Health and Wellness

"The power of community to create health is far greater than any physician, clinic or hospital."

Mark Adam Hyman

Health and Wellness Subcommittee

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Health and Wellness
Section Summary

Strengths and Progress

- Poor mental health days among Portage County residents continue to average 3.5 days in a 30 day period. This rate equals that of other Wisconsin residents.
- More 2017 LIFE Community Survey respondents agree than disagree that healthy lifestyles are common in Portage County, a growing trend since 2012.
- The majority of second-grade and sixth-grade students (87%) in Portage County have dental sealants, and dental decay continues to be on the decline.
- Portage County school districts had at least 99% of students in compliance with the State of Wisconsin Immunization Law in 2016, which is a continuing trend in Portage County.
- There are several coalitions in Portage County offering opportunities for organizations, community partners, and individuals to come together and provide collaboration to address issues related to mental health, AODA, physical activity, unhealthy weight, and nutrition. The coalitions include: Active Portage County, Mental Health Awareness and Suicide Prevention Coalition of Portage County, Portage County Alcohol and Other Drug Abuse Coalition, Portage County Alliance for Youth, and Portage County CAN Coalition.

Challenges and Opportunities to Improve

- The rate of completed suicide among Portage County adults, 18 years of age and older, has risen to 10.9 per year—an increase from the 2012 LIFE Report of 6.7 per year.
- Alcohol use among Wisconsin adults continues to be higher than the national average for all forms of consumption. In 2016, Portage County adults had an excessive drinking rate of 26%, compared to Wisconsin at 23%, and the United States at 12%.
- Wisconsin’s age-adjusted rate of drug-related mortality increased from 9.3 deaths per year 100,000 in 2006 to 15.3 deaths per 100,000 in 2015. Wisconsin’s opioid-related hospitalizations rate has not leveled off but has gradually increased over the years.
- The Portage County adult obesity rate continues to rise (35%), exceeding the Healthy People 2020 goal of 30.6%.
- Chlamydia continues to be the most frequently reported of all communicable diseases in Portage County, Wisconsin, and the United States.

Opportunities for Action

For Individuals
Create healthy places where you live, work, learn, worship, and play. Serve as a healthy role model to youth. Get involved with local coalitions that support health and wellness initiatives.

For Organizations
Expand community resources that enable people to mutually support each other in performing all the functions of life and in developing to their maximum potential. Create healthy workplaces for employees by encouraging healthy eating choices at meetings, providing physical activity breaks during the work day, and supporting alcohol-free, family friendly community events.

For the Community
Create a culture that supports health and wellness, one which not only influences community members’ physical health but their mental health as well. Promote an atmosphere in which every person is free to make choices amid a variety of healthy, available, accessible, and affordable options.
Early Prenatal Care

Key Measure: Percentage of Births to Portage County Mothers in Which Prenatal Care Began in the First Trimester by Age of Mother, 2011-2015

<table>
<thead>
<tr>
<th>Age Group</th>
<th>15-17 years</th>
<th>18-19 years</th>
<th>20-24 years</th>
<th>25-29 years</th>
<th>30-34 years</th>
<th>35-39 years</th>
<th>40-44 years</th>
<th>45+ years</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Ages</td>
<td>80.2%</td>
<td>61.3%</td>
<td>60.6%</td>
<td>73.5%</td>
<td>81.8%</td>
<td>86.4%</td>
<td>59.6%</td>
<td>54.5%</td>
</tr>
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</table>

Healthy People Goal 2020 = 77.9%

DATA HIGHLIGHTS

- During 2011-2015, 80.2% of Portage County pregnant women sought prenatal care during their first trimester. This is down from 86.7% in 2010. The National Healthy People 2020 goal is 77.9%.
- Of those women not being seen in the first trimester, maternal age seems to be the most significant factor, especially among younger (less than 24 years) and older (40 years or older) women served.
- Race and ethnicity may also impact access to prenatal care. In Portage County, 80.2% of non-Hispanic White women sought prenatal care in the first trimester from 2011 to 2015. During that same timeframe, 63.8% of Hispanic women and 53.8% of Laotian/Hmong women began prenatal care in the first trimester. Other ethnicities had fewer number of births with first trimester prenatal care.
- Infant mortality is lower in Portage County. The infant mortality rate was 2 infant deaths per 1,000 live births in 2014, compared to 4 deaths per 1,000 live births in 2010. The Healthy People 2020 Goal is 6 infant deaths per 1,000 live births.

COMMUNITY PERSPECTIVES

Prenatal care is medical care given to a pregnant woman and her developing baby. Prenatal care, provided early and in regular intervals, increases the likelihood that babies are born healthy by detecting complications and providing information on nutrition and the need to avoid alcohol, tobacco, and other choices that could harm the mother and her baby. Pregnancy provides an opportunity for existing health conditions in women to be identified. Some of these risks include: hypertension and heart disease, diabetes, depression, genetic conditions, sexually transmitted diseases (STD’s), tobacco use, alcohol abuse and inadequate nutrition. Early and regular care is also linked to improved birth weight and decreased risk of preterm delivery. Babies born to mothers who receive no prenatal care are three times more likely to be born with low birth weight and five times more likely to die than those whose mothers receive prenatal care.

The risk of health concerns to the mother and infant are reduced by increasing access to quality care prior to conception, early in the pregnancy and between pregnancies. Women who receive prenatal care early in their pregnancies are more likely to deliver full-term babies at a healthy birth weight. Women who seek early prenatal care are also more likely to be referred to community programs and services that support them and their family: WIC (Women, Infants and Children), FoodShare, case-management through PNCC (Prenatal Care Coordination), smoking cessation, mental health referrals, and other treatment services.

In 2015, 80.7% of expectant mothers in Portage County, compared with 75.5% in Wisconsin, received prenatal care in the first trimester, exceeding the national Healthy People 2020 goal of 77.9%. In 2015, 91.3% of Portage County babies born received adequate care as measured by the Kotelchuck Adequacy of Prenatal Care Utilization Index, exceeding the national Healthy People 2020 goal of 77.6%. This measure takes into account the month that prenatal care begins and the number of prenatal visits, adjusting for gestational age.

SOURCES

- Portage County Department of Health Services
  Wisconsin Public Health Profiles 2016 Portage County
  www.dhs.wisconsin.gov
- WISH (Wisconsin Interactive Statistics on Health)
  Department of Health Services
  www.dhs.wisconsin.gov
- Healthy People 2020
  www.healthypeople.gov
Key Measure: Rate of Births per 1,000 Females – Portage County Mothers Under 20 Years of Age, 2011-2015

COMMUNITY PERSPECTIVES

In 1991, the U.S. teen birth rate was 61.8 births for every 1,000 adolescent females, compared with 24.2 births for every 1,000 adolescent females in 2014. The teen birth rate has declined almost continuously over the past 20 years. Although reasons for the declines are not totally clear, evidence suggests these declines are due to more teens abstaining from sexual activity, and more teens who are sexually active using birth control than in previous years. Portage County had a teenage pregnancy rate in 2015 of 8.3%, compared to Wisconsin’s rate of 16.4%.

According to Healthy People 2020, births resulting from unintended pregnancies can have negative consequences including birth defects and low birth weight. Children from unintended pregnancies are more likely to experience poor mental and physical health during childhood and have lower educational attainment and more behavior issues in their teen years. Sons of teen mothers are more likely to be incarcerated, and daughters are more likely to become adolescent mothers.

Teen mothers—

- Are less likely to graduate from high school or attain a GED by the age of 30
- Earn an average of approximately $3,500 less per year, when compared with those who delay childbearing until their 20’s.
- Receive nearly twice as much Federal aid for nearly twice as long.
- Early fatherhood is also associated with lower educational attainment and lower income.

The public costs of teen childbearing to U.S. taxpayers is estimated to be $9.4 billion, or $1,682 average annual cost for each teen mother each year from birth to age 15.

The negative consequences associated with unintended pregnancies are great for teen parents and their children. It is estimated that 82% of pregnancies to teen mothers are unintended.

SOURCES

- Office of Adolescent Health
  U.S. Department of Health and Human Services
  www.hhs.gov
- Department of Health Services
  www.dhs.wisconsin.gov
- WISH (Wisconsin Interactive Statistics on Health)
  www.dhs.wisconsin.gov
- Healthy People 2020
  www.healthypeople.gov
**Low Birthweight Babies**

**INDICATOR 60**

**Key Measure:** Percentage of Births with Low Birth Weight (Less than 2,500 grams) to Portage County Mothers by Age of Mother, 2011-2015

**DATA HIGHLIGHTS**

- The percentage of low birthweight babies in Portage County is 6.5% for 2011-2015, which is below the Healthy People 2020 goal of 7.8% and Wisconsin's rate of 7.2% for the same period of time.
- Very young teens and mothers over 45 years of age are more likely to have low birthweight babies.
- Ethnicity is not a significant factor in low birthweight infants in Portage County. From 2011 to 2015, 6.5% of all births were low birthweight, compared to 5.7% from 2005-2010. The racial/ethnic breakdown of low birthweight babies during this time was: Non-Hispanic/White—6.6%, up from the previous 5.9%; Hispanic—3.1%, down from 3.8%; and Laotian/Hmong—7.5%, previously reported at 6.2%. Other ethnicities had fewer births, which limited data.
- From 2011 to 2015, an average of 13% (up from 12.5% in 2005-2011) of Portage County women reported smoking during their pregnancy. During that same time period, an average of 14.6% (down from 18.1% in 2005-10) of women enrolled in WIC reported smoking during their pregnancy.

**COMMUNITY PERSPECTIVES**

Babies born weighing less than 5 pounds, 8 ounces (2,500 grams) are considered low birthweight. Low-birthweight newborns are at increased risk for serious health problems such as lasting disabilities and even death.

The March of Dimes reports that about 1 in every 12 babies in the United States is born with low birthweight. Advances in newborn medical care have greatly reduced the number of deaths associated with low birthweight. However, a small percentage of survivors develop mental retardation, learning problems, cerebral palsy, vision loss, and hearing loss.

One cause of low birthweight is preterm labor, labor that happens before 37 completed weeks of pregnancy. The causes of preterm labor are not thoroughly understood. However, we do know that women with these risk factors are at increased risk for delivering prematurely:

- Had a premature baby in a previous pregnancy
- Are pregnant with twins, triplets or more
- Have certain abnormalities of the uterus or cervix

Other factors that may contribute to premature birth and/or impaired fetal growth include:

- Birth defects
- Chronic health problems in the mother
- Smoking
- Alcohol and illicit drugs
- Infections in the mother
- Infections in the fetus
- Placental problems
- Inadequate maternal weight gain
- Socioeconomic factors

Low-birthweight babies are more likely to have health problems during the newborn period compared to babies of normal weight. Many low-birthweight babies require specialized care in a newborn intensive care unit (NICU).

**SOURCES**

- WISH (Wisconsin Interactive Statistics on Health)
  Department of Health Services
  www.dhs.wi.gov
- Healthy People 2020
  www.healthypeople.gov
- Wisconsin Department of Health Services Public Health Profiles
  www.dhs.wisconsin.gov/localdata/pubhlthprofiles.htm
- March of Dimes
  www.marchofdimes.org
- WIC: Pregnancy Nutrition Surveillance System
**DATA HIGHLIGHTS**

- In 2016, 72% of 2-year-olds in Portage County had completed the immunization series recommended by the American Academy of Pediatrics and the Advisory Committee on Immunization Practices. The Healthy People 2020 goal for children 19-35 months of age is 80%.

- Portage County’s immunization rate has declined since 2010. That year, 92% of two year olds had completed the recommended schedule of vaccinations. In 2016 that rate had declined to 72%.

- All Portage County Public School Districts had at least 99% of students in compliance with State of Wisconsin Immunization Law in 2016. This has been a consistent trend in Portage County.

- High rates of immunization result in “herd immunity,” protecting both immunized and unimmunized individuals.

- Locally, in Wisconsin and the United States, the number of parents choosing not to follow recommended childhood immunizations schedules is increasing.

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**Key Measure:** Childhood Immunizations Rates in Portage County, Wisconsin, and U.S., 2012-2016 (Immunization Series 4:3:1:3:3:1)

**COMMUNITY PERSPECTIVES**

The Centers for Disease Control (CDC) recommend routine vaccination to prevent 17 vaccine-preventable diseases that occur in infants, children, adolescents and adults. Vaccines are among the most cost-effective clinical preventive services and are a key component of preventive health care. Childhood immunization programs provide a very high return on investment. Healthy People 2020 reports that for each birth cohort vaccinated with the routine immunization schedule (including DTap, Td, Hib, Polio, MMR, Hep B and varicella vaccines) society—

- Saves 33,000 lives
- Prevents 14 million cases of disease
- Reduces direct health care costs by $9.9 billion
- Saves $33.4 billion in indirect costs.

Despite progress, approximately 42,000 adults and 300 children in the United States die each year from vaccine-preventable diseases. Communities with unvaccinated or undervaccinated populations are at risk for outbreaks of vaccine preventable diseases.

Immunization rates are affected by several factors, including the increasing number of vaccines a child receives by age 2, alternative vaccine schedules, and the mistaken belief that vaccines are not safe despite repeated studies that have shown no link between childhood vaccines and autism and other neurologic problems.

It is very important for infants to be immunized because they are more likely to be hospitalized or die from vaccine preventable diseases. Current assessment of vaccine coverage occurs most commonly at age 2 and in concurrence with State Department of Public Instruction School Immunization mandates.

All medical providers in Portage County have access to electronic immunization registries. Use of these registries allows easy assessment of a client’s immunization status whenever they are seen providing increased opportunities for patients to receive recommended vaccines.

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**SOURCES**

- Centers for Disease Control [www.cdc.gov/vaccines/](http://www.cdc.gov/vaccines/)
- Wisconsin Immunization Registry [www.dhs.wisconsin.gov/immunization/wir.htm](http://www.dhs.wisconsin.gov/immunization/wir.htm)
- Healthy People 2020 [www.healthypeople.gov](http://www.healthypeople.gov)
- Wisconsin Department of Instruction [www.dpi.wisconsin.gov](http://www.dpi.wisconsin.gov)
Key Measure: Healthy Smiles for Portage County Seal-A-Smile Data, 2010-2016

<table>
<thead>
<tr>
<th>Year</th>
<th># of children w/sealant by family dentist</th>
<th># of children that will receive sealants privately</th>
<th># of children screened by Healthy Smiles</th>
<th># of children receiving sealants from Healthy Smiles</th>
<th># of sealants placed by Healthy Smiles</th>
<th>Total % children w/sealants</th>
<th>% of children screened w/decay present</th>
<th>% of children screened w/decay present</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010-2011</td>
<td>1,055</td>
<td>661</td>
<td>64</td>
<td>1,006</td>
<td>423</td>
<td>1,438</td>
<td>86%</td>
<td>251</td>
</tr>
<tr>
<td>2011-2012</td>
<td>994</td>
<td>611</td>
<td>47</td>
<td>986</td>
<td>418</td>
<td>1,422</td>
<td>85%</td>
<td>221</td>
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<tr>
<td>2012-2013</td>
<td>1,309</td>
<td>480</td>
<td>34</td>
<td>1,005</td>
<td>512</td>
<td>2,150</td>
<td>85%</td>
<td>201</td>
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<tr>
<td>2013-2014</td>
<td>1,315</td>
<td>197</td>
<td>92</td>
<td>1,120</td>
<td>554</td>
<td>2,105</td>
<td>86%</td>
<td>161</td>
</tr>
<tr>
<td>2014-2015</td>
<td>665</td>
<td>600</td>
<td>92</td>
<td>1,078</td>
<td>335</td>
<td>1,150</td>
<td>87%</td>
<td>151</td>
</tr>
<tr>
<td>2015-2016</td>
<td>1,347</td>
<td>582</td>
<td><strong>NA</strong></td>
<td>1,301</td>
<td>548</td>
<td>2,433</td>
<td>87%</td>
<td>183</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>6,685</td>
<td>3,131</td>
<td>329</td>
<td>6,496</td>
<td>2,790</td>
<td>10,698</td>
<td>86%</td>
<td>1,168</td>
</tr>
</tbody>
</table>

*This question was not asked the first year, or after 2012
**Children w/sealants placed by family dentist may include some students that received initial sealants by HSPC.

COMMUNITY PERSPECTIVES

Oral health is essential to overall health. It improves a person’s ability to speak, smile, smell, taste, touch, chew, swallow, and make facial expressions to show feelings and emotions. Oral diseases, from cavities to oral cancer, cause pain and disability for many Americans.

Oral health access is viewed separately from other health insurance policies. At the national, state and local level, there is a critical need for dental health care for low-income and vulnerable populations.

In Portage County, community resources have impacted access to dental care. There is ample supply of dental providers in Portage County and a balanced supply of dental specialists (Pedodontists, Periodontists, Endodontists and Oral Surgeons). However, there is a shortage of providers serving uninsured and Medical Assistance patients.

Community water fluoridation and school-based dental sealant programs are two leading evidence-based interventions to prevent tooth decay. Community water fluoridation has been recognized by the Centers for Disease Control and Prevention as one of the 10 great public health achievements of the 20th century. Fluoridation helps to lower the cost of dental care and helps residents retain their teeth throughout their life. It is the most effective way to deliver the benefits of fluoride to a community, preventing 18 to 40% of tooth decay. School-based dental sealant programs usually target schools that serve children from low-income families and help prevent up to 60% of tooth decay in the treated teeth.

Disparities in dental care coverage continue to exist in minority and low-income populations due to lack of adequate insurance or dentists that accept Medicaid. Portage County is fortunate to be served by Ministry Dental Center of Ascension which offers access to dental care to underserved populations. Ministry Dental Center provides dental care to 23% of eligible Badger Care/Medicaid recipients in Portage County each year.

Over the past 15 years, community-wide efforts place Portage County ahead of the state and nation in addressing dental access needs by creating a dental home model with a comprehensive approach to care. Dental access is being addressed by Health and Human Services Seal a Smile program and the Ministry Dental Center of Ascension.

DATA HIGHLIGHTS

- In 2013, 57% of Portage County residents receive their water from a fluoridated municipal water system. Portage County Health and Human Services offers free oral fluoride supplements to children ages 6 months through 18 years not served by fluoridated municipal water services.
- More than 85% of second-grade and sixth-grade children in Portage County have received dental sealants.
- Medicaid is the primary dental coverage among adults with low incomes. Medicaid provides health care coverage for people with low incomes, including children and their parents, pregnant women, the elderly, and individuals with disabilities.
- Of respondents to the 2017 Portage County LIFE Survey, 82.2% (down from 84.7% in 2012) reported they could see a dentist in the past year if needed. Of those who could not access dental care, 50.8% cited no insurance as the reason and 51.1% cited inability to pay for service as a barrier to seeking dental care.

SOURCES

- Wisconsin Department of Health Services
  Healthiest Wisconsin 2020
  Wisconsin’s Roadmap to Improving Oral Health 2013-2018
  www.dhs.wisconsin.gov
- Healthy People 2020
  www.healthypeople.gov
- Centers for Disease Control and Prevention
  www.cdc.gov/chronicdisease/resources/publications/aag/oral-health.htm
- Portage County Health and Human Services: Division of Public Health
- Ministry Dental Center of Ascension
Unintentional Injuries

DATA HIGHLIGHTS

- From 2011 to 2015, accidents or unintentional injuries contributed to 2,042 years of potential life lost in Portage County. Years of potential life lost is a measure of premature mortality.

- From 2010 to 2014, falls contributed to 4,565 emergency department visits in Portage County (nearly 1,000 visits per year).

- The average charge per unintentional injury-related emergency department visit in Portage County during 2011-2014 was $1,450, compared to $844,03 in 2007-2009.

- The average charge per unintentional injury-related inpatient hospitalization in Portage County during 2011-2014 was $29,968, compared to $19,258 in 2007-2009.

- The average length of injury-related inpatient hospitalization in Portage County during 2011-2014 was 4.9 days, with an average charge of $6,115.92 per day.

- From 2011 to 2015 there were less than 5 unintentional injury-related deaths for children 0 to 17 years of age; 64 unintentional injury-related deaths occurred in adults aged 18 to 64, and 67 unintentional injury-related deaths occurred in adults over the age of 65 in Portage County.

Key Measure: Five Leading Causes of Injury Deaths (Rates per 100,000), 2011-2015

Key Measure: Leading Cause of Injury Hospitalizations and Emergency Room Visits for Portage County, 2010-2015

COMMUNITY PERSPECTIVES

Injuries are the leading cause of death in Wisconsin residents aged 1-44 years of age and are a significant cause of morbidity and mortality among all age groups. Many of these injuries are unintentional, but the majority are however preventable. The Healthy People 2020 goal is to reduce the fatal injury rate to 53.3 deaths caused by injury per 100,000.

The burden of injury is different across the life span. The effects of unintentional and intentional costs are related not only to treatment of the injury and care, but to the loss of productivity, the years of potential life lost due to injury mortality, and the long term effect on chronic health disease as well as physical and mental health. Fall-related injuries are the leading cause of death and disability disproportionately impacting older adults. Falls are not a normal part of aging and can be prevented. Risk factors for falls include, prescription medication, inappropriate footwear, hazards inside and outside of the home, low blood pressure upon standing, visual impairments, balance, and difficulty performing activities of daily living (dressing, bathing, etc.).

Wisconsin's death rate from falls is high and continues to rise. Falls are a substantial reason for inpatient hospitalizations and emergency room visits. From 2011-2015, nearly 90% of the fall-related deaths and 72% of inpatient hospitalization in Wisconsin involved individuals who are 65 or older. It is estimated $800 million in hospital charges occur each year in Wisconsin due to falls.

SOURCES

- Department of Health Services  
  www.dhs.wisconsin.gov

- WISH (Wisconsin Interactive Statistics on Health)  
  www.dhs.wisconsin.gov

- Healthy People 2020  
  www.healthypeople.gov

- Burden of Injury In Wisconsin Report 2011  
  www.dhs.wisconsin.gov/publications/Po/P00283.pdf
Communicable Diseases

**Key Measure:** Reported Communicable Disease Cases and Rates of Occurrence in Portage County, 2012-2016

<table>
<thead>
<tr>
<th></th>
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</thead>
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<tr>
<td><em>Rates per 100,000 people</em></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Diseases</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Babesiosis</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>1.4</td>
<td>1.2</td>
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<tr>
<td>Blastomycosis</td>
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<td>0</td>
<td>4</td>
<td>0</td>
<td>1</td>
<td>0.7</td>
<td>0.9</td>
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<tr>
<td>Ehrlichiosis/Anaplasmosis</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>3</td>
<td>2.1</td>
<td>0.5</td>
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<td>Hepatitis C</td>
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<td>17</td>
<td>13</td>
<td>19</td>
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<td>Histoplasmosis</td>
<td>0</td>
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<td>0</td>
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<td>HIV/AIDS</td>
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<td>0</td>
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<tr>
<td>Influenza Associated Hospitalizations</td>
<td>0</td>
<td>6</td>
<td>84</td>
<td>73</td>
<td>18</td>
<td>12.7</td>
<td>28.5</td>
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<td>Lyme Disease</td>
<td>40</td>
<td>12</td>
<td>31</td>
<td>26</td>
<td>22</td>
<td>15.5</td>
<td>19.1</td>
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<tr>
<td>Mycobacterial Disease (Non-Tuberculosis)</td>
<td>4</td>
<td>6</td>
<td>10</td>
<td>7</td>
<td>5</td>
<td>3.5</td>
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<td>Powassan</td>
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<td>0</td>
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<td>0.0</td>
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<tr>
<td>Streptococcal Disease - Invasive/Groups A &amp; B</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>2</td>
<td>1.4</td>
<td>1.2</td>
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<tr>
<td>Streptococcus Pneumoniae- Invasive</td>
<td>3</td>
<td>3</td>
<td>6</td>
<td>7</td>
<td>4</td>
<td>2.8</td>
<td>3.3</td>
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<td>Tuberculosis/Active Disease</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>0.0</td>
<td>0.2</td>
</tr>
<tr>
<td>Sexually Transmitted Diseases</td>
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<td>13</td>
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</tbody>
</table>

**COMMUNITY PERSPECTIVES**

Communicable diseases (infectious diseases) are illnesses caused by bacteria, viruses, fungi or parasites. Communicable and infectious diseases continue to have a presence and significant impact at the local, state, and national level. Communicable disease prevention and control involve isolation and quarantine, immunization, prophylactic (preventive) measures, early interventions including antimicrobial treatment, public health education and other measures. In the coming decade, the United States will continue to face new and emerging issues in the area of immunization and infectious diseases. The public health infrastructure must be capable of responding to emerging threats. A coordinated strategy is necessary to understand, detect, control, and prevent infectious diseases.

**DATA HIGHLIGHTS**

- From 2012-2016, Portage County reported zero cases of measles, rubella, tetanus, diphtheria, and polio, all of which are vaccine-preventable.
- Chlamydia continues to be the most frequently reported of all communicable diseases, both in Portage County and nationwide.
- Fewer cases of Pertussis (Whooping Cough) have been reported since 2012, when 115 cases were reported. Pertussis is a serious bacterial respiratory illness. Pertussis can infect persons of all ages, but is most serious in infants and young children.
- Only one active case of Tuberculosis (TB) was reported in Portage County during 2012-2016.
- Changes in reporting criteria for Lyme disease implemented on June 1, 2012, resulted in significantly fewer cases reported in 2012. Only cases exhibiting the characteristic bullsye rash are required to be reported.
- According to Healthy People 2020, people in the United States continue to get diseases that are vaccine preventable. Viral hepatitis, influenza, and tuberculosis (TB) remain among the leading causes of illness and death in the United States and account for substantial spending on the related consequences of infection.

**SOURCES**

- Portage County Health and Human Services  
  [www.co.portage.wi.us](http://www.co.portage.wi.us)
- Wisconsin Division of Public Health  
  WEDDS, Healthiest Wisconsin 2020  
  [www.dhs.wisconsin.gov](http://www.dhs.wisconsin.gov)
- Healthy People 2020  
  [www.healthypeople.gov](http://www.healthypeople.gov)
- U.S. Centers for Disease Control and Prevention  
  [www.cdc.gov](http://www.cdc.gov)
According to the 2017 LIFE Community Survey, 47.7% of respondents disagreed or strongly disagreed with the statement “Alcohol is used responsibly” and 65.4% agreed with the statement “Binge drinking is a problem in Portage County.”

Of respondents to the 2017 LIFE Community Survey, 69.9% agreed with the statement “Illegal drug use is a problem in Portage County” and 68.1% agreed with the statement “Abuse and misuse of prescription drugs are a concern in Portage County.”

Of respondents to the 2017 LIFE Community Survey, 11.8% admitted to having 5 or more drinks on one occasion at least one time in the last 30 days.

Alcohol usage among Wisconsin adults continues to be higher than the national average for all forms of consumption, including current use (63%), binge drinking (22%), and heavy drinking (7%). In 2014, current use among Portage County adults was 70%.

As of 2013, consumption among high school students—initiation before age 13 (15%), current use (33%), and binge drinking (18%)—was lower than the U.S. as a whole.

Heroin, marijuana, methamphetamine and opiate based prescription drugs occurs across Wisconsin. Portage County’s drug-related suspensions and expulsions rate, per 1,000 students during the 2013-14 school year was 4.8%, which was greater than the rates for Marathon, Wood, or Waupaca Counties.

Substance abuse has a major impact on individuals, families, and communities. The effects of substance abuse are cumulative, significantly contributing to costly social, physical, mental, and public health problems. Across the nation, misuse of prescription drugs continues to be a problem. Local efforts, including drug take-back events and two permanent prescription drug disposal sites, are community efforts designed to make prescription drugs less available for misuse.


Key Measure: Rate of Hospital Encounters (Inpatient Hospitalizations and Emergency Department Visits) Involving Opioids for Portage County and Wisconsin per 100,000, 2010-2014

COMMUNITY PERSPECTIVES

The Healthy People 2020 goal for substance abuse is to reduce substance abuse to protect the health, safety, and quality of life for all, especially children. Alcohol-related deaths are the fourth leading cause of death in Wisconsin behind heart disease, cancer, and stroke. Wisconsin tops the nation in unhealthy lives, harm, and death associated with its drinking culture. Wisconsin culture tolerates excessive, dangerous, unhealthy, and illegal drinking, which results in a host of societal problems such as homelessness, child abuse, crime, unemployment, injury, health problems, hospitalization, suicide, fetal abnormalities and early death.

The abuse of illicit drugs, including the non-medical use of mood-altering prescribed drugs, inflicts tremendous harm upon individuals, families, and communities. Other drug problems tend to vary by geographic area, but the abuse of powder and crack cocaine,
Tobacco Use

**Key Measure:** Percentage of Portage County Residents Smoking Tobacco, 2011-2015

**DATA HIGHLIGHTS**

- Tobacco use is the number one preventable cause of death.
- In 2015 Portage County had a smoking rate among adults of 17%, the same as the state rate.
- Of current smokers, 61% have used e-cigarettes.
- Each year, approximately 13% of all deaths in Portage County are attributable to smoking. Cigarette smoking causes 79% of all lung cancer deaths and 12% of deaths from cardiovascular disease in Portage County.
- The 2016 High School Youth Tobacco Survey shows that 4.4% of students currently use chewing tobacco, snuff, or dip (other tobacco products). Also 13.3% of students had used electronic cigarettes (e-cigarettes) on at least one day in the previous 30 days.
- According to the 2017 LIFE Community Survey 43.5% of respondents agreed with the statement “E-cigarettes/vaping are a concern in Portage County.”
- From 2011 to 2015, an average of 9.2% of Portage County women reported smoking during their entire pregnancy. During that same time period, an average of 17.5% of women enrolled in WIC reported smoking during their entire pregnancy.

**COMMUNITY PERSPECTIVES**

Tobacco use is the single most preventable cause of death and disease in the United States. Each year, approximately 443,000 Americans die from tobacco-related illnesses. For every person who dies from tobacco use, 20 more people suffer with at least one serious tobacco-related illness. In addition, tobacco use in Wisconsin costs more than $2.2 billion annually in direct health care costs and $1.6 billion in lost productivity. The Healthy People 2020 goal for tobacco use is to reduce illness, disability, and death related to tobacco use and secondhand smoke exposure.

Tobacco use causes cancer, heart disease, lung diseases (including emphysema, bronchitis, and chronic airway obstruction), premature birth, low birth weight, stillbirth, and infant death.

There is no risk-free level of exposure to secondhand smoke. Secondhand smoke causes heart disease and lung cancer in adults and a number of health problems in infants and children, including severe asthma attacks, respiratory infections, ear infections and sudden infant death syndrome (SIDS).

Smokeless tobacco causes a number of serious oral health problems, including cancer of the mouth and gums, periodontitis, and tooth loss. Cigar use causes cancer of the larynx, mouth, esophagus, and lung. Use of electronic cigarettes (e-cigarettes) is on the rise. E-cigarettes are oral devices that can be used to simulate smoking and that produce an aerosol of nicotine and/or other substances.

Many factors influence tobacco use and consequent disease and mortality. Risk factors include race/ethnicity, age, education, and socioeconomic status. Research has identified a number of effective strategies that will contribute to ending the tobacco use epidemic. Based on more than 45 years of evidence, it is clear that the toll tobacco use takes on families and communities can be significantly reduced by fully funding tobacco control programs, increasing the price of tobacco products, enacting comprehensive smoke-free polices, controlling access to tobacco products, reducing tobacco advertising and promotion, implementing anti-tobacco media campaigns and encouraging and assisting smokers to quit.

**SOURCES**

- Healthy People 2020 [www.healthypeople.gov](http://www.healthypeople.gov)
- Healthiest Wisconsin 2020
- Tobacco Fact Sheet 2015 BRFSS
- WISH (Wisconsin Interactive Statistics on Health) [www.dhs.wisconsin.gov](http://www.dhs.wisconsin.gov)
- WI Tobacco Control Program Information: Burden of Tobacco [www.tobwis.org](http://www.tobwis.org)
- Wisconsin Department of Public Instruction Youth Risk Behavior Survey [www.dpi.wi.gov](http://www.dpi.wi.gov)
Mental Health

INDICATOR 67

DATA HIGHLIGHTS

- From 2010-2016, there were 76 Portage County residents with suicide listed as the primary cause of death, an average of 10.9 per year. This statistic shows an increase from the previous LIFE Report. From 2000-2009, there were 67 Portage County residents with suicide listed as the primary cause of death, an average of 6.7 per year.

- According to the 2017 LIFE Community Survey, 56% of respondents agreed with the statement “Mental health services are available.” However, only 16.2% of respondents agreed with the statement “Mental health services are affordable.”

- In 2015, Portage County residents reported on average 3.5 poor mental health days within the past 30 days, which was the same for Wisconsin in the same year.

- Of respondents to the 2017 LIFE Community Survey, 17.4% said that they or someone in their family/household struggled with mental health concerns.

- In 2015, 17.9% of all adults aged 18 years or older in the U.S. were diagnosed with a mental illness.

- 14.3% of Portage County high school students seriously considered attempting suicide during the 12 months before the 2015-16 Youth Risk Behavior Survey (YRBS), compared to 13.2% of Wisconsin students.

- 70.1% of Portage County high school students had a sense of belonging to their school compared to 9.9% who did not, in the 2015-16 Portage County YRBS.

- 71.1 % of Portage County high school students felt they had at least one teacher or other adult in their school that they could talk to if they had a problem, compared to 13.1 % who did not in the 2015-16 YRBS.

Key Measure: Number of Deaths of Portage County Adults with Suicide Listed as a Primary Cause of Death, 2010-2016

1 in 7 children aged 2-8 years has a mental, behavioral, or developmental disorder.

Source: Centers for Disease Control and Prevention. Children’s Mental Health 2016

COMMUNITY PERSPECTIVES

Approximately 20% of the population experiences a mental health problem every year. Mental health issues can be associated with physical health problems and influence risk factors such as smoking, physical inactivity, obesity, and substance abuse—factors that can lead to chronic disease, injury and disability. Mental health is essential to personal well-being, family and interpersonal relationships, and the ability to contribute to community or society.

Mental disorders are among the most common causes of disability. The resulting disease burden of mental illness is among the highest of all diseases. In any given year, an estimated 18.1% (43.6 million) of U.S. adults ages 18 years or older suffered from a mental illness and 4.2% (9.8 million) suffered from a seriously debilitating mental illness.

Mental illnesses, such as depression and anxiety, affect people’s ability to participate in health-promoting behaviors. In turn, stigma associated with mental illness can have a serious impact on mental health and decrease a person’s ability to participate in treatment and recovery. Some of the harmful effects of stigma can include reluctance to seek help or treatment; lack of understanding by family, friends, co-workers or others; fewer opportunities for work, school or social activities; trouble finding housing; bullying; physical violence or harassment; health insurance that doesn’t adequately cover mental illness treatment; and the belief that you’ll never succeed at certain challenges or that you can’t improve your situation.

Mental health, including depression, is one of many factors that can influence suicide risk. According to the Centers for Disease Control and Prevention, suicide was the 10th leading cause of deaths for Americans in 2014. Programs such as Question, Persuade, and Refer (QPR) train community members in how to recognize the warning signs of suicide and refer persons contemplating suicide for appropriate services.

Good mental health in childhood means reaching developmental and emotional milestones, and learning healthy social skills and how to cope when there are problems.

(continued on next page)
Key Measure: 2017 LIFE in Portage County Community Survey Respondents’ Reasons for Not Seeking Mental Health Services

Key Measure: Percentage of Students Who Were Bullied on School Property or Electronically in Portage County, Wisconsin, and U.S., 2015-16

COMMUNITY PERSPECTIVES

Parent reported information from the 2011-12 National Survey of Children’s Health showed 1 out of 7 U.S. children aged 2 to 8 years had a diagnosed mental, behavioral, or developmental disorder. Children can experience a range of mental health conditions, including anxiety disorders, mood disorders (including depression), and eating disorders.

Social and emotional development is key to good mental health. Adverse childhood experiences (ACE’s) can impair children’s mental health and affect their cognitive, behavioral, social-emotional development. ACE’s are common and have long-term damaging consequences including a higher likelihood of health risk behaviors and poor health outcomes. Resilience is a protective factor known to mitigate the consequences of adverse childhood experiences. Trauma-informed care is one approach to engage people with histories of trauma, which can cause extreme stress that overwhelms a person’s ability to cope.

Ensuring access to appropriate high quality mental health services is the goal of Healthy People 2020. Many communities, including Portage County, do not have enough psychiatrists or other mental health providers to address the need. Mental health providers include psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapists, mental health providers that treat alcohol and other drug abuse, and advanced practice nurses specializing in mental health care. The current ratio of population to mental health providers for Portage County is 830:1, compared to state average of 630:1, which results in long waiting periods to be seen by a psychiatrist. The shortage is even more pronounced for child psychiatry.

SOURCES

- 2017 LIFE in Portage County Community Survey
- Portage County Youth Risk Behavioral Survey, 2015-16
- Healthy People 2020 www.healthypeople.gov
- Department of Health Services: Trauma-Informed Care www.dhs.wisconsin.gov
- County Health Rankings & Roadmap Project www.countyhealthrankings.org
- Prevent Suicide Wisconsin www.preventsuicidewi.org
- WISH (Wisconsin Interactive Statistics on Health) Department of Health Services www.dhs.wisconsin.gov
- Mayo Clinic Mental Illness in Children: Know the Signs www.mayoclinic.org
- Centers for Disease Control and Prevention Children’s Mental Health www.cdc.gov
- National Center for Children in Poverty Social-emotional Development in Early Childhood www.nccp.org
INDICATOR 68
Healthy Weight

DATA HIGHLIGHTS

- Of 2017 LIFE Community Survey respondents, 72.1% agree that obesity is a concern in the community. This is up from 67.1% in the 2012 LIFE Report.
- Of 2017 LIFE Survey respondents, 48.1% exercise at least 30 minutes three or more days per week, down from 53.7% in the 2012 LIFE Report.
- The adult obesity rate in Portage County (35%) exceeded the Healthy People 2020 goal of 30.6%.
- The Healthiest Wisconsin 2020 goal is to reduce adult obesity to 24.9% and increase the percentage of adults who are at a healthy weight to 39.6%.
- The childhood obesity rate for 10 to 17 year olds in Wisconsin is 13.4% (2011) and 14.7% for 2 to 4 year old WIC participants (2014) in Wisconsin.
- Of respondents to the 2017 LIFE Community Survey, 53.1% agree or strongly agree that healthy lifestyles are common in Portage County.
- The Center for Disease Control recommends increasing the incidence and duration of breastfeeding for infants to maintain healthy weight.

Key Measure: Rates of Adult Obesity for Portage County and Wisconsin, 2012-2016

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<td>Portage County</td>
<td>28% 29%</td>
<td>28% 29%</td>
<td>29% 29%</td>
<td>30% 29%</td>
<td>35% 29%</td>
</tr>
<tr>
<td>Wisconsin</td>
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<td>29% 29%</td>
<td>29% 29%</td>
<td>29% 29%</td>
<td>29% 29%</td>
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</tbody>
</table>

COMMUNITY PERSPECTIVES

The key to achieving and maintaining a healthy weight is a lifestyle that includes healthy eating, regular physical activity, and balancing the number of calories an individual consumes with the number of calories their body uses. Adult obesity is a body mass index (BMI) greater than or equal to 30 kg/m². People who are overweight or obese are at higher risk for high blood pressure, diabetes, high cholesterol, and certain types of cancer—leading causes of preventable death. However, BMI is not a diagnostic tool for disease risks.

Regular physical activity is important for good health, and it's important in losing weight or in maintaining a healthy weight. The CDC recommends 2 hours and 30 minutes every week of aerobic activity for adults and at least 60 minutes each day of physical activity for children and teenagers. Achieving a healthy weight includes a healthy eating plan. According to the Dietary Guidelines for Americans 2015-2020, a healthy eating plan—
- Emphasizes fruits, vegetables, whole grains, and fat-free or low-fat milk and milk products
- Includes lean meats, poultry, fish, beans, eggs, and nuts
- Is low in saturated fats, trans fats, cholesterol, salt (sodium), and added sugars
- Stays within your daily calorie needs.

Both Healthy People 2020 and Healthiest Wisconsin 2020 goals support nutrition and healthy weight along with daily physical activity to promote health and reduce chronic disease risk.

Nationally medical costs for overweight and obesity alone are estimated to be $147 billion annually or 9.1% of the U.S. health care expenditures, with half of these costs paid for by Medicaid and Medicare. Obesity and related chronic diseases costs are estimated to be $1.15 billion annually in Wisconsin just in Medicaid alone. Chronic diseases also affect the economy through indirect costs including lost productivity and lost wages when an ill person cannot work. Obesity rates are correlated with high cholesterol, high blood pressure, diabetes, arthritis, asthma, and depression.

Prevention of chronic disease yields a remarkable return on investment. In Wisconsin, adequately funded community based programs that address low physical activity, unhealthy diet and tobacco use would yield a return of $6.20 for every $1 spent over the course of 5 years.

Sedentary lifestyles are directly related to development of chronic diseases later in life. Creating environments in which the healthy choice is the easy or default choice is necessary to sustain healthy lifestyles.

SOURCES

- Centers for Disease Control and Prevention
  www.cdc.gov/healthyweight/
- County Health Rankings & Roadmaps
  www.countyhealthrankings.org
- Department of Health Services Wisconsin Nutrition, Physical Activity & Obesity State Plan: 2013-2020
  www.dhs.wisconsin.gov
  stateofobesity.org/states/wi/
- Healthy People 2020
  https://www.healthypeople.gov/
**Access to Health Care Services**

**Key Measure:** Ratio of People per 100,000 to Health Care Providers in Portage County, Wisconsin, and United States

**DATA HIGHLIGHTS**

- In 2017, 47.8% of LIFE Community Survey respondents disagreed/strongly disagreed that health care was affordable, compared to 53% in 2012.
- In 2017, 89.2% of LIFE Community Survey respondents agreed/strongly agreed that health care was available, compared to 85.7% in 2012.
- Having medical debt was reported by 22.9% of 2017 LIFE Community Survey respondents, compared to 26.4% of respondents in 2012. Of the 2017 respondents, 39.0% had medical debt amounts from $1,000 to $4,999, compared to 48.7% of respondents in 2012.
- In 2017, 50% of LIFE Community Survey respondents who had purposefully skipped their prescription medication as prescribed reported they did so because they had no means to pay for medication—compared to 39% of respondents in 2012.
- In 2017, 5.7% of LIFE Community Survey respondents reported there was a time in the past 12 months when they had no health insurance or coverage, compared to 11% of respondents in 2012.
- In 2017, 16.1% of LIFE Community Survey respondents (compared to 12.4% in 2012) reported they needed to see a medical provider in the past 12 months but did not. The main reason indicated was having no means to pay for the service.

**COMMUNITY PERSPECTIVES**

Access to health care is a state and national priority for 2020. Access to high quality health services means universal access to affordable, high-quality health services for all people in Wisconsin. It not only ensures health promotion for Wisconsin families but also improves their economic security. The statewide Healthiest Wisconsin 2020 objective is to assure all residents have access to comprehensive, patient-centered health services that are safe, coordinated, and navigable. A number of reasons influence an individual’s or family’s ability to access health care. These factors include but are not limited to not knowing how/where to find a provider, no insurance, limited insurance coverage, inability to pay for services, travel distance, or no means of transportation.

Current policy efforts focus on the provision of insurance coverage as the principal means of ensuring access to health care among the general population. This effort will improve quality of life, eliminate disparities in health care quality, and ensure a medical home for all people living in Wisconsin. In 2015, Medicare provided health insurance for over 55 million—46 million people age 65 and older and 9 million younger people. The national goal for Healthy People 2020 is to increase the proportion of persons with insurance to 100%.

In 2015, 95% of Wisconsin residents reported having insurance, and 63% were employer sponsored. Demographically, Wisconsin residents who are likely to be uninsured are self-employed, employed part-time, unemployed, Hispanic, and/or poor.

**SOURCES**

- County Health Rankings and Roadmaps [www.countyhealthrankings.org/]
- Wisconsin Department of Health Services
  Healthiest Wisconsin 2020 Wisconsin Family Health Survey 2015 [www.dhs.wisconsin.gov]
- Healthy People 2020 [www.healthypeople.gov]
Quality of Health Care Services

Key Measure: Rate of Preventable Hospitalizations per 1,000 People by Age Group in Portage County, 2014

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<thead>
<tr>
<th>Age Group</th>
<th>Rate per 1,000 People</th>
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<tbody>
<tr>
<td>Under 18 Years</td>
<td>3.1%</td>
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<tr>
<td>18-44 Years</td>
<td>3.4%</td>
</tr>
<tr>
<td>45-64 Years</td>
<td>10.6%</td>
</tr>
<tr>
<td>65+ Years</td>
<td>58.7%</td>
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</table>

Key Measure: Charge per Capita for Preventable Hospitalizations by Age Group in Portage County, 2010-2014

<table>
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<tr>
<th>Age Group</th>
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<td>$42</td>
<td>$23</td>
<td>$49</td>
<td>$40</td>
<td>$24</td>
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<td>18-44 Years</td>
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<td>$100</td>
<td>$133</td>
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<td>45-64 Years</td>
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<td>$224</td>
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<td>$710</td>
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<td>$829</td>
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<td>$188</td>
<td>$242</td>
<td>$230</td>
<td>$313</td>
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COMMUNITY PERSPECTIVES

Preventable hospitalizations are hospitalizations for conditions where timely and effective ambulatory care can reduce the likelihood of hospitalization. The rate of preventable hospital stays is often used to assess the effectiveness and accessibility of primary healthcare. Bacterial pneumonia and congestive heart failure are the conditions most frequently associated with preventable hospitalizations in Wisconsin. Other frequent conditions include chronic obstructive pulmonary disease, kidney/urinary infection, cellulitis, and dehydration. Over half of the preventable hospitalizations in Wisconsin occur among persons age 65 and older. Improving the state’s capacity and performance in preventing and managing chronic diseases, which in turn will reduce preventable hospitalizations, is an objective of the Healthiest Wisconsin 2020 plan. Portage County is currently at 13.3% preventable hospitalizations per 1,000 population. Actions to reduce this percentage and achieve a state-wide benchmark of 11.6% per 1,000 population include: continued expansion of Medicaid coverage to increase primary and preventive healthcare; a focus on the prevention and management of chronic health conditions (especially asthma and diabetes); leveraging of prevention and wellness provisions through existing health insurance coverage; evaluation and monitoring of immunizations to vulnerable populations; expansion of the delivery of health care services to the elderly that reduce incidences of gastroenteritis, urinary tract infections, dehydration, anemia, and nutritional deficiencies; and improving health literacy on key health promotion and disease prevention topics.

A national objective for Healthy People 2020 is to increase the proportion of people with a consistent primary care provider, having a target goal set at 83.9%.