

Catch-Up Briefing Report
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An annotated compilation of selected Wisconsin health care news stories through September 8, 2014. Archived editions can be found [here](#).



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The UW Population Health Institute's *Catch-Up Briefing* is delivered bi-monthly. Check our web site for additional information and updates: <http://www.pophealth.wisc.edu/uwphi/news.htm>. To subscribe or unsubscribe, reply to alfisher5@wisc.edu with the word "subscribe" or "unsubscribe" in the subject line. *Sources for the Catch-Up Briefing are listed at the end.*

In This Issue

STATE NEWS

[Health Care Reform Implementation in Wisconsin](#)

[Medicaid/BadgerCare](#)

[Workforce/Health Professionals/Training & Education](#)

[Public Health](#)

[Clinics, Hospitals, and Health Plans](#)

RESEARCH AND PROGRAM TOOLS

EVENTS AND ANNOUNCEMENTS

SELECTED TWEETS FROM OUR TWITTER FEED

STATE NEWS

Health Care Reform Implementation in Wisconsin

Wisconsin Awarded \$994,403 in ACA Navigator Grants

U.S. HHS has awarded \$994,403 to help Wisconsin consumers navigate their health care coverage options in the ACA Health Insurance Marketplace. Three agencies have received grants: Northwest Wisconsin Concentrated Employment Program, Inc., Covering Kids and Families at the University of Wisconsin, and Partners for Community Development, Inc. The full list of grants awarded nationally, with brief descriptions, is [available here](#). An announcement has also been released detailing the [Navigator award for Covering Kids and Families-Wisconsin](#).

[ACA Marketplace Offers Special Enrollment Period for former BadgerCare Members](#)

Following a [letter](#) from [Senator Tammy Baldwin](#) to the Centers for Medicare and Medicaid Services (CMS), an ACA special enrollment period (SEP) has been announced for former Wisconsin BadgerCare members who lost their coverage after Governor Walker's entitlement reforms went into effect in April (discussed further below). The SEP is for 60 days- ending November 1. The [Milwaukee Journal Sentinel](#) article goes into further detail.

[Conflicting Court Rulings May Affect WI Residents' Access to ACA Subsidies.](#)

In cases two separate cases -- [Halbig v. Burwell](#) and [King v. Burwell](#) -- pertaining to the Affordable Care Act (ACA) federal health insurance subsidies in federal and state-partnership Marketplaces, two federal appeals courts issued contradictory rulings on July 22. The subsidies will continue to be issued as these and other cases continue through the legal process. It is anticipated that both these cases will request review by the full appeals courts. Similar cases are still pending - [Pruitt v. Burwell](#) (US District Court Eastern District of Oklahoma) and [Indiana v. IRS](#) (US District Court Southern District of Indiana).

These cases are significant, as [91 percent](#) of Wisconsin residents who selected an ACA plan through the federally-facilitated Marketplace received subsidies for the health plans they purchased in the 2014 open enrollment period. Without these subsidies, [Avalere Health](#) estimates Wisconsin Marketplace consumers would see a 70-74% increase in premium costs.

[Four Wisconsin Health Plans Exceeded MLR](#)

In Wisconsin, four health plans in the individual market exceeded the ACA's Medical Loss Ratio (MLR) provision in 2013, triggering customer refund. The companies' total combined refund exceeds \$2.5 million. The MLR provision requires that at least 80 percent of premium dollars paid to insurance companies must be used for medical costs. Any insurance company not meeting that ratio must refund the spending above the limit to their members. The [Milwaukee Business Journal](#) wrote about the refunds. The Centers for Medicare and Medicaid Services (CMS) also released a general overview of [consumer benefits from the MLR](#).

[OCI Amends Contraceptive Coverage Enforcement Post-Hobby Lobby](#)

Wisconsin OCI announced that, although the federal [Hobby Lobby](#) decision preempted the state's contraception insurance mandate by striking down the federal mandate for private, closely held for-profit companies, the state will still require employers with religious objections to contraception to offer standard insurance packages and must provide all employees a separate contraceptive package. Wisconsin's 2009 contraceptive coverage law does not currently have a religious exemption. The [National Women's Law Center](#) authored a brief interpreting the legal interaction between Wisconsin's law and the federal Supreme Court decision. The Department of Labor also updated their [FAQ on preventive services disclosures](#), reminding employers that they must notify employees prior to benefit changes.

Medicaid/BadgerCare

[30% of Former BadgerCare Members Attain ACA Coverage](#)

The Wisconsin Department of Health Services (DHS) released a data-match with CMS in mid-July regarding the status of 62,776 individuals who lost BadgerCare eligibility on April 1, 2014 following

implementation of the [Governor's Entitlement Reform](#) policy. The data released showed that of the 62,776 transitioning BadgerCare members, 18,801 (30%) selected a Marketplace plan, 4,867 (8%) had a subsequent loss of income and continued to be eligible for BadgerCare. Insurance status remains unknown for 38,116 (62%) former BadgerCare enrollees. The report also noted that 34,915 (56%) of those who lost BadgerCare in April had an income above 133% of the federal poverty level.

The UW Population Health Institute provided a non-partisan data review of Wisconsin's experience with Medicaid reforms and the Affordable Care Act in this [chartpack](#). The Wisconsin Council on Children and Families also produced [an analysis and advocacy statement](#) related to DHS-released data.

[Legislative Fiscal Bureau Estimates State Savings of \\$206 Million Under Full Medicaid Expansion](#)

The Wisconsin Legislative Fiscal Bureau (LFB) prepared a memo for state Senator Shilling estimating the costs over the current two year state budget (biennium) if the state had expanded Medicaid under the ACA to 133% of the federal poverty level (FPL). The report shows that increased federal funding to Wisconsin would have created savings of \$206 million over the biennium and average monthly enrollment for adults would have been 87,000 higher. Coverage and reactions to this report have been broad, including: Journal Sentinel [story](#); Wausau Daily Herald [story](#); Journal Sentinel [editorial](#); [Senator Baldwin](#) release; and Joint Finance Co-Chair [Rep. Nygren](#) editorial in the Wisconsin State Journal.

[White House Brief: The Consequences of State Decisions Not to Expand Medicaid](#)

The White House Council on Economic Advisers released a report, documenting the lack of health care access for individuals and the potential financial instability for the states 24 states that have decided not to expand Medicaid. The report, however, does not consider Wisconsin's unique situation as the only state in the country that did not expand Medicaid as prescribed by the ACA while also providing eligibility up to 100% FPL for all adults, thus avoiding a coverage gap. The [Associated Press](#) story on the report highlights the findings as well as the Governor's response.

[GAO Report: WI Spends \\$6,000-7,499 per Medicaid Beneficiary](#)

The U.S. GAO recently published a report to examine Medicaid spending and factors that influence such spending by state. Wisconsin spends approximately \$6,000 - \$7,499 per Medicaid beneficiary. Nationally, this places Wisconsin in the same spending range as 19 other states; 25 states spend more per beneficiary and 6 states spend less per beneficiary. Federal expenditures totaled about \$267 billion in fiscal year 2013; yet, the Congressional Budget Office projects that with the expansion of Medicaid expenditures will grow to about \$576 billion by FY2024.

[WI Shows Low Growth in Medicaid/CHIP Enrollment](#)

Medicaid and CHIP enrollment data, released by the Kaiser Foundation, shows Wisconsin's increased 1.4% since the period before open enrollment began, ranking Wisconsin 43rd among states in enrollment gains. This low rate of growth may reflect Wisconsin's relatively higher levels of eligibility prior to the ACA, and also the effect of the 2014 entitlement reforms. As of the end of June 2014, the state had 1,178,405 members on BadgerCare and other programs.

[Ops Memo 14-36: Phase Two Updates to the Single Streamlined Application](#)

The CARES system that determines eligibility for BadgerCare in Wisconsin continues to be updated to reflect changes necessary to meet the federal "single streamlined application" requirements to allow for both BadgerCare and Marketplace determinations. Changes outlined in this memo will be effective in the Wisconsin CARES system as of September 28, 2014. There have also been [updates to the Income](#)

[Maintenance Quality Assurance \(IMQA\) Second Party Tool](#), which allows for reviews of eligibility determinations for the BadgerCare program.

[WI Revised Estate Recovery Plan Takes Effect](#)

Under the new plan, which took effect August 1, 2014, the Wisconsin Medicaid program will expand asset recovery for people who pass away while enrolled in Medicaid-covered long-term care services. A new fact sheet describes the assets recovery program.

Workforce/Health Professionals/Training & Education

[Marshfield Clinic Cancels Plan for Dental School; Returns \\$10 Million Grant to State](#)

In 2010, Marshfield Clinic received a restrictive grant to build a dental school to improve Wisconsin's access to oral health care and education. Instead, Marshfield Clinic implemented a dental residency program to train rural dental practitioners and enhanced existing oral health programs. Dr. Brian Ewert, Marshfield Clinic executive director, stated that since their initiatives 100,000 patients have received dental care, which met the state's goal without utilizing state funds. The grant for the dental school remains unused and will be reallocated to the state.

[Osteopathic College Being Planned for Jefferson, WI; Med Schools, Hospital Association Opposed](#)

The *Wisconsin State Journal* and the local paper, the [Bradenton Herald](#) report that former UW Foundation executives are working on developing an osteopathic medical school in Jefferson after a prior developers' proposal fell through due to financial issues. The addition of a third medical school aims to increase primary care in underserved areas and retain state medical graduates.

Meanwhile, the President of the Wisconsin Hospital Association voiced concern: ["Wisconsin Does Not Need Another Medical School."](#) And The Deans of both of Wisconsin's existing Medical Schools - Dr. Golden of the University of Wisconsin School of Medicine and Public Health, and Dr. Raymond of the Medical College of Wisconsin, [opined against the proposed third school proposal](#), saying the school would be duplicative and create bottlenecks in the state's residency training capacity. Physician shortages and graduate medical education discussions continue with a recent perspective, [The Economics of Graduate Medical Education](#), in the *New England Journal of Medicine*. The UW Population Health Institute also published a brief last year on [How Many Doctors Will Wisconsin Need?](#)

[UW SMPH Receives \\$12 Million Research Grant for New Smoking Cessation Study](#)

The UW Center for Tobacco Research and Intervention (UW-CTRI) at the School of Medicine and Public Health (SMPH) received a grant from the National Institute of Health and the National Cancer Institute for a new smoking cessation program called Breaking Addiction to Tobacco for Health (BREATHE). BREATHE, an evidence-based program, breaks tobacco addiction by identifying effective treatment for every phase of quitting. The UW-CTRI collaborates with health systems in Madison and Milwaukee to recruit patients to partake in the study. Electronic health records will be modified to identify smokers when they seek healthcare and invite them to participate in the program.

[Milwaukee's Joseph J. Zilber School of Public Health on Way to Accreditation](#)

In June, UW-Milwaukee's School of Public Health received approval to begin the accreditation process. In the *Wisconsin Health News*, Dean Magda Peck stated the school could receive full accreditation by the end of 2016, making it the first accredited school of public health in the state.

[Judges question size of state's \\$1.15 billion malpractice fund](#)

The Milwaukee Journal Sentinel reports that two Milwaukee County judges questioned the size of the \$1.15 billion Injured Patients and Families Compensation Fund. The Injured Patients and Families Compensation Fund pays malpractice awards exceeding \$1 million. The fund has been scrutinized when separately assessing the validity of the state's \$750,000 cap on noneconomic damages for such things as pain and suffering that can be awarded in medical malpractice cases.

Public Health

[WI Adult Obesity Rate Ranks 22nd Nationally](#)

Wisconsin now has the 22nd highest adult obesity rate in the nation, according to *The State of Obesity: Better Policies for a Healthier America*, a report from the Trust for America's Health (TFAH) and the Robert Wood Johnson Foundation (RWJF). The annual report found that Wisconsin's adult obesity rate is 29.8 percent. The UW School of Medicine and Public Health Associate Dean Patrick Remington discusses the meaning of these data [in the Milwaukee Journal Sentinel](#).

[Health Affairs: Life Expectancy Gap Between Whites and Blacks Not Improving in Wisconsin](#)

Research published in *Health Affairs* analyzing state-specific trends in life expectancies between blacks and whites found that nationally the gap has decreased. However, in Wisconsin, the [Journal Sentinel](#) reported that the gap between black and white women has increased significantly from 4.9 years to 6.4 years. Specifically, although black women's life expectancy improved by 0.4 years, white women's life expectancy improved by 2 years. Explanation for Wisconsin's growing gap was not provided.

[Community Health Workers Filling Gaps in Health System in Milwaukee](#)

Health systems, public health departments and others in the Milwaukee area are using community health workers to address broader problems that may underlie the persistent gaps in health between people who are poor and those who are not, reports the *Milwaukee Journal Sentinel*.

[Study reports 740,000 Wisconsin residents face food insecurity](#)

A recent study by Survey of the Health of Wisconsin (SHOW) revealed that 13 percent of Wisconsin residents who participated in the survey reported they worried about going hungry in the past year. Food insecurity has been traditionally deemed an urban issue. However, the results show that food insecurity continues to be a major problem for people across all regions of Wisconsin. In a [news release](#), researchers indicated the importance of assessing patients' risk for food insecurity and negative health implications during medical visits.

[New Report Details "The Burden of Suicide in Wisconsin"](#)

Wisconsin DHS along with the Injury Research Center at Medical College of Wisconsin and Mental Health America released a new report to help guide state suicide prevention programs. Some key findings during 2007-2011 include: on average, 724 people committed suicide annually; suicide rates were highest among 45-54 year olds; and 51% of suicides had a concurrent mental health problem. The report also suggests evidence-based preventative measures for use in high-risk populations.

[Plan Released to Address Domestic Violence in Wisconsin](#)

The Governor's Council on Domestic Abuse and End Domestic Abuse Wisconsin authored a report outlining a long-range plan for a safe Wisconsin over the next six years, including budgetary and policy recommendations. The budget request calls for nearly \$20 million per year in additional funds.

[Black Health Coalition Loses \\$750,000 in Health Start Funding](#)

The HHS Health Services and Research Administration (HRSA) announced \$65 million in Healthy Start grants to reduce infant mortality, with no funding allocated to Wisconsin. The [Black Health Coalition](#) in Milwaukee had been receiving this funding since 1998 to operate their Milwaukee Healthy Beginnings Project. According to the [Milwaukee Journal Sentinel](#), HRSA explained that this was the first year the grants were awarded through a competitive grant process and the Black Health Coalition did not score highly enough to be funded.

[WI Receives Over \\$14 Million in HHS Funding for Health Care and Public Health Disaster Preparedness](#)

[Wisconsin's plan](#) has received funding from the Department of Health and Human Services (HHS) for \$3.6 million in hospital emergency preparedness and \$11.5 million in public health emergency preparedness. Jointly funded from the federal programs for Hospital Preparedness and Public Health Emergency Preparedness, the funds aim to encourage cooperation between health care and public health systems in responding effectively to events such as disease outbreaks and natural disasters.)

[UWPHI Receives \\$12 Million to Continue Building Culture of Health](#)

The Robert Wood Johnson Foundation will continue to fund the UWPHI County Health Rankings and Roadmaps program with \$12 million for the next two years. The program compiles and publicly shares health data of every county in every state. The rankings serve as guides for communities to improve health in specific areas.

[Health First Wisconsin Closes](#)

Formerly SmokeFree Wisconsin, Health First Wisconsin announced that the 14 year old organization closed as of August 31, 2014. Though reasons for the closure were not disclosed, the [Wisconsin State Journal](#) covered the story in a bit more detail.

[Congenital Heart Disease Added to Newborn Screening](#)

Wisconsin DHS added critical congenital heart disease (CCHD) to the list of newborn screening tests. Effective in July by emergency rule, all medical providers are mandated to screen every infant born in or out of the hospital for CCHD. Prior to the emergency rule, a majority of hospitals have been routinely screening for CCHD. Infants are at a risk for death or significant disability if not screened for CCHD appropriately. [Project SHINE](#) offers health providers additional information about screening protocols.

[Wisconsin Selected for NGA Academy on Prescription Drug Abuse](#)

Gov. Walker announced that the National Governors Association has chosen Wisconsin, along with five other states, to participate in a yearlong policy academy on reducing prescription drug abuse. The academy will develop best practices and statewide action plans to combat the fastest growing drug problem in the United States.

[EEOC Challenges Orion Energy Wellness Program in Court](#)

The United States Equal Employment Opportunity Commission (EEOC) filed suit in U.S. District Court in Green Bay against Manitowoc-based Orion Energy Systems. The complaint [from the EEOC](#) alleges the company required medical exams and inquiries that were not job-related, but part of an employee wellness program, and subsequently fired an employee who objected and refused to participate. [HTR News](#) in Manitowoc covered the story.

[UW Awarded \\$2.1 Million to Assess Peer Community Support for Aging](#)

A University of Wisconsin-Madison research team led by Dr. Elizabeth Jacobs was awarded \$2.1 million by the Patient-Centered Outcomes Research Institute (PCORI) to study “The Effectiveness of Peer-to-Peer Community Support to Promote Aging in Place.” The study will compare community-based, peer-to-peer support to standard community services in the promotion of health and wellness in older adults at risk for frequent use of acute-health care services and/or nursing home placement.

[Expansion of Music and Memory Program for Alzheimer’s Disease Patients](#)

CMS has granted Wisconsin DHS permission to implement its Music and Memory program to another 150 nursing homes this fall. [Wisconsin Music and Memory Program](#) is designed to help people with Alzheimer’s and related dementias find meaningful connections in their daily lives through individualized music. UW-Milwaukee researchers are investigating the effects of individualized music on residents’ behaviors in comparison with current treatment with anti-psychotic or anti-anxiety medications. DHS has also collaborated with the Wisconsin Alzheimer’s Association to further the program’s expansion.

Clinics, Hospitals, and Health Plans

[Six System Partnership Will Cover 90% of WI Residents](#)

Six of the state’s most prominent healthcare organizations --Aspirus, [Aurora Health Care](#), [Bellin Health](#), [Gundersen Health System](#), [ThedaCare](#), and [UW Health](#) -- formed a statewide partnership with the stated goal to improve access and value for patients across the state. Together, the partnership will offer up to 90% of Wisconsin residents as well as many in neighboring states access to 44 hospitals, over 5,500 physicians and a shared electronic medical records platform. The six organizations are part of the Anthem Blue Cross and Blue Shield’s Blue Priority network, which is available through private insurance brokers, the federal marketplace, and private exchanges. The partnership is open to working with other insurers, and will be reaching out to large employers.

[BCBS Corrects Dental Insurance Plan Error](#)

Blue Cross Blue Shield’s enrollment and billing system was not updated to reflect statewide coverage changes resulting in a failure to activate coverage for 299 people who purchased standalone dental plans on the federal marketplace in Wisconsin. Consumers thought they were covered, but did not receive verification. BCBS agreed to retroactively process or reprocess claims up to the effective date of coverage. This incidence is the only formal enforcement action against an insurer in the federal marketplace by the Wisconsin Office of the Insurance Commissioner at this point in time.

[Report: Comparatively Rich Benefits and High Cost for WI State Employee Plans](#)

A new report by the Pew Charitable Trust and the McArthur Foundation compares costs and characteristics of state employee health plans, offering national benchmarks. Wisconsin’s state employee health plans had an actuarial value of 97%, compared to the nationwide average of 92%. This means that the average Wisconsin state employee plans cover 97% of the costs of benefits across the enrolled population. Costs were also high for the Wisconsin state employee plan, with the average total premium per employee at \$1,331, compared to a nationwide average of \$963. The [Associated Press](#) covered the report.

[Study Finds Wisconsin Hospitals Improving at Controlling Costs; Better than National Average](#)

The Greater Milwaukee Business Foundation on Health, Inc. released the results of a study conducted by the consulting firm Milliman on southeastern Wisconsin hospital costs from 2003 to 2012. The study

compared commercial insurance payment levels for southeastern Wisconsin hospitals to the national hospital component of the Consumer Price Index (CPI). Although individual health system payment levels varied, overall the state payment levels have slowed considerably, increasing at half the rate of the national averages. The [Journal Sentinel](#) and the [Business Journal](#) provided additional insight on the study.

[Children’s Hospital of Wisconsin Receives \\$9.5 Million to Expand Special Needs Program](#)

Wisconsin DHS has allotted Children’s Hospital of Wisconsin a \$9.5 million HHS grant to strengthen the Special Needs Program model. The model consists of a care team of medical professionals working with children and families in need of continuous medical care. This funding is part of CMS’s Health Care Innovation Awards.

[Health Centers Receive \\$500K for Mental Health Services, \\$250K for PCMH Facilities Improvement](#)

Under the ACA, HHS awarded funding to health centers nationally to establish or expand behavioral health services, including Wisconsin’s [Kenosha Community Health Center and Lakes Community Health Center](#). Health centers will use the new funding to hire new mental health professionals, implement mental health and substance use disorder services, and employ care models integrating mental health into primary care. Kenosha Community Health Center was also the only health center in Wisconsin to receive \$250,000 of the patient-centered medical home facility improvement grant from HHS’ HRSA.

[UW Hospital and Meriter-UnityPoint Health Strengthen Partnership for Mother-Baby Care](#)

Historically, UW Hospital and Meriter-UnityPoint have collaborated on various aspects of improving maternal care. Now, UW School of Medicine and Public Health and Meriter-UnityPoint Health formally signed a joint agreement to collaborate on inpatient obstetrics services, neonatology services, perinatology clinic, newborn transport and midwifery. The partnership helps unite related mother and baby services under the same provider leadership.

[Aurora Health Care and Bay Area Medical Center Co-Venture Partnership](#)

Aurora Health Care and Bay Area Medical Center (BAMC) in Marinette established a joint venture to allow more shared resources and improve quality and effective care in the community. The joint venture will provide Aurora with a hospital for its current physicians and clinics in the Marinette area. In exchange, BAMC gains access to Aurora physicians and care management systems.

[Froedtert Health and Ministry Health Care Pursue Insurance Plan](#)

Froedtert Health and Ministry Health Care have agreed to joint ownership of Network Health, a Menasha-based health insurance plan, to further expand health coverage to southeastern Wisconsin residents. Integrated Health Network of Wisconsin, a consortium of health systems and providers including Froedtert, Ministry, Agensian HealthCare, Columbia St. Mary’s, Wheaton Franciscan Healthcare and Medical College of Wisconsin, serves as the provider network for the new insurance plan. The [Milwaukee Journal Sentinel](#) reports that the earliest Network health plan will be available late 2015 in the Milwaukee market.

[UW Hospital and Clinics Named Wisconsin’s Top Hospital by U.S. News and World Report](#)

This year’s edition of U.S. News and World Report guide to *Best Hospitals* ranked UW Hospital and Clinics the best hospital in the state for the third year in a row and among the nation’s top 50 hospitals. Rankings are based upon various performance measures and, reputation among surveyed physicians within 16 medical specialties. Hospitals ranking below the top 50, but still within the top 25% in a specialty are considered “High-Performing.” UW Hospital ranked *Best* in [specialties](#) such as ear, nose

and throat, cancer, and geriatrics and *High-Performing* in cardiology and heart surgery, diabetes and endocrinology, and gastroenterology and GI surgery.

[UW Med Flight Expands Service](#)

Med Flight has expanded their service to operate a 24/7 service with two helicopters and additional staff support. Previously, Med Flight was limited to one medical helicopter during the hours of 9pm to 9am. The new overnight service will make the Level 1 trauma center more accessible in the region.

RESEARCH AND PROGRAM TOOLS

- Information on the Health Insurance Marketplace and Health Care Reform: healthcare.gov
 - [Spanish Language Marketplace](#)
 - [Marketplace Enrollment Data](#)
 - HHS [Partner Official Resources](#)
- Centers for Medicare and Medicaid Services (CMS)
 - [Redeterminations Proposed Rules for 2015](#) and [overview of the guidance](#)
 - [Auto-Enrollment Process Finalized, Fact Sheet](#)
 - Information and Tips for Assisters: [Helping Consumers Affected By Grace Periods Related to Non-Payment of Premiums](#)
- New and Updated Resources from the [Kaiser Family Foundation](#)
 - Visualizing Health Policy Infographic: [Understanding the Effect of Medicaid Expansion Decisions in the South](#)
 - [Medicaid Spending Growth, FY 2007-2012](#)
- New and Updated Resources from the [Commonwealth Fund](#)
 - [Health Reform Resource Center](#)
 - [Health Care Coverage Under the Affordable Care Act-A Progress Report](#)
 - [What Would Happen if Health Care in Your State Improved?](#)
- [Enroll America](#) Resources
 - [Evaluation of Enroll America Work](#)
- New and Updated Resources from [HRSA](#)
- New and Updated Resources from [AHRQ](#)
- NEJM- [Health Reform and Changes in Health Insurance Coverage in 2014](#)
- [State Refor\(u\)m](#)
 - [Individual Marketplace Pediatric Dental Plan Chart](#)
- Wisconsin Toolbox:
 - [Affordable Care Act & Medicaid Reforms in Wisconsin: Enrollment Trends Chartpack](#)
 - [Enrollment for Health Wisconsin \(www.E4Health.org\)](#)
 - [Statewide Enrollment Directory](#)
 - [Milwaukee Enrollment Directory](#)
 - [Individual Health Insurance Carriers in Wisconsin](#)
 - [Wisconsin Hospital Association Workforce Data Report](#)
 - [Updated County Public Health Profiles from DHS](#)
 - [Wisconsin Reported Induced Abortions 2013 – DHS Report](#)

EVENTS AND ANNOUNCEMENTS

[Wisconsin Healthcare Engineering Association Conference](#), Green Bay, September 23-26
[WI Healthcare Public Relations & Marketing Society Annual Conference](#), Wisconsin Dells, Sept 24-26
[Incorporating Appropriate Use Criteria into Clinical Practice](#), Madison, September 29
[Oral-Systemic Health Conference](#), Marshfield, October 10
[Wisconsin Statewide Get-Ready-For-Open-Enrollment Conference](#), Wausau, October 21-22
[2014 Energy Summit](#), "Meeting needs for future cities and communities," Madison, October 29
[MetaStar Health Care Quality Symposium](#), Wisconsin Dells, November 4
[Wisconsin Council on Medical Education & Workforce](#), "Building a Culture for Patient-Centered Team Based Care," Wisconsin Dells, November 12

Selected Tweets from our Twitter Feed

Please follow us on [Twitter @UWHealthPolicy](#) to receive notice of relevant reports, research, federal and state news. Tweets below include national news and resources.

As usual, [@sarahkliff @voxdotcom](#) nails it with "8 facts that explain what's wrong with American health care" <http://bit.ly/1qhQvdO>

State Innovation 1332 Waivers will allow states, in 2017 to devise own alternatives to the [#ACA](#). [@GOVERNING](#) explains. <http://bit.ly/1t5st3W>

After slow growth, [@CMSgov](#) actuaries say the rate of health spending increase will grow to 6%, reports [@nytimes](#) <http://nyti.ms/1tx01MA>

"Little Evidence of the [#ACA](#) Increasing Part-Time Work So Far" reports [@urbaninstitute](#) [@RWJF_Coverage](#) <http://bit.ly/1pP5m08>

[#NotWhatYouThought](#): More people may be getting their insurance through their employers, maybe due to the [#ACA](#) <http://nyti.ms/VlpzHq>

Many people spent 15 minutes or less researching their health insurance options, reports AFLAC Open Enrollment Survey <http://bit.ly/WiWS4p>

Number of uninsured expected to decline by about half, from 45M to 23M, by 2023, reports [@CMSGov](#) actuaries <http://go.cms.gov/1AbBifa>

How to improve [#ACA](#) marketplace websites so consumers can review provider networks, plan details, via [@urbaninstitute](#) <http://bit.ly/1tzOc4A>

Alternative [#Medicaid](#) expansion models via state waivers reviewed - AK, IA, MI - and lessons, by [@CenterOnBudget](#) <http://bit.ly/1p1R5Xt>

It's going to take a lot more ice buckets to fill the NIH funding gap, reports WaPo [@JasonMillman](#) <http://wapo.st/1pmqUjs>

Payment reform works best when consistent across payers, reports Multi-State Collaborative via Millbank Fund <http://bit.ly/1n2IntA>

Hospitals in P4P program do not show improvement. [@vox](#) [@sarahkliff](#) consider possible reasons. <http://bit.ly/1rjuQiI>

New research affirms: geographic variation in [#Medicare](#) costs not linked to variation in quality. Expensive ≠ better <http://bv.ms/1swrKKe>

Fact check of commonly held beliefs about ED use in [#Medicaid](#) - DYK ED use account for 4% of Medicaid spending <http://bit.ly/1od6AkV>

Hospitals fight proposal to move more physician training from hospitals to community-based clinics, via [@NPRHealth](#) <http://n.pr/1zUyuoA>

The proposed federal exchange auto-enrollment process: Implications for consumers and insurers, from [@millimanhealth](#) <http://bit.ly/1oghXb3>

How doctors make up for fee cuts with volume increases, via [@nytimes](#) <http://nyti.ms/1wWlrQ9>

Discussion in [@Health_Affairs](#) of federal [#waivers](#) for [#Medicaid](#) expansion and benefit of [#Arkansas](#) private option <http://bit.ly/1p2z9Nd>

[#ACA](#) looking to [#Medicare](#) Advantage standards to assure [#network](#) adequacy in health plans, reports [@nytimes](#) <http://nyti.ms/1pw8UQD>

Study: Patients have a lower likelihood of in hospital death if admitted through high-volume EDs, via [@AnnalsofEM](#) <http://bit.ly/1qkPnYq>

To simplify means testing, Timothy Jost [@Health_Affairs](#) proposes Universal tax credits to finance health insurance <http://bit.ly/Ub7Lo3>

So far with [#ACA](#), no uptick in new patient visits, visit acuity, to physicians, reports [@athenahealth](#) <http://bit.ly/1juOCsU>

Study: Six hours of [#sitting](#) cancels out one hour of physical activity, via [@MayoClinic](#) <http://bit.ly/1robkmJ>

Brief: potential uses of All-Payer Claims Databases for Rate Review, Other Regulatory Functions [@WCHQ](#) [#WHIQ](#) <http://bit.ly/U9WV1q>

[#ACA](#) challenged to assure that people who have enrolled can easily renew and keep coverage, reports [@MorningConsult](#) [http://themorningconsult.com/2014/07/biggest-obamacare-challenge-year-two/ ...](http://themorningconsult.com/2014/07/biggest-obamacare-challenge-year-two/)

U.S. electronic medical records systems are flirting with disaster-it's only a matter of when, reports [@politico](#) <http://politi.co/1mPmNKX>

[#choosingwisely](#) to reduce the provision of unnecessary health care tests and procedures, just got a musical boost: <http://bit.ly/1qB4hFV>

Three separate studies - [@commonwealthfnd](#), [@urbaninstitute](#), and [@gallupoll](#) - show [#ACA](#) reducing uninsured 8-11M, via <http://lat.ms/1qAEg9M>

Conservatives review ideas about how to fix [#healthcare](#) and [#Obamacare](#), <http://fxn.ws/1xNqdlm>

Study: Hospitals' use of electronic health records do not lead up charging, higher [#Medicare](#) billing, reports [@KHNews](#) <http://bit.ly/1syAkYq>

States pay for most elderly long-term care costs through [#Medicaid](#) - [@GOVERNING](#) reviews their policy innovations <http://bit.ly/1oh6VOd>

Vaccine costs are soaring, creating dilemmas for doctors and patients, challenging public health, reports [@nytimes](#) <http://nyti.ms/1soc1MD>

DYK that MN has lower premature death rate than WI? 749 yearly WI deaths could be avoided at MN's performance level: <http://bit.ly/1n8nGyD>

Information for *Catch-Up Briefing* is compiled from several sources, including websites and lists from the Agency for Healthcare Research and Quality, Blue Cross/Blue Shield, Commonwealth Fund, Georgetown Center for Health Insurance Reform and Center for Children and Families, Health Affairs, Kaiser Family Foundation, Milbank Quarterly, Milwaukee Journal-Sentinel, Milwaukee Business Journal, The New York Times, Urban Institute, U.S. Department of Health and Human Services, Wisconsin Council on Children and Families, Wisconsin Health News, Wisconsin Hospital Association, Wisconsin Medical Journal, Wisconsin Office of Rural Health, Wispolitics.com, Wheeler Report, Wisconsin State Journal, Wisconsin Technology Network, and others.