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In This Issue

STATE NEWS

- [Wisconsin's New Health Leadership Team Appointed](#)
- [National Press Spotlights Wisconsin's Pivot on Health Reform](#)
- [Wisconsin Launches Health Insurance Purchasing Exchange Website Prototype](#)
- [DHS Submits Application for Federal Early Innovator Grant](#)
- [Plan to Eliminate Tax on HSA Contributions](#)
- [High-Deductible Health Care Plans Growing, but Slowly](#)
- [Few Sign Up for High Risk Health Plan](#)
- [BadgerCare Launches Medical Homes for High Risk Pregnant Women](#)
- [Legislative Fiscal Bureau Reports on Potential Family Care Expansion](#)
- [Health Plan Costs Rose 6.4% in WI, 6.9% Nationally](#)
- [Cutting 55,000 Adults Off BadgerCare Could Save \\$100 Million](#)
- [More People Eligible for STD Screening, Free Birth Control](#)
- [Public Health Council Addresses Medical Schools' Use of BC/BS Funds](#)
- [Study Shows Dramatic Air Quality Improvement because of Smoke-Free Law](#)
- [In Wisconsin, the Buy Local Movement Now Includes Hospitals](#)
- [UW Health Gives Up Search for 2nd Trimester Abortion Site](#)
- [SmokeFree Wisconsin Receives Grant to Work with Wisconsin Tribes](#)
- [Grant to Train Workers in Northwest Wisconsin's Health Care Industry](#)
- [State Approves \\$10 Million for Marshfield-Based Rural Dentistry School](#)
- [UW Study Finds that Good Grades in High School Lead to Better Health](#)
- [Rural EMS Departments Struggle with Workweek Staffing](#)

RESEARCH AND PROGRAM TOOLS

- New and Updated Resources from the [Commonwealth Fund](#)
- New and Updated Resources from [AHRQ](#)
 - [2009 State Snapshots](#)
 - [State Quality Tools: ROI Calculator](#)
- New and Updated Resources from the [Kaiser Family Foundation](#)
- [Healthy People 2020](#)
- [AARP: Drug Savings Tool](#)
- [Prepared Patient](#)
- Wisconsin Toolbox:
 - [Health Insurance Exchange Prototype](#)
 - [Wisconsin Health Insurance Coverage](#)
 - [Optimizing Medicaid Enrollment: Wisconsin's ACCESS Internet Portal](#)
- [Redesigned Wisconsin Health Reports website](#)
- [National Prevention Council Draft Recommendations](#)

EVENTS AND ANNOUNCEMENTS

- [Health Reform: New Directions?](#)
- [The 2011 National Health Policy Conference](#)

READING ROOM

- [Nine Ways the New Health Law May Affect You in 2011](#)
- [Health IT Investments Will Top Industry Concerns in 2011](#)
- [Affordable Care Act Increases Transparency for Consumers in “Mini-Med” Plans](#)
- [New Rules Would Require Insurers To Justify Double-Digit Rate Increases](#)
- [Health Bill Approved for Sept. 11 Responders](#)
- [Number of Uninsured Jumped by 5 Million During Downturn, Study Says](#)
- [Workplace Clinics: A Sign of Growing Employer Interest in Wellness](#)
- [Study Finds Setbacks in Women’s Health](#)
- [Nutrition Facts Panels to Appear on Labels of Meat and Poultry Products](#)
- [Exposure to Tobacco Smoke Causes Immediate Damage](#)

STATE NEWS

Wisconsin’s New Health Leadership Team Appointed

[Dennis Smith](#) has been appointed Secretary of the Wisconsin Department of Health Services. Secretary Smith comes to Wisconsin from the Heritage Foundation's Center for Health Policy Studies. Smith served under President George W Bush as director of the federal Center for Medicaid and State Operations. The DHS new leadership team also includes Kitty Rhoades as Deputy Secretary, Brett Davis as Medicaid Director and Kevin Moore as Executive Assistant for the Department. Each of these other appointees came from positions serving in the state legislature.

[National Press Spotlights Wisconsin's Pivot on Health Reform](#)

A PBS NewsHour report covers the state of healthcare in Wisconsin where a Republican sweep in the midterm elections is adding a layer of complexity to the implementation of federal healthcare reform law. Wisconsin as well was highlighted nationally by the well-respected and widely read web site Politico as a [State to Watch in Health Reform](#). [A separate POLITICO article](#) reports that Walker, in an interview, acknowledged that he is still applying for health reform grants and he won't block the law's implementation. The [national press](#) also reported that Governor Scott Walker, on his first day in office, authorized Attorney General J.B. Van Hollen to join other states in a legal challenge against the ACA. These lawsuits argue that the [Affordable Care Act](#) is unconstitutional in requiring people to purchase health insurance.

[Wisconsin Launches Health Insurance Purchasing Exchange Website Prototype](#)

The [Wisconsin Office of Health Care Reform](#), prior to the departure of the Doyle Administration, developed a [prototype website for the health insurance exchange](#). The exchange is an online marketplace where individuals and small businesses can readily compare health plans and purchase health insurance, beginning in 2014. The website allows users right now to [test the online prototype](#) with five sample scenarios and provide feedback. The prototype was recently [featured in a national webinar](#) by the Robert Wood Johnson.

[DHS Submits Application for Federal Early Innovator Grant](#)

Immediately prior to the departure of the Doyle Administration, DHS applied for funding as an "early innovator" under the federal "[Cooperative Agreements to Support Innovative Exchange Information Technology Systems](#)." This highly competitive grant will be awarded to only five states that are selected to serve as models for other states. The funding opportunity will reward States that have and can demonstrate leadership in developing cutting-edge and cost-effective consumer-based technologies.

[Plan to Eliminate Tax on HSA Contributions](#)

Governor Walker said he would propose removing state income taxes on health savings accounts during a special economic development session in January. Republicans have tried for years to eliminate the tax on contributions to HSAs, and they now have the political muscle with majorities in the Assembly and the Senate. Wisconsin is one of only four states that still tax HSA contributions.

[High-Deductible Health Care Plans Growing, but Slowly](#)

The number of people covered by health plans that include a health savings or reimbursement account continues to grow but remains a relatively small piece of the overall market in Wisconsin. The growth has been slower than initially projected. The plans could draw more attention in the coming months if Governor Scott Walker and the Legislature proceed with plans to exempt contributions to health savings accounts from state income taxes. Wisconsin is one of four states that don't allow people to deduct contributions from their state taxes.

[Few Sign Up for High Risk Health Plan](#)

The *Milwaukee Journal-Sentinel* reports that fewer than 400 people with pre-existing medical conditions have signed up for the health insurance plan that became available last summer as part

of federal [Affordable Care Act](#). Wisconsin ranked 10th among states in enrollment last fall, with 363 people accepted for the new plan and 74 people with applications pending. Wisconsin already provided a similar option for people denied coverage through its Health Insurance Risk-Sharing Plan (HIRSP), which insures almost 19,000 people.

BadgerCare Launches Medical Homes for High Risk Pregnant Women

Four BadgerCare Plus contracted health plans are working on an initiative aimed at improving birth outcomes among high-risk pregnant women in southeast Wisconsin by connecting them with a medical home. The health plans have recruited several health care centers to serve as medical home pilot sites. The characteristics of medical homes are defined in the HMO contract language. The four participating health plans are Abri Health Plan, Children's Community Health Plan, Community Connect Health Plan and United Healthcare. The medical home pilot programs begin operation January 1 and will continue for two years.

Legislative Fiscal Bureau Reports on Potential Family Care Expansion

The Legislative Fiscal Bureau reported at the December meeting of the legislature's Joint Finance Committee (JFC) that an expansion of Family Care to Langlade and Lincoln Counties will produce savings in state GPR funds. The Joint Finance Committee (JFC) passed a DHS plan for this expansion. But Representative Robin Vos, the new Assembly co-chair of the JFC voted no, arguing that the program may be unsustainable and that decisions about moving forward with it should be left until the next session when an audit is complete.

Health plan Costs Rose 6.4% in WI, 6.9% Nationally

Health benefit costs for employers grew at 6.9% nationally and 6.4% in Wisconsin in 2010, according to Mercer's analysis of its annual National Survey of Employer-Sponsored Health Plans. Wisconsin's growth in costs came in below last year's 6.8% pace, as Wisconsin companies continue to shift a larger share of health care costs onto employees through higher cost-sharing, [the Milwaukee Journal-Sentinel reports](#). Still, the average total health benefit cost per employee is \$10,658 in Wisconsin compared with \$9,562 nationally. Wisconsin workers still pay relatively low deductibles for in-network medical care through preferred provider organizations. Nationally the median deductible is \$1,000 for all employers and about \$500 for large employers. In Wisconsin, the median deductible is \$500 for all employers.

Cutting 55,000 Adults Off BadgerCare Could Save \$100 Million

The state, facing a \$3.3 billion budget deficit, could save \$100 million by reducing the income-eligibility level for BadgerCare coverage for adults. Currently, the BadgerCare Plus Core Plan offers coverage to childless adults with incomes up to 200% of the federal poverty level (FPL). Enrollment in that program is capped, and there is a current waiting list of 83,000 names. The state has the option under federal law to reduce eligibility to 133% FPL, which would eliminate approximately 55,000 currently enrolled adults who earn between 133-200% FPL. The incoming co-chair of the legislature's Joint Finance Committee, Rep. Robin Vos, R-Rochester, told members of the Racine County Board that the state could consider is not cutting anyone from BadgerCare, but no longer accepting anyone new on BadgerCare who makes over 133% FPL..

More People Eligible for STD Screening, Free Birth Control

A state program that provides free birth control and screening for sexually transmitted diseases for those from the ages of 15 to 44 will be available to persons up to 300% of the federal poverty

level. Wisconsin is the first state to raise the income levels for the program (up from 200% FPL). The program is controversial because it does not require parental consent and virtually anyone age 15 to 17 is eligible for the program because parental income counted when determining eligibility. More than 54,000 females and males are enrolled.

State Quality Initiative Improving HMO Services to Medicaid Members

The quality of health care services provided by Health Maintenance Organizations (HMOs) to Wisconsin Medicaid members in 2009 improved over both 2008 and 2007 levels, according to the results of a new Pay-For-Performance initiative started by the Department of Health Services (DHS) last year. The 13 HMOs, serving more than 630,000 Medicaid members, met nearly 90 percent of their quality goals.

Report: Competition Leads to Lower Health Costs in Madison

The Madison market has the lowest health insurance premiums of any region in the state and has seen the smallest total increase since 2000, according to a [report from Citizen Action of Wisconsin](#), a liberal advocacy group. The report uses the state health insurance plan, which gives employees a choice of commercial health plans, as a gauge of how health insurance premiums vary throughout the state and to track the rise in premiums since 2000. It found that health insurance premiums are roughly 25% lower in Madison than other parts of the state.

Increased Access to Health Insurance for Children Qualifies WI for Federal Bonus

Increased access to health care services for children through the BadgerCare Plus program qualified Wisconsin for a federal bonus of \$23.1 million for this year. The performance bonus payments are intended to encourage states to enroll more uninsured Medicaid-eligible children and help offset increased enrollment costs. Wisconsin received the bonus from the federal Centers for Medicare and Medicaid Services (CMS) because the average number of children enrolled monthly in Children's Health Insurance Programs (CHIP) increased by 121,000 between 2007 and 2010. Wisconsin received the second largest bonus in the country.

Statewide Health IT Network Plan Gets Final Approval

The development of a statewide network of electronic health information is moving ahead after Wisconsin's plan received final approval this week from federal officials. The Wisconsin Statewide Health Information Network (WISHIN) will serve as the network's governing organization and the Wisconsin Health Information Exchange (WHIE) will act as the network's technical manager and provide early stage technical assistance to health care providers and hospitals that want to participate in information exchange. Wisconsin providers are expected to receive between \$500 million and \$800 million in federal incentive payments to help health care providers with the cost of implementing or upgrading electronic health records systems.

UWM Health School Lease at Pabst Site Wins Final State Approval

The State Building Commission has approved University of Wisconsin-Milwaukee's lease at the former Pabst brewery for its new School of Public Health. UWM will initially lease more than 57,000 square feet at 1240 N. 10th St., but plans to use a purchase option to acquire the property in June 2012, when the health school moves into the building. The school will lead efforts to battle obesity, infant mortality and other urban health challenges.

[WI Public Health Council Addresses Medical Schools' Use of BC/BS Conversion Funds](#)

The Wisconsin Public Health Council, at its December 10, 2010 meeting, discussed the administration and oversight of the BCBS conversion funds as [assessed by the Legislative Audit Bureau](#). The Council adopted recommendations asking Wisconsin's two medical schools to provide equity in the distribution of funds between "public health" and "medical education and research" - instead of the current 35% of funds to public health initiatives and 65% to medical education and research. The Council also recommends that the medical schools eliminate the requirement that a faculty member be a part of every grant distributed from the public health funds to community groups.

[Study Shows Dramatic Air Quality Improvement because of Smoke-Free Law](#)

Air quality samples taken in more than 200 Wisconsin bars and restaurants that had previously been found to have "Unhealthy" air showed a 92% improvement after enactment of Wisconsin's smoke-free air law, according to a [study by the Wisconsin Department of Health Services \(DHS\) and the UW Carbone Comprehensive Cancer Center](#). The study looked at air quality data recorded in businesses before and after the law's July 5th implementation.

[In Wisconsin, the Buy Local Movement Now Includes Hospitals](#)

Two hospitals in western Wisconsin recently announced they've committed 15% of their food budget to locally produced food. Sacred Heart (Eau Claire) and St. Joseph's (Chippewa Falls) Hospitals will buy approximately \$345,000 from local producers each year, including produce, beef, poultry, and cheese. The Hospitals will purchase their food through the [Producers & Buyers Co-op](#), a cooperative representing twenty farmers and other producers in a ten county region of western Wisconsin.

[UW Health Gives Up Search for 2nd Trimester Abortion Site](#)

UW Health officials have said they are no longer looking for a site in Madison to perform second-trimester abortions, handing anti-abortion activists a victory in a nearly two-year battle over the controversial procedure. The controversy dates to January of 2009, when UW Health announced plans to begin offering abortions — mostly second-trimester ones — at the Madison Surgery Center, a facility at 1 S. Park St. jointly owned by UW Hospital, its doctor group and Meriter Hospital.

[SmokeFree Wisconsin Receives Grant to Work with Wisconsin Tribes](#)

Americans for Nonsmokers' Rights granted SmokeFree Wisconsin (SFW) \$136,000 to extend smoke-free protection to Tribal workplaces. In July 2010, Wisconsin made history becoming the 28th state to implement a smoke-free law, protecting the right of all workers to have a smoke-free workplace. However, this law did not apply to Tribal lands because they are sovereign. This leaves up to 78,000 people unprotected from the benefits of smoke-free air. Now, SFW is teaming with Tribes around the state to expand smoke-free protections for employees.

[Grant to Train Workers in Northwest Wisconsin's Health Care Industry](#)

Wisconsin has received a \$290,362 Wisconsin Industry Partnership grant to train over 500 workers in northwest Wisconsin for careers that are in demand across the region's health care industry. The Northwest Wisconsin Workforce Investment Board, DWD's regional workforce partner, will administer the health care training grant to boost the skills, employment and retention of participating workers. Training activities will center on a variety of health care

careers, from dental assistants to supervisory and management positions. Approximately 510 workers – including 60 dislocated workers and 450 current health care workers interested in advancing to higher level careers – will take part in the initiative.

[State Approves \\$10 Million for Marshfield-Based Rural Dentistry School](#)

An affiliate of Marshfield Clinic has secured a matching grant from the state by committing \$10 million for a rural dental education program that would be the first step toward starting a second dental school in Wisconsin. The State Building Commission voted 6-2 to release the \$10 million in matching funds despite [opposition by the Wisconsin Dental Association and the Marquette University School of Dentistry](#).

[UW Study Finds that Good Grades in High School Lead to Better Health](#)

The "A" grades that high-schoolers earn aren't just good for making the honor roll - they also make them healthier as adults, too. Studies have long shown that education is linked to better health, but new research by Pamela Herd, an associate professor of public affairs and sociology at the University of Wisconsin-Madison, shows that higher academic performance in high school plays a critical role in better health throughout life. The [report](#) on academic performance and health looked at links between educational attainment, high school academic performance, personality and psychological characteristics, and late-life health among high school graduates.

[Rural EMS Departments Struggle with Workweek Staffing](#)

About 80 percent of Wisconsin's ambulance services respond to less than 1,000 calls a year and volunteers staff nearly 75 percent of the state's ambulance services. It is rare for volunteer paid-on-call EMS providers to earn more than \$2,500 a year. The average length of time for someone to volunteer for EMS is about five years. There are times when no one is available and surrounding EMS departments are asked to respond, but that can add minutes to a call when sometimes, minutes or even seconds are critical.

RESEARCH AND PROGRAM TOOLS

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- New and Updated Resources from [AHRQ](#)
 - [2009 State Snapshots](#)
 - [State Quality Tools: ROI Calculator](#)
- New and Updated Resources from the [Kaiser Family Foundation](#)

- [Healthy People 2020](#)
Healthy People provides science-based, 10-year national objectives for improving the health of all Americans.

- [AARP: Drug Savings Tool](#)
This tool allows you to search for a drug you are taking, review your drug's price range and efficacy and compare it to Consumer Reports Best Buy Drugs, and print out your options for discussion with your doctor. This tool also allows you to view more information about this group of drugs, including safety and effectiveness.

- [Prepared Patient](#)
The *Prepared Patient* Forum resources make it easier to find good care and get the most out of it. The Forum is part of the Center for Advancing Health (CFAH). CFAH has advocated for patients and health care consumers.
- Wisconsin Toolbox:
 - [Health Insurance Exchange Prototype](#)
 - [Wisconsin Health Insurance Coverage](#)
 - [Optimizing Medicaid Enrollment: Wisconsin's ACCESS Internet Portal](#)
- [Redesigned Wisconsin Health Reports Website](#)
- [National Prevention Council Draft Recommendations](#) for prevention, wellness and health promotion practices. Input and comment on the Draft Recommendations invited through January 13, 2011.

EVENTS AND ANNOUNCEMENTS

Health Reform: New Directions?

HealthWatch Wisconsin Annual Conference, March 7-8, Inn on the Park, Madison

The 2011 National Health Policy Conference

February 7-8, 2011, JW Marriott, Washington, D.C.

READING ROOM

Nine Ways the New Health Law May Affect You in 2011

Opponents of the new health care overhaul law are threatening to repeal, defund and stop it in court but, in the meantime, the federal and state governments will be implementing a number of important provisions in 2011. While many people will welcome the new benefits, some will face higher costs as a result of the law. The article describes nine health law changes to take note of this year.

Health IT Investments Will Top Industry Concerns in 2011

An explosion of health information technology investments driven by three government policies will be the most significant issue for the health care industry in 2011, according to an analysis by the Health Research Institute of PricewaterhouseCoopers LLP (PwC). Hospitals, physicians and other providers are likely to establish or expand their health IT systems because of the three Department of Health and Human Services (HHS) policies. The most important is a Medicare and Medicaid bonus payment system in 2011 for providers who upgrade electronic health records and other health IT systems. Medical providers can get higher Medicare or Medicaid rates if they meet criteria spelled out in regulations published in July.

[Affordable Care Act Increases Transparency for Consumers in “Mini-Med” Plans](#)

The Department of Health and Human Services (HHS) has released new guidance that will give consumers more information about their health insurance plan. Under the new rules, health insurers offering “mini-med” plans must notify consumers in plain language that their plan offers extremely limited benefits and direct them to <http://www.HealthCare.gov> where they can get more information about other coverage options. HHS has also issued guidance restricting the sale of new mini-med plans except under very limited circumstances.

[New Rules Would Require Insurers To Justify Double-Digit Rate Increases](#)

Health insurers seeking a rate increase of 10 percent or more in 2011 must publicly detail why the increase is needed, under proposed rules recently released by the Obama administration. Under the proposal, the flagged premium increases would be subject to review by the states – or the federal government in some cases – to determine if they are unreasonable. In following years, the Department of Health and Human Services will adjust the specific percentage threshold for each individual state.

[Health Bill Approved for Sept. 11 Responders](#)

The five-year, \$4.3 billion measure will provide medical treatment for emergency responders sickened by toxic dust inhaled at the World Trade Center site in New York in the days following the hijacked plane attacks. It also includes a health program for responders sickened by the toxic debris and establishes a victims' compensation fund. Victims have five years to file claims. Thousands of firefighters, police and other rescue and cleanup workers contracted respiratory problems and other illnesses from working at the World Trade Center site in the aftermath of the attacks.

[Number of Uninsured Jumped by 5 Million During Downturn, Study Says](#)

The net effect of the economic downturn on the uninsured population was an increase of 5 million to a total of 50 million, according to an Urban Institute analysis. The number of Americans below age 65 insured through employers dropped by 9.3 million during the period of the study, 2007 through 2009. The drop from 164.5 million to 156.2 million stemmed in large part from job losses and the movement of workers from full-time to part-time status.

[Workplace Clinics: A Sign of Growing Employer Interest in Wellness](#)

Commonplace in the 1980s among the heavy industry/manufacturing and financial sectors, workplace clinics were geared primarily toward treating workplace injuries or minimizing employees' time away from work. Experts attribute their recent resurgence to employers viewing them as a tool for containing medical costs and boosting productivity, as well as an asset in helping to attract potential employees, according to a new study funded by the Robert Wood Johnson Foundation's Changes in Health Care Financing and Organization Initiative. Most workplace clinics try to offer shorter appointment and in-office wait times, as well longer clinician visits than typical in another medical care setting.

[Study Finds Setbacks in Women's Health](#)

More women are binge drinking, saying they downed five or more drinks at a single occasion in the past month, and fewer are being screened for cervical cancer. Over all, more women are obese, diabetic and hypertensive than just a few years ago, and more are testing positive

for chlamydia, a sexually transmitted disease linked to infertility. The latest [health report card](#) for women, issued by the National Women's Law Center and Oregon Health and Science University, paints a dismal picture, giving the United States an overall general grade of Unsatisfactory, with many F's on specific goals set by the US Healthy People 2010.

Nutrition Facts Panels to Appear on Labels of Meat and Poultry Products

The U.S. Department of Agriculture's Food Safety and Inspection Service (FSIS) will be making important nutritional information readily available to consumers on 40 of the most popular cuts of meat and poultry products. Under a new rule, packages of ground or chopped meat and poultry will feature nutrition facts panels on their labels. Additionally, whole, raw cuts of meat and poultry will also have nutrition facts panels either on their package labels or available for consumers at the point-of-purchase.

Exposure to Tobacco Smoke Causes Immediate Damage

Exposure to tobacco smoke – even occasional smoking or secondhand smoke – causes immediate damage to your body that can lead to serious illness or death, according to a report released today by U.S. Surgeon General Regina M. Benjamin. The comprehensive scientific report - Benjamin's first Surgeon General's report and the 30th tobacco-related Surgeon General's report issued since 1964 - describes specific pathways by which tobacco smoke damages the human body and leads to disease and death.