

2007 DRAFTING REQUEST

Bill

Received: 11/27/2006

Received By: **dkennedy**

Wanted: **As time permits**

Identical to LRB:

For: **Administration-Budget 6-3420**

By/Representing: **Johnston**

This file may be shown to any legislator: **NO**

Drafter: **dkennedy**

May Contact:

Addl. Drafters:

Subject: **Health - miscellaneous**

Extra Copies:

Submit via email: **YES**

Requester's email:

Carbon copy (CC:) to: **robin.ryan@legis.wisconsin.gov**

Pre Topic:

DOA:.....Johnston, BB0187 -

Topic:

Health Care Quality and Patient Safety Council

Instructions:

See Attached

Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/?	dkennedy 12/04/2006	jdyer 12/05/2006		_____			
/P1			pgreensl 12/05/2006	_____	cduerst 12/05/2006		
/1	dkennedy 01/24/2007	jdyer 01/24/2007	nmatzke 01/24/2007	_____	sbasford 01/24/2007		
/2	dkennedy	jdyer	rschluet	_____	lrb_docadmin		State

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
	01/25/2007	01/26/2007	01/26/2007	_____	01/26/2007		

FE Sent For:

<END>

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/P1			pgreensl 12/05/2006		cduerst 12/05/2006		
/1	dkennedy 01/24/2007	jdyer 01/24/2007	nmatzke 01/24/2007		sbasford 01/24/2007		

Handwritten signature: 2/26 jld

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<END>

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/?	dkennedy 12/04/2006	jdye 12/05/2006					
/P1	dkennedy	<i>1/24 jld</i>	pgreensl 12/05/2006		cduerst 12/05/2006		

FE Sent For:

nwn
1/24
nwn/rs
1/24
<END>

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Topic:

Health Care Quality and Patient Safety Information Technology Board

Instructions:

See Attached

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/?	dkennedy 12/04/2006	jdyer 12/05/2006		_____			
/P1			pgreensl 12/05/2006	_____	cduerst 12/05/2006		

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/?	dkennedy	/P1 12/5 JLD	12/5 PG	12/5 PG / NN			

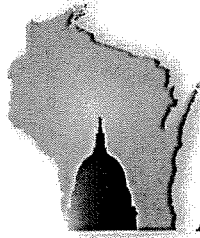
FE Sent For:

<END>

2005-07 Budget Bill Statutory Language Drafting Request

- Topic: Health Care Quality Board
- Tracking Code: ~~(b)(5) - DPP~~ BB0187
- SBO team: Health & Insurance
- SBO analyst: Jim Johnston
 - Phone: 266-3420
 - Email: james.johnston@wisconsin.gov
- Agency acronym: DHFS
- Agency number: 435

Priority =
HIGH



**WISCONSIN DEPARTMENT OF
ADMINISTRATION**

JAMES E. DOYLE
GOVERNOR
MARC J. MAROTTA
SECRETARY

Division of Executive Budget and Finance
Post Office Box 7864
Madison, WI 53707-7864
Voice (608) 266-1736
Fax (608) 267-0372
TTY (608) 267-9629

Date: November 21, 2006
To: Stephen R. Miller, Chief
Legislative Reference Bureau
From: Jim Johnston
Team Leader
Health & Insurance Team
Subject: Biennial Budget Drafting Request

Request Description:

Overview - The intent of the draft is to codify the e-health board created through Executive Order.

15.105
(6)

The board shall consist of current members appointed under Executive Order Number 129. Members shall include: The secretary of DOA, the secretary of DHFS, the secretary of ETF, 1 employer purchaser for health care, 1 hospital representative, 1 physician, 1 health insurance industry representative, 1 representative of a major medical provider system and 1 consumer health care advocate. The Governor shall appoint the members for 2-year staggered terms. Each member's appointment remains in effect until a successor is appointed. The Secretary of the Department of Health and Family Services shall serve as the chairperson and the board may elect one member as vice chair.

15.07
(2)(K)

The Secretary of DHFS shall appoint chairpersons for the following e-health board subcommittees:

- Patient Care
- Consumer Interest and Privacy
- Public Health
- Statewide Health Information Exchange and Interoperability

15.07
(2)(K)

These chairpersons along with the Secretary shall form an executive committee to govern the work for the e-health board. Board meetings shall be open to the public. Board members shall not receive compensation other than expenses.

The subcommittees are to align their work with recommendations of the American Health Information Community.

Stephen R. Miller
Page 2
November 21, 2006

The e-health board shall lead implementation efforts for the Wisconsin Action Plan for Health Care Quality and Patient Safety.

The Board is charged with identifying strategies and actions required to deploy statewide health care information systems should optimize the potential of this technology to improve health care quality, safety and efficiency within a reasonable time period and reasonable financial investments. The plan should consider the extent to which an integrated or interoperable system or technology platform may be most cost-effective. This will include assessing the benefits of an integrated or interoperable system for supporting rapid deployment for supporting medical care practitioners, promoting accurate and appropriate shared information about individual patients among providers, benchmarking of performance indicators across health care provider organizations for organizational performance improvement, and public reporting of quality, safety and efficiency data for consumer and purchaser decision-making.

- The board shall report by January 1, 2008, and at least annually thereafter to the Governor and Legislature on its plans, activities, accomplishments, and recommendations.
- The board shall advise the Secretary of the Department of Health and Family Services on a communication and marketing plan, annually report to the Secretary on recommendation to improve the e-health board governance structure.
- The board shall also advise the Secretary of Health and Family Services on distribution of funding to entities to promote the Governor's e-health agenda.

This language should be included as non-statutory language.

Please let me know if you have any questions or need more information. I can be contacted at 266-3420 or james.johnston@wisconsin.com



Media Room

Executive Order # 129

Relating to the Governor's eHealth Care Quality and Patient Safety Board

WHEREAS, a statewide ehealth information infrastructure would improve the quality and reduce the cost of health care in Wisconsin by:

1. Ensuring health information is available at the point of care for all patients; and
2. Reducing medical errors and avoiding duplicative medical procedures; and
3. Improving coordination of care between hospitals, physicians, and other health professionals; and
4. Furthering health care research; and
5. Providing consumers with their health information to encourage greater participation in their health care decisions; and

WHEREAS, Wisconsin must control health care costs as a key to a long-term strategy of growing our state's economy by reducing state expenditures and enhancing the business environment for both large and small employers; and

WHEREAS, a statewide ehealth information infrastructure must be organized and structured in a manner to protect the privacy and security of health information; and

WHEREAS, on April 12, 2004, President Bush called for widespread adoption of interoperable electronic health records ("EHRs") within 10 years and established the Office of the National Coordinator for Health Information Technology ("ONCHIT"); and

WHEREAS, ONCHIT issued a Framework for Strategic Action: The Decade of Health Information Technology: Delivering Consumer-centric and Information-rich Health Care (the "Framework"), outlining four requirements for achieving the President's goal of widespread adoption of health information technology ("HIT"), including the need to:

1. Develop interoperability standards; and
2. Support and encourage the development and use of EHRs and electronic data exchange infrastructure; and
3. Establish policies and regulation consistent with these goals and information security requirements; and
4. Create an Internet-based architecture for nationwide health information exchange; and

WHEREAS, the Framework's goals are consistent with those of the State of Wisconsin to achieve 100% electronic health data exchange between payers, health care providers, consumers of health care, researchers, and government agencies as appropriate; and

WHEREAS, the federal Department of Health and Human Services ("DHHS") estimates that savings of \$140 billion per year, or close to 10% of total health spending in the United

States, could be achieved through effective deployment of health information technology by reducing duplicative care, lowering health care administrative costs, and avoiding errors in care; and

WHEREAS, the federal government intends to financially support local and statewide initiatives aligned with federal efforts to achieve the President's health information technology goals; and

WHEREAS, establishing a Wisconsin Action Plan for Health Care Quality and Safety will guide legislative and regulatory actions, encourage coordinated efforts in the private healthcare sector, further public and private partnerships for the development of a statewide health information infrastructure, and maximize federal financial participation to support the goal of early adoption of an ehealth information infrastructure;

NOW, THEREFORE, I, JIM DOYLE, Governor of the State of Wisconsin by the authority vested in me by the Constitution and the Laws of this State, and specifically by Wis. Stat. § 14.019, do hereby:

1. Create a Board for eHealth Care Quality and Patient Safety ("Board"); and
2. Direct the Board to comprehensively review issues surrounding the creation of an ehealth information infrastructure in Wisconsin and develop guidance - to be known as the "Wisconsin Action Plan for Health Care Quality and Safety" - for the users of such infrastructure; and
3. Provide that members of the Board shall be appointed by, and serve without compensation at the pleasure of, the Governor; and
4. Provide that the Chairperson of the Board shall be designated by the Governor from among the Board's membership; and
5. Direct the Board to develop recommendations for:
 1. Identifying existing ehealth resources, including funding sources, to support the development of a statewide ehealth information infrastructure; and
 2. Identifying technology options, and their advantages and disadvantages, for a statewide ehealth information infrastructure; and
 3. Identifying options for serving consumer health information needs; and
 4. Insuring health information privacy and security in electronic health information exchange; and
 5. Facilitating statewide adoption of electronic health record standards to enable health information exchanges across the state and nationally; and
 6. Creating organization and governance structures for a statewide ehealth information infrastructure; and
6. Direct the Board to submit the Wisconsin Action Plan for Health Care Quality and Safety to the Governor, detailing recommended actions and key milestone dates to achieve within the next five years the goals stated in this Executive Order. Direct the Board to solicit input from health care industry executives, technology leaders, content experts, major employers, community leaders and interested government agencies in developing the action plan; and
7. Provide that the action plan should consider the extent to which an integrated or interoperable system or underlying technology may be cost effective, including by assessing benefits of the system for supporting rapid deployment for supporting medical care practitioners, promoting accurate and appropriate shared information about individual patients among health care providers, and standardizing performance indicators among health care provider organizations to improve organization performance and public reporting of quality, safety and efficiency data for consumers and health care purchaser decision making; and
8. Provide that the Board shall annually assess the extent to which automated information and decision support systems are used by health care providers in Wisconsin and annually assess options and progress on the action plan to achieve automation of all health care systems by 2010; and

9. Provide that the Board annually report to the Governor on its plans, activities, accomplishments, and recommendations.

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Great Seal of the State of Wisconsin to be affixed. Done at the Capitol in the City of Madison this second day of November, in the year two thousand five.

JIM DOYLE

Governor

By the Governor:

DOUGLAS LA FOLLETTE

Secretary of State

Printed: 12/1/2006



State of Wisconsin
2007 - 2008 LEGISLATURE

LRB-0904/P1

DAK:.....

D-NOTE

JLD

DOA:.....Johnston, BB0187 - Health Care Quality and Patient Safety
Information Technology Board

FOR 2007-09 BUDGET -- NOT READY FOR INTRODUCTION

provided on a subsequent
version.

don't gen

1

AN ACT ...; relating to: the budget. ✓

Analysis by the Legislative Reference Bureau

ADMINISTRATION

This is a preliminary draft. An analysis will be ✓

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

2

SECTION 1. 15.105[✓] (6) of the statutes is created to read:

3

15.105 (6) HEALTH CARE QUALITY AND PATIENT SAFETY INFORMATION TECHNOLOGY

4

BOARD. ✓ There is created a health care quality and patient safety information

5

technology board, attached to the department of administration under s. 15.03. The

6

health care quality and patient safety information technology board shall consist of

7

the following members that, except for the members specified in pars. ✓ (a) to (c), are

8

appointed by the governor for ✓ 2-year terms:

- 1 (a) The secretary of administration or his or her designee. ✓
- 2 (b) The secretary of health and family services or his or her designee. ✓
- 3 (c) The secretary of employee trust funds or his or her designee. ✓
- 4 (d) An employer who purchases health care for employees. ✓
- 5 (e) A representative of the Wisconsin Health and Hospital Association. ✓
- 6 (f) A physician, as defined in s. 448.01 (5). ✓
- 7 (g) A representative of the health insurance industry.
- 8 (h) A representative of a major health care provider system.
- 9 (i) A health care consumer advocate.

10 **SECTION 2.** 15.07 (2) (k) [✓] of the statutes is created to read:

11 15.07 (2) (k) The secretary of health and family services, or his or her designee,
12 shall serve as chairperson of the health care quality and patient safety information
13 technology board [✓] and shall appoint chairpersons for subcommittees on patient care,
14 consumer interest and privacy, public health, and statewide health information
15 exchange and interoperability.

16 **SECTION 3.** 16.015 [✓] of the statutes is created to read:

17 **16.015 Health care quality and patient safety information technology**

18 **board.** (1) In this section: [✓]

19 (a) "American health Information Community" means a panel that is advisory
20 on information technology to the federal department of health and human [✓] services.

21 (b) [^] "Board" means the health care quality and patient safety information
22 technology board. [✓]

23 (2) The board shall lead implementation efforts for an action plan for health
24 care quality and patient safety by doing all of the following: [✓]

1 (a) Identifying strategies and actions necessary to extend health care
2 information systems statewide so as to optimize the improvement of health care
3 quality, safety, and efficiency within a reasonable period of time and with reasonable
4 financial investment.

5 (b) Considering the most cost-effective means of implementing an integrated
6 or interoperable health care information system, including all of the following:

7 1. Assessing the benefits of an integrated or interoperable system for
8 supporting rapid deployment of medical care practitioners.

9 2. Promoting accurate and appropriate shared information about individual
10 patients among health care providers.

11 3. Creating points of reference for performance indicators among health care
12 provider organizations for organizational performance improvement.

13 4. Reporting to the public on health care quality, safety, and efficiency data for
14 consumer and purchaser decision making. ✓

15 (3) The board shall advise the secretary of health and family services on all of
16 the following:

17 (a) A communication and marketing plan.

18 (b) Annually, on recommendations to improve the governance structure of the
19 board. ✓

20 (c) The distribution of funding to entities to promote the health information
21 technology agenda of the governor. ✓

22 (4) By January 1, 2008, ✓ and at least annually thereafter, the board shall report
23 to the legislature under s. 13.172 (3) ✓ and to the governor on the board's plans,
24 activities, accomplishments, and recommendations.

1 (5) Any subcommittee of the board shall align its work with recommendations
2 of the American Health Information Community. ✓

3 **SECTION 9101. Nonstatutory provisions; Administration.** ✓

4 (1) HEALTH CARE QUALITY AND PATIENT SAFETY INFORMATION TECHNOLOGY BOARD
5 MEMBERSHIP. Notwithstanding the length of terms specified in section 15.105 (6)
6 (intro.) ✓ of the statutes, as created by this act, the initial terms of the members
7 specified in section 15.105 (6) (d) to (f) ✓ of the statutes, as created by this act, shall
8 expire on May 1, 2009, and the initial terms of the members specified in section
9 15.105 (6) (g) to (i) ✓ of the statutes, as created by this act, shall expire on May 1, 2011. ✓

10

(END)

D-NOTE

**DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU**

LRB-0904/dn
DAK: ^.....

PI

JLD

Note also that the language in the instructions specifying the board's duties is significantly different from the governor's Executive

Order #129.

To Jim Johnston:

I am providing this bill in preliminary form because the following several issues arose in the course of drafting:

1. Because this request requires that the board report by January 1, 2008, and at least annually thereafter, and because nonstatutory provisions are required to extend no later than July 1 of the even-numbered year of the next biennial session (July 1, 2010), rather than as instructed I have drafted in the statutes, rather than the nonstatutory provisions, the creation of the board and the board's duties.

2. Do you want the members of the board (other than the members serving because of holding another office) to be nominated by the governor and appointed with the advice and consent of the senate, as specified in s. 15.07 (1) (b), stats., or appointed by the governor without senate involvement?

* 3. Under s. 15.01 (1r), stats., a board has policy-making or quasi-judicial powers, including rulemaking. Since the instructions indicate no desire to have the body exercise these powers, it appears to be much more appropriate that the body be designated as a council, as defined in s. 15.01 (4), stats. Please advise.

* 4. Your request is that board members serve staggered, two-year terms, but you gave no direction as to how the staggering should be arranged. Please review SECTION 9101 (1), as created in the draft; the May 1 expiration date in an odd-numbered year corresponds to s. 15.07 (1) (c), stats. *and (3)* ✓

CS

5. The language provided as duties of the board was difficult to understand; please review s. 16.015 (2). Among other things, I'm not sure if there is an intended difference between "medical care practitioners" and "health care providers" in s. 16.015 (2) (b) 1. and 2. ✓

3

* 6. What does the use of the term "governance structure" in s. 16.015 (b) mean? ✓

Debora A. Kennedy
Managing Attorney
Phone: (608) 266-0137
E-mail: debora.kennedy@legis.wisconsin.gov

DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRB-0904/P1dn
DAK:jld:pg

December 5, 2006

To Jim Johnston:

I am providing this bill in preliminary form because the following several issues arose in the course of drafting:

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5. The language provided as duties of the board was difficult to understand; please review s. 16.015 (2) and (3). Among other things, I'm not sure if there is an intended difference between "medical care practitioners" and "health care providers" in s. 16.015 (2) (b) 1. and 2. Note also that the language in the instructions specifying the board's duties is significantly different from the governor's Executive Order #129.
6. What does the use of the term "governance structure" in s. 16.015 (3) (b) mean?

Debora A. Kennedy
Managing Attorney
Phone: (608) 266-0137
E-mail: debora.kennedy@legis.wisconsin.gov

Request Description:

based on

Overview - The intent of the draft is to codify the eHealth board created through Executive Order and to express the support of the Legislature for the goals established by the Institute of Medicine for health care that is safe, effective, patient-centered, timely, efficient, and equitable.

Deleted: -h

The board shall consist of current members appointed under Executive Order Number 129. Members shall include: The secretary of DOA, the secretary of DHFS, the secretary of ETF, 1 employer purchaser for health care, 1 hospital representative, 1 physician, 1 health insurance industry representative, 1 representative of a major medical provider system and 1 consumer health care advocate. The Governor shall appoint the members for 2-year (or 3) staggered terms. Each member's appointment remains in effect until a successor is appointed. The Secretary of the Department of Health and Family Services shall serve as the chairperson and provide staff support to the board. The board may elect one member as vice chair.

Deleted: and t

The Secretary of DHFS shall appoint chairpersons for the following eHealth board advisory committees:

Deleted: -h

- Patient Care
- Consumer Interest and Privacy
- Public Health
- Statewide Health Information Exchange

Deleted: subcommittees

Deleted: and interoperability

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Deleted: -h

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Send

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Phone #		Phone #	
Fax #		Fax #	

Kennedy, Debora

To: Johnston, James - DOA
Subject: 07-0904, Health care quality and patient safety information technology board (E-Health Board)

Jim, I have not yet received answers to my Drafter's Note of December 5 for this Board; once I get those answers I will be able to draft this in introducible form.

Thanks.

Debora

Debora A. Kennedy

Managing Attorney

Legislative Reference Bureau

(608) 266-0137

debora.kennedy@legis.state.wi.us

-0904/P2

1/11/06 From Jim Johnston

Answers to Drafter's Note for -0904/P1:

- ✓ (1) #1 - ok
- ✓ (2) #2 - appointed by gov. w/o senate involvement
- ✓ (3) #3 Make a Council -
- ✓ (4) #4 - ok as is
- ✓ (5) #6 - instead of "governance structure" use "committee organizational structure"
- (6) #5 - f.g. must confer w/ Susan Wood - will get back to me.

1/24/07 From Sue Jablonsky: No changes necessary

* DAK do analysis

-0904

1/18/07

From Sue Jablonsky:

Drafter's Note #5. Send Gov Exec Order to S.J.

✓ Change med care practitioners to health care providers

✓ Attach to DHFS, not DOA

✓ Delete Information Technology from title of council

→ 70372

Transmission Report

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State of Wisconsin

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Date: January 18, 2007 Time: 4:20

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Please Deliver This FAX To: Sue Jablonsky

Telephone Number: _____

FAX Number: 7-0372

MESSAGE: This is the Governor's Executive Order,
as promised.

Senders Name: Debra Kennedy

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Abbreviations:

HS: Host send
HR: Host receive
WS: Waiting send

PL: Polled local
PR: Polled remote
MS: Mailbox save

MP: Mailbox print
CP: Completed
FA: Fail

TU: Terminated by user
TS: Terminated by system
RP: Report

G3: Group 3
EC: Error Correct



State of Wisconsin
2007 - 2008 LEGISLATURE

LRB-0904/P1
DAK:jld:pg

LPS-request
sheet fixed

DOA:.....Johnston, BB0187 - Health Care Quality and Patient Safety
Information Technology Board Council

FOR 2007-09 BUDGET -- NOT READY FOR INTRODUCTION

don't gen

1 AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau

ADMINISTRATION

~~This is a preliminary draft. An analysis will be provided in a subsequent version.~~

✓
INSERT A

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

2 SECTION 1. 15.07 (2) (k) [✓] of the statutes is created to read:

3 15.07 (2) (k) The secretary of health and family services, or his or her designee,

4 shall serve as chairperson of the health care quality and patient safety [✓] ~~information~~

5 ~~technology board~~ and shall appoint chairpersons for subcommittees on patient care,

6 consumer interest and privacy, public health, and statewide health information

7 exchange and interoperability. [✓]

Council

15.197

health and family services

1 SECTION 2. ~~15.105~~ (6) of the statutes is created to read:

2 ~~15.105~~ (6) HEALTH CARE QUALITY AND PATIENT SAFETY INFORMATION TECHNOLOGY

COUNCIL

3 ~~BOARD~~. There is created a health care quality and patient safety information
4 ~~technology board~~, attached to the department of administration under s. 15.03. The
5 health care quality and patient safety information technology board shall consist of
6 the following members that, except for the members specified in pars. (a) to (c), are
7 appointed by the governor for 2-year terms:

- 8 (a) The secretary of administration or his or her designee.
- 9 (b) The secretary of health and family services or his or her designee.
- 10 (c) The secretary of employee trust funds or his or her designee.
- 11 (d) An employer who purchases health care for employees.
- 12 (e) A representative of the Wisconsin Health and Hospital Association.
- 13 (f) A physician, as defined in s. 448.01 (5).
- 14 (g) A representative of the health insurance industry.
- 15 (h) A representative of a major health care provider system.
- 16 (i) A health care consumer advocate.

146.75

17 SECTION 3. ~~16.015~~ of the statutes is created to read:

18 ~~16.015~~ Health care quality and patient safety information technology

Council

19 ~~board~~. (1) In this section:

146.75

20 (a) "American Health Information Community" means a panel that is advisory
21 on information technology to the federal department of health and human services.

22 (b) "Board" means the health care quality and patient safety information
23 technology board.

24 (2) The board shall lead implementation efforts for an action plan for health
25 care quality and patient safety by doing all of the following:

Council

Acting in an advisory capacity,

✓ INSERT 3-1

1 (a) Identifying strategies and actions necessary to extend health care
2 information systems statewide so as to optimize the improvement of health care
3 quality, safety, and efficiency within a reasonable period of time and with reasonable
4 financial investment. *a statewide* ✓

5 (b) Considering the most cost-effective means of implementing an integrated
6 or interoperable health care information system, including all of the following: ✓

7 1. Assessing the benefits of an integrated or interoperable system for
8 supporting rapid deployment of ~~medical care practitioners~~. *health providers* ✓

9 2. Promoting accurate and appropriate shared information about individual
10 patients among health care providers.

11 3. Creating points of reference for performance indicators among health care
12 provider organizations for organizational performance improvement.

13 4. Reporting to the public on health care quality, safety, and efficiency data for
14 consumer and purchaser decision making. *council* ✓

15 (3) The ~~board~~ shall advise the secretary of health and family services on all of
16 the following:

17 (a) A communication and marketing plan. *committee organizational*

18 (b) Annually, on recommendations to improve the ~~governance~~ structure of the
19 ~~board~~. *council* ✓

20 (c) The distribution of funding to entities to promote the health information
21 technology agenda of the governor.

22 (4) By January 1, 2008, and at least annually thereafter, the ~~board~~ shall report
23 to the legislature under s. 13.172 (3) and to the governor on the ~~board's~~ plans,
24 activities, accomplishments, and recommendations. *council's* ✓

council

1 (5) Any subcommittee of the ~~board~~ shall align its work with recommendations
2 of the American Health Information Community.

3 SECTION 9101. Nonstatutory provisions; Administration.

CS
COUNCIL

4 (1) HEALTH CARE QUALITY AND PATIENT SAFETY ~~INFORMATION TECHNOLOGY BOARD~~

5 MEMBERSHIP. Notwithstanding the length of terms specified in section ~~15.105~~ (6)

15.197

6 (intro.) of the statutes, as created by this act, the initial terms of the members

7 specified in section ~~15.105~~ (6) (d) to (f) of the statutes, as created by this act, shall

8 expire on ~~May~~ 1, 2009, and the initial terms of the members specified in section

9 ~~15.105~~ (6) (g) to (i) of the statutes, as created by this act, shall expire on ~~May~~ 1, 2011.

10 (END)

15.197

15.197 ✓

July

2007-2008 DRAFTING INSERT
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRB-0904/lins
DAK:jld:pg

INSERT A

HEALTH AND HUMAN SERVICES ✓

OTHER HEALTH AND HUMAN SERVICES ✓

This bill creates a health care quality and patient safety council, attached to DHFS, which must, among other things, consider the most cost-effective means of implementing a statewide integrated or interoperable health care information system. ✓

(end ins A)

INSERT 3-1

- 1 ~~NO~~ do all of the following:
- 2 1. Attempt to achieve goals established by the Institute of Medicine of the
- 3 National Academy of Sciences for health care that is safe, effective,
- 4 patient-centered, timely, efficient, and equitable.
- 5 2. ~~NO~~

1 In addition to all other powers granted by this chapter, subject to s. 231.035 the
2 authority may:

3 **SECTION 88.** 231.035 of the statutes is created to read:

4 **231.035 Health care quality and patient safety board approval.**

5 Beginning on the effective date of this section [revisor inserts date], the authority
6 may not provide any financial assistance to a health facility, hospital, or
7 participating health institution unless the health facility, hospital, or participating
8 health institution demonstrates to the health care quality and patient safety board
9 that it is making progress to improve medical information systems technology.

10 **SECTION 89.** 655.27 (6) of the statutes is amended to read:

11 655.27 (6) PURPOSE AND INTEGRITY OF FUND. The fund is established to ensure
12 the availability of health care providers in this state, to curb the rising costs of health
13 care by financing part of the liability incurred by health care providers as a result
14 of medical malpractice claims and to ensure that the needs of health care providers are

15 enable the
16 quality safe
17 net worth of
18 providers pa

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19 : satisfied, and to
20 y for health care
21], including any
22 t of health care

23 and for the deployment of
24 health care information systems technology for health care quality, safety, and
25 efficiency by the health care quality and patient safety board. Moneys in the fund
may not be used for any other purpose of the state.

22 **SECTION 9101. Nonstatutory provisions; administration.**

23 (1) HEALTH CARE QUALITY AND PATIENT SAFETY BOARD; INITIAL APPOINTMENTS.
24 Notwithstanding the length of terms specified in section 15.105 (13) (b) of the
25 statutes, as created by this act, the initial members of the health care quality and

1/25/07 From Sue Jablonsky

(Issue: As a Council, doesn't have author.
to approve financial assist. given by WHEFA)

Have council recommend to secy.

DAK: This doesn't work - WHEFA is
an authority.



Kennedy, Debora

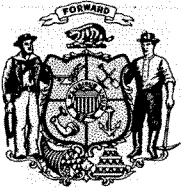
To: Jablonsky, Sue - DOA
Subject: LRB-0904

Sue, I'm confused by your instruction to "have the council recommend to the secretary." Which secretary? WHEFA is an authority. Do you mean that WHEFA should solicit the opinion of the council as to whether a health facility, hospital, or participating health institution that is applying for financial assistance is making progress to improve medical information systems technology and that the council must provide that advice? Would this (the advice by the council) be a factor that WHEFA must consider in deciding whether to provide the financial assistance?

Debora A. Kennedy

Managing Attorney
Legislative Reference Bureau
(608) 266-0137
debora.kennedy@legis.state.wi.us

*From Sue Jablonsky - advice by council
shd be a factor that Secy of DHS
must consider in deciding
whether WHEFA may provide
financial asstce.*



EARLY FRIDAY, if possible

State of Wisconsin
2007 - 2008 LEGISLATURE

LRB-0904/2

DAK:jld:awa

DOA:.....Johnston, BB0187 - Health Care Quality and Patient Safety Council

FOR 2007-09 BUDGET -- NOT READY FOR INTRODUCTION

don't gen

1 AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau

~~ADMINISTRATION~~

HEALTH AND HUMAN SERVICES

✓ OTHER HEALTH AND HUMAN SERVICES

head ↘

This bill creates a health care quality and patient safety council, attached to DHFS, which must, among other things, consider the most cost-effective means of implementing a statewide integrated or interoperable health care information system.

✓
INSERT
A

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

2 SECTION 1. 15.07 (2) (k) of the statutes is created to read:
3 15.07 (2) (k) The secretary of health and family services, or his or her designee,
4 shall serve as chairperson of the health care quality and patient safety council and
5 shall appoint chairpersons for subcommittees on patient care, consumer interest and

1 privacy, public health, and statewide health information exchange and
2 interoperability.

3 **SECTION 2.** 15.197 (6) of the statutes is created to read:

4 **15.197 (6) HEALTH CARE QUALITY AND PATIENT SAFETY COUNCIL.** There is created
5 a health care quality and patient safety council, attached to the department of health
6 and family services under s. 15.03. The health care quality and patient safety council
7 shall consist of the following members that, except for the members specified in pars.

8 (a) to (c), are appointed by the governor for 2-year terms:

9 (a) The secretary of administration or his or her designee.

10 (b) The secretary of health and family services or his or her designee.

11 (c) The secretary of employee trust funds or his or her designee.

12 (d) An employer who purchases health care for employees.

13 (e) A representative of the Wisconsin Health and Hospital Association.

14 (f) A physician, as defined in s. 448.01 (5).

15 (g) A representative of the health insurance industry.

16 (h) A representative of a major health care provider system.

17 (i) A health care consumer advocate.

18 **SECTION 3.** 146.75 of the statutes is created to read:

19 **146.75 Health care quality and patient safety council. (1)** In this section:

20 (a) "American Health Information Community" means a panel that is advisory
21 on information technology to the federal department of health and human services.

22 (b) "Council" means the health care quality and patient safety council.

23 **(2)** Acting in an advisory capacity, the council shall lead implementation efforts
24 for an action plan for health care quality and patient safety by doing all of the
25 following:

1 (a) Identifying strategies and actions necessary to do all of the following:

2 1. Attempt to achieve goals established by the Institute of Medicine of the
3 National Academy of Sciences for health care that is safe, effective,
4 patient-centered, timely, efficient, and equitable.

5 2. Extend health care information systems statewide so as to optimize the
6 improvement of health care quality, safety, and efficiency within a reasonable period
7 of time and with reasonable financial investment.

8 (b) Considering the most cost-effective means of implementing a statewide
9 integrated or interoperable health care information system, including all of the
10 following:

11 1. Assessing the benefits of an integrated or interoperable system for
12 supporting rapid deployment of health care providers.

13 2. Promoting accurate and appropriate shared information about individual
14 patients among health care providers.

15 3. Creating points of reference for performance indicators among health care
16 provider organizations for organizational performance improvement.

17 4. Reporting to the public on health care quality, safety, and efficiency data for
18 consumer and purchaser decision making.

19 (3) The council shall advise the secretary of health and family services on all
20 of the following:

21 (a) A communication and marketing plan.

22 (b) Annually, on recommendations to improve the committee organizational
23 structure of the council.

24 (c) The distribution of funding to entities to promote the health information
25 technology agenda of the governor.

✓
INSERT 3-25

1 (4) By January 1, 2008, and at least annually thereafter, the council shall
 2 report to the legislature under s. 13.172 (3) and to the governor on the council's plans,
 3 activities, accomplishments, and recommendations.

4 (5) Any subcommittee of the council shall align its work with recommendations
 5 ✓ of the American Health Information Community.

INSERT 4-5

6 **SECTION 9101. Nonstatutory provisions; Administration.**

7 (1) HEALTH CARE QUALITY AND PATIENT SAFETY COUNCIL MEMBERSHIP.

8 Notwithstanding the length of terms specified in section 15.197 (6) (intro.) of the
 9 statutes, as created by this act, the initial terms of the members specified in section
 10 15.197 (6) (d) to (f) of the statutes, as created by this act, shall expire on July 1, 2009,
 11 and the initial terms of the members specified in section 15.197 (6) (g) to (i) of the
 12 ✓ statutes, as created by this act, shall expire on July 1, 2011.

→ INSERT 4-12

(END)

13

✓
FE-S

✓
INSERT A

Under current law, the Wisconsin Health and Educational Facilities Authority (WHEFA) provides financial assistance to health facilities and participating health institutions. This bill prohibits WHEFA from providing such financial assistance unless the health facility or participating health institution seeking assistance demonstrates to the secretary of health and family services progress in improving medical information systems technology. In making a determination as to whether the progress is demonstrated, the secretary of health and family services must consider advice of the health care quality and patient safety council.

✓
INSERT 3-25

1 (d) Whether a health facility, as defined in s. 231.01 (5), or a participating
2 health institution, as defined in s. 231.01 (6), that seeks financial assistance from the
3 Wisconsin Health and Educational Facilities Authority under s. 231.03
4 demonstrates progress in improving medical information systems technology.

✓
INSERT 4-5

5 **SECTION 1.** 146.76 of the statutes is created to read:

6 **146.76 Approval of certain financial assistance.** The secretary shall
7 determine whether a health facility, as defined in s. 231.01 (5), or a participating
8 health institution, as defined in s. 231.01 (6), that seeks financial assistance from the
9 Wisconsin Health and Educational Facilities Authority under s. 231.03
10 demonstrates progress in improving medical information systems technology and
11 shall inform the Wisconsin Health and Educational Facilities Authority of his or her
12 determination. In making a determination under this section, the secretary shall
13 consider as a factor the advice of the health care quality and patient safety council,
14 as provided under s. 146.75 (3) (d).

15 **SECTION 2.** 231.03 (intro.) of the statutes is amended to read:

16 **231.03 Powers.** (intro.) The authority has all the powers necessary or
17 convenient to carry out and effectuate the purposes and provisions of this chapter.

↓

INS 4-5
CONT

1 In addition to all other powers granted by this chapter, subject to s. 231.035, the
2 authority may:

3 History: 1973 c. 304; 1975 c. 189; 1977 c. 29; 1977 c. 196 s. 131; 1979 c. 221; 1981 c. 20, 298; 1983 a. 27; 1985 a. 29 ss. 2112 to 2115, 3202 (24); 1987 a. 27, 69; 1989 a. 303; 1993 a. 124; 1995 a. 27 s. 9126 (19); 1995 a. 332; 1999 a. 120; 2001 a. 16, 38, 105, 109.

4 **SECTION 3.** 231.035 of the statutes is created to read:

5 **231.035 Approval by secretary of health and family services.** Beginning
6 on the effective date of this section ... [revisor inserts date], the authority shall
7 inform the secretary of health and family services of any health facility or
8 participating health institution that seeks financial assistance under s. 231.03. The
9 authority may not provide any financial assistance to such a health facility or
10 participating health institution unless the secretary of health and family services
11 determines, under s. 146.76, that the health facility or participating health
12 institution demonstrates progress in improving medical information systems
13 technology.

INSERT 4-12

14 **SECTION 9321. Initial applicability; Health and Family Services.**

15 (1) APPROVAL OF FINANCIAL ASSISTANCE. The treatment of sections 146.75 (3) (d),
16 146.76, 231.03 (intro.), and 231.035 of the statutes first applies to applications for
17 financial assistance made by a health facility or participating health institution
18 under ^{section} s. 231.03 of the statutes, as affected by this act, on the effective date of this
19 subsection.

(end ins 4-12)

Kennedy, Debora

To: Jablonsky, Sue - DOA
Subject: 07-0904 (E-Health Council)

Sent 1/26/07 9:23 a.m.

Sue--

On thinking it over, do you want a delayed effective date for the provisions related to approval by the sec'y of DHFS for WHEFA requests? If the secretary has to make the determination using as a factor the advice of the council (as I have drafted it), this won't be able to take effect until the council is up and operating. I've drafted the initial applicability that's in the /2 version (which applies to requests for WHEDA financial assistance on the effective date of the budget bill) to apply to applications for financial assistance made on the effective date of the budget bill, but that doesn't work well if the council is not up and running. If you want a delayed effective date, what would it be?

Debora

Debora A. Kennedy

Managing Attorney
Legislative Reference Bureau
(608) 266-0137
debora.kennedy@legis.state.wi.us

From S.J. 1/28: No



State of Wisconsin
2007 - 2008 LEGISLATURE

LRB-0904/2

DAK:jld:rs

DOA:.....Johnston, BB0187 - Health Care Quality and Patient Safety
Council

FOR 2007-09 BUDGET -- NOT READY FOR INTRODUCTION

1 AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau

HEALTH AND HUMAN SERVICES

OTHER HEALTH AND HUMAN SERVICES

This bill creates a health care quality and patient safety council, attached to DHFS, which must, among other things, consider the most cost-effective means of implementing a statewide integrated or interoperable health care information system.

Under current law, the Wisconsin Health and Educational Facilities Authority (WHEFA) provides financial assistance to health facilities and participating health institutions. This bill prohibits WHEFA from providing such financial assistance unless the health facility or participating health institution seeking assistance demonstrates to the secretary of health and family services progress in improving medical information systems technology. In making a determination as to whether the progress is demonstrated, the secretary of health and family services must consider advice of the health care quality and patient safety council.

For further information see the *state* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

1 **SECTION 1.** 15.07 (2) (k) of the statutes is created to read:

2 15.07 (2) (k) The secretary of health and family services, or his or her designee,
3 shall serve as chairperson of the health care quality and patient safety council and
4 shall appoint chairpersons for subcommittees on patient care, consumer interest and
5 privacy, public health, and statewide health information exchange and
6 interoperability.

7 **SECTION 2.** 15.197 (6) of the statutes is created to read:

8 15.197 (6) **HEALTH CARE QUALITY AND PATIENT SAFETY COUNCIL.** There is created
9 a health care quality and patient safety council, attached to the department of health
10 and family services under s. 15.03. The health care quality and patient safety council
11 shall consist of the following members that, except for the members specified in pars.
12 (a) to (c), are appointed by the governor for 2-year terms:

- 13 (a) The secretary of administration or his or her designee.
14 (b) The secretary of health and family services or his or her designee.
15 (c) The secretary of employee trust funds or his or her designee.
16 (d) An employer who purchases health care for employees.
17 (e) A representative of the Wisconsin Health and Hospital Association.
18 (f) A physician, as defined in s. 448.01 (5).
19 (g) A representative of the health insurance industry.
20 (h) A representative of a major health care provider system.
21 (i) A health care consumer advocate.

22 **SECTION 3.** 146.75 of the statutes is created to read:

23 **146.75 Health care quality and patient safety council. (1)** In this section:

- 24 (a) "American Health Information Community" means a panel that is advisory
25 on information technology to the federal department of health and human services.

1 (b) "Council" means the health care quality and patient safety council.

2 (2) Acting in an advisory capacity, the council shall lead implementation efforts
3 for an action plan for health care quality and patient safety by doing all of the
4 following:

5 (a) Identifying strategies and actions necessary to do all of the following:

6 1. Attempt to achieve goals established by the Institute of Medicine of the
7 National Academy of Sciences for health care that is safe, effective,
8 patient-centered, timely, efficient, and equitable.

9 2. Extend health care information systems statewide so as to optimize the
10 improvement of health care quality, safety, and efficiency within a reasonable period
11 of time and with reasonable financial investment.

12 (b) Considering the most cost-effective means of implementing a statewide
13 integrated or interoperable health care information system, including all of the
14 following:

15 1. Assessing the benefits of an integrated or interoperable system for
16 supporting rapid deployment of health care providers.

17 2. Promoting accurate and appropriate shared information about individual
18 patients among health care providers.

19 3. Creating points of reference for performance indicators among health care
20 provider organizations for organizational performance improvement.

21 4. Reporting to the public on health care quality, safety, and efficiency data for
22 consumer and purchaser decision making.

23 (3) The council shall advise the secretary on all of the following:

24 (a) A communication and marketing plan.

1 (b) Annually, on recommendations to improve the committee organizational
2 structure of the council.

3 (c) The distribution of funding to entities to promote the health information
4 technology agenda of the governor.

5 (d) Whether a health facility, as defined in s. 231.01 (5), or a participating
6 health institution, as defined in s. 231.01 (6), that seeks financial assistance from the
7 Wisconsin Health and Educational Facilities Authority under s. 231.03
8 demonstrates progress in improving medical information systems technology.

9 (4) By January 1, 2008, and at least annually thereafter, the council shall
10 report to the legislature under s. 13.172 (3) and to the governor on the council's plans,
11 activities, accomplishments, and recommendations.

12 (5) Any subcommittee of the council shall align its work with recommendations
13 of the American Health Information Community.

14 **SECTION 4.** 146.76 of the statutes is created to read:

15 **146.76 Approval of certain financial assistance.** The secretary shall
16 determine whether a health facility, as defined in s. 231.01 (5), or a participating
17 health institution, as defined in s. 231.01 (6), that seeks financial assistance from the
18 Wisconsin Health and Educational Facilities Authority under s. 231.03
19 demonstrates progress in improving medical information systems technology and
20 shall inform the Wisconsin Health and Educational Facilities Authority of his or her
21 determination. In making a determination under this section, the secretary shall
22 consider as a factor the advice of the health care quality and patient safety council,
23 as provided under s. 146.75 (3) (d).

24 **SECTION 5.** 231.03 (intro.) of the statutes is amended to read:

1 **231.03 Powers.** (intro.) The authority has all the powers necessary or
2 convenient to carry out and effectuate the purposes and provisions of this chapter.
3 In addition to all other powers granted by this chapter, subject to s. 231.035, the
4 authority may:

5 **SECTION 6.** 231.035 of the statutes is created to read:

6 **231.035 Approval by secretary of health and family services.** Beginning
7 on the effective date of this section ... [revisor inserts date], the authority shall
8 inform the secretary of health and family services of any health facility or
9 participating health institution that seeks financial assistance under s. 231.03. The
10 authority may not provide any financial assistance to such a health facility or
11 participating health institution unless the secretary of health and family services
12 determines, under s. 146.76, that the health facility or participating health
13 institution demonstrates progress in improving medical information systems
14 technology.

15 **SECTION 9101. Nonstatutory provisions; Administration.**

16 (1) HEALTH CARE QUALITY AND PATIENT SAFETY COUNCIL MEMBERSHIP.
17 Notwithstanding the length of terms specified in section 15.197 (6) (intro.) of the
18 statutes, as created by this act, the initial terms of the members specified in section
19 15.197 (6) (d) to (f) of the statutes, as created by this act, shall expire on July 1, 2009,
20 and the initial terms of the members specified in section 15.197 (6) (g) to (i) of the
21 statutes, as created by this act, shall expire on July 1, 2011.

22 **SECTION 9321. Initial applicability; Health and Family Services.**

23 (1) APPROVAL OF FINANCIAL ASSISTANCE. The treatment of sections 146.75 (3) (d),
24 146.76, 231.03 (intro.), and 231.035 of the statutes first applies to applications for
25 financial assistance made by a health facility or participating health institution

1 under section 231.03 of the statutes, as affected by this act, on the effective date of
2 this subsection.

3 (END)