

Healthcare Benchmark Data Analytics Workgroup

| Meeting Date | Meeting Time | Location |
|--------------|---------------------|---|
| May 12, 2022 | 11:00 am – 12:00 pm | Zoom Meeting Recording https://us02web.zoom.us/j/89262319033?pwd=YWZ1RFRNVHhvbmxrUXZhdhVmErZz09 |

| Participant Name and Attendance | | Council Members | | | |
|---|---|---------------------|---|--------------------|---|
| Dashni Sathasivam | R | Josh Wojcik (chair) | R | Michaela Dinan | R |
| Frank Mata | X | Alyne Mallory | R | Olga Armah | R |
| Joe Quaranta | R | Mary Lyon | R | Susan Smith | R |
| Others Present | | | | | |
| Krista Moore | R | Michael Bailit | R | Matt Reynolds | R |
| John Brady | R | Sandra Czunas | R | Jeannina Thompson | R |
| Hanna Nagy | R | Kelly Sinko | R | Michelle Rakebrand | R |
| Kathy Lefebvre | R | Christine Cappiello | R | | |
| R = Attended Remotely; IP = In Person; X = Did Not Attend | | | | | |

| Agenda | | | |
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| | Topic | Responsible Party | Time |
| 1. | Welcome, Roll Call, and Introductions | OHS | 11:00 AM |
| | Josh Wojcik welcomed everyone to the first Data Analytics Workgroup meeting and invited Matt Reynolds to conduct roll call. There was a quorum present. | | |
| 2. | Public Comment | Members of Public | 11:05 AM |
| | Josh Wojcik offered the opportunity for public comment. There were no public comments. | | |
| 3. | Healthcare Affordability in Connecticut | Bailit Health | 11:10 AM |
| | Michael Bailit highlighted that 2009 and 2014 data show that Connecticut spends more on health care than the vast majority of states in the U.S. Michael also noted that Connecticut worker contributions to employer-sponsored insurance premiums have grown two and a half times faster than personal income since 2000. | | |
| 4. | Executive Order No. 5 and the Policy Development Process | Bailit Health | 11:15 AM |
| | Michael Bailit reviewed the components of Executive Order 5 (January 2020) that were recently codified by House Bill 5506 (May 2022). Michael noted that the Data Analytics Workgroup is charged with making recommendations to the Steering Committee regarding data-informed opportunities for reducing health care spending growth in the state. | | |
| 5. | Healthcare Cost Growth Benchmark | Bailit Health | 11:20 AM |
| | <p>Michael Bailit reviewed the purpose for a healthcare cost growth benchmark and the logic model behind it. Michael informed the group of the benchmark values for 2021-2025 and the levels at which performance will be measured against the benchmark.</p> <p>In response to a question from Josh Wojcik, Michael Bailit explained that OHS will consider whether modifications to the benchmark values are warranted on an annual basis.</p> <p>Michael Bailit reviewed a list of insurance carriers that submitted data for the pre-benchmark analysis, noting that Harvard Pilgrim Health Care had since left the Connecticut market. Joe Quaranta asked if the list of insurance carriers would be modified over time. Josh Wojcik noted that Humana recently entered the Medicare Advantage market. Michael Bailit stated that the insurance carrier and Advanced Network lists would be modified from year to year as needed.</p> | | |

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| 6. | Action: Review and Vote on Workgroup Charter and Bylaws | Workgroup Members | 11:25 AM |
| <p>Josh Wojcik reviewed the mission of the Workgroup and asked members for feedback on the draft charter and bylaws.</p> <p>Mary Lyon wondered how to capture the impact of the uninsured on spending trends. Michael Bailit noted that while there are not much data on spending by the uninsured, if there was substantial growth in the number of uninsured then OHS would have to use whatever incomplete data are available to confirm that change. Mary wondered if this could be incorporated into the charter. Josh Wojcik noted that OHS had data on uncompensated care. Olga Armah stated that uncompensated care makes up about 2% of state expenditures and has remained fairly consistently at 2% over time. Mary Lyon still thought it would be helpful to incorporate language with regards to consideration of uncompensated care into the Workgroup’s analyses.</p> <p>Mary Lyon asked about how the Workgroup would account for cost inputs such as labor, supplies, and other costs of doing business. Michael Bailit noted that the Workgroup’s focus was on spending trends, not input cost trends, though costs may be discussed in terms of contextualization.</p> <p>Mary Lyon wondered how pandemic effects would be captured. Josh Wojcik stated that he thought this would also be incorporated via contextualization. Michael Bailit noted that the group is concerned with where spending growth can be slowed, not determining where spending growth may be justified.</p> <p>Dashni Sathasivam proposed the following edit to a line in the charter and bylaws (new text is italicized): the Workgroup shall provide advice on “using analytic findings in an illustrative manner to make a compelling case to support policy change <i>to ensure equitable, high-quality healthcare and improved population health.</i>” Susan Smith supported this edit. Susan added that she thought that mention of equity should also be incorporated into the Workgroup principle in the charter referencing that advice by Workgroup members will “reflect statistically robust consideration of state analysis.”</p> <p>Michael Bailit proposed that Workgroup staff make redlined edits and have the group vote on the charter and bylaws at the next meeting.</p> | | | |
| 7. | Healthcare Spending Trend Analyses | Bailit Health | 11:30 AM |
| <p>Michael Bailit highlighted that cost growth benchmark analyses use payer-collected aggregate data to look at cost growth over time, while data use strategy analyses use granular claims data to look at the drivers of cost growth to inform opportunities to reduce cost growth.</p> <p>Michael then reviewed the results of the pre-benchmark analyses.</p> <p>Joe Quaranta asked where medical pharmacy was captured in the service categories for each market. Michael Bailit noted that it fell into hospital outpatient and professional physician spending. Michael added that the Workgroup would be looking at more detailed pharmacy spending trend analyses at the next meeting.</p> <p>Mary Lyon commented that per member per year long-term care (LTC) spending was much different between Medicaid and Medicare. Michael Bailit noted that LTC is mostly covered by Medicaid and was therefore not an “apples-to-apples” comparison across markets. Joe Quaranta suggested that the Workgroup also evaluate Medicaid trends without LTC in order to more easily make comparisons across markets since LTC is such a large contributor to spending for Medicaid only.</p> <p>Michael Bailit noted that the Workgroup would begin its review of Mathematica’s cost driver analyses at the next meeting since there was not sufficient time to begin doing so at this meeting.</p> | | | |
| 8. | Upcoming Mathematica Analyses | Bailit Health | 11:50 AM |
| <p>There was not sufficient time to review this content at this meeting.</p> | | | |
| 9. | Action: Wrap-Up and Next Steps | Workgroup Members | 11:55 AM |

Michael Bailit shared that the plan for the next meeting would be to review Mathematica’s cost driver analyses, detailed pharmacy spending analyses, and hospital payment variation analyses.

Kelly Sinko shared that future Workgroup meetings were scheduled to be held on the third Tuesday of each month from 11 am – 12 pm and asked for members to let OHS know if this time did not work for them.

Josh Wojcik asked for a motion to adjourn. Mary Lyon motioned to adjourn. Susan Smith seconded the motion. The meeting adjourned at 11:58 am.

All meeting information and materials are published on the OHS website located at:

<https://portal.ct.gov/OHS/Pages/Data-Analytics-Workgroup>