



UNIVERSITY OF WISCONSIN

Population Health Institute

Translating Research into Policy and Practice

eNEWS – Dec 2011-Jan 2012

Vol. 11, No. 10

University of Wisconsin School of Medicine and Public Health

The UW Population Health Institute's E-News is delivered monthly. Check our web site for additional information and updates: <http://www.pophealth.wisc.edu/uwphi/news.htm>. To subscribe or unsubscribe, reply to [Colleen Comeau](mailto:Colleen.Comeau@wisc.edu) with the word "subscribe" or "unsubscribe" in the subject line.

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 Society, Wispolitics.com, *Wisconsin Health News*, 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

[Medicaid/BadgerCare Changes Pending](#)

The legislature's Joint Finance Committee approved last month the list of [proposed changes](#) in the Medicaid and BadgerCare programs that Wisconsin's Dept. of Health Services (DHS) recently released in order to attain \$554.4 million in savings over the 2011-13 biennium. Many of the the proposals require approval or waiver from federal CMS. The nonpartisan [Legislature Fiscal Bureau estimates](#) that, if all provisions of the waiver are approved, about 65,000 people, including 29,000 children, will lose BadgerCare coverage.

Wisconsin's biennial budget act specifies that, if needed federal waivers are not provided by December 31, 2011, DHS will automatically pare back eligibility for adults, [resulting in removal of approximately 53,000 adults from BadgerCare coverage](#). The [Milwaukee Journal Sentinel reports](#) that Governor Walker is now re-considering this timeline.

WI DHS received a [letter from CMS](#) saying, "it is unlikely we will be able to meet the State's requested date of December 31, 2011, for all of these proposed sweeping changes." The letter from the federal agency also said that the state doesn't need special federal approval to make four of its proposed changes to BadgerCare Plus that would apply to adults over 133% FPL, but not for children. Secretary of DHS, Dennis Smith, [responds to the letter from CMS](#), saying "it is time to redouble efforts and work through the remaining issues in order to reach agreement."

- [Resources from Wisconsin Council on Children and Families \(WCCF\)](#)
- [Resources from Save BadgerCare Coalition](#)
- [Wisconsin Coalition of Aging Groups \(CWAG\) Response](#)

Extension of SeniorCare Waiver Sought

Governor Walker has authorized the Department of Health Services to request an extension of Wisconsin's [SeniorCare](#) waiver. The program, which began in 2002, provides discounted prescription drugs for Wisconsinites aged 65 or older and who meet the specified eligibility criteria. SeniorCare has been and continues to be a popular program because it eliminates the gaps in coverage and is more comprehensive and less expensive than Medicare Part D. The SeniorCare waiver is slated to expire on December 31, 2012.

WI Medicaid Audit Released

An audit released by the nonpartisan Legislative Audit Bureau shows that Wisconsin has substantially increased the use of private vendors to administer Medicaid programs, but has not always adequately assessed costs before contracting. The audit also notes that DHS's budgeting and financial management practices have not kept pace with the growth and increasing complexity of programs. The report recommends a series of improvements to better manage, oversee, and track the \$7.5 billion in annual spending on Medicaid programs, including BadgerCare, Senior Care and Family Care. [Report highlights can be found here.](#)

- [Legislative Audit Committee Co-Chairs press release](#)
- [Senator Vinehout statement](#)
- [Representative Jon Richards statement](#)

WI Reversing ACA-Related Steps for Health Plan Review, Grievance ; Exchanges

Wisconsin's Office of the Commissioner of Insurance is withdrawing the recently promulgated [Emergency Rule](#) related to grievance and independent review requirements, intended to bring the State of Wisconsin into full compliance with federal ACA requirements. OCI had promulgated this rule after the legislative committee chairman refused to take up the matter in the Assembly. The rule, however, angered those who oppose ACA implementation. With this withdrawal, the State of Wisconsin will no longer be ACA compliant. Insurers are instructed to make individual decisions about their compliance with federal standards.

Also, the [Milwaukee Journal-Sentinel reports](#) that Walker is putting on hold prior plans to implement federal ACA requirements for health insurance purchasing exchanges, given that the U.S. Supreme Court is scheduled to hear begin hearing oral arguments in March about upholding the ACA. Wisconsin had been moving forward to develop its own health insurance exchange, rather than have the federal government impose its own plan when the exchanges start in 2014.

OCI Reviewing Rate Increases from Four Companies

Wisconsin's Office of the Commissioner of Insurance is reviewing rate increases from companies above the 10 percent threshold set by the federal ACA. Wisconsin is one of the states that received federal funding and has established a qualifying rate review program. If the rates are determined unreasonable, the insurance companies have 10 days to lower the rate or post a justification on their web site. The companies whose rates are being reviewed are: Time

Insurance Company, John Alden Life Insurance Company, Gundersen Lutheran Health Plan, and Trilogy.

[Report: Health Insurance Rates Vary Widely Across State](#)

[Citizen Action of Wisconsin](#) has released its 6th annual Health Insurance Cost Ranking Report on cost, quality, and the rate of health insurance inflation. It reports large disparities in health insurance costs between the different regions of the state, with some paying over \$2,000 more per year for single health coverage. This year's report finds the largest regional disparities yet reported, with Madison standing as the state's lowest cost metropolitan area. Madison is also the only part of the state that did not have health insurance inflation exceeding the national average.

[Wisconsin's Health Care Spending Exceeds National Average](#)

The U.S. Centers for Medicare and Medicaid Services reports that the average Wisconsin resident spends \$7,233 a year on health care, or 6 percent more than the national average of \$6,815. Spending growth was in line with the national rate of 4.7 percent from 2004 to 2009. Wisconsin spent \$7,584 per Medicaid enrollee, 11 percent more than the national average of \$6,826. It spent 14 percent less, however, on Medicare at \$8,908 per enrollee, compared to \$10,365 nationally. Spending is a function of both utilization (number services) and of fees paid.

[New State Emergency Plan Approved](#)

Wisconsin's new State Emergency Plan, now approved by the Governor, was developed by a combination of state agencies, private sector and volunteer organizations and planning guidance and resources have been given to county, local and tribal emergency management programs. The new plan follows the [National Response Framework](#) and includes plans for specific events such as severe weather, radiological incidents and cyber activity.

[Wisconsin's Rank in Covering Children Falls](#)

A recent [report released today by Georgetown University](#) shows that Wisconsin is one of just three states that did not have a decrease in the number of uninsured children during the time frame 2008-2010. The report found the 34 states have had decreases in the number of uninsured children. Over most of the last decade, Wisconsin has traditionally had one of the lowest rates of uninsured children in the country, but since 2008, has begun to lose its high ranking to other states. Wisconsin now has the 13th lowest percentage of children without health insurance.

[Wisconsin Improves in National Health Rankings](#)

Wisconsin's place in America's Health Rankings improved this year to 13th in the nation. Wisconsin continues to have high rankings for percent of population with health insurance, low incidence of infectious disease and relatively low percentage of the population of children living in poverty, however, Wisconsin also has the highest rate of binge drinking in the country and the lowest spending per capita on public health.

[Confusion over State Funds for Well Woman Program](#)

According to the [Dept. of Health Services](#), the cancer screening services provided through the Well Woman Program will continue to be offered in Winnebago, Fond du Lac, Outagamie and Sheboygan counties. DHS was responding to questions that have recently come up regarding a \$130,000 state funded contract that provided outreach and education efforts to 715 women in 2010 in the four counties. The state is ending its contract with Planned Parenthood of WI.

[Hospital Rates Rose More Slowly than National Average; Cost-Shifting Still a Concern](#)

A newly released [study](#), conducted by Mercer and Milliman, and released by the Greater Milwaukee Business Foundation on Health, reports that the growth in the cost for health insurance for employers in southeastern Wisconsin has slowed considerably. In 2000, Milwaukee's rates exceeded those in other Midwest cities by 55%, while in 2011 it has dropped to an excess of 8% over other Midwest cities.

[A companion study](#) reports that cost controls are largely attributable to hospitals' efforts, keeping price increases well below the national average. The report shows how important the hospital tax has been in stabilizing Medicaid and preventing cost-shifting.

The study also found that an estimated \$851 million is added to the cost of commercial health insurance to make up for the lower fees that Medicare and Medicaid pay hospitals in southeastern Wisconsin – a long-standing but disputed concern, particularly of the hospital industry. Read the [Milwaukee Journal Sentinel](#) report.

[Bellin & ThedaCare Join Accountable Care Organizations Pilot Program](#)

Bellin Health-ThedaCare Healthcare Partners, is one of thirty-two leading health care organizations from across the country that will participate in [a new Pioneer Accountable Care Organizations \(ACOs\)](#) initiative. The pilot program, authorized by the Patient Protection and Affordable Care Act (PPACA), is designed to reduce health care costs and improve care outcomes through case management, technology and innovation.

[WI Tobacco Prevention Spending Decreases: Ranked 29th for Prevention](#)

Wisconsin ranks 29th among states in a recent report on tobacco prevention program spending.

[A Broken Promise to Our Children: The 1998 State Tobacco Settlement 13 Years Later](#) bases its rankings on the Centers for Disease Control (CDC) recommendations that the State of Wisconsin spend \$64.3 million annually on tobacco prevention and cessation programs. The state currently allocates \$5.3 million dollars or 8.3% of the CDC's recommendation towards tobacco prevention and cessation programs. Since 2009, Wisconsin has cut funding for tobacco prevention by 65% and the state's 2011-'13 state budget cut 22.4% from tobacco cessation programs.

Meanwhile, a partnership between the University of Wisconsin School Of Medicine and Public Health's [Center for Tobacco Research and Intervention \(UW-CTRI\)](#) and the [Wisconsin Women's Health Foundation \(WWHF\)](#) will receive a grant of \$9.2 million over five years from the [Centers for Medicaid and Medicare](#) to reduce smoking rates among Wisconsin Medicaid enrollees, with a special emphasis on pregnant smokers through the "Striving to Quit" campaign.

[MADD Gives Wisconsin 3 Stars for Drunk Driving Policies](#)

Mothers Against Drunk Driving (MADD) recently released their [Campaign to Eliminate Drunk Driving Fifth Anniversary Report to the Nation](#), reporting that drunk driving costs the nation \$132 billion dollars annually. Wisconsin receives 3 out of 5 stars for current state drunk driving efforts. Wisconsin is the only state in the nation in which a first offense of drunk driving is not a criminal charge. MADD recommends that Wisconsin implement legislation that allows for sobriety checkpoints and requires ignition interlocks for all convicted drunk drivers.

[WI Offender Diversion to Substance Abuse Tx Cost-Effective, Reduces Recidivism](#)

The WI Office of Justice Assistance, WI Department of Corrections, and WI Department of Health Services submitted a required report to the legislature summarizing the results of a Population Health Institute evaluation of the Treatment Alternatives and Diversion (TAD) Program. The results of the five-year evaluation reveal that TAD effectively diverts non-violent offenders with substance abuse treatment needs from jail/prison incarceration and reduces recidivism. Cost-benefit analyses show that every \$1.00 invested in diversion yields benefits of \$1.93 to the criminal justice system through averted incarceration and reduced crime. Access the report “Treatment Alternatives and Diversion (TAD) Program: Advancing Effective Diversion in Wisconsin.”

[Fewer Wisconsin Children Receiving Vaccinations](#)

The Milwaukee Journal Sentinel reports on an Associated Press (AP) finding that Wisconsin was one of 10 states in which vaccine exemption rates increased 1.5% point in the past five years. Re-emergences of outbreaks such as measles have taken place in communities with higher exemption rates Milwaukee Public Schools are experiencing [an emergence of contagious pertussis](#), also known as whooping cough, with 12 confirmed cases in November alone, double what they usually would expect to see.

[National Drug Shortages Hit Wisconsin](#)

It has become increasingly hard over the past five years to get adequate supplies of certain drugs in the U.S. Officials cite a number of reasons for these shortages including a reduction in the manufacturing of less-profitable drugs despite the demand for them. These drug shortages are now being felt throughout Wisconsin with recent articles reporting on shortages in both [southern](#) and [central](#) Wisconsin. Hospitals, pharmacies and clinics say that patients have not been affected and that they are working together to help ensure that needed drugs are available, through sharing of supplies and looking for alternatives. An [executive order](#) from the White House recently ordered the FDA to step in and help prevent and reduce drug shortages, protect consumers and prevent price gouging.

[WHA Report: Wisconsin Physician Shortage Projections Updated](#)

The [Wisconsin Hospital Association \(WHA\)](#) amplifies concerns about an upcoming physician shortage in the state as a result of health reform and an aging Wisconsin population (also see the [Wisconsin Physician Workforce Profile & Data Book](#)). The report calls for aggressive action to avert a projected shortfall of nearly 2,200 physicians by the year 2030. Primary care physicians account for 80% of the shortfall. [Some argue](#) that the state should increase funds to train primary care doctors.

[Third Medical School Contemplated](#)

Aspirus is contributing to the potential development Wisconsin College of Osteopathic Medicine. A feasibility study has been completed, The College would be located in Wausau and would graduate 100-150 annually, compared to the approximately 340 current graduates of UW and MCW combined. The college needs to raise \$70-75 million.

[Report: Wisconsin Faces Shortage of 22,000 Nurses by 2035](#)

Wisconsin Department of Workforce Development reports that, by 2035, Wisconsin will face a 35% gap between the state's supply and demand for nurses. This translates to a shortfall of more than 22,000 nurses, according to a new report from the. Wisconsin is also facing a nurse faculty shortage.

[Report: WI Nursing Home Medicaid Payment 2nd Worst Nationally](#)

A new report released by the American Health Care Association reports that Medicaid rates for Wisconsin nursing homes are second worst in the country with Wisconsin nursing homes being “underfunded” \$268 million in 2011 for care for Medicaid patients. [Wisconsin's BizTimes reports](#) that this and financial stressors imposed by Medicare reductions are bringing Wisconsin's nursing homes to reevaluate their business models, and the problems could force some of them to go out of business.

[Delta Dental Donates \\$2 million to Marquette Dental School](#)

A 40,000 square foot proposed expansion of Marquette University School of Dentistry will be in part funded by a \$2 million donation made by [Delta Dental of Wisconsin](#). The gift is part of a larger campaign to raise \$8 million matching campaign (the state committed \$8 in its 2011-2013 biennial budget) to expand the school. The proposed expansion will allow class sizes to increase to 100 students, and the school's enrollment to increase to 400.

[State Awards \\$850,000 to Increase Access to Dental Services](#)

A new state budget initiative will provide nine safety net dental clinics with additional funding to increase access to oral health care. Finding and being able to afford quality oral health care is a struggle for many people in Wisconsin, particularly for individuals with disabilities and those on Medicaid or BadgerCare Plus: only 36% of those enrolled in a Medical Assistance program and eligible to receive oral health services actually did in 2010.

[WI Dental Association Wins National & Regional Awards](#)

The [Wisconsin Dental Association](#) has won its 5th [Golden Apple Award](#), a national award recognizing outstanding achievement in dental society activities and excellence in leadership. Only 11 states and local dental societies nationwide received such an award. The Wisconsin Dental Association's program, "Promoting Early Childhood Dental Health," combines continuing education for dental professionals with a public awareness campaign

[Ministry Health Care Hospitals Achieve Meaningful Use Certification](#)

According to Ministry Health Care, Ministry Saint Clare's Hospital in Weston and Ministry Saint Joseph's Hospital in Marshfield have received [Meaningful Use certification](#). Ministry is just one of 17 hospital systems in the county to have received full certification for their electronic medical record systems. Ministry Health Care pursued self-certification for verification that its systems met all of the Meaningful Use requirements.

[Healthier Wisconsin Awards \\$4.8 million to Improve Public Health](#)

Thirteen community-academic partnerships will receive funding totaling \$4.8 million dollars this year from MCW's Healthier Wisconsin program, funded by an endowment from the conversion of the former Blue Cross & Blue Shield United of Wisconsin to a for-profit company. In this

[seventh round of funding](#), four projects will receive 5-year grants totaling about \$750,000, while another nine projects will receive 2-year development grants up to \$200,000.

[UW-Madison School of Nursing Edgewood College: National Nursing Home Award](#)

The University of Wisconsin-Madison School of nursing and Edgewood College have been jointly awarded the [American Association of Colleges of Nursing](#) (AACN) inaugural BSN Award for Innovative Clinical Rotation in a Nursing Home for their collaborative Wisconsin Long-Term Care Clinical Scholars Program. The award is given to those nursing programs that demonstrate creative student learning experiences in nursing homes.

[MEDiC Student-Run Clinics Receive National Recognition](#)

The [MEDiC](#) program, which provides seven free health clinics in Madison and is supported by the University of Wisconsin School of Medicine and Public Health's office of [community service programs](#), has received the [President's Volunteer Service Award](#) for its work in the community. The clinics has been providing general medical care, physical therapy, dental and mental health care to people who lack adequate insurance and has been since the first clinic was established in 1991.

[Aspirus Wausau Hospital: One of Top Cardiovascular Hospitals in U.S.](#)

[Thomas Reuters](#) has named Aspirus Wausau as one of the top inpatient cardiovascular hospitals in the U.S. The 50 hospitals to receive the award did so for receiving marks above and beyond the benchmark standards of 96 percent of cardiovascular inpatients surviving and approximately 93 percent remaining complication-free. This is the 8th time Aspirus Wausau Hospital has received this award.

[RWJF Grantee Helps Rebuild Milwaukee's Public Health Nursing Workforce](#)

A team of public health nurses and colleagues at the [Faye McBeath Foundation](#), a private grantmaking foundation joined forces to create a program to reform nurse education programs to expose local students to public health nursing and provide assistance to students in finding jobs in the field. The [Partners Investing in Nursing's Future](#) (PIN), a RWJF partnership with the Northwest Health Foundation funded the program along with two Milwaukee funders: the Northwestern Mutual Foundation and the Greater Milwaukee Foundation

[Rural Health Initiative Expands into Outagamie & Waupaca Counties](#)

[The Rural Health Initiative, Inc.](#), a non-profit program designed to address growing concerns regarding the health and safety issues facing today's farm families, received a \$12,000 grant from the Wisconsin Office of Rural Health's community Rural Hospital Flexibility Grant to expand into Outagamie and Waupaca Counties early next year. The program will allow nurses to visit family farmers in their home to perform basic health risk assessment test and provide information on how to improve health.

[Milwaukee's Infant Mortality Prevention Ad Campaign Receives National Attention](#)

Milwaukee's new [infant mortality prevention campaign](#), designed to reduce African American infant mortality by 15% by 2017, has been receiving national attention for its ad campaign. One ad shows a baby sleeping in an adult bed with a butcher knife. The tagline reads: "Your baby sleeping with you can be just as dangerous."

[Bellin Health Launches New Behavioral Screening & Intervention Services](#)

The [Wisconsin Initiative to Promote Healthy Lifestyles \(WIPHL\)](#) is helping [Bellin Health](#) launch new behavioral screening and intervention services (BSI). BSI has been proven to substantially improve patient health as it relates to tobacco, alcohol and other substance use, and depression and it can also help address unhealthy diet, physical inactivity and obesity. Over the past five years, these programs have been implemented in a number of health care settings across the state.

[WI Research: Poor Mental Health Increases Risk for Pregnancy Complication](#)

A new nationwide survey reveals that poor mental health before pregnancy predicts which pregnant women are most likely to have a pregnancy complication and give birth to a low birth weight baby. More than 30 percent of pregnancies have complications, and almost 8 percent of infants are born with a low birth weight, both of which represent important public health issues that can cause future health problems for both mother and child.

LEGISLATIVE UPDATE

- Enacted Into Law
 - **[SB 45: Decreases Training for School Nurses, Staff Giving Meds](#)**

The bill, which has been signed into law by the Governor, lowers the educational requirement for school nurses but still requires them to undergo public health training. The Wisconsin Association of School Nurses opposes the bills preferring a rule passed last year that required school nurses to have a four-year bachelor's degree.
 - **[SB 212: Nursing Home Regulation Reforms](#)**

The bill, which has been signed into law by the Governor, gives nursing homes fewer citations for violations and would have them more time to pay them. It is estimated that nursing homes will pay \$1.5million less per year in forfeitures, state officials assert. Those who support the bill say it prevents duplicate punishment while opponents assert that the stiff penalties are needed to regulate the worst facilities.
- Proposed But Not Voted
 - **[AB 409 Would Require 60 Days Prior Notification to Changes in Eligibility or Benefits to MA Recipients](#)**

This bill would require DHS to notify MA recipients, at least 60 days in advance, before implementing any change under MA affecting eligibility or benefits. The notice must be written in clear language that is understandable to laypersons and must describe how the change will affect a recipient.
 - **[AB 408: Would Eliminate the Ability to Impose Assessment on Ambulatory Surgical Centers.](#)**

Under current law, the Department of Revenue (DOR) may impose an assessment on ambulatory surgical centers. The DHS allocates any assessment among the ambulatory surgical centers in proportion to their gross patient

revenue. The DOR, if it imposes an assessment, must transfer 99.5 percent of the moneys collected to the MA trust fund, which pays some of the costs for the MA program. This bill would eliminate, on July 1, 2013, the ability for DOR to impose this assessment on ambulatory surgical centers.

- **[SB 317: Schedule II Substance Could be Dispensed Electronic Prescription](#)**
Under current law, controlled substances are divided into five separate schedules. Schedule II substances are those that have a high potential for abuse and may lead to severe physical or psychological dependence, but also have a currently accepted medical use. This bill would change the current law so that a drug that is a schedule II substance would be allowed to be dispensed by a pharmacy with an electronic prescription by the practitioner in cases that are not emergencies and without the requirement that the prescription be reduced to writing.
- **[SB 273: Proposed Plan for Implementing Medicaid Reform](#)**
This proposes a plan for [implementing Medicaid reform in Wisconsin](#). The bill would create the Badger Health Benefit Authority (authority), a public body corporate and politic that is created by state law but that is not a state agency, to implement upcoming health care reform initiatives.
- **[SB 101 & AB 151: Would Require Insurers Cover Oral Chemo Drugs](#)**
This bill prohibits health insurance policies, and self-insured governmental and school district health plans, that cover injected or intravenous and oral chemotherapy from requiring the insured to pay a higher copayment, deductible, or coinsurance for oral chemotherapy than is required for injected or intravenous chemotherapy, regardless of the formulation or benefit category determination by the policy or plan.
- **[SB 306 & AB 371: Would Require Doctors to Confirm Abortion Request is Voluntary](#)**
This bill would not allow women to receive drugs that induce abortions unless a doctor gives them a physical exam and is in the same room when they receive the drugs.

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- New and Updated Resources from [Maternal & Child Health Library](#)
- New and Updated Resources from [Health Behavior News](#)
- New and Updated Resources from [AHRQ](#)
 - [Tools Help You Choose a Good Nursing Home](#)
- New and Updated Resources from [AAMC](#)

- Wisconsin Toolbox:
 - [Winter Weather Health & Safety Tips](#)
DHS provides information and tips on being prepared ahead of a winter storm that will help you get through the winter safely.
 - [WCHQ Updates its Performance Measures](#)
The Wisconsin Collaborative for Healthcare Quality (WCHQ) has updated its performance results for Wisconsin healthcare organizations.
 - [Wisconsin Check Point](#)
This web site provides reliable information about the quality and safety of care provided by Wisconsin hospitals.
 - [Wisconsin Physician Workforce Profile](#)
This table provides details on Wisconsin's current physician workforce.
 - [Ready WI](#)
Ready Wisconsin our state's counterpart to the national public service advertising campaign designed to educate and empower Americans to prepare for and respond to emergencies. Ready Wisconsin is a joint initiative of Wisconsin Emergency Management and the Wisconsin Citizen Corps, funded by US Homeland Security.
 - [Kids Count Data Center: Wisconsin](#)
Provides access to hundreds of measures of child wellbeing at the state level, by state, or comparing states.
 - [Wisconsin WINS](#)
Wisconsin WINS is a science-based, state-level initiative designed to decrease youth access to tobacco products.
 - [Wisconsin Emergency Management: WE Partner](#)
This new website allows emergency managers, first responders and others from across the state to register online for local, state and federal classes and keep track of their completed courses and print certificates.
 - [2011 Annual Report: Growing Communities Growing Minds](#)
The Wisconsin Medical Society Foundation provides this report annually to advance the health of the people of Wisconsin by supporting medical and health education and to guide the intersection of health, environment and lifestyle in Wisconsin. Through physician leadership and community engagement, we foster medical education support and community health innovation.

EVENTS AND ANNOUNCEMENTS

[Excellence Through Collaboration: 2012 MEGA Conference](#), January 18th-20th, Wisconsin Dells, WI

[The Body Speaks: Are You Listening? The Power of Integrative Approaches to Wellness and Healing](#), January 20th-21st, La Crosse, WI

[All-Hazards Communications Unit Leader \(COML\)](#), January 23rd-26th, Appleton, WI

[WI EMS Service Director's Training Course](#), January 25th, Milwaukee, WI

[Unlock the Details of ICD-10 Documentation: The Key to Long-Term Profitability](#),

- March 13th, Waukesha, WI
- March 14th, Green Bay, WI
- March 15th, Wausau, WI
- March 20th, Eau Claire, WI
- March 22nd, Wisconsin Dells, WI

READING ROOM

Essential Health Benefits Defined

U.S. HHS has released details on how it intends to define “essential health benefits” beginning in 2014 under the Affordable Care Act. States will have flexibility to select an existing plan in their state as the "benchmark" coverage option, rather than the federal government defining one standard package for all states, and these benchmark packages will be supplemented as necessary to ensure that plans cover each of the 10 statutory categories of essential health benefits. Details are available in this [fact sheet](#) with discussion at this [Commonwealth Fund blog post](#).

New National Health Report Card Gives Low Grades

The new state-by-state report card of health statistics may be a call to arms. After improving an average of 1.6 percent a year since the 1990s, the annual index remained flat this year for the first time in its 22 years of existence, likely due to the increase of obesity from 26.9 percent in 2010 to 27.5.

The Role of Prevention in Bending the Cost Curve

To help finance expansions of insurance coverage under the Patient Protection and Affordable Care Act (ACA), the ACA includes several provisions aimed at slowing the rate of growth of personal health expenditures. This overview, provided by the Urban Institute Health Policy Center, outlines several promising approaches targeted in the first round of funding for the Prevention and Public Health Fund (PPHF). The overview also explores what reducing or eliminating the PPHF would mean for Medicare and Medicaid over the next 20 years based on estimations of the cost of illness by age.

Registered Nurse Supply Grows Faster Than Projected

A new study from Health Affairs finds that the number of full-time-equivalent registered nurses ages 23–26 increased by 62 percent between 2002 and 2009. This cohort will be the largest cohort of registered nurses ever observed if they follow the same life-cycle employment patterns as those who preceded them—as they appear to be thus far. The nurse workforce is projected to grow faster during the next two decades than previously anticipated because of this surge in the number of young people entering nursing. It is uncertain whether interest in nursing will continue to grow in the future.

Demonstration of Potential to use Outcome Data to Improve Health Care's Value

A worldwide consensus is emerging on the need to refocus reform efforts on value, as determined by the evaluation of patient outcomes relative to costs, as health care systems struggle with rising costs. Disease registries are one method of using outcome data to improve health care value and an international study of thirteen registries in five countries (Australia, Denmark, Sweden, the United Kingdom, and the United States) suggests that by making outcome data transparent to both practitioners and the public, well-managed registries enable medical professionals to engage in continuous learning and to identify and share best clinical practices. Improved health outcomes appear to be the results of such practice, often at lower cost.

As Demand Increase, Funding for Community Health Centers Lowest in 7 Years

According to the National Association of Community Health Centers, a new report demonstrates that community health centers are struggling with a steep decline in state funding for the fourth straight year. The NACHC assessment shows that 35 states will provide funding to health centers in FY 2012 totaling \$335 million. This is almost \$60 million less than last year (a 15 percent decline).

New Study Finds E-prescribing Is Safe and Efficient, but Barriers Remain

A new study finds that physician practices and pharmacies generally view electronic prescribing as an important tool to improve patient safety and save time, but both groups face barriers to realizing the technology's full benefit. The study finds that e-prescribing, has multiple potential benefits, including helping to reduce the risk of medication errors caused by illegible or incomplete handwritten prescriptions and the ability to electronically exchange prescription data between physician practices and pharmacies, which can save time and money by streamlining the way in which new prescriptions and renewals are processed.