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STATE NEWS

Legislature Actively Debating High Impact Health Initiatives
The state legislature is currently debating several high salience health issues. These include AB 729 relating to disclosure of charge and payment information by health care providers; AB 653 for expedited partner anti-microbial treatment of sexually transmitted infections; AB 675 relates to written agreements required for nurse-midwives and their coverage under the injured patients and families’ compensation fund; The Senate passed Wisconsin Parity Act (SB 362), which requires group health plans in Wisconsin to provide mental health and substance abuse disorder benefits at parity levels with other illnesses. The Assembly passed AB 496, which would prohibit people from driving while composing or sending text messages or e-mail messages. Two bills (SB 308 and AB 464) would permit employees who are volunteer emergency responders to be late or absent from work if that lateness or absence is due to responding to an emergency. The bills do not apply to employees that provide direct patient care in emergency rooms and intensive care units.

BadgerCare Plus Basic Plan Unveiled for Uninsured, Childless Adults
A new self-funded health care plan is now available for adults without dependent children who are on the waiting list (now numbering over 20,000 persons) for BadgerCare Plus Core Plan. BC Basic will provide enrollees with limited access to physicians, hospital services, generic prescriptions and catastrophic coverage, and will be paid for entirely through a monthly premium of $130. The Basic plan will act as bridge plan to keep individuals healthy while they wait for space in the BadgerCare Plus Core Plan. [Press release; Concept paper; Summary; Highlights]

**Legislative Fiscal Bureau Estimates up to $150M Hole in Health Care Budget**

A Dec. 17th paper by the Legislative Fiscal Bureau estimates that higher-than-anticipated enrollment in BadgerCare Plus is expected to cost the state about $120 to $150 million GPR more in 2009-11 than the state expected when it passed the biennial budget bill ($100 - $120 million more for BadgerCare Plus and $20 - $25 million more for the Core Plan for childless adults).

**Rule Expands Health Care Coverage to More Young Adults**

On January 1, the statute went into effect allowing young adults under 27, even if they aren’t students, to remain on their parents health insurance policies. The law applies to individual health and group health benefit plans. Administrative rules clarify the new law, which applies to person older than 17 but less than 27 years of age, not married, And either not eligible for health insurance through the young adult’s employer or whose premium contribution for employer coverage is greater than the additional premium amount the parent would pay to add the young adult to the parent’s health plan.

**Study: WI Health Plans Costly**

According to the fourth annual Wisconsin Health Insurance Cost Rankings for 2010, private health insurance consumers in central Wisconsin pay the highest premiums in the state but have access to high-quality plans.

**WI Insurance Commissioner Issues Emergency Rule on COBRA Subsidy Extension**

The federal American Recovery and Reinvestment Act of 2009 (ARRA) was recently amended to extend both the eligibility period and the duration of the ARRA premium subsidy benefit for terminated employees who select continuation benefits through their former employer, generally referred to as COBRA continuation. An emergency rule that will enable former employees of Wisconsin small employers to take advantage of the extension.

**New WI eHealth Board to Structure Statewide Health Information Exchange**

A December 1st executive order created the Wisconsin Relay of Electronic Data (WIRED) for Health Board to develop plans for a statewide health information exchange by June 1, 2010. The WIRED for Health Board replaces the eHealth Care Quality and Safety Board and will develop a plan for a statewide health information exchange.

**WI To Receive Federal Matching Funds For eHealth Record Incentives Program**

Wisconsin’s Medicaid program will receive federal matching funds for state planning activities necessary to implement the electronic health record (EHR) incentive program established by the Recovery Act. Wisconsin will receive approximately $1.37 million in federal matching funds.
**RWJF Selects WI for Innovative Project Grant to Promote HIT**
The Wisconsin Collaborative for Healthcare Quality is one of nine organizations nationally that will receive awards through the Aligning Forces for Quality (AF4Q) Development Fund. The Development Fund provides the opportunity to develop innovative practices in three focus areas: Health Information Technology (HIT); Patient-Centered Care; and Payment Reform. Wisconsin was chosen to work in the area of Health Information Technology.

**Survey: Results Show a Decrease in Smoking Among WI High Schoolers**
A 2009 survey conducted by the Wisconsin Department of Public Instruction (DPI) shows that the number of students who reported smoking a cigarette in the past 30 days dropped to 17 percent – down from 21 percent in 2007.

**Legislation Signed into Law to Strengthen WI’s Drunk Driving Laws**
The new law four main changes to current law. The costs associated with the bill will be offset by increased fees and penalties for drunk drivers. Fourth offense OWI will be a felony if it occurs within five years of an earlier offense; Ignition interlocks will be required for repeat offenders and first-time offenders with at or above a 0.15 blood alcohol level; A greater emphasis will be placed on treatment for drunk drivers, helping reduce repeat offenses; and Increases first offense OWI to a misdemeanor if a child under 16 is in the vehicle.

**Minority Groups in WI 2-3 Times More Likely to be Hospitalized with H1N1**
DHS released a report showing that H1N1 hospitalizations for minority populations were higher in the 2009 fall outbreak. In Wisconsin, the number of H1N1 hospitalizations per 100,000 population last fall was 40.2 among African Americans compared to 13.0 among Non-Hispanic whites, a 3.1-fold difference. Similar disparities existed for Native Americans who were 3.4 times more likely to be hospitalized, Hispanics who were 2.6 times more likely to be hospitalized and Asians who were 2.1 times as likely when compared to Whites.

**Emergency Preparedness in WI Households is Lacking**
A survey commissioned by Wisconsin Emergency Management and the Office of Justice Assistance and conducted by the University of Wisconsin Survey Center found that 80% of Wisconsin residents had not taken basic emergency precautions—such as making a kit of emergency supplies—and would not be prepared to respond if an emergency or disaster strikes.

**Supreme Court Will to Hear Case Concerning the State’s Use of Malpractice Fund**
The WI Medical Society filed suit in 2007 following enactment of legislation that took $200 million from the Injured Patients and Families Compensation Fund (Fund) to help balance the state’s budget. The case has statewide implications and the Court’s resolution of the issues will affect injured patients, health care professionals and Wisconsin’s medical liability environment.

**WDA: Sufficient Dental Work Force Through 2020 is a Persistent Challenge**
The Wisconsin Dental Association reports, in Supply and Demand for Dental Services: Wisconsin 2010 – 2020, that Wisconsin currently has enough dentists to meet the demand for access to quality dental services. In some areas of the state, however, access to dental care for low-income and uninsured individuals and persons in the state’s growing medical assistance
programs is a challenge. A study, commissioned by the state Department of Health Services, is currently underway to assess the needs in rural and urban Wisconsin and for a new dental school.

**Hospital Revenue Assessment Deemed a "Great Success"**
WI DHS Secretary Timberlake delivered a report to the Legislature’s Joint Finance Committee documenting how the $336 million assessed to hospitals through 6/30/2009 yielded over $581 million in Medicaid payment increases "The hospital assessment has been a great success," Sec. Timberlake stated. "It has allowed the Department of Health Services to significantly increase Medicaid reimbursement rates to hospitals throughout the state, ensuring access to vital health care services for members and reducing cost shifting within the health care system."

**RESEARCH AND PROGRAM TOOLS**

New and Updated Resources from the Commonwealth Fund
- **Health Care Leader Action Guide to Reduce Avoidable Readmissions**
- **Survey: Patient Experiences in Primary Care in New Orleans**
- **Tool: Interactive State Data Center** Shows Health Statistics Across the Nation
  - Wisconsin State 2009 Scorecard – ranked 10th best overall
- **Issue Brief: Does the CBO Underestimate Savings from Reform?**
- **Tool: Interactive, Comparative Hospital Performance Data**
- **Issue Brief: COBRA Subsidies for Laid-Off Workers**
- **Report: Health Insurance Exchanges Legal and Policy Issues**

New and Updated Resources from the Kaiser Family Foundation
- **January 2010 Health Policy Picks**
- **Issue Brief: State High-Risk Pools: An Overview**
- **Issue Brief: Issues for Structuring Interim High-Risk Pools**
- **KFF’s StateHealthFacts.Org has New or Updated Resources on:**
  - Demographics and the Economy
  - Health Status
  - Medicaid and CHIP
  - Medicare
  - Managed Care and Health Insurance
  - Women’s Health

New and Updated Resources from the Center for Health Care Strategies
- Download policy briefs, toolkits, and reports on the following topics:
  - Adults with Complex and Special Needs
  - Children’s Health
  - Consumer Issues
  - Long-Term Care
  - Medicaid Policy
  - Quality Improvement and Financing
  - Racial and Ethnic Health Disparities
New and Updated Resources from the Agency for Healthcare Research and Quality

The AHRQ’s Medical Expenditure Panel Survey (MEPS) is a set of large-scale surveys of families and individuals, their medical providers, and employers across the United States. MEPS summary data tables containing national estimates of the following are now available:

- Medical expenditures
- Medical conditions
- Access to care
- Quality of care

EVENTS AND ANNOUNCEMENTS

Monday Population Health Seminar Series
Every Monday, 12:00 - 1:00 PM, Room 1309 HSLC

Exhibition: Changing the Face of Medicine: Celebrating Women Physicians
First Week of February, Exhibition displayed in HSLC atrium, Related Activities also in HSLC

Global Health Seminar Series
“Working with Communities to Improve Health and Well-Being in Rural Guadalajara: Faculty and Student Leader Perspectives on a University Partnership”
Rescheduled to: February 10, 5:00 – 6:00 PM, Room 1325 HSLC

Evidence-Based Health Policy Project – Upcoming Programs

Accountable Care Organizations: New Model for Health Care Payment & Delivery
February 25, 9:00 – 11:00 AM, State Capitol 412 East

Scope of Practice: Who Should Do What to Assure High Quality, Efficient Care
March 3, 8:30 – 11:00 AM, State Capitol 412 East

Federal Health Reform Legislation: What Do Wisconsin Policymakers Do Now?
April 12, 1:00 – 4:00 PM (reception following), Location: TBA

UW School of Medicine & Public Health Upcoming Events

Second Annual Bioethics Program
“Reforming Health Care Ethically: Waste, Tradeoffs, and Rationing”
April 8, 1:00-5:30 PM, 1306 HSLC

READING ROOM

U.S. Office of Minority Health Seeks Comments on National Plan for Action
The Office of Minority Health is requesting feedback on their National Plan for Action before February 12, 2010. The National Plan for Action captures the status of health disparities proposes 20 strategies for their elimination. Comment forms are set up so that you may comment on individual chapters of the report or on the report overall. There is an area for comment submission at the conclusion of each chapter.
National Health Security Strategy Announced
HHS Secretary Kathleen Sebelius released The National Health Security Strategy, the nation’s first comprehensive strategy focused on protecting people’s health during a large-scale emergency. The strategy sets priorities for government and non-government activities over the next four years.

MedPAC Report Found Substantial Variation in Health Cost Based on Geography
The independent Medicare Payment Advisory Commission, or MedPAC, released its report on geographic variation in health care costs. Even when adjusting for the effects of wages, patient health status and other factors, unexplained geographic variations exist in both Medicare spending and Medicare service use. The report found substantial variation between high and low per beneficiary spending—a 50 percent difference between the highest 10 percent and the lowest 10 percent of areas—as well as substantial differences in Medicare service use, a 30 percent difference, between those highest and lowest areas.

Study: Public-Private Divide Found in Prostate Cancer Treatment
Treatment that men receive for prostate cancer may depend less on their condition and more on where they are treated, a new study found. Moreover, men treated by private hospitals were nearly two and a half times more likely to receive radiation therapy and more than four and a half times more likely to receive primary androgen deprivation therapy than surgery, which was the predominant treatment at county hospitals, according to a new study.

Report: An Analysis of the Roadmap for America’s Future Act of 2010
Congressional Budget Office (CBO) has analyzed the Roadmap for America’s Future Act of 2010, which would make comprehensive changes to the Social Security program; to federal involvement in health care, including Medicare, Medicaid, and the tax treatment of health insurance; to other federal spending; and to other features of the tax system.

Report: States Cut Funding for Tobacco Prevention Programs
Despite collecting record amounts of revenue from the 1998 tobacco settlement and tobacco taxes, states have cut funding for programs to reduce tobacco use by more than 15 percent in the past year. The report, A Broken Promise to Our Children: The 1998 State Tobacco Settlement 11 Years Later, shows that states will collect $25.1 billion in revenue from the tobacco settlement and tobacco taxes, but will spend barely 2 percent of it on tobacco prevention and cessation programs.

Study: Low Level Vitamin D Worsens Asthma in Adults
Low levels of vitamin D correlated with poorer lung function, increased airway reactivity, and reduced response to steroid treatment in adult asthmatics, researchers said.

Study: A Few Extra Pounds May Benefit Older People
A little excess weight after age 70 could do the body some good, according to results of a study involving 9,000 older patients. Overweight participants in the cohort study had the lowest 10-year mortality. Normal-weight and obese participants ages 70 to 75 had a similar and slightly higher risk of death. The findings add to evidence suggesting that being overweight in older age is not such a bad thing and might even be beneficial.
Issue Brief: **Requiring Employers to Contribute to Health Coverage for Workers**
Almost three out of five Americans under age 65 have employment-based health insurance - but with costs rising, this coverage is under serious pressure. Congress is now finalizing plans to require more employers to contribute to coverage for their workers. This brief examines the issue, known as the employer mandate, and explains how proposed legislation would expand job-based health insurance.

Report: **State Health Preparedness Scores Shows Underlying Gaps in Readiness**
The TFAH and RWJF report found that the H1N1 flu outbreak has exposed serious underlying gaps in the nation's ability to respond to public health emergencies and that the economic crisis is straining an already fragile public health system. The report contains state-by-state health preparedness scores based on 10 key indicators to assess health emergency preparedness capabilities.