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STATE NEWS

Measles Outbreaks Reported in Seven States; Wisconsin Cases Increase
As of April 30, 2008, the City of Milwaukee Health Department (MHD) knows of 7 confirmed measles cases and 2 confirmed rubella cases in Wisconsin. Federal health officials have indicated the level of U.S. measles cases is expected to be higher in 2008 than any recent year. Measles outbreaks have been reported in seven U.S. states. The majority of these cases have been in individuals who never received the measles vaccination. The largest outbreak thus far has been in New York City, where a total of 22 cases have been reported.

Wisconsin Tops Nation in Self-Reported Driving Under the Influence
A recently released federal study found that more than 26% of Wisconsinites age 18 and older indicated that they had driven under the influence at some point during the previous year. This was the highest percentage reported in the U.S. and well above the national average of 15.1%. Utah reported the lowest percentage in the U.S. at 9.5%. The majority of states falling in to the top ten for self-reported driving under the influence were states located in either the Great Plains or the Upper Midwest.

Diabetes Increases 27% since 2005 among Wisconsin Adults
The Wisconsin Department of Health and Family Services reports that the incidence of diabetes has increased from 8% of Wisconsin adults in 2005 to 10% in 2007. Other findings include an
increase in diabetes related hospitalizations, an increase in diabetes related hospital charges, and an increase in the overall cost of diabetes in Wisconsin.

**New Pharmacy Legislation Enacted**
Newly enacted pharmacy bills will give pharmacists the ability to advise patients about medications through teleconferencing and will add volunteer pharmacist services to the set of services already covered under state liability coverage. The new legislation will be particularly influential for small communities in the State that have clinics, but no pharmacy.

**$3.5 Million Granted from CDC for Wisconsin’s Health Promotion Efforts**
The Wisconsin Department of Public Instruction along with the Department of Health and Family Services received a five year, $3.5 million grant from the CDC to support activities in Wisconsin that promote physical activity, nutrition and coordinated school health programs. The grant money is also directed towards the prevention of HIV and tobacco used along with the administration of the Youth Risk Behavior Survey.

**Healthier WI Partnership Program Awards $6.4 Million in Fourth Round of Funding**
The Medical College of Wisconsin will award almost $6.4 million in grants funded by its Healthier Wisconsin Partnership Program – MCW’s share of the Blue Cross/Blue Shield conversion funds. This is the fourth round of funding by the Partnership Program; in sum the program has awarded $23.45 million in funds to 102 projects, in this round the $6.4 million will be awarded in the form of 24 different grants.

**Reporting of Hospital Acquired Infections and MRSA Screening Debated**
The *Wisconsin State Journal* addressed the contested issue of mandatory MRSA—a form of drug resistant staph—screening and hospital infection rate reporting. Currently, twenty-two states have implemented mandatory reporting of hospital acquired infection; three states have an MRSA screening requirement for incoming patients. Critics, however, cite weaknesses in the usefulness and effectiveness of such efforts.

**Large Variation Reported among Wisconsin Hospitals’ Costs, Treatment**
The *Milwaukee Journal Sentinel* recently reported that the costs of providing similar treatment at hospitals in Wisconsin can vary by more than 30%. The differences in costs are attributed to volume and intensity of services utilized for the treatment of similar medical circumstances; examples of variations could include the number of days in the hospital or the number of physicians who partake in the care of a patient. The findings are reported in the 2008 *Dartmouth Atlas of Health Care*, which analyzes Medicare spending for patients who are chronically ill and in the last two years of their life.

**Anthem Wisconsin Will No Longer Reimburse for Preventable Adverse Events**
Wellpoint Inc., which oversees Anthem Blue Cross and Blue Shield in Wisconsin, has indicated that its policy of nonpayment for serious medical errors will be extended to include the State of Wisconsin. Anthem Blue Cross and Blue Shield has also indicated that it aims to ensure that patients are not charged directly for the adverse events Anthem refuses to cover. Preventable adverse events—outlined by CMS and the National Quality Forum—include medical mistakes such as surgery on the wrong part of the body, leaving a foreign object inside a patient during
surgery, certain infections and injuries acquired in a hospital, and the delivery of the wrong blood type to the patient.

BadgerCare Plus Program Enrollment Starts Strong
The BadgerCare Plus program is off to a strong start, with nearly 72,000 children and parents receiving new coverage since its Feb 1st launch. The program reorganizes and expands state health coverage for virtually all Wisconsin children and many low-income adults, and aggressively promotes enrollment. The uptake of the program in the first six weeks has greatly surpassed State projections of 26,000 new enrollees in the program’s first 18 months.

Commonwealth Fund Features BadgerCare Plus Healthy Living Incentives
The Commonwealth Fund’s April/May edition of the “States in Action” newsletter provides an overview of six pilot incentive programs aimed at engaging members in health-promoting behaviors. The highlight also provides a brief overview of the program’s initiative to improve quality through health literacy, which will involve the implementation of the “Ask Me 3” program at multiple health care clinics.

Audit Cites Lower Utilization; Higher Costs for Medicaid HMO Dental Services
The Legislative Audit Bureau (LAB) released a report this past month indicating that Medicaid recipients in who receive dental services through HMOs utilize services less, and have higher costs compared to the fee-for-service system in other counties. Medicaid recipients in Kenosha, Milwaukee, Racine and Waukesha counties typically receive dental services through HMO managed care arrangements. The fee-for-service arrangement—which is the delivery design in the remaining Wisconsin counties—pays dentists direct for specific services. The Legislative Audit Bureau also reported that there has been no improvement in HMO utilization rates over the past five years.

State Budget Still $527 Million Short; Hospital Tax Unlikely
Lawmakers are still debating how to fix a shortfall of $527 million in the Wisconsin state budget. Short-term fixes—likely to be implemented until after the elections in November—have been negotiated; however, it is still uncertain how the budget will be fully settled. It currently appears that a hospital tax, supported by Governor Doyle and Senate Democrats along with the Wisconsin Hospital Association and the state’s largest business association, will not be a part of the solution. The implementation of the hospital tax would have resulted in the provision of approximately $125 million to balance the budget.

State Building Commission Supports Planning New State Health Lab Facility
The State Building Commission recently approved $1.18 million this past month to initiate the planning of a $58 million facility. Both the Wisconsin State Laboratory of Hygiene and the Department of Agriculture, Trade and Consumer Protection laboratories potentially could be located inside the new complex. The approval was made amid concerns that the current facilities in use are both outdated and overcrowded. The state hygiene lab provides testing services for the state public sector, important for both disease outbreaks and environmental health related issues.
RESEARCH AND PROGRAM TOOLS

New Materials from Evidence-Based Health Policy Project
Materials have been posted from two briefings that were held in early May 2008:

- "Sobering News: How We Can Reduce Wisconsin's Top-Ranked Drinking Problem"
- "Health Care Payment Reform and Pay-for-Performance in Wisconsin: How to Promote System Transformation (and What Not to Do)"

Wisconsin Public Health Workforce Call to Action
A Powerpoint presentation from a April 30 webinar will be posted on the WPHA website
A Public Health Workforce Survey is available addressing diversity, sufficiency, & competency.

HSC Research Brief—Public Health Workforce Shortages and the Nation’s Health
This Center for Studying Health System Change (HSC) research brief addresses the workforce shortage facing many local health departments.

Wisconsin Council on Children and Families BadgerCare Plus Webpage
Information for parents and potential program participants and resources for advocates and policymakers, including a new paper entitled “BadgerCare Plus: Who’s Eligible, for What, and What Will It Cost?”

Health Care Costs 101, 2008 Edition
Released by the California HealthCare Foundation

RAND released a new report and accompanying issue brief this past month entitled “Is the Economic Burden of Providing Health Insurance Greater for Small Firms Than for Large Firms?”

New: Maternal and Child Health Bureau’s Discretionary Grant Information System
The Maternal and Child Health Bureau’s (MCHB) Discretionary Grant Information System (DGIS) is now available online, enabling access to program and performance measurement data for the 900 grants awarded annually in maternal and child health.

Consumer-Directed Health Plans: New Data
The Center for Studying Health System Change (HSC) released a new issue brief examining the role of consumer-directed health plans in the current market for health coverage.

Health Savings Accounts: Participation Increased and Was More Common among Individuals with Higher Incomes
U.S. General Accountability Office (GAO)

Kaiser Family Foundation Resource Updates
Statehealthfacts.org
Medicare Prescription Drug Plans 2008 Data Also:
Analysis: Unemployment, Health Coverage, Medicaid and SCHIP
How Private Health Coverage Works: A Primer 2008 Update
EVENTS AND ANNOUNCEMENTS

The Survey of the Health of Wisconsin Symposium (SHOW)
Exploring how researchers, policy makers, and other public health advocates utilize data and biological samples collected by population health surveys; explaining the process for accessing SHOW’s data and samples.
Wednesday, May 14, 2008: 8:00 am - 12:00 noon; University of Wisconsin - Madison, HSCLC
Interactive Simulcast at University of Wisconsin – Milwaukee, Union, Ballroom

Governor’s eHealth Implementation Summit
Annual Summit of the Wisconsin eHealth Care Quality and Patient Safety Board.
Thursday, June 12, 2008. Madison Concourse Hotel, Madison, WI

2008 Short Course in Clinical Research
UW-Madison School of Medicine and Public Health; Institute for Clinical and Translational Research (ICTR); and the Marshfield Clinic Research Foundation
June 12-13, 2008: 8:00am - 4:00pm; 1335 Health Sciences Learning Center
Online Registration for Medical Students
Online Registration for All Health Professionals
Phone Registration: (608) 262-3903
Questions and Information: www.ictr.wisc.edu; silet@wisc.edu; (608) 262-3903

Wisconsin Infant and Early Childhood Mental Health Conference
Early Relationships Matter: Building Networks
Wisconsin Alliance for Infant Mental Health

READING ROOM

IOM: Need Comparative Effectiveness Review of Treatments
An Institute of Medicine committee review released this past month recommends that Congress create a semi-private government agency to act as a centralized organization to compare the effectiveness of existing and new therapies.

Physicians and Insurers Reach Standards for Physician Performance Reporting
Physicians and insurers reached agreement on a set of national standards to be used for evaluating and releasing indicators on physicians’ performance. The standards were developed by the Consumer-Purchaser Disclosure Project, which was comprised of a conglomerate of consumer, labor and business organizations under the funding of the Robert Wood Johnson Foundation.

Some Insurers Adopt New Methodology for Co-Payments on High Priced Drugs
Some companies have begun to charge members up to 20 to 33 percent of the cost of high-priced drugs, as opposed to the previous standard of $10, $20 or $30 for prescription. The change in
payment structure is intended to help keep member premiums down in the face of an era with treatments for conditions that can cost $100,000 and more per year.

Ban Proposed on Drug and Medical Device Company Gifts
The Association of American Medical Colleges has concluded that doctors, staff members and students of all U.S. medical colleges should not be allowed to accept free food, gifts, travel and ghost-writing services from drug and medical device companies. The 129 American medical schools are not bound to follow the newly proposed ban; however, most medical schools do chose to follow the recommendations of the Association.

Safety of BPA in Consumer Products Contested
A National Institutes of Health panel recently released a draft report indicating a link between BPA and health concerns. Following the release of the NIH report, Canada banned BPA in baby products, Sen. Charles E. Schumer introduced a bill to ban some uses of BPA and ten states initiated their own efforts to review the need for restrictions.

CMS Proposes Nonpayment for Nine Additional Preventable Hospital Events
CMS recently proposed new a list of nine additional conditions for which Medicare would no longer reimburse hospitals for treatment. The list would join the previous list of nonpayment conditions already in implementation by Medicare. The list of nonpayment conditions is comprised of conditions which CMS has deemed to be reasonably preventable.

GAO: Improve Regulation of Hospital Acquired Infections
GAO released a report indicating that the federal government has not established appropriate guidelines to deter hospital-acquired infections. The report suggests that there needs to be a process of setting “priorities” among recommendations made by CDC regarding the prevention of hospital-acquired infections and that furthermore, these priorities need to be promoted in the requirements set forth to participate in Medicare and Medicaid. The report also indicates that there needs to be greater collaboration in the collection and sharing of data.

While Overall U.S. Life Expectancy Improves, Disparities in Mortality Worsen
Recently released findings in the online journal PLoS Medicine indicate that despite an overall increasing trend in U.S. life expectancy, there has been an increase in the disparity in mortality among certain subpopulations. Disparities are noted to differ on the basis of race, income and geography.

A GAO legal opinion finds that CMS violated federal law in its August 17, 2007 policy directive that restricted states’ SCHIP expansions. The contested policy required that states enroll of 95% of children in families in the state below 200% of the federal poverty level prior to expanding enrollment to children in families above 250% of the poverty level. According to the GAO opinion, the policy directive did not follow the formal rule-making process and required public comment period.

Generalist Physicians’ Workloads through 2025 to Exceed Supply
An article entitled “Will Generalist Physician Supply Meet Demands of An Increasing and Aging Population?” in Health Affairs predicts that there will be a 29% increase in the work load
for family physicians and general internists between 2005 and 2025. While no shortages were predicted for children’s care, the authors predicted a shortage of approximately 35,000-44,000 adult care generalists.

**Congress Bill Prohibits Genetic Discrimination; President Bush Expected to Sign**
The House and Senate have passed a bill that will prohibit employers from making decisions to hire, fire or promote on the basis of results from genetic tests. The bill would also prohibit health insurance companies from refusing coverage for potential members, or assessing higher premiums to individuals on the basis of genetic test results. Despite these prohibitions, the bill does not prohibit the use of genetic test results for long-term care and disability insurance. Also, individuals who already have coverage from an insurer could be denied coverage for a pre-existing condition.