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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*, Wisconsin Technology Network and others.

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STATE NEWS

Governor Walker Calls for Medicaid Overhaul

Governor Walker penned an op-ed for the *New York Times*, titled *Our Obsolete Approach to Medicaid*, in which describes myriad ways in which the Medicaid program lacks flexibility and has failed to evolve to meet current needs of states and of its enrolled members. He calls for changing Medicaid from an entitlement program into a federal block grant to states. [Kaiser Health News reports](#) on the opposition to Medicaid block grants. (As an aside, Walker's op-ed also challenges the federal CMS to contribute its Medicare data to Wisconsin's WHIO.) Separately and also in the *New York Times*, Wisconsin [DHS Secretary Dennis Smith is quoted](#) characterizing as a "federal power grab" new federal rules to deter states from reducing Medicaid payment rates to providers.

Health Reform Insurance Market Analysis Released by Walker Administration

The [Wisconsin Office of Free Market Health Care](#) has posted on its web site the analyses of the current individual, small group, and large group health insurance markets in Wisconsin. The studies were done under a 2010 contract with Gorman Actuarial. According to the web site, the analysis predicts that 75 percent of Wisconsinites in the individual insurance market would see an increase in the health premiums as a result of various provisions in the PPACA, while 38 percent of Wisconsin citizens in the individual market will need to purchase richer benefit packages than they have today.

WI Health Programs Budget Passes Budget Committee

The Legislature's Joint Finance Committee passed the [Department of Health Services 2011-2013 budget](#), cutting 10 percent from 47 health programs. The cuts total \$7.5 million, but \$1.3 billion was added to BadgerCare's budget from general purpose revenue (GPR). BadgerCare will still have a \$500 million shortfall from the \$13.6 billion necessary to fully fund the Medicaid program over the next two years. The budget will next move to the full legislature for consideration. [DHS Secretary Dennis Smith had previously testified before the budget committee](#), discussing the state of Medicaid, BadgerCare Plus, and FamilyCare and how they relate to the current state budget. Advocacy groups such as [ABC for Health](#) and [Wisconsin Council on Children and Families](#), which provide their own [comparative analysis](#) of the 2011-2013 biennial budget bill, disagree with Secretary Smith's plans and proposals.

Debate Continues Over Budget Proposal to Pare Down SeniorCare

As reported [in last month's eNews](#), Governor Walker's proposed [biennial budget](#) redirects seniors from the popular [SeniorCare](#) prescription drug program to Medicare Part D. Advocates for older adults, such as [Coalition of Wisconsin Aging Groups](#), have responded by proposing [a plan](#) to help people enrolled in SeniorCare continue to have coverage for prescription drugs without signing up for Medicare Part D, as required under Gov. Scott Walker's proposed budget. [Members of Wisconsin's Congressional delegation](#), as well as are pressing for Governor Walker to drop the proposed changes to SeniorCare. And [senior Republic leaders](#) of the state legislature are voicing support for SeniorCare.

[HIRSP Premiums Increasing July 1](#)

The [state's high risk pool](#) is raising premiums 15 percent on July 1. Medical and pharmacy expenses are up 39 percent for the first three months of 2011, compared to the same time period in 2010. Much of this increase is driven by the costs of brand name pharmaceuticals. The HIRSP program enrolls 20,003 members in the first quarter of 2011, up from 16,627 in the first quarter of 2010.

[Reduction in Readability of Insurance Policies Debated](#)

The reading levels of insurance policies are controlled by state Insurance Commissioners and Ted Nickel, Wisconsin's current [Insurance Commissioner](#), adopted an "emergency rule" in February to decrease the [readability level](#) of insurance policy documents in Wisconsin, asserting that the cost of complying with a previous rule on readability level was too high. But [Wisconsin Health News](#) reports that at a public hearing on this rule, no one at the public hearing testified in support of lowering the readability level required. The health plan industry did not push for the emergency rule. A spokesman for the Wisconsin Association of Health Plans explains that, although some health plans had concerns about the existing readability requirements, including anticipation that the federal government could soon implement national standards, many health plans were already meeting the more stringent requirement.

[State Launches Health Coverage Purchasing Exchange Survey](#)

The Office of Free Market Health Care launched an online survey to gather input from various stakeholders impacted by the creation of an exchange. Specific parts of the survey are tailored to individuals, small employers, small employees, insurers, agents, brokers, and health care providers. The survey can be found [online](#).

[Legislative Audit Bureau Issues Report on FamilyCare](#)

An [audit](#) of the state Family Care program for frail elderly and disabled adults recently released gives the program generally high marks, but it warns of both growing costs and dissatisfaction by home care service providers over low payment rates. The audit findings come as Gov. Scott Walker has proposed a two-year freeze in enrollment in the state's popular nursing home alternative as a means to help fix a \$3.5 billion budget shortfall.

[Walker's Plan for Privatizing FoodShare Application Challenged](#)

Federal officials say that Governor Walker's proposal to privatize work determining who is eligible for food assistance would violate federal law and could expose the state to a loss of more than \$20 million in federal money. In an April 14 letter to state Health Services Secretary Dennis Smith and Children and Families Secretary Eloise Anderson, the Midwest administrator for the USDA's Food and Nutrition Service warned that the work of interviewing applicants and deciding who is eligible for the [Wisconsin FoodShare](#) program needs to be done by public workers who are essentially civil servants. If not, the state could lose some of the federal funds supporting FoodShare, the successor in Wisconsin to the food stamp program

[FoodShare Fraud Reported; Lawmakers Propose Photo ID Requirements](#)

The [Milwaukee Journal Sentinel](#) conducted an investigation into potential fraud and abuse in Wisconsin's FoodShare Program. They found that thousands of people who receive publicly funded food assistance report losing their benefits card routinely - a sign investigators say shows many are cheating the state's \$1 billion program, perhaps by selling their benefits to others. Some

groups, such as [Hunger Task Force](#), [took issue](#) with the investigation, claiming it gave a skewed view of the FoodShare program.

[This investigation has inspired a budget amendment](#), introduced by Republican lawmakers in the legislature's Joint Finance Committee, to reduce fraud by requiring photos on the benefits cards used for food assistance and health care programs. The proposal would require all participants in the programs to carry their photo on the FoodShare Quest card and BadgerCare Plus Forward card.

[UW Population Health Institute Releases 2011 County Health Rankings](#)

The University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation have released the 2011 County Health Rankings. The [County Health Rankings](#) are a report that ranks the overall health of nearly every county in all 50 states, using standard measures of how healthy people are and how long they live. The Rankings illustrate that where we live, learn work and play influences our health and how long we live.

[US Court of Appeals Backs Federal Funding for Embryonic Stem Cell Research](#)

Researchers in Wisconsin where the first researcher, James Thomson, isolated and grew human cells, were buoyed by the recent court ruling reversing a judge's order from last August that would have blocked taxpayer funding for stem cell research. The panel reversed an opinion issued last August by U.S. District Judge Royce Lamberth, who said the research likely violates the law against federal funding of embryo destruction.

[WI Initiatives in Performance Reporting and Payment Reform Spotlited](#)

The March issue of the American Journal of Managed Care includes article by Wisconsin leaders John Toussaint, Chris Queram and Jo Musser describing Investigation of what Wisconsin did to develop and publicly share provider performance data and then use those data to drive payment reform. The paper examines the [Wisconsin Collaborative for Healthcare Quality](#) and [Wisconsin Health Information Organization](#), along with an integrated health system (ThedaCare), to evaluating how they pool data and use those data to measure provider performance. They also consider how this effort might contribute toward new payment models.

[Wisconsin Receiving \\$1.3 Grant to Improve Health Care Quality](#)

The [Wisconsin Collaborative for Healthcare Quality](#) (WCHQ) has been selected to receive a grant of \$1.3 million over the next two years from the Robert Wood Johnson Foundation's Aligning Forces for Quality initiative, a national effort to improve the quality and value of health care. WCHQ is one of 16 organizations across the United States that has been designated as an Aligning Forces for Quality community. This is the third phase of WCHQ's participation in this program, which began in 2007.

[Study Suggests Wisconsin's Rate of Hospital-Acquired Infections High](#)

The U.S. [Centers for Medicare & Medicaid Services](#) has released national estimates on the average infection rate for Medicare patients at Wisconsin hospitals. The data show that almost 20 patients each week in Wisconsin hospitals get bloodstream infections from the central lines used to deliver fluids, medication and blood. Two to four of them will die. Wisconsin does not require hospitals to disclose the number of patients who get deadly bloodstream infections,

unlike Minnesota, Illinois and 25 other states. More CMS/HHS-released quality information on hospitals can be [accessed here](#).

HHS also released an exhaustive list of medical errors occurring at the nation's 4,700 hospitals. *The Business Journal of Milwaukee* has published the [list of medical errors that have occurred at Wisconsin hospitals](#), followed by a comparison with errors at hospitals nationwide.

WI Hospitals Awarded Grant to Improve Care

The Robert Wood Johnson Foundation has awarded funds to 17 Wisconsin hospitals that are using nurse-led teams to improve the quality and safety of health care. The effort will help staff reduce adverse events and unanticipated deaths, reduce harm from falls and implement evidence-based care. It is part of the state's [Aligning Forces for Quality](#), Transforming Care at the Bedside Initiative.

Three Wisconsin Hospitals on Top 100 list

Three Wisconsin hospitals have been named to the Top 100 list in [Thomson Reuters](#) annual study. Meriter Hospital, Madison, Gundersen Lutheran Health System, La Crosse and Aurora Sheboygan Memorial Medical Center made the list, which evaluates 10 performance areas including mortality, medical complications, patient safety, expenses and profitability. The study has been conducted annually since 1993.

WI Hospital Tax Yields Less than Expected

Wisconsin hospitals are getting less money than they anticipated from the controversial hospital tax that was implemented in 2009 to increase their Medicaid payments. The state implemented the hospital tax to leverage additional federal dollars for Medicaid programs. Money collected by the tax is matched with federal funds to increase Medicaid payments to hospitals and fund other state Medicaid programs.

Building Commission approves UW-Madison School of Nursing Building

The [Legislative Building Commission](#) has approved a new UW-Madison School of Nursing building. UW System President Kevin P. Reilly cited a "strong" relationship between the UW System and the state in working on the proposed budget. The commission approved a \$52.2 million allocation for the building, which will include \$17 million from gifts and donations.

Support Builds for a Wisconsin Law on Concussions

The Wisconsin Medical Society approved a resolution in favor of state legislation that would require young people who have symptoms consistent with a concussion to get written permission from a health-care professional before they can return to play. At the same time, Rep. Jason Fields (D-Milwaukee) says he and his staff are drafting a bill that would require a doctor's permission before an athlete participating in organized sports can return to play. Fields' proposal also will include an education element, in which coaches and others would be required to take an online course on concussions.

Two WI Tribal Nations Receive Nutrition Education Grants

Tribal nutrition education projects in 10 states, including two tribal nations in Wisconsin ([Red Cliff Band of Chippewa Indians Food Distribution Program for the Midwest Nutrition Advisory](#)

[Committee, Bayfield, Wis., \\$115,181](#); Menominee Indian Tribe of Wisconsin, Keshena, Wis., \$39,194) have been selected to receive grants this year through USDA's Food Distribution Program on Indian Reservations (FDPIR). The grants will help develop creative, self-initiated projects designed to enhance the nutrition knowledge and to foster positive lifestyle changes of FDPIR participants in low-income households living on Indian reservations and to American Indian households residing in approved areas near reservations or in Oklahoma.

Increase in Black Infant Deaths Perplexes Health Officials

[Dane County's black infant mortality rate](#), which had recently dropped and became a national success story, has shot up again to four times the rate for whites over the past three years. The rate of black babies who die before their first birthday drastically increased in 2008, after low rates from 2002-2007. The rate remained fairly high in 2009, and the recently released rate for 2010 is even higher — 19.2 deaths per 1,000 births compared with 3.5 for whites — a three-year trend reconfirming the black-white gap.

Breast Cancer Disparities Observed between African Americans & Whites in Wisconsin

Breast cancer mortality is higher in African American women compared to white women despite having a lower incidence. The reasons for this remain unclear, despite decades of research. Reducing breast cancer health disparities is a priority but has had limited success. A study was recently conducted to assess progress in eliminating breast cancer-related health disparities in Wisconsin by comparing trends in breast cancer outcomes in African American and white women from 1995 to 2006 and comparing results nationally.

WI Court Rules Against Involuntary Commitment of Alzheimers Patients

The state Court of Appeals ruled that patients who have a diagnosis of only Alzheimer's disease cannot be involuntarily committed for treatment. The decision could transform the way nursing homes and law enforcement deal with vulnerable older adults who have dementia. Around 110,000 people have Alzheimer's disease [in Wisconsin](#). [The ruling](#) came in a case involving an 85-year-old Fond du Lac woman with Alzheimer's.

WI Well-Water Not Receiving Needed Annual Testing

Wisconsin's 2008-9 Behavioral Risk Factor Survey found that one-third of Wisconsin families depend on private wells for their drinking water but less than a quarter of those wells had been tested within the past year. Far fewer families tested their water for other kinds of contamination such as solvents, gasoline, fuel oil, toxic metals, or pesticides. State health and drinking water officials remind private well owners to [test their well water](#) at least once a year for bacteria, periodically for nitrate, and consider testing for other contaminants that may be in groundwater.

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- [Health of Wisconsin: Report Card 2010](#)

EVENTS AND ANNOUNCEMENTS

EHR Incentive Program Information Sessions

Webinars, April 26th-May 11th

2011 WPHA-WALHDAB Annual Conference: Healthiest State in One Generation

May 24-26th, Appleton, WI

3rd Annual Wisconsin Rural Health Summit

May 24th, Wisconsin Dells, WI

Private Sector Employer Innovations in Health Care Financing and Delivery:

Do they translate to a broader population? Can they improve community wellness? Reduce state health expenditures?

A legislative briefing by the [Evidence-Based Health Policy Project](#)

May 25, 8:30 – 11:00 am, State Capitol, 411 South

Change and Cultural Transformation: How to Make it Happen

May 25th, Wisconsin Dells, WI

Digital Healthcare Conference

June 6-7th, Madison, WI

Linking Research and Community Action: Tools to Create Healthy People in Healthy Places

June 8, Health Science Learning Center, 750 Highland, Madison, WI

WHA 2011 Rural Health Conference

June 15-17th, Elkhart Lake, WI

Mapping Your Community for Public Health Improvement

July 11-13th, La Crosse, WI

Wisconsin Research and Education Network (WREN)

September 14 – 16, Fluno Center, Madison, WI.

READING ROOM

State-Specific Medical Loss Ratios Analyzed

Changes in Health Care Financing & Organization released new findings in the brief, "[Regulating the Medical Loss Ratio: Implications for the Individual Market](#)" examining how the minimum medical loss ratio (MLR) provisions of the Affordable Care Act will impact the individual market for health insurance. The brief provides state-level estimates of the size and structure of the individual health insurance market and the impact of the MLR regulation.

Examining The New Accountable Care Organization Regulations

CMS released its proposed regulations governing the [Medicare Shared Savings](#) -- or [Accountable Care Organization](#) -- program. *Health Affairs* Blog presents a series of posts analyzing the long-awaited proposed new regulations implementing this important initiative.

National Quality Strategy to Promote Better Health, Quality Care for Americans

The U.S. Department of Health and Human Services (HHS) has released the National Strategy for Quality Improvement in Health Care ([National Quality Strategy](#)). The strategy was called for under the Affordable Care Act and is the first effort to create national aims and priorities to guide local, state and national efforts to improve the quality of health care in the United States.

2010 National Healthcare Quality & Disparities Reports

The Agency for Healthcare Research and Quality (AHRQ) has produced its *National Healthcare Quality Report* (NHQR) and the *National Healthcare Disparities Report* (NHDR) for the eighth year in a row. These reports measure trends in effectiveness of care, patient safety, timeliness of care, patient centeredness, and efficiency of care. Chapters on care coordination, health system infrastructure are new additions to this year's report. The reports present, in chart form, the latest available findings on quality of and access to health care.

Geographic Variation in Health Care Re-Examined

While research on geographic variation in health care use and spending has pushed the twin issues of uneven care and costs to the fore, it's ultimately the broader health care system -- not geography -- that matters most in improving efficiency and quality, according to a new Policy Analysis from the nonprofit, nonpartisan National Institute for Health Care Reform.

USDA Expands Access to Fresh Fruits and Vegetables for Schools Across the Nation

U.S. Agriculture Secretary Vilsack has announced that the USDA will expand assistance to state agencies for schools operating USDA's [Fresh Fruit and Vegetable Program](#) (FFVP) in the 2011/2012 school year. The assistance will provide free fresh fruit and vegetables to children throughout the school day.

Prescriptions, Privacy, and the First Amendment

On April 26, the Supreme Court heard oral arguments in a case that, when it is decided this spring, will have important repercussions for the practice of medicine. At issue in *William H. Sorrell, Attorney General of Vermont, et al., Petitioners v. IMS Health Inc., et al.* is whether detailed information about prescriptions written by doctors, with the doctor identified, can be

bought and sold. Currently, this practice is legal in almost every state, and the outcome of *Sorrell v. IMS Health* will signal whether states may restrict it.

Potential Savings From Greater Use of \$4 Generic Drugs

Pharmacies in many retail stores, such as Wal-Mart and Target, provide discounted generic medication programs (\$4 per 30-day supply or \$10 per 90-day supply). While most prescription drug coverage requires patients to pay \$10 to \$11 per 30-day supply for generic drugs and \$25 to \$27 for preferred brand-name drugs, with these retail store pharmacy programs, anyone regardless of insurance, pays only \$4 for qualifying generic drugs. Use of \$4 programs could potentially save patients and society billions of dollars.

Re-Forming Delivery Systems: A Forum for States and Health Centers

National Academy for State Health Policy (NASHP) reports on presentations from a meeting on *Re-Forming What We Have Into the Delivery System We Want: A Forum for State and Community Health Center Strategy Development*. The paper discusses a vision for a transformed delivery system; highlights key federal resources to help achieve this vision; explores the core elements of delivery system reform; and offers specific examples of health centers and states that are partnering to design and implement innovative models of health care.

Finding What Works in Health Care: Standards for Systematic Reviews

Systematic reviews identify, select, assess, and synthesize the findings of similar but separate studies. They can help clarify what is known and not known about the potential benefits and harms of drugs, devices, and other healthcare services. But the quality of systematic reviews varies; often the scientific rigor of the collected literature is not scrutinized or there are errors in data extraction and meta-analysis.

Environmental Illness In Children Costs \$76.6 Billion

Poor childhood health caused by environmental factors, such as air pollution and exposure to toxic chemicals, costs the United States \$76.6 billion in 2008, according to authors of a new study in the May issue of *Health Affairs*. This price tag represents a dramatic increase in recent years. The new study focused on the cost of lead poisoning, childhood cancer and chronic conditions, including asthma, intellectual disability, autism and attention deficit disorder-- conditions that are linked to environmental toxins and pollutants in the air, food, water, and soil.

Reducing Hospital Readmissions

Significant variability in 30-day readmission rates across U.S. hospitals suggests that some are more successful than others at providing safe, high-quality inpatient care and promoting smooth transitions to follow-up care. This report offers a synthesis of findings from four case studies of hospitals with exceptionally low readmission rates.

What Shapes Health? New Issue Briefs Discuss Social Factors

The Robert Wood Johnson Foundation has released new issue briefs that highlight the latest research on the social factors that influence health:

- [What Shapes Health-Related Behaviors: The Role of Social Factors](#)
- [How Social Factors Shape Health: The Role of Stress.](#)
- [Early Childhood Experiences and Health](#)