



# WIRED for Health

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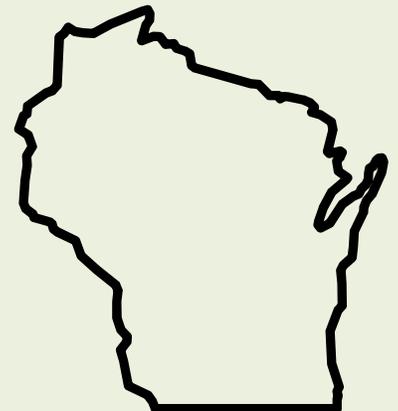
*Wisconsin's*

## Health Information Technology (HIT) Strategic and Operational Plan

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Executive Summary

Submitted – August 25, 2010  
Revised – December 16, 2010  
Approved – December 21, 2010



## Revision History

<b>REVISION HISTORY</b>		
<b>VERSION</b>	<b>DATE OF RELEASE</b>	<b>SUMMARY OF CHANGES</b>
V1	8/25/10	Initial submission
V2	1/12/11	Revised version incorporating selection of SDE-like governance entity, updated Finance section, and addition of Near-Term Implementation Plan

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## WISCONSIN RELAY OF ELECTRONIC DATA (WIRED) FOR HEALTH BOARD

*Co-Chair:* Stephen Brenton, Wisconsin Hospital Association

*Co-Chair:* Seth Foldy, MD, State of Wisconsin

Oskar Anderson, State of Wisconsin

Robert Carlson, MD, Marshfield Clinic

Mary Davis Michaud, Patient/Consumer Representative

Cheryl DeMars, The Alliance

John Foley, Anthem Blue Cross Blue Shield

Jeffrey Grossman, MD, UW Health

Jason Helgerson, State of Wisconsin

Norma Lang, UW Milwaukee College of Nursing

Gary Plank, Marshfield Clinic

Christopher Queram, Wisconsin Collaborative for Healthcare Quality

Tim Size, Rural Wisconsin Health Cooperative

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John Whitcomb, MD, Aurora Healthcare

Wisconsin State Health Information Technology (IT) Coordinator: Denise B. Webb

## **ACKNOWLEDGEMENTS**

The completion of Wisconsin's Health Information Technology (HIT) Strategic and Operational Plan was made possible through the generous contributions of several private and public organizations across Wisconsin. These organizations volunteered thousands of labor hours and contributed other in-kind resources. The State of Wisconsin greatly appreciates and thanks the WIRED for Health Board of Directors and the co-chairs, members, and staff of the Governance, Legal and Policy, Finance and Audit, Standards and Architecture, and the Communications, Education, and Marketing Committees for their time, effort, and dedication.

# FOREWORD

Wisconsin benefits from strong intellectual resources and a commitment to succeed in achieving statewide adoption and use of HIT and health information exchange (HIE) to enable improvements in the quality, safety, and efficiency of health care delivered in the state. The Wisconsin HIT Strategic and Operational Plan represents the collective efforts of multiple stakeholders and is an excellent example of the collaboration that exists between Wisconsin's public and private health and health care organizations.

This Plan describes the HIT and HIE goals and objectives Wisconsin aspires to achieve and the strategies and operational details on how Wisconsin proposes to accomplish the goals and objectives. The State acknowledges that the HIT and HIE landscape at the federal and state levels is evolving and that this is a living document requiring ongoing review, changes, and refinement. The federal Office of the National Coordinator (ONC) for HIT expects the State or State Designated Entity (SDE) to follow through on implementing this plan as described within this document.<sup>1</sup> The State's or, once selected, the SDE's governing board reserves the right to adjust the plan as necessary to meet environmental changes and/or evolving state and federal requirements, standards, and regulations. This could include changes to the vision, mission, guiding principles, goals, objectives, work plan, and timelines. The State, as the recipient of the State HIE Cooperative Agreement Program (CAP) grant award, will coordinate with and obtain approval from the ONC on any future changes to the plan and timelines in accordance with the program's terms and conditions.

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<sup>1</sup> The use of the term "should" in this plan equates to a recommended or proposed course of action.

## 1 EXECUTIVE SUMMARY

This is a plan to promote and improve the health of individuals and communities in Wisconsin through the development of health information exchange (HIE)—electronic sharing of the right health information at the right place and right time. It recognizes the important role electronic health information exchange plays in enabling transformation in the health care delivery system and health care reform in Wisconsin. Adopting and using health information technology (HIT) and sharing health information electronically is an essential building block for this transformation.

Better information, exchanged appropriately, will mean that patients get better care as their health care providers have access to previous services and the patient’s medical history. Better information will help clinical care providers improve their practice of medicine and help improve the health of individuals and communities in Wisconsin. Sustainability of this initiative will require stakeholder trust and buy in, security and privacy of data, and services that provide value.

The initiative’s success will be measured by the ability to enable:

- Lives to be saved and improvements in the health status of Wisconsin’s population through appropriate prevention, early intervention, and treatment
- A transformation of the health care sector that advances healthy cooperation and healthy competition among providers, with patients, payers and other partners contributing to better outcomes
- Improvement in the state’s economy and competitive position as the health care sector is transformed and health care investments result in higher quality, safer, cost-effective care

This document is Wisconsin’s plan for a public-private partnership to develop and advance information sharing across the health care system by creating the Statewide Health Information Network (SHIN). The *WIRED for Health: Health Information Technology Strategic and Operational Plan* is required to secure federal funding for planning and implementation activities spanning 4 years through the State Health Information Exchange Cooperative Agreement Program. This program is made possible by the Health Information Technology for Economic and Clinical Health Act (HITECH) of 2009, a part of the American Recovery and Reinvestment Act (ARRA).

According the federal House of Representatives’ Committees on Energy and Commerce, Ways and Means, and Science and Technology, the HITECH Act accomplishes four major goals that advance the use of health information technology, such as electronic health records (EHRs) and health information exchange, to help save lives and lower costs by:

*“The implementation of a state HIE plan is essential for Wisconsin to have a healthy population, a healthy business community, and a vibrant economy. All are now linked and inextricably linked. Whether discussing the benefits received by consumers or providers, I offer my own experience as a practicing emergency physician in an innovative and maturing HIE market, Milwaukee, as a testimony for why HIE will be a benefit. I see the positive impact HIE can and does have every day on the lives of those I serve in my emergency department. We have been leaders in innovation for others for years, it is now time we innovate for ourselves and reap the benefit of our mid-Western good common sense.”*

- John E. Whitcomb, MD  
*Milwaukee County Health Care Partnership  
and Milwaukee County Medical Society  
Milwaukee, WI*

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- Requiring the government to take a leadership role to develop standards by 2010 that allow for the nationwide electronic exchange and use of health information to improve quality and coordination of care
- Investing \$20 billion in health information technology infrastructure and Medicare and Medicaid incentives to encourage doctors and hospitals to use HIT to electronically exchange patients' health information
- Saving the government \$10 billion, and generating additional savings throughout the health sector, through improvements in quality of care and care coordination, and reductions in medical errors and duplicative care
- Strengthening Federal privacy and security law to protect identifiable health information from misuse as the health care sector increases use of health information technology

As a result of this legislation, the Congressional Budget Office estimates that approximately 90 percent (90%) of doctors and 70 percent (70%) of hospitals will be using comprehensive electronic health records within the next decade.

As part of the Cooperative Agreement, states must use their authority and resources to:

- Ensure an effective model for HIE governance and accountability is in place
- Convene health care stakeholders to build trust in and support for a statewide approach to HIE
- Coordinate with Medicaid and state public health programs to enable information exchange and support monitoring of provider participation in HIE
- Remove barriers that may hinder effective HIE, particularly those related to interoperability across laboratories, hospitals, clinician offices, health plans and other health information exchange partners
- Develop and implement up-to-date security and privacy requirements for HIE with and across state borders
- Develop state-level directories and technical services to enable interoperability within and across States

This is work of great importance for Wisconsin because our current health care system, despite high rankings in national surveys, too often gets poor results, and is more inefficient, costly, and error prone than it should be. Wisconsin's population health outcomes are mediocre on a number of measures including diabetes and obesity; infant and elder health; alcohol and tobacco use; and rates of physical activity. For example:

- Diabetes rates are high and increasing—it is the seventh leading cause of death in Wisconsin, costing an estimated

*“This HIT Strategic and Operational Plan establishes our starting point. We must now ensure a culture where HIE use and reuse by patients, clinicians, quality initiatives, public health, payers and countless other stakeholders is the standard of practice - within and beyond meaningful use definitions.”*

- Kim R. Pemble

*Executive Director*

*WI Health Information Exchange (WHIE)*

*Milwaukee, WI*

*“I have been involved in hundreds of healthcare IT projects and never has the benefit to patients and the health of the residents of Wisconsin been so clear to me.”*

- Will Weider

*Chief Information Officer*

*Ministry Health Care and Affinity Health System*

*Appleton, WI*

# WIRED FOR HEALTH: HIT STRATEGIC AND OPERATIONAL PLAN

## 1 EXECUTIVE SUMMARY

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annual \$5.26 billion in health care costs and lost productivity. This burden is higher among minority populations.

- Obesity rates are high and increasing—27 percent (27%) for adults and 13 percent (13%) for children as reported in the June 2010 report “F as in Fat: How Obesity Threatens America’s Future” from the Trust for America’s Health and the Robert Wood Johnson Foundation. Obesity contributes to several of the leading causes of death, including heart disease, stroke, diabetes, and some types of cancer. Wisconsin has the highest rate of obesity in the nation among blacks at 44 percent (44%).

In today’s health care system, health information is fragmented, often inaccessible and error prone. Patients, providers, public health authorities, and payers often make important decisions with inadequate information. Leveraging the potential of health information technology and exchange is a fundamental building block of a broader health system reform strategy. Electronic clinical data can help support public health interventions, disease management, quality improvement, provider performance measurement, epidemiological surveillance, and research. The intent is to use health information to achieve the right mix of prevention, primary care, acute care, and long-term care, creating the capacity to improve health care outcomes in a cost-effective manner over a multi-year period. The patient information that is now either missing, or sitting inside of health care records, some paper and some electronic, can be shared in the future in a way that promotes the public good while protecting patient privacy, enabling improvements in the health of individuals and communities in Wisconsin.

Using clinical data from EHRs for population health improvement is fundamental to health care reform. As a national leader in expanding health care access and improving health care quality, Wisconsin is in a position to measure the impact of preventive services and treatment for all people in a defined population area relative to the state’s health improvement goals. This will assist in filling gaps so population-level impact can be demonstrated. This statewide HIE will create the capacity for state policy makers in both the private and public sectors to harmonize and build on current efforts across Wisconsin on health care quality improvement, health IT, the state’s public health plan, and other related initiatives. It will support the translation and application of evidence-based practices and policies in public health, health care, and health system/financing strategies. This HIT plan positions Wisconsin to further the adoption of evidence-informed strategies in a collaborative way to achieve the goals of improved population health, improved patient care quality, and reduced costs.

Partnership development is a key element of health care transformation—the type of public, private partnership that is evidenced by this HIT plan. Wisconsin has a smart public health plan framework. State leadership works in partnership with a wide variety of health system stakeholders. Academic medical centers are forging new missions in population health improvement. Many interesting and energized collaborations are actively working to improve population health and reform health systems around the state. There are strong industry partners in the technology and health care sectors and a remarkable history of collaboration across private sector competitors and across the public and private sectors.

*“The high level of collaboration for the sole benefit of improving our clinician’s ability to deliver high quality care has been outstanding. It is clear that we have the infrastructure, expertise and willingness to do great things in Wisconsin. I fully anticipate in the coming years a dramatic shift in the efficiency and the quality of care from these efforts.”*

- David E. Lundal

*Vice President & Regional Chief*

*Information Officer*

*SSM Integrated Health Technologies,*

*WIITTS*

*Madison, WI*

# WIRED FOR HEALTH: HIT STRATEGIC AND OPERATIONAL PLAN

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The commitment, investment, and intellectual capacity brought to the work of the WIRED for Health Board by the health community are evidence that this plan has the kind of support that is needed for success. And the timing is excellent to launch this plan due to the new resources available to states through the HITECH Act and the health care reform law, including the availability of Medicare and Medicaid EHR incentive payments for meaningful use of electronic health records; alignment of the leadership, technical assets, and expertise that already exist in the state with the planning completed by the WIRED for Health Board; and significant progress on HIT plans and initiatives at the national level, including the Nationwide Health Information Network (NHIN).<sup>1</sup>

This plan was created under the leadership of the WIRED for Health Board, appointed by Governor Jim Doyle in 2009, along with hundreds of volunteers from across the public and private sectors. This work was informed by earlier eHealth planning conducted in Wisconsin from 2005 - 2009 by the eHealth Care Quality and Patient Safety Board; a project conducted from 2006 - 2008 to analyze state and federal privacy and security policies; the development of a regional health information exchange in Milwaukee called the Wisconsin Health Information Exchange; and the State-Level HIE (SLHIE) Planning and Design Project, initiated by the Wisconsin Department of Health Services in May 2009.

In 2010, Governor Doyle signed Wisconsin Act 274, authorizing the State to select a qualified nonprofit corporation to serve as the State Designated Entity (SDE) to govern statewide health information exchange. Following a competitive application process, the WIRED for Health Board recommended the Wisconsin State Health Information Network (WISHIN)<sup>2</sup>, Inc. for designation as the state-level HIE governing body to the Secretary of the Department of Health Services. WISHIN is a non-profit organization formed by the WHA, WMS, WCHQ, and WHIO. On October 25, 2010, the State officially announced its intention to designate WISHIN as the state-level governing organization that will assume the responsibilities of the current WIRED for Health Board, as well as the programmatic responsibilities of the State HIE CAP. The WIRED for Health Board and the lead state agency, the Department of Health Services, completed the planning and selection phase; and the Department is overseeing the transition of responsibilities to the SDE, the Wisconsin Statewide Health Information Network (WISHIN), Inc. The SDE will assume leadership for this initiative and oversee implementation of this plan for a statewide health information network and services. The plan requires multi-stakeholder collaboration and emphasizes ongoing development of governance and policy structures. The board that runs the SDE will have broad and balanced public and private stakeholder representation, including Medicaid, public health, hospitals, providers, commercial payers, employers, and consumers.

*“The WIRED for Health Project should serve as the prototype for all future state of Wisconsin projects. We have proven that we are blessed in Wisconsin with an impressive amount of intellectual capital that is a ready and capable resource to draw from. If organized and used correctly, magical things can happen.”*

- Peter Nohelty

*Chief Information Officer  
Hospital Sisters Health System (Western  
Wisconsin)*

*Eau Claire, WI*

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<sup>1</sup> The NHIN is being developed to provide a secure, nationwide, interoperable health information infrastructure that will connect providers, consumers, and others involved in supporting health and healthcare. The NHIN is a collection of standards, protocols, legal agreements, specifications, and services that enables secure exchange of health information over the Internet.

<sup>2</sup> All references to the WISHIN and the SDE in the Plan are interchangeable.

Its work will be guided by three overarching goals:

- By 2016, all ambulatory care providers and hospitals will have and use nationally certified EHR systems and HIE
- By 2020, all health care consumers, providers, and public health agencies will have access to nationally certified EHR systems and HIT
- By 2020, most patients, health care providers, and public health agencies will use electronic health records and information exchange to improve outcomes related to the effectiveness, quality, efficiency, and safety of health care and population health services

These goals guided the development of the detailed strategic and operational plan. This strategic and operational plan addresses HIT adoption and HIE development; governance; finance; technical infrastructure and services; implementation and operations; and legal and policy issues. There are complex and important issues to address in each of these areas.

### 1.1 HIT Adoption and HIE Development

Significant statewide adoption of HIT by health care providers, hospitals, long-term care and aging facilities, and public and tribal health departments is a prerequisite for comprehensive statewide health information exchange.

- Wisconsin has a significantly higher rate of EHR adoption among its ambulatory care providers and hospitals than the national average. Over 69 percent (69%) of practicing physicians in the state are in a group practice of 50 or more physicians and 60 percent (60%) are in practices of 100 or more physicians. The majority of these large group practices has either implemented or is in the process of implementing an EHR system.
- The Wisconsin federally qualified health centers (FQHCs) are in various stages of EHR adoption. Approximately 70 percent (70%) of community health centers are either meaningful users or currently selecting/implementing an EHR.
- Wisconsin hospitals are investing heavily in HIT to enable improvements in care coordination and support decision-making across the continuum of care. The Wisconsin Hospital Association recently conducted a survey to assess the extent of HIT adoption among the 128 acute-care hospitals in the state. Eighty-six percent (86%) have achieved a moderate, high, or very high level of HIT use.
- Local public health and tribal health departments provide a combination of direct patient care, care management, and population health services and use a variety of systems to support their programs. Over time, these systems have been engineered to share some electronic information and receive data from the state vital records system and electronic lab reporting system. Public health needs improved efficiency and systems that will support multiple patient-centered workflows for both patient care and business intelligence.

The newly created Wisconsin HIT Extension Center (WHITEC) will provide technical assistance to approximately 1,625 primary care providers in Wisconsin in their efforts to select, implement, and achieve meaningful use of certified EHR technology, including meeting the interoperability requirements for HIE. To assist WHITEC in its efforts and to help promote Medicaid provider adoption of HIT, the State Medicaid Program has provided initial information regarding providers who may require assistance in the acquisition or upgrade of certified EHR technology. WHITEC will be a primary communication

and outreach channel for the WIRED for Health Project for promoting statewide HIT and HIE adoption by providers.

## 1.2 Governance

The plan is to establish a permanent, state-level, nonprofit organization with both public and private membership that will govern statewide HIE by effectively executing the Wisconsin HIT Strategic and Operational Plan and fairly representing the needs of all consumers of health information. The SDE is expected to do so in a way that fosters transparency, buy-in, accountability, and trust. It will be responsible for reporting to the broader stakeholder community on performance measures through a focused communications, education, and marketing plan.

## 1.3 Finance

Planning efforts are underway to establish a business strategy and financial framework that addresses short-term capitalization and long-term sustainability. Initial capitalization will leverage the \$9.44 million federal grant that finances the work of the State HIE Cooperative Agreement Program. The goal is to develop the long-term financial strategy with broad stakeholder involvement and support.

Nationwide, sustainability is one of the most difficult issues in establishing HIEs. The funding that comes with the State HIE Cooperative Agreement Program is appropriated over 4 years, and requires an increasing amount of state match in years 2 to 4, which assumes that states will develop a path to sustainability by the end of the 4-year agreement.

Relying on voluntary support to finance the statewide health information network and HIE services presents multiple challenges, some of which may be unique to Wisconsin, including:

- **Localized Data Exchange:** Due to the high level of information technology adoption in health care in Wisconsin and the large proportion—over 69 percent (69%)—of its physicians practicing in large, independent group practices or IDNs, many of the physicians and hospitals have moved ahead with adopting and using EHRs and have made other significant health information technology investments, including investing in health information exchange within their organizations and local communities. The challenge this presents to sustainability is the need for the statewide health information network to demonstrate value beyond the benefits already being realized by health care provider organizations at the local level.
- **Capacity of Health Systems:** As a result of an environmental scan conducted in the summer of 2009, providers and health systems indicated that financial and human resource capacities are spread thin, especially in light of the current financial climate and competing demands for scarce resources. Therefore, the ability of health systems to undertake new projects will be limited even in light of the meaningful use requirements in federal law.
- **Trust:** A critical challenge facing all states as they work to implement HIE is the need to establish trust. Consumers and physicians alike must trust that the system will be easy to use, provide comprehensive, reliable information on which to base critical health care decisions at the point of care, and that the appropriate privacy and security policies are in place.

The eHealth Initiative, an independent national organization whose mission is to drive improvements in the quality, safety, and efficiency of health care through information and information technology, reports that across the country, there are now a number of HIE initiatives that are sustainable financially. These

organizations were not dependent upon federal funding in the last fiscal year and broke even through operational revenue alone. The lessons learned from these organizations about services offered, financing mechanisms, and funding sources will be of great value in the development of the business plan for the Wisconsin statewide health information network and HIE services.

### 1.4 Standards and Architecture

The goal is to develop a scalable, standards-based technical architecture for statewide HIE that supports interoperability and leverages existing investments in health IT. The expectation is that by 2020, the statewide health information network and HIE services will reach all geographies and providers across the State and be able to continuously receive, access, and transmit health information among health systems.

The work on standards and architecture focuses on defining a path to successful adoption and use of such an exchange, recognizing that success depends upon support and use by key Wisconsin stakeholders, and that some stakeholders already have small-to-medium scale HIEs functioning within their respective organizations or medical trading area. The proposed architecture recognizes this and accounts for existing assets as a way to accelerate the adoption and use of services.

The SLHIE Planning and Design Project documented the independent HIE-related initiatives currently being executed at local levels throughout Wisconsin. It is anticipated that the statewide health information network in Wisconsin will incorporate the concept of a “network of networks” in use by the NHIN. The evolving NHIN approach to building and maintaining trust among an expanding pool of users will serve as an important resource during implementation of a statewide health information network and HIE services. The SDE will be responsible for ensuring that statewide HIE in Wisconsin aligns with the developing nationwide HIE governance models.

Wisconsin recognizes the need for both a broad, long-term strategy and a more specific, near-term strategy for supporting health information exchange throughout the state. To help providers meet Stage 1 meaningful use requirements, WISHIN will work with the Wisconsin Health Information Exchange (WHIE) to develop the near-term infrastructure that leverages the specifications and protocols developed through the Direct Project and provide technical support and assistance for connecting via Direct to support both lab results delivery and clinical summary exchange to providers not currently affiliated with an existing exchange network.

### 1.5 Privacy and Security

Safeguarding patient privacy through strong security are top priorities for statewide HIE in Wisconsin.

Security and privacy strategies, policies, and procedures will be developed incrementally over time along with business, technical, and operational policies and procedures. This requires balancing a patient’s right to privacy with a provider’s need to access health information to provide optimal and cost effective care.

Widespread participation in health information exchange systems by providers and patients will not occur unless they know that information on the health information exchange system is secure. Thus, the health information exchange infrastructure must have strong security mechanisms to protect against inappropriate use of patient information. At a minimum, the exchange infrastructure will follow the HIPAA security standards for electronic transactions and the operator will identify and follow any additional established security best practices for health information exchange.

# WIRED FOR HEALTH: HIT STRATEGIC AND OPERATIONAL PLAN

## 1 EXECUTIVE SUMMARY

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Significant issues related to the privacy and security framework that need to be resolved during implementation include:

- Creating new procedures for requesting an “opt out” from the statewide health information network that is easy for the patient to understand and use
- Resolving and harmonizing policies for privacy and security with federal requirements and with other states, especially Minnesota, Iowa, Illinois, and Michigan

Strong mechanisms must be in place to ensure patient information is not inappropriately used or accessed to the detriment of the patient. Inappropriate use of patient information can be prevented using a combination of security measures and privacy measures. Security measures include administrative, technical, and physical safeguards designed to prospectively protect information from being misused, such as firewalls and data encryption, or to retrospectively deter and identify misuse, such as electronic audit trails. Privacy measures include procedural standards to protect information. Some privacy procedures, such as consent requirements, are intended to prospectively protect information from being misused by limiting access to information, while other privacy procedures, such as breach notification requirements and disclosure accounting requirements, are intended to retrospectively deter and identify misuse.

In July 2010, the national eHealth Initiative assessed progress on HIT and HIE over the past 3 years and published “*The State of Health Information in 2010: Connecting the Nation to Achieve Meaningful Use.*” The report notes the changes in the overall health care market, the economy, and the state of technology available to health professionals and consumers and the impact on the current landscape. Key findings of the report include the significant impact of the HITECH Act, as it provides both a policy foundation and funding for developments in the states; the need for more education and outreach to consumers about HIT and HIE; the vital importance of privacy and security policies as the key to building consumer trust of HIT and HIE; the continuing need to build consensus on strategies that support the value case of HIE for population health; and the continuing need for business models that are sustainable and support transformation of care delivery.

In December 2006, Wisconsin’s *eHealth Action Plan* set out the policies for statewide use of health IT as a means to save lives, improve the health status of the people of Wisconsin and receive a better return on investment in health care. It was a plan about improving the health system, measured by its success in improving health care to individuals and population health. It set out three strategies to do this:

- Creation of the eHealth technology platform, consisting of HIT adoption, regional health information exchange, and statewide HIE services
- Use of value-based purchasing policies and actions
- Linking HIT and HIE plans to prevention and disease management activities

This *WIRED for Health: Health Information Technology Strategic and Operational Plan* moves Wisconsin on to the next generation of activities to improve population health. It provides both long- and short-term goals and an implementation plan that will establish the eHealth technology platform, setting the foundation for implementation of health care reform and population health improvement strategies over the period 2010 – 2014.