



WISCONSIN DEPARTMENT
of HEALTH SERVICES

State of Wisconsin Medicaid Health Information Plan: Health Information Technology Roadmap



CONTENTS

1.	Introduction	1
2.	Health IT Goals and Impact.....	2
2.1	Aligning Health IT Projects to DMS Goals	2
2.1.1	Greater Member Care	2
2.1.2	Managed Care Accountability	3
2.1.3	Improving Quality Outcomes.....	3
3.	Health IT Roadmap	5
3.1	Roadmap	6
3.2	HIE Governance.....	7
3.3	DHS/DMS Four Future Initiatives.....	7
3.3.1	Promote HIE Participation	7
3.3.2	Integrating LTC and Dental Data to WISHIN	8
3.3.3	Coordinating between Community Information Exchanges and WISHIN.....	8
3.3.4	Dual Eligible Special Needs Plans (D-SNPs) Participation in WISHIN	8

1. INTRODUCTION

The eHealth team, a section of the Division of Medicaid Services (DMS) within the Wisconsin Department of Health Services (DHS), conducted an assessment of the Medicaid health information technology (health IT) landscape to inform and guide DMS's future-state vision for health IT. This roadmap includes the health IT goals and objectives that DMS plans to achieve over the next five years, along with current and future programs that align with the state's health IT vision and goals. This assessment is a component of the final State Medicaid Health IT Plan (SMHP) required by the Centers for Medicare & Medicaid Services.

2. HEALTH INFORMATION TECHNOLOGY GOALS AND IMPACT

2.1 Aligning Health Information Technology Projects to Division of Medicaid Services Goals

The successful execution of the Health IT Roadmap delivers on DMS strategic goals. Encouraging electronic health record (EHR) adoption, enabling meaningful use, and promoting health information exchange (HIE) to improve health outcomes are all steps that lead to:

- Greater member care.
- Managed care accountability.
- Improving quality outcomes.

The aforementioned goals remain intact for the next five years as DMS seeks to create a seamless service delivery system that is equitable, person-centered, culturally competent, simple to understand, and easy to navigate. DMS's mission to improve lives through high value programs and services that increase well-being and promote independence continues to guide its decision-making process.

2.1.1 Greater Member Care

Providing greater member care to all Wisconsin Medicaid members remains a top DMS priority. To further deliver on this goal, DMS works to ensure Medicaid providers administer health care services that are trustworthy, safe, and reliable while also prioritizing patient needs.

Ongoing and upcoming DHS projects illustrate the investment in health IT for greater member care, such as DHS's Telehealth Expansion project. The Telehealth Expansion project works to expand coverage options and leverage new and expanding health IT capabilities, such as increased access to virtual care to provide a wider range of health services across the state. DHS is also leading the Newborn Screening Data System project to establish a comprehensive system that will collect Wisconsin newborn health screening data. The objective of the project is to create a centralized data repository to improve the quality of care received by infants and their families who participate in Wisconsin Medicaid. Increased data collection and integration accounts for improved data analytic capabilities that allow for greater care delivery as gaps in care are thoroughly identified. Patients are better served as providers have a full picture of their patients' health at the point of care.

Additional DMS projects¹ that contribute to the goal of greater member care include:

- Wisconsin Housing Support Coordination Project
- HMO Selection and Enrollment Tool
- ACCESS Modernization
- MyACCESS Enhancements

¹ Detailed descriptions of projects can be found in Section 3: To-Be Landscape Assessment.

- HMO Align Dual Eligible Special Needs Plans (D-SNPs) with Medicaid
- Interoperability and Patient Access application programming interfaces (API) Implementation
- Supplemental Security Income (SSI) Care Management
- Hub and Spoke (H&S) Integrated Recovery Services

2.1.2 Managed Care Accountability

DMS is committed to ensuring that care delivered via managed care is high quality. Managed care accountability is at the forefront of DMS's strategic goals to continue to improve upon and evaluate the accessibility of care, especially as it connects to the quality of care provided and its impact on a Medicaid member's health and well-being. Furthermore, DMS seeks to utilize health IT systems to facilitate the effective reporting on quality and safety in DMS programs and services and monitor performance. DMS also promotes opportunities to use technology to reduce access barriers and better coordinate appropriate care such as utilizing HIEs and data repositories to capture the overall picture of a patient's health. DMS is engaged in the following projects² to advance managed care accountability:

- Medicaid Managed Care Final Rule Analysis and Implementation
- SSI Care Management Initiative
- H&S Integrated Recovery Services

Establishing accountability measures for the quality of care provided by managed care organizations fosters a safer health system and mitigates unnecessary risk as plans are accountable for the care provided under their networks.

2.1.3 Improving Quality Outcomes

Improving the quality of health care services to better health outcomes of Medicaid members is a key DMS goal. DMS encourages Medicaid providers' utilization of health IT and increasing the types and quantity of data collected on members. This increases DMS' ability to evaluate their members' health and well-being and analyze data to identify existing gaps in care to work toward an equitable care system.

The State Facility EHR System project is an example of a project that is currently working to improve quality outcomes. The project captures critical patient care data across all seven DHS institutions, increases efficiencies among staff, standardizes common processes, and creates an electronic medical record for each patient. Allowing for efficient data sharing between providers creates opportunities to measure patient outcomes through improved data analytics that assist DHS in improving the quality of patient care. Additional DMS projects³ that contribute to the goal of improving quality outcomes are listed below:

- Quality Strategy
- Bureau of Children's Services Racial Health Equity Initiative
- HMO Equity Medicaid Enterprise Systems Project

² Detailed descriptions of projects can be found in Section 3: To-Be Landscape Assessment.

³ Detailed descriptions of projects can be found in Section 3: To-Be Landscape Assessment.

- Medicaid Promoting Interoperability Program Administration and Closeout
- SSI Care Management
- H&S Integrated Recovery Services

These efforts include prioritizing the creation and maintenance of an equitable health care system that serves all Medicaid members with consideration to race, ethnicity, gender, and other key factors.

3. HEALTH INFORMATION TECHNOLOGY ROADMAP

This section provides a visual representation of the roadmap for the projects described in the previous section. The projects include ongoing planning efforts that were initiated in 2021 and extend into the following years. Not all projects listed below are in the To-Be Landscape Assessment as they are future-facing programs. DMS will work collaboratively with key stakeholders to ensure the success of these programs and deliver on outcomes. The Health IT Roadmap will continue to evolve as DMS goals guide the prioritization of future health IT and HIE initiatives.

All projects shown in the graphic below are further described in Section 3: To-Be Landscape Assessment.

3.1 Roadmap



Figure 3.0: Wisconsin DMS Health IT Roadmap

3.2 Health Information Exchange Governance

At the time of this writing, the Wisconsin Statewide Health Information Network (WISHIN) is working on its strategic roadmap, which is projected to be made available in winter of 2021.

HIE governance structures within WISHIN will be retained, this structure includes a DMS representative that fulfills the functionalities of a health IT coordinator, including serving on the WISHIN board. DMS recognizes the vital importance of an HIE to achieve program goals and has identified potential avenues of exploration to incentivize expanded participation, which is further discussed in the latter part of this document.

3.3 Department of Health Services/Division of Medicaid Services Future Initiatives

Building and supporting a strong HIE is imperative to achieve the health IT priorities set forth by DMS. DMS remains committed to building HIE capacity within Wisconsin and has outlined priorities for the next five years as follows:

- Incentivize managed care plans and providers to participate in WISHIN through pay for performance payments.
- Explore how DMS can further support efforts to expand the integration of dental and long-term care (LTC) data in WISHIN/HIEs to support person-centered care.
- Support coordination between Community Information Exchanges (CIE) and WISHIN with the goal of diversifying the data available for care teams to include information on an individual's social needs. This additional data provides unique insight into the individual thus supporting the goal of better person-centered care.
- Require WISHIN participation for [D-SNPs](#).⁴

3.3.1 Promote Health Information Exchange Participation

The initial implementation cost of participating in an HIE was a noted barrier among stakeholders as identified in the environmental scan. To best support the larger goal of EHR adoption and utilization, as well as increase participation in an HIE, DMS is committed to exploring potential avenues that would curtail the initial financial burden of participation. One such way is to incentivize plans and providers through pay for performance models to participate in WISHIN. The grander idea here is to incentivize, rather than penalize, through pay for performance and/or adjusted capitation rates for health plans. This strategy aligns with the current state of Medicaid service delivery in Wisconsin as the majority of members receive their services through a managed care health plan. Managed care plans have considerable influence on the providers in their networks for quality improvement efforts; therefore, DMS plans to seize the opportunity to leverage this influence to promote further WISHIN participation by Wisconsin providers.

⁴ D-SNPs include individuals who are entitled to both Medicare and medical assistance from a state plan under Medicaid. Depending on eligibility, the state generally covers some of the member's Medicare costs.

3.3.2 Integrating Long-Term Care and Dental Data to Wisconsin Statewide Health Information Network

The need for improved LTC and dental data integration within WISHIN and other HIEs was a noted challenge identified in the environmental scan. DMS recognizes the importance of better data integration and its impact on DMS's person-centered goals. DMS is committed to exploring the further integration of LTC and dental data into WISHIN; however, it is worth noting the integration of dental data with physical health data is a national challenge due to coding differences between the two data sets. DMS will continue monitoring federal efforts to circumvent this challenge and create a viable level of standardization.

3.3.3 Coordinating Between Community Information Exchanges and Wisconsin Statewide Health Information Network

Addressing members' social determinants of health (SDoH) needs is a key component of DMS's vision for the future as insight into a member's SDoH needs is essential for true person-centered care. Within Wisconsin, DMS recognizes the importance of CIEs and their role in helping care teams address a member's SDoH needs. While HIEs, such as WISHIN, focus on gathering health data from health care providers across the care continuum, CIEs focus on gathering and sharing information on community supports available to address social service needs such as housing and food insecurity. DMS supports continued collaboration between WISHIN and CIEs across the state to further efforts to integrate social needs data and resources with clinical data to achieve a more seamless system for referrals to appropriate social services. Such a system is critical to achieving a health system that is equitable, diverse, and inclusive.

Integrating community level data, especially data from social service providers (for example, non-profit groups), advances efforts to address issues around SDoH and health disparities. This promotes a culture of inclusion where Wisconsinites, regardless of their race, ethnicity, or orientation, receive appropriate and high-quality care. Coordination at the community level further informs and refines response systems to better deliver on patient care. The continued collaboration between CIEs and WISHIN will bolster efforts to improve quality outcomes as well, given that an individual's social needs have a large impact on one's overall health.

3.3.4 Dual Eligible Special Needs Plans Participation in Wisconsin Statewide Health Information Network

D-SNPs enroll individuals who qualify for both Medicare and medical assistance from a state plan under Medicaid. Depending on the member's personal eligibility, the state generally covers some of the member's Medicare costs. The integration of D-SNPs medical data with WISHIN works to further deliver on DMS' person-centered care goals as it allows providers to view a more thorough health record of their D-SNP patient at the point of care. The coordination between Medicare and Medicaid is an important step in achieving whole person care as members benefit from a system that integrates their data across providers. Streamlining systems through WISHIN promotes better care delivery and care coordination.