APCD Data Release Committee Meeting

April 12, 2022



Welcome and Call to Order



Agenda

Agenda Item	Time
Welcome & Call to Order	1:00 pm
Public Comment	1:02 pm
Review and Approval of the March 8, 2022 Meeting Minutes	1:05 pm
Presentation by New Hampshire Comprehensive Health Care Information System	1:07 pm
Update on Applications and Releases	2:00 pm
Federal DOL Report Key Highlights	2:10 pm
General Discussion	2:30 pm
Meeting Adjournment	2:35 pm



Public Comment

(2 minutes per commenter)



Review and Approval of March 8, 2022 Meeting Minutes



Presentation by New Hampshire Comprehensive Health Care Information System

Mary Fields, NH CHIS Project Manager/Business Analyst



NH Comprehensive Healthcare Information System (CHIS)

Data Release Discussion

April 12, 2022

Program Creation

2005

RSA 420-G: 11-a Development of a Comprehensive Health Care Information System

- Requires the development of the program by DHHS and NHID
- Requires that files be encrypted before being sent

Division of Project

NHID

 Oversees payers and the data collection rule

DHHS

- Oversees data release
- Oversees the vendor contract

Collaboration between both agencies for rules, quality and vendor oversight.

Rules

Data Collection

INS4000

- Regulates what carriers are required to submit (currently any with a collective 9,999 covered lives per month)
- Defines data elements required

Data Release

- He-w 950
 - Governs use of data
 - Establishes tracking requirements
 - Requires the use of a Claims Data Release Advisory Committee and depicts the make up of it's membership for non-binding advice

Claims Data Release Advisory Committee Composition

- One member representing insurance carriers;
- One member representing health care facilities;
- One member representing health care practitioners;
- One member representing the general public;
- One member representing purchasers of health insurance;
- One member representing health care researchers; and
- Two members of the department.

Data Sets Released

- Public use: Standardized
 - No direct identifiers for providers
 - No patient or payer identifiers
 - No individual provider identifiers
- Limited use: Customized Data Sets
 - Available for research purposes only
 - Defined as a systematic investigation, including research development, testing, and evaluation, designed to develop or contribute to generalizable knowledge.

Limited Use Data Release Process

- Researcher completes application and addendum
- Review by project manager for completeness, purpose appropriate and for data elements requested (or not)
- Review by Project Director
- Review by data release advisory committee
- DUA completed
- Approval sent to vendor for data generation
- Vendor sends data via SFTP to researcher
- Any papers generated from the research are sent to NH DHHS for review prior to publication to ensure in line with research application and for content
- Verification of data destruction required at end of project or expiration of DUA

CHIS Website: <u>https://nhchis.com/</u>

Our website Contains all approved requests including the research topic.

Update on APCD Applications and Releases

Olga Armah, OHS



Olga Armah, OHS



State All Payer Claims Databases Advisory Committee (SAPCDAC) Report Makes 14 Recommendations in 4 Key Areas

Key Areas

Key Area 1 **Standardized Data Layout**

Key Area 2 **Data Submission Process**

Key Area 3 **Data Privacy, Security, and Release**

Key Area 4 → Voluntary Data Submission Processes



Key Area 1: Standardized Data Layout

- Utilize open, tested, and widely used mature industry standards
- Reference technical feasible and adoptable standards; in a short-term adopt freely available APCD Common data layout (APCD-CDL) developed by the APCD Council
- DOL to work with states to create capture standards for non-claims payments in a separate file and enhanced APCD-CDL to capture other high priority data elements for cost and utilization analyses
- DOL to work with states to create capture standards for non-claims payments in a separate file and enhanced APCD-CDL to capture other high priority data elements needed to support cost and utilization analysis

Key Area 2: Data Submission Process

- Encourage existing state methods for APCD collection or implementation of collection that mirror existing common state methods
- New collectors to use the most efficient processes with the goal to commonality in methods among states
- DOL, in consultation with stakeholders, establish an ongoing process for states to evaluate existing and emerging standards and methods for quality assurance
- States to collect data on a uniform monthly timeline and capitated payments, alternative payments models and non-based claims on an annual basis, to benefit health plans

Office *of* Health Strategy

Key Area 3: Data Privacy, Security, and Release...

- Existing APCDs maintain and new APCDs establish rigorous privacy and security protections, and comprehensive administrative, technical, and physical safeguards for claims data, to protect their citizenry and assuage data submitter concerns
 - i. Including de-identification and longitudinal identifiers to create public use files
 - ii. Data application review process
 - iii. Security and privacy protocols for data at rest and in motion/transit
 - iv. Identify authorized data users and uses
 - v. Attribute and acknowledge use of the data
 - vi. Impose penalties for violation



Key Area 3: Data Privacy, Security, and Release...

- DOL to consider the utility and feasibility of establishing a uniform set of data release protocol/requirements and DUAs that enable allowable uses with the appropriate privacy and security safeguards
- When state law permits, APCD should be adequately resourced to institute infrastructure and process for timely data release to approved requestors using articulated and transparent steps that include:
 - i. Information to supply in application
 - ii. Application receipt
 - iii. Application review
 - iv. Required application modifications, if any, to permit use and transmission to approved users
 - v. Data transmission to approved users



Key Area 3: Data Privacy, Security, and Release...

 In addition to individual state's dissemination processes, explore secure and privacy protective multi-state aggregation and dissemination model to encourage wider use of data, e.g., a single entity to disseminate a file that contains select APCD data fields under a standard DUA (HCUP model) with federal involvement



Key Area 4: Voluntary Data Submission Processes

- The SOL, in partnership with the Secretary of HHS should, through annual communication or public policy statement, clarify and emphasize public policy and business interest in having self-insured plans report to State APCDs, such as:
 - i. To improve health care affordability and quality
 - ii. To inform consumers about quality, outcomes, and treatment costs of care
 - iii. To identify and improve health inequities within and among socioeconomic and demographic groups
 - iv. For health sector regulation and oversight
 - v. To evaluate impact of proposed legislative changes
 - vi. For other public health issues



Key Area 4: Voluntary Data Submission Processes

- The Secretaries could convene a round-table of self-funded employers or publish a white paper to:
 - i. Highlight and document the benefits of state APCDs
 - ii. Illuminate how data from self-funded plans, e.g., state employee/retiree plans, currently collected are being used and could be used



Key Area 4: Voluntary Data Submission Processes...

- DOL to establish an effective and streamlined standard process for selfinsured plans to opt-in to participate in APCD data submission:
 - i. Through a standard online portal or standalone APCD opt-in form for use by states
 - ii. Define end users' data use cases
 - iii. Encourage states to utilize this standardized process
 - iv. Allow self-insured group plans to utilize DOL Form 550, or similar, to opt-in to maximize participation
 - v. Clarify that self-insured plans have the authority to decide to opt-in not the TPAs
 - vi. Survey and publicly report on difficulties group plans experience working with TPAs to report and provide guidance for common difficulties e.g., legal concerns and unreasonable fees



Key Area 4: Voluntary Data Submission Processes...

- DOL to engage employers and union that sponsor self-insured ERISAcovered to identify submission process changes will enhance plans' participation to submit to APCDs
- SPACDAC recommended a committee or roundtable, supported by DOL staff, to focus on addressing other known issues SPACDAC was not charged to address including:
 - i. Learning from states how to increase use of APCD and cooperation from submitters through adopting APCD-CDL
 - ii. Working with states to streamline collection for increased efficiency
 - iii. Surveying existing states' APCD privacy and security protocols and synthesize for additional common features and best practices



Key Area 4: Voluntary Data Submission Processes

 Secretaries of Labor & HHS should work with states and stakeholders to invest system-wide to standardize collection of race, ethnicity and gender data not typically collected by payers to help address pervasive health inequities



Federal Grant Funding Next Steps....

States awaiting instructions on the application process and requirements



Link to Report

<u>State All Payer Claims Databases Advisory Committee Report with</u> <u>Recommendations under Section 735 of the Employee Retirement</u> <u>Income Security Act of 1974 (dol.gov)</u>



General Discussion

Dr. Patricia Checko



Meeting Adjournment



Upcoming Scheduled DRC Meeting



