

# Catch-Up Briefing Report

## Vol. 17, No. 1

### First Quarter, 2017



An annotated compilation of selected Wisconsin health and health care news stories from January 1, 2017 – March 8, 2017. Archived editions can be found [here](#).



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## STATE NEWS

### Governor Walker Releases Proposed Biennial Budget

Governor Walker has released his budget proposal for the 2017-19 biennium, which will now be reviewed by the Legislature's Joint Finance Committee. The budget includes plans to attain a new waiver that will make [changes to coverage for childless adults within BadgerCare](#). The budget also includes, within the [Department of Employee Trust Funds](#), the conversion of state employee health insurance to a self-insured model.

- [Budget in Brief](#)
- [Department of Health Services](#)
- [Fiscal Bureau Summary](#)
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- [Wisconsin Budget Project summary](#) of health care provisions.
- [State agency budget requests with narratives](#)
- [Legislative Fiscal Bureau Information Papers](#)
- [Governor's Capital Budget](#)

### [Wisconsin Committee Chairs Change Amid Political Transition](#)

With a 20-to-13 majority in the state senate, Wisconsin's Republican senators are positioned in key healthcare appointments. Sen. Leah Vukmir (R-Brookfield) will continue to chair the Senate Committee on Health and Human Services, vice-chaired by Sen. Terry Moulton (R-Chippewa Falls). Sen. Frank Lasee (R-De Pere) and Sen. Luther Olson (R-Ripon) will chair and vice-chair, respectively, the Senate Committee on Insurance, Housing, and Trade. The budget-writing [Joint Finance Committee](#) is chaired by Senator Darling (R-River Hills) and Representative Nygren (R-Marinette).

## **Health Care Reform Implementation in Wisconsin**

### [GOP Repeal and Replace Plan](#): Wisconsin Reacts

Congressional Republican leadership, led by [House Speaker Paul Ryan \(R-Janeville\)](#), released its bill, titled the American Health Care Act (AHCA), to repeal and replace the Affordable Care Act (Obamacare). Congressional summaries are available [here](#) and [here](#).

- State Journal: [Walker won't commit to back GOP health care plan](#)
- Milwaukee Journal Sentinel: [Walker tepid on Paul Ryan's Obamacare repeal plan](#)
- AP: [Walker refuses to endorse federal health care bill](#)
- House Speaker Paul Ryan statements [here](#) and [here](#)
- [WKOW: State GOP legislative leader focused on Medicaid portion of Obamacare replacement](#)
- [WI State Journal: Obamacare repeal bill could hit Wisconsin's Planned Parenthood Clinics](#)
- [Wisconsin Hospital Association](#) and [here](#) and [here](#)
- [Planned Parenthood Statement](#)
- [Democratic Party of Wisconsin](#) and [here](#)

Maps show how the AHCA will change the [tax credits in each Wisconsin county](#), and by [income and age group](#) and [geography](#).

### [ACA Enrollment Outpaces 2016: 243K WI Residents Select Obamacare Plans](#)

At the end of the 2017 open enrollment period, 242,863 Wisconsinites selected health plans through the Affordable Care Act marketplace for 2017 plans. This shows an increase of January 2016, when 239,034 had selected ACA plans. The Madison market area had 36,958 sign-ups, and the Milwaukee area had 95,195.

## **Various ACA-Related Impacts on Wisconsin Reported**

Several reports have been release providing data about the impacts of ACA policies in Wisconsin:

- [CMS: WI Seniors Save \\$465M from ACA Closing Medicare Part D Donut Hole](#)
- [CMS: 480K Wisconsin Seniors Utilize ACA's New Preventive Service Coverage](#)
- [Wisconsin Council on Children and Families Summary of ACA Impact](#)
- [Wisconsin Shows Higher ACA Enrollment in Republican Districts](#)
- [UW Population Health Institute Chartpack on ACA and Medicaid Reforms](#)
- [Citizen Action: Wisconsin 2017 Health Insurance Cost Rankings Report](#)

#### [OCI: Transitional Health Plans Can Remain through 2018](#)

Wisconsin's Insurance Commissioner has released guidance permitting insurers to extend transitional policies for individuals and small groups through the end of 2018. The policies include plans "grandmothered plans" that were purchased after March 2010 but before October 2013 and do not comply with federal ACA requirements. Nearly 190,000 of the 230,000 in Wisconsin's small group market are enrolled in transitional plans, Wisconsin's state's deputy insurance commissioner [reported in Congressional testimony](#).

#### [Report: ACA Repeal Could Cost Wisconsin 46,000 Job, Billions on Economic Output](#)

The Commonwealth Fund [reports](#) that repealing the Affordable Care Act tax credits and Medicaid expansion could result in 46,000 job losses in Wisconsin: 97% from the private sector. The reports projects potential loss of \$25.7 billion in gross state product, \$46.5 billion in business output, and \$845.7 million in state and local taxes between 2019 and 2023. Citizen Action of Wisconsin (CAW) also released [A Cost Too High: The Financial Harm of the Republican Plan to Eliminate Health Care](#).

#### [Preliminary Report Estimates Wisconsin Uninsured Rate at 5.0 Percent](#)

The National Center for Health Statistics reports that Wisconsin's uninsured rate had decreased to an all-time low of 5.0% among all age groups. Of the 95% insured, 35.7% percent held public health plans and 71.0% held private health insurance. [New data from the Wisconsin Family Health Survey](#), also recently released, show that 91% of Wisconsin residents has insurance for all 12 months prior to the survey interview. [The UW Applied Population Laboratory \(APL\) estimates](#) the state's health insurance coverage at a historic high 94.3% in 2015. Wisconsin ranks 7<sup>th</sup> in the nation in health insurance coverage.

#### [Wisconsin Group Insurance Board Approves State Self-Insurance Plan](#)

Governor Walker plans to shift state employee health insurance to a self-insured model, with projections to save the state \$60 million over the next two fiscal years. The Group Insurance Board passed the self-insurance plan with near unanimity, recommended to start January 2018. The state would contract with four regional health insurance companies and pay medical expenditures directly instead of paying premiums to 17 private HMOs across the state. The Joint Finance Committee (JFC) must approve the plan. Critics released statements of opposition, including the [Wisconsin Association of Health Plans](#), [Rep. Chris Taylor](#), and [former WHIO CEO Jo Musser](#), while health care groups have [expressed concerns](#). Governor Walker has been working [to sell the plan](#) to the legislature. [More information from ETF here](#).

### [Pharmaceutical Investigation Finds Prescription Drug Prices Rising Exponentially](#)

In a joint investigation of prescription drug prices by the Wisconsin Center for Investigative Journalism, Wisconsin Health News, and Wisconsin Public Radio, seven widely prescribed drugs, some covered by Medicare and Medicaid, have had price increases between 29% and 5,241% in recent years. The analysis found various factors leading to market monopolies. Senator Tammy Baldwin (D-Wisconsin), Sen. John McCain (R-Arizona), and Rep. Jan Schakowsky (D-Illinois) [introduced federal legislation](#) “requiring pharmaceutical companies submit a report to the federal government a month before increasing product prices by 10 percent or more.”

## **Medicaid/BadgerCare**

### [Medicaid Spending Expected to be \\$312 Million Under Budget](#)

The Wisconsin Council on Children and Families (WCCF) reports that Medicaid spending growth has continued to slow in recent years, resulting in savings to the state’s general fund. The Department of Health Services’ (DHS’) [reports](#) to the Joint Finance Committee that this saving is “due to multiple factors, such as a more favorable matching rate, lower enrollment growth, [and] larger than projected decreases in nursing home utilization...”

### [Governor Walker Requests Entitlement Changes From President Trump](#)

In December 2016, Governor Scott Walker sent [correspondence](#) to President-elect Donald Trump recommending childless adults receiving SNAP benefits undergo drug screening, drug testing for FoodShare applicants, and a “waiver to apply new policies for childless adults at or below 100 percent of the federal poverty level.” Governor Walker later [proposed work requirements for childless adults enrolled in BadgerCare](#) and sent a [second letter](#) recommending a decrease public assistance benefits as income increases.

### [Majority of State Transitioned to MyWICChildCare](#)

In an effort to account for provider overpayment, the Wisconsin Department of Health Services (DHS) implemented the MyWICChildCare Initiative, which uses an electronic benefit transfer card to pay for child health care costs. Eligible families in Buffalo, Clark, Jackson, La Crosse, Monroe, Pepin, Vernon, and Trempealeau Counties were placed on the program ahead of the October 1, 2016 start. All remaining counties will utilize this service after April 1, 2017.

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

### [WHA Launches Physician Quality Academy](#)

The Wisconsin Hospital Association has launched the Physician Quality Academy to provide training and resources to physicians to lead quality improvement initiatives. The academy, held in two cohorts, will offer two non-consecutive in-person trainings as well as online resources. Cohort 1 is scheduled to meet in-person May 10<sup>th</sup> and July 21<sup>st</sup>; cohort 2 is scheduled to meet in-person September 29<sup>th</sup> and November 3<sup>rd</sup>. [Registration](#) is now open.

### [21 Residents Graduate from Quality Residency Program](#)

The Quality Residency Program, founded in partnership between the Wisconsin Hospital Association and the Rural Wisconsin Hospital Cooperative in 2013, provides specialized training to hospital residents serving rural and underserved communities. The ten day training includes topics on regulation and accreditation requirements, basic risk management skills, quality data reporting methods, data analysis, and ensuring quality improvement efforts.

### [Wisconsin Healthcare Workforce Report Reveal Variable RN Vacancy Rates](#)

The Wisconsin Hospital Association's reports increasing statewide vacancy rates among registered nurses, estimated at 6.1% in 2015 after a decade low in 2012 at 3.4%. The increases in vacancy is largely attributed to an aging and retiring workforce, as the average age of nurses is 55-years-old and 40% of RNs reported retirement plans within 10 years. Certified nurse aide positions are also in high demand, along with physician assistants, and nurse practitioners.

### [MATC to Expand Nursing School Capacity, Awarded \\$2.3 Grant](#)

United Health Foundation announced a grant partnership with Milwaukee Area Technical College (MATC) to double the size of the school's registered nursing program over the next three years and help address the state's growing nurse shortage. The grant is \$2.3 million over three years.

### [Wisconsin's Dental Hygienists 'Favorably' Improve Professional Environment](#)

Wisconsin scores 'favorable' in rating on the Dental Hygiene Professional Practice Index -- a quintile scale that included restrictive, limiting, satisfactory, favorable, and excellent with regard to the state-level professional practice environment for dental hygienists.

### [DSPS Approves Opioid Guideline Training; Later Add Guideline Tweaks](#)

The Department of Safety and Professional Services (DSPS) has approved an emergency rule requiring doctors to complete training related to the opioid guidelines, which were approved by the Medical Examining Board in July 2016. The two-hour training is required for all relicensure applications as part of the required 30 hours of continued medical training. Shortly after approving these requirements, the Medical Examining Board, per recommendations from several doctors, added language to discourage opioid prescriptions for patients already taking benzodiazepines or other respiratory depressants (associated with increased risk of death) and clarification around treatment referrals for patients experiencing opioid use disorder.

### [Tech-Check-Tech Program Pilot Program Underway](#)

In partnership with the National Association of Chain Drug Stores, the Pharmaceutical Society of Wisconsin will pilot the Tech-Check-Tech program, which allows pharmaceutical technicians to complete the final prescription check, as opposed to a pharmacist or a pharmaceutical intern. This is thought to improve patient access to care and healthcare outcomes. The study will collect and analyze data from 15 to 20 independent chain and health system community pharmacies throughout Wisconsin.

### [Federal Hiring Freeze to Affect Tomah VA](#)

Within days of his inauguration, President Trump signed a [presidential memorandum](#) that froze all hiring of federal civilian employees, offering exception to military personnel and exemptions where national security or public safety responsibilities are at risk. This freeze included all U.S. Department of Veterans Affairs (VA) entities and could adversely affect the Tomah VA, which has 22 vacancies. It is unclear if any of these vacancies will bear exemption under the risk to public safety clause.

### [Telemedicine Rule Approved by Medical Examining Board, Heads to Gov. Walker for Review](#)

After a year of drafting and revisions, the [telemedicine rule](#), has been approved by the State of Wisconsin Medical Examining Board. The rule defines telemedicine, clarifies the terms of a physician-patient relationship established through telemedicine, and provides guidelines on equipment, technology, and internet-based diagnosis and treatment.

### [EMS Assessment Shows Mixed Results in Rural Wisconsin](#)

The [Attributes of a Successful Rural Ambulance Service Self-Assessment](#) measures quality in five categories (operations, finance, quality, public relations, and human resources) on a 1-5 scale. Of the 19,000+ providers within 426 agencies that received the self-assessment, complete data was returned by individuals reflecting 179 agencies, a 42% response rate. In every category and in the majority of category-attributes, rural scores were lower compared to statewide averages and even lower (greater than 0.5 scaled points) compared to urban scores, suggesting a disparity in ambulance service quality in rural compared to urban Wisconsin.

## **Public Health**

### [DHS Reports Increases in Alcohol Misuse/Abuse and Opioid-Related Deaths](#)

The Wisconsin Department of Health Services (DHS) has released the [Wisconsin Epidemiological Profile on Alcohol and Other Drugs, 2016 report](#), which found a 1.3 times higher alcohol consumption rate (per capita) at 63% compared to the national average of 53%. BRFSS data in the report shows that 22% of adults reported binge drinking, which is the third highest rate in the nation. Opioid-related hospitalizations have increased in 40% of Wisconsin counties and the mention of heroin and other opioid-related drugs in death reports increased.

### [Rate of Overdose Deaths Involving Heroin Increased 880% Between 2006 and 2015](#)

The Wisconsin Department of Health Services (DHS) [reports](#) that the rate of overdose deaths involving heroin has increased 880% between 2006 and 2015, rising from 0.5 deaths per 100,000 to 4.9 deaths per 100,000. Prescription drug abuse, specifically opioids, continues to be the state's focus as the rate of opioid overdose deaths has nearly doubled (5.9 and 10.7 respectively) and the rate of overdose deaths involving prescription opioids has increased 26 percent (5.3 and 6.7 respectively) between 2006 and 2015.

### [Wisconsin Opioid-Related Inpatient Stays and Emergency Visits Nears National Average](#)

In a recent analysis of opioid-related inpatient stays and emergency visits, the Healthcare Cost and Utilization Project (HCUP), a division of the Agency for Healthcare Research and Quality

(AHRQ), found that the rate of opioid-related inpatient stays (per 100,000) in 2014 was 212.8 in Wisconsin, very similar to the national average rate of 224.6. The rate of opioid-related inpatient stays increased in Wisconsin by 19.1 percent cumulatively between 2009 and 2014. Additionally, Wisconsin's opioid-related emergency department visits (per 100,00) between 2009 and 2014 increased 68.6%.

#### [Neonatal Abstinence Syndrome Rates Increase](#)

The Wisconsin Department of Health Services' (DHS) [Select Opioid-Related Morbidity and Mortality Data for Wisconsin](#) reports the rate of Neonatal Abstinence Syndrome (NAS) has increased stepwise from 2.0 cases per 1,000 live births (142 cases) in 2006 to 8.7 cases per 1,000 live births (583 cases) in 2014 – a 335 percent increase. [Hospital charges nearly nine times higher](#) than unaffected newborns, \$44,929 vs. \$5,864. Statewide, of the \$1.5 billion cost of NAS treatment, \$1.2 billion is billed through Medicaid annually.

#### [DHS Releases “11 Steps to Combat the Opioid Crisis”](#)

In the midst of action to prevent opioid-related deaths and revise prescription policies related to opioids, the Department of Health Services (DHS) has released a detailed list of 11 steps to combat the opioid crisis. The steps are organized in three groups: Hope, Act, Live, which aim to motivate health professionals and those afflicted or at-risk of opioid abuse.

#### [Governor Walker Issues Three Executive Orders Relating to Opioid Abuse](#)

Governor Walker's [Executive Order 228](#) called for the implementation of recommendations made in a [report](#) by Lt. Gov. Kleefisch and Rep. Nygren. [Executive Order 229](#) called for the Department of Health Services (DHS) to apply for the State Targeted Response to the Opioid Crisis Grant by February 17, 2017. [DHS submitted a grant proposal per Executive Order 229](#) to the federal Substance Abuse and Mental Health Services Administration (SAMHSA). Pending approval, the grant will provide DHS funding to support community coalitions, establish treatment and recovery hotlines, and expand access to treatment for uninsured and underinsured individuals, among other efforts. [Executive Order 230](#) required a special session to consider and act upon various opioid-related legislation.

#### [Additional Opioid-Related Bills Introduced; Public Hearings Held](#)

Public hearings have been held on additional proposal that were introduced as part of the legislature's [special sessions on opioid abuse](#):

- Provide an additional \$4 million for [treatment and diversion programs](#)
- [\\$840,000 to the Dept of Justice to hire four more investigators](#) to fight drug trafficking
- \$400,000 for [expanding the use of a screening tool](#) for students
- [Establish a charter school](#) for up to 15 high school students in recovery
- [Exempt school employees and volunteers](#) from civil liability for administering a medication that counteracts the effects of an opioid overdose.

#### [New Opioid Law Requires Patient History Review](#)

As part of Representative Nygren's bipartisan supported Heroin, Opiate, Prevention, and Education (HOPE) agenda, Wisconsin legislature passed a new law requiring medical



professionals to conduct a review of a patient's history of controlled substances before prescribing any opioid with a supply lasting three or more days. The law aligns with the newly released Enhanced Prescription Drug Monitoring Program (ePDMP).

#### [ePDMP to Launched mid-January, Original PDMP Program Found Success](#)

Intent to provide more efficient web access to Wisconsin Prescription Drug Monitoring Program's (PDMP) data, analytics, and visualizations, the Enhanced PDMP (ePDMP), launched by the Wisconsin Department of Safety and Professional Services (DSPS) will require users to re-register and retrain in order to access PDMP via their electronic health record (EHR). Users are able to view [training and troubleshooting material](#) and [register](#) with ePDMP. To date, [more than 12,000 prescribers and dispensers have created accounts with ePDMP](#). Wisconsin's initial PDMP program proved successful in decreasing the number of dispensed opioid prescription doses

#### [Attorney General Schimel Renews Naloxone Rebate Agreement; Discounted Narcan](#)

Attorney General Brad Schimel has [renewed a rebate agreement](#) with Amphastar Pharmaceuticals, which will provide a \$6 rebate for each Amphastar naloxone syringe purchased by public entities in Wisconsin. Amphastar has reached similar agreements with other states. Attorney General Schimel has also negotiated a discounted price for FDA-approved NARCAN® Nasal spray. Under the company's Public Interest Price, when purchasing 48 units or more, approved entities will receive a 40% discount.

#### [Wisconsin and Minnesota Partner with A Dose of Reality Anti-Opioid Abuse Campaign](#)

Wisconsin Attorney General Brad Schimel and Minnesota Attorney General Lori Swanson have co-sponsored the *Dose of Reality* campaign aimed at preventing prescription painkiller abuse. The campaign, set to run on multiple platforms throughout each state, features a teen unconscious near a prescription bottle as well as facts and actions for various parties including educators, students, parents, and businesses, to name a few.

#### [Opioid Prescriptions Down 9.6%](#)

According to a [report](#) by the Controlled Substance Board (CSB), Wisconsin providers issued 9.63% (123,265) fewer opioid prescriptions in the third quarter of 2016 compared to third quarter estimates from 2015. Over those same periods, opioid doses dispensed decreased 9.89% (8,230,422). Additionally, the 15 most dispensed prescription drugs accounted for 86% of all monitored prescription drug doses dispensed.

#### [Obesity Rate Higher Than Previously Reported](#)

The Survey of the Health of Wisconsin (SHOW) reports that 39.4% of Wisconsin adults are obese, based on direct measurement, a figure higher than the previously reported 30.7% based on phone surveys and self-reported height and weight. The study, published in the *Wisconsin Medical Journal*, found that "obesity rates were highest among people who are older, poor, less educated, minorities, or whom live in a community with high economic hardship."



### [Wisconsin Underfunds Tobacco Prevention Compared to CDC Recommendations](#)

Wisconsin spends 9.2% (\$5.3 million) of the CDC's recommended \$57.5 million for programs that target tobacco prevention amongst youth. This ranks Wisconsin 32<sup>nd</sup> in funding for these programs. Amongst Wisconsin high school students, 8.1% smoke traditional cigarettes and [13 percent smoke e-cigarettes](#). The full [report](#), provides state-by-state data and [interactives](#).

### **Lead Poisoning:** [171 Superior Shipyard Employees](#); [Madison Public Schools](#)

Wisconsin health officials, after conducting a workplace investigation at Superior Shipyard, [found that 171 employees](#), or 73% of the workforce, at Fraser Shipyards tested positive for lead poisoning. Thirty-five workers had exceptionally high lead levels – 40 to 60 times the average adult. It is unclear whether these poisonings are the result of short-term or long-term exposure. In March 2017, [six public schools](#) in the Madison Metropolitan School District tested positive for lead in their drinking fountains. All six schools had at least one fountain with lead levels higher than the national standard of 15 parts per billion.

### [Two Cases of Hantavirus Found in Wisconsin](#)

Hantavirus, otherwise known as Seoul virus, carried by wild Norway rats worldwide, has found its way to the Midwest. In Wisconsin, two infections (one hospitalization) has been confirmed. Authorities [first recognized](#) the infections after rat-breeders in Wisconsin, upon purchasing rats in two rat-breeding facilities in Illinois, fell ill with the same strain of Hantavirus as six individuals in Illinois. The two Wisconsin residents have since recovered. The virus does not spread from person to person, but does spread through bites from infected rats or contact with blood, saliva, or urine of an infected rat.

### [Right to Try, CBD Oil Bills Approved by Assembly](#)

Wisconsin's Assembly voted in support of a "Right to Try" bill that would allow access to experimental drugs that have completed a phase one clinical trial and are still under investigation at the Food and Drug Administration. The intent is to create a pathway for terminally ill patients to access experimental treatments. The Assembly also approved a bill to allow patients with documentation from a doctor to possess the CBD oil, a substance derived from marijuana. Both bills now move to the Senate for consideration.

### **Newly Funded Public Health Initiatives – Grants Awarded:**

- [Twenty recipients receive \\$5 million in project funding from Aurora Health Care](#)
- [Born Learning granted \\$350,000 for Optimal Child Health in Portage Co.](#)
- [Delta Dental Provided \\$776,500 in Grants to Improve Oral Health](#)
- [MCW Launches Psychiatric Care for Expectant Mothers with \\$1.2M Grant](#)

## Clinics, Hospitals, and Health Plans

### [WHA Launches Collaborative Hospital Improvement Innovation Network; Progress Reported](#)

The Wisconsin Hospital Association (WHA) has launched the Hospital Improvement Innovation Network (HIIN) with hospitals in Michigan and Illinois, with the goal to reduce preventable readmissions by 12% and reduce hospital-acquired harm by 20% over the next three years. Additionally, the CMS-funded Great Lakes Partners for Patients (Wisconsin, Michigan, and Illinois) will provide new resources to WHA members. The Wisconsin Hospital Association recently [announced](#) a 60% reduction in some infection rates and reduction in readmission rates. [Report Here](#)

### [CMS Designates WI with Four 5-Star Hospitals, Zero 1-Star Hospitals](#)

After the Centers for Medicare and Medicaid Services (CMS) reformulated their hospital ranking system, 5-star hospitals, an honor bestowed upon 1.81% of all ranked hospitals in the United States (4,598), fell from 112 (October 2016) to 83 (December 2016). Wisconsin held strong with [four hospitals achieving 5-star ranking](#) and [zero hospitals achieving 1-star ranking](#).

### [Wisconsin Ranked 7<sup>th</sup> Best in Nation in CMS Quality Incentive Program](#)

The Centers for Medicare and Medicaid Services' (CMS') Hospital Value-Based Purchasing (VBP) Program links Medicare payment to a value based-system nationally, and Wisconsin has ranked 7<sup>th</sup> in the nation. Eighty-five percent of Wisconsin hospitals received a bonus, averaging 0.7 percent bonus. The bonus suggests that hospital care was of a higher value (quality compared to cost) than the national benchmark as measured by 20 factors including mortality, hospital-acquired infections, complications, and patient satisfaction.

### [22 WI Hospitals Fail to Offer Emergency Contraception to Sexual Assault Victims Since 2008](#)

In cases of sexual assault, [Wisconsin Statute §50.375 \(2007\)](#) require hospitals to provide victims with a variety of information and services, including emergency contraception options, examination options to gather evidence regarding the sexual assault (commonly known as a 'rape kit'), and options to report the assault to law enforcement. Since the law's implementation, twenty-two hospitals in Wisconsin have been fined for failing to provide these legally required services. The 22 hospitals in violation all seem to have received the minimum fine (\$2,500), with some showing up to three violations.

### [Wisconsin Hospitals Report Community Impact Services](#)

Wisconsin Hospital Association's [2016 Community Impact Report](#) tallies \$1.7 billion in Wisconsin hospital community impact in 2015. Over \$1 billion of that identified community benefit is from what hospitals consider shortfalls in Medicaid payment relative to what they charge. The least funded benefit category was community health improvement services toward social and environmental improvement activities, which received \$1.5 million. At the same time, Wisconsin's general Medical and Surgical Hospitals report a [FY2015 operating margin of 11%](#), a decline in charity care, and a [31% decline in uncompensated care](#). WHA infographics for the community benefit report can be found [here](#).

### [Gender Reassignment Exclusion Reinstated](#)

Effective February 1, 2017, the exclusion of “procedures, services, and supplies related to surgery and sex hormones associated with gender assignment” will be applied to all participants of the State of Wisconsin Group Health Insurance Program and the Wisconsin Public Employers Group Health Insurance Program. The Wisconsin Group Insurance Board (GIB) had reconsidered allowances for gender reassignment surgery and hormone treatments for transgender state employees after a high profile and ongoing [case involving a UW-Madison cancer researcher](#). A [federal judge ruled against ACA regulations](#) that aim to mandate coverage of these services.

### [Medicaid Payment Changes Take Effect for Wisconsin FQHCs](#)

Wisconsin’s federally-qualified health centers will now be paid under a new Medicaid [prospective payment system](#) instead of its previous cost-based reimbursement model. The state Medicaid agency worked with FQHC representatives to develop the model, which is being phased in over a three-year period. The change is budget neutral and will have no impact on projected Medicaid expenditures in the upcoming biennium. It is intended to move toward Medicaid savings and value-linked incentives over time.

### [Wisconsin Tops the Nation in Electronic Patient Health Sharing of Information](#)

A [study](#) by the Center for Disease Control and Prevention’s (CDC’s) reports Wisconsin leading the nation with 65.5% of physicians having electronically received patient health information. Wisconsin ranked third highest nationally in the percentage (50.4%) of physicians who sent patient health information electronically to other providers. The national average is 38.2%.

### [Ascension Increases Operating Revenue and Income after Wheaton Franciscan Merger](#)

[In the midst of job cuts and layoffs](#) in undisclosed amounts, which [sparked petitions](#) by hospital staff, particularly the nurses’ union in Milwaukee, Ascension has increased patient volume 8.5%, operating revenue by 8.4%, and operating income by 53% after the company’s first fiscal quarter. Ascension’s [merger with Franciscan Wheaton has largely been credited](#) as the cause of these significant increases in revenue.

### [SSM Health to Implement an \\$11 Per Hour Minimum Wage](#)

In states where SSM Health operates, the minimum wage is between \$7.25 (as it is in Wisconsin) and \$8.25, which is what some 1,110 employees (3.5% of its workforce) of SSM Health currently earn. However, effective January 2017, SSM Health will increase its minimum wage to \$11 per hours. SSM health operates extensively in Wisconsin, as well as in Missouri, Illinois, and Oklahoma.

## **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:

- [Anthem BCBS Expands BadgerCare Plus and Medicaid Services to 24 More WI Counties](#)
- [Ascension Medical Group Opens First Group Practice After Ministry Health Rebranding](#)
- [Ascension Hospitals Finish Construction of Outpatient Services Department](#)

- [Community Care Connections, ContinuUs, and Western Wisconsin Cares Merge](#)
- [Hospital Sisters Health System-Eastern Wisconsin Division Cuts 85 Non-Clerical Jobs](#)
- [Memorial Hospital of Lafayette County Affiliated with UnityPoint Health – Meriter](#)
- [Aurora Health Care Partners With Walgreens As Clinic Provider](#)
- [Aurora Health Care to Build 30,000-Square-Foot, \\$17 Million Clinic in Oak Creek, WI](#)
- [Door County Med Center Leaves Ascension, affiliates with Hospital Sisters Health System](#)
- [Marshfield Clinic Submitted Construction Plans for 44-Bed Hospital in Eau Claire](#)
- [Marshfield Clinic Health System to Build Hospital in Minocqua, WI](#)
- [Medical College of Wisconsin Partners with Froedtert for Family-Medicine Residency](#)
- [ThedaCare Center for Healthcare Value rebrands, changes Name to \*Catalysis\*](#)
- [UW Health, Marshfield Clinic withdraw from AboutHealth](#)

## **RESEARCH AND PROGRAM TOOLS**

- [ASPE Compilation of State Data on the Affordable Care Act](#)
- [Affordable Care Act & Medicaid Reform in Wisconsin: Enrollment and Coverage Trends](#)
- [Health of Wisconsin Report Card, 2016](#)
- [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](#)
- [WI CI Individual Health Insurance Carriers in WI Map](#)
- [Mental Health in Wisconsin: Infographic](#) with data from the 2017 Family Health Survey
- [Materials from the Evidence-Based Health Policy Project Briefings](#)
  - [Addressing Opioid Use: What's New and Emerging in Wisconsin?](#)
  - [The Future of the Affordable Care Act and Medicaid: What Comes Next, and How Might the State Prepare?](#)
  - [Farmers, Eaters, and Legislators: The State Role in Food Systems and Nutrition Policy](#)

## **EVENTS AND ANNOUNCEMENTS**

- [8<sup>th</sup> Annual Wisconsin Women's Health Advocacy Summit](#), Madison, March 14
- [Wisconsin Long Term Care Advisory Council](#), Madison, March 14
- [Wisconsin ACEP 2017 Spring Symposium](#), Madison, March 28
- [Wisconsin Psychiatric Association 2017 Annual Conference](#), Kohler, March 30-April 1
- [Wisconsin Health Literacy Summit](#), Madison, April 4-5
- [Wisconsin Hospital Association Advocacy Day](#), Madison, April 19
- [Wisconsin Cancer Council Annual Meeting](#), Madison, May 11
- [Annual Public Health Conference](#), Wisconsin Dells, May 23
- [2017 WPHA Public Health Nursing Conference](#), Stevens Point, August 8
- [Wisconsin Sections ACOG 2017 Annual Conference](#), Sheboygan, August 11-August 12

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