5916a027d7ce9d2ff51261e41628&ie=/sdarticle.pdf

[zSkWW&md5=05c9f61ab869fe753bfe01fbd75201d0&ie=/sdarticle.pdf](#)

States Transforming Medicaid

After winning greater freedom from federal Medicaid rules, states are moving aggressively to transform the nation's largest public health insurance program, adding fees, restricting benefits and creating incentives for patients to take responsibility for their health. Last December, Congress granted states broad flexibility to alter benefits, charge patients more and expand the role of private insurers as part of a law that will cut federal Medicaid spending by \$43 billion in the next decade. Even before the law, the Bush administration was sympathetic to states that wanted greater say over how their programs are designed.

The law, called the Deficit Reduction Act, and the administration's policies have eliminated a hallmark of the program: Until now, every Medicaid patient within a state has qualified for the same benefits. Medicaid's new direction borrows ideas from the overhaul of the welfare system a decade ago. That transformation also decentralized a major piece of the social safety net, limited government assistance, expanded the private sector's role and tried to instill self-reliance in low-income people who had depended on government help.

<http://www.washingtonpost.com/wp-dyn/content/article/2006/06/11/AR2006061100815.html>

Premier P4P Demo Shows Better Care Cuts Health Costs

Instituting a series of basic and widely accepted care measures for 75,000 patients undergoing care for pneumonia and heart bypass surgery would have reduced hospital costs for those patients by as much as \$1 billion, according to a new study. The results of the "pay-for-performance" demonstration conducted by Premier Inc. and the Centers for Medicare and Medicaid Services (CMS) also concluded that providing that level of care would have resulted in 3,000 fewer deaths, 6,000 fewer medical complications, 6,000 fewer hospital readmissions, and 500,000 fewer days in the hospital.

http://www.cmwf.org/healthpolicyweek/healthpolicyweek_show.htm?doc_id=378750&#doc378751

Cervical Cancer Vaccine Protects against Other Cancers Too

An experimental vaccine that protects against a virus that causes most cases of cervical cancer appears to protect women against two other types of tumors. A new study shows that the vaccine protects against vaginal and vulvar cancers, which afflict roughly 6,100 American women a year. Mercks vaccine, called Gardasil, prevents infection with two strains of the human papillomavirus that cause cancer and two strains that cause anal and genital warts. HPV is found in nearly 80% of vaginal and vulvar cancers in the USA. The vaccine's greatest effect will be to save lives from cervical cancer, the second-most-common cause of cancer death in women worldwide; it kills about 250,000 women a year. Studies have shown the vaccine to be 100% effective in preventing cervical cancers caused by HPV 16 and 18.

http://www.usatoday.com/news/health/2006-06-04-cervical-cancer_x.htm

Surgeon General Reports on the Effects of Secondhand Smoke

The U.S. Surgeon General issued a comprehensive scientific report which concludes that there is no risk-free level of exposure to secondhand smoke. Nonsmokers exposed to secondhand smoke at home or work increase their risk of developing heart disease by 25 to 30 percent and lung cancer by 20 to 30 percent. The finding is of major public health concern due to the fact that nearly half of all nonsmoking Americans are still regularly exposed to secondhand smoke. The report, *The Health Consequences of Involuntary Exposure to Tobacco Smoke*, finds that even brief secondhand smoke exposure can cause immediate harm. The report says the only way to protect nonsmokers from the dangerous chemicals in secondhand smoke is to eliminate smoking indoors.

<http://www.hhs.gov/news/press/2006pres/20060627.html>

Doctors Increasingly Prescribe Antipsychotic Drugs for Children

The use of potent antipsychotic drugs to treat children and adolescents for problems like aggression and mood swings increased more than fivefold from 1993 to 2002, researchers reported yesterday. Antipsychotic medications were prescribed to 1,438 per 100,000 children and adolescents in 2002, up from 275 per 100,000 in the two-year period from 1993 to 1995. The explosion in the use of drugs, some experts said, can be traced in part to the growing number of children and adolescents whose problems are given psychiatric labels once reserved for adults and to doctors' increasing comfort with a newer generation of drugs for psychosis. Shrinking access to long-term psychotherapy and hospital care may also play a role, the experts said.

http://www.nytimes.com/2006/06/06/health/06psych.html?_r=1&th&emc=th&oref=slogin

Young Black Women at Higher Risk for Lethal Breast Cancer

Young black women with [breast cancer](#) are more prone than whites or older blacks to develop a type of [tumor](#) with genetic traits that make it especially deadly and hard to treat, a study has found. Among premenopausal black women with breast cancer, 39 percent had the more dangerous kind, called a "basal like" subtype, compared with only 14 percent of older black women and 16 percent of nonblack women of any age. Researchers are not sure why. The study helps explain something that was already known: although breast cancer is less common in blacks than whites, when black women do develop the disease, they are more likely to die from it, especially if they are under 50. Among those younger women, the breast cancer death rate in blacks is 11 per 100,000, compared with only 6.3 in whites.

<http://www.nytimes.com/2006/06/07/health/07breast.html?th&emc=th>

Lawn Mowers Injure Hundreds of Kids Each Year

Lawn mowers cause more than 74,000 injuries every year, according to a study released by the Johns Hopkins Bloomberg School of Public Health and Rice University. More than 5,000 of

those are to children. A study by Randall Loder, chief of pediatric surgery at Indiana University School of Medicine, found that the cost of amputations because of childhood mower injuries was \$44 million to \$75 million. He estimates that more than 600 children every year suffer amputations because of lawn mowers. His advice: Keep children indoors under the care of an adult while another adult is mowing. The potential to run over a child with a mower isn't the only danger, says Scott Levin, one of Mason's doctors at Duke University Medical Center and president of the American Society of Reconstructive Microsurgery. "If a stone or a stick gets thrown out of (the mower), it's like a bullet. Children have been blinded this way."

http://www.usatoday.com/news/health/2006-06-14-mowers-children_x.htm

New Urban Designs Sought in Obesity Fight

It'll take more than public service campaigns to solve the nation's obesity problem, according to fitness experts who say neighborhoods must be designed so people can get around without their cars. Proof that people will accept an active lifestyle and walk to parks and shopping if they can is found in the "new urbanism" style of planned communities, the experts contend. They pointed to Denver's Stapleton neighborhood, an enclave of new homes built where the city's old airport used to be. The neighborhood is a mix of shops, offices, parks, apartments and houses linked by wide sidewalks and meandering bike paths. Architecture varies from single-family homes to rows of brownstones. A spokesman for the developer said, "People will walk if you give them that opportunity."

http://news.yahoo.com/s/ap/20060616/ap_on_he_me/fitness_urban_design;_ylt=Aq26Aloe7BITsjv_0Sr7L5HVJRIF;_ylu=X3oDMTA2Z2szazkxBHNIYwN0bQ--

Drug Use a Factor in Two-Thirds of Sexual Assaults

Drug use was a factor in nearly 62 percent of sexual assaults, and nearly 5 percent of victims were given "date-rape" drugs, a new U.S study finds. The study included 144 sexual assault victims who sought help at clinics in Texas, California, Minnesota and Washington State. About 35 percent of the victims were impaired due to voluntary drug use at the time of the sexual assault.

http://news.yahoo.com/s/hsn/20060601/hl_hsn/druguseafactorintwothirdsofsexualassaults

Girls Overtake Boys as Binge Drinkers

Teenage girls in the UK have overtaken boys as binge drinkers for the first time and are now second only behind Irish girls in Europe, according to a report. The Institute of Alcohol Studies said 29 percent of teenage girls were binge drinkers in 2003 compared with 26 percent of boys. In 1999 the figure was 27 percent and 33 percent respectively. It said over a quarter of all 15- and 16-year-olds in Britain had been on drink binges three or more times in the last month. In contrast France, where it is not unusual for children to be given watered-down wine with meals as a way of introducing them to alcohol, had very low binge-drinking levels among adolescents.

http://news.yahoo.com/s/nm/hl_nm/binge_drinkers_dc

"Instability of Public Health Insurance Coverage for Children and Their Families: Causes, Consequences, and Remedies"

This Commonwealth Fund report examines the extent, causes, and consequences of instability in public coverage programs for children and families. It focuses particularly on the phenomenon of "churning," which occurs when individuals lose and regain coverage in a short period of time. It also looks at strategies to make public program coverage more stable for children and families.

http://www.cmwf.org/usr_doc/Summer_instabilityhltinschildren_935.pdf

Walk-In Health Clinics at Chain Pharmacies

At [Wal-Mart](#), [CVS](#) and other chain stores, walk-in health clinics are springing up as an antidote to the expense and inconvenience of full-service doctors' offices or the high-cost and impersonal last resort of emergency rooms. For a \$30 [flu](#) shot, a \$45 treatment for an ear infection or other routine services from a posted price list, patients can visit nurse practitioners in independently operated clinics set up within the stores whose own pharmacies can fill prescriptions. About 100 of these clinics, which typically lease space from the host stores, are now operating around the nation, and hundreds more are in the works.

http://www.nytimes.com/2006/05/14/business/14clinic.html?_r=1&th&emc=th&oref=slogin

Early Education Benefits Low Birthweight Infants

A new study discusses the findings of an 18-year follow-up of low birth weight infants, some who were provided with early preschool and others who did not participate. The study finds that the children who did receive early education, particularly the "heavier" low birth weight group had better academic and behavioral outcomes (i.e. less risky behaviors) as their lives progressed than their peers who did not. This has important implications for education and health policy, given the positive outcomes measured over the years. The results strengthen the case for greater investment in early education for pre-term infants.

<http://www.rwjf.org/newsroom/newsreleasesdetail.jsp?id=10396>

Association of Breastfeeding and Early Childhood Overweight

Women who develop diabetes during pregnancy are likely to have large babies, which in turn can lead to obesity in childhood -- but that chain of events may be interrupted if the mother breastfeeds, researchers report. After adjusting for confounding factors, the risk of becoming overweight in early childhood was reduced by up to 50 percent for infants who were breastfed more than 3 months. The investigators also found that women with gestational diabetes mellitus (GDM) who were obese were less likely to breast-feed their infants. These findings suggest that obese women with GDM should be encouraged to breast-feed for 3 months or longer if possible to reduce the risk of their kids becoming obese. <http://tinyurl.com/ngwr4>

Disparities in the Rates of Unintended Pregnancy and Abortion Increase

Between 1994 and 2001, the rate of unintended pregnancy increased by 29% among U.S. women

whose income was below the poverty line, while it decreased 20% among women with incomes at least twice the federal poverty level. Although the overall nationwide unintended pregnancy rate remained virtually unchanged over this period, this stagnation masks growing disparities by income and education, according to [Disparities in Rates of Unintended Pregnancy in the United States, 1994 and 2001](#), by [Lawrence B. Finer](#) and [Stanley K. Henshaw](#), published in the June 2006 issue of *Perspectives on Sexual and Reproductive Health*.

Because poor women have a high rate of unintended pregnancy (112 per 1,000 women 15-44, more than double the national average), they have high and increasing rates of both abortions and unplanned births. In 2001, a poor woman was four times as likely to have an unintended pregnancy, five times as likely to have an unintended birth and more than three times as likely to have an abortion as her higher-income counterpart.

Finer and Henshaw suggest that these disparities may also be partly explained by differences in insurance coverage: Poor women are twice as likely as women overall to lack health insurance, and spending under Title X, the only federal source of funding dedicated to family planning services for low-income women, declined between 1994 and 2001 after controlling for inflation. <http://www.guttmacher.org/pubs/journals/3809006.pdf>