Public Health Council

STATE OF WISCONSIN

MINUTES OF THE MEETING OF DECEMBER 10, 2010

STATE OFFICE BUILDING, 1 W. WILSON STREET, MADISON, WI

Council Members Present: Dr. Julie Willems Van Dijk (Chair); Dr. Gary Gilmore (Chair-Elect); Dr. Mary Jo Baisch; Mr. Bevan Baker; Mr. John Bartkowski; Ms. Amy Bremel; Ms. Bridget Clementi; Ms. Susan Garcia Franz; Ms. Catherine Frey; Ms. Terri Kramolis; Dr. Corazon Loteyro; Dr. John Meurer; Ms. Deborah Miller; Mr. Douglas Nelson; Dr. James Sanders; Dr. Lynn Sheets; Mr. Mark Villalpando; and Mr. Thai Vue

Council Members Absent: Dr. A. Charles Post and Dr. Ayaz Samadani.

Division of Public Health (DPH) Staff: State Health Officer Dr. Henry Anderson; Ms. Patricia Guhleman; Ms. Kitty Klement; Ms. Margaret Schmelzer; and Mr. Kevin Wymore

Guests: Ms. Rebecca McAtee, Mr. Bobby Peterson, and Mr. Dennis Tomczyk

Call to Order
The meeting was convened shortly after 10 a.m. by the Chair, Dr. Julie Willems Van Dijk.

Minutes
The Council reviewed and approved the minutes of the August and October meetings.

Evaluation
The Council reviewed the meeting evaluation results from the October meeting. The overall evaluation score averaged 3.9 on a 4.0 scale. Scores were fairly uniform for the individual topics and presenters.
Membership Issues
The Council heard an update about Council membership issues. Re-appointment of members whose terms expired in July recently came from the Governor's Office. Staff also noted that appointments for the three Council member vacancies are under consideration. Chair Dr. Willems Van Dijk reminded members that the Council and its members will continue their current appointments in 2011; the Council was established in state law, and its members continue appointed terms across administrative changes.

Open Forum
Mr. Bobby Peterson, staff attorney for ABC for Health, addressed the Blue Cross Blue Shield asset conversion process for public health, recently the subject of a Legislative Audit Bureau report. Mr. Peterson suggested increasing the funding allocation portion directed toward community-based public health (currently at 35 percent), and recommended that the schools' Oversight and Advisory Committees remove the requirement that faculty members or staff partner with all funded public health grantees.

He summarized these "key issues" from an ABC for Health handout about the Blue Cross/Blue Shield asset conversion process. He alleged: 1) misdirection of funds from the original public health purpose; 2) violations of the supplanting prohibition; 3) conflicts of interest at the medical schools and on the oversight and advisory committees; 4) inequities in the "35 percent/65 percent split" reflecting the percentages allocated to public health and to medical education/research; and 5) inadequate oversight and enforcement for the overall initiative.

America's Health Ranking
The Chair noted the release of the America's Health Ranking report. Wisconsin's ranking declined since the last such report.

Response to the Legislative Audit Bureau Report
The Council discussed policy options in response to presentations at the October Public Health Council meeting from the Wisconsin Partnership Fund for a Healthy Future and Advancing a Healthier Wisconsin, the endowments affiliated with, respectively, the University of Wisconsin School of Medicine and Public Health and the Medical College of Wisconsin. At the October meeting, the two programs described their responses to a Legislative Audit Bureau's May 2010 program evaluations related to the two initiatives.

After discussion from Council members, the Council approved a letter of response to the two schools that contained four specific policy recommendations:

- Expand the percentage of funds that are devoted to population health improvement;
- Expand and strengthen communication and outreach to communities about the availability of funds, the process for accessing the funds, and the level of support available from partnership staff and academic partners;
- Implement the concept of sustainability grants;
• Balance program staff’s technical assistance between the demands for increased accountability and the opportunity expedite real action. Under the first recommendation, the Council recommended to increase the community-based public health segment of Blue Cross Blue Shield endowment spending from the current level of 35 percent to "a majority of funds." The Council also recommended removal of the academic partner requirement for community grant applicants. Some Council members talked of significant problems in finding academic partners for community grant applications -- without which applicants may not apply. Some Council members said that, as a result, some community applicants have simply given up on the process.

The Council identified the recipients to whom the letter should be copied.

**Healthiest Wisconsin 2020 Implementation Update**
The Council heard Ms. Patricia Guhleman and Ms. Margaret Schmelzer provide an update of the Healthiest Wisconsin 2020 process and proposed implementation steps for the plan. The plan, which only covers the period through 2013, is to be web-published by year's end. Ms. Schmelzer said that pillar objectives are a prominent part of the plan. She also said the Division is aware that there is a line between involving voluntary partners and not overburdening them. Ms. Guhleman added that the implementation plan uses 2010 numbers as baseline data, so it will be a while before comparisons may be drawn.

**Communicating with Governor-Elect Walker about Public Health Priorities**
The Council took up a general conversation about the manner in which to communicate public health priorities to the new Governor. Dr. Willems Van Dijk noted that this is the first time since the Council's inception that the Council has confronted a change in Governors. John Bartkowski, who directs the Sixteenth Street Health Center in Milwaukee, and has had ample experience in dealing with the new executive while he worked as Milwaukee County Executive, said that Walker has been savvy enough to regard such "safety net" programs as General Assistance Medical Program as important. Others noted that Walker will adopt a sharp focus on business and job creation.

These main priorities were discussed. Some contended the Council should:

- Advocate for funding for public health;
- Monitor progress on implementing the goals of the new State Health Plan;
- Support the implementation of health care reform in Wisconsin;
- Coordinate and integrate timely responses to emergency preparedness;
- Advocate for public policy to support State Health Plan goals; and
- Advise the Governor, Legislature and the department on emerging or urgent public health issues.

No action was taken.
Health Systems Reform Update
Ms. Rebecca McAtee, staff with the Office of Health Care Reform, presented on the effect and potential effect of national health systems reform legislation embodied in the Affordable Care Act. She indicated that the law offers numerous opportunities for public health grants in Wisconsin, some of which have been secured by the Division of Public Health.

Ms. McAtee said the main public health areas the state has undertaken have been: public health workforce development; access to primary care; and overall prevention. She did say the new Governor has indicated that he will ask the state's Attorney General to join 20 other Attorneys General to attempt to strike down the nation's Affordable Care Act on legal grounds. Legal cases in Virginia and Florida will go forward, she said. Questions surrounding the Medicaid expansion and the constitutionality of the individual mandate to carry health insurance have been the leading legal issues, she said.

Emergency Preparedness Committee Update
Mr. Baker presented an Emergency Preparedness Committee update, which was highlighted with the presentation of the draft resolution on HIPAA/patient tracking issues. Mr. Dennis Tomczyk provided the presentation, and Mr. Baker complimented both Mr. Tomczyk and Mr. Kevin Wymore in crafting the resolution. The document had as its underpinnings a legal memo on the issue of patient tracking, specifically, the WITrac Patient Tracking Database, within the context of the Health Insurance Portability and Accountability Act of 1996 (HIPAA.) The memo indicates that a change in statute may be required to address HIPAA-related issues.

The resolution was approved without amendment. Mr. Tomczyk indicated that it should be disseminated to the Legislature, as well as the usual audience. He said members of the Legislature have indicated they will support the measure.

Adjournment
The meeting adjourned at about 2:00 p.m.