



State of Wisconsin
2025 - 2026 LEGISLATURE

LRB-3683/1
JPC&SWB:cjs&skw

2025 BILL

1 **AN ACT** *to repeal* 153.05 (2r) (b) to (f) and 153.50 (1) (b) 2.; *to amend* 153.05 (1)
2 (c), 153.05 (3) (c), 153.05 (5) (c), 153.05 (8) (c), 153.455 (4), 153.50 (1) (b) 1.
3 (intro.), 153.50 (3) (b) (intro.), 153.50 (3) (d), 153.50 (5) (a) (intro.), 153.50 (5)
4 (b) (intro.), 153.50 (5) (b) 1. and 153.65 (title); *to create* 153.01 (6), 153.05 (2r)
5 (fm), 153.05 (5m), 153.12, 153.47, 153.50 (2m) and 153.65 (3) and (4) of the
6 statutes; **relating to:** mandatory participation in the Wisconsin Health
7 Information Organization.

Analysis by the Legislative Reference Bureau

Under current law, the Department of Health Services and the Department of Employee Trust Funds may contract with a data organization to request health care claims information from insurers and administrators and to perform other duties specified under current law. In certain circumstances, if the data organization's contract is terminated, DHS may instead request health claims data from insurers and administrators and perform other duties specified under current law. Currently, DHS contracts with the Wisconsin Health Information Organization (WHIO) to collect this data and perform these duties. WHIO is a partnership

BILL

between the state and the private sector established to maintain a claims database and information system and provide public access to information on the state's health care delivery system. Under current law, as a condition of the contract, WHIO is required to include on its board of directors the secretary of health services and the secretary of employee trust funds, or their designees. Current law permits, but does not require, WHIO to request health care claims information from insurers and administrators. Further, current law does not require insurers and administrators to submit requested information.

This bill both requires WHIO, as the contracted data organization, to request health care claims information from insurers and administrators and requires insurers and administrators to submit requested information. The bill provides that insurers and administrators must begin submitting required data in a format specified by the data organization under contract no later than six months following the effective date of the bill. Under the bill, as a condition of contract, the data organization under contract must ensure uniform data collection, determine a method of collection, and determine the data elements to be collected, the reporting formats for data submitted, and the use and reporting of any data submitted. The bill further directs WHIO, as the data organization under contract, to publicly report health care claims information from insurers and administrators both in a machine-readable format and in language that is understandable to laypersons.

The bill provides that, beginning on the date on which the bill becomes law, WHIO, as the data organization under contract, has the exclusive right to use and to provide for a fee a data compilation, data service, or special report based on information collected by WHIO or provided to WHIO by DHS. WHIO, as the data organization under contract, must establish reasonable and necessary user fees for the provision of a compilation, service, or report, subject to approval by the secretary of health services. WHIO may additionally establish, subject to approval by the secretary of health services, reasonable and necessary fees to be paid by insurers, administrators, and any other data contributors for any services provided by WHIO. Further, the bill provides that WHIO, as the data organization under contract, may share data for health care operations, research, public health, or publication purposes if it determines 1) that the data request is consistent with program goals; 2) that the use of data provides greater transparency in health care costs, utilization, quality, or safety; and 3) that the information will be used to inform policy decisions.

The bill repeals certain requirements under current law that are applicable to WHIO, as the data organization under contract, with respect to the management of patient-identifiable data and instead imposes general requirements on WHIO, as the data organization under contract, to manage the data collected. Under the bill, WHIO must ensure the security of the data collected, protect the privacy of the data in compliance with state and federal law, and incorporate and utilize publicly available data other than administrative claims if necessary to measure and analyze a significant health care cost, utilization, quality, or safety issue that cannot be adequately measured with administrative claims data on its own. Subject to limitations, the bill also requires WHIO, as the data organization under contract,

BILL**SECTION 1**

to take certain actions, including auditing the accuracy of all data collected and, under certain circumstances, sharing data. The bill provides that the board of directors of the data organization under contract may make recommendations regarding the database, if the recommendations meet certain standards.

The bill repeals certain conditions of contract imposed on the data organization under contract under current law, including an obligation to provide matching funds and an obligation to conduct statewide consumer information campaigns to improve health literacy.

The bill allows the secretary of health services to appoint an advisory committee to advise DHS and ETF on the establishment of an all-payer claims database dashboard.

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

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

1 **SECTION 1.** 153.01 (6) of the statutes is created to read:

2 153.01 **(6)** “Machine-readable format” means a digital representation of
3 information in a file that can be imported or read into a computer system for further
4 processing.

5 **SECTION 2.** 153.05 (1) (c) of the statutes is amended to read:

6 153.05 **(1)** (c) Subject to s. 153.455 (1) to (3), the data organization under
7 contract under sub. (2r) ~~may~~ shall request health care claims information from
8 insurers and administrators. The data organization shall analyze and publicly
9 report the health care claims information with respect to the cost, quality, and
10 effectiveness of health care, in language that is understandable by lay persons, and
11 shall develop and maintain a centralized data repository. The data organization
12 shall provide to the department, ~~without charge,~~ health care claims information
13 collected by and reports produced by the data organization that the department
14 requests. If s. 153.455 (4) applies, the department may request health care claims

BILL**SECTION 2**

1 information, which ~~may~~ shall be ~~voluntarily~~ provided by insurers and
2 administrators, and may perform or contract for the performance of the other duties
3 specified for the data organization under this paragraph.

4 **SECTION 3.** 153.05 (2r) (b) to (f) of the statutes are repealed.

5 **SECTION 4.** 153.05 (2r) (fm) of the statutes is created to read:

6 153.05 **(2r)** (fm) The data organization shall ensure uniform data collection,
7 determine a method of collection, and determine the data elements to be collected,
8 the reporting formats for data submitted, and, subject to s. 153.47, the use and
9 reporting of any data submitted.

10 **SECTION 5.** 153.05 (3) (c) of the statutes is amended to read:

11 153.05 **(3)** (c) Upon request of the data organization under contract under sub.
12 (2r) for health care claims information, insurers and administrators ~~may~~ shall
13 provide the health care claims information to the data organization for use in
14 preparing reports and developing and maintaining a central data repository under
15 this subchapter, and, if s. 153.455 (4) applies, insurers and administrators ~~may~~
16 shall provide the health care claims information as requested by the department.

17 **SECTION 6.** 153.05 (5) (c) of the statutes is amended to read:

18 153.05 **(5)** (c) Subject to s. 153.455 (1) to (3), the data organization under
19 contract under sub. (2r) ~~may~~ shall request insurers and administrators to submit to
20 the data organization health care claims information for the preparation of reports,
21 plans, and recommendations in the form specified by the data organization,
22 including in standard electronic format. If s. 153.455 (4) applies, the department
23 ~~may~~ shall request submission of the health care claims information from insurers

BILL**SECTION 6**

1 and administrators in the form specified by the department, including in standard
2 electronic format.

3 **SECTION 7.** 153.05 (5m) of the statutes is created to read:

4 153.05 **(5m)** (a) Any insurer or administrator required under this chapter to
5 submit health care claims information to the data organization under contract
6 under sub. (2r) shall begin submitting the required data in a format specified by the
7 data organization under contract under sub. (2r) no later than 6 months from the
8 effective date of this paragraph ... [LRB inserts date]. After the initial submission,
9 the data organization under contract under sub. (2r) shall establish a data
10 submission schedule.

11 (b) An employer may share claims data with the data organization under
12 contract under sub. (2r).

13 (c) The state, the Medical Assistance program under subch. IV of ch. 49, and
14 any managed care organizations with an agreement to provide services to Medical
15 Assistance recipients shall submit data for the database. Any managed care
16 organization with an agreement to provide services to Medical Assistance
17 recipients that has submitted data to the department is not required to submit the
18 data to the database under this paragraph.

19 (d) The data organization under contract under sub. (2r) may not modify the
20 data submission schedule established under par. (a) or the required format for
21 submissions more than one time per year.

22 **SECTION 8.** 153.05 (8) (c) of the statutes is amended to read:

23 153.05 **(8)** (c) Subject to s. 153.455 (1) to (3), the data organization under

BILL**SECTION 8**

1 contract under sub. (2r) ~~may~~ shall request, analyze, and publicly report, health care
2 claims information from insurers and administrators both in a machine-readable
3 format and in language that is understandable to laypersons, ~~health care claims~~
4 ~~information, as adjusted for case mix and severity, from insurers and~~
5 ~~administrators.~~ Data from these sources may be obtained through sampling
6 techniques in lieu of collection of data on all insureds, and data collection
7 procedures shall minimize unnecessary duplication and administrative burdens. If
8 s. 153.455 (4) applies, the department ~~may~~ shall request health care claims
9 information, which ~~may~~ shall be ~~voluntarily~~ provided by insurers and
10 administrators, and may perform or contract for the performance of the other duties
11 specified for the data organization under this paragraph.

12 **SECTION 9.** 153.12 of the statutes is created to read:

13 **153.12 Advisory committee; all-payer claims database dashboard.**

14 The secretary of health services may appoint an advisory committee to advise the
15 department of health services and the department of employee trust funds on the
16 establishment of an all-payer claims database dashboard.

17 **SECTION 10.** 153.455 (4) of the statutes is amended to read:

18 153.455 (4) If the contract with the data organization is terminated under
19 sub. (3) and no organization responds to the request for proposals or a successor
20 contract cannot be achieved, the department, in its capacity as a public health
21 authority, shall collect health care information, including as specified under s. HFS
22 120.14 (1), Wis. Adm. Code, in effect on April 13, 2006, and ~~may~~ shall request health
23 care claims information, which ~~may~~ shall be ~~voluntarily~~ provided by insurers or
24 administrators, under this subchapter; shall analyze and disseminate, or contract

BILL**SECTION 10**

1 for the performance of analysis and dissemination of, the health care information;
2 and may analyze and disseminate, or may contract for the performance of analysis
3 and dissemination of, the health care claims information.

4 **SECTION 11.** 153.47 of the statutes is created to read:

5 **153.47 Release of data by data organization.** The data organization
6 under contract under s. 153.05 (2r) may share data for health care operations,
7 public health, research, or publication purposes only if it determines all of the
8 following:

9 (1) That the data request is consistent with program goals.

10 (2) That the use of data provides greater transparency in health care costs,
11 utilization, quality, or safety.

12 (3) That the information will be used to inform policy decisions.

13 **SECTION 12.** 153.50 (1) (b) 1. (intro.) of the statutes is amended to read:

14 153.50 (1) (b) 1. (intro.) “Patient-identifiable data”, ~~for information submitted~~
15 ~~by hospitals and ambulatory surgery centers~~, means all of the following data
16 elements:

17 **SECTION 13.** 153.50 (1) (b) 2. of the statutes is repealed.

18 **SECTION 14.** 153.50 (2m) of the statutes is created to read:

19 153.50 (2m) MANAGEMENT OF DATA BY DATA ORGANIZATION. (a) The data
20 organization under contract under s. 153.05 (2r) shall do all of the following:

21 1. Ensure the security of the data collected under this subchapter.

22 2. Protect the privacy of the data in compliance with state and federal law.

23 3. Incorporate and utilize publicly available data other than administrative

BILL**SECTION 14**

1 claims if necessary to measure and analyze a significant health care cost,
2 utilization, quality, or safety issue that cannot be adequately measured with
3 administrative claims data alone.

4 (b) The data organization under contract under s. 153.05 (2r) shall, subject to
5 the limitations under this subsection, do all of the following:

6 1. Audit the accuracy of all data submitted.

7 2. Share data nationally or help develop a multistate effort if recommended by
8 the board of directors of the data organization under contract under s. 153.05 (2r).

9 3. Share data for health care operations, research, public health, and
10 publication purposes if approved by the board of directors of the data organization
11 under contract under s. 153.05 (2r).

12 (c) The board of directors of the data organization under contract under s.
13 153.05 (2r) may make recommendations regarding the database under this
14 subchapter that meet any of the following criteria:

15 1. Include specific strategies to measure and collect data related to health care
16 cost, utilization, quality, and safety.

17 2. Focus on data elements that foster performance improvement and peer
18 group comparisons.

19 3. Facilitate value based, cost effective purchasing of health care services by
20 public and private purchasers and consumers.

21 4. Result in usable and comparable information that allows public and private
22 health care purchasers and consumers to identify and compare health plans, health

BILL**SECTION 14**

1 insurers, health care facilities, and health care providers regarding the provision of
2 cost effective, safe, high quality health care services.

3 5. Are designed to measure efficiency, effectiveness, timeliness, and safety.

4 6. Incorporate and utilize claims, eligibility, and other publicly available data
5 to the extent it is the most cost effective method of collecting data to minimize the
6 cost and administrative burden on data sources.

7 7. Include recommendations about whether to include data on the uninsured.

8 8. Discuss the harmonization of the database with other state, regional, and
9 federal efforts concerning all payer claims databases.

10 9. Discuss the harmonization of the database with federal legislation
11 concerning all payer claims databases.

12 10. Discuss a limit on the number of times the department or the data
13 organization under contract under s. 153.05 (2r) may do any of the following:

14 a. Require submission of the required data elements.

15 b. Change in a calendar year the data elements required for submission
16 considering administrative costs, resources, and time required to fulfill the
17 requests.

18 11. Discuss how the ongoing oversight of the operations of the database should
19 function, including where the database should be housed.

20 **SECTION 15.** 153.50 (3) (b) (intro.) of the statutes is amended to read:

21 153.50 (3) (b) (intro.) Remove ~~and destroy~~ all of the following data elements on
22 the uniform patient billing forms that are received by the department, the entity, or
23 the data organization under the requirements of this subchapter:

BILL**SECTION 16**

SECTION 16. 153.50 (3) (d) of the statutes is amended to read:

153.50 (3) (d) Require that a purchaser of data under this subchapter sign ~~and have notarized~~ the data use agreement of the department, the entity, or the data organization, as applicable.

SECTION 17. 153.50 (5) (a) (intro.) of the statutes is amended to read:

153.50 (5) (a) (intro.) The department, or an entity that is under contract under s. 153.05 (2m) (a), ~~or a data organization that is under contract under s. 153.05 (2r)~~ may not release or provide access to patient-identifiable data to a person authorized under sub. (4) (a) unless the authorized person requests the department, or entity, ~~or data organization~~, in writing, to release the patient-identifiable data. The request shall include all of the following:

SECTION 18. 153.50 (5) (b) (intro.) of the statutes is amended to read:

153.50 (5) (b) (intro.) Upon receipt of a request under par. (a), the department, or entity, ~~or data organization~~, whichever is applicable, shall, as soon as practicable, comply with the request or notify the requester, in writing, of all of the following:

SECTION 19. 153.50 (5) (b) 1. of the statutes is amended to read:

153.50 (5) (b) 1. That the department, or entity, ~~or data organization~~, as applicable, is denying the request in whole or in part.

SECTION 20. 153.65 (title) of the statutes is amended to read:

153.65 (title) Provision of special information; user and contributor fees.

SECTION 21. 153.65 (3) and (4) of the statutes are created to read:

153.65 (3) Beginning on the effective date of this subsection [LRB inserts date], unless the data organization otherwise agrees, the data organization under

BILL**SECTION 21**

1 contract under s. 153.05 (2r) has the exclusive right to use and to provide for a fee,
2 upon request from a person, a data compilation, data service, or special report
3 based on the information that is collected by the data organization or that is
4 provided by the department to the data organization. Subject to approval by the
5 secretary of health services, the data organization under contract under s. 153.05
6 (2r) shall establish reasonable and necessary user fees for the provision of a
7 compilation, service, or report. The data organization may retain all user fees paid
8 under this subsection.

9 (4) Subject to approval by the secretary of health services, the data
10 organization under contract under s. 153.05 (2r) may establish reasonable and
11 necessary fees to be paid by insurers, administrators, and any other data
12 contributors for any services provided by the data organization. The data
13 organization may retain all fees paid under this subsection.

14 (END)