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STATE NEWS

Wisconsinites 2 of 15 Appointed to Federal PPACA Advisory Board
Two Wisconsin leaders will help make recommendations to the U.S. DHHS on grants and loans to establish nonprofit, member-run health insurers serving the individual and small-group markets. They are two of 15 members appointed to the advisory board to the Consumer Operated and Oriented Plan, or CO-OP Program. The board was created by the Patient Protection and Affordable Care Act. The appointees from Wisconsin are Bill Oemichen, president and CEO of Cooperative Network, and Tim Size director of the Rural Wisconsin Health Cooperative.

WI DHS Seeks Bids to Build Health Insurance Exchange
The State of Wisconsin has issued and RFP seeking a contractor to develop a health insurance exchange as part of a broader procurement for the state’s health and human services eligibility determination system. Wisconsin’s Client Assistance for Re-employment & Economic Support (CARES) system covers a number of health and social services programs, including Medicaid. In addition to the CARES-related work, the RFP seeks an “automated system that would support the American Health Benefit Exchange ... in Wisconsin.”
BadgerCare Plus Basic Plan Began Enrollment on June 1st, Coverage Began July 1st
As noted in last month’s eNews, eligibility for the Basic Plan is limited to childless adults on the waiting list for the BC+ Core Plan. As of the end of April, that plan was serving a little over 60,000 childless adults, and it now has a waiting list of more than 50,000. People were allowed to start signing up for the Basic Plan on June 1, and coverage - which will cost $130 per month for a bare bones benefit package - begins on July 1. To read more about the plan, see the Governor's June 1 press release or go to the DHS website.

New Kaiser Factsheet on Wisconsin’s BadgerCare Plus Program Released
This fact sheet provides a brief overview of Wisconsin’s BadgerCare Plus Program, a three-year-old initiative that merged the state's three distinct Medicaid programs for children, parents and pregnant women into a single comprehensive health coverage program. It also expanded eligibility to provide near-universal coverage for children and greater coverage for parents and childless adults. As of April 2010, the program provided coverage to 770,000 state residents, including 445,000 children.

Milwaukee Provides Example for National Concern in Medicaid Expansion
The Washington Post reports that HMOs are positioning themselves for business growth and profit in states that outsource Medicaid, knowing the federal Patient Protection and Affordable Care Act could add 16 million people to Medicaid coverage. But the U.S. HHS Inspector General recently reports that 2.7 million children on Medicaid in nine states, most of them states that outsource Medicaid, are not receiving required screenings and immunizations. Wisconsin, as previously reported in eNews, re-bid its Medicaid contracts for southeast Wisconsin. One concern was that health plans had been creating profits but not meeting quality standards for patient care.

New Drunk Driving Law took Effect on July 1st
The new law carries four main changes to existing law, including:
- Fourth offense OWI a felony if it occurs within five years of an earlier offense;
- Ignition interlocks required for repeat offenders and first-time offenders with at or above a 0.15 blood alcohol level;
- A greater emphasis 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.
For a DOT summary of the law’s changes, go here. For a memo on the act from the Wisconsin Legislative Counsel, go here.

All Wisconsin Workplaces Went Smoke Free on July 5th
Wisconsin's new smoke-free workplace law took effect on July 5, prohibiting smoking in all workplaces, including all bars, restaurants, bowling centers and hotels. The law covers all Wisconsin businesses and protects the health of employees and customers. To learn more, go here. For information about WI tobacco control efforts, visit http://dhs.wisconsin.gov/tobacco. For a WI Department of Justice Advisory Memo, visit http://www.doj.state.wi.us/news/files/SmokingBanAdvisory.pdf. Smokers looking to quit should call 1-800-QUIT-NOW, go to www.ctri.wisc.edu/quitline or talk to their health care provider.
New Health Coverage Plan Technology Receives Federal Support
My Coverage Plan, Inc., a Madison-based for profit subsidiary of ABC for Health Inc., received a major new federal grant for up to four years and $1.2 million to support and accelerate the development of new health coverage information technology (pat.pend.).

Expectant Parents Can Find Hospital Birth Care Services, Information Online
Wisconsin hospitals report quality, safety information on birth-related services. This latest, and one of the largest, releases of information builds on the growing data within the CheckPoint initiative to promote health care transparency, quality and safety.

Telemedicine Grant to Improve Rural Health Care
The Wisconsin Public Service Commission has awarded a grant to the Wisconsin Reproductive Health Network (WIHRN) that will help in upgrading the telecommunications between rural health clinics. The Wisconsin Reproductive Health Network is a newly incorporated group comprised of family planning providers and Federally Qualified Health Centers in Wisconsin.

A New 4-year Nursing Program to be Offered in Rock County with Help of State Funding
A budget amendment to designate $170,000 in each year of the current biennium helped get the nursing program off the ground. The Legislature approved the amendment. (See attached letter.) Until now, no campus in Rock County offered a four-year nursing degree. The new program is called Soar Ahead. Students will earn their general education credits at UW-Rock County, earn an associate nursing degree through Blackhawk Technical College, and earn their bachelor’s degree by Internet at UW-Oshkosh.

UW-Madison Ranks 20th For ‘Social Mission' At Medical School
The study evaluated 141 medical schools on the basis of their "social mission": a set of criteria that rated how many students graduating in 1999-2001 followed the primary care track; how many of these graduates ultimately worked in rural or underserved communities; and how many were Native American, Hispanic or African-American. University of Wisconsin placed 20th, noting the UW-Madison’s Wisconsin Academy for Rural Medicine program that gives students a chance to practice medicine in rural areas.

Marshfield Dental Center To Open In August
Family Health Center of Marshfield Inc. will open its Marshfield Dental Center August 16. A one-time grant of $2.3 million through the American Recovery and Reinvestment Act funded equipment for the center. The organization also received state and federal funding.

WDA Mission Of Mercy Provides Free Care
The Wisconsin Dental Association and WDA Foundation’s second Mission of Mercy exceeded its patient goal with 2,038 children and adults receiving more than $900,000 in free dental care in Sheboygan. The 950 MOM Volunteers included 175 dentists, dental hygienists and assistants, Marquette University School of Dentistry students and community members. They provided cleanings, fillings, extractions and limited treatment partials.
**WI Expects Savings due to Health Care Reform**
A recent report analyzes the costs to states and the federal government of some of the Medicaid provisions of the new health care reform act. Specifically, the report examines the impact and cost of the portions of the act relating to Medicaid coverage for adults with incomes at or below 133% of the federal poverty level (FPL). The report prompted DHS to release its own fiscal estimate, which takes a broader view of the act's implications and concludes that the law will actually save WI about $745 million over the 6-year period from 2014 through 2019. The DHS estimate of a $745 million savings, which was reported in a May 26th Journal Sentinel article, is based on a much broader analysis of the new law's effects.

**RESEARCH AND PROGRAM TOOLS**

New Resources posted by the Evidence-Based Health Policy Project


New and Updated Resources from the Commonwealth Fund
- International Profiles of Healthcare Systems
- A Nationwide Survey of Patient-Centered Medical Home Demonstration Projects
- Developing Innovative Payment Approaches: Finding the Path to High Performance
- How Physician Could Share Personnel and Resources to Support Medical Homes
- Innovation in Medicare and Medicaid Will Be Central to Health Reform's Success
- Prescription Drug Accessibility And Affordability In The United States And Abroad
- Enhancing the Capacity of Community Health Centers to Achieve High Performance

New and Updated Resources from the Kaiser Family Foundation
- Donor Funding Report for Health in Low and Middle Income Countries
- Global Health Infant Mortality Rate and Maternity Ratio
- Policy and Budget Tracker
- Reporters’ Guide to US Global Health Policy
- Medicaid Long-Term Services and Supports: Key Changes in the Health Reform Law
- Medicare Advantage 2010 Data Spotlight: Plan Enrollment Patterns and Trends
- Study finds that Medicare Advantage market is not highly competitive
- Medicare Health and Prescription Drug Plan Tracker
- Survey: People who Purchased their Own Insurance
- Updated Factsheet on Medicaid Program
- Demographics and the Economy
- Health Status
- Medicaid and CHIP
- Health Costs and Budgets
- Managed Care and Health Insurance
- Providers and Service Use
- HIV/AIDS
- Monthly Update on Health Disparities
New and Updated Resources from the **Urban Institute**
- Will the PPACA Improve Health Outcomes for Individuals and Families?
- How Will the PPACA Impact Individual and Small Group Premiums?
- How Will the PPACA Impact Children?
- Health Insurance Benefits Protection for Employees with Disabilities: Role of FMLA
- Cross-State Risk Pooling in Health Care Reform: An Analytic Review
- Are State Challenges to the Legality of the PPACA likely to Succeed?

New and Updated Resources from the **Robert Wood Johnson Foundation**
- Section 125 Plans in the Post-reform Environment: Issues for Individual Insurance
- What Is the Impact of Reform on the States?
- Charting a Path for HealthCare Reform
- Health Reform: How will Consumer be Affected?
- Evidence and Lessons from Massachusetts Reform

**EVENTS AND ANNOUNCEMENTS**

**Lecture/Discussion: Food for Thought: Food Science and Your Health**
July 13th, 7pm-9pm, 1100 Grainger Hall

**READING ROOM**

**Failing to Extend Fiscal Relief to States Will Create New Budget Gaps**
If Congress does not extend the enhanced Medicaid matching funds in last year’s Recovery Act, most states will cut public services or raise taxes for the fiscal year that begins July 1 by even more than they are already planning – laying off tens of thousands more teachers and other public employees, cutting education funding more sharply, and further reducing payments to health care providers and other private firms. Without more federal aid, state budget-closing actions could cost the national economy 900,000 public- and private-sector jobs.

**Up to 13.7 Million Uninsured Young Adults to Gain Coverage Under Health Reform Law**
This issue brief describes critical provisions in the new law that will help young adults acquire insurance, including the ability to enroll in a parent's health plan up to age 26 beginning in September 2010; significant expansion in eligibility for Medicaid, beginning in 2014; and the creation of state or regional health insurance exchanges with subsidized private insurance for people with low and moderate incomes, also beginning in 2014.

**Health Spending Outpaces Economic Growth In Wealthy Countries**
A report from the Organization for Economic Cooperation and Development (OECD) found that the increase in health spending is "piling pressure budgets already hit" by the recession and is likely to continue rising as populations age, technology improves and public expectations grow. ... Given the urgent need to reduce their budget deficits, many OECD governments will have to make difficult choices to sustain their healthcare systems: curb the growth of public spending on health, cut spending in other areas, or raise taxes," according to the report. "The biggest spender
on health was the United States, which spent 16 percent of its national output" on health care in 2008. Per person, the U.S. spends "well over double" the other nations.

**Consumers Are Skeptical About Evidence-Based Health Care**  
This survey of more than 1,500 patients with employer-based insurance found "there is a fundamental disconnect between the central tenets of evidence-based health care and the knowledge, values, and beliefs held by many consumers." For instance, "only 34 percent of participants ever recalled having a physician discuss what scientific research had shown about the best way to manage their care" and "33 percent of [the] survey respondents agreed or strongly agreed with the statement that 'medical treatments that work the best usually cost more than treatments that don't work as well.' ... 40 percent reported that they were not sure about this."

**Financial Incentives For Health Care Providers And Consumers**  
This brief details the effect cost sharing, value-based purchasing and pay-for-performance systems have on providers and consumers. Incentives that improve care and reduce cost present challenges. For plan administrators, designing and using effective incentives can be technically demanding and administratively expensive. For providers, performance reporting can be time consuming. For consumers, choosing among plan options, providers, and treatments can be difficult. If not carefully designed, financial incentives can have unintended adverse consequences, including poorer health outcomes and higher long-term costs.

**Study: Medicare 'Pay-For-Performance' Could Increase Care Inequality**  
"The U.S. government's plan to base Medicare payments to hospitals on certain quality-of-care measures could end up transferring funds away from hospitals in the nation's poorest, underserved areas," according to a study published in the journal PLoS Medicine.

**New Seven-Nation Study Ranks U.S. Last on Health System Performance**  
Despite having the most expensive health care system, the United States ranks last in overall performance compared with six other industrialized countries—Australia, Canada, Germany, the Netherlands, New Zealand, and the United Kingdom—a new Commonwealth Fund report finds.

**Industry Gifts Okay with Most Doctors**  
Increased emphasis on conflicts of interest has yet to sway physicians' generally positive attitudes toward drug and device manufacturers' marketing activities, a survey of almost 600 attending physicians and trainees showed.

**U.S. Government’s Efforts to Address Global Maternal, Newborn and Child Health**  
This report examines progress on improving maternal and child health globally and the evolving U.S. role. Also available are fact sheets examining this issue, as well as international family planning and reproductive health, and a webcast and transcript of a related Kaiser policy forum in May.

**Race and Insurance Factors in Breast Cancer Outcome**  
Going uninsured or underinsured may have a bigger impact on breast cancer outcomes for black women, researchers found.
**Hep A Vaccination Coverage for Babies Improves**
More one-year-olds are receiving hepatitis A vaccination since the CDC's Advisory Committee for Immunization Practices (ACIP) recommended it for that age group, but public health officials noted plenty of room for additional improvement.

**HPV Vaccine Coverage Limited**
Only about a third of teenage girls in a six-state sample have been vaccinated against human papillomavirus (HPV), researchers found.

**New Findings on Medical Home Capacity in Underserved Areas**
This Commonwealth Fund–supported study found that contrary to expectations, primary care practices serving poor and minority neighborhoods were more likely than other practices to have key components of the medical home primary care model in place. Based on a survey of primary care practices in Massachusetts, the study found these practices were more likely than others in the state to have on-site language interpreters, clinicians who speak multiple languages, and frequently used, multifunctional electronic health records—all attributes of a patient-centered medical home.

**The Future of Patient-Centered Medical Homes**
The Journal of General Internal Medicine recently published a series of articles on the patient-centered medical home (PCMH) written with support from The Commonwealth Fund, the Agency for Healthcare Research and Quality, and the American Board of Internal Medicine Foundation. In the articles, leading researchers and thought leaders discuss the key issues that need to be resolved if the PCMH is to gain wider currency in U.S. primary care.

**Misuse of Rx Drugs Prevalent in U.S. High Schools**
One high school student in five has taken a prescription drug without a doctor's order, according to a nationwide survey.

**New Findings on Medical Home Capacity in Underserved Areas**
Based on a survey of primary care practices in Massachusetts that serve neighborhoods with high percentages of racial and ethnic minorities or economically disadvantaged residents, the Commonwealth Fund–supported study found these practices were more likely than others in the state to have on-site language interpreters, clinicians who speak multiple languages, and frequently used, multifunctional electronic health records—all attributes of a patient-centered medical home.

**Asthma in Insured Children Still Varies by Race/Ethnicity**
Asthma prevalence, treatment, and outcome differ among black and Hispanic children compared with white children despite universal health coverage, results of a study in military families showed.