# **Catch-Up Briefing Report**

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An annotated compilation of selected Wisconsin health and health care news stories from August 12, 2015 – October 30, 2015. *Archived editions can be found here*.



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

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# **STATE NEWS**

# **Health Care Reform Implementation in Wisconsin**

#### WI OCI Releases Interactive Maps of ACA Qualified Health Plans by County

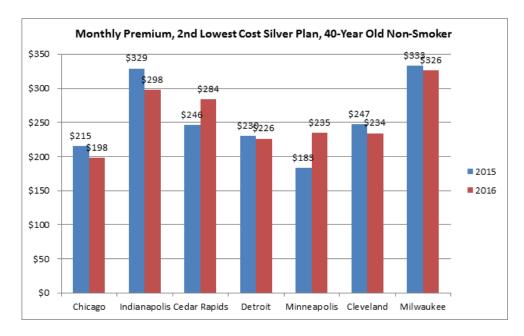
The 2015 Open Enrollment Period begins on November 1<sup>st</sup>, and the Wisconsin Office of Commissioner of Insurance has posted an interactive <u>map</u> of 2016 health plans participating in the exchange, searchable by county, as well as another interactive <u>map</u> that provides detailed information on exchange enrollment by county in 2015. Plan offerings are available for preview on the federal exchange <u>website</u> as well, which has been <u>updated</u> to improve consumer experience, and includes a new <u>affordability tool</u> to help estimate total yearly health insurance costs. HHS also released a <u>report</u> examining the remaining uninsured eligible to enroll in ACA Marketplace coverage in 2016.

#### Federal Report Shows Benefits of Price Shopping During Open Enrollment

Wisconsin ACA enrollees from 2014 who switched plans in 2015, even though staying within the same metal level, found siginfiicant savings. A new federal report shows that consumers in Wisconsin that switched plans saved an average of \$43 per month, or \$515 per year, on their premiums. Enrollment data showed that consumers were likely to switch plans when the premium of their 2014 selected plan increased substantially.

#### WI Lower Average Premium Increase than National; WI Premiums Remain Comparatively High

CMS reports that premiums will increase an average of 7.5% in 2016 across the 37 states that use the federal healthcare.gov exchange, while Wisconsin's average rate increase is substantially lower, at 4.7% over 2015 rates. But Wisconsin Public Radio reports that the deductibles and out-of-pocket costs for these plans have increased substantially. CMS also provided a breakdown of the increase in the 30 largest markets in the country, where the average increase was 6.3%. Wisconsin's rates remain considerably higher than other states. HHS still estimates that nearly 8 in 10 returning Marketplace consumers will be able to buy a plan for \$100 or less after tax credits.



#### Anthem Drops Out of Marketplace in Milwaukee, Racine, and Kenosha in 2016

Blue Cross/Blue Shield licensee Anthem recently announced that it will stop serving Milwaukee, Racine, and Kenosha in 2016, and media reports indicate that it will significantly cut back its offerings in 34 other Wisconsin counties. Blue Cross/Blue Shield servicers in Illinois and Texas have announced that they would no longer offer PPO plans, but would continue to offer HMO plans. This move comes on the heels of Milwaukee-based Assurant health's recent announcement that it would exit the health insurance marketplace as well.

#### Health Insurance Coverage Expansion Rate in Wisconsin Lags Behind National Rates

A new <u>report</u> by the Georgetown Center for Children and Families found that the rate of uninsured children declined from 9.3 percent in 2008 to 6.0 percent in 2014. An <u>analysis</u> of the report by the Wisconsin Council on Children & Families points out that Wisconsin showed a less substantial decline, from 5.2 percent in 2008 to 4.4 percent in 2014. WCCF suggest one reason for the modest decline in WI

is the lower number of uninsured children the state started out with, though Wisconsin's reduction in uninsured still lags behind other Midwest states that opted for the ACA's Medicaid expansion.

# <u>Wisconsin Legislators Introduce Bill Targeting Health Insurance Rate Hikes</u>

Sen. Larson (D-Milwaukee) and Rep. Kolste (D-Janesville) have proposed a bill that would challenge health insurance rate increases, in response to six Wisconsin health insurance companies seeking increases of 10-33% in 2016. The bill would require rate increases to be approved in advance and justified by increases in cost of medical care, and involve public hearings for larger rate hikes. Citizen Action of Wisconsin released a memo in <u>support</u> of the bill, citing the similarity to current public utility rate review. The Deputy Insurance Commissioner <u>asserts</u> that letting insurers set their own rates has led to minimal rate increases.

#### **Wisconsin Receives \$1.3 Million from CMS in ACA Navigator Grants**

The Centers for Medicare and Medicaid Services has awarded 2015 ACA Navigator Grants, which include \$1.3 million to three Wisconsin organizations. The grants are provided to fund navigators to assist people in signing up for coverage on the ACA exchanges for 2016 open enrollment. The awards include \$33k to Forest County Potawatomi Community, \$305k to the Northwest Wisconsin Concentrated Employment Program, Inc. , and just under \$1 million to the Covering Kids and Families (now renamed "Covering Wisconsin") Navigator Collaborative

# United Way of Dane County Receives \$1.3 Million Gift to Help Families Pay Health Premiums

In advance of 2016 open enrollment, United Way of Dane County announced that it will continue its HealthConnect program into its third year, following receipt of a \$1.3 million gift from UW Health. The program, which helps families who earn between 100 and 150% of the federal poverty level pay their health insurance premiums, has insured more than 1,300 Dane County residents since its inception in 2013.

#### Nearly 100,000 in Wisconsin Gained Health Insurance Coverage In 2014

According to new estimate from the U.S. Census Bureau, the uninsured rate in Wisconsin dropped from 9.1% to 7.3% between 2013 and 2014, with nearly 100,000 of Wisconsin's uninsured population gained health insurance coverage in 2014. This compares to a nationwide drop in uninsured from 14.7% to11.7%, during the same time frame. Contributing to the state's smaller percentage drop was the fact that Wisconsin had one of the lowest uninsured rates in the country before the ACA. Still, Minnesota had a low uninsured rate before the ACA as well, and its rate fell 2.3 percentage points compared to Wisconsin's 1.8 percentage points. The estimates come from surveys conducted during each month of 2014, so<u>the data only reflect a portion of total gains</u> in coverage.

#### Report: Prescription Drug Costs for Consumers Vary Widely Across Wisconsin, Nation

Deductibles for prescription drugs show substantial geographic variation in Wisconsin, according to a new <u>report</u> by Citizen Action of Wisconsin. Costs range from an average low of \$400 in Madison to over \$2,500 in Oshkosh. The statewide average is \$1,121. Deductibles for Pomalyst, a drug for multiple myeloma, were found to vary more than ten-fold based on region. The report reviewed healthcare.gov data on silver plan deductibles for prescription drugs. Citizen's Action hopes to prompt action by states and the federal government to reduce drug costs, including capping out-of-pocket expenses, permitting Medicare to negotiate drug rates, and requiring greater price transparency.

# Medicaid/BadgerCare

# Report: Nearly 1 in 3 Uninsured Wisconsinites Eligible for Medicaid

About 129,000 (32%) 100,000 (24%) of the 410,000 currently uninsured in Wisconsin are eligible for Medicaid and another 100,000 (24%) qualify for federal premium tax credits, according to a new report by the Kaiser Foundation. The report, based on data from the 2015 Current Population Survey, concluded that the remaining 44% of the uninsured are ineligible for subsidies due to their level of income, insurance eligibility through an employer, or citizenship status. Wisconsin has one of the lowest uninsured rates in the Midwest at 410,000, behind only Minnesota at 364,000 and lowa at 188,000. Barriers to gaining coverage for those eligible for subsidies include misperceptions about costs and eligibility, as well as finding coverage too expensive despite financial assistance.

#### State Senate Approves Pilot Project to Better Coordinate Behavioral Health Services

The State Senate recently approved a <u>bill</u> that would require the Department of Health Services to develop mental health pilot projects aimed at reducing Medicaid costs in the state, and create a tracker to monitor inpatient psychiatric bed availability. One pilot project would better coordinate behavioral health care costs for those with chronic mental illness to reduce emergency room visits. The other would provide payment incentives for providers to offer mental health consultations during primary care visits.

#### **Decline in Medicaid Enrollment in September**

Enrollment in BadgerCare Plus declined again in September, according to data from DHS. The number of new BadgerCare Plus enrollees declined by 2,100 enrollees from August to September, with 803,096 total individuals enrolled in BadgerCare Plus in September 2015. The number of enrolled childless adults continued to drop from a high of 159,711in March 2015, to 145,461 in September 2015. Federal CMS reports that Wisconsin's enrollment in Medicaid has increased 6.31% from prior to the ACA (July-Sept 2013) through August 2015. This compares to an increase of 10.21% for other states that did not adopt an ACA Medicaid expansion, and 30.8% increase for states adopting an ACA Medicaid expansion.

# **Lawmakers Introduce Bill to Change Drug Reimbursement for Family Planning Clinics**

A new <u>bill</u> proposed by Republican lawmakers would limit the way family planning clinics, including Planned Parenthood, bill Medicaid for prescription drugs. Currently, family planning clinics, can acquire prescription drugs at discounted rates from pharmaceutical companies and charge drugs back to Medicaid at higher rates. The bill would allow clinics to bill Medicaid only for the actual cost of the drugs. Clinic representatives assert that the higher reimbursements reflect the costs of providing prescription services such as counseling. Opponents of the bill have <u>expressed concern</u> that it would cause a financial stress to clinics that would force them to limit services or close down altogether. The bill's authors assert that it is intended to rectify overbilling practices and will save the state millions.

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

#### **Physician Interstate Licensing Bill Passes Assembly Committee**

Assembly legislators approved the Physician Interstate Licensure Compact with near unanimous approval. The <u>bill</u> would reduce the administrative burden and expedite the process for physicians applying to obtain licenses to practice medicine in multiple states. Advocates from the Wisconsin Hospital Association recently <u>testified</u> in support of the Compact at an Assembly Health Committee

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hearing, stressing that the proposed bill would cut regulatory red tape, and increase access to care in rural areas. Some advocates have <u>expressed concern</u> that regulations and limitations on the process are not well outlined out in the bill. Advocates also caution that the bill is a step towards federalizing physician licensure. Senator Vukmir has offered an <u>amendment</u> to increase legislative oversight of the compact.

## Marquette Dental School to Begin \$16 Million Expansion

Marquette University will soon begin construction on a 40,000-square-foot expansion to its School of Dentistry. The expansion will include an increase in clinical space, state-of-the-art technologies, and will allow the school to expand its class size by 25%. Funding for the project comes from - \$8 million dollars allocated in the 2011-2013 state budget with matching funds from University alumni.

#### **Wisconsin Legislators Seek State Funding for Osteopathic College**

Rep. Horlacher (R-Mukwonago) and Sen. Nass (R-Whitewater) are backing a bill that would provide nearly \$25 million to help fund the development of the state's first osteopathic medical school, in Jefferson. The school would be located in Assembly District 33, which the bill's co-sponsors represent. The bill, modeled after a previously unsuccessful budget motion to the Joint Finance Committee, would provide \$25 million if the college can raise \$75 million. The remainder of the funds is expected to come from contracts with partner organizations. The project has struggled to obtain funding since its inception, and a recent expense report showed that an initial \$250,000 incentive payment from the city of Jefferson did not produce any significant results.

#### **Assembly Committee Approves Rural Ambulance Staffing Bill**

The Assembly Committee recently approved a <u>bill</u> that would address rural Emergency Medical Services shortages by easing staffing requirements for ambulances. Current law requires that ambulances must be staffed with two Emergency Medical Technicians or medical professionals, but rural areas can struggle to meet this requirement. The bill would allow communities with less than 10,000 residents to substitute a first responder for one of the EMTs. EMTs receive a higher level of medical training than do first responders, and have more advanced assessment skills and the ability to provide more medications.

#### **Assembly Health Committee Approves Oxygen Equipment Bill**

The assembly committee approved a <u>bill</u> to modify current regulations on oxygen equipment in nursing homes. Current law includes specific measures for changing out and replacing oxygen delivery equipment. The bill would revise this language to instead require nursing homes to maintain and manage equipment in accordance with manufacturer recommendations and to reflect current standards of practice. The bill will be sent to the Assembly for vote.

#### Audit: MCW and UWSMPH Generally in Compliance with Grant Funding Requirements

A recent audit of Medical College of Wisconsin and University of Wisconsin School of Medicine and Public Health endowment programs from 2009 to 2013 conducted by the Legislative Audit Bureau (LAB) found that the two schools were generally in compliance with requirements for awarding and monitoring grant funding. The endowments were established when Blue Cross Blue Shield of Wisconsin converted to for-profit status and by law must be evaluated every five years. The review noted minor issues with late or inadequate documentation in some programs. For the period, MCW and UW each spent around \$67 million on program grants and administration, Endowment balances for MCW and UW as of December 31, 2013 were \$428.0 and \$381.2 million, respectively.

#### **DHS Issues Request for Grant Applications to Support Rural Medical Education Programs**

The Department of Health Services recently authorized the development of a grant program to support development of new primary care graduate medical education (GME) programs in rural settings. Borne out of a desire to train more physicians interested in practicing in rural Wisconsin, the grant cites research suggesting that residents who train in rural settings are more likely to end up practicing in a rural area. A Request for Applications released by the organization encourages programs with defined substantial rural training experience to apply for the three year award. A maximum of \$750,000 will be awarded to each program, and is limited to five specialties - family medicine, general internal medicine, pediatrics, psychiatry, and general surgery.

## **MCW Names MacKinnon Founding Dean of School of Pharmacy**

The Medical College of Wisconsin has tapped Dr. George E. MacKinnon of Roosevelt University's College of Pharmacy as the Founding Dean of its new School of Pharmacy. Dr. MacKinnon, a Wisconsin native, brings 25 years of experience as a clinical practitioner, academic researcher, teacher and administrator. The new School of Pharmacy is intended to address a nationwide projected shortage of pharmacists. These projections have been disputed, however, with a recent report by the National Center for Health Workforce Analysis suggesting that growth in supply of pharmacists from 2012 to 2025 will more than double the demand.

#### **Funding Awards:**

Many academic institutions and research partners received funding to further education and research on health topics. Links below provide information on the award:

- Two Milwaukee Community Health Centers Receive \$1.6 Million in Federal Funds
- Milwaukee-based iDAvatars Awarded \$800k Contract to Update VA Virtual Medical Center
- Partnership Fund Awards Grants to 4 projects, each totaling \$1 Million over 5 years

# **Public Health**

#### **Committee Approves Legislation to Address Opiates, Heroin Use**

The Senate Committee on Health and Human Services recently approved a number of bills proposed by Rep. Nygren (R-Marinette) aimed at curbing Wisconsin's heroin epidemic. The committee backed a proposal that reduces the time required to report the dispensing of opiates to the statewide tracking database from 7 days to 24 hours, create registries and certification requirements for pain and methadone clinics, and requires doctors to check the state database before prescribing pain medications. Wisconsin was recently chosen as one of 16 states to receive CDC funding for prevention strategies to target prescription drug abuse.

#### Proposed Bill Would Ban Research on Fetal Tissue Obtained from Abortions

A GOP-sponsored bill would ban research on tissues obtained from elective abortions. <u>A.B. 305</u>, and would also ban the sale and donation of fetal body parts in Wisconsin. Representatives from the UW School of Medicine and Public Health and other prominent organizations for biomedical research have <u>expressed strong opposition</u>, citing the negative effects it would have on medical research and the state's ability to draw top researchers. The Wisconsin Manufacturers & Commerce, the state's largest business lobby, has also <u>expressed opposition</u>. The bill <u>passed an assembly committee</u>, but faces an uncertain future with Senate Republicans echoing concerns about its potential effects on research.

#### Marquette Law School Poll Finds Wisconsinites Divided on 20-Week Abortion Ban

A poll of 802 people across Wisconsin found that voters narrowly support a ban on abortion after 20 weeks, by 48.3% to 44.3% opposition. The difference was within the poll's margin of error. The Marquette University Law School <u>poll</u> also found that views were strongly tied to party, gender, age, and religious affiliation. The poll comes on the heels of Governor Walker's recent <u>signing</u> of a <u>bill</u> that bans abortions in the state after 20 weeks except in cases of medical emergency. An annual <u>report</u> by the Department of Health Services found that abortions in the state fell from 6,462 in 2013 to 5,800 in 2014.

#### Report: Milwaukee County Mental Health System Insufficient to Meet Needs

An Outpatient Capacity Analysis, commissioned by the Milwaukee Health Care Partnership, explores whether the extent of unmet need would best be reduced by a simple increase in the supply of providers, or by addressing inefficiencies and barriers to access among the array of providers currently in place. The report concludes that both are significant factors and both need to be addressed. The report follows the county's redesign of its behavioral health system, and addresses services that will avert the need for inpatient and emergency treatment.

#### **DHS Report: Two-Thirds of Wisconsin Adults Overweight or Obese**

Two-thirds of Wisconsin adults are overweight or obese, including nearly three in four adults over the age of 55, according to the Department of Health Services' 2014 Wisconsin Behavioral Risk Factor Survey that is based on a telephone survey of over 7,000 adults over the age of 18. This comes despite the fact that a majority of Wisconsin adults tend to rate their general health status as excellent or very good. On a more positive note, the report also found that cigarette smoking rates in the state have steady declined since 2012.

#### Survey: Half of WI Students Who Experiment With Substances at Risk of Developing Abuse

A <u>survey</u> of 3,000 Wisconsin middle and high school students, conducted by recovery advocacy group Rise Together, found that half of students who have ever experimented with addictive substances continue active use. Students also identified a need for more school prevention and education strategies on drug use, despite the fact that a majority of the students surveyed don't view risky substance use as a significant problem.

#### Wisconsin School Districts to Participate in Project to Improve Students' Mental Health

The Department of Public Instruction is moving forward on the Wisconsin School Mental Health Project, a five-year partnership with schools to improve the mental health of students. Twenty-seven school districts across the state will participate in the endeavor, which aims to promote the development of policies, programs and practices to support students with mental health needs. DPI estimates that one in five children and adolescents in Wisconsin have a significant mental health issue that affects how they function.

#### Study: Wisconsin Among States with Least Effective Vaccination Laws

A <u>study</u> by researchers at the University of Georgia found higher rates of pertussis (whooping cough) in 9 states that allow philosophical and religious exemptions for vaccination, including Wisconsin. The study, published in the journal Health Affairs, identified three key policies that lowered vaccine-preventable outbreak rates: requiring state health department approval for nonmedical exemptions; allowing exemption for only specific vaccines instead of all vaccines; and the ability to impose civil penalties for noncompliance. A <u>report</u> by the CDC found that kindergartners in Wisconsin received three times as many vaccination exemptions as the national average last year.

**Two WI Tribes Recognized for Health Initiatives** 

The Menominee and Lac du Flambeau Tribes have been awarded the <u>Culture of Health Prize</u> from the Robert Wood Johnson Foundation, representing two among eight national awardees. These two tribes are being recognized for their efforts to improve health and wellness on their reservations by weaving traditional cultural practices into their schools and health clinics. Profiles with brief videos about the efforts at community are available here: <u>Lac du Flameau Menominee Nation</u>

# **GE Healthcare Receives FDA Approval for Lung Cancer Screening Software**

Waukesha-based GE Healthcare recently received approval from the FDA for its low-dose CT lung cancer screening protocol. The software, developed in Waukesha, allows physicians to use low-dose, short duration scans to detect and visualize lung cancer nodules. Annual lung cancer screenings in high-risk patients has the potential to prevent a substantial number of lung-cancer related deaths. Medicare has already approved insurance reimbursement for the low-dose screening in high-risk patients.

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

#### Medical Service Provision Varies by Up to 10% in Southeast Wisconsin

A <u>study</u> conducted by Milliman for the Greater Milwaukee Business Foundation on Health shows that, when treating patients with similar health problems, the amount of medical services used by physician groups affiliated with southeastern Wisconsin health systems can vary by as much as 10%. The <u>Milwaukee Journal-Sentinel explains</u> the findings. The study also measured the differences in average risk-adjusted commercial utilization among patients resident in each of seven southeast Wisconsin counties, reporting that utilization levels varied by about 22%. Kenosha county experienced utilization levels 12% above the southeast Wisconsin market.

#### Hospital Industry Ranks as Wisconsin's Highest Spender for Lobbying

The Government Accountability Board (GAB) <u>reported</u> that WHA spent more than \$370,000 on lobbying since the start of the year, higher than any other organization in Wisconsin over the same time period, and dedicated 2,755 hours toward lobbying since January. As in the 2013-2014 <u>biennium</u>, the Wisconsin Hospital Association (WHA) was again the third-highest financial spender on lobbying over the 2013-2014 biennium, and ranked in the top five organizations for lobbying hours over the two-year period.

## <u>Aurora Sinai Hospital Reduces ED Visits by Paying for Social Workers</u>

Aurora Sinai Hospital in Milwaukee's central city is showing success in its efforts to get patients connected with primary care doctors rather than using the emergency rooms as their main source of medical care. The hospital has placed social workers in the ER full time, and they work closely with a group of people who have been identified as frequent ER users. Funding for the program comes from the hospital's own budget, but it appears that it is resulting in cost savings.

#### **Bill to Divert Funds from Planned Parenthood Passes State Assembly**

The Wisconsin assembly passed a bill that would strip Planned Parenthood of nearly \$3.5 million in government funding. The bill, passed along party lines, would prevent the state from providing federal Title X funding to any group that provides abortions or is affiliated with a group that provides abortions, and directs the state to apply for and find alternative providers for those federal funds. The bill's opponents argue that that the measure will decrease access to birth control and STI screenings for Wisconsin women.

#### **WISHIN Receives Approval to Expand Services into Minnesota**

The Wisconsin Statewide Health Information Network was recently granted the authority to begin offering health information exchange services in Minnesota. In its application to the Minnesota Department of Health for certification, the network pointed to the need to provide services to its clients who operate hospitals in both Minnesota and Wisconsin, including Gundersen Health System and HealthPartners. The reciprocal agreement is valid for one year and is limited to exchange of health information services. Any decision to expand beyond these services into query-based exchange would require an additional agreement.

#### Study Finds Wide Variation in Out-of-Network Charges in Wisconsin, Across Nation

Charges submitted by out-of-network providers far exceed Medicare reimbursement rates for the same service, and vary widely across the nation, according to a new report by America's Health Insurance Plans. The report evaluated charges submitted for 97 different procedures nationwide, and found that charges ranged from 118% to 1,382% of corresponding Medicare fees. In Wisconsin, out-of-network charges were found to average a low of 233.5% of Medicare charges for an outpatient office visit of about 40 minutes, to a high of 1,370.6% for a spinal injection procedure.

## **HCCI Report: Milwaukee One of Most Expensive Markets for Healthcare**

A recent economic comparison of more than 40 health care markets across the country found that Milwaukee consistently ranked as one of the highest markets for health care prices. The Health Cost Institute <u>report</u> also found that high prices didn't seem to discourage use of services, and that high price patterns for one service in a region were not always representative of prices for other services in the same region. This was the case in Green Bay, which was found to have relatively low costs for inpatient services but consumers experienced significantly higher costs for outpatient services.

#### Wisconsin Health Plans Rank High in Quality

Wisconsin is among states with the highest number of health plans receiving top scores in a new ranking by the National Committee for Quality Assurance. Seven plans offered by commercial insurers received a score of 4.5 out of five from the committee, which include Dean, Gundersen, and HealthPartners. Another 13 received at least a four for Medicare coverage. Medicaid coverage was a different story, however, with only Security Health ranking over 3.5, though many insurers reported limited data for this metric.

#### Bill Would Give Legislators Oversight to Changes to State Group Health Plan

Rep. Nygren (R-Marinette) and Sen. Darling (R-River Hills) have proposed a bill that would require Group Insurance Board to submit any proposed changes to state employee group health insurance plans to the Joint Finance Committee for approval. Currently, the GIB can make changes to the plan without legislative oversight. The bill has received unanimous support from members of the Joint Finance Committee. Nygren and Darling <a href="write">write</a> that GIB should be required to work with legislative officials to come to mutual decisions, with adequate taxpayer representation. Provisions included in the 2015-17 biennial budget that would have required the board submit proposed changes to the Legislature for approval were ultimately <a href="weight: vetoed">yetoed</a> by Governor Walker.

#### **Interactive Map Shows Location of Rural Health Care Facilities**

The Wisconsin Office of Rural Health recently posted an interactive map depicting the locations of rural health care facilities across the state to highlight where primary care is available in rural communities. The map, which allows sorting based on facility type and location, includes critical and non-critical

access hospitals, rural health clinics, and federally-qualified health centers. ORH also provided a <u>fact</u> <u>sheet</u> with descriptions of the different types of rural health care safety net facilities.

#### **Epic One of Only Two EMR Vendors to Not Lose Clients in 2014**

A recent report by <u>KLAS</u> reviewed nine EMR vendors, finding that Epic had the largest net increase of the only three vendors who posted a net gain in market share in 2014. Epic was also one of only two vendors to not lose clients in the past year, the other being athenahealth. Cerner was second in net new increases, and still boasts the largest overall market share. KLAS interviewed health systems and hospitals across the country about their EMR decisions as part of the report. Alongside this good news, Epic was recently subject to a report highly critical of its product performance and business model.

# Wisconsin's Honoring Choices Featured in New York Times Op-Ed

"On Jan. 1, Medicare will begin reimbursing doctors and other health professionals for time spent talking to patients about their end-of-life wishes. This is a big deal, but far from enough. End-of-life conversations need to become something families just do. There's one place in America like that now: La Crosse, Wis."

# **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:

- <u>LifePoint Health and Watertown Finalize Merger</u>
- Aurora Plans \$35 Million Expansion of Wauwatosa Psychiatric Hospital Campus
- Wisconsin Insurers Essentia Health and UCare Team Up to Serve Medicare-eligible in MN
- Wheaton Franciscan Healthcare Joins St.Louis-based Ascension Health

# **RESEARCH AND PROGRAM TOOLS**

- 50-State Survey Results: Medicaid Reforms to Expand coverage, Control Costs, Improve Care
- Information on the Health Insurance Marketplace and Health Care Reform: <u>healthcare.gov</u>
  - o Spanish Language Marketplace
  - o <u>Marketplace Enrollment Data</u>
- Centers for Medicare and Medicaid Services (CMS)
- New and Updated Resources from the Kaiser Family Foundation
- New and Updated Resources from the Commonwealth Fund
  - o Health Reform Resource Center
- Enroll America Resources
- 2016 Health Plans in Exchange by County
- 2015 Exchange Enrollment Information by County
- Healthcare.gov Affordability Tool
- New and Updated Resources from HRSA
- New and Updated Resources from <u>AHRQ</u>
- 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 CI Individual Health Insurance Carriers in WI Map

# **EVENTS AND ANNOUNCEMENTS**

- Public Policy Forum Luncheon: When the Mental Health and Justice Systems Collide, Wauwatosa, October 26
- Marburg Memorial Lecture: Pregnancy, Causality and Economics with Dr. Emily Oster, Milwaukee, October 28
- Business Health Care Group: Protecting the Future of Oncology Care: A Community Conversation, Madison, October 28
- Evidence Based Health Policy Project: Population-Based Approaches to Children's Mental Health, Madison, October 29
- Greater Milwaukee Business Foundation on Health, Inc.: Utilization Comparison of Southeast Wisconsin Health Systems, Brookfield, October 29
- Wisconsin Health News Newsmaker: Insurance CEO Roundtable, Madison, November 3
- ADRC Annual November Lecture Living Well With Dementia, Middleton, November 4
- MetaStar Health Care Quality Symposium, Wisconsin Dells, November 5
- Disruptive Healthcare Conference, Madison, November 10
- 2015 Madison Fall Institute: Opioids in the Management of Non-Malignant Chronic Pain, Middleton, November 11

# Selected Tweets from our Twitter Feed



Please follow us on <u>Twitter @UWHealthPolicy</u> to receive notice of relevant reports, research, federal and state news. Tweets below include national news and resources.

Post-#ACA roll-back of adults' #Medicaid eligibility affects hospitalization patterns, payment, via @nberpubs http://bit.ly/1KCwlRi

"What #Obamacare Opponents Get Wrong -- And Right -- About Insurance Premiums" reports @CitizenCohn http://huff.to/1LWElya

.@WiHealthNews reports WI hospitals earned \$2.36 billion net income in FY14, avg 12.2% net income. Receive \$15M GPR/yr because MA "underpay"

Estimates show #ACA helps poor, story not so positive for uninsured persons >250% FPL, via @nberpubs http://bit.ly/1L9iR67

#ACA's Section 1332 waivers offer alternative reform path for states. Time to start talking about options for WI? http://bit.ly/10VV0Xp

Narrow Networks, their potential, and the #ACA considered in @JAMA current by @SimonFHaeder @UWLaFollette http://bit.ly/1PofSEf

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.