



Wisconsin Health Information Organization

December 2008

Goals of WHIO

- To aggregate health care data from sources across the State of Wisconsin to create a single reliable data source that can be used by multiple stakeholders to examine variations in efficiency, quality, safety and cost
- To improve the quality, cost, safety and efficiency of Wisconsin health care by sharing the results with providers, purchasers and consumers
- To support provider quality improvement initiatives
- To empower consumers to make value-based health care choices



WHIO Members

- Greater Milwaukee Business Foundation on Health
- Humana
- Employers Health Care Alliance Cooperative
- United Healthcare of Wisconsin
- Anthem Blue Cross Blue Shield of Wisconsin
- WEA Trust
- WPS Health Insurance
- Wisconsin Medical Society
- The Wisconsin Collaborative for Healthcare Quality
- Wisconsin Department of Health Services
- Wisconsin Department of Employee Trust Funds
- Wisconsin Hospital Association
- Group Health Cooperative South Central Wisconsin
- Health Tradition Health Plan



Progress Report

- 2005
 - Founding Members identified and committed to project
- 2006
 - Established Business Requirements and Rules of Engagement
 - Implemented RFP and selected Technology Partner
- 2007
 - Implemented Phase 0/Discovery Project
- 2008
 - Executed Ingenix Partnership Contract (March)
 - Executed State of Wisconsin Service Contract (April)
 - Finalized Data Use Agreement (November)
 - First Data Mart delivered (December 2)

Our Future Partners

- Organizations processing health care claims for WI residents and/or providers
 - Medicaid Program in 2009
 - Other Health Plans
 - TPAs
- Organizations processing clinical data for WI residents and/or providers
 - Labs
 - Pharma Companies
- Medicare



WHIO Data Mart Details

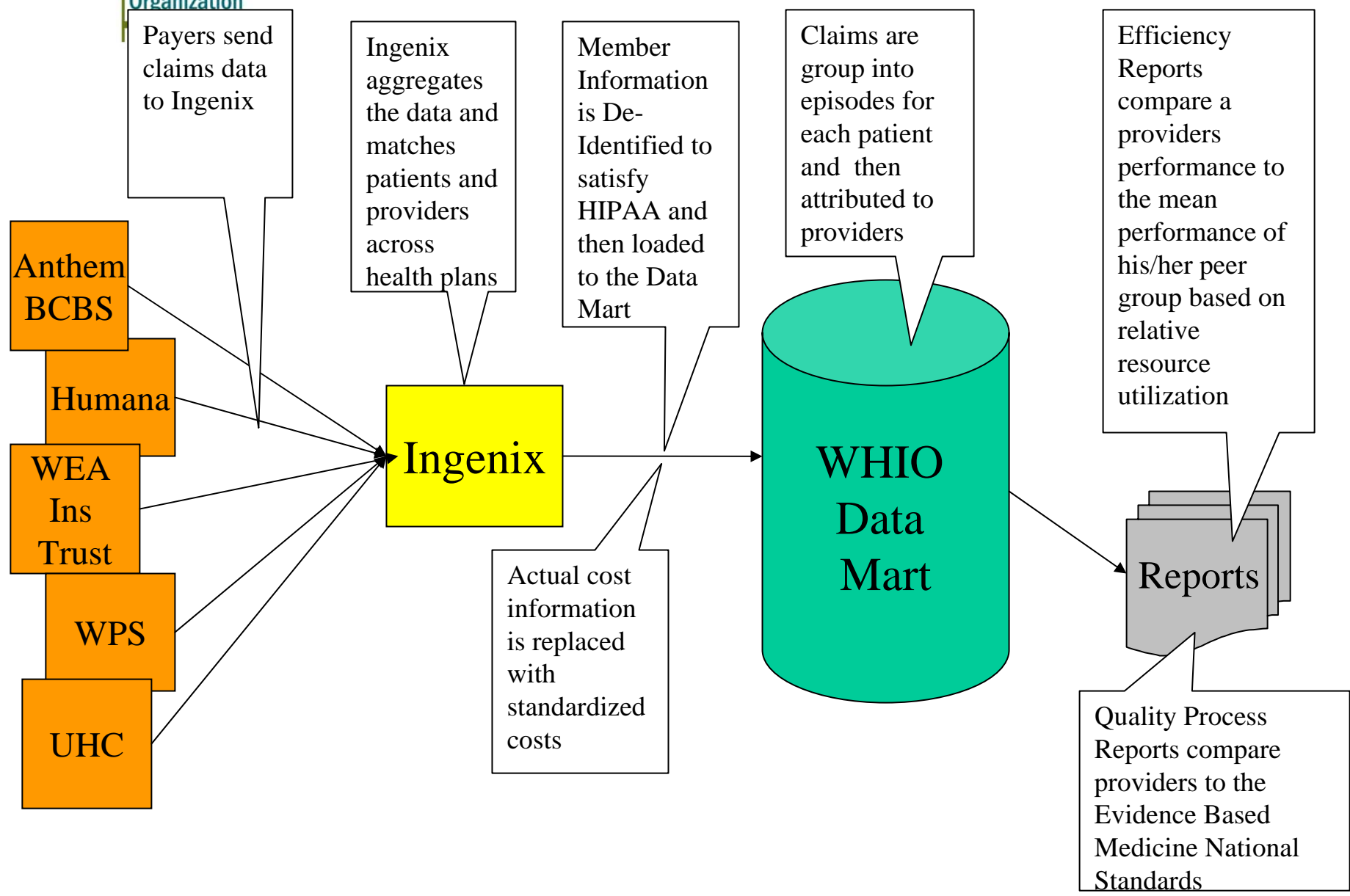
- Data Sources
 - Anthem BCBS
 - United Healthcare
 - Humana
 - WEA Trust
 - Wisconsin Physicians Service
- 27 months of member and claim data
 - January 2006 through March 2008
 - 1,615,613 unique members
 - 25,690 unique providers
 - 56 Million Claims
 - 6 Million Episodes of Treatment



WHIO Data Mart Details

- Payor, Employer and Member De-identified
 - Satisfies anti-trust and HIPAA privacy concerns
- Provider is identified to support comparative quality process and efficiency reporting
- Actual Charged or Billed amounts will be included. All other cost/price fields will filled using a standardized fee schedule

WHIO Data Build and Report Model



Payers send claims data to Ingenix

Ingenix aggregates the data and matches patients and providers across health plans

Member Information is De-Identified to satisfy HIPAA and then loaded to the Data Mart

Claims are group into episodes for each patient and then attributed to providers

Efficiency Reports compare a providers performance to the mean performance of his/her peer group based on relative resource utilization

Actual cost information is replaced with standardized costs

Quality Process Reports compare providers to the Evidence Based Medicine National Standards

Next Steps

- Strategic Initiatives:
 - Sustainable Revenue Model
 - New Member solicitation
 - Data Sales Strategy
 - Grant Identification and Application
- Tactical Deliverables:
 - Conduct Data Study during 1Q 2009
 - Pilot Efficiency Reports with selected provider groups
 - Identify any data gaps and defects
 - Design and build provider help desk and data reconsideration process
 - Begin data collection for second data mart (due June 2009)



Continue the Conversation

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