



THE COMMUNITY HEALTH RECORD IS HERE

NABP/AACP
District IV
Annual Meeting

- What is WISHIN?/WISHIN History
- Products
- What's Driving Adoption
- Barriers to Adoption
- Where We Stand Now
- Legal/Policy Issues
- The Future of the Network and WISHIN's Services
- Questions

- An independent non-profit organization, founded by WHA, WI Medical Society, WHIO, WCHQ.
- Dedicated to bringing the benefits of widespread, secure, interoperable health information technology to patients and caregivers throughout Wisconsin.
- WISHIN is building a statewide health information network to connect physicians, clinics, hospitals, pharmacies, and clinical laboratories across Wisconsin.
- Vision: Ubiquitous, Vendor-Agnostic Electronic Health Information Exchange
- Fifteen member, multi-stakeholder board.



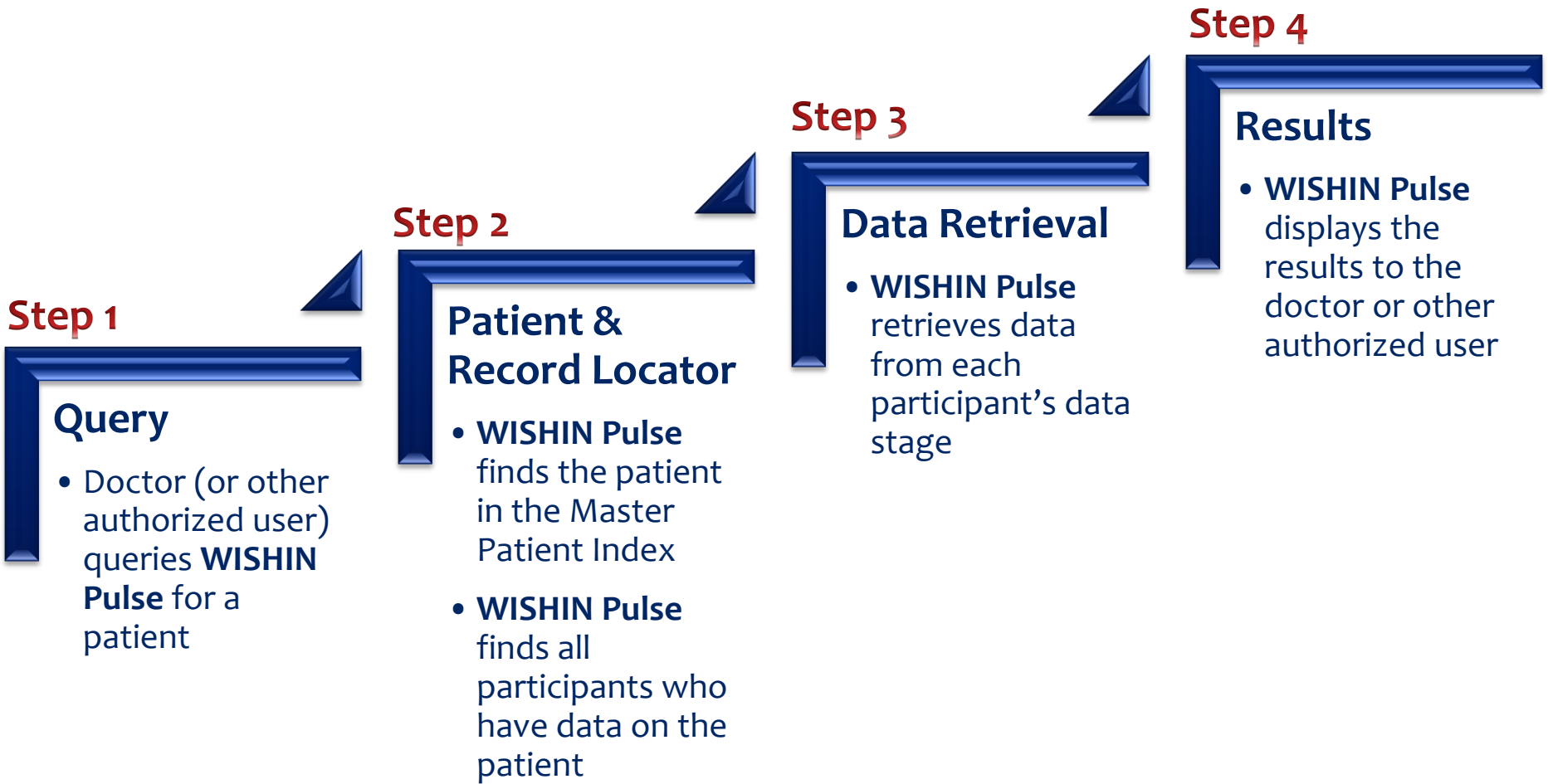
WISHIN

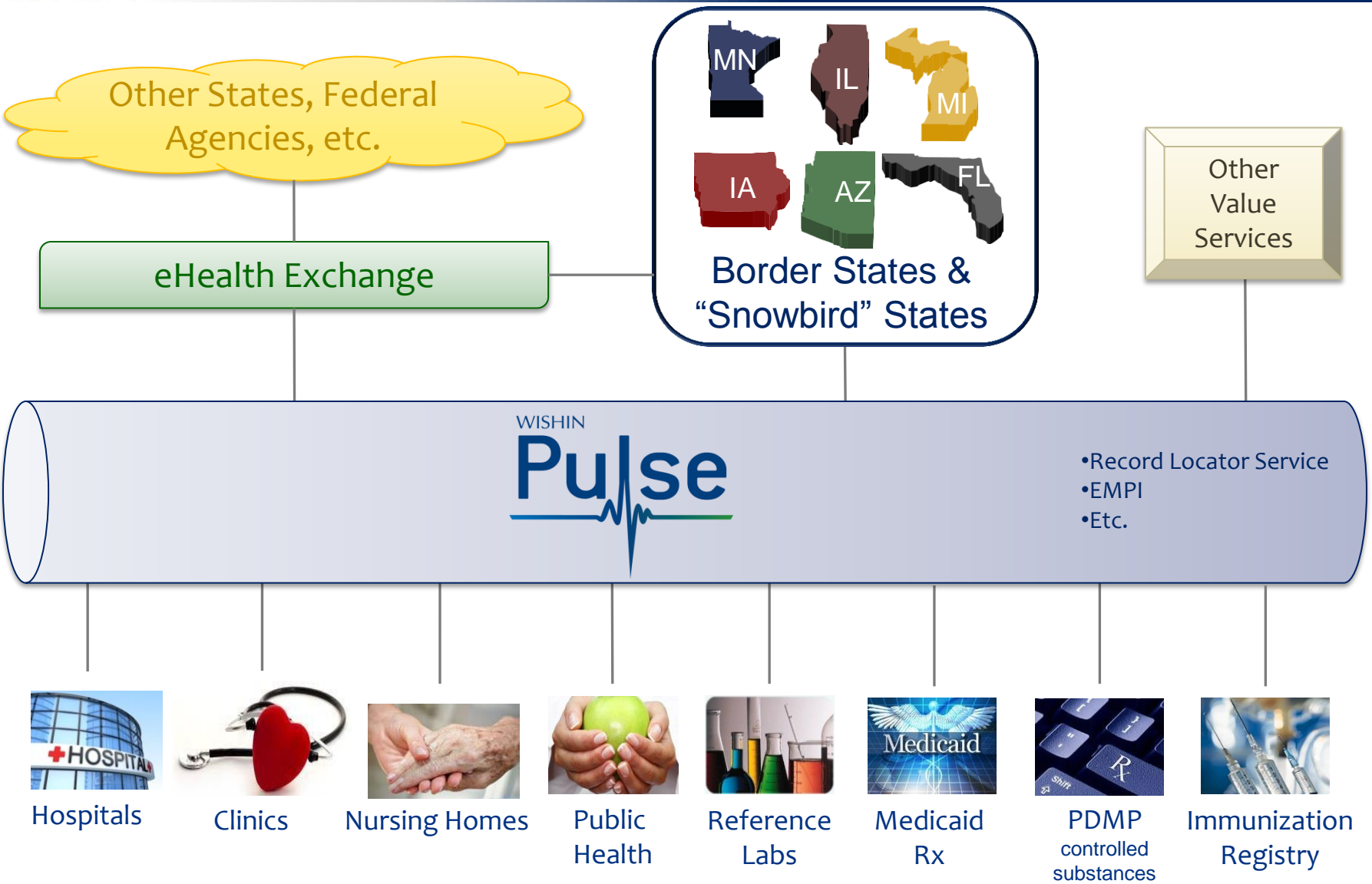
WISHIN PRODUCTS

- HIPAA-compliant secure e-mail.
- DirectTrust accredited.
- Direct+ is “push” technology.
- WISHIN publishes directories for its own HISP and other DirectTrust organization/HISPs.
- No EHR required.
- WISHIN has provisioned more than 6,300 Direct addresses.

- Pulse is a community health record/bidirectional query:
 - An aggregated summary of patient information from multiple organizations.
 - A **longitudinal view** of patient health information, rather than a series of separate encounter summaries.
 - WISHIN has onboarded to the eHealth Exchange – so clients don't have to.
- Pulse can include the following data/functionality:
 - ADT (problem list, allergies, diagnoses, etc.)
 - Laboratory results
 - Radiology results
 - Pathology results
 - Transcription reports
 - CCDs /C-CDAs
 - PDMP integration/Medicaid Prescription Fills*/WIR integration
 - Notifications

***4Q 2015**





- Client organization decides which employees have access, and in what roles.
- WISHIN provides user training (or train-the-trainer).
- WISHIN Pulse can be accessed through a portal or visually integrated within the local EHR.
- Single sign-on option.
- WISHIN encourages acknowledgement of participation in the client's NOPP.
- WISHIN provides “Patient Choice” materials and administers opt-out process.



WISHIN

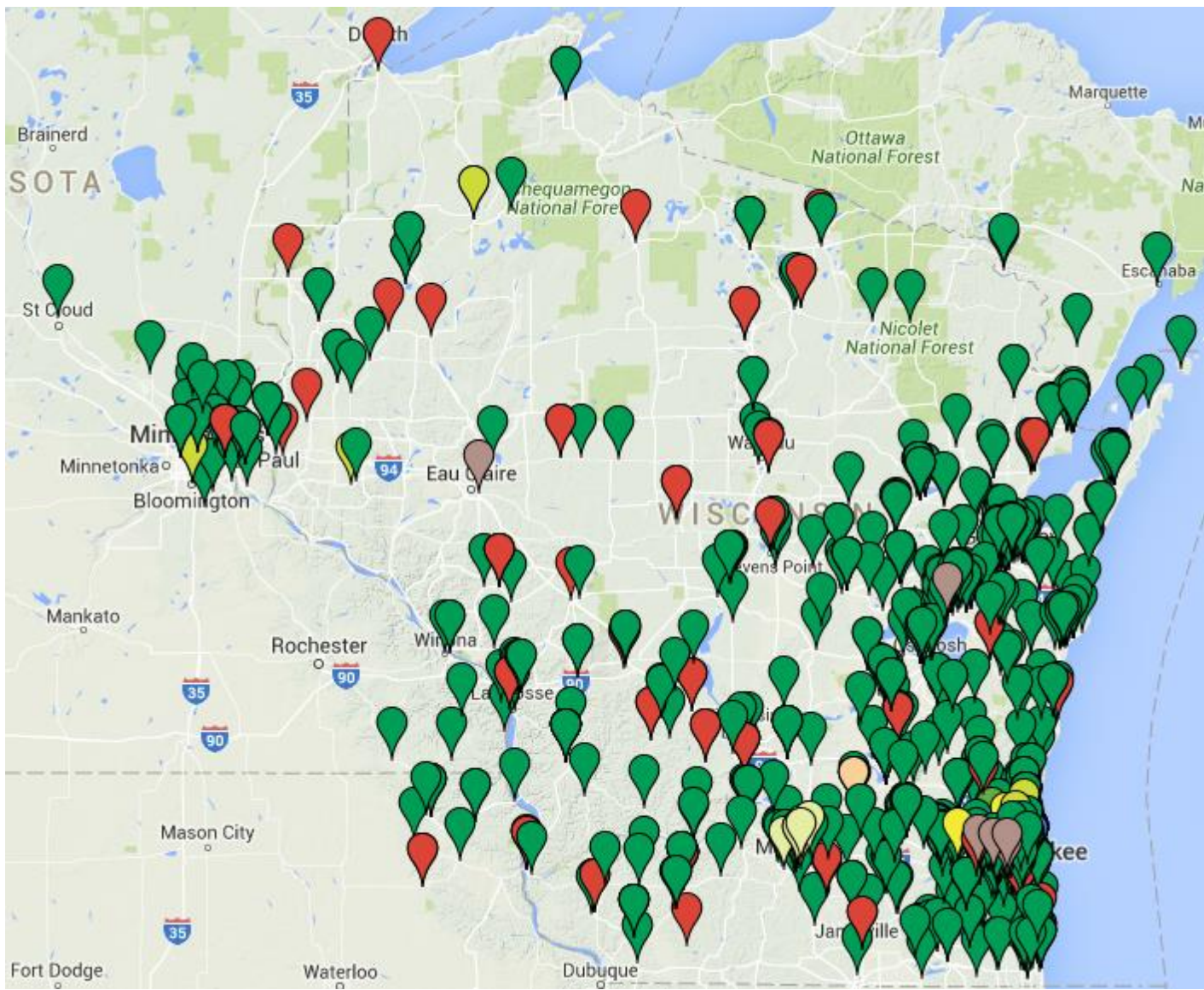
The logo features a stylized blue 'W' inside a circle, with a map of Africa integrated into the 'W'. To the right of the circle is a blue ECG line.

**WHERE WE
STAND NOW**

- WISHIN Pulse is a **one-to-many** information exchange solution that avoids the **cost and inefficiency of multiple one-to-one connections**.
- WISHIN Pulse enables **prospective sharing** of essential health information to support **transitions of care**, especially those that are unanticipated.
- With WISHIN Pulse, HIE becomes a **standardized, efficient, automated and repeatable process** rather than a collection of unique, variable and inefficient tasks.
- WISHIN Pulse enables provider **compliance with HIE-related Meaningful Use criteria** (care transitions/ and public-health reporting).

Patient Statistics	Transaction Statistics	Use Statistics
<p>3,143,392 Unique Patients</p>	<p>108,750,199 ADT Transactions</p>	<p>1,253 Unique User Accounts</p>
<p>35 Opted-Out Patients</p>	<p>24,335,684 Lab and Pathology Transactions</p>	<p>473 Users Logging in 1+ Times In Month</p>
<p>1 Opted-Back-In Patients</p>	<p>621,334 Radiology Reports</p>	<p>7,791 # of Chart Accesses in Month</p>
	<p>633,827 Transcribed Reports</p>	<p>961 # of Unique Patients Queried 1+ Times in Month</p>
	<p>283,597 CCDAs</p>	
	<p>73,476,411 Public Health Syndromic Surveillance Messages</p>	

WISHIN'S GEOGRAPHIC REACH



- **Real/perceived competition:** Does WISHIN provide a unique service? Are WISHIN-brand HIE services superior to others? Can MU compliance be achieved some other way?
- **“Who else is in?”** Geographical factors/border areas
- **Clients’ internal decision-making process:** Not an impulse purchase.
- **Demands on client IT resources:** WISHIN implementation is another item on a long project list.
- **Payer participation is downstream of provider adoption.**



LEGAL/POLICY ISSUES

- Participation Agreement
 - Defines permitted users/permitted uses
 - Mostly in HIPAA “treatment” realm
- HIPAA compliance/consent
 - ONC guidance
 - Opt-out approach
 - Request for accounting of disclosures
- Mental health/substance abuse
 - HIPAA harmonization
 - 42 CFR Part 2
- Interstate HIE



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THE FUTURE IS NOW

- WISHIN has a solid foundation of participating providers and technical capacity; more to come.
- Digitized health care information can be routed/re-purposed to support common goals of increased efficiency, improved quality and lower costs.
- Diversifying our client base and revenue sources is a priority for WISHIN:
 - Payers
 - Public Health/Medicaid
 - Community Health Centers
 - Pharmacies/PBMs
 - Nursing Homes
 - Independent Clinics

- Improve the efficiency/utility of information sharing between payers and providers.
- Widen the community circle: working with our clients to bring those with whom they exchange health information into the network.
- Support quality-reporting initiatives/processes. Collaborate with WHIO/WCHQ?
- Use cases still to be identified.

- Is HIE something more than care-summary exchange?
 - Community health record/master patient index or eHealth exchange only?
 - Is the incentive to participate purely compliance/MU-driven?
- Is increasing control by EHR vendors of control over the HIE process consistent with the goal of true interoperability?



Q & A

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