## All Payer Claims Database Data Release Committee

Special Meeting Agenda

Meeting Date Meeting Time			Location			
Mar. 16, 2018 9:00 – 10:00 AM		WEBINAR				
Committee Mer	nbers					
Patricia Checko,	Ph.D., Chair	Х	Sheryl Turney, MS	Х	Kun Chen, Ph.D.	Х
Robert Blundo		Х	Kristen McClain, JD/MBA	Х	Lisa Freeman	Х
Miriam Delphin-	Rittmon, Ph.D.		Henry Jacobs, MD/JD	Х	Michael Fields	Х
Justin Peng, MP	Н	Х	Anthony Dias, MBBS, DPM, MPH	Х		
Supporting Lead	lership					
Kelsey Lawlor, O	OHS	Х				

Age	nda						
	Торіс	Responsible Party	Time				
1.	Welcome & Call to Order	Dr. Patricia Checko	9:00 AM				
	Robert Blundo updated the committee on APCD activities while Chair Patricia Checko connected to the webinar. He provided an update on Medicare and Medicaid data collection, and indicated a need to restructure the data release process once those data were fully incorporated. Patricia Checko rejoined the webinar and called the meeting to order.						
2.	Public Comment	Attendees	9:05 AM				
	There was no public comment.						
3.	Review and Approval of the February 23, 2018 Minutes	Committee Members	9:10 AM				
	Patricia Checko asked for a motion to approve the February 23, 2018 meeting minutes. Committee member Sheryl Turney moved to approve the minutes. Kristin McClain seconded the motion. The Motion passed unanimously with no additions or abstentions.						
4.	Application Review and Discussion: UConn Health	Sara Wakai	9:15 AM				
	Sara further explained that her team has been working with the Department of Public Health 1305 – state grant from CDC to look at chronic disease, diabetes in particular. Wanted to dive deeper into DSME impact on healthcare cost and utilization. Rob Blundo stated that the APCD has previously released data to UConn Health, and asked Sara to elaborate about how much of the infrastructure from the previously approved UConn Health application would be utilized. Laurel Buchanan, a member of Sara's research team, answered that they will be using the same						
	servers and security standards, and will keep the data in folders that are restricted by team. Pat Checko asked if the findings of this project would serve as the mechanism for DPH to measure progress on this diabetes indicator for the state. Sara responded that she would imagine so, however as it stands, they are not linking this APCD date to the Behavioral Risk Factor Surveillance System (BRFSS).						
	Pat then asked if this DSME is considered required offered services under the ACA. Sara responded that she doesn't believe that it is covered by all insurers, which is also part of the reason why they want to pursue this research and demonstrate its value. Pat followed up by asking that, if this is in fact not a required service, how confident is the team that the APCD data would accurately reflect the rate of patients that are actually being offered this service on a regular basis. Rob Blundo stated that he had a similar concern that DSME would not be frequent enough in the database. However, after looking into the database for just CY2016, over 21,000						

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	claims in the database related to DSME services were found. The team feels that this is an adequate sample. Pat then asked how they would characterize situations in which the codes were missing. A member of Sara's team clarified that they are not looking to see the frequency at which DSME services are utilized, but the impact of DSME services on the patients' healthcare utilization overall. Pat Checko asked Rob Blundo to clarify the level to which the APCD will release geographic information. Rob clarified that recipients will receive the first three digits of the zip code, as long as there are over 20,000 lives in								
	that zip code area. Pat confirmed that this limits their ability	to do any kind of geographic mapping.							
	Lisa Freeman asked for clarification as to whether or not the the state that have less than 20,000 lives. Rob Blundo answe code is masked. Rob reiterated that since current de-identi code, that requesters are advised that the APCD data is inap requirement to perform in-state geographic adjustments.	ered that that data is provided, however fication rules restrict the disclosure of a	the zip 5 digit zip						
	Justin Peng asked the applicants to discuss how they will account for the timing of when a patient received DSME, and then how will they be identifying patients with diabetes. Sara answered that they will be using the APCD diabetes codes. Justin clarified to ask if they will be looking at just a diabetes diagnosis, or any related diagnoses. Sara answered that they would be looking at all diabetes diagnostic codes. Rob Blundo stated careful attention is required when choosing a disease identification methodology to mitigate risk of falsely identifying diabetics. He recommended using an established claims based disease identification methodology such as one used by Healthcare Effectiveness Data and Information Set (HEDIS) measures.								
	Executive Session, If Applicable	Committee Members	9:30 AM						
E	The Committee did not choose to enter executive session. Final Votes	Dr. Patricia Checko	0.4E AM						
5.	Final VotesDr. Patricia Checko9:45 AMPatricia Checko asked the Committee for a motion to approve the application submitted by UConn Health to study healthcare utilization by Connecticut patients diagnosed with diabetes. Lisa Freeman moved to approve the application. Sheryl Turney seconded the motion. The motion to approve the application passed unanimously, with member Justin Peng abstaining.9:45 AM								
6.	Adjournment	Dr. Patricia Checko	10:00 AM						
	Patricia Checko asked for a motion to adjourn the meeting. to adjourn. Sheryl Turney seconded the motion. The commi- 10:00 am.	-							

Meeting information is located at: <u>http://portal.ct.gov/Office-of-the-Lt-Governor/Health-IT-Advisory-Council/Health-IT-Advisory-Council---APCD-Advisory-Group</u>