Wisconsin Medical Society Transparency Principles

Approved by the Board of Directors April 2013

1. The Society believes the relationship between the Patient and Physician is critical to positive health outcomes. Transparency efforts should not supersede or unnecessarily impact the patient physician trust.

2. The Society believes there is benefit to using a common database of objective health care information that is aggregated across key stakeholder groups for multiple uses, including quality improvement, population health research, public reporting, financial risk-sharing models and product development.

3. The Society believes the value associated with the database is based on the credibility of the data, which results from the collaborative process and methodological rigor applied to these data products. The credibility must be preserved and enhanced as the scope, sources and uses of the data expand.

4. The Society believes it is critical to deploy a collaborative system to measure error rates and gaps in the data, as well as performance variations. Stakeholders must commit to correct/improve these conditions over time and thus make fair and reasonable decisions on public reporting of information.

5. The Society believes that the use of nationally vetted and endorsed measures will serve to decrease variation and allow for improvements in health care delivery.

6. The Society believes that Quality and Cost Measurement should be evidence-based and reported together whenever possible for stakeholder decision-making.

7. The Society believes that it is essential, for the public good, that the measures derived from the database are objective, reliable, statistically valid and can favorably influence the outcome of patient care.

8. The Society believes that a disciplined, neutrally operated appeals/dispute resolution policy, that audits data results and processes used to reach results, must accommodate the database. Further, if an appeal is significant and pervasive in the data, a moratorium on access to and use of the data must be activated until the data is remedied.

9. The Society expects that users of the data would commit to the following:
   a. Users will use data in a way that is accurate, meaningful and statistically valid.
   b. Users will openly disclose to the physician community the objectives, measures and methods related to any use of performance data.
   c. Users will work to include the most effective risk adjustment as possible, and any adjustment methods included in the users analysis will be fully described including the limitations of such adjustments.
   d. Users will reference the source of the data and display its imprimatur
   e. Users will develop and implement strategies for monitoring the impact of the implied uses of performance data that are not unduly burdensome.

Note: These principles do not replace Society Policy DHC-004. They are intended to provide a more general, yet succinct description of the Society’s position on Transparency.