



UNIVERSITY OF WISCONSIN

Population Health Institute

Translating Research for Policy and Practice

eNEWS – March 2012

Vol. 12, No. 2

University of Wisconsin School of Medicine and Public Health

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Information for eNews is compiled from several sources, including websites and lists from the Agency for Healthcare Research and Quality, Blue Cross/Blue Shield, Commonwealth Fund, Health Affairs, Kaiser Family Foundation, Milwaukee Journal-Sentinel, Milwaukee Business Journal, Milbank Quarterly, The New York Times, Urban Institute, Wheeler Report, Wisconsin Council on Children and Families Wisconsin Health News, Wisconsin Medical Journal, Wispolitics.com, Wisconsin State Journal, Wisconsin Technology Network and others.

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STATE NEWS

[CMS Rejects WI Waiver for Medical Loss Ratio Rule](#)

The Centers for Medicare & Medicaid Services (CMS) [recently denied](#) Wisconsin's request for a waiver to the delay of a new rule, part of the [2010 Affordable Care Act \(ACA\)](#) requiring state health insurers who provide insurance on the individual market to spend at least 80% of premiums on medical care. The CMS [letter](#) notes that only 3 of the 17 companies affected by the rule do not currently meet the 80% threshold that denial of the waiver will not destabilize Wisconsin's health insurance market. [Other states](#), with different health insurance climates, have had different experiences with their waiver submissions.

[Wisconsin's Federal High Risk Pool: Few Participants & High Costs](#)

The number of participants in Wisconsin's federal high risk pool is much smaller than originally anticipated: it was expected that around 8,000 people would sign up for the high risk pool, meant to cover individuals before the exchanges open in 2014. While only 1,100 people have signed up, the cost of covering these participants is double the anticipated costs. Adverse selection was expected for this type of high risk pool, but the cost of services is higher than expected.

[Medicaid/BadgerCare Changes Moving Forward; 22,800 Enrollment Loss Expected](#)

The Legislature's Joint Finance Committee has approved proposed changes to Wisconsin's BadgerCare program, which now awaits federal approval. A recent exchange of [letters](#) between the federal Centers for Medicare & Medicaid Services (CMS) and the Wisconsin Dept. of Health Services (DHS) indicate agreement on some of Wisconsin's proposed changes to Medicaid and BadgerCare, while DHS has dropped several other proposed changes. The likely changes apply to non-pregnant, non-disabled adults over 133% of the federal poverty level (FPL) and will not apply to children. The changes are summarized in a [March 14 memo to the legislature's Joint Finance Committee](#). See also the [Analysis and Side-by-Side Comparison](#) prepared by the WI Council on Children and Families.

Meanwhile, the [Milwaukee Journal Sentinel reports that](#) Wisconsin DHS asserts that the costs to the state Medicaid program of implementing the federal [Affordable Care Act](#) remain unknown, due to uncertainty of federal guidance.

[WI Health Systems Rank High Nationally; Health Measures of Concern](#)

The Commonwealth Fund reports that Appleton, LaCrosse, Green Bay, Neenah, and Madison hospital referral regions scored in the top 10 percent relative to 306 regions nationally, on

factors of access, cost, quality and outcomes, particularly for Medicare enrollees. However, the [on-line interactive map](#) shows detail, and areas where Wisconsin falls short. For example, Wisconsin's areas show relatively high rates of potentially avoidable emergency department visits, breast cancer deaths, colorectal deaths, suicide deaths, and adults tooth loss due to decay, infection or gum disease.

[Health Reform Benefits Touted for WI: New Reports](#)

According to a [new report](#) recently released by the Dept. of Health and Human Services (HHS), more than 59,300 Wisconsin Medicare Part D participants saw their prescription drug costs reduced by \$38 million dollars due to provisions in the [Affordable Care Act \(ACA\)](#) in 2011. This breaks down to an average of \$639 of savings per Wisconsin participant.

The ACA has also [eliminated lifetime limits on health care coverage](#) for more than 2.1 million Wisconsin residents, including 580,000 children.

[Community Health Centers Expanding More Slowly than Expected](#)

Community Health Centers in Wisconsin are expanding less quickly than originally anticipated under the 2009 American Recovery and Reinvestment Act ([ARRA](#)). Federal deficits and budget cuts have reduced funds available for expansion slowing planned expansions. Nearly all of the community health centers in Wisconsin applied for ARRA grants but only Sixteenth Street Community Health Center and Kenosha Community Health Center received ARRA funding.

[Hospitals Begin Reporting ICU Infections](#)

Wisconsin has started publicly reporting hospital central line infections on a website called [CheckPoint](#). The ratings, recently released by the [Wisconsin Hospital Association](#), are part of a national effort to reduce [bloodstream infections from central lines](#). CheckPoint provides ratios calculated by comparing individual hospitals with similar hospitals nationwide from January to June last year.

[Aspirus Will Not Go Forward with Osteopathic Medical School](#)

[Aspirus](#) has withdrawn its support for a proposed \$75 million osteopathic medical school in Wausau because of concerns with accreditation, financing and control. Aspirus officials assert that it's not feasible for five health care providers, including Aspirus, to operate the college together as proposed. Wisconsin College of Osteopathic Medicine is [still moving forward](#) with the plans for an osteopathic medical school in Wausau.

[Additional Medical School Sites Considered in Wisconsin](#)

The [Medical College of Wisconsin \(MCW\)](#) is conducting a series of feasibility studies at various potential locations throughout Wisconsin to determine where to locate future medical school(s). Earlier this winter MCW said that it was considering opening a community-based medical school program in one or more locations in Wisconsin including Wausau, Stevens Point or [Marshfield in central Wisconsin](#), as well as the Fox Valley, Eau Claire, northwestern Wisconsin, La Crosse, Green Bay, Janesville-Beloit and Racine-Kenosha. MCW is conducting feasibility studies with the first such study finishing soon in Green Bay.

Facilities Building Boom Continues

UW Health's [American Family Children's Hospital in Madison plans to add two new floors](#) and will house a 14-bed surgical neonatal intensive unit on the top eighth floor. The addition adds \$13 million to a now \$45 million project unveiled last month adding 26 critical beds, including the NICU unit. [ThedaCare is building a new hospital in Shawano, set to open in fall 2014.](#) The Minnesota-based Mayo Clinic will build a new \$9.3 million emergency department and clinic expansion project at [Mayo Clinic Health System-Northland in Barron.](#) [Monroe Clinic's \\$83 million new hospital](#) will open March 26. Contrary to this trend, however, [Milwaukee County is reconsidering its plans to build a new psychiatric hospital](#) as studies on alternative care models continue.

[Aurora Will Keep Sinai Medical Center Open](#)

[Aurora Health Care](#) has confirmed that it will keep Aurora Sinai Medical Center open and continue to provide the same level of services including emergency department services, despite growing financial losses. Aurora Sinai is one of two safety-net hospitals in Milwaukee serving a predominantly low-income neighborhood. Aurora Sinai Medical Center losses increased from \$1.1 million in 2010 to a projected \$20 million in 2011. City officials will [continue to seek long term solutions](#) to Sinai's viability.

[Wisconsin Health Information Exchange Facilitates Access to Patient Data](#)

Federal legislation requires that medical records be transferred to electronic health records (EHRs) by 2015. The [Wisconsin Health Information Exchange](#), founded in 2008, has started with a regional network that will give doctors and other health care providers in southeastern Wisconsin quick access to a patient's basic medical history. WHIE participates in the [Wisconsin Statewide Health Information Network](#), an independent nonprofit organization that will form a statewide exchange.

[Public Reporting Drove Quality Improvement in Outpatient Diabetes Care](#)

[Health Affairs](#) reports on a research with the [Wisconsin Collaborative on Health Care Quality](#) on how physician groups respond to public reporting of quality measures. The researchers examined responses to public reporting on the quality of diabetes care in 409 primary care clinics within seventeen large, multispecialty physician groups. The authors determined that a focus on publicly reported metrics, along with participation in large or externally sponsored projects, increased a clinic's implementation of diabetes improvement interventions.

[Emergency Dental Care Need Increases in Wisconsin](#)

The [Wisconsin Hospital Association](#) reports that an estimated 32,000 patients with dental problems, such as an infected tooth, are seen by hospital emergency departments in Wisconsin each year. The [Pew Center for the States](#) estimates a 16% increase in emergency department visits associated with dental care nationally in 2009. Many of the emergency department dental care visits are from people who are uninsured or are covered by state health programs. The [Pew Children's Dental Campaign](#) reports that Wisconsin has the 5th lowest ranking for fees paid to dentists by a state's health program, deterring dentists from participation in the Medicaid program.

Madison-Based “My Coverage Plan” Software Secures Patient Protection

A for-profit subsidiary of Wisconsin-based non-profit ABC for Health, Inc. has secured patent protection of its My Coverage Plan technology, designed to reduce uncompensated care for providers and improve access to care for patients. The web-based, word-intuitive health benefits screening innovation generates an electronic health coverage record and identifies current and future public and private healthcare coverage options. My Coverage Plan is funded with a \$1.2 million National Institutes for Health grant.

Report: End Birth Cost Collection from Some Men to Aid Women on Medicaid

[ABC for Health](#), a nonprofit law firm in Madison, has released a report asserting that Wisconsin should stop collecting birth costs from men who father children with unmarried women on Medicaid. Pregnant women applying for Medicaid must identify the father or risk losing state health coverage after the baby is born: the state requires a man who fathers a child with an unmarried woman on Medicaid to pay some of the costs for pregnancy care and birth. The report asserts that some women, fearing harm from the men, avoid prenatal care, possibly contributing to the state’s high black infant mortality rate.

60 Communities in Wisconsin Don’t Treat Drinking Water

At least 60 communities in Wisconsin do not treat drinking water to protect against contaminants. The state legislature rescinded recent legislation that required treating drinking water throughout Wisconsin, but drinking water officials with the Dept. of Natural Resources (DNR) recommend that drinking water be treated with either chlorine or ultraviolet light to kill contaminants like bacteria and viruses. New research has shown that, contrary to long held beliefs, even deep aquifers can have viral contaminants that enter water systems through aging and poorly maintained distribution systems. Viruses in groundwater supplies have been linked to and respiratory and gastrointestinal illnesses in adults and children.

Wisconsin Immunization Program Recognized for Compliance Rates

Wisconsin’s Division of Public Health (DPH) achieved an 84% immunization coverage rate among children 19-35 months. The DPH received the 2012 national award for Highest Childhood Immunization Coverage from the Centers for Disease Control and Prevention (CDC) for this achievement.

LEGISLATIVE UPDATE

Bills that Passed Both Houses, Awaiting Governor Signature

- **SB 380: Removes the Cap on Enrollment in FamilyCare and other Long-Term Care Programs**
- **SB 237: Provide instruction in human growth and development**
- **SB 92: Prohibits coverage of abortions through health plans sold through exchanges.**

Bills that Passed One House

- **SB 297** Passed Senate: Would Eliminate the Ability to Impose Assessment on Ambulatory Surgical Centers
- **SB 383** Passed Assembly: Would Create Licensure Requirements and Practice Standards for Anesthesiologist Assistants
- **SB 306** Passed Senate: Would Require Doctors to Confirm Abortion Request is Voluntary
- **SB 487** Passed Senate: Relates to the provision of information regarding health care benefits provided to certain assistance program recipients
- **AB 147** Passed Assembly: Relating to inadmissibility of a statement of apology or condolence by a health care provider.

Proposed Bills

- **LRB 3917** to strengthen Third party Liability (TPL) database
- **AB 154**: Would prohibit coverage of abortions through health plans sold through exchanges
- **SB 273**: Proposed Plan for Implementing Medicaid Reform
- **AB 409** & **SB 305**: Would Require 60 Days Prior Notification to Changes in Eligibility or Benefits to MA Recipients
- **AB 487**: Would Create Licensure Requirements and Practice Standards for Anesthesiologist Assistants
- **AB 512** & **SB 421**: Would Authorize Medically Related Actions by Physician Assistants
- **SB 389** & **AB 469**: Would Exempt Electronic Smoking Devices from the Types of Smoking Devices that may not be Used in Certain Locations
- **AB 475** & **SB 371**: Would Allow for Medical Use of Marijuana
- **SB 360**: Would Eliminate the Minimum Sale Price of Prescription Drugs
- **AB 371**: Would Require Doctors to Confirm Abortion Request is Voluntary
- **SB 420**: Would Change Requirements for Membership on the Medical Examining Board
- **AB 408**: Would Eliminate the Ability to Impose Assessment on Ambulatory Surgical Centers
- **AB 440** & **SB 317**: Schedule II Substance Could be Dispensed Electronic Prescription
- **SB 101** & **AB 151**: Bill would eliminate costly difference between oral, IV chemotherapy
- **AB 530**: Would Require State Agencies to Submit Cost Reports for Implementing PPACA
- **AB 554**: Relates to the provision of information regarding health care benefits provided to certain assistance program recipients
- **AB 564** & **SB 419**: Relates to a pupil's possession and use of an epinephrine auto-injector
- **SB 103**: Relating to inadmissibility of a statement of apology or condolence by a health care provider

- [SB 471 & AB 540](#): [Relating to training in traumatic brain injury awareness for first responders and granting rule-making authority.](#)
- [SB 474 & AB 553](#): [Relating to matching financial records for Medical Assistance eligibility and providing a penalty](#)
- [AB 531](#): [Relating to requiring legislation for agencies to take an action to, request federal moneys to, and use state moneys to assist the federal government to implement federal health reform](#)
- [SB 551](#): [Relating to external review process of health benefit plan decisions](#)
- [SB 549](#): [Relating to fees for dental services](#)

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- New and Updated Resources from the [HHS](#)
- New and Updated Resources from the [Kids Health Partner Resources](#)
- Wisconsin Toolbox:
 - [Wisconsin Youth Risk Behavior Survey](#)
Monitors health-risk behaviors of the nation's high school students. Includes traffic safety; weapons and violence; suicide; tobacco use; alcohol and other drug use; sexual behavior; and diet, nutrition and exercise.
 - [Wisconsin Alzheimer's Statistics](#)
Number of people aged 65 and older with Alzheimer's by age, number of Alzheimer's and dementia caregivers, hours of unpaid care and economic value of care, percentage change in number with Alzheimer's disease compared to 2000, and cognitive impairment in nursing home residents in 2009.

EVENTS AND ANNOUNCEMENTS

Surveying Medicare in 2012: Staying Focused,

- March 20th, Madison
- March 21st, Brookfield
- March 22nd, Green Bay

Wisconsin AgriSafe Training, March 22nd-24th, Marshfield

9th Annual Wisconsin Comprehensive Cancer Control Summit, March 29th, Madison

Wipfli Annual Rural Health Clinic Conference, April 3rd – 4th, Milwaukee

7th Annual Wisconsin Stem Cell Symposium, April 11th, Madison

[UWSMPH Bioethics 2012 Symposium](#), April 12, Madison

[WI Association for Perinatal Care Annual Conference](#), April 15-17, Green Bay

[70th Wisconsin Safety and Health Conference](#), April 16-17th, Wisconsin Dells

[2012 Wisconsin Health Education Network \(WHEN\) Annual Meeting](#), April 19th, Middleton

[5th Annual Healthy Classrooms Symposium](#), April 25th, Madison

[Preparedness Training Conference](#), May 11-12th, Wausau

[3rd Annual Wisconsin Women's Health Policy Summit](#), May 15, Madison

[WI Public Health Association Annual Conference](#), May 21-23, Wisconsin Dells

[Hospice & Palliative Care](#), June 4-6th, La Crosse, WI

[Wisconsin Wound Care Prevention and Treatment Program](#)

- March 19th – 23rd, Lake Geneva, WI
- May 21st – 25th, Madison, WI
- June 11th – 15th, King, WI
- July 16th – 20th, Chippewa Falls, WI
- August 20th – 24th, Manitowoc, WI

READING ROOM

Final Rule Released to Implement Health Insurance Exchanges

The U.S. Department of Health and Human Services (HHS) has published a [final rule](#) on Affordable Health Insurance Exchanges. This regulatory framework is designed to enable states to build Affordable Insurance Exchanges (Exchanges), which are new state-based competitive marketplaces created under the Affordable Care Act. The rule also sets standards for eligibility for enrollment in qualified health plans through the Exchange and insurance affordability programs, including premium tax credits.

Study Shows Significant Racial Disparities in State-by-State Life Expectancy

A recent study looking at disparities between blacks and whites in life expectancy has found that in the United States, white males live approximately 7 years longer on average than African American men and white women live about 5 years longer than African American women. States have the smallest disparities where whites have shorter life expectancy, rather than African American's living longer.

Study Finds that E-Health Records Don't Deter Testing or Spending

A new study challenges the expectation that electronic health records (EHRs) would reduce health spending by reductions in duplicate and unnecessary tests. The study found that office-based physicians were 40-70% more likely to order an imaging test when they had access to computerized imaging results. The study suggests that this convenience factor, making imaging easier to access therefore increasing such testing, is an unintended consequence of using EHRs.

[Study: Medicare Quality Ratings Didn't Reduce Patient Deaths](#)

A recent study from Health Affairs found that [Hospital Compare](#), Medicare's 7 year effort to increase quality improvements in hospital care by publishing key performance metrics, has not resulted in a decrease in patient deaths. While the study notes that underperforming hospitals have improved many of their measures over time, there's little evidence that consumers use the website in choosing hospitals.

[Well Designed Reporting of Costs/Quality Helps Consumers Choose High Value Plans](#)

A recent study found that when consumers were presented with only cost information about a health insurance plan, they chose the more expensive plan. The study found that consumers equated cost with quality, not realizing that higher cost plans might indicate unnecessary services and/or inefficiencies. When presented with cost and quality information, consumers were better able to choose high-value plans.

[AARP Study: Price of Popular Medications Rose 26%](#)

According to a new AARP study, the price of many medications widely used by older Americans increased almost 26%, nearly twice the rate of inflation, between 2005 and 2009. During this time period, inflation rose by over 13%. The AARP report, found that the price of generic drugs fell by almost 31% while at the same time, brand name drugs prices increased by almost 41%, while specialty drugs rose by more than 48% between 2005 and 2009. The report looked at the retail prices of 514 generic and brand name drugs most commonly used by Medicare recipients.

[Surgeon General Releases New Report on Youth Smoking](#)

The Surgeon General's new report on youth smoking details the scope and health consequences of youth tobacco use, along with proven strategies that prevent it. The report also details not only the long term health effects of tobacco use which are already well known, but also the immediate and permanent health risks to young smokers including serious early cardiovascular damage and reduction of lung functionality.

[Report: Dementia may Cost \\$200 Billion in 2012](#)

According to a recent report released by the Alzheimer's Association, the cost of caring for those with Alzheimer's and other forms of dementia may reach as much as \$200 billion this year. This price includes the \$140 billion that Medicare and Medicaid pay. The price is projected to increase to \$1.1 trillion a year by 2050. The report estimates that 800,000 Americans with Alzheimer's live alone, and nearly half of them don't have a regular caretaker.

[High Costs of Health Care Burdening Many Families](#)

The Centers for Disease Control and Prevention (CDC) recently released their National Health Interview Survey with data collected between January and June 2011. The report found that about 1/3 of Americans are living in a family experiencing financial burdens due to health care, about 1/5 of Americans are living in a family having problems paying medical bills, and about 1/10 of Americans are living in a family unable to pay medical bills at all.