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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.

In This Issue

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#### **STATE NEWS**

##### **Medicaid/BadgerCare**

- [Gov Proposes Alternative to Medicaid Expansion; Relies on ObamaCare Exchanges](#)
- [Fiscal Bureau Models Enrollment and Revenue Effects of Five Alternatives](#)
- [BadgerCare Enrollment Falls Sharply in December](#)
- [DHS Quarterly Update Sheds Light on Medicaid Spending and BadgerCare Changes](#)
- [RFP Released for Medicaid Non-Emergency Medical Transportation Manager](#)
- [SeniorCare Renewal Announced](#)
- [DHS Spending on Outside Contractors Continues to Grow](#)
- [State to Receive \\$23M Bonus for Making Medicaid Accessible for Children](#)
- [Wisconsin Receives Federal Approval for AIDS/HIV Medical Home](#)
- [Report: Over 250,000 Could Gain Insurance through Health Care Reform Measures](#)

##### **Health Reform, Innovations & Insurance**

- [Report: Cost of Health Care Varies Widely in Wisconsin](#)
- [Marshfield, UW Health Selected as ACOs](#)
- [AMA Chooses WI for Practice Satisfaction Initiative](#)
- [EHR Program: CAH II Physicians Now Eligible](#)
- [HIRSP's Future Uncertain](#)
- [Despite Law, Drug Monitoring Database Not Ready for Use](#)
- [WI: Joins 21 States to Stop Massachusetts Medicare Windfall](#)
- [Wisconsin Physician Discipline Questioned](#)

- [Report: HMO, Hospital Profits Dip Slightly](#)

### **Public Health**

- [Infant Mortality Grant Program Struggles with Effectiveness](#)
- [Health Professions Workforce Slated for \\$100 Million Budget Investment](#)
- [Gov. Walker Allocates \\$29 Million for Mental Health Services](#)
- [Healthy Food Consumption Promoted](#)
- [Community-Based Family Intervention Program to Improve Obesity in Hispanic Families](#)
- [Dane County Birth Outcomes Trends Assessed](#)
- [Study Finds No Link Between Wind Farm Sound and Health Impacts](#)
- [Gun Violence Research Boosted by Wisconsin Research Voices](#)
- [Study: Only 2% of Unused Prescription Drugs Going to Take-Back Programs in WI](#)
- [Despite High State Smoking Tax, Cessation Programs Receive Little Funding](#)
- [UW Receive \\$10M Grant to Continue Study of Smoking Cessation Methods](#)
- [Veterans Wellness Study Helps Those Recovering from Combat](#)
- [Pew Center: WI Receives an "A" for Child Dental Sealants](#)
- [Give Kids A Smile® Receives \\$1.2 Million](#)
- [New Dental Clinic in Opens Northern Wisconsin](#)
- [EMS Project Receives \\$20,000 Grant](#)
- [Community-Academic Partnership Awards New Grants](#)

### **Clinics and Hospitals**

- [Wisconsin Hospitals Exceed National Rate in Earning Medicare Quality Bonus](#)
- [Report: Advanced Practice Professionals on the Rise at Wisconsin Hospitals](#)
- [UW Hospitals and Clinics Reports 12% Margin](#)
- [UW Hospital Named One of Nation's First Certified Comprehensive Stroke Centers](#)
- [WI Physician Group Quality Rated by Consumer Reports](#)
- [Slow Start for Sixteenth Street's Waukesha Clinic](#)
- [Marshfield Clinic, University of Wisconsin Health join Medicare ACO Demo](#)

### **RESEARCH AND PROGRAM TOOLS**

- [Common Wealth Fund Top 10 Stories of 2012](#)
- [Kaiser Health News Consumers' Guide to the Health Law](#)
- [HHS Medicare Plan Finder](#)
- [RWJF Roadmap to Reducing Disparities, FAIR Database](#)
- Wisconsin Toolbox:
  - [WCHQ & Consumer Reports Publish Wisconsin Healthcare Performance Ratings](#)
  - [Wisconsin Immunization Program](#)
  - [Wisconsin's Health Care Workforce 2012 Report; Slideshow/InfoGraphic](#)
  - [Statewide Financial Performance of Critical Access Hospitals](#)

### **EVENTS AND ANNOUNCEMENTS**

- [WAHQ Spring Conference - Soaring to the Top](#)

- [46th Annual Wisconsin Governor's Conference on Emergency Management and Homeland Security](#)
- [What's Next for the ACA: View from Researchers, Regulators, and Providers, April 25, Madison](#)

## READING ROOM

- [U.S. Ranks Below 16 Other Rich Countries In Health](#)
- [Primary Care Physician Shortages Could Be Eliminated Through Practice Reforms](#)
- [Stabilizing Health Spending & Moving Toward a High Performance Health Care System](#)
- [Changing the Trajectory of Health Care Costs](#)
- [The Affordable Care Act's Health Insurance Exchanges: A Progress Report](#)
- [Health Reform May Be Headed Back to Supreme Court in 2013](#)
- [Study: Doctors Give In To Patient Demands for Brand-Name Drugs](#)
- [Triage System Helps Colleges Treat Mentally Ill Students](#)
- [Barriers to Evaluation for Early Intervention Services](#)

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STATE NEWS

Medicaid/BadgerCare

[Governor Proposes Alternative to Medicaid Expansion; Relies on ObamaCare Exchanges](#)

Governor Walker announced that Wisconsin will not participate in the federally-funded Medicaid expansion, and offered a plan that instead reduces Medicaid enrollment and sends people to enroll in the ACA's federal health insurance exchange. The [Governor's plans](#) will eliminate BadgerCare coverage for an estimated 87,000 parents and caretaker adults between 100%-200% FPL, while allowing an estimated 82,000 childless adults up to 100% FPL to enroll in BadgerCare Core Plan. This proposal assumes that those who leave BadgerCare will be able to purchase coverage in the ACA's health insurance exchange. It also assumes that the federal government will renew the state's existing waiver to continue the Core Plan for childless adults. Overall, the Governor asserts that the number of uninsured will drop by 224,580, based on relying on the ACA's federal health insurance exchange. Read More:

[DHS Secretary's Statement](#)

[The Washington Post](#)

[Milwaukee Journal-Sentinel](#)

[Wisconsin Council on Children and Families](#)

[Legislative Fiscal Bureau estimates on Medicaid Expansion](#)

Wisconsin Hospital Association [position](#) and [reaction](#)

[Graphic: Where Each State Stands on ACA's Medicaid Expansion](#)

[Fiscal Bureau Models Enrollment and Revenue Effects of Five Alternative Policies](#)

The Legislative Fiscal Bureau released preliminary estimates of enrollment and expenditure changes that might result from changes the state could make to eligibility standards under its Medicaid/BadgerCare program beginning January 1, 2014. Estimates compare the Governor's plan to other scenarios, including setting the income eligibility for parents, caretaker and childless adults and 133% FPL. These projections show that the state would save more in each of six years in state revenue and bring in substantially more in federal matching funds by setting the income eligibility of adults at 133% FPL, and would not require increases in state revenue in the later years as would be required in the Governor's plan.

[BadgerCare Enrollment Falls Sharply in December](#)

An additional 5,000 individuals left BadgerCare in December, 2012, including around 1,760 children. Some of this [drop in enrollment](#) can be attributed to policy changes that occurred last July, while some may be due to economic factors such as employment gains. Since July, more than 23,500 people have dropped from BadgerCare enrollment, which is slightly more than the 21,500 adults that DHS had projected would drop. ABC for Health has a graph plotting BadgerCare enrollment data available [here](#).

[DHS Quarterly Update Sheds Light on Medicaid Spending and BadgerCare Changes](#)

The Wisconsin Department of Health Services reports that the Medicaid budget gap has closed. DHS Secretary Dennis Smith The improvement in funding gap is attributed to a decrease in the capitated reimbursement rates for Family Care, PACE, and partnership managed care organizations. A report from the Joint Committee on Finance on the condition of the Medicaid benefits budget is available [here](#).

[RFP Released for Medicaid Non-Emergency Medical Transportation Manager](#)

DHS has released a request for proposals (RFP) for a statewide Medicaid and BadgerCarePlus Non-Emergency Medical Transportation (NEMT) manager. The [Milwaukee Journal Sentinel](#) reports that the RFP will allow more flexibility for the awarded service provider in allowing longer call times, The state, however, will be able to penalize the service provider for contract violations, and requires providers to submit detailed reports. Meanwhile, the [Milwaukee Journal Sentinel](#) reports that Logisticare has recently improved its call times, meeting performance standards most of the time by the end of 2012. Democratic legislators had sent a [letter](#) and a [second request](#) to the Joint Committee on Audit requesting an audit.

[SeniorCare Renewal Announced](#)

The federal Centers for Medicare and Medicaid Services (CMS) has approved Wisconsin's extension of the SeniorCare Waiver through December 31st, 2015. This means that no changes will occur to current drug coverage. It also includes Medication Therapy Management (MTM), a new service that pays pharmacies for assisting SeniorCare members with medication management.

[DHS Spending on Outside Contractors Continues to Grow](#)

The Dept. of Health Services (DHS) has been continuing to expand the percentage it spends on outside contractors: in fiscal year 2012, they spent 9% more than in 2011 and 64% more than in 2010. A 2011 audit of Wisconsin Medical Assistance programs warned that increased reliance on outside contractors might prevent the state from maintaining adequate oversight. DHS asserts that they have implemented new internal policies to manage vendor costs.

[State to Receive \\$23M Bonus for Making Medicaid Accessible for Children](#)

The [Centers for Medicaid and Medicare Services \(CMS\)](#) has recently announced that the state of Wisconsin will be receiving over \$23 for making Medicaid accessible for children, the third such bonus in as many years. In Wisconsin, 88.5% of eligible children receive state health insurance coverage, higher than the 84.8% national average.

[Wisconsin Receives Federal Approval for AIDS/HIV Medical Home](#)

Wisconsin Medicaid has received final federal approval for the Wisconsin Health Home for Individuals with AIDS/HIV. Wisconsin DHS collaborated with the AIDS Resource Center of Wisconsin, the largest single provider of services to individuals diagnosed with AIDS/HIV, to develop the medical homes program. The ARCW HIV Medical Home is eligible to receive additional Medicaid reimbursement rates if it meets a strict set of quality and efficiency requirements.

[Report: Over 250,000 Could Gain Insurance through Health Care Reform Measures](#)

The Wisconsin Council on Children and Families released a [report](#) estimating that over 250,000 uninsured Wisconsin residents could gain health insurance coverage under the Affordable Care Act (ACA) in January 2014. The report found that rural counties may benefit the most from this increased health insurance coverage as many rural counties have a high percentage of uninsured adults. In addition to the WCCF report, advocacy group ABC for Health released a "[Top 10 Reasons to Expand Health Care Coverage in Wisconsin.](#)" These advocacy statements add to research from the [Urban Institute](#), [Families USA](#), the [Kaiser Family Foundation](#), and from [the federal government](#) that provide various estimates of coverage and revenue gains available to Wisconsin via the ACA. It also builds on the 2011 study of the [Impact of the ACA on Wisconsin's Health Insurance Market](#).

Health Reform, Innovations & Insurance

[Fiscal Cliff Deal Will Cost Wisconsin Hospitals More than \\$160 Million](#)

The Wisconsin Hospital Association estimates that Wisconsin hospitals will lose over \$160 million in the next four years from inpatient coding offsets needed to pay for a one year delay in cuts to Medicare payments for doctors. There are, however, some positive repercussions of the bill in Wisconsin. The extension of the Medicare Dependent Hospital program and the Low-Volume Adjustment will positively affect 15 Wisconsin hospitals, and the law also extends the 2012 geographic adjustments for physician payments through the end of 2013.

[Report: Cost of Health Care Varies Widely in Wisconsin](#)

The [7th Annual Wisconsin health Insurance Cost Ranking](#) report recently released by Citizen Action of Wisconsin ranks cities and regions in Wisconsin based on health insurance costs, rates of inflation and quality. The report finds large differences in the rate of health insurance inflation in different regions of Wisconsin, as well as wide disparities between higher and lower cost regions of the state. It reports a 24% variation between the lowest cost metro area (Madison) and the highest cost metro areas (Milwaukee and Racine) which equates to about \$1,800/year for single health coverage. But Madison rates jumped 8% in the past year, which is double the state average.

[Marshfield, UW Health Selected as ACOs](#)

Two Wisconsin-based accountable care organizations (ACOs) have been selected by the Centers for Medicare and Medicaid Services (CMS) to participate in a Medicare shared savings program. The two organizations most recently asked to participate are Marshfield Clinic and UW Health ACO; previously selected ACOs in Wisconsin include Accountable Care Coalition of Southeast Wisconsin, Aurora ACO, Dean Clinic and St. Mary's Hospital ACO, and ProHealth Solutions. In 2011, Bellin Health-Theodacare Healthcare Partners was selected to participate in the Pioneer ACO project.

[AMA Chooses WI for Practice Satisfaction Initiative](#)

Wisconsin is one of six states selected by the American Medical Association (AMA) to participate in a practice satisfaction initiative because of our state's physician-led organizations and innovative efforts to improve healthcare. The research team will go onsite to different practices to interview and observe to learn what is and isn't working well and this information will be used to develop new models for promoting professional satisfaction and sustainability.

[EHR Program: CAH II Physicians Now Eligible](#)

Centers for Medicare and Medicaid (CMS) have announced that doctors who assign their reimbursement and billing to critical access hospitals (CAH) under Method II (CAH IIs) can now participate in the Medicare Electronic Health Record (HER) Incentive Program. Though these physicians can start participating in this program in 2013, they can't submit attestations until January 2014 because of system changes that CMS needs to implement.

[HIRSP's Future Uncertain](#)

Wisconsin's [Health Insurance Risk Sharing Plan \(HIRSP\)](#) might end sooner than expected, due to released [proposed federal regulations](#) governing the operation the ACA's reinsurance program. Originally, the HIRSP board of directors proposed keeping the pool active for 1-3 years after ACA's guaranteed issue provisions take effect, [thinking that it might manage the federally-supported reinsurance pool](#) for Wisconsin. But the proposed federal government regulations suggest that the reinsurance pool will be run at the federal level.

[Despite Law, Drug Monitoring Database Not Ready for Use](#)

A law passed in 2009, requires all of Wisconsin's 1,200 pharmacies that provide frequently abused prescription drugs to gather data on all order filled, , effective 2013. But the database

meant to track such information isn't yet ready. Health Information Designs, the Alabama-based vendor, is currently in negotiations with the state; it is still uncertain when the database will be available for use. The database will allow pharmacists, health care providers and others to better track prescription drug abusers.

[WI: Joins 21 States to Stop Massachusetts Medicare Windfall](#)

Wisconsin is joining forces with 21 other states in attempts to get Congress to change Medicare reimbursements that would favor a few states over many others, including Wisconsin. Massachusetts will be receiving hundreds of millions of dollars in bonus payments while Wisconsin will lose \$9.4 million per year in Medicare reimbursements.

[Wisconsin Physician Discipline Questioned](#)

The Wisconsin State Journal recently covered [Public Citizen's annual report](#) that ranks Wisconsin low in the rate of physician disciplinary actions and [suggests that this indicates threats to quality and safety](#). The State Medical Examining Board reports a shortage of funding to be able to deal with the vast quantity of complaints it receives. According to the medical board, Wisconsin's board has supported bills in the legislature to expand its authority to launch investigations on its own or perform criminal background checks for doctors applying for licenses. Some, however, criticize Public Citizen's methodology. [A 2006 study by UW-Madison researchers](#) reports that states with higher rates of disciplinary action also have higher rates of complaints against physicians and lower overall performance on health care quality measures. Wisconsin at that time ranked eighth highest in quality of care among all states and third lowest in complaints per doctor among 35 states with reliable data.

[Report: HMO, Hospital Profits Dip Slightly](#)

Alan Baumgarten's 2012 Health Market Review reports that Wisconsin Health Maintenance Organizations (HMOs) and hospitals' profits were down from 2011, while HMO enrollment increased and inpatient utilization decreased.

Public Health

[Infant Mortality Grant Program Struggles with Effectiveness](#)

The Wisconsin Partnership Fund, operated by the UW School of Medicine and Public Health, has committed \$50 million to address the infant mortality crisis in southeast Wisconsin, but the program not yet taken root, and suffers from poor relations with Milwaukee's African American community leaders. The *Milwaukee Journal-Sentinel* reports that the program has not yet implemented any programs and its co-chairs have resigned. The Journal-Sentinel continues this coverage as part of its [infant mortality issue series](#).

[Health Professions Workforce Slated for \\$100 Million Budget Investment](#)

Governor Walker's budget proposal will include nearly \$100 million in new state funds and reforms aimed toward expanding the supply of health professionals. The package will fund a broad range of programs through the Technical College System, K-12 schools, UW, MCW, and for graduate medical education residency programs. The Governor also requests passage, in

advance of the Budget, of LRB—1162, which contains funding for Labor Market Information System and Worker Training Grants.

More information:

[Primary Care Workforce Summit: Agenda, Materials, Background Papers](#)
[December panel on the Physician Workforce](#)

[Gov. Walker Allocates \\$29 Million for Mental Health Services](#)

Governor Walker will provide an additional \$29 million for mental health care in his budget proposal. As well, a bipartisan task force has been created to draw in input from around the state. Shel Gross, [Director of Public Policy, Mental Health America](#) of Wisconsin, expresses enthusiasm about the new focus on mental health and the potential funds available. However, the [president of the Children’s Mental Health Network expresses concern](#) about linking a focus on mental health treatment to concerns about gun violence.

[Healthy Food Consumption Promoted](#)

This article discusses the various state-level decisions and their potential impacts on particular populations in Wisconsin to increase fruit and vegetable consumption as a means to decrease obesity. Recently proposed or implemented policies in the U.S. are reviewed and an evidence-based lens through which food access policy can be shaped in the Midwest and Wisconsin is discussed.

[Community-Based Family Intervention Program to Improve Obesity in Hispanic Families](#)

An 8-week program that promotes awareness of healthy food choices and the importance of physical activity was taught to 47 Hispanic families in Waukesha County, while biometrics were measured and tests of nutrition knowledge and attitudes were conducted. The researchers concluded that the program curriculum was successful in reducing cardiac and diabetes risk factors in Hispanic adults by improving knowledge and attitudes about healthy behaviors.

[Dane County Birth Outcomes Trends Assessed](#)

After positive gains in decreasing the black-white infant mortality gap between 2004 and 2007 in Dane County, Wisconsin, the disparities have increased again since 2008. This study looks at the risk factors and varying levels of pre-natal care to try to identify key contributing factors to this problem. The study asserts that, beyond prenatal care, birth outcomes were negatively affected by the economic downturn and increasing socioeconomic disparities.

[Study Finds No Link Between Wind Farm Sound and Health Impacts](#)

The WI Public Service Commission (PSC), considering whether to approve a new wind farm project in St. Croix County (Highland Wind Project), requested that independent firms determine if low frequency sound from wind turbines was negatively affecting health. The tests were conducted in Brown County, at homes near the Shirley Wind Farm. The study, [available here](#), reports no evidence linking the low frequency sound with health impacts.

[Gun Violence Research Boosted by Wisconsin Research Voices](#)

UW Madison professors were among academics across the nation [urging the president](#) to lift the ban on federal support for research on gun violence. Meanwhile, Dr. Stephen Hargarten, chief of the ED at Froedtert Hospital and director of the Injury Research Center at the Medical College of Wisconsin, has called for apply public health disease outbreak science to the phenomenon of mass shootings. [Medical College Expert: Treat Gun Violence like Disease](#). President Obama recently lifted the ban on federally-sponsored research on the gun violence.

[Study: Only 2% of Unused Prescription Drugs Going to Take-Back Programs in WI](#)

The Wisconsin Dept. of Natural Resources, the University of Wisconsin Extension, and the Product Stewardship Institute have released a report that only about 2% of unused prescription drugs in Wisconsin go to take-back programs. These take-back programs are intended to keep unused prescription drugs out of the hands of potential abusers and out of the environment. The study reports program barriers, such as lack of sustainable funding, consumer inconvenience and low public awareness.

[Despite High State Smoking Tax, Cessation Programs Receive Little Funding](#)

Wisconsin has the 8th highest cigarette tax in the country but spends less than one cent of every tobacco tax dollar on programs to help smokers quit and to discourage people from starting. Smoking prevention and cessation effort funding has been cut by 65% over the past two budget cycles (from \$15.3 million in fiscal year 2009 to \$5.25 million in fiscal year 2012).

[UW Receive \\$10M Grant to Continue Study of Smoking Cessation Methods](#)

UW Madison researchers from the [Center for Tobacco Research and Intervention](#) were recently awarded a \$10 million grant to continue their study on smoking cessation methods. Methods that include pills, patches and patch and lozenge combination are all being tested for their ability to assist people in quitting smoking. The grant was given by the National Heart, Lung, and Blood Institute to continue the [Wisconsin Smoker's Health Study](#).

[Veterans Wellness Study Helps Those Recovering from Combat](#)

The [Center for Investigating Healthy Minds](#) at the Univ. of Wisconsin-Madison Waisman Center is encouraging Iraq and Afghanistan vets to participate in a wellness study to learn ways of helping returning vets adjust to civilian life after combat. The research will assess care for Post-Traumatic Stress Disorder (PTSD). The Center offers free and complimentary alternative programs for vets.

[Pew Center: WI Receives an "A" for Child Dental Sealants](#)

According to a new report released by the [Pew Center on States](#), Wisconsin was one of only 5 states to receive a grade of "A" for providing children with dental sealants. Twenty states and the District of Columbia received a "D" or "F". Wisconsin's [Seal-a-Smile](#) program, funded by [Delta Dental](#), provided 17,767 children in 406 schools with 74,276 sealants in the 2010-2011 school year.

[Give Kids A Smile® Receives \\$1.2 Million](#)

During the month of February, over 9,500 low-income children in Wisconsin will receive donated dental care worth over \$1.2 million as part of the 11th annual Give Kids a Smile program. Hundreds of dental professionals will be donating treatments such as fillings, extractions and crowns and provide health screenings, cleanings and oral hygiene education. Children in need are identified by the Wisconsin Dental Association, the Dept. of Health Services, local agencies, schools, Head Start and other youth and community organizations.

[New Dental Clinic Opens in Northern Wisconsin](#)

A new dental clinic, the Peter Christensen Dental Clinic, a \$10 million 36,000 square-foot facility, recently opened in Lac du Flambeau, WI, providing the area with a much needed dental facility. The clinic can serve 50,000 patients per year and will be able to provide services to those on Medicaid, within a 100 mile radius.

[EMS Project Receives \\$20,000 Grant](#)

The [Wisconsin Partnership Program](#) has provided a \$20,000 grant to help improve the health of older patients in rural communities by helping aging adults understand important risk factors and ensure that they are receiving proper quality care. Shawano Ambulance Service, Northeast Wisconsin Technical College and the University of Wisconsin-La Crosse were awarded the funds to train emergency responders. The model used through this program will help other locations throughout the state in the future.

[Community-Academic Partnership Awards New Grants](#)

The Wisconsin Partnership Program has announced the Community-Academic grants that were awarded in 2012. Implementation Grants (up to \$400,000 over three years), Small Implementation Grants (up to \$150,000 over three years), and Development Grants (up to \$50,000 over two years) were awarded to groups and organizations in Wisconsin.

Clinics and Hospitals

[Wisconsin Hospitals Exceed National Rate in Earning Medicare Quality Bonus](#)

Sixty-three percent of Wisconsin 62 participating hospitals will be receiving a bonus from Medicare due to their performance on 12 basic clinical standards of care and the happiness of their patients. The national rate is 52%. Penalties are being levied on 38% of Wisconsin's hospitals. These value-based payments began this January as part of the Affordable Care Act.

[Report: Advanced Practice Professionals on the Rise at Wisconsin Hospitals](#)

[Wisconsin's Health Care Workforce 2012 Report](#) shows that Wisconsin hospitals are hiring more nurse practitioners and physician assistants. Hospitals reported a 55% increase in advanced practice nurses, a 38% increase in nurse anesthetists and a 25% increase in physician assistants. This increase is attributed to difficulty recruiting primary care physicians and evidence showing the high quality care delivered by advanced practice professionals. Recruitment challenges persist for certified nursing assistants (CNAs), physical therapists and occupational therapists.

[UW Hospitals and Clinics Reports 12% Margin](#)

The University of Wisconsin Hospital and Clinics Authority December 2012 financial report shows earnings 93% above budget, with an 11.5% operating margin and a 12.8% total margin for the first half of its 2013 fiscal year. This compares to an industry operating margins of approximately 2.8% and total margins of about 5%. The excess does not include capital grants, gifts and donations. It reports providing \$23.5 million in charity care and bad debt, measured as charges foregone for services and supplies provided. This amounts to 2.9% of revenue.

[UW Hospital Named One of Nation's First Certified Comprehensive Stroke Centers](#)

The Joint Commission and the American Heart Association/American Stroke Association have awarded the University of Wisconsin Hospital and Clinics with a [Comprehensive Stroke Center Certification](#), a new elite designation that just began this past October. The UW is the first program in the Upper Midwest to receive the award and the first organization in the country to receive the certification.

[WI Physician Group Quality Rated by Consumer Reports](#)

Consumer Reports scores 19 Wisconsin health care providers scored above the national average in three categories (cancer screenings, treatments for heart patients, and care for those 60+). These 19 providers give care to almost half of the state's population. Consumer Reports rated ThedaCarePhysicians and Marshfield Clinic highest overall in Wisconsin, though other Wisconsin medical groups that were given high scores include Aurora Medical Group, Bellin Medical Group, Dean Clinic, and Gundersen Clinic. The [Wisconsin Collaborative for Healthcare Quality](#) assisted with the research.

[Slow Start for Sixteenth Street's Waukesha Clinic](#)

Sixteenth Street Clinic in Waukesha is running behind expectations with low patient counts slowly increasing since its August 2012 opening. The clinic was opened to provide primary care to Waukesha's BadgerCare, uninsured and Hispanic populations. The clinic is supported by more than \$2 million from the Waukesha Memorial Hospital Foundation and ProHealth Care, Waukesha, and a \$2.6 million capital grant under the federal Affordable Care Act.

[Marshfield Clinic, University of Wisconsin Health join Medicare ACO Demo](#)

The Centers for Medicare and Medicaid Services (CMS) recently announced that two Wisconsin clinics, Marshfield Clinic and UW Health, were among 106 new accountable care organizations (ACOs) that will begin participating nationally in the ACO model. ACOs are health care organizations that accept responsibility for the costs and quality of care and are eligible to share in savings based on their efficiency and meeting of specific quality goals. Five other Medicare ACOs are designated in Wisconsin.

RESEARCH AND PROGRAM TOOLS

- [Common Wealth Fund Top 10 Stories of 2012](#)
- [Kaiser Health News Consumers' Guide to the Health Law](#)
- [HHS Medicare Plan Finder](#)

- [RWJF Roadmap to Reducing Disparities, FAIR Database](#)
- Wisconsin Toolbox:
 - [WCHQ & Consumer Reports Publish Wisconsin Healthcare Performance Ratings](#)
Ratings provide based on three major categories: cancer screening tests, care for people 60 and older, and treating people with existing heart disease
 - [Wisconsin Immunization Program](#)
DHS provides new information on Pertussis (Whooping Cough)
 - [Wisconsin's Health Care Workforce 2012 Report; Slideshow/InfoGraphic](#)
The Wisconsin Hospital Association conducts an annual hospital workforce survey of vacancies for selected clinical occupations.
 - [Statewide Financial Performance of Critical Access Hospitals \(CAHs\)](#)
Individual hospital values for each of the twenty indicators of financial condition and performance of CAHs.

EVENTS AND ANNOUNCEMENTS

- [WAHQ Spring Conference - Soaring to the Top](#), March 1, Wisconsin Dells, WI
- [46th Annual Wisconsin Governor's Conference on Emergency Management and Homeland Security](#), March 7-8, Madison, WI
- [What's Next for the ACA: View from Researchers, Regulators, and Providers, April 25, Madison](#)

READING ROOM

[U.S. Ranks Below 16 Other Rich Countries In Health](#)

The gap between the life span and health of Americans and their counterparts in other wealthy nations is growing. A new report from the National Research Council, an arm of the [National Academy of Sciences](#), asserts that Americans under the age of 75 are living shorter lives with more injury and illness.

[Primary Care Physician Shortages Could Be Eliminated Through Practice Reforms](#)

Study shows that the implementation of operational changes in the ways clinicians deliver care—including the use of teams or “pods,” better information technology and sharing of data, and the use of non-physicians—have the potential to offset completely the increase in demand for physician services while improving access to care, thereby averting a primary care physician shortage.

[Stabilizing Health Spending & Moving Toward a High Performance Health Care System](#)

In order to hold increases in national health expenditures down, the Commonwealth Fund Commission on a High Performance Health System recommends a set of payment reforms, consumer incentives and other systemwide reforms.

[Changing the Trajectory of Health Care Costs](#)

National health care expenditures currently account for 18 percent of the U.S.'s economy and are growing at a rate 2 percent faster than GDP. AcademyHealth recently released a report in which health care leaders share their views on how health care cost trajectories could potentially be changed.

[The Affordable Care Act's Health Insurance Exchanges: A Progress Report](#)

The health insurance exchanges created by the Affordable Care Act (ACA) will go into effect in January 2014 and open enrollment begins in October of this year. States are at varying levels of readiness for these exchanges to open and have taken different tactics to do so. An interactive map of health exchange progress is available [here](#).

[Health Reform May Be Headed Back to Supreme Court in 2013](#)

While the individual mandate was upheld by the Supreme Court last summer, other provisions of the Affordable Care Act (ACA) may be brought to the Supreme Court this year. Questions about contraception coverage, the ability of the Senate to "originate" a tax, and whether or not it's legal to run online insurance marketplaces are being debated in the lower courts and may make their way to the Supreme Court.

[Study: Doctors Give In To Patient Demands for Brand-Name Drugs](#)

A study published in JAMA Internal Medicine asserts that physicians are more likely to prescribe brand-name drugs if their patients request them and also when doctors have contacts with pharmaceutical companies. This occurred even though a generic version of the same medication was available.

[Triage System Helps Colleges Treat Mentally Ill Students](#)

College mental health centers are coming up with ways to triage the mental health needs of their students. On average, a college campus counseling center sees about 10 percent of its student body each year, though many students may only interact via telephone triage or attend one appointment at the campus mental health center before being referred to a therapist.

[Barriers to Evaluation for Early Intervention Services](#)

Nearly 90% of infants and toddlers receiving pediatrician referrals for early intervention services do not connect with those services. Such government-funded early interventions programs that can improve outcomes, reduce behavioral problems and help families provide good care for their children.

