Healthcare Benchmark Data Analytics Workgroup

Meeting Date	Meeting Time	Location
February 15, 2023	3:00 pm – 4:00 pm	Zoom Meeting Recording https://us02web.zoom.us/j/83470624103?pwd=UkVQVUs5UTRYRnV2SG0xbDgvUXBOdz09

Participant Name and Attendance	Council Members				
Karen Siegel	R	Josh Wojcik (chair)	R	Michaela Dinan	R
Frank Mata	X	Alynne Mallory	R	Olga Armah	X
Joe Quaranta	R	Mary Lyon	R	Gui Woolston	X
Others Present					
Krista Moore	R	Jeannina Thompson	R	Michael Bailit	R
Hanna Nagy	R			Matt Reynolds	R
		R = Attended Remotely; **IP** = In Person; **X** = Did Not Attend			

Agenda			
	Topic	**Responsible Party**	**Time**
1.	**Welcome and Roll Call**	**Josh Wojcik**	**3:00 PM**
	Krista Moore welcomed everyone to the fourth Data Analytics Workgroup meeting. Matt Reynolds reported that there was a quorum present.		
2.	**Public Comment**	**Members of Public**	**3:05 PM**
	Krista Moore offered the opportunity for public comment. There were no public comments.		
3.	<u>Action:</u> **Approval of July 20th, 2022 Meeting Minutes**	**Workgroup Members**	**3:10 PM**
	Joe Quaranta motioned to approve the July 20th meeting minutes. Mary Lyon seconded the motion. There was no opposition nor any abstentions. The minutes were approved.		
4.	**Updated APCD Commercial Trend Analysis**	**Bailit Health**	**3:15 PM**
	Michael Bailit reviewed an updated commercial trend analyses based on APCD data from 2017-2021. • Michael Bailit noted medical spending was growing faster in Connecticut than in selected other New England states, while retail pharmacy spending was growing slightly slower than in the other states. o Joe Quaranta asked where additional pharmacy payers were being captured in the data and in which category high-cost, self-administered drugs (such as injectable biologics) were included. Michael replied that he would ask Mathematica for the answers to Joe's questions. • Michael Bailit shared that hospital outpatient spending made up 42% of the cumulative increase in PMPM spending between 2017 and 2021. o Mary Lyon asked in which category urgent care center spending was incorporated. Michael replied that he could not recall but would follow up with the answer after the meeting. • Michael Bailit noted that the current analysis did not account for the impact of high-volume and low-cost vaccine administration and lab testing related to COVID-19 on the medical and retail pharmacy PMPM spending trends. Michael stated that Mathematica would attempt to parse this out in a subsequent analysis. • Michael Bailit noted that retail pharmacy spending related to brand name drugs had not been growing as fast in Connecticut as in other New England states since the start of the pandemic. • Michael Bailit summarized that his key takeaways from the analysis were that: o commercial spending growth continued to far exceed median household income growth for state residents;		

	- o utilization dropped in 2020 and then rebounded dramatically in 2021, and - o payment per service continued to grow with the exception of outpatient hospital in 2020 and 2021 and prescription drugs in 2021, although the 2021 hospital outpatient trend in payment per service and utilization warranted further analysis to see if it was confounded by COVID-19 testing and/or vaccination services. Michael Bailit asked if the trends presented in the analysis aligned with what Anthem was seeing in their internal data. Alynne Mallory replied that she would have to confer with her colleagues to answer the question. Mary Lyon noted that when comparing spending growth with income growth, it was important to remember that state residents did not have to pay for things like COVID-19 vaccinations and testing. Mary noted it would be helpful to better understand the impact of COVID-19 vaccines in the future analysis. Mary Lyon also stated that she thought it was important to adjust for yearly changes in case mix. - Michael Bailit noted that it was difficult to tease out whether changes in case mix were actually a result of increased disease burden or the result of improved coding practices or if both, in what proportion. Michael stated he would reach out to David Auerbach about additional adjustment methods to try. - Michaela Dinan noted that Connecticut being one of the fastest aging states might also increase the burden of disease from one year to the next. Michael noted that Mathematica could potentially isolate the impact of aging in future analyses. - Michaela Dinan also suggested looking at changes in broad categories of diseases and seeing how this compared across states. Karen Siegel asked what might account for the differences between the trend rates in Connecticut and the other New England states. Michael noted that Connecticut has a less consolidated insurance marketplace than other New England states, though he could not say if that might account for the differences in trends.		
5.	**Wrap-Up and Next Steps**	**Josh Wojcik**	**3:55 PM**
	Michael Bailit reported that the updated APCD commercial trend analysis would be shared with the Steering Committee later in the month. Michael also shared that Mathematica was conducting additional analyses, including a deeper dive into pharmacy cost trends, which the Work Group would review at its next meeting on March 15th, should the analyses be ready. Finally, he reported that analysis of Medicaid trend through 2021 was being finalized.		
6.	<u>**Action**</u>**: Adjournment**	**Workgroup Members**	**4:00 PM**
	Mary Lyon motioned to adjourn the meeting. Michaela Dinan seconded the motion. The meeting adjourned at 3:57 pm.		

Upcoming Meeting Dates:
March 15, 2023
April 19, 2023
May 17, 2023

All meeting information and materials are published on the OHS website located at:
https://portal.ct.gov/OHS/Pages/Data-Analytics-Workgroup