An annotated compilation of selected Wisconsin health and health care news stories from March 1, 2016 – April 28, 2016. Archived editions can be found here.

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STATE NEWS

Health Care Reform Implementation in Wisconsin

Survey: Wisconsinites Positive on Personal Health Care, Negative on Costs, State’s Overall System
A recent poll of adults in seven states reports that health care quality, coverage, and access are rated relatively high and compares high nationally, while costs are rated lower and worse than national. This is consistent with most other reports, showing Wisconsin to be a high cost, high price state in terms of health care provider prices and health insurance premiums, while quality of health care providers ranks among the highest nationally. Earlier this year, Wisconsin Manufacturers and Commerce released a survey reporting that Wisconsin residents believe they have access to high-quality health care but many face rising costs.
Report: 84% of the 239,034 Wisconsinites using Healthcare.gov Eligible for Advance Tax Credits

U.S. Department of Health and Human Services reports that 84% of Wisconsin residents who purchased health insurance through the federal Marketplace in 2015 were eligible for tax credits that reduced their premiums by an average of 73%. That equates to an average monthly premium reduction of $330, bringing average premium costs for healthcare.gov users in the state down to $125. Nationally, tax credits average 85%, with average premium costs of $106 per month after credits. Cost was not the only factor when selecting plans for many however; although 82% of Wisconsinites were eligible to select a plan with monthly premiums less than $100, only 52% did.

CMS Releases Data on 2015 Effectuated Enrollment; 2016 QHP Selection

As of December 31, 2015, 169,288 Wisconsinites effectuated their enrollment, meaning they kept an active plan and paid the first premium. Of the enrollees, 88.5% received a federal premium subsidy and 57% benefited from cost sharing reductions. The Silver plan choice proved most popular, attracting 120,560 enrollees, followed by the Bronze plan with 36,823 enrollees. At the close of the Open Enrollment period (Nov 1, 2015-Feb 1, 2016), 239,034 Wisconsinites selected ACA plans. CMS has also released data for 2016 QHP selection at the county and zip-code level.

Medicaid/BadgerCare

Medicaid-Related Actions in 2015-15 Session

The Wisconsin Council on Children and Families compiled a summary of the recent legislative session’s focus on three key areas: behavioral health, dementia care, and family planning. Behavioral health bills enacted include funding a behavioral health care coordination pilot project for Medicaid recipients, and a bill that makes it easier for schools to provide mental health services. Dementia-related legislation include $1 million in funding for respite care under the state’s Alzheimer’s Family and Caregiver Support Program, and funding for dementia training for county mobile crisis teams. Two bills were passed that will strip Planned Parenthood from receiving Title 10 federal funding and lower Medicaid reimbursements for prescription drugs provided by the clinic.

Governor Signs Behavioral Healthcare Pilot Bill Into Law

Governor Walker recently signed a bill into law that will require DHS to develop two behavioral health pilot projects for Medicaid recipients and create a tracker to monitor inpatient bed availability in the state’s psychiatric hospitals. The two pilots will test coordinated care delivery and payment models, and reimburse psychiatrists for providing consultations to primary care providers who treat patients with mental illness. The measures aim to increase the coordination of mental health care in the state, as well as test models for reducing costs and improving access to mental health services for Medicaid patients.

Walker Signs Long-Term Care District Bill

The Governor signed into law Wisconsin Act 215 that will allow DHS to contract with a county or long-term care district to operate a care management organization outside of the geographic county or district. The changes pave the way for the FamilyCare/IRIS 2.0 program. DHS recently released concept papers for the proposed re-design of the Family Care and IRIS programs. The new plan would initially apply to 64 Wisconsin counties. The Alliance of Health Insurers (AHI) has released two statements here and here calling for support of the Governor’s proposal. The Wisconsin Long-Term Care Coalition has expressed concern about the lack of specifics in the proposal, and recently sent a memo urging Joint Finance Committee members to defer action until more information can be obtained.
DHS Outlines New Division of Medicaid Services
The Wisconsin Department of Health Services (DHS) recently submitted its reorganization plan, mandated in the 2015-17 biennial budget, to the Dept. of Administration. The reorganization is intended to bring all Medicaid programs within one agency. The move will eliminate the Divisions of Long-Term Care and Health Care Access and Accountability, and create the new Division of Medicaid Services (DMS) which will oversee BadgerCare Plus, FoodShare, Family Care and IRIS programs. Non-Medicaid programs previously housed in the Division of Long-Term Care will move to either the Division of Public Health or the Division of Mental Health and Substance Abuse.

DHS Updates Medicaid Budget Projections – Slightly Under Budget
The Department of Health Services released an update of its quarterly projections for Medicaid spending. The report continues to project that Medicaid GPR expenditures through the year will remain 1.5% below budgeted levels over the biennium, though the report cautions that variations in enrollment, provider claims, federal revenue, or other factors could easily lead to less favorable outcomes. The savings of 1.5% represent less than two weeks of the program’s expenditures. Upward trends in Medicaid expenditures since the last quarter include enrollment, inpatient hospital utilization, and prescription drug costs. The report echoes the previous quarterly Department report.

Wisconsin Ranks in Top Ten for Healthcare Access Despite Rejecting Federal Medicaid Expansion
A new report ranks Wisconsin sixth in the nation for healthcare access, and the only state in the top ten to have rejected the Medicaid expansion through the Affordable Care Act. The report, conducted by New York-based financial advising company SmartAsset, also found that Wisconsin has the seventh-highest insurance rate among states, at 93%. The report suggests that, while Wisconsin has remained firm on rejecting federal funding for Medicaid expansion, Wisconsin’s coverage of all adults under 100% of the poverty level has been effective. Metrics used to determine the rankings include: total insurance rates, children and low-income rates, physician access indices, insurance premiums, and insurance costs relative to household income.

BadgerCare Plus Enrollment Continues Rise, Reaches Highest Levels Since May 2015
BadgerCare Plus enrollment as of March topped 808,000, the highest levels in nearly a year. Enrollment reached 811,404 in May 2015, but then steadily declined to a nadir of 799,476 in November of last year. Enrollment has been trending upward since, with 2,600 new enrollees signed up between February and March of this year. Enrollment rates are driven in part by an uptick in childless adult enrollment, while children and parent/caretaker enrollment increased as well.

Other Medicaid-Related Bills Enacted
- Change how family planning clinics are reimbursed for drugs under a Medicaid program.
- Directs DHS to apply for ~$3.5 million in federal funding that Planned Parenthood currently receives.

Workforce/Health Professionals/Training & Education

2016 Medical Student Match Day Results for MCW; UWSMPH
Medical students around the country were recently matched into residency positions in the annual Match Day ceremony. At the Medical College of Wisconsin, 43% of 194 students selected fields in primary care, 10 percent of which are in Family Medicine. At UW School of Medicine and Public Health, 14% of 167 students chose family medicine as their field of choice. 30% of MCW graduates and 26% of
UWSMPH students will remain in Wisconsin for residency. The UW medical school’s WARM program will send 25 students to rural Wisconsin residency programs. Nationwide, the American Academy for Family Physicians reports the seventh consecutive year with an increase in students selecting the specialty. The academy cautions that the increase is not enough to meet future demand.

Audit Finds Medical Malpractice Fund Exceeds Recommended Maximum by $400 Million
A recent audit conducted by the nonpartisan Legislative Audit Bureau reviewed the financial statements of a fund that provides supplementary insurance for health care providers against malpractice claims that exceed $1 million. The Injured Patients and Families Compensation Fund was found to possess $783.0 million, or $406.4 million above the recommended maximum position. The LAB called for the fund to be brought within the actuarially recommended range of $86.4 million to $376.6 million. Doctors, hospitals, and other health care providers are required to pay into the fund, which the Wisconsin Medical Society says must be large enough to cover unexpected malpractice claims. In response to the findings, OCI will reduce provider fees by 30% in 2016-17.

UW to Require Medical Students to Take Opioid Prescriber Education
The University of Wisconsin School of Medicine and Public Health is among more than 60 medical schools that have committed to incorporating prescriber education into their curricula in response to the nation’s growing opioid epidemic. The move, scheduled to take effect this fall, is in line with new guidelines from the CDC for opioid prescribing practices, and is part of a larger federal initiative by the Obama Administration to address prescription opioid abuse and the nation’s heroin epidemic, which includes efforts to expand access to treatment, address substance abuse disorders in rural communities, and expand the availability of syringe exchange programs.

MCW and Marquette Partner to Form Joint Biomedical Engineering Department
Marquette University and the Medical College of Wisconsin announced a collaboration to create a joint Biomedical Engineering Department, offering undergraduate and graduate students the opportunity to work in labs at both campuses and in clinical research sites across Milwaukee. In a statement, representatives from the Medical College said that the move will expand the biomedical engineering capabilities of the region and drive economic development. The program is predicted to substantially increase enrollment in the next several years.

Governor Signs Bill Establishing Dietetic Internship Program Through WIC
Governor Walker recently signed a bill into law that will establish an internship program to train qualified nutritionists at DHS or WIC to become registered dietician nutritionists. The bill allows nutritionists to bypass a 900 hour supervision requirement for individuals seeking certification as a dietician in the state, provided that they agree to work for at least 24 months for the WIC program upon completion of the internship program. The Governor applauded the program for the hands-on training it provides students.

Board Suspends Tomah VA Doctor’s License in Response to Opioid Controversy
The Wisconsin Medical Examining Board suspended the medical license of one of the central figures in the Tomah Veterans Affairs controversy after a public hearing. Dr. David Houlihan, who received the nickname “candy man” by some patients as the result of his alleged propensity for prescribing narcotics in excess, was fired from the VA in November but has continued to practice within the state of Wisconsin. The doctor’s practice of medicine has been called “downright dangerous” by a representative for the WI Department of Safety & Professional Services (DSPS), and in a review of 27 cases he failed to meet the standard of patient care in all but two.
**Other Workforce-Related Bills Enacted**

- **Require the Medical College of Wisconsin and the University of Wisconsin School of Medicine** and Public Health to submit a report to the governor and legislature about rural and underserved urban medicine once every two years rather than annually. A *bill that would have provided $25 million* to the proposed College of Osteopathic Medicine failed to pass.
- **Allow Licensed Physical Therapists to Order X-Rays Under Certain Conditions**
- **Authorize the Pharmacy Examining Board** to grant a waiver from rules it promulgates for pharmacies when the variance will improve the safety, quality, or efficiency of the practice.
- **Allow pharmacists** to refill some prescriptions for up to 90 days and to *administer an injectable drugs* to patients outside of teaching them self-administration techniques.
- **Change various administrative rules** promulgated by the Chiropractic Examining Board.
- **Regulate Dental Service Organizations**
- **Allow employees** to take up to six weeks off to donate organs or bone marrow.
- **Require school districts** to provide CPR training.
- **Provide immunity** from civil and criminal liability to healthcare providers that perform body cavity searches.
- **Allow reimbursement** by Medicaid to licensed mental health professionals when providing outpatient mental health services at a school site regardless of whether it’s designated as a clinical office.
- **Modify workers’ compensation** laws with various technical and administrative provisions.

**Funding Awards and Recognition:**

Many academic institutions and research partners received funding to further education and research on health topics. In addition, Wisconsin Hospitals and health plans continue to rank among the best in the nation. This list provides an overview of recent awards and recognition:

- Automation Components Raises $100,000 for UW Carbone Cancer Center Research
- UW Researcher Awarded $2.75 Million NIH Grant to Study Treatment for Voice Disorders
- UW2020: WARF Discovery Initiative Announces First Round of Funding for Research Projects

**Public Health**

**Heroin, Opioid Prevention and Education Agenda (HOPE) = 17 Laws Enacted**

This bipartisan effort succeeded gaining legislative support and the Governor’s signature on a total of 17 bills, with the final one enacted in April that provides $2 million in funding for treatment and diversion programs. The *UW Evidence Based Health Policy Project* conducted a capitol briefing on Treatment and Recovery Programs for Opioid Addiction, moderated by Representative John Nygren, at which various speakers discussed the evidence basis for various programs.

**Governor Approves Series of Dementia Bills**

Governor Walker recently approved three bills that will provide more funding for dementia-related crisis care and respite care. One *bill* requires DHS to prepare a proposal for a pilot program for multi-county coalitions to create crisis units to respond to dementia crises. Another *bill* requires DHS to award grants totaling $250,000 to counties or regions for the purposes of training mobile crisis teams on better provision of care to individuals with dementia. A third *bill* will provide $1 million in additional funding to DHS to pay for respite care under the Alzheimer’s Family and Caregiver Support Program. Governor Walker praised the bills as a step towards building dementia-friendly communities in the state.
**Wisconsin DHS Investigating Unusual String of Bloodstream Infections**
The Division of Public Health is investigating an unusual outbreak of bloodstream infections related to the *Elizabethkingia* bacteria. The outbreak has been particularly virulent. So far 63 patients in southeastern and southern Wisconsin, mostly aged 65 or older, have been taken ill and another 19 who tested positive for the bacteria have died. The source of the infection is under investigation. The bug is resistant to first-line antibiotics, although it does respond to other antibiotics. *Elizabethkingia* is widespread in the environment, though human infection is rare. Governor Walker recently announced a plan to add nine positions at the Department of Health Services to help investigate the outbreak and other health risks such as Zika virus and Tuberculosis.

**Over 1,700 Green Bay Homes Issued Warning of Possible Lead in Their Drinking Water**
1,742 homeowners in Green Bay recently received letters from Green Bay Water Utility advising that they may be exposed to lead in their drinking water. The company has known about lead in the pipes since testing revealed elevated levels in 2011, and has been working to mitigate the problem ever since. The utilities company affirmed that the drinking water distributed from the company does not contain lead, rather, lead pipes within individual properties built before 1988 may contribute the heavy metal into the drinking water. In 2014 and 2015, Brown County identified 36 children under the age of 6 with elevated levels of lead in their blood, although only five lived in homes with lead water lines. The city is currently weighing funding options for mitigation.

**AHRO News Ranks Wisconsin Among Highest in the Nation for Health Disparities**
The Agency for Healthcare Research and Quality recently released its annual Quality and Disparities Report, which provide a comprehensive overview of the health care quality received across the nation and disparities in care experienced by different racial, ethnic, and socioeconomic groups. The ratings for Wisconsin are high in quality of care and access, but inconsistent across racial and ethnic groups. The state was ranked in the highest quartile of states for overall quality of health care, but ranked in the bottom quartile for health disparities. A state snapshot provided by the agency gave the state the score of “weak” (the 2nd lowest of a 5 point scale) for overall quality of care received by African Americans, compared to average or better for other racial groups.

**WCCF Report: Child Gun Deaths on the Rise in Wisconsin**
A new report by the Wisconsin Council on Children and Families finds that the rate of children in Wisconsin being killed by guns is on the rise after years of steady decline. Rates had fallen from a high of 2.4 deaths per 100,000 children during 2001-03 to a low point of 1.3 in 2008-10, but then started trending up. The average number of children killed by firearms in 2012-14 show a 31% increase from 2008-10; during this period the national rate dropped by 7%. Only 7 states had larger rates of increase. Milwaukee County accounted for 41% of the deaths across the state; The report concludes with a number of suggestions to help curb the upward trend.

**2016 County Health Rankings Highlight Disparities among WI Counties**
Ozaukee County is the healthiest county in Wisconsin, Menominee County as the least healthy, according to an annual report released by the University of Wisconsin Population Health Institute. Rankings are closely linked to socioeconomic status of county residents. The 2016 County Health Rankings report found stark differences between rural and urban counties in premature death rates, as well as a range of health measures including smoking, obesity, child poverty, teen births, and uninsurance rates. Moreover, 1 in 5 rural counties experienced rising rates of premature deaths over the past decade whereas urban counties had relatively stable numbers. The Rankings can be found here,
Report Outlines Wisconsin’s Progress, Growing Disparities, Toward Meeting 2020 Health Goals
According to the recent UW Population Health Institute report, *2015 Wisconsin Health Trends, Making Wisconsin the Healthiest State*, Wisconsin has made some progress towards meeting the *State Health Plan for 2020* goal, “Everybody Living Better, Longer”, however some disturbing trends are evident. The report analyzed ten-year baseline trends for 19 leading health indicators, finding declines in rates of child mortality, smoking, teen births, and excessive drinking across the state. The report stressed that overall health improvement was not shared equally by all groups within the state, and identified worsening trends in the underlying social and economic factors that can lead to increased health disparities. In particular, many more urban children live in poverty than their rural or non-urban counterparts, and African American infants are nearly twice as likely to be born at low birthweight compared to infants of other racial/ethnic groups.

Report Finds Wisconsinites More Likely to Have Multiple Unhealthy Behaviors Than Rest of Nation
A recent study by the United Health Foundation found that 13.1% of Wisconsin adults have at least three of five unhealthy behaviors – or Multiple Unhealthy Behaviors – which include smoking, physical inactivity, excessive drinking, insufficient sleep, and obesity. This is just above the national rate of 12.0%. The report found that males were more likely to report MUBs, at 14.9% compared to 11.1% of females, and Black respondents were nearly three times as likely to report MUBs (30.5%) as White (12.0%) or Hispanic respondents (11.1%). Education level and yearly earnings were found to be associated with MUBs as well; over a quarter of Wisconsin adults with less than high school education and 22% of those who earned less than 25K per year reported MUBs.

City of Milwaukee Releases 2015-2016 Community Health Assessment Report
The city of Milwaukee’s annual Community Health Assessment Report provides detailed information on more than 100 measures across 21 core variables on the city’s residents. The report found that teen birth and immunization rates have improved over the last year, while binge drinking and overweight status are on the rise. 35% of adults reported binge drinking within the past 30 days, double the national average of 17%. 74% of Milwaukee residents are overweight, compared to national average of 64%. A high percentage of respondents reported unmet care in the past 12 months as well; dental care (21%), medical care (14%), and mental health care (5%). Statewide, 10.6% of residents reported unmet medical care. The full report can be viewed here.

Wisconsin to Partner With NFGFC to Improve Childhood Obesity
Wisconsin elementary and middle Schools will have the opportunity to compete to win three $100,000 state-of-the-art fitness centers for their schools as a result of a new partnership between the state and the *National Foundation for Governors’ Fitness Council*. The *National Fitness Champion* campaign encourages schools to implement innovative ways of incorporating physical activity and wellness into their curricula, and is intended to help states fight childhood obesity. The organization, which recently announced similar partnerships with WA, OH, and AZ, is funded through alliances with companies like Coca-Cola, Nike, and health providers including Anthem Blue Cross and Blue Shield Foundation.

UW-Madison Researchers Actively Involved in Zika Virus Investigation
Researchers at the University of Wisconsin – Madison recently plans to study Zika virus in rhesus macaque monkeys. The virus typically causes mild flu-like symptoms in healthy individuals, but has been associated with microcephaly, a rare birth defect in which infants whose mothers have been exposed to the virus while pregnant are born with unusually small heads, Researchers are investigating what proportion of women who become infected might give birth to children with birth defects to determine
the strength of the Zika-microcephaly association. The research is supported by the National Institutes of Health. The CDC has issued a travel advisory to pregnant women planning to travel to areas with Zika.

**Health Policy Briefing: Lyme, West Nile, and Now Zika: Science, Surveillance, and Policy in Wisconsin**
The UW Population Health Institute held a briefing at the State Capitol on the emerging threat of the Zika virus, as well as other endemic vector-borne diseases in Wisconsin. Jorge Osorio, research scientist at UW and one of the first researchers to identify and document Zika virus, discussed the history and epidemiology of the disease, as well as the ongoing role UW researchers are playing in combating the virus. Susan Paskewitz, Chair of the UW Department of Entomology, also discussed the prevalence of and current surveillance measures in place in Wisconsin to monitor other infectious diseases transmitted by mosquitos and ticks, including Lyme Disease and West Nile Virus. The briefing was facilitated by Rep. David Craig, WI 83rd Assembly District. A summary of the briefing is available here.

**Wisconsin’s FQHCs Awarded $1.7M in ACA Funding to Address Opioid, Substance Abuse**
Wisconsin’s FQHCs have been awarded a total of $1.7 million in funding from the Affordable Care Act to improve and expand the delivery of substance abuse services, with a focus on treatment of opioid use disorders. The following health centers have been awarded the funds:

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**Clinics, Hospitals, and Health Plans**

**Wisconsin Health Care Prices Twice the National Average for 20% of Services**
Wisconsin’s commercially insured patients are charged prices twice the national average for over 20% of health care services, reports a new study by the Health Care Cost Institute (HCCI). The study also finds that, within states, health care prices can vary threefold. The study, published in *Health Affairs*, is accompanied by HCCI’s [National Chartbook of Health Care Prices](#)—2015, which illuminates differences in prices for over 240 common medical services in 41 states and the District of Columbia. Compared to the national average, Alaska has the highest average health care prices, followed by Wisconsin, North Dakota, New Hampshire and Minnesota.

**Report Rates More Than 250 Primary Care Clinics Across the State**
A new report released by Consumer Reports provides ratings for more than 250 medical clinics in Wisconsin, representing more than 60% of the state’s doctors. The report, published in conjunction with the [Wisconsin Collaborative for Healthcare Quality](#), rated clinics on three measures: colon cancer screening for patients ages 50-75, and how well the clinics care for patients with diabetes and high blood pressure. Wisconsin clinics were found to be above the national average; nearly half of the clinics rated earned top scores on at least two of the three measures, and only one clinic received a low score in two of the three measures. The ratings can be viewed here.
**WI Health Systems By-Passed for Top Tier Recognition in National Report**
Truven Health Analytics, in partnership with Modern Healthcare, studied 338 health systems nationally, naming the nation’s 15 Top Health Systems along with selecting 54 other health systems that together represent the top quintile. Organizations were ranked by system size along nine quality measures, with no Wisconsin health system ranking in the top 15. The top quintile of 54 systems nationally include Ministry Health Care in Milwaukee among medium-size systems, and Fransciscan Sisters of Manitowoc, ProHealth Care of Waukesha, and ThedaCare of Appleton among those considered small health systems. Mayo Clinic of Minnesota and Spectrum Health of Grand Rapids, Michigan each attained their fifth year of ranking in the Top 15.

**Milwaukee Health Systems Award $1.9 to Community Clinics, Care**
The Milwaukee Health Care Partnership (MHCP) has awarded $1.9 million in funding to help improve access to health care for low-income Milwaukee County residents. Since 2007, Milwaukee’s health systems, Aurora Health Care, Children’s Hospital and Health System, Columbia St. Mary’s, Froedtert Health, and Wheaton Franciscan Health Care have supported a Shared Community Investment Fund through MHCP. This collaborative funding pool is in addition to each health system’s annual community benefit investments. 2016 Shared Community Investments Fund priorities and beneficiaries are Milwaukee’s FQHCs, MCW Child Psychiatric Consultation Program, Milwaukee Center for Independence / Whole Health Clinical Group, Bread of Healing Clinic / Free Community Clinic Collaborative, Wisconsin Statewide Health Information Network, Milwaukee County Oral Health Task Force.

**CAPC Report Gives Wisconsin “A” Grade for Palliative Care**
A recent report by the Center for Advancing Palliative Care gave Wisconsin an A ranking for palliative care, one of 17 states to receive the highest grade. The report, which reviewed hospitals with more than 50 beds, found that 87.7 percent of the 57 Wisconsin hospitals of that size report having a palliative care team. This is up from 73.7% in 2011 and 63.8% in 2008. Larger hospitals in the state were more likely to have a palliative care team as well; 88% of hospitals (7 of 8) in the state with more than 300 beds have a palliative care program, compared to 63% of hospitals (35 of 56) with less than 50. The overall grade for the nation was a B.

**WHA Report: Decline in Catheter-Associated UTIs, Patient Falls; Increase in C. diff Infections**
The Wisconsin Hospital Association recently released its 2015 Quality Report, which outlines the achievements hospitals made in 2015 towards improving patient care and reducing hospital-acquired infections. According to the report, Wisconsin hospitals achieved a 66% reduction in catheter-associated urinary tract infections, a 26% reduction in patient falls resulting in injury, and a 16% decrease in mortality from sepsis. Wisconsin hospitals were able to reduce all-cause readmission rates by 6.8% since 2012, according to data from the Association’s quality reporting website. The report also expounded on the growing burden of Clostridium difficile infections in Wisconsin hospitals, which increased from 2014 in part because of rising antibiotic resistance. A recent article by the Milwaukee Journal Sentinel discusses the burden of hospital-acquired infections in Wisconsin.

**Report Outlines Impact of Possible UnitedHealth Exit in 2017**
A recent report compiled by the Kaiser Family Foundation provides an analysis of the effects of UnitedHealth Group’s upcoming departure from the federal health exchanges. The insurer mentioned that it would remain in a handful of states, but has not specified which ones. Should the insurer leave Wisconsin, 193,895 enrollees would have to find new coverage, and Menominee County would be left
with only one insurer. An additional seven counties would have only two insurers. UnitedHealth currently participates in 56 counties in Wisconsin.

**WEA Trust Settles Lawsuit With School Districts for $7.5 Million**
A four-year legal battle between WEA Trust and 141 school districts was recently settled, with 36 school districts in southeastern WI receiving $2 million. This includes $66,646 total for Brown Deer, Franklin, Greendale, and Shorewood districts. The 2012 lawsuit alleged that the insurer intentionally withheld millions in federal funding from school districts that switched away from WEA Trust to a new insurer. The schools allege that the insurer offered to apply for a one-time federal subsidy as part of the ACA that provided financial assistance to employers that offer coverage to early retirees, and then kept millions of the money received instead of distributing it back to the schools. The settlement gave school districts around 63 percent of what they claimed was withheld.

**VA Sidelines Epic Contract to Test Own, Cheaper Software Program**
The Department of Veterans Affairs recently announced plans to put a $624 million contract with Epic on hold as it tests its own software, which could be launched nationwide for as little as $6.4 million. The decision could mean Epic may lose its contract with the VA, which was awarded last year to implement its MASS (Medical Appointment Scheduling System) product across the agency’s 152-hospital and 990-clinic health system nationwide. The VA argues that the move represents the best decision for veterans and taxpayers, though opponents counter that the VA has already spent $27.5 million on the project, and question the organization’s ability to develop its own software in the wake of recent scandals.

**Epic Systems Awarded $940 Million in Lawsuit Against India-Based IT Services Company**
A federal jury recently ruled in favor of Verona-based Epic Systems in a lawsuit brought forth by the company against Mumbai-based Tata Consultancy Services. The suit alleged infringement of intellectual property, accusing Tata employees of downloading and sharing trade secrets while working with the company as consultants. Tata has said it plans to appeal the jury’s decision.

**Marshfield Clinic Plans to Acquire Ministry Saint Joseph’s Hospital**
Ministry Health Care and Marshfield Clinic have agreed to a non-binding agreement that would turn over ownership of St. Joseph’s Hospital to Marshfield Clinic. Relations have been contentious between the two organizations since Marshfield Clinic announced plans last year to build its own $150 million hospital in Marshfield, which Ministry opposed as an unnecessary venture. Since Marshfield Clinic employs most of the physicians who work at St. Joseph’s, a second hospital would have put Ministry in the difficult position of needing to replace most of its providers while simultaneously competing with the new hospital. Officials assert that the health care organization still has eventual plans to build a state-of-the-art hospital in Marshfield.

**OCI Approves Aetna-Humana Merger**
The Office of the Commissioner of Insurance recently gave final approval to a proposed merger between health insurance giants Aetna and Humana. Opponents of the merger, including Citizen Action of Wisconsin, have raised concerns that the move could cost the state over 3,000 jobs in Milwaukee and Green Bay as a result of outsourcing. Humana is the largest private employer in Brown County, employing 3,100 people in the county. At a public hearing, lawyers for the companies suggested the merger would save $1.7 billion. 18 organizations recently submitted a letter to OCI requesting stipulations on the merger, including requiring the company to ensure premium stability and pass on any savings to consumers in the form of lower premiums and deductibles. The companies have offered
assurance that the merger won’t harm competition and raise rates, and that savings will indeed be passed on to consumers, though opponents are requesting a firmer commitment.

More Hospital Mergers, Partnerships, and Expansions
Health systems across the state are merging, expanding, consolidating and partnering in new ways. This list provides an overview of recent merger and partnership announcements:

- **Gundersen, Unity Health Plans form Partnership, OCI Approves Wheaton Franciscan and Ascension Health Finalize Partnership**
- **Madison-Based HealthCare Cloud Software Provider Catalyze Partners with Microsoft**
- **Associated Physicians Partners with UnitedHealthcare**
- **Theda Clark Medical Center Changes Name to ThedaCare Regional Medical Center-Neenah**
- **Froedtert Announces Affiliation With Cleveland Clinic’s Heart and Vascular Institute**
- **Aurora, Anthem to Form New Wisconsin Collaborative Insurance Company**
- **Agrace, UnityPoint, UW Health Enter Affiliation Agreement for End-of-life Care**
- **Froedtert and MCW to Open Clinics in Milwaukee-area Meijer Stores**
- **Ozaukee and Washington Counties Merge Health Departments**

Hospital and Clinic-Related Bills Enacted
- Change the collection, analysis, and dissemination of data by the Wisconsin Hospital Association's Information Center.
- Require the Department of Health Services to report certain information about an assessment on ambulatory surgical centers.

RESEARCH AND PROGRAM TOOLS

- **SHOW Data Portal**: A Compendium of Population Health Data Across Wisconsin Counties
- **WHIO Health Ratings for Selecting a Primary Care Physician**: MyHealthWI.org
- **WHA PricePoint Resource with Data on Hospital Charges and Services**: WIpricepoint.org
- **50-State Survey Results: Medicaid Reforms to Expand Coverage, Control Costs, Improve Care**
- **The Role of State Medicaid Programs in Improving the Value of the Health Care System**
- Information on the Health Insurance Marketplace and Health Care Reform
  - Marketplace Enrollment Data 2016 by County and Zip Code
- **Marketplace Agency and Broker Toolkit**
- **Centers for Medicare and Medicaid Services (CMS)**
- New and Updated Resources from the Kaiser Family Foundation
- New and Updated Resources from the Commonwealth Fund
  - Health Reform Resource Center
- **Enroll America Resources**
  - Get Covered Plan Explorer
- Healthcare.gov Affordability Tool
- New and Updated Resources from HRSA
- New and Updated Resources from AHRQ
- Key Health Data About Wisconsin from TFAH
- **WI OCI Individual Health Insurance Carriers in WI Map**
- **WI-Specific Health Insurance Literacy Consumer Tools**
EVENTS AND ANNOUNCEMENTS

- Wisconsin Health News Newsmaker Event – Medical School Leaders, Madison, May 3
- WHA Summit to Advance Community Health in Wisconsin, Madison, May 5
- Wisconsin Caregiver Project Workshops, Port Washington, May 10-11
- 39th Annual Rural Health Conference, Minneapolis, May 10-13
- Wisconsin Medical Group Management Assn. 2016 Annual Conference, Sheboygan, May 11-13
- Wisconsin Innovation Network - Health Innovation in the Fox Valley: ‘First Look’ at UW-Oshkosh Startups, Appleton, May 12
- 2016 HPV Vaccine Summit, Wausau, May 11
- 2016 HPV Vaccine Summit, Milwaukee, May 12
- WI DHS, Division of Quality Assurance – 2016 Hospital Conference, Wisconsin Dells, May 12
- The Alliance Annual Seminar: Aiming for Impact, Madison, May 12
- Wisconsin Council on Medical Education & Workforce, Wisconsin Dells, May 25
- Should the State Self-Insure – WHN Panel Series, Madison, June 7
- Wisconsin Women’s Health Foundation - GrapeVine Annual Conference, Madison, June 13-14
- Wisconsin Center for Nursing Annual Conference, Pewaukee, June 20
- Wisconsin Enrollment Conference, Wisconsin Dells, September 19-20

Selected Tweets from our Twitter Feed

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