

## Catch-Up Briefing Report Vol. 16, No. 3



An annotated compilation of selected Wisconsin health and health care news stories from Summer through September 9, 2016. *Archived editions can be found [here](#).*



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#### Health Care Reform Implementation in Wisconsin

##### Wisconsin Uninsured Rate Drops to 5.7%, Falls Short of Governor's Goal

New federal census data show that Wisconsin's rate of uninsured for the total population dropped to 5.7% for 2015, down from 9.1% in 2013. In 2015, 323,000 Wisconsin residents remained uninsured, while 195,000 fewer Wisconsin residents are uninsured than were in 2013. This falls short of [Governor Walker's stated goal of his entitlement reforms](#), in which he projected to reduce the number of uninsured by 224,580 or roughly half.

##### 224,208 WI Residents Effectuate Enrollment in ACA Health Insurance Marketplace Plans

The U.S. DHHS released final state-level data that shows that 224,208 Wisconsin residents effectuated enrollment in qualified health plan coverage attained through the ACA Marketplace in the 2016 open

enrollment period. This means that 93% of the [239,034 Wisconsin residents who had selected health ACA Marketplace health plans](#) paid their first month's premium to enroll, exceeding the national rate of 87% effectuated enrollment. Of those effectuating enrollment, 85% (189,542 persons) receive federal advanced premium tax credits, averaging \$332, while 55% (123,307 persons) receive cost-sharing reductions. Plan selections mirror national patterns with 70% of Wisconsinites choosing silver plans. The Wisconsin Hospital Association has produced a [county-level map](#) showing plan selection.

### [SAME Act Could Push "Re-set" Button for Wisconsin to Accept Federal ACA Expansion Dollars](#)

US Senator from Wisconsin, Tammy Baldwin is among the sponsors of the SAME (States Achieve Medicaid Expansion) Act, which would provide the same matching funds to states that have not yet opted into the ACA Medicaid expansion but will yet choose to do so. Wisconsin is among those remaining state that could still opt in to receive a 100% match for 4 years, then phase down to 90% over the next three years. [Critics](#) of the SAME Act continue to maintain that the federal government will eventually abandon its funding and leave the states with the expanded obligations.

### [Walker Administration Opposes CMS Auto-enrollment Plan](#)

CMS recently issued a ["Notice to States Regarding Marketplace Auto Re-enrollment"](#) directing states to begin automatically re-enrolling consumers in state insurance exchanges with when the enrollee's health insurance company leaves the exchange. Consumers would be re-enrolled with a different insurer in the exchange. Wisconsin Commissioner of Insurance, Ted Nickel, [responded to the directive](#) arguing that it violated state law, which does not permit automatic enrollment. Additionally, he asserted that the directive exerts pressure on enrollees, thus violating the legal principle of free contractual activity.

### [Humana, United HealthCare Leave Individual Market; CCHP Enters](#)

Both Human and United Healthcare have announced plans to exit the individual market by the end of 2016. Humana's letter regarding its exit says 6,639 members' coverage will terminate. Those members will have an opportunity to select coverage from another carrier – on or off-exchange – during open enrollment, which begins on November 1. United Healthcare currently offers plans in 56 of Wisconsin's 72 counties, but has one of the two lowest-cost silver plans in only one county. Children's Community Health Plan (CCHP), which currently offers BadgerCare coverage, has been approved to begin offering Wisconsin plans on the ACA Marketplace in November 2016. An [OCI interactive map](#) shows all current Wisconsin individual health insurance carriers in Wisconsin.

### [ACA Repeal Would Mean Substantial Increase in Wisconsin's Uninsured](#)

The number of uninsured would double in 19 states, including Wisconsin, if the ACA were repealed, according to a joint report by the Urban Institute and the Robert Wood Johnson Foundation. Wisconsin did not accept the ACA's Medicaid expansion, but in 2014 made its own major eligibility changes.

Previously, parents up to 200%FPL were eligible. Beginning in 2014, both parents and childless adults with incomes up to 100% FPL became eligible and those over 100% FPL were directed to seek coverage through the ACA marketplace tax credits. The report estimates that, if an ACA repeals brings Wisconsin to revert to 2013 Medicaid eligibility rules,, the number of uninsured in the state would rise 104.7%.

### [Affordable Care Act Product Rates Set To Increase](#)

According to [HealthCare.gov's Rate Review](#), Affordable Care Act product rates could increase anywhere from 5% to 36% in 2017. Only one insurer filed for a decrease in product rates, approximately 16%.

Research by the [Kaiser Family Foundation](#) predicted this increase noting that, while annual rate increases are expected due to increasing costs of care, cost increases would likely result from the

termination of the ACA's temporary reinsurance program at the end of 2016 and as well as early miscalculations by many insurers about how much health care enrollees would use. Federal health officials say that [tax credits will mitigate rate increases](#) for consumers. An estimated 69% of Wisconsin consumers who buy insurance on the exchange will still be able to purchase a plan for less than \$75 per month, even if rates rise by double digit percentages.

### [\*\*Senator Johnson Introduces Bill to Exempt from Individual Mandate Where Only One QHP\*\*](#)

Wisconsin's Senator Johnson introduced a bill along with colleagues that would exempt from the ACA's individual mandate persons living in counties with only one qualified health plan offered through the ACA Marketplace. Pierce, Polk, and St. Croix counties had one insurer offering such plans last open enrollment period and, given UnitedHealthcare's departure this year, Menominee County may also have only one such plan.

### [\*\*Three Wisconsin Navigator Entities Awarded Continuing CMS Funding\*\*](#)

CMS announced 2016-17 funding for three Wisconsin organizations serving as Navigators providing health insurance enrollment assistance for the Affordable Care Act Marketplace coverage as well as Medicaid. These agencies include Forest County Potawatomi (\$33,119), Covering Wisconsin (based at UW - \$998,960), and Norwest Wisconsin CEP (\$306,227). [Modern Healthcare recently reported](#) about the need for enrollment assistance in southern Wisconsin.

### [\*\*Assembly Republicans Release Legislative Agenda\*\*](#)

Wisconsin's Assembly Republicans released their agenda for the upcoming budget period, outlining priorities in a range of policy arenas. The healthcare related items include further focus in addressing the opioid epidemic, Alzheimers and mental healthcare – including exploration of the state joining a [psychology interjurisdictional compact](#), improving care coordination and exploring federal waiver opportunities in Medicaid, addressing the state's needs for health professionals, and considering creation of a long-term care investment fund.

### [\*\*What Speaker Ryan's Healthcare Proposals Look Like from Janesville\*\*](#)

Modern Healthcare writes about the Affordable Care Act and the view of potential reforms proposed by Representative Paul Ryan on his home district. The "takeaways": "House Speaker Paul Ryan wants to replace the ACA and fundamentally change federal Medicaid funding. Providers and patients in his home district are leery of the proposals, which would drive the healthcare agenda under a Trump administration."

### [\*\*Covering Wisconsin to Awarded Funding to Promote Health Insurance Literacy\*\*](#)

Covering Wisconsin has been awarded [\\$110,000 from the Baldwin Fund](#) to advance understanding and effective use of the health insurance and health care among rural residents in Wisconsin. In addition, the [Wisconsin Health Information Organization \(WHIO\) is funding](#) Covering Wisconsin, in partnership with Wisconsin Health Literacy, to implement Phase 2 of the Consumer Engagement & Activation through Health Literacy project.

## **Medicaid/BadgerCare**

### [\*\*Family Care and IRIS Available Statewide in 2018\*\*](#)

Family Care and IRIS, the Medicaid programs that provide long-term care to the elderly and disabled in their homes will be available in all 72 Wisconsin counties by early 2018. In 2017 the program will

expand to Adams, Florence, Forest, Oneida, Taylor, and Vilas counties and then to Dane in 2018. The expansion will eliminate the wait list for the nearly 500 people in these counties currently served by Medicaid legacy waivers and will save the state \$550 per member per month.

### **[Walker Administration Withdraws Plan for Family Care and IRIS Transition](#)**

Sweeping plans to shift the Family Care/IRIS program from local, nonprofit managed care providers to regional for-profit insurers have been withdrawn following deep [opposition from advocates](#) and some legislators. The programs provide long-term care in homes and community-based settings for 55,000 elderly and disabled in all but 8 of Wisconsin's counties, and comprise about \$2 billion of the \$3.4 billion the state spends on long-term care. [DHS spokesperson](#) said that the administration will continue to work with stakeholders to improve coordination of services.

### **[Wisconsin BadgerCare Waiver Offers Opportunity to Answer Important Questions](#)**

A blog post by the Commonwealth Fund author Sara Rosenbaum reviews Wisconsin's 2014 Medicaid waiver permitting changes to its BadgerCare program, and outlines questions of national policy concern that the waiver demonstration can address. However, the author expresses concern that several vital question fall outside the scope of the waiver evaluation questions that the state agency has agreed with CMS to evaluate.

### **[Census Bureau Data Shows Wisconsin No Longer a Leader in Children's Insurance Coverage](#)**

An issue brief from the [Wisconsin Council on Children and Families](#) shows that from 2008 to 2014, Wisconsin has fallen from 6<sup>th</sup> in the nation to 16<sup>th</sup> in the rate of insurance coverage for children, according to the latest data by the US Census Bureau. The American Community Survey (ACS) data indicate that other states have been catching up to or surpassing Wisconsin's current rate of 4.4% uninsured children. The children's uninsured rate among our four neighboring states is 3.5%. Reducing Wisconsin's rate to this average would result in 11,800 children with health care insurance, and WCCF continues to point to [potential benefits of Medicaid expansion](#) for Wisconsin. .

### **[Federal Grant Provides \\$1 Million to Find Children Eligible for BadgerCare](#)**

The Centers for Medicare and Medicaid Services has awarded [Northwest Wisconsin CEP \(Concentrated Employment Program\)](#) a \$1 million grant to reach out to children who are eligible, but not enrolled in Wisconsin's Medicaid program, BadgerCare. Approximately 60,000 children in the state lack health insurance and the outreach effort hopes to enroll 16,000 in 27 counties, with a focus on those in rural counties. The Wisconsin grant is part of \$32 million in awards for 38 similar efforts in 27 states.

### **[BadgerCare Enrollment Falls for Fourth Straight Month](#)**

BadgerCare Plus enrollment fell again in July to 798,420. That is a 0.3% decline; and a 1.2% decline from March. Childless adult enrollment was at 144,437, a decline of 0.4% in June, and the number of children declined 0.3%.

### **[Eight Wisconsin Family Planning Clinics Ordered to Return Nearly 50% of Medicaid Payments](#)**

The Wisconsin Department of Health Services (DHS) Office of Inspector General (OIG), in an audit of eight family planning clinics, identified Medicaid overpayments of \$63,813, or nearly 50% of all Medicaid payments made to the clinics in 2014. Many of the discrepancies focused on prescribing practices, including prescriptions not signed by a valid prescriber, no prescription, quantity billed not matching prescription quantity; and no proof of the prescription being dispensed. A list of the clinics and the amount of overpayment to each can be found [here](#). Planned Parenthood [responded](#) with questions about whether the decision having been announced prior to completion of the OIG's audit process.

### [Wisconsin Medicaid Reimbursement Rate for Nursing Homes Worst in Nation](#)

A [study](#) released by the American Health Care Association shows that Wisconsin reimburses skilled nursing homes only 76% of the cost of care, or a shortfall of \$168 per patient per day. Wisconsin's neighbors also have reimbursement rates that generate shortfalls: Iowa has a shortfall of \$12 per patient day, Illinois' is \$25, and Minnesota's \$34. The average nursing home in Wisconsin has a 65% Medicaid population. DHS spokesperson, Claire Yunker, criticized the study's methodology because it doesn't include Medicare reimbursements and thus understates nursing homes' full profit level. Meanwhile, a [provider survey](#) found 11,000 unfilled jobs in Wisconsin's long-term care facilities; 1 in 7 nursing home positions are unfilled.

### [WI Legislature's Joint Finance Committee Approves Funding for Inmate Medical Costs](#)

The Department of Correction (DOC) faces a shortfall of approximately \$5.4 million from hospital costs not covered by Medicaid, and rising cost of prescription drugs and nursing care. Medications for Hepatitis c and HIV comprise \$1.5 million of the total. The Joint Finance Committee will transfer about \$3 million of a \$6.5 million surplus from services for repeat drunk drivers to help defray the DOC shortfall. Legislators involved in the debate to transfer funds called for increased preventative services, a reduction in the use of "observation status" whereby prisoners receive outpatient services that are not covered by Medicaid rather than hospitalization, and increased treatment and diversion programs.

### [New Medicaid Policy Could Help Close Gaps in Native American Health](#)

A brief by the [Wisconsin Council on Children and Families](#) explores how recent changes in federal Medicaid reimbursement policy for Native Americans that could significantly expand funding and increase access to health services. Until 2016 only medical services received inside an Indian Health Service clinic or tribal facility could be fully reimbursed by the federal government. The federal government paid the state's regular match rate of 42% for Medicaid services provided outside these settings. [New guidance](#) from CMS will permit 100% federal funding for all Medicaid services that IHS or Tribal clinics are authorized to provide. To receive the expanded funding, IHS or tribal clinic are required to establish a care coordination agreement with non-HIS/Tribal facilities.

## **Workforce/Health Professionals/Training & Education**

### [State's Medical Residency Programs to Expand; Potential Answer to Looming Shortage](#)

A [report](#) released by the Wisconsin Council on Medical Education and Workforce projects a physician shortage ranging between 833 to 3,756 by 2035. The group's chairman did admit that projections over 15 years were difficult to make; [historically such projections](#) have fallen wide of the mark. The report says that progress has been made to reduce the shortage predicted in its [2011 report](#). Wisconsin is poised to add 73 new residency positions, with 11 new residency programs outside the Milwaukee and Madison metro areas, offering the best chance of retaining such physicians where they are needed.

### [Medical College of Wisconsin to Offer Psychiatry Residency Programs](#)

Beginning in July 2017, the Medical College of Wisconsin will train seven psychiatric residents per year in the eastern and north central parts of the state. The new slots are an attempt to address the mental health shortages in these areas. According to a Kaiser Family Foundation [report](#), Wisconsin ranks second-to-last in the nation in meeting mental health needs of its population. 16 rural counties in Wisconsin have no outpatient psychiatrists. A 2012 study conducted by the Wisconsin Department of Health Services showed that WI needs to add at least 200 psychiatrists to address shortages.

### [UW Launches Nation's First Rural OB-Gyn Residency](#)

University of Wisconsin School of Medicine and Public Health has started the nation's first rural-residency program to train and provide care to women in rural Wisconsin. The recruitment for the first rural-track resident is underway. A new rural-track resident will join the program each year. The American Congress of Obstetricians and Gynecologists estimates there will be between 6,000 and 8,800 fewer Ob-Gyns than needed in the United States by the year 2020 and a shortage of possibly 22,000 by the year 2050.

### [DSPS redrafting telemedicine rules](#)

The Department of Safety and Professional Services is developing a new draft of its telemedicine rules after feedback on its previous draft. The first draft, modeled on Iowa rules, was supported by insurers and telehealth companies, but opposed by the Wisconsin Hospital Association (WHA). The new proposal is leaning toward a Florida model in which the rules are less extensive, less detailed and more conceptual than Iowa's. [WHA's concern](#) was that the original proposal treated telemedicine as a distinct medical specialty requiring its own set of regulatory guidelines, rather than a healthcare delivery tool.

### [Medical College of Wisconsin's DRIVE program connects high school students to MCW scientists](#)

This year the Medical College of Wisconsin (MCW) inaugurated the DRIVE program (Delivering Research Innovation via Education) that connects high school students from the Milwaukee Academy of Science and the High School of Health Sciences in Kettle Moraine with MCW scientists to conduct public health research. The goal of the partnership is to provide students with real-life experience in health science that can spur them to seek postsecondary and career paths in research, medicine or public health.

### **Funding and Other Awards:**

#### [Wisconsin Health Endowment Commits \\$20 Million to Behavioral Health](#)

The [Advancing a Healthier Wisconsin Endowment](#) at the Medical College of Wisconsin is investing \$20 million over eight years to improve behavioral health throughout the state. Ten community coalitions representing all areas of the state received awards. This investment represents a change in strategy from funding public and non-profit organizations on a variety of health related projects, to funding communities directly to engage in targeted work in one area.

#### [Wisconsin Partnership Program Awards \\$400,000 in Grant to Communities](#)

The Wisconsin Partnership Program at the University of Wisconsin School of Medicine and Public Health awarded nine grants totaling \$400,000 to organizations throughout the state. The [Community Opportunity Grants Program](#) will provide organizations with \$50,000 for two years to address a broad range of health issues salient in the state, including medication safety, nutrition, mental health, transgender health care, alcohol use, student absenteeism, and postpartum care.

#### [Aurora Health to Donate \\$5M in Second Year of Grants for Community Health](#)

Aurora Health will contribute \$5M to community organizations through its Better Together Fund. The grants are to expand access to primary care, behavioral health care, sexual assault and domestic violence treatment and prevention programs. Over 40 organizations in eastern Wisconsin received funding in 2015. The Better Together Fund is part of Aurora's larger charitable community support.

#### [WPHA Gives 'Super Hero Award' for Increasing Diversity in State Public Health Workforce](#)

The Wisconsin Public Health Association has named Lillian Paine a Public Health Super Hero for her work with the Lifecourse Initiative for Healthy Families, a program designed to improve birth outcomes in

southeastern Wisconsin. The award is part of the WPHA's Diversity Matters' campaign to increase diversity in Wisconsin's public health workforce.

### [Epidemiologist Wins Award for Development of a Loan Assistance Program Repayment Dashboard](#)

Penny Black, an epidemiologist at the Office of Rural Health, won the Do Good Data Viz Challenge Award presented by the Tableau Foundation. The interactive [dashboard](#) shows all state sites awarded under both the Health Professional Loan Assistance Program and the Rural Physician Loan Assistance Program. The data can be filtered by year, city, discipline, and practice. The dashboard was selected for the quality of its analysis, storytelling capabilities, presentation, and design.

## Public Health

### [Linda Seemeyer Appointed Secretary of the Wisconsin Department of Health Services](#)

Governor Scott Walker has appointed Linda Seemeyer as the new Secretary of the Wisconsin Department of Health Services (DHS) following the [death of Kitty Rhoades](#) (65), former DHS Secretary (2013-2016). Seemeyer's appointment began August 22, 2016. Interim Secretary of Wisconsin DHS, Tom Engels, continues deputy secretary. Prior to her appointment Seemeyer directed the Walworth County Department of Health & Human Services from 2007 to 2015.

### [Wisconsin's Public Health Spending Near Bottom in the Nation](#)

[Investing in America's Health](#), a report published by the Trust for America's Health (TFAH), shows that Wisconsin's spending on public health is the second lowest in the nation, at [\\$51 per capita](#) from all sources. Only Nevada and Indiana spend less, at \$48 and \$43 respectively. West Virginia and Alaska are tied for the top spot, both spending \$300 per capita. TFAH calls public health departments the "chief health strategist(s)" for communities, with the role of defining the scope of health problems, setting goals for health prevention and improvement; and recruiting change makers to this mission. The report indicates the wide variation in public health funding for these services.

### [Milwaukee among Unhealthiest Cities](#)

Milwaukee city leaders, Mayor Tom Barrett and Health Commissioner Bevan Baker, noted the significant health challenges facing the city and its poor ranking on several measures, specifically focusing on infant mortality, socio-economic status, and oral health care. Related to these concerns, a new [report finds obesity increasing in Milwaukee](#). *An Apple a Day*, by the Public Policy Forum, reports that obesity in Milwaukee has increased from 29.6% in 2011 to 37.2% in 2014. Areas with the lowest socioeconomic status also had the highest rates of obesity.

### **Outbreaks:**

#### [Elizabethkingia Update](#)

Cases of Elizabethkingia continue to grow in the state. Health officials report [63 confirmed cases, and four suspected cases, 18 associated deaths](#). The [WHO reports](#) that the current outbreak is the largest on record. Despite comprehensive efforts at the WI Department of Health Services and assistance from the CDC, the source of the outbreak remains unknown. Nose and throat cultures from patients on the same health care wards as patients with confirmed cases of Elizabethkingia have tested negative, indicating that the bacteria is not spreading in healthcare facilities. A case of Elizabethkingia was also identified at Children's Hospital of Wisconsin, but DHS has [confirmed](#) that it is not the same strain associated with the current outbreak in Wisconsin. [Assembly Democrats](#) have raised questions to state health officials. An interview with DHS officials can be found [here](#).

### **[State DHS Monitoring for Zika Virus in Wisconsin; First Case in State Identified](#)**

A 10-county region that borders Illinois, Iowa, and Minnesota will be the focus of a new DHS surveillance effort to protect against Zika. Health officials and UW insect expert say that the [surveillance is a precaution](#), but that the two types of mosquitoes found to host the Zika virus, *Aedes aegypti* and *Aedes albopictus*, are not likely to travel as far north as Wisconsin that spraying pesticides is not necessary at this time. There have been [no locally-transmitted cases of Zika](#), but health officials announced the first confirmed case of the infection in a woman who had recently traveled to Honduras. A second case, involving a woman who had traveled to Columbia, was [confirmed in Dane County](#). [Wisconsin will receive \\$812,000 from the CDC](#) to support efforts to protect residents from the Zika virus. It will also support the state's participation in the US Zika Pregnancy Registry that will monitor pregnant women and their infants.

### **[First 2016 Human Case of West Nile Virus in Wisconsin Confirmed](#)**

The year's first human case of West Nile Virus was identified in Sawyer County in August. In comparison, at a cyclical peak in 2012, 57 human cases were reported statewide. The Wisconsin Department of Health Services (DHS) also [confirmed](#) 14 avian (bird) cases and 1 equine (horse) case of West Nile virus and 6 mosquito pools. More information from DHS is [available here](#).

### **[Wisconsin Department of Health Services Conducts Anthrax Emergency Readiness Drill](#)**

DHS and over 40 federal, state, local, and private partners jointly conducted a two-day drill testing a decade of emergency readiness planning in southeast Wisconsin. The drill scenario was the release of anthrax into the air. In such an emergency, people must receive antibiotics within 48 hours of exposure. The drill involved receipt and distribution of antibiotics to over 1500 participating volunteers across 14 dispensing sites. The exercise is part of the CDC's national Cities Readiness Initiative. Such exercises assure that public health agencies have the training, resources, and partnerships to respond in crises. A video and photo gallery of the drill can be found [here](#). Similarly, the Medical College of Milwaukee also [conducted a mass casualty training](#) as part of the Emergency Preparedness Program.

### ***Water Quality:***

#### **[State DNR Announces Grants to Municipalities to Replace Old Lead Water Supply Lines](#)**

The state Department of Natural Resources will provide up to \$11.8 million in grants to municipalities to replace lead pipes that supply drinking water. The state created the [Safe Drinking Water Loan Program](#) after a recent EPA decision gave states greater flexibility in using federal funds intended for water infrastructure projects. The grants will be targeted to low-income communities and the [size of the grants](#) will vary from \$300,000 to \$750,000 depending on population size. At least 176,000 homes and businesses in the state, and about 70,000 in Milwaukee, receive water from lead service lines.

#### **[Wisconsin DNR Releases 2015 Water Systems Report](#)**

The Wisconsin Department of Natural Resources has released a positive 2015 Water Systems Report, finding that over 96% of public water systems in Wisconsin (11,036 of 11,470 systems) met all health-based standards. WisContext [expressed concerns about the analysis](#), arguing that the DNR report is incomplete in that it doesn't survey the water quality of private wells from which one-quarter of Wisconsinites receive their water.

#### **[DNR Study Finds Salmonella and Rotavirus in Sample of Kewaunee Wells](#)**

Eleven private wells tested positive for salmonella and rotavirus according, reports the Wisconsin Department of Natural Resources. Both bacterial findings are consistent with fecal contamination.

Further testing will be conducted to ascertain whether the bacteria was bovine, but groundwater contamination in the area has been widely associated with manure spread from large dairy operations. Property owners were warned not to use the water for drinking or bathing and to have their wells chlorinated.

### **[Ruling Allows Waukesha to Take Drinking Water from Lake Michigan](#)**

Representatives of eight Great Lake States [agreed](#) unanimously to approve Waukesha's request to take drinking water from Lake Michigan, making it the first community outside the Great Lakes watershed to receive diversion rights under the [Great Lakes Compact](#). The community relies on groundwater wells that are contaminated with radium and maintains that the diversion plan is the only way to assure a safe and sustainable water supply. Opponents believe there are other alternatives and assert that the move is to promote the suburb's economic growth. The decision requires Waukesha to return, in the form of treated wastewater, 100% of the water they pump from the lake.

### ***Populations – Child Health:***

#### **[Food Insecurity Faced by 1 in 5 Wisconsin Children](#)**

A [report](#) from Public Health Madison & Dane County shows that rates of food insecurity – a situation in which food is insufficient or uncertain – affect nearly 12% of the total population and 17.5% of children in Dane County. Statewide, 12.4% of all people and 20.4% of all children are considered food insecure. Rates of food insecurity are higher for Hispanics and single parent households; 1 in 3 are food insecure in comparison to 1 in 5 while households. Food insecurity can increase the risk of health problems, including diabetes and obesity, because high-calorie, processed, and nutrient low foods are often all that some people can afford or access.

#### **[2015 KIDS COUNT Ranks Wisconsin 29<sup>th</sup> in Nation for Children's Health](#)**

Although Wisconsin ranked 13<sup>th</sup> overall for child well-being in the latest *KIDS COUNT Data Book* produced by the [Annie E. Casey Foundation](#), the state ranked 29<sup>th</sup> for health. Health outcomes considered in the ranking were low-birthweight babies, children without health insurance, child and teen deaths, and teens who abuse alcohol or drugs. Minnesota, Illinois, and Iowa all ranked in the top quarter in children's health. In a [press release](#) about the report, the [Wisconsin Council on Children and Families](#) points out how overall data mask far worse outcomes for Wisconsin's minority populations.

#### **[Wisconsin Parents Still Opting-out of Immunizations](#)**

According to Public Health of Madison and Dane County, 4.3% of Wisconsin students have opted out of required shots this year. That number, for the first time in 10 years, is unchanged, which health officials find encouraging. During the 2015-16 school year only 32% of the state's school districts were 100% compliant with vaccine requirements.

#### **[7% of Wisconsin's Children Estimated to Have Had an Incarcerated Parent](#)**

*A Shared Sentence: The Devastating Toll of Parental Incarceration on Kids, Families, and Communities*, released by the Annie E. Casey Foundation reports that about 88,000 of Wisconsin's children, or 7%, have had a parent in jail or prison at some point in their childhood. The report explains that this circumstance can have as serious an impact on children's physical and mental well-being as abuse or domestic violence. The report includes policy proposals to address the increased toll on children of incarcerated parents.

### **Documentary Examines Gun Violence in Milwaukee**

A new Wisconsin Public Television documentary, [\*Too Many Candles: Milwaukee Gun Violence\*](#), highlights how poverty, educational and other social disparities, and decades of urban policies have shaped the neighborhoods that experience the largest amount of gun violence in the city. The film sheds light on how intersecting pressures impact both the victims and perpetrators of gun violence. The neighborhoods with the highest numbers of homicides are largely African American and very racially segregated.

### ***Disparities:***

#### **Wisconsin's Infant Mortality Rate Holds Steady, But So Too Does Racial Disparity**

The just released [Annual Wisconsin Birth and Infant Mortality Report](#) indicates that in 2015, 384 infants died before their first birthday. That is an overall infant mortality rate of 5.7 per 1,000 births, unchanged from the previous year. [Epidemiologists caution](#) that reporting on individual years will be more affected by short-term variations because the numbers of infant deaths are small, and the sample size from which the rates are calculated is small. Wisconsin DHS, which reports the data in three-year intervals, show rates for 2013-15 of 5.9 for Wisconsin's overall population, 4.7 for the white population, and 14.5 for the African American population. This threefold difference in mortality rate demonstrates that improvements for the overall population have not been evenly experienced.

#### **Wisconsin Ranks #1 as Worst State for African Americans**

A new report released by 247 Wall St, finds that Wisconsin is the worst state for African Americans on measures of Black-White disparities for segregation, incarceration, and education. The study created an index of 10 measures to assess racial gaps in access to resources and opportunities in all 50 states using data from the U.S. Census Bureau's American Community Survey, the U.S. Bureau of Labor Statistics, Prison Policy Initiative, the Sentencing Project, and the Centers for Disease Control and Prevention. Among the study's key findings: the median income for blacks is just 46.5% of that of white Wisconsinites; and the rate of bachelor's degrees among blacks is 12.8% in comparison to 29.9% of whites in the state and 19.7% of black nationally. Also; Wisconsin has the 10<sup>th</sup> lowest homeownership rate (25.8%), the 9<sup>th</sup> highest unemployment rate (11.1%), and the 3<sup>rd</sup> highest incarceration rate.

### ***Chronic Disease & Prevention:***

#### **WI Obesity Rate Remains Steady**

The [U.S. CDC reports](#) that Wisconsin's adult obesity rate, at 30.7%, remains unchanged from last year, ranking 19<sup>th</sup> nationwide. Half of all states nationally have rates above 30%. Four states, including Minnesota, showed declines in the obesity rate.

#### **Wisconsin Receives Mixed Marks on Cancer Prevention**

The American Cancer Society Cancer Action Network's latest report card gave the state high marks for its tobacco excise taxes, smoke-free laws, and cancer pain control and oral chemotherapy fairness. However, the state received "falling short" marks on tobacco control program funding, failing to enact tougher restrictions on indoor tanning, and needs to broaden Medicaid screening and early detection of cancer.

#### **Task Force Makes Recommendations to Improve Dementia Care**

A State Assembly task force released its recommendations for improving care for those with Alzheimer's and other dementias. The group's suggestions include increasing the number of dementia-care providers by requiring training for certified nursing aides, increasing training at long-term care facilities, and incorporating care-giver education into initial diagnostic visits, along with additional

recommendations. The numbers suffering with the disease is expected to double within the next 10 – 15 years, [according to the chair of the task force](#), Rep. Mike Rohrkaste, R-Neenah.

### **[Small Businesses Can Apply for Workplace Wellness Grants](#)**

A program enacted in by the legislature 2014 allows businesses with 50 or fewer employees to apply for funds provided by the Department of Health Services to support workplace wellness programs. The grant will reimburse businesses for 30% of a new wellness programs, up to \$15,000 and requires the program to conduct a health risk assessment. [Wisconsin Health News](#), however, reports that the program has yet to be taken up by many businesses. Senator Terry Moulton, R-Chippewa Falls, who sponsored the bill points to the requirement that businesses lay out a full 12 months of expenses before requesting reimbursement, and lack of awareness about the program.

### ***Substance Use and Mental Health:***

#### **[Wisconsin Medical Board Approves New Opioid Prescribing Guidelines and Considers Additional Rules](#)**

The Wisconsin Medical Board (MEB) has been considering new rules to support the state’s package of HOPE (Heroin Opioid Prevention and Education) initiatives. At its July meeting, the MEB adopted opioid prescribing guidelines for treating patients with acute and chronic pain. The guidelines are based largely on the recently-released [CDC guidelines](#), although the Board did also consider guidelines from other states. The MEB also drafted rules requiring physicians renewing their licenses to complete two units of continuing education on the responsible prescribing of controlled substances. This draft is expected to be considered at its August meeting. Both moves are geared to the hope that educating physicians about the dangers of over-prescribing opioids will help curb the growing epidemic.

#### **[Standing Order for Naloxone Enacted Statewide](#)**

Pharmacists throughout the state may now dispense naloxone, a life-saving drug that reverses the effects of an opioid overdose, without a prescription to a patient at risk of overdose, or to a friend or family member of a person at risk. Pharmacists may provide unlimited refills. Naloxone can be administered by syringe, nasal spray device, or auto-injector. The cost of the drug will be covered for Medicaid patients. Insurance reimbursement for privately insured patients is being explored. Legislation signed in 2015 permits the standing order, which was signed by the state’s Chief Medical Officer, Dr. Jon Meiman. Additional details may be found on the [state website](#).

#### **[Schimel Announces Next Phase of “Dose of Reality” Campaign](#)**

Attorney General Brad Schimel is reaching out to employers to help fight prescription drug abuse. He wants to enlist employers to develop policies like the one at Wisconsin Public Service, where employees who voluntarily identify as having a drug problem will receive treatment paid for by the company. Schimel says that prescription painkiller abuse costs employers an estimated \$26 billion a year. He hopes that this next phase of the [Dose of Reality](#) campaign, a joint project of Wisconsin Department of Justice and the Wisconsin Department of Health Services, will both raise awareness about addiction and result in employees receiving treatment, not punishment.

#### **[Smoking Among Pregnant Women in Wisconsin Above National Average; Youth Smoking Declines](#)**

A [study](#) conducted at the University of Wisconsin-Milwaukee that monitored the rate of smoking among pregnant women over a 24 year period showed that 14% of pregnant women in Wisconsin continue to smoke, as opposed to the national average of 9%. Although that number has decreased significantly since 1990, it has not improved in the past 10 years. Wisconsin’s youth, however, show substantial declines in their rates of smoking, [reports the DHS Tobacco Prevention and Control Program](#). The report also provides updates on other smoking trends in the state, including continuing declines among adults.

### **[Four of the Nation's Drunkest Cities in Wisconsin; Appleton Number One](#)**

24/7 Wall St., an AOL-Huffington Post news site, reviewed self-reported binge and heavy drinking rates reported in the [County Health Rankings & Roadmaps](#) and created a [list](#) of the drunkest and driest cities in America. The top 4 cities in the nation are Appleton, Oshkosh-Neenah, Green Bay, and Madison. Of the 20 drunkest cities on the list, 12 are in Wisconsin. Nationally, 18% of adults have unhealthy drinking habits; in Appleton that number is 26.8% and 30% of fatal car crashes involve alcohol. The definitions used come from the CDC which defines binge drinking as 4 or more drinks for women and 5 or more for men at one sitting; heavy drinking is 15 or more drinks per week for men and 8 or more for women. According to the CDC, alcohol is the 4<sup>th</sup> leading cause of preventable death in the US. Appleton city leaders [took exception](#) to the report, questioning the reliability of self-reported data.

### **[County Spending on Children's Mental Health Increases 15%; Impact Unclear](#)**

County mental health programs grew 15% to \$121.8 million last year, which represents the steepest rise since 2010. This growth was propelled by largely by state and federal money, but also by local support. Spending increases followed a [2014 report](#) to the legislature indicating high youth suicide and hospitalization rates, as well as an acute shortage of mental health providers throughout the state. Some county officials and others questioned the reliability of the reported numbers, suggesting they might reflect accounting changes and increased cost of current services rather than expanded programming. [Previous reporting](#) also revealed wide variation throughout the state's 72 counties in per capita spending on such services.

### **[MCW Advancing a Healthier Wisconsin commits \\$20 million to behavioral health initiatives](#)**

The Advancing a Healthier Wisconsin (AHW) Endowment is committing nearly \$20 million in an initiative to generate statewide, community-based advances in behavioral health. The eight-year project represents a philosophical shift for the Endowment, and a newly-formed strategic focus on improving population health through the creation and support of local coalitions.

## **Clinics, Hospitals, and Health Plans**

### ***Clinics & Hospitals:***

#### **[Wisconsin Hospital Margins Remain Strong, Charity Care Declines](#)**

The Wisconsin Hospital Association reports that, for FY2015, the net-income percentage across all Wisconsin hospitals was 9.8%. WHA also surveyed 19 of the state's largest health care systems, which represent 95 hospitals. Each hospital within the system had an average 2015 operating margin of 11.9%, but the 19 health systems that these hospitals comprise show an operating margin for 2015 of 6.3%, slightly up from 5.9% in 2014. Wisconsin's general medical and surgical hospitals show a 50% decline in charity care from 2014 to 2015, from 1.7% of total gross patient revenue in 2014 to 0.9% in 2015.

#### **[Shorter Hospital Stays, More frequent E.R. Visits in 2015 for Wisconsin](#)**

A recent report examining utilization and charges in hospitals and ambulatory surgery centers throughout Wisconsin from 2014-15 found that statewide, patients were billed a 5.1% increase in charges, but a decrease in the length of stay. Charges and hospital days fluctuated significantly by hospital type. Charges increased from the previous year by 22.8% at LTAC hospitals and 5.3% at psychiatric hospitals, but decreased at rehabilitation hospitals (7.4%), AODA hospitals (5.1%), and at

state-operated mental health institutes (111.5%). Wisconsin hospitals also reported a 4.7% increase in emergency services visits.

### **[Special Needs Dental Clinic to Open](#)**

People with cognitive and physical disabilities often need to be sedated to receive dental care, a service not often available. Children's Hospital of Wisconsin provides conscious sedation as well as anesthesia. The special-needs clinic opening at the St. Ann Center for Intergenerational Care-Bucyrus Campus in Milwaukee, will offer prescription sedation, funded by a gift from the Gardetto family and grants from Wisconsin Department of Health Services, Delta Dental, and the Ziemann Foundation. UnityPoint Health-Meriter is also planning to [re-open](#) its' special needs dental clinic next month. The clinic, which will offer sedation dentistry will be a partnership among Meriter, St. Mary's, and the UW Hospitals.

### **[7 of the 10 Most Profitable Hospitals are Non-Profits, and Gundersen Lutheran Tops the List](#)**

Gundersen Lutheran in La Crosse, WI ranks as the most profitable hospital, \$4,241 per patient, reports a study of hospital income, published in [Health Affairs](#). Most of the top earning hospitals operate as not-for-profit entities. The lead author opined that such high earning hospitals should either lower their prices or put their profits to use in their communities. Gundersen released a [statement](#) arguing that the study's methodology was flawed and does not account for its costs as an integrated health system serving a rural and large Medicare population.

### **[Wisconsin ACOs Have Mixed Performance for Year](#)**

Although the state's 11 Accountable Care Organizations (ACOs) had quality scores higher than the national average, their costs were nearly \$10 million higher than national benchmarks. Four Wisconsin ACOs will receive a portion of the money they saved the Medicare program under an experimental payment program. The state's top performing ACO was the Accountable Care Coalition of Southeast Wisconsin and is part of the Milwaukee based Independent Physicians Network. It saved the Medicare program \$17 million last year and will receive \$8 million of those savings.

### **[Wisconsin Hospitals Generate \\$26 Billion in Economic Activity](#)**

[Healthy Hospitals, Healthy Communities](#), a joint report by the UW Extension and Wisconsin Hospital Association finds that Wisconsin hospitals are major economic drivers of economic activity in the state, adding \$26 Billion to the economy in 2013. Out-of-state patients who travel to Wisconsin to receive healthcare generated \$3B, refuting the common belief that hospitals' economic impact is purely local. Hospitals provided employment for 6,400 people and are among the largest employers in many communities. Additional effects cited include that employers consider the quality of health care when considering whether to locate in a community and attract a highly educated workforce.

### **[WHEFA Saves Wisconsin Nonprofits \\$160 Million](#)**

Governor Scott Walker's office announced that in 2016 the Wisconsin Health and Educational Facilities Authority (WHEFA) saved Wisconsin nonprofit institutions more than \$160 million by refinancing outstanding debt and completing 23 financings totaling more than \$1.9 billion. According to the [2016 Fiscal Year in Review](#), among the 18 different non-profit borrowers whom benefited from the bond proceeds were four long-term care facilities, four multi-site acute care facilities, and three single-site acute care facilities. These actions have brought single site hospitals an excess of \$95 million in new capital and an additional \$6.5 million through refinancing. Larger healthcare systems had access to \$300 million in new capital and more than \$872.5 million from refinancing. WHEFA is a state authority tasked with providing nonprofit organizations with access to lower-cost, tax-exempt bond financing.

### **[Milwaukee Bucks, Froedtert & MCW Partner to Improve Community Health](#)**

The Milwaukee Bucks Foundation and Froedtert & Medical College of Wisconsin have announced a new long-term partnership to advance the health of Milwaukee residents by taking a two-generation approach to closing the achievement gap in Milwaukee by targeting education, health care, wellness, and job training. The first initiative will be to build a Learning Center inside Carmen High School of Science & Technology's northwest campus that will provide students and low-income community residents with career training, internships and apprenticeships in healthcare fields. The partnership will also **[build and operate a 37,000 state-of-the-art health center](#)** providing primary care, orthopedics, sports medicine, and some specialty care.

### **[Health Care Start-up, Vibe Tech, Opens in Sheboygan](#)**

A new vibrating chair that was initially developed to combat bone loss in astronauts during long space voyages is now being introduced to hospitals, rehabilitation facilities, and nursing homes throughout the country. Vibe Tech manufactures rehabilitation chairs that simulate load-bearing exercises that strengthen bones and build muscle. It is being targeted to those whose injuries, disabilities, or chronic pain leave them unable to exercise. The technology was supported by a NIH grant and is patented. Vibe Tech currently has 5 employees and may grow to about 15 in the next few years.

### **[Aurora Health Opens Center to Study Heart Conditions Linked to Cancer Treatment](#)**

The Karen Yontz Center for Cardi-Oncology opened in Milwaukee. The Center will offer cancer patients preventative care and on-going screenings for heart conditions known to be associated with cancer treatment. The center will use state-of-the-art cardiovascular imaging techniques and a multi-disciplinary team to provide individual, customized treatment plans for patients at all stages of cancer treatment. The Center will also develop a database on the impacts of cancer treatments on cardio health that will drive treatment strategies.

### **[Aurora Partners with StartUp Health to Promote Personalized Population Health Platform](#)**

Aurora Health Care, and StartUp Health, a leader in digital health, are collaborating to produce a population health tool that will bring together diverse data and resources to promote individual and community health. The goal is to create a population database comprised of multiple streams of patient data, run analytics to create profiles and treatment plans for individual patients and populations. The partnership has announced a call for innovations, seeking digital health startups to integrate into the Personalized Population Health Platform. Selected companies will receive assistance from Startup Health Academy and access to Aurora's internal commercial and technical support systems. Companies will be selected in the fall of 2016 and the platform is expected to launch in early 2017.

### **[Wisconsin Law Requiring Admitting Privileges Dead after Texas Ruling](#)**

Following the Supreme Court decision striking down the Texas abortion law, similar laws in Alabama, Mississippi, and Wisconsin were also stopped. The Texas law required doctors performing abortions and the clinics where they occurred to meet ambulatory surgical center standards. A similar law in Wisconsin requiring doctors performing abortions to have admitting privileges in hospitals within 30 miles of their clinic was declared unconstitutional by a federal appeals court in November 2015. State Attorney General Brad Schimel **[asked](#)** the Supreme Court to review that decision. The day after its own decision in the Texas case, however, the Supreme Court denied to review court case challenges in three states, including Wisconsin, thus upholding the lower court rulings to block the admitting-privilege law.

### [Appleton Abortion Clinic to Close, Leaving Only 3 Providers in State](#)

Despite a legal victory in June [striking down clinic restrictions](#), Planned Parenthood of Wisconsin is closing its Fox Valley clinic. The clinic announced it was closing because of security concerns. After a facilities review following the shooting at a clinic in Colorado Springs last year, staff concluded they were inadequately protected. The necessary security upgrades would have cost \$300,000. The clinic provided about 10% of abortions performed in the state last year. Planned Parenthood will continue to operate clinics in Madison and Milwaukee. Affiliated Medical Services also operates a Milwaukee clinic. The [number of abortions performed has continued to drop in Wisconsin](#) for the past 6 years. Of abortions performed last year, 79% were surgical and 21% were chemically induced.

### ***Insurance/Carriers/Health Plans:***

#### [Price of Health Care Services in Wisconsin Twice the National Average](#)

A report issued by the [Health Care Cost Institute](#) (HCCI) found the highest prices for health care services in Alaska, with Wisconsin, New Hampshire, North Dakota, and Minnesota following. HCCI also reports considerable variation in the price of health care services between states and even between cities. On average, prices for 235 common medical services were 81% higher in Wisconsin than the national average. The Wisconsin Hospital Association warns that the data used in the [study may not represent](#) the state because it includes only slightly more than one-third of total Wisconsin claims, and these from insurers who do not have large share in many Wisconsin markets and also does not include claims data from the large regional plans owned by health systems. However, other recent studies [here](#), [here](#), [here](#), and [here](#) have also shows Wisconsin's prices and provider payments among the highest nationally and regionally. Researchers say that most of the differences probably stem from [underlying market dynamics](#).

#### [Employee Trust Funds \(ETF\) Issues Final RFP for Self-funding State Employee Health Insurance](#)

The Department of Employee Trust Funds (ETF) has issued its final request for proposals to self-fund the state's employee group health plan. In a self-funded model the state doesn't buy insurance but rather pays all benefits directly. The [decision would impact](#) about 209,000 state and 40,000 local government workers and their families. [Experts have disagreed](#) over the cost of self-funding, with Segal Consulting saying the state could save \$42 million a year and Deloitte concluding the plan could cost the state up to \$100 million. State officials have consistently claimed that the RFP is necessary to determine if self-funding is viable. The Wisconsin Association of Health Plans, a [major critic of the plan](#), says that the RFP's scope does not include a comprehensive analysis of the marketplace impact. The Group Insurance Board is expected to decide in November and the Legislature's Joint Finance Committee would have to approve any contract to move the state to self-insurance.

#### [Group Insurance Board Approves 1.6% Increase for Government Workers](#)

State and local workers will see their insurance rise by less than 2% next year. That is less than a third of what large insurers nationally are [projected](#) to pay. A spokesperson for the Wisconsin Association of Health Plans, which represents 11 of the 17 HMOs covering state workers, say that the modest increase indicates that the state has a competitive market and there is no need to move the state to a [self-funded model](#) proposed by Governor Walker and some lawmakers.

#### [Wisconsin's ACA Risk Pool Remains Stable 2014-15](#)

Society of Actuaries reports "risk scores" of Wisconsin's ACA enrollees higher than the national average, but that Wisconsin's scores did not change substantially from 2014 to 2015. The average risk scores nationally increased by 5%, suggesting a less healthy profile of those ACA coverage nationally. [Vox](#)

[explains](#) that a risk score uses things like age, gender, and health diagnoses to estimate how much health care a patient might use.

### [Humana to Leave Individual Market in Wisconsin](#)

Humana insurance will no longer offer insurance in the individual marketplace in five states, including Wisconsin. The decision will impact 26,000 enrollees, approximately 7,000 in Wisconsin. Following disappointing first quarter earnings in 2016, Humana had warned that it might exit some markets at the end of the year. Humana has experienced a 21% drop in individual enrollments, and also suggested that they lost money on plans purchased through the ACA insurance marketplaces in other states. Humana does not offer insurance through the marketplace in Wisconsin.

### [United Health to Leave Wisconsin's Healthcare Exchange](#)

UnitedHealth, the group with the largest market share in the state, will not sell products on the federal health care exchange for the 2017 health plan year. UnitedHealth policies carried lower out-of-pocket maximums (\$3000 to \$4000 compared to \$6400) than other competitors. UnitedHealth has been indicating for some time that products sold on the exchanges have not been profitable and that they would probably exit most of the 34 states where they were offered. Although [Humana is also leaving the individual market](#) in Wisconsin, national insurers Anthem Blue Cross, and state based Network Health, WPS, Dean Health, and others will remain.

### [UnitedHealthcare Community Plans Expands Service Area Throughout Wisconsin](#)

UnitedHealthcare Community Plan, a division of UnitedHealth Group, which contracts with the state to provide health care at a capitated rate to those eligible for BadgerCare Plus and offers plans for Supplemental Security Income ((SSI) and Medicaid, has expanded coverage to include Adams, Columbia, Dane, and Sauk counties. With the expansion, UnitedHealthcare Community Plan is now available in 60 of Wisconsin's 72 counties.

### [WEA Trust Partners with Livongo Health to Provide Intensive Diabetes Management](#)

WEA Trust is offering public employees with diabetes access to a high-touch, interactive diabetes management program via a partnership with Livongo, a digital health company. At no additional cost, WEA members will get a Livongo smart meter that combines real-time blood glucose data and support from Certified Diabetes Educators available 24/7. Regular tracking and coaching have been shown to help patients decrease the HbA1c over time in pilot projects. According to the Wisconsin Department of Health Services, the costs associated with the over 475,000 adults in Wisconsin who have diabetes is \$6.15 billion annually.

### [UW Medical School Denies Coverage for Gender Reassignment Surgery; ACLU Files Complaint](#)

The American Civil Liberties Union's (ACLU) filed a complaint against the Group Insurance Board, which oversees health benefits for state workers. The [complaint](#) charges that in denying coverage of Dr. Shannon Andrews's \$21,000 gender reassignment surgery, the state of Wisconsin, UW Medical School, and Monona-based WPS Insurance violated Title VII of the Civil Rights Act and the Equal Protection Clause of the Fourteenth Amendment. [Final HHS directives](#) prohibit plans the ability to deny or limit such services, and the Group Insurance Board has ended these exclusions, effective January 2017. But the state Department of Justice has [disagrees with GIB](#) reading of the law, and has joined a [lawsuit in federal court](#) challenging the rule.

### **Quality and Rankings:**

#### **[CMS First Release of Overall Hospital Quality Star Rating; 5 Wisconsin Hospitals Earn Highest Marks](#)**

CMS has updated the star ratings on its website [Hospital Compare](#). The ratings summarizes 64 quality measures that are publically available into a single star to make complex data easier to use and is a supplement to star ratings based on [patient experience of care](#) data. The highest 5-star rating was assigned to 102 hospitals nationally, including [five Wisconsin hospitals](#). The ratings have [generated controversy](#), with the Wisconsin Hospital Association and the Association of American Medical Colleges arguing that they are misleading. Consumer advocates welcome the ratings as more accessible information.

#### **[Wisconsin Continues to High Rank for Quality of Health Care Overall, Weak in Health Equity](#)**

Wisconsin was the third highest ranked in the nation for overall health care quality according to the most recent federal Agency for Healthcare Research and Quality (AHRQ) quality and disparity report. Maine and Massachusetts received higher scores. The rankings are based on nearly 200 measures in three areas: types of care, settings of care, and clinical area. Wisconsin scored above national benchmarks on half of these measures, with strong marks overall in care for acute and chronic conditions, preventative care, and care coordination. On these same measures for Hispanic and Black populations, however, the state shows below average performance.

#### **[Wisconsin Communities Rank in Top Quintile on Local Health System Performance](#)**

The Wisconsin communities of Appleton, Madison, La Crosse, and Green Bay all placed in the top quintile nationally on [The Commonwealth Fund Scorecard on Local Health System Performance](#), which assessed the state of health care in over 300 communities across the nation from 2011 to 2014. The scorecard compares regional health care markets across dimensions of access, quality, avoidable hospital use, costs of care, and health outcomes. The state, with the exception of southeastern Wisconsin (which scored in the second quintile) also scored in the top quintile for overall local health system performance. This 2016 scorecard is the second by the [Commonwealth Fund](#); the first scorecard was released in 2012. [Milwaukee's ranking dropped](#) from 2012, even though in many cases the actual performance improved.

#### **[Wisconsin Earns 'A' for Access to Palliative Care](#)**

In a 2015 State-by-State Report Card compiled by the [Center to Advance Palliative Care](#) and the [National Palliative Care Research Center](#) Wisconsin ranked 11<sup>th</sup> nationally with a score of 87.7 out of 100, which earned it an 'A' grade. Scores were based on the percentage of hospitals with 50 or more beds that offer palliative care services. The report indicates that despite continued growth in the number of hospitals offering palliative care, access to palliative care is still inadequate for millions of Americans. According to data from the [National Palliative Care Registry](#), the most persistent barriers to palliative care are workforce, research, and payment models linked to quality measures.

#### **[Family of Marine Veteran Who Died at Tomah VA Files Suit](#)**

The family of Jason Simcakoski, who died at age 35 after receiving a fatal mix of more than a dozen drugs at the US Veterans Affairs facility in Tomah, filed a wrongful death and medical malpractice lawsuit against the US government. The VA's inspector general ruled that his care was deficient and one of the physicians who treated him was fired. Wisconsin Department of Veterans Affairs released a [statement](#).

### ***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:

- [Froedtert Health to Strengthen its Partnership with AVIA Via an Equity Investment](#)
- [Wheaton Franciscan Healthcare Will Lose 6 Senior Vice Presidents and 10 Vice Presidents in Merger with Ascension Health.](#)
- [Ascension Wisconsin, 2<sup>nd</sup> Largest Health Care System in State, Announces Restructuring into Two WI Regions with Separate Presidents.](#)
- [Ascension Wisconsin Names New Regional Presidents](#)
- [Ascension Consolidation Results in Shifting Services from Bluemound to Elmbrook Campuses.](#)
- [Progressive Community Health Centers to Open New Urgent Care and Primary Care Clinics at Aurora Sinai Medical Center to Serve Milwaukee Central City Neighborhoods.](#)
- [Aurora Health Care and UnitedHealthcare of Wisconsin Initiating Medicare Advantage Plan ACO.](#)
- [Marshfield Opens New Cancer Center in Eau Claire; Sacred Heart Hospital Questions Necessity for Third Area Hospital](#)
- [Gundersen, Unity Health Plan Merger Approved](#)
- [UnityPoint Health-Meriter and UW Health Explore Collaboration](#)
- [Essentia ChoiceCare with Medica Launches as Collaborative Health Plan](#)

## **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](#)
- [NGA: The Future of Medicaid Transformation: A Practical Guide for States](#)
- [50-State Survey Results: Medicaid Reforms to Expand Coverage, Control Costs, Improve Care](#)
- Information on the Health Insurance Marketplace and Health Care Reform: [healthcare.gov](#)
  - [Spanish Language Marketplace](#)
  - [Marketplace Enrollment Data](#)
- New and Updated Resources from the [Commonwealth Fund Health Reform Resource Center](#)
- [Enroll America](#) Resources
  - [Get Covered Plan Explorer](#)
  - [State Uninsured Profiles](#)
- [2015 Exchange Enrollment Information by County](#)
- [Healthcare.gov Affordability Tool](#)
- [State Refor\(u\)m](#)
- Key Health Data About Wisconsin from [TFAH](#)
- Value Penguin Map: [Changes to the Obamacare Exchanges 2015 v. 2014](#)
- Avalere Health Analysis: [2015 Exchange Premium File](#)
- [WI OCI Individual Health Insurance Carriers in WI Map](#)

## **EVENTS AND ANNOUNCEMENTS**

[WCCF Poverty Matters! Conference](#), Appleton, Sept 14-15.

[MGMA Wisconsin: Symposium 2016](#), Madison, Sept 15-16

[2016 Wisconsin Health Insurance Enrollment Conference](#), Wisconsin Dells, September 19-20

[Southern Wisconsin Conference on Mental Health](#), Janesville, September 19

[ACHE-WI 2016 Annual Conference](#), Elkhart Lake, September 26-28

[WI Healthy Hospitals Forum](#), Madison, September 30

[WHA Welcomes Your Story For Their 2016 Community Impact Report](#), Deadline: October 1

[Healthcare Consumerism panel](#), Wisconsin Health News, Milwaukee Athletic Club, October 4

[The Path to Value: Cost, Quality, & the Patient Voice](#), Madison, October 4

[WHIO 2016 Learning Forum](#), Madison, November 7

[WHA Conference for Emerging Health Care Leaders](#), Madison, November 16

### **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.

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.