Received By: tdodge

2009 DRAFTING REQUEST

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Received: 02/17/2010

Wanted: S	Soon				Identical to LR	B: 3911/2	
For: Jon 1	Richards (60	8) 266-0650			By/Representin	g: Jeff Kostelic	
This file r	nay be shown	to any legislator	r: NO		Drafter: tdodge	;	
May Cont	act: DHS Sen. Kr	eitlow			Addl. Drafters:		
Subject:	Health •	miscellaneous			Extra Copies:		
Submit vi	a email: YES						
Requester	's email:	Rep.Richar	ds@legis.wi	isconsin.gov	,		
Carbon co	opy (CC:) to:						
Pre Topi	c:					***************************************	······································
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Topic:							
Health inf	formation excl	nange corporation	on				
Instructi	ons:		· · · · · · · · · · · · · · · · · · ·				
See attach	ed. Companio	on bill to 3911/2					
Drafting	History:						
Vers.	Drafted	Reviewed	<u>Typed</u>	Proofed	Submitted	<u>Jacketed</u>	Required
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Received By: tdodge

2009 DRAFTING REQUEST

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Received: 02/17/2010

Wanted: S	Soon				Identical to LRB	3: 3911/2	
For: Jon Richards (608) 266-0650			By/Representing: Jeff Kostelic				
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2009 DRAFTING REQUEST

Bill

Received: 02/	17/2010		Received By: td	odge	
Wanted: Soon	1		Identical to LRB	: 3911/2	
For: Jon Rich	nards (608) 266-0650		By/Representing	: Jeff Kostelic	
This file may	be shown to any legislator: NO		Drafter: tdodge		
May Contact:	DHS Sen. Kreitlow		Addl. Drafters:		
Subject:	Health - miscellaneous		Extra Copies:		
Submit via en	nail: YES				
Requester's en	mail: Rep.Richards@legis.w	isconsin.gov	,		
Carbon copy ((CC:) to:				
Pre Topic:	W-0				
No specific pr	re topic given		·		
Topic:					
Health inform	ation exchange corporation				
Instructions:				-	
See attached.	Companion bill to 3911/2.				
Drafting Hist	tory:				
Vers. Dra	afted Reviewed Typed	Proofed	Submitted	<u>Jacketed</u>	Required
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FE Sent For:

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Dodge, Tamara

From:

Kostelic, Jeff

Sent:

Wednesday, February 17, 2010 9:10 AM

To:

Dodge, Tamara

Subject: RE: LRB 3911/2 HIE draft

Yes, Rep. Richards would like a companion draft. Thank you.

From: Dodge, Tamara

Sent: Wednesday, February 17, 2010 9:10 AM

To: Russell, Faith E - DHS; Kostelic, Jeff; Saxler, Charles; Buhrandt, Jeff

Subject: RE: LRB 3911/2 HIE draft

You're welcome.

Jeff Buhrandt and Charles, you should be able to jacket the draft for Senator Kreitlow if you would like. Jeff Kostelic, please let me know if Representative Richards wants the companion draft and I will get that out.

Tamara J. Dodge

Attorney
Wisconsin Legislative Reference Bureau
P.O. Box 2037
Madison, WI 53701-2037
(608) 267 - 7380
tamara.dodge@legis.wisconsin.gov

From: Russell, Faith E - DHS [mailto:Faith.Russell@dhs.wisconsin.gov]

Sent: Wednesday, February 17, 2010 9:01 AM

To: Dodge, Tamara

Cc: Kostelic, Jeff; Saxler, Charles; Buhrandt, Jeff; Currans-Sheehan, Rachel H - DHS; Webb, Denise B - DHS; Page,

Alice K - DHS

Subject: LRB 3911/2 HIE draft

Hi Tami.

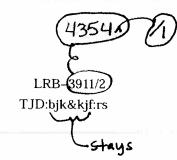
I just wanted to let you know that we all think the draft is ready. Thanks so much for all of your work and suggestions!

Faith Russell Policy Analyst Department of Health Services Office of Policy Initiatives and Budget 1 West Wilson, P.O. Box 7850 Madison, WI 53707-7850 608-266-7723



State of Misconsin 2009 - 2010 LEGISLATURE

In 2/17/10 Soon



2009 BILL

Companion on Changes

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regen.

AN ACT *to renumber and amend* 153.85, 153.86 and 153.90; *to amend* 20.435 (1) (hg), 146.37 (1g), 153.01 (intro.), 153.01 (4j) (b), 153.01 (8m), 153.05 (1) (b), 153.05 (2m) (a), 153.05 (2m) (b), 153.05 (2r) (intro.), 153.05 (2s), 153.05 (3) (a), 153.05 (3) (b), 153.05 (3) (c), 153.05 (8) (a), 153.05 (8) (b), 153.05 (9) (a), 153.05 (9) (b), 153.05 (9) (c), 153.455 (4), 153.50 (3) (b) (intro.), 153.50 (3) (c), 153.50 (3) (d), 153.50 (3m), 153.50 (5) (a) 4. b., 153.50 (6) (a), 153.50 (6) (b), 153.50 (6) (c) (intro.), 153.55, 153.60 (1), 153.75 (2) (a), 153.75 (2) (c) and 895.043 (2); and *to create* subchapter I (title) of chapter 153 [precedes 153.01], subchapter II (title) of chapter 153 [precedes 153.80], 153.80, 153.81 and 153.82 of the statutes; relating to: designation of a corporation to receive funding for electronic health information exchange, creation of a corporation, and making an appropriation.

Analysis by the Legislative Reference Bureau

Under current law, the federal Health Information Technology for Economic and Clinical Health Act (HITECH Act) regulates the exchange of health information

electronically. The HITECH Act allows the secretary of the U.S. Department of Health and Human Services to award grants to promote the exchange of health information electronically. A state may receive that grant itself or may designate a nonprofit corporation that meets certain criteria to apply for and receive the federal grants under the HITECH Act.

This bill allows the secretary of the Department of Health Services (DHS) to designate a nonprofit corporation as the entity to apply for and receive federal funding under the HITECH Act if the corporation meets all of the following criteria:

- 1. A purpose of the corporation, as written in its articles of incorporation or bylaws, is to use information technology to improve health care quality and efficiency through the authorized and secure electronic exchange and use of health information.
- 2. Annually, the corporation reports to the secretary on statewide health information exchange and how exchange efforts are enabling meaningful use of certified electronic health record technology, as defined in federal law.
- 3. The corporation complies with the requirements to be a qualified state–designated entity and to receive a grant under the HITECH Act.
- 4. The corporation's governing structure and bylaws allow it to consult and consider recommendations from outside entities, as specified under the HITECH Act.
- 5. The board of directors of the corporation includes as members the state health officer, the state Medical Assistance program director, and one person whom the governor selects. The board's members also include, with the goal of balancing public and private health sector interests, at least one individual representing each of the following categories: health care providers, health insurers or health plans, employers who purchase or self–insure employee health care, health care consumers or consumer advocates, and higher education.
- 6. The corporation agrees to fulfill purposes related to development and maintenance of electronic health information exchange.

DHS may make payments to a corporation to support health information exchange if the secretary of DHS determines that the corporation meets the same conditions as a corporation that is designated as the entity to apply for and receive federal funding under the HITECH Act.

The bill allows the secretary of DHS to organize and maintain a corporation for purposes related to the development and maintenance of electronic health information exchange. If the secretary organizes the corporation, the secretary must appoint as initial members the same categories of individuals as are required for a corporation to be designated to apply for and receive funding under the HITECH Act.

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

SECTION 1. 20.435 (1) (hg) of the statutes is amended to read:

20.435 **(1)** (hg) *General program operations; health care information.* The amounts in the schedule to fund the activities of the department of health services under ch. 153 and, to contract with the data organization under s. 153.05 (2r), and to make payments to a corporation under s. 153.81 to support health information exchange. The contract fees paid under s. 153.05 (6m) and assessments paid under s. 153.60 shall be credited to this appropriation account.

SECTION 2. 146.37 (1g) of the statutes, as affected by 2009 Wisconsin Act 113, is amended to read:

146.37 **(1g)** Except as provided in s. 153.85 153.76, no person acting in good faith who participates in the review or evaluation of the services of health care providers or facilities or the charges for such services conducted in connection with any program organized and operated to help improve the quality of health care, to avoid improper utilization of the services of health care providers or facilities or to determine the reasonable charges for such services, or who participates in the obtaining of health care information under <u>subch</u>. I of ch. 153, is liable for any civil damages as a result of any act or omission by such person in the course of such review or evaluation. Acts and omissions to which this subsection applies include, but are not limited to, acts or omissions by peer review committees or hospital governing bodies in censuring, reprimanding, limiting or revoking hospital staff privileges or notifying the medical examining board or podiatry affiliated credentialing board under s. 50.36 or taking any other disciplinary action against a health care provider or facility and acts or omissions by a medical director in reviewing the performance of emergency medical technicians or ambulance service providers.

1	Section 3. Subchapter I (title) of chapter 153 [precedes 153.01] of the statutes
2	is created to read:
3	CHAPTER 153
4	SUBCHAPTER I
5	INFORMATION COLLECTION AND
6	DISSEMINATION
7	Section 4. 153.01 (intro.) of the statutes is amended to read:
8	153.01 Definitions. (intro.) In this chapter <u>subchapter</u> :
9	Section 5. 153.01 (4j) (b) of the statutes is amended to read:
10	153.01 (4j) (b) Receives oversight with respect to services performed by the
11	entity under this chapter <u>subchapter</u> from the secretary of health services.
12	Section 6. 153.01 (8m) of the statutes is amended to read:
13	153.01 (8m) "Public health authority" means the department or a person
14	acting under this chapter <u>subchapter</u> under a grant of authority from or contract
15	with the department.
16	SECTION 7. 153.05 (1) (b) of the statutes is amended to read:
17	153.05 (1) (b) The entity under contract under sub. (2m) (a) shall collect from
18	hospitals and ambulatory surgery centers the health care information required of
19	hospitals and ambulatory surgery centers by the department under ch. 153, 2001
20	stats., and the rules promulgated under ch. 153, 2001 stats., including, by the date
21	"that is 18 months after the date of the contract under sub. (2m) (a), outpatient
22	hospital-based services. The entity shall analyze and disseminate that health care
23	information, as adjusted for case mix and severity, in the manner required under this
24	chapter subchapter, under ch. 153, 2001 stats., and under the rules promulgated
25	under ch. 153, 2001 stats., and in language that is understandable to laypersons.

Section 8. 153.05 (2m) (a) of the statutes is amended to read:

153.05 **(2m)** (a) Notwithstanding s. 16.75 (1), (2), and (3m), by the 2nd month after July 26, 2003, the department of administration shall, from the appropriation under s. 20.505 (1) (im), contract with an entity to perform services under this chapter subchapter that are specified for the entity with respect to the collection, analysis, and dissemination of health care information of hospitals and ambulatory surgery centers. The department of administration may not, by this contract, require from the entity any collection, analysis, or dissemination of health care information of hospitals and ambulatory surgery centers that is in addition to that required under this chapter subchapter.

Section 9. 153.05 (2m) (b) of the statutes is amended to read:

153.05 (2m) (b) Biennially, the group specified under s. 153.01 (4j) (b) shall review the entity's performance, including the timeliness and quality of the reports generated by the entity. If the group is dissatisfied with the entity's performance, the group may recommend to the department of administration that that department use a competitive request–for–proposal process to solicit offers from other organizations for performance of the services. If no organization responds to the request for proposal, the department of health services shall perform the services specified for the entity with respect to the collection, analysis, and dissemination of health care information of hospitals and ambulatory surgery centers under this chapter subchapter.

Section 10. 153.05 (2r) (intro.) of the statutes is amended to read:

153.05 **(2r)** (intro.) Notwithstanding s. 16.75 (1), (2), and (3m), from the appropriation account under s. 20.515 (1) (ut) the department of employee trust funds may expend up to \$150,000, and from the appropriation accounts under s.

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20.435 (1) (hg) and (hi) the department of health services, in its capacity as a public
health authority, may expend moneys, to contract with a data organization to
perform services under this chapter subchapter that are specified for the data
organization under sub. (1) (c) or, if s. 153.455 (4) applies, for the department of
health services to perform or contract for the performance of these services. As a
condition of the contract under this subsection, all of the following apply:

Section 11. 153.05 (2s) of the statutes is amended to read:

153.05 **(2s)** Annually, the department of health services and the department of employee trust funds shall jointly prepare and submit under s. 13.172 (3) to standing committees of the legislature with jurisdiction over health issues a report on the activities of the data organization under this chapter subchapter.

Section 12. 153.05 (3) (a) of the statutes is amended to read:

153.05 **(3)** (a) Upon request of the department for health care information relating to health care providers other than hospitals and ambulatory surgery centers and, if s. 153.455 (4) applies, for health care claims information as specified in sub. (1) (c), state agencies shall provide that information to the department for use in preparing reports under this chapter subchapter.

Section 13. 153.05 (3) (b) of the statutes is amended to read:

153.05 **(3)** (b) Upon request of the entity under contract under sub. (2m) (a) for health care information relating to hospitals and ambulatory surgery centers, state agencies shall provide that health care information to the entity for use in preparing reports under this chapter subchapter.

Section 14. 153.05 (3) (c) of the statutes is amended to read:

153.05 **(3)** (c) Upon request of the data organization under contract under sub. (2r) for health care claims information, insurers and administrators may provide the

health care claims information to the data organization for use in preparing reports and developing and maintaining a central data repository under this chapter subchapter, and, if s. 153.455 (4) applies, insurers and administrators may provide the health care claims information as requested by the department.

Section 15. 153.05 (8) (a) of the statutes is amended to read:

153.05 **(8)** (a) Unless sub. (13) applies, subject to s. 153.455, the department shall collect, analyze and disseminate, in language that is understandable to laypersons, claims information and other health care information, as adjusted for case mix and severity, under the provisions of this chapter subchapter, as determined by rules promulgated by the department, from health care providers, other than hospitals and ambulatory surgery centers, specified by rules promulgated by the department. Data from those health care providers may be obtained through sampling techniques in lieu of collection of data on all patient encounters and data collection procedures shall minimize unnecessary duplication and administrative burdens. If the department collects from health care plans data that is specific to health care providers other than hospitals and ambulatory surgery centers, the department shall attempt to avoid collecting the same data from those health care providers.

Section 16. 153.05 (8) (b) of the statutes is amended to read:

153.05 **(8)** (b) Unless sub. (13) applies, the entity under contract under sub. (2m) (a) shall collect, analyze, and disseminate, in language that is understandable to laypersons, claims information and other health care information, as adjusted for case mix and severity, under the provisions of this chapter subchapter, from hospitals and ambulatory surgery centers. Data from hospitals and ambulatory surgery centers may be obtained through sampling techniques in lieu of collection of data on

all patient encounters, and data collection procedures shall minimize unnecessary duplication and administrative burdens.

Section 17. 153.05 (9) (a) of the statutes is amended to read:

153.05 **(9)** (a) Subject to s. 153.455, the department shall provide orientation and training to health care providers, other than hospitals and ambulatory surgery centers, who submit data under this chapter subchapter, to explain the process of data collection and analysis and the procedures for data verification, comment, interpretation, and release.

Section 18. 153.05 (9) (b) of the statutes is amended to read:

153.05 **(9)** (b) The entity under contract under sub. (2m) (a) shall provide orientation and training to hospitals and ambulatory surgery centers that submit data under this chapter subchapter, to explain the process of data collection and analysis and the procedures for data verification, comment, interpretation, and release.

Section 19. 153.05 (9) (c) of the statutes is amended to read:

153.05 **(9)** (c) Subject to s. 153.455 (1) to (3), the data organization under contract under sub. (2r) shall provide orientation and training to insurers and administrators that submit data under this chapter subchapter, to explain the process of data collection and analysis and the procedures for data verification, comment, interpretation, and release. If s. 153.455 (4) applies, the department may perform or contract for the performance of the duties specified for the data organization under this paragraph.

Section 20. 153.455 (4) of the statutes is amended to read:

153.455 **(4)** If the contract with the data organization is terminated under sub. (3) and no organization responds to the request for proposals or a successor contract

cannot be achieved, the department, in its capacity as a public health authority, shall
collect health care information, including as specified under s. HFS 120.14 (1), Wis.
Adm. Code, in effect on April 13, 2006, and may request health care claims
information, which may be voluntarily provided by insurers or administrators,
under this chapter subchapter; shall analyze and disseminate, or contract for the
performance of analysis and dissemination of, the health care information; and may
analyze and disseminate, or may contract for the performance of analysis and
dissemination of, the health care claims information.
Section 21. 153.50 (3) (b) (intro.) of the statutes is amended to read:
153.50 (3) (b) (intro.) Remove and destroy all of the following data elements on
the uniform patient billing forms that are received by the department, the entity, or
the data organization under the requirements of this chapter subchapter:
Section 22. 153.50 (3) (c) of the statutes is amended to read:
153.50 (3) (c) Develop, for use by purchasers of data under this chapter
subchapter, a data use agreement that specifies data use restrictions, appropriate
uses of data and penalties for misuse of data, and notify prospective and current
purchasers of data of the appropriate uses.
Section 23. 153.50 (3) (d) of the statutes is amended to read:
153.50 (3) (d) Require that a purchaser of data under this chapter subchapter
sign and have notarized the data use agreement of the department, the entity, or the
data organization, as applicable.
Section 24. 153.50 (3m) of the statutes is amended to read:

153.50 (3m) Provider, administrator, or insurer measures to ensure patient

IDENTITY PROTECTION. A health care provider that is not a hospital or ambulatory

surgery center or an insurer or an administrator shall, before submitting

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requirements of this chapter subchapter:

Section 29. 153.55 of the statutes is amended to read:

information required by the department, or by the data organization under contract
under s. 153.05 (2r), under this chapter subchapter, convert to a payer category code
as specified by the department or the data organization, as applicable, any names of
an insured's payer or other insured's payer.
Section 25. 153.50 (5) (a) 4. b. of the statutes is amended to read:
153.50 (5) (a) 4. b. Any federal or state statutory requirement to uphold the
patient confidentiality provisions of this chapter subchapter or patient
confidentiality provisions that are more restrictive than those of this chapter
subchapter; or, if the latter evidence is inapplicable, an agreement, in writing, to
uphold the patient confidentiality provisions of this chapter <u>subchapter</u> .
Section 26. 153.50 (6) (a) of the statutes is amended to read:
153.50 (6) (a) The department or entity under contract under s. 153.05 (2m) (a)
may not require a health care provider submitting health care information under
this chapter subchapter to include the patient's name, street address or social
security number.
SECTION 27. 153.50 (6) (b) of the statutes is amended to read:
153.50 (6) (b) The department may not require under this chapter <u>subchapter</u>
a health care provider that is not a hospital or ambulatory surgery center to submit
uniform patient billing forms.
Section 28. 153.50 (6) (c) (intro.) of the statutes is amended to read:
153.50 (6) (c) (intro.) A health care provider that is not a hospital or ambulatory
surgery center may not submit any of the following to the department under the

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153.55 Protection of confidentiality. Data obtained under this chapter subchapter is not subject to inspection, copying or receipt under s. 19.35 (1).

Section 30. 153.60 (1) of the statutes is amended to read:

The department shall, by the first October 1 after the 153.60 **(1)** commencement of each fiscal year, estimate the total amount of expenditures under this chapter subchapter for the department for that fiscal year for data collection, database development and maintenance, generation of data files and standard reports, orientation and training provided under s. 153.05 (9) (a) and contracting with the data organization under s. 153.05 (2r). The department shall assess the estimated total amount for that fiscal year, less the estimated total amount to be received for purposes of administration of this chapter subchapter under s. 20.435 (1) (hi) during the fiscal year and the unencumbered balance of the amount received for purposes of administration of this chapter <u>subchapter</u> under s. 20.435 (1) (hi) from the prior fiscal year, to health care providers, other than hospitals and ambulatory surgery centers, who are in a class of health care providers from whom the department collects data under this chapter subchapter in a manner specified by the department by rule. The department shall work together with the department of regulation and licensing to develop a mechanism for collecting assessments from health care providers other than hospitals and ambulatory surgery centers. No health care provider that is not a facility may be assessed under this subsection an amount that exceeds \$75 per fiscal year. All payments of assessments shall be credited to the appropriation under s. 20.435 (1) (hg).

Section 31. 153.75 (2) (a) of the statutes is amended to read:

1	153.75 (2) (a) Exempting certain classes of health care providers that are not
2	hospitals or ambulatory surgery centers from providing all or portions of the data
3	required under this chapter <u>subchapter</u> .
4	SECTION 32. 153.75 (2) (c) of the statutes is amended to read:
5	153.75 (2) (c) Providing for the efficient collection, analysis and dissemination
6	of health care information which the department may require under this chapter
7	subchapter.
8	Section 33. Subchapter II (title) of chapter 153 [precedes 153.80] of the
9	statutes is created to read:
10	CHAPTER 153
11	. SUBCHAPTER II
12	ELECTRONIC HEALTH INFORMATION
13	EXCHANGE
14	Section 34. 153.80 of the statutes is created to read:
15	153.80 Definitions. In this subchapter:
16	(1) "Department" means the department of health services.
17	(2) "Health care provider" has the meaning given in s. 146.81 (1) and includes
18	an ambulatory surgery center, which has the meaning given for "ambulatory surgical
19	center" under 42 CFR 416.2.
20	(3) "Secretary" means the secretary of health services.
21	(4) "State-designated entity" means a nonprofit corporation designated by the
22	state as eligible to apply for and receive grants under 42 USC 300jj-33 from the
23	secretary of the U.S. department of health and human services.
24	SECTION 35. 153.81 of the statutes is created to read:

153.81 Requirements for designation and funding. (1) The state may
designate a nonprofit corporation that is incorporated under ch. 181 as the
state-designated entity only if the secretary determines that all of the following
conditions are satisfied:
(a) The articles of incorporation or bylaws of the corporation state that a
purpose of the corporation is to use information technology to improve health care
quality and efficiency through the authorized and secure electronic exchange and
use of health information.
(b) The corporation annually evaluates, analyzes, and reports to the secretary
on the progress toward implementing statewide health information exchange and
how the health information exchange efforts are enabling meaningful use of certified
electronic health record technology, as defined in 42 USC 300jj and by the U.S
department of health and human services by regulation, by health care providers.
(c) The corporation complies with the requirements to be a qualified
state-designated entity under 42 USC 300jj-33 (f) (2) to (5) and to receive a grant
under 42 USC 300jj-33.
(d) The governing structure and bylaws of the corporation allow it to consul-
and consider recommendations from all of the persons specified under 42 USC
300jj-33 (g) (1) to (10) in carrying out statewide health information exchange.
(e) The board of directors of the corporation includes all of the following
persons:
1. The state health officer, as defined under s. 250.01 (9), or his or her designee
2. The person who is appointed by the secretary to be the director of the Medica
Assistance program, or his or her designee.

3. One person who is specified by the governor, or his or her designee.

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protect the public interest.

1	4. One or more persons who represent each of the following such that the
2	representation of the public and private health sector is balanced in the board's
3	representation:
4	a. Health care providers.
5	b. Health insurers or health plans.
6	c. Employers who purchase or self-insure employee health care.
7	d. Health care consumers or consumer advocates.
8	e. Higher education.
9	(f) The corporation agrees to fulfill all of the following purposes:
10	1. Building substantial health information exchange capacity statewide to
11	support all of the following:
12	a. Health care providers' meaningful use of electronic health records.
13	b. Population health improvement.
14	c. Reporting of health care performance.
15	2. Developing policies and recommending legislation that advance efficient
16	statewide and interstate health information exchange and that protect consumer
17	privacy.
18	3. Developing or facilitating the creation of a statewide technical infrastructure
19	that supports statewide health information exchange and enables interoperability
20	among users of health information.
21	4. Coordinating between the Medical Assistance and public health programs
22	to enable information exchange and promote meaningful use of electronic health
23	records.
24	5. Providing oversight and accountability for health information exchange to

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6. Increasing public awareness of and support for statewide health information exchange and fostering agreement among health care providers and other users of health care information on an approach to statewide health information exchange. 7. Adopting standards for health information exchange in accordance with national standards, implementation protocols, and reporting requirements. 8. Prioritizing among health information exchange services according to the needs of the residents of this state. 9. Managing and sustaining funding necessary to develop and sustain statewide health information infrastructure and services. Conducting or overseeing health information exchange business and technical operations, including providing technical assistance to health information organizations and other health information exchanges. 11. Developing or facilitating the creation and use of shared directories and technical services, as applicable to statewide health information exchange. 12. Creating a model, uniform statewide patient consent and authorization process to allow electronic access to, review of, or disclosure of a patient's identifiable health care information. 13. Certifying regional health information exchange networks, if any, and confirming that any regional health information exchange network meets the criteria to participate in and connect to the statewide health information exchange network. 14. Monitoring health information technology and health information exchange efforts nationally and facilitating alignment of statewide, interstate, and national health information exchange strategies.

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1	15. Developing programs and initiatives to promote and advance health
2	information exchange to improve the safety, quality, and efficiency of health care and
3	to reduce waste due to redundancy and administrative costs.
4	(2) The department may make payments to a nonprofit corporation that is
5	incorporated under ch. 181 to support health information exchange if the secretary
6	determines that the conditions under sub. (1) are satisfied.
7	Section 36. 153.82 of the statutes is created to read:
8	153.82 Creation of corporation. (1) The secretary may organize and assist
9	in maintaining a nonstock, nonprofit corporation under ch. 181 for all of the purposes
10	specified under s. 153.81 (1) (f).
11	(2) If the secretary organizes a corporation under sub. (1), the secretary shall
12	appoint all of the individuals specified under s. 153.81 (1) (e) 1. to 4. as initial
13	directors of the board of the corporation.
14	(3) The assets and liabilities of the corporation under sub. (1) shall be separate
15	from all other assets and liabilities of the state, of all political subdivisions of the
16	state, and of the department. The state, any political subdivision of the state, and
17	the department do not guarantee any obligation of or have any obligation to the
18	corporation. The state, any political subdivision of the state, and the department are
19	not liable for any debt or liability of the corporation.
20	Section 37. 153.85 of the statutes is renumbered 153.76 and amended to read:
21	153.76 Civil liability. Except as provided in s. 153.86 153.77, any person
22	violating s. 153.50 or rules promulgated under s. 153.75 (1) (a) is liable to the patient

for actual damages and costs, plus exemplary damages of up to \$1,000 for a negligent

violation and up to \$5,000 for an intentional violation.

1	Section 38. 153.86 of the statutes is renumbered 153.77, and 153.77 (1)
2	(intro.), as renumbered, is amended to read:
3	153.77 (1) (intro.) A health care provider that submits information to the
4	department under this chapter subchapter is immune from civil liability for all of the
5	following:
6	Section 39. 153.90 of the statutes is renumbered 153.78, and 153.78 (2), as
7	renumbered, is amended to read:
8	153.78 (2) Any person who violates this chapter subchapter or any rule
9	promulgated under the authority of this chapter subchapter, except ss. 153.45 (5),
10	153.50 and 153.75 (1) (a), as provided in s. 153.85 <u>153.76</u> and sub. (1), shall forfeit
11	not more than \$100 for each violation. Each day of violation constitutes a separate
12	offense, except that no day in the period between the date on which a request for a
13	hearing is filed under s. 227.44 and the date of the conclusion of all administrative
14	and judicial proceedings arising out of a decision under this section constitutes a

Section 40. 895.043 (2) of the statutes is amended to read:

895.043 **(2)** Scope. This section does not apply to awards of double damages or treble damages, or to the award of exemplary damages under ss. 46.90 (9) (a) and (b), 51.30 (9), 51.61 (7), 55.043 (9m) (a) and (b), 103.96 (2), 134.93 (5), 146.84 (1) (b) and (bm), 153.85 153.76, 252.14 (4), 252.15 (8) (a), 610.70 (7) (b), 943.245 (2) and (3) and 943.51 (2) and (3).

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violation.

Dodge, Tamara

From:

Kostelic, Jeff

Sent:

Wednesday, February 17, 2010 9:24 AM

To: Subject:

Dodge, Tamara RE: LRB-3911 file

Feel free to insert the file for 3911 into our companion bill file. That would more accurately reflect the genesis of our request. Thanks.

From: Dodge, Tamara

Sent: Wednesday, February 17, 2010 9:21 AM

To: Kostelic, Jeff

Subject: RE: LRB-3911 file

I see my sentence ended up a bit jumbled. I am referring to the drafting file here at the LRB. This does not alter the jacket in any way. Since both your office and Sen. Kreitlow's office were in on the draft from the beginning, I would like to transfer a copy of the file of LRB-3911 that contains all the previous drafts and changes into the file for the companion. You are free to refuse inserting the copy of the file, and then the companion draft file will just contain the email that says that you want a companion draft.

Tami

Tamara J. Dodge

Attorney
Wisconsin Legislative Reference Bureau
P.O. Box 2037
Madison, WI 53701-2037
(608) 267 - 7380
tamara.dodge@legis.wisconsin.gov

From: Kostelic, Jeff

Sent: Wednesday, February 17, 2010 9:16 AM

To: Dodge, Tamara **Subject:** RE: LRB-3911 file

I'm not sure what that means. Is this just something that would go into your own internal file at the LRB or something that would go into the jacket itself?

From: Dodge, Tamara

Sent: Wednesday, February 17, 2010 9:14 AM

To: Kostelic, Jeff; Buhrandt, Jeff

Subject: LRB-3911 file

For Representative Richards' companion draft, I would like to insert a copy of the file for LRB-3911 into the copy for the companion draft. Please let me know if this is okay with each of your offices.

Tami

Tamara J. Dodge

Attorney
Wisconsin Legislative Reference Bureau
P.O. Box 2037
Madison, WI 53701-2037
(608) 267 - 7380
tamara.dodge@legis.wisconsin.gov

Dodge, Tamara

From:

Saxler, Charles

Sent:

Friday, February 19, 2010 11:55 AM

To:

Dodge, Tamara

Subject:

RE: LRB-3911 file

That's fine, thanks for letting me know.

Charlie

Charles Saxler
Office of Senator Pat Kreitlow
Wisconsin State Senate - 23rd District
Room 10 South - State Capitol
PO Box 7882
Madison, WI 53703-7882
Phone: 608-266-7511 or 888-437-9436
charles.saxler@legis.wisconsin.gov

From: Dodge, Tamara

Sent: Friday, February 19, 2010 11:51 AM

To: Buhrandt, Jeff; Saxler, Charles

Subject: FW: LRB-3911 file

I just wanted to make sure that your office received my email below. Please let me know if it is okay to make a copy of the drafting file for LRB-3911 to insert into the file for Representative Richards' companion draft. If you have any questions about this, please feel free to ask.

Tamara J. Dodge

Attorney
Wisconsin Legislative Reference Bureau
P.O. Box 2037
Madison, WI 53701-2037
(608) 267 - 7380
tamara.dodge@legis.wisconsin.gov

From: Dodge, Tamara

Sent: Wednesday, February 17, 2010 9:23 AM

To: Kostelic, Jeff; Buhrandt, Jeff **Subject:** FW: LRB-3911 file

I apologize that my sentence below is a bit jumbled. I would like to insert a copy of the file for LRB-3911 into the drafting file, which is kept here at the LRB, for the companion draft.

Tamara J. Dodge

Attorney
Wisconsin Legislative Reference Bureau
P.O. Box 2037
Madison, WI 53701-2037
(608) 267 - 7380
tamara.dodge@legis.wisconsin.gov

From: Dodge, Tamara

Sent: Wednesday, February 17, 2010, 9:14 AM

To: Kostelic, Jeff; Buhrandt, Jeff

Subject: LRB-3911 file

For Representative Richards' companion draft, I would like to insert a copy of the file for LRB-3911 into the copy for the companion draft. Please let me know if this is okay with each of your offices.

Tami

Tamara J. Dodge

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tamara.dodge@legis.wisconsin.gov

Parisi, Lori

From:

Sent:

Kostelic, Jeff Thursday, February 25, 2010 3:21 PM LRB.Legal

To:

Subject:

Draft Review: LRB 09-4354/1 Topic: Health information exchange corporation

Please Jacket LRB 09-4354/1 for the ASSEMBLY.