

Issue Paper #4: Supplanting of Funds

Introduction:

ABC for Health, Citizen Action of Wisconsin, and Disability Rights Wisconsin have joined forces to express our concerns about the Medical College of Wisconsin and the University of Wisconsin School of Medicine and Public Health's stewardship over the public health resources designated for the benefit of the people of Wisconsin. The Wisconsin United for Health Foundation (WUHF) Board will meet to review a Legislative Audit Bureau Report that raised serious questions and validates longstanding concerns about the oversight and the designated use of these public resources. Our agencies have concerns about the schools' current system for distributing the Blue Cross-Blue Shield conversion funds-the money that is supposed to represent Blue Cross-Blue Shield's payback to the people of Wisconsin as part of the company's 2001 conversion to a for-profit entity. The purpose of the funds is to promote public health initiatives that will benefit the people of Wisconsin. However, the recent Legislative Audit Bureau Report suggests that these funds were periodically used to benefit their own institutions, rather than the public's health.

I. <u>The Medical School Endowments Failed to Adequately Enforce Their Prohibition</u> <u>Against Using Conversion Funds to Supplant Other Funds</u>

A decade ago, Blue Cross Blue Shield (BCBS) of Wisconsin converted from a nonprofit

health insurance provider to a for-profit business. As part of the conversion, Insurance

Commissioner Connie O'Connell required that BCBS pay back to the public the more than \$600

million that the company had accrued as a result of its tax-exempt status. According to the

Commissioner's Order, the purpose of these funds was to "promote public health initiatives that

will generally benefit the Wisconsin population."¹

The Commissioner assigned the task of administering this \$600² million of public money

to Wisconsin's two medical schools, the Medical College of Wisconsin and the University of

Wisconsin School of Medicine and Public Health. The Commissioner did not give the funds to

² The original conversion value was estimated at \$250 million. Stock value fluctuations since 2000 have increased the total amount of the conversion funds.



¹ Final Order of the Commissioner of Insurance Re: Blue Cross & Blue Shield United of Wisconsin, Case No. 99-C26038, p. 30. *Available at* <u>http://oci.wi.gov/bcbsconv/bcbsdec.pdf</u>.

the schools as a gift; instead, she explained that "the conversion funds are best viewed as public capital charged with a particular purpose."³ The Commissioner's Order charged the medical schools with overseeing the conversion funds and allocating the money to projects that promote Wisconsin's public health.

The Order specifies that the medical schools cannot use conversion funds to supplant other funding sources, internal or external to the schools. The Order states,

[T]he funds may not be used to supplant funds or resources that are available from other sources. The medical schools, for each proposal approved, and for each program funded, must make a written determination that the application of the funds will not supplant other resources that may be available to accomplish the same purpose.⁴

The Commissioner and the WUHF Board trusted the medical schools to comply with this prohibition against supplanting without strict oversight. The schools have betrayed that trust and violated the Commissioner's Order. The Legislative Audit Bureau's report reveals that the schools are violating the supplanting rule. The schools appear to supplant two types of resources: (1) the schools' operational budgets; and (2) federal and private funding for medical research. Without effective oversight and enforcement, it is likely that the schools will continue to violate the supplanting prohibition.

a. Supplanting Operational Budgets

The audit report, repeating an observation made by ABC for Health and Wisconsin Citizen Action years ago, ⁵ noted that some grants appear to supplant the medical schools' operating budgets. The audit bureau finds it likely "that faculty recruitment, the development of

⁵ See Memorandum from Bobby Peterson, ABC for Health, Inc. and Darcy Haber, Wisconsin Citizen Action to Members of UW Medical School OAC and WUHF Board Members Re: RFP Commentary (Sept. 30, 2003)(on file with author).



 $^{^{3}}$ Id.

⁴ Final Order of the Commissioner of Insurance Re: Blue Cross & Blue Shield United of Wisconsin, Case No. 99-C26038, p. 30. *Available at <u>http://oci.wi.gov/bcbsconv/bcbsdec.pdf</u>.*

degree programs, and equipment purchases that could be considered part of the school's core

responsibilities would have been funded at least in part from other sources."6

Some of the largest noncompetitive grants awarded by both schools fund these core medical

school responsibilities. For example, Medical College of Wisconsin allocated almost \$7.4

million for establishing MA and PhD programs in Public and Community Health. Below are the

key medical education and research grants, out of the 40 reviewed by the Audit Bureau, that fund

core medical school activities.

• Faculty recruitment

MCW: Cancer Center Faculty Recruitment (noncompetitive, \$750,000) MCW: Clinical and Translational Science Institute (noncompetitive, \$2,867,000) MCW: Master's Degree in Public and Community Health (noncompetitive, \$2,596,700) MCW: PhD Program in Public and Community Health (noncompetitive, \$4,778,100)

• Development of degree programs

MCW: Clinical Research Infrastructure (noncompetitive, \$1,159,500) MCW: Master's Degree in Public and Community Health (noncompetitive, \$2,596,700) MCW: PhD Program in Public and Community Health (noncompetitive, \$4,778,100) UW: Master of Public Health Degree Program (noncompetitive, \$1,954,900)

• Equipment purchase

MCW: Biocore 3000 Universal Approach to Ligand-Protein (competitive, \$327,800) MCW: Clinical and Translational Science Institute (noncompetitive, \$2,867,000) MCW: Core Equipment for Biotechnology Research (noncompetitive, \$1,155,600) MCW: Translational Neuro-Oncology Research Program (noncompetitive, \$1,000,000) UW: Human Proteomics Program (noncompetitive, \$1,767,200)

Faculty recruitment, development of degree programs, and equipment purchases are basic

medical school operating expenses and should be paid for with the schools' operational budgets,

not with public funds.⁷

b. Supplanting Federal Research Funding

In addition, many research projects funded by both schools appear to supplant available

federal funding for medical research. The National Institutes of Health and other agencies

 ⁶ Legislative Audit Bureau of Wisconsin, An Evaluation: Medical Education, Research, and Public Health Grants, Report 10-6, p.90 (May 2010). Hereinafter "Report 10-6."
 ⁷ Id.

provide ample funding for basic science and medical research relating to health issues of national

concern.

The following projects could likely have received funding from federal programs⁸:

• MCW research grants

Early Detection of Alzheimer's Disease Using Functional MRI (competitive \$250,300) Genetic Analysis Initiative for Individualized Medicine (noncompetitive, \$500,000) Pharmacogenomics Core Facility (noncompetitive, \$510,200) Role of Dysregulated Endocannabinoid Signaling in Bipolar Disorder (competitive, \$150,000) Translational Neuro-Oncology Research Program (noncompetitive, \$1,000,000)

• UW research grants

Human Proteomics Program (noncompetitive, \$1,767,200) Individualized Stroma-Targeting Therapy in Breast Cancer (competitive, \$300,000) Relationship between Asthma and Obstructive Sleep Apnea (competitive, \$100,000) Role of Ikaros in Cellular Proliferation (competitive, \$100,000) Treatment of Vitamin D Insufficiency (competitive, \$100,000)

The NIH Reporter indicates that federal programs fund many projects on Alzheimer's

disease, individualized medicine, pharmacogenomics, bipolar disorder, neuro-oncology,

proteomics, breast cancer therapies, asthma, sleep apnea, the role of ikaros, and vitamin D

insufficiency.

Researchers should seek federal funding for projects of national interest. The conversion

funds should not support research projects that duplicate the efforts of NIH-funded investigations

at other institutions.

Likewise, many of the public health grants issued by the schools overlap significantly with

existing federal and private funding. Because of the availability of various targeted grants from

the NIH, the Agency for Healthcare and Research Quality, the Indian Health Service, the Nathan

Cummings Foundation, and the W.K. Kellogg Foundation, the following projects could likely

have received funding⁹:

• UW public health grants



⁸ See attached Appendix at *infra*, p.7-6.

⁹ See attached Appendix at *infra*, p.7-6.

Ho-Chunk Nation Culturally Trained Preventive and Supportive Care Project (competitive, \$25,000)
Tribal Academic Partnership for American Indian Health (noncompetitive, \$286,600)
Wisconsin Population Health Fellowship Program (noncompetitive, \$2,012,000)
Planning Grant to Reduce Health Disparities within LGBT Populations in Wisconsin (competitive, \$25,000)
Continuing Public Health Education (non-competitive, \$560,300)

• MCW public health grants

Developing Strategies: Improving the of Health of LGBT People of Color (competitive, \$50,000)
Using Social Networks to Increase HIV Testing in Vulnerable Populations (competitive, \$443,500)
Saber Para La Gente/Knowledge for the People (competitive, \$50,000)

Development of a Hispanic Health Patient Navigator Project (competitive, \$49,000)

Conversion funds should not be used supplant available funding.¹⁰ Instead, they should

only support projects that focus on prioritized Wisconsin health issues. Appropriate research

projects include those that investigate health issues and problems of access endemic to specific

Wisconsin populations. When projects investigate issues of national concern, such as cancer,

obesity, or Alzheimer's disease, they should do so from a Wisconsin-specific perspective.

Investigators should ask how these health issues are affected by local environmental and cultural

factors.

The failure of the medical schools' to enforce sufficient supplanting prohibitions is

especially appalling given their initial insistence that no public health funding will be given to

organizations in cases where such funding might supplant other funds that "are or might even be

potentially available" (the words of Oversight and Advisory Committing, aka, OAC, member Pat

Remington)¹¹. Instead of following the OCI order and applying that strict supplanting

prohibition to research and education grants as well, the schools applied the weak supplanting

prohibition from the research and education grants to public health grants as well.

¹¹ Letter from Bobby Peterson, Public Interest Attorney for ABC for Health, Inc., to Wisconsin United for Health Foundation, Attn: Chairperson Benjamin Brancel, p.4 (Feb. 10, 2004) (on file with author).



¹⁰ Final Order of the Commissioner of Insurance Re: Blue Cross & Blue Shield United of Wisconsin, Case No. 99-C26038, p. 30. *Available at* <u>http://oci.wi.gov/bcbsconv/bcbsdec.pdf</u>.

The Insurance Commissioned must develop enforceable language on supplanting of current or otherwise available funding. And the schools must face consequences for failing to adhere to supplanting rules. The schools must uniformly follow a strict prohibition on supplanting: grant seekers should indicate on their applications for funding (1) why their project is a priority for the people of Wisconsin, and (2) that they have investigated other funding sources and found no other funding available for the project. Supplanting prohibitions are standard operating procedure in the grant making community. Protestations otherwise by the medical schools' should viewed with great skepticism.

About the Coalition Agencies:

ABC is a Wisconsin-based, nonprofit, public interest law firm dedicated to linking children and families, particularly those with special health care needs, to health care benefits and services. Citizen Action of Wisconsin is an issue-focused coalition of individuals and organizations committed to achieving social, economic, and environmental justice and Disability Rights Wisconsin is a private nonprofit organization designated by the Governor to ensure the rights of all state citizens with disabilities through individual advocacy and system change.

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Appendix: Table Detailing Alternative Funding Sources

Proposal Area	Other Potential Funding Program	Source
Community Partnerships	Alzheimer's Disease Program Grants	Helen Bader Foundation
	Health Program Grants	
		Alan Cummings Foundation
Center for the Advancement of Urban Children	Social and Demographic Studies of Race and Ethnicity in the United States	National Institutes of Health
Center for AIDS Intervention Research	Global Health Program grants	Bill & Melinda Gates Foundation
	Secondary Analysis of Existing Alcohol and HIV/AIDS Data Sets	National Institutes of Health
Women's Health Initiative	Women's Mental Health in the Pregnancy and Postpartum Period	National Institutes of Health
	Research Grants	Wisconsin Women's Health Foundation
Firearm Injury Center	Research on Children Exposed to Violence	National Institutes of Health
Health Policy Institute	Knowledge Integration Across Distributed Heterogeneous Data Sources	National Institutes of Health
	Health program grants	Public Welfare Foundation
Injury Research Center	Research Centers in Trauma, Burn and Perioperative Injury	National Institutes of Health



Research	Unrestricted Cardiovascular Research	Bristol-Myers Squibb
Priorities:	<u>Grants</u>	Foundation
Cardiovascular		
Disease		
Research	High-Impact Pilot Studies in Cancer	National Institutes of
Priorities:	Biology	Health
Cancer		
	Exploratory Studies in Cancer	
	Detection, Diagnosis and Prognosis	
		National Institutes of
		Health
Research	Unrestricted Neuroscience Research	Bristol-Myers Squibb
Priority:	<u>Grants</u>	Foundation
Neuroscience	Neuroscience Cluster Awards	National Science
	Treatoscience cruster Awards	Foundation
	<u>Human Brain Project Phases I & II</u>	National Institutes of
		Health
Library Services	Internet Access to Digital Libraries	National Library of
		Medicine
	Information System Grants	National Library of
		Medicine

