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Pending Legislation

- SB 300 and AB 392 Copayments, Deductibles, or Coinsurance for Oral Chemotherapy and Injected or Intravenous Chemotherapy
- SB 137 and AB 139 The Duty of Physicians to Inform Patients of Treatment Options
- SB 333 and AB 401 A Transitional Jobs Program
- SB 73 and AB 78 An income and franchise tax credit for workplace wellness programs, granting rule-making authority, and requiring the exercise of rule-making authority
- SB 357 and AB 465 Causing harm to a child by cosleeping while intoxicated, providing information about cosleeping while intoxicated, and providing a penalty
- SB 137 and AB 139 Duty of physicians to inform patients of treatment options
• **AB 270** Additional providers in the volunteer health care provider program and proof of financial responsibility and malpractice insurance requirements for certain advanced practice nurses serving as volunteer health care providers

• **AB 468** Admission of Family Care enrollees to mental health institutes and making an appropriation

• **SB 333** A Transitional Jobs Program

• **SB 156** and **AB 174** Payment of county medical examiners and medical examiner's assistants

• **SB 73** and **AB 78** An income and franchise tax credit for workplace wellness programs

• **SB 201** and **AB 217** Civil liability for performing a sex-selective abortion, and providing a penalty

• **SB 202** and **AB 216** Prohibiting the group insurance board from contracting for or providing abortion services and exempting religious employers, religious organizations, and religious institutions of higher education from providing contraceptive insurance coverage

• **SB 212** and **AB 249** Instructional programs for nurse aides and granting rule-making authority

• **SB 300** and **AB 392** Copayments, deductibles, or coinsurance for oral chemotherapy and injected or intravenous chemotherapy

• **SB 311** and **AB 408** A dental hygienist's administration of nitrous oxide inhalation analgesia and practice of dental hygiene

**Passed Legislation**

• **Wisconsin Act 46** School district budgets, the school district levy for community programs and services, and making an appropriation

**RESEARCH AND PROGRAM TOOLS**

• Information on the Health Insurance Marketplace and Health Care Reform: [healthcare.gov](http://healthcare.gov)
  - HHS [Partner Official Resources](http://partners.healthcare.gov)
  - Compare health care premiums by zip code: [HealthSherpa](http://www.healthsherpa.com)

• New and Updated Resources from the [Kaiser Family Foundation](http://kff.org)
  - Updated Frequently Asked Questions
  - Consumer Resources on Health Reform

• New and Updated Resources from the [Commonwealth Fund](http://www.commonwealthfund.org)
  - Health Reform Resource Center

• Other health reform Updates and Resources
  - HHS: No Individual Responsibility Payment if Enroll by March 31, 2014
  - HHS Finalized Regulations for Oversight and Financial Standards for the Marketplaces
  - Medicaid Disproportionate Share Hospital (DSH) Final Rule
  - U.S. Immigration and Customs Enforcement: Clarification of Existing Practices Related to Certain Health Care Information
  - [Helping Consumers Understand their Coverage Options, from Coast to Coast](http://kff.org/health-reform/)
  - Health Policy Briefs: Navigators and Assistors
  - State Coverage Initiatives Federal Health Reform Resources
  - [InfoGraphic: Premiums Subsidy Scenarios Under Obamacare](http://aspe.hhs.gov/hhs-finance/)
  - Simple Tool to Browse Qualified Health Plans by Zip Code
  - Covering Health Reform: A Source Book for Journalists

• New and Updated Resources from [HRSA](http://www.hrsa.gov)

• New and Updated Resources from [AHRQ](http://www.ahrq.gov)
  - New Toolkit on Rapid-Cycle Patient Safety and Quality Improvement
Wisconsin Toolbox:
  - Enrollment for Health Wisconsin (www.E4Health.org)
    - Statewide Enrollment Directory
  - InfoGraphic: The Future of Health Insurance in Wisconsin
  - Wisconsin DNR Air Quality Maps
  - WCCF: Wisconsin ACA FAQ

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  - DHS Annual FOCUS Conference
  - IHI Forum Satellite Broadcast: National Forum on Quality Improvement in Health Care
  - EveryWoman’s Journal
  - Perinatal Foundation Holiday Gathering and Fundraiser
  - MetaStar IHI Forum Satellite Broadcast
  - Small Business Administration Affordable Care Act 101 webinar
  - Wisconsin Health News Lunch Briefing – Health Care Reform

READING ROOM
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  Please follow us on Twitter @UWHealthPolicy to receive notice of relevant reports, research, federal and state news.

STATE NEWS

Health Care Reform Implementation in WI

Federal ACA Enrollment Figures Released: 34K Wisconsin Applicants, 877 Enrolled
The U.S. HHS released its Health Insurance Marketplace November Enrollment Report, showing state-by-state activity in the first six weeks since the Affordable Care Act/Obamacare launch. Wisconsin had 19,098 electronic and paper applications completed cover 34,678 people. Of these, 8,911 people determined to be eligible for subsidized coverage, and 877 people had picked a health plan sold on the federal marketplace as of Nov. 2. The Washington Post reports that the vast majority of ObamaCare sign-ups are in Medicaid.

Policy Cancellations, Obamacare Change to Allow Existing Plans, of Little Effect in Wisconsin
President Obama announced changes to the federal health care law that would allow health insurance customers to keep their health plans even if they do not meet the new standards for essential health benefits under the Affordable Care Act. The ACA regulations had required health plans to provide better benefits than are offered by some plans now on the market, which nationally was causing concern about cancellations of existing policies and significant increases in premiums for some current policy holders. Wisconsin’s Insurance Commissioner, however, had already been allowing insurers to renew their existing health plans early (prior to the year end), thereby avoiding for the next year the ACA’s regulations that were to take effect January 1, 2014. Most of the major health insurers have been giving customers the option of renewing their existing policies this year. For this reason, the change in rules does not seem to significantly affect Wisconsin.
**WI OCI: Insurance Agents Completing BadgerCare/ACA Training**

The Wisconsin Office of the Insurance Commissioner created a resource detailing the names and contact information for agents, in Wisconsin who have completed the required BadgerCare continuing education course, and who are therefore available to assist individuals in enrolling in health insurance through the marketplace. There is also a list of those who have completed the necessary federal and state training to serve as Registered Certified Application Counselors and Registered Navigators and Navigator Entities.

**WI Insurance Premiums Exceed National Average and those in Minnesota; Reasons Debated**

Wisconsin Citizen Action, a liberal advocacy group, released a report assessing the difference in health insurance premiums between Wisconsin and Minnesota and considering the potential reasons. The source of the report’s data was the federal government report on premiums nationally. The analysis and use of these data was, in turn, criticized by the conservative MacIver Institute.

This difference between Wisconsin and Minnesota is garnering national coverage, with USA Today considering whether the large gap in rates related to the more aggressive approach Minnesota has taken to implementing the law. The Fond du Lac Reporter asserts: Wisconsin neighbor scores bragging rights on ObamaCare. The Minnesota Pioneer Press reviews a range of other reasons for the difference, and has published an interactive map that compares premiums in the ACA’s health insurance exchanges in more than 400 "rating areas" that span 36 states, including Minnesota and Wisconsin. Others note that Minnesota’s rates are lower, in part, because it is delaying for one year the closing of its high risk insurance pool, while Wisconsin’s HIRSP program is closing in the coming months. These high need members will be joining the Marketplace sooner in Wisconsin, and thus adding to the average rates in the pool.

**$2 Million Grant from UW Health Will Help Low-income Dane County Families Buy Insurance**

UW Health and United Way of Dane County announced a partnership to create HealthConnect, which will provide financial assistance for the cost of insurance premiums for plans purchased through the ACA Health Insurance Marketplace. UW Health provided a special $2 million contribution outside of the United Way annual campaign. HealthConnect is designed to assist the approximately 7,300 individuals in Dane County whose income is between 100-133 percent of the federal poverty level who are being removed from BadgerCare and will need to purchase coverage from the marketplace.

**WaPo: Everything You Need to Know About ObamaCare’s Problems; And Wisconsin Commentary**

The launch and glitches of the ACA’s health insurance Marketplaces dominate health policy discussions, with particular attention to how technological difficulties with the federal Marketplace will affect the state’s plans to move 77,000 current BadgerCare members and 20,000 HIRSP members off of their public coverage and direct them to the ACA marketplace. State press, including the Milwaukee Journal Sentinel and Gannett papers have editorialized about the Marketplaces and state lawmakers decisions regarding the Marketplace and BadgerCare.

**Walker Urges GOP: Don’t “Spike The Ball’ On Obamacare**

Time Magazine reports that Governor Walker, speaking to reporters at a meeting hosted by National Review, cautioned his party against being seen as celebrating the law’s failure. He warns that this could leave the impression that Republicans are happy that some Americans have no health insurance. But Walker said Obamacare will help Republicans in next year’s midterm elections and in the 2016 presidential race.
Governor Announces Delay in Medicaid/BadgerCare and HIRSP Coverage Changes
Gov. Scott Walker announced a delay for three months his plan to move more approximately 77,500 state residents off of BadgerCare coverage in favor of the Affordable Care Act (ACA/Obamacare) coverage). The Governor, attributing the delay to the “failed ACA rollout,” is calling lawmakers in for a special legislative session in early December to approve changes to his prior plan, which would have cancelled BadgerCare coverage for this group by December 31, 2013. In addition, the Governor called for a three-month extension of coverage the state’s high-risk Health Insurance Risk-Sharing Plan (HIRSP), which had been scheduled to end on Dec. 31. About 20,000 HIRSP members had been facing an end to their coverage. The Governor, however, will not accept the federal ACA-supported Medicaid expansion funding in order to keep the current recipients on BadgerCare. Instead, he will avoid these unplanned expenses on the state budget by delaying coverage for about 80,000 very-low-income adults who had been scheduled to become Medicaid eligible on January 1, 2014. This plan has drawn mixed reviews from advocates, who argue that part of the transition challenges owe to Wisconsin’s own implementation shortcomings.

Operations Memo Details Upcoming BadgerCare Plus Changes
WI DHS released a memo documenting the changes to be made to BadgerCare Plus eligibility starting April 1, 2014. Changes include: 100% FPL income limit for all adults in BadgerCare (including childless adults); termination of the BadgerCare Core and Basic plans; all enrollees will receive Standard Plan benefits. Several other changes are also detailed.

WI Faces $52M Decline in Federal Medicaid Matching Funds
Federal Funds Information for States and the Wisconsin Legislative Fiscal Bureau estimate that Wisconsin's federal Medicaid matching rate for federal fiscal year 2015 will decline from 60% to 59.19%, resulting in approximately $52 million federal dollars less for state fiscal year 2014-15 than state budget assumptions. The federal matching rate is lower than expected because, while personal income in Wisconsin grew more slowly than the nation in 2012, the lower than average population growth caused Wisconsin per-capita income to increase more than the national average. Health Affairs reports that twenty-one states will see their FMAPs increase in FY 2015 and seventeen will see them decline.

WI without “Coverage Gap” despite Non-Participation in ACA Medicaid Expansion
Kaiser Commission on Medicaid and the Uninsured released an updated issue brief reviewing the status of coverage among states relative to their participation in the ACA’s Medicaid Expansion. Wisconsin, among 26 states not participating in the ACA Medicaid expansion, is the only state listed with no gap in coverage options for low-income residents. Wisconsin alone in this group will provide Medicaid coverage for persons up to 100% FPL, while those over this income will be directed to the ACA’s marketplace. Other non-participating states to not have Medicaid coverage reaching that threshold. Wisconsin’s unique approach to coverage gains national media attention again this month.

DHS Letter: Important Information about Applying for Health Insurance for January 2014
This letter is a follow up to the letter sent in early October to remind members of the new options for health care coverage through the federal Health Insurance Marketplace. The letter also includes a copy of the paper Marketplace Family Application.
Operation Memo on Medicaid Changes
Wisconsin Department of Health Services released a memo stating changes to the Estate Recovery Program for Medicaid recipients. The new provisions will be implemented once all potential members affected by the new provisions are notified. Jason Stein from the Journal Sentinel puts the new bill in perspective.

WI DOJ: Pharmaceuticals to Pay More than $1.6 Billion to Resolve Fraud Allegations
The Wisconsin Department of Justice announced that Johnson & Johnson and Janssen Pharmaceuticals pay a settlement that will yield about $7.2 million in restitution and recoveries for Wisconsin's Medicaid program. The settlement resolves fraud allegations in that companies lacked FDA approval for, misrepresented and distributed two antipsychotic drugs for patient usage.

Workforce/Health Professionals/Training & Education

State Leaders Gather to Address Physician Shortage
More than 70 hospital and system leaders joined representatives from the state’s two medical schools and residency programs to address current and predicted shortages in the state’s physician workforce. The Wisconsin Council on Medical Education and Workforce (WCMEW) conference focused on Graduate Medical Education and addressed in detail the key issues involved in starting and sustaining community-based GME opportunities. The Wisconsin Academy of Family Physicians also convened its Primary Care Workforce Summit 2.0. Workgroups focused on developing action plans to support team-based care and education and training.

DHS Begins Increased Payment for Primary Care Services for 2013 and 2014
The Wisconsin Medicaid program has started reimbursing primary care services at the higher Medicare rate for current claims submissions. The higher rate is required to be paid for certain services under provisions of the Affordable Care Act (ACA), and for physicians that have completed an attestation as required by DHS. The Kaiser Family Foundation has estimated an average 78% increase in Wisconsin’s Medicaid fee level paid as a result of this policy. The federal ACA fully funds this primary care fee increase for 2013 and 2014. See ForwardHealth Update 2013-44 for details about physician attestation.

Wisconsin: Projecting Primary Care Physician Workforce
A report prepared by the Robert Graham Center addressed the challenges of Wisconsin primary care physician (PCP) shortages and mal-distribution. To keep up with the growing, aging, and increasingly insured population an additional 942 PCP will be required by 2030. The report asserted potential solutions to the physician shortages.

Quality Improvement Coordinators in Wisconsin Hospitals
Rural Health Solutions conducted a study from May-June 2013 to examine the staffing differences in Quality Improvement Coordinators at Critical Access Hospitals (CAH) and non-CAH hospitals in Wisconsin. The study found more similarities then differences, with the greatest differences in salary, health insurance benefits, and education. Although the survey provided useful information to further enhance quality improvement programs, there remain several factors that need additional analyses.

The Wisconsin Nurses Workforce: Status and Recommendations
The Wisconsin Center for Nursing released a report on the impending workforce shortage of registered nurses, growing to nearly 20,000 nurses in Wisconsin by 2035. The report provides recommendations on improving and assuring a sufficient workforce for Wisconsin.
**State Physicians Workforce Data Book 2013 Released**
This report examines current physician supply and retention, medical school and osteopathic school enrollment and graduate medical education in the United States. This resource is an update to the 2011 edition and provides data breakdowns by each state.

**Multi-million-dollar booster shots for UW-Madison nursing, tech start-up programs**
A state-funded grant designed to address the nursing shortage in Wisconsin announced distribution of the grant to four University of Wisconsin campuses. The program plans to increase nursing faculty, student enrollments, and support workforce development in the field.

**Public Health**

**Race to Equity: A Baseline Report on the State of Racial Disparities in Dane County**
The Wisconsin Council on Children and Families reports on deep and persistent racial disparities in health, education, child welfare, criminal justice, employment, and income are common across the United States and in Wisconsin. The WCCF Race to Equity project is launching a multi-year “Project to Reduce Racial Disparities in Dane County” and plans to move into a broader effort to reduce racial disparities across Wisconsin. This baseline report on racial disparities summarizes the project’s first year of data collection, analysis, and community feedback.

**Wisconsin’s premature birth rate not improving, but Milwaukee’s drops**
The March of Dimes reports that Wisconsin has not succeeded in reducing the number of babies born too soon, which puts their health at risk and incurs substantial cost. But preliminary data from the Milwaukee Health Department shows that the city has made some progress, though public health officials caution that comparing two years' data doesn't establish a reliable trend. Last year, 10.6% of babies born in Milwaukee were born before 37 weeks' gestation, down from 11.3% in 2011. The state's preliminary 10.5% premature birth rate for 2012 inched up from 10.4% in 2011. Read the [Milwaukee Journal Sentinel coverage](#).

**Wisconsin hospitals sent newborn blood samples late; avoided performance reporting**
The Milwaukee Journal Sentinel reports that hospitals across Wisconsin are failing to promptly send babies' blood samples to the state lab for testing, delaying potentially lifesaving treatment for newborns with rare yet deadly disorders. Also reported: More than half of state labs do not process newborn samples on weekends, creating critical delays in the process.

**Taskforce on Mental Health Issue Final Report**
Established in February 2013, the Speaker’s Taskforce on mental health issued a final report in October 2013. Many of the recommended bills have passed the Wisconsin State Assembly. Key recommendation address hospital diversion, emergency detention, and civil commitment; mental health care and treatments for minors; jails and corrections system; Medical Assistance; HIPAA and electronic medical records; primary care and psychiatry shortage grant program; certification of outpatient mental health clinics; mental health services provided by counties; individual placement and support; and reduction of stigma. See the “Pending Legislation” section below.

**How can Milwaukee County’s Broken Mental Health System be Fixed?**
Meg Kissinger of the Milwaukee Journal Sentinel reports nine recommendations to improve Milwaukee County's mental health system. The article provides mental health resources and who to contact for
each recommendation. A recent Health Affairs article outlined the changes in insurance coverage and cost for mental health services for people with Medicaid, private insurance, and no coverage over the past decade.

**UW Madison team probes home health environments with virtual reality**
A multi-disciplinary team of researchers at UW-Madison received $2.5 million from the Agency for Healthcare Research and Quality to examined in-home patient ability to manage health conditions. The approach uses data from real household environments, home health care expertise, and virtual reality technology.

**More asbestos-like material found at iron ore mine site, geologist says**
Department of Natural Resources reported findings of potentially harmful asbestos-like minerals at a proposed iron ore mine site in Ashland County. Additional testing is needed to address the presence and extent of asbestos-like material in the rocks and potential health and environmental risks.

**National Lead Prevention Week**
October 20 to 26 was National Lead Poisoning Prevention Week. UW Research reported on lead interaction with school suspensions. Results showed that children exposed to lead were more likely to be suspended from school by the 4th grade than children who had no lead exposure. Lead poisoning continues to be a critical public health issue in Wisconsin. Further information on childhood lead exposure and prevention can be found on the Lead Safe website.

**WMJ Brief: Progress in Reducing Premature Deaths in Wisconsin Counties, 2000-2010**
UW researchers found that premature death rates have declined over the 10-year period of 2000 to 2010, meeting the Healthy People 2020 goal. Wisconsin counties were ranked on their status and progress in reducing premature deaths. The study emphasized that all counties have equal opportunity for progress regardless of initial death rate, size, how rural they are, or income.

**Pregnant Woman Fights Wisconsin’s Fetal Protection Law**
A woman in Wisconsin is filing in federal court to have WI Act 48.113, the so-called cocaine-mom law, declared unconstitutional on its face and as it was applied to her. She was taken to jail and involuntarily assigned to a treatment center after giving her medical history, which included use of painkillers, during a prenatal care visit. The case has received national attention, and includes the National Advocates for Pregnant Women as co-counsel.

**Food Stamp benefit reductions affecting 1 out of 7 Wisconsin Residents; 379,000 Children**
The Wisconsin Budget Project reported that, last year, 1/3 of Wisconsin children received food stamp benefits, and that the November 1st reductions in FoodShare benefits will affect nearly 900,000 Wisconsin families. The cuts are happening due to the expiration of the American Recovery and Reinvestment Act (ARRA) in 2009 that allowed temporary increase in food stamp benefits for recipients.

**Managing Prison Health Care Spending**
This report examines state spending on inmate health care and factors contributing to higher costs. Review of strategies other states have taken to relieve this fiscal challenge and recommendations for inmate health care improvement is further discussed.
Adams County Fights Back to Decrease Cancer Death Rate
In response to high cancer rates, the Adams County Cancer Awareness Team (ACCAT) was established in 2011 to address cancer prevention, screening, and survivor rates. ACCAT’s achievements were recognized statewide, with plans to expand to other rural areas in the state. Those interested in being part of the effort to improve cancer prevention in Adams County or more information may contact Sarah Grosshuesch at (608) 339-4379.

Meth explodes back in central Wisconsin
The Wausau Daily Herald highlights a rising problem of methamphetamine. A shift in the supply chain as well as a newer, quicker, and more feasible way of making meth contributes to the meth prevalence. Debate focuses on the merits and effectiveness of treatment instead of incarceration.

Clinics, Hospitals, and Health Plans

Meriter Merges with UnityPoint Health
Meriter Health Systems announced new affiliation with UnityPoint Health, a health system based in Iowa, to be completed next year. Meriter will continually update information and FAQs throughout this transition.

MetaStar to work with rural hospitals to improve emergency transfers
The Medicare quality improvement organization for Wisconsin is one of eight pilot states in a CMS funded initiative to improve the collection of data on emergency transfer communication, to improve quality of care, outcomes, and safety for patients transferred from rural hospitals.

OutSmart Flu to Track Outbreak
The University of Wisconsin Department of Population Health Sciences is using smartphones to track flu patterns on campus through student-reported symptoms on the app - in essence, crowsourcing flu surveillance on campus.

Columbia St. Mary’s Opening Chronic Disease Clinic
Columbia St. Mary’s, along with partners, proposed opening a chronic disease management clinic in the Milwaukee northwest side. The clinic aims to assess and treat uninsured individuals with hypertension and diabetes.

Health Costs for Large Employers See Slight Bump
A survey tracking health care costs for large Milwaukee employers shows a slight increase in costs. The results in Milwaukee are similar to surveys done nationally.

The Joint Commission: Top Performer on Key Quality Measure
The Joint Commission’s Top Performer on Key Quality Measures program recognizes accredited hospitals that excel on accountability measure performance. Thirty-one facilities in Wisconsin were recognized, some of which are Critical Access Hospitals (CAHs). The program is based on data reported in the previous year about evidence-based clinical processes that are shown to be the best treatments for certain conditions.
Assurant Health to cut 65 jobs in Milwaukee
Assurant Health finalized that sixty-five positions will be eliminated before next year. These job cuts are due to less underwriting for some health care products under the Affordable Care Act as well as to reduce operational costs.

St. Mary's Hospital, Dean Health parent SSM Health Care to cut jobs
A number of layoffs are projected for SSM Health Care, which recently merged with Dean Health System. Wisconsin Health News reported that there will be 146 positions eliminated in Wisconsin, but only 38 employees in Wisconsin are losing their jobs.

WPS Health Insurance plans to cut 175 jobs
WPS Health Insurance plans to eliminate roughly 175 jobs through 2014, including 95 jobs by the end of this year. The initial job cuts stem from the closing of the Health Insurance Risk-Sharing Plan, or HIRSP, which was scheduled to end on December 31, 2013. HIRSP insures people who have pre-existing health problems and who are denied coverage by health insurers. WPS processes HIRSP's claims. HIRSP is ending because the ACA/Obamacare requires that health insurers cover people with existing health problems and cannot charge them higher rates.

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- Other health reform Updates and Resources
  - HHS: No Individual Responsibility Payment if Enroll by March 31, 2014
    - And a law discussion from the [Washington Post](https://www.washingtonpost.com)
  - HHS Finalized Regulations for Oversight and Financial Standards for the Marketplaces
    - HHS also released a fact sheet on the rule.
  - **HR 2775: Impact of the Continuing Appropriations Act of 2013 on Health Care Reform**
    - Health Reform GPS and the Center on Budget and Policy Priorities providing detail on eligibility verification provisions.
  - **Medicaid Disproportionate Share Hospital (DSH) Final Rule**
    - The rule set out the formula that will determine the reductions in each state. HHS also released a corresponding fact sheet.
  - U.S. Immigration and Customs Enforcement: Clarification of Existing Practices Related to Certain Health Care Information
  - Common Wealth Fund: Helping Consumers Understand their Coverage Options, from Coast to Coast
  - Health Policy Briefs: Navigators and Assistors
  - State Coverage Initiatives Federal Health Reform Resources
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  - Updated Frequently Asked Questions
  - Consumer Resources on Health Reform
- New and Updated Resources from the Commonwealth Fund
  - Health Reform Resource Center
- New and Updated Resources from HRSA
- New and Updated Resources from AHRQ
  - New Toolkit on Rapid-Cycle Patient Safety and Quality Improvement
- Wisconsin Toolbox:
  - [Enrollment for Health Wisconsin](http://www.E4Health.org): A clearinghouse of resources for those engaged in building awareness and providing training about the Affordable Care Act’s health insurance reforms, and directly assisting and enrolling Wisconsin consumers in health insurance through the ACA marketplace or BadgerCare.
    - Statewide Enrollment Directory
  - [InfoGraphic: The Future of Health Insurance in Wisconsin](#)
  - [Wisconsin DNR Air Quality Maps](#)
  - WCCF: [Wisconsin ACA FAQ](#)
EVENTS AND ANNOUNCEMENTS

E4Health: Calendar of ACA and BadgerCare Events and Trainings, ongoing

DHS Annual FOCUS Conference, November 19, Wisconsin Dells

IHI Forum Satellite Broadcast: National Forum on Quality Improvement in Health Care, Dec 10-11

EveryWoman’s Journal, December 4, Madison, WI

Perinatal Foundation Holiday Gathering and Fundraiser, December 5, Madison

MetaStar IHI Forum Satellite Broadcast, December 10-11, Madison, WI

Small Business Administration Affordable Care Act 101 webinar, December 19 webinar

Wisconsin Health News Lunch Briefing – Health Care Reform, December 10, Madison, WI

READING ROOM

This Section is being discontinued and moving to our Twitter platform. Please follow us on Twitter @UWHealthPolicy to receive notice of relevant reports, research, federal and state news.