APCD Data Privacy & Security Subcommittee

Meeting #2 – May 3, 2019

Presented by: CedarBridge Group

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Meeting Agenda

Agenda Item	Time
Welcome & Introductions	9:00 am
Public Comment	9:05 am
Recap of Meeting 1	9:10 am
Continuation of Environmental Scan	9:15 am
Follow-up Items from Meeting 1	9:40 am
Next Steps	9:55 am

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The Support Team

State of Connecticut

Allan Hackney - Office of Health Strategy

Health Information Technology Officer

Rob Blundo – Access Health CT

Director, Technical Operations & Analytics

CedarBridge Group

Carol Robinson

Michael Matthews

Chris Robinson

Mark Hetz, MBA

Dawn Bonder, JD

Sheetal Shah, MPH

Committee Members:

- Dr. Robert Scalettar (Chair) – RES Health Strategies / Access Health CT Board Member
- Ted Doolittle – Office of the Healthcare Advocate
- Matthew Katz – Connecticut State Medical Society
- Joshua Wojcik – Office of the State Comptroller
- Pat Checko – Representing the Data Release Committee
- Jean Rexford - Connecticut Center for Patient Safety
- James Iacobellis – Connecticut Hospital Association
- Bernie Inskeep – United Health Group
- Krista Cattanach – Aetna
- Dr. Victor Villagra – University of Connecticut Health, Health Disparities Institute

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APCD Data Privacy & Security Subcommittee

➢ A review of applicable policies and procedures is required to support the transition of APCD program from Access Health CT (AHCT) to the Office of Health Strategy (OHS)

➢ Subcommittee's initial charge is to review and comment on:

  ▫ Existing Access Health CT (AHCT) policies

  ▫ APCD policy practices from other states

  ▫ Current or anticipated concerns from data recipients, OHS staff, etc.

  ▫ Define policy recommendations and next steps

  ▫ Present recommendations to the APCD Council for review and affirmation

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Recap of Meeting #1

Recap of Meeting #1

➢Introduction and Member Perspectives

➢Environmental Scan – Round 1

➢Follow-up Actions

▫ Statutory/regulatory implications

▫ Creating a grid of state-level data

▫ Getting more information from neighboring states, including MA, NY, RI and VT

▫ Use of APCD data to assess quality

▫ Summary review of previous APCD data requests

Continuation of Environmental Scan

Overview of Environmental Scan

Online research

- Arkansas
- Connecticut ★
- Maine
- Massachusetts
- Minnesota
- New York
- Rhode Island
- Utah
- Vermont
- Virginia

Telephone interview or e-mail response <u>and</u> online research

- Colorado
- Maryland
- New Hampshire
- Oregon
- Washington
- APCD Council
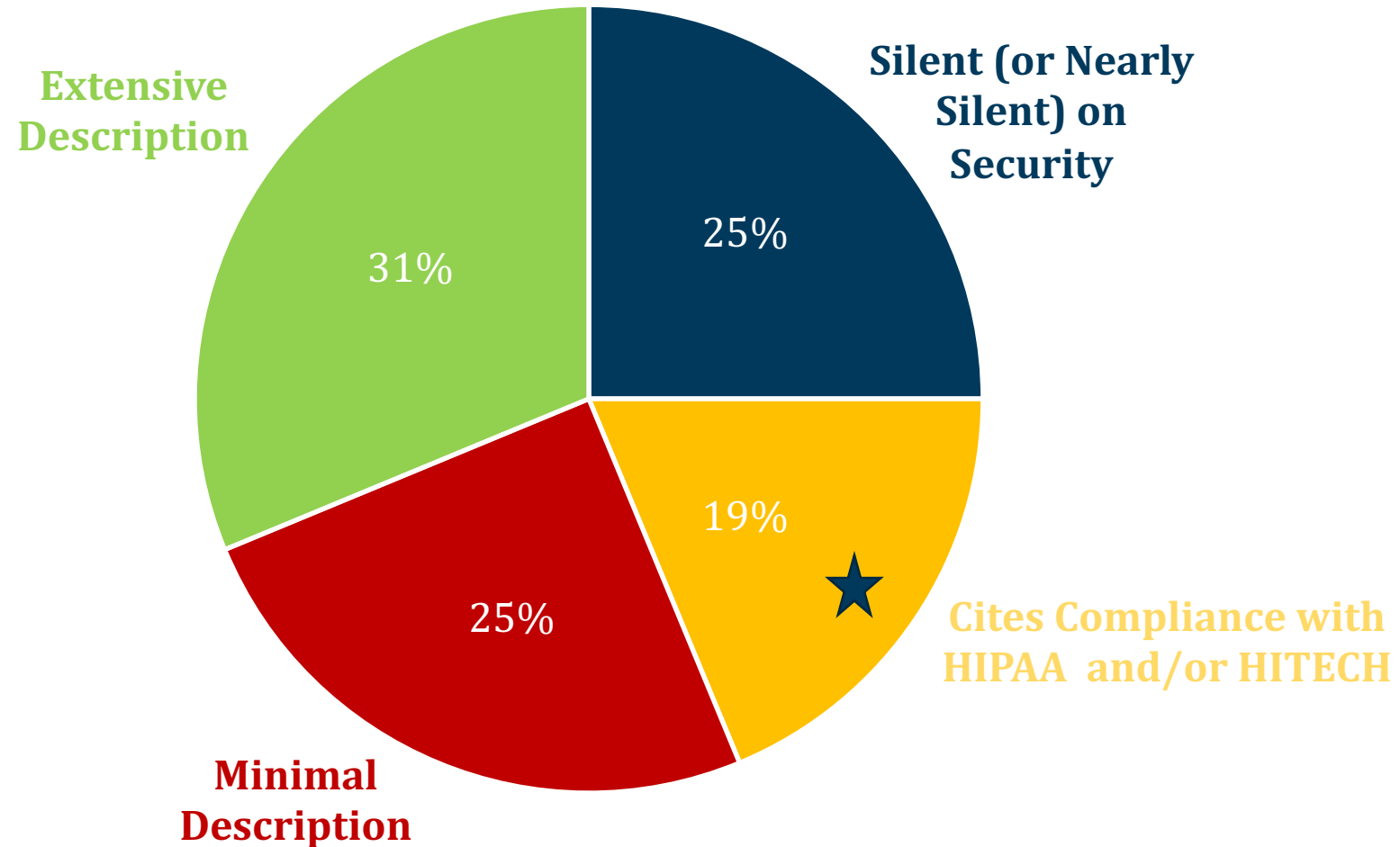- National Association of Health Data Organizations (NAHDO)

States contacted for further information

- Massachusetts
- New York
- Rhode Island
- Vermont

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Characteristics Assessed

✓ Treatment of Protected Health Information

✓ Data Release Governance

✓ Data Release Process

✓ Transparency of Data Request/Release

➢ Publication of Security Measures

➢ Consumer On-line Access to Data

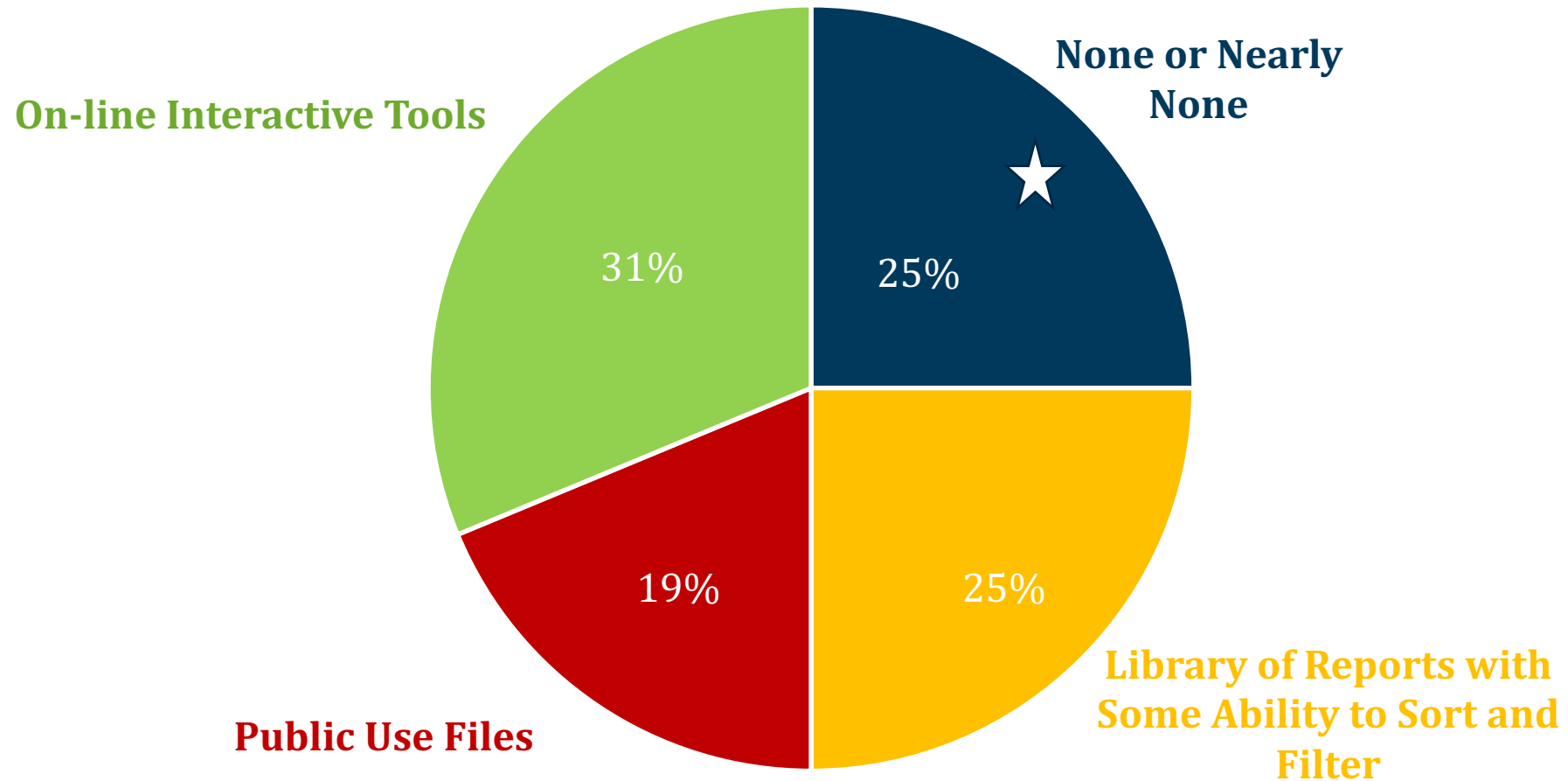➢ Treatment of Cost (Pricing) Data

Publication of Security Measures

Pie chart showing:
- Silent (or Nearly Silent) on Security: 25%
- Cites Compliance with HIPAA and/or HITECH: 19% (★ = Connecticut)
- Minimal Description: 25%
- Extensive Description: 31%

★ = Connecticut

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Trends and Observations:
Publication of Security Measures

➢ States are trending toward less specificity in their published materials about security measures employed by APCD programs; most cite adherence to industry standards and/or regulations

➢ This trend cuts across industries and is not limited to APCD programs or healthcare data systems

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Consumer Online Access to Data

On-line Interactive Tools — 31%

None or Nearly None — 25%

Library of Reports with Some Ability to Sort and Filter — 25%

Public Use Files — 19%

★ = Connecticut

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Trends and Observations:
Consumer Online Access to Data

➢ Some states are providing interactive online tools for consumers to assess cost and quality of care offered by providers for specific procedures

➢ Some states have found that by providing prepared reports and a library of papers, data requests are reduced

- This could have an unintended consequence for program sustainability by reducing the collection of fees

Treatment of Cost/Pricing Data

APCD Legislative Mandate – Connecticut Public Act 13-247

Enabled the Exchange's creation of the Connecticut All-Payer Claims Database ("APCD"). Pursuant to Public Act 13-247, various Data Submitters are required to report healthcare information to the Exchange for inclusion in the APCD.

The Act allows the Exchange:

(i) to utilize healthcare information collected from Data Submitters **to provide healthcare consumers in Connecticut with information concerning the cost and quality of healthcare services that allows such consumers to make more informed healthcare decisions**; and

(ii) to disclose Data to state agencies, insurers, employers, healthcare providers, consumers, researchers and others for purposes of reviewing such Data as it relates to health care utilization, costs or quality of healthcare services.

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Trends and Observations:
Release of Cost/Pricing Data

➢ States have begun to make cost/pricing data available to consumers
➢ Efforts vary:
  ■ Pre-prepared reports
  ■ Regional reports with some customization possible through an interactive website
  ■ Robust cost data by provider and procedure
➢ Consumer usability varies across APCD program websites
➢ Best efforts (CO, ME, NH, WA) offer robust data (cost and quality) on consumer-friendly, interactive websites that provide information consumers can use to make healthcare choices based upon cost and quality for specific healthcare procedures

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Trends and Observations:
Treatment of Cost (Pricing) Data

- There appears to be a trend that over time, healthcare organizations become more accepting of the publishing of price data for specific procedures by an APCD program
  - This is likely a result of building trust and of shared recognition of the value of the information

- Those states releasing pricing data to the public are doing so in a highly curated way to address payor/provider concerns, and also to help ensure the data is easily to understand and unlikely to be misconstrued by consumers

Additional Trends and Observations

- The environmental scan highlighted the need for states to be cognizant of the levels of stakeholder trust, confidence, and commitment to an APCD program

- Trust of stakeholders is essential in order to find consensus positions on data collection and on data availability for a variety of purposes
  - Trust in APCD data quality
  - Trust in accuracy of data reports from the APCD program
  - Trust in the processes used to develop policies and procedures for the APCD program
  - Trust in the application of policies and procedures by the APCD program
  - Trust in the fairness of APCD data availability and data use policies and procedures

- As stakeholder trust and confidence in an APCD program builds, new opportunities for expanding the use of APCD data can be considered and sources of funding of an APCD program may increase

TRUST in PRIVACY, SECURITY, and ACCURACY of DATA = VALUE

VALUE = SUSTAINABILITY

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Follow-up Action Items

Statutory and Regulatory Implications

State-level Grid of Responses:

A detailed breakout of characteristics has been provided with the meeting materials

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Use of APCD Data for Quality Measurement

Summary of Data Requests and Disposition

Overview of the Data Release Process

Meet and Discuss → Submit → Review & Consult → Committee Review & Approval → Sign Agreement → Submit Payments → Data Request Fulfilled

Application Disposition Overview

*15 applications received to date
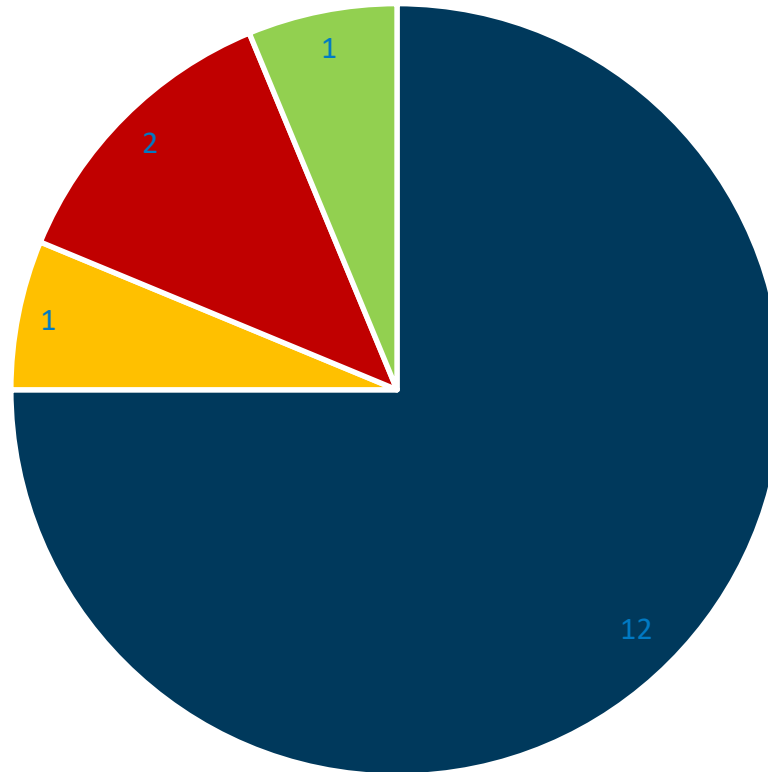
Legend: Approved • Not Approved • Scheduled for DRC Review • Submitted to APCD

Pie chart values: 12 (Approved), 1 (Not Approved), 2 (Scheduled for DRC Review), 1 (Submitted to APCD)

Data Request Summary

Organization	Project Name	Objectives	Date	Disposition
UConn Health Center	SIM Evaluation	1. How is health care delivery changing under SIM 2. Creation of an online scorecard to display healthcare quality ratings and create quality transparency. 3. Development of a phenotypic algorithm for suicide risk prediction.	Jul-17	Approved
Altarum Institute	Prometheus Analytics	1. What episodes of care provide best opportunities for improvement in cost and quality 2. How does CT's medical cost and quality compare to other states for similar episodes of care 3. Extent of provider variation in costs and quality	Dec-17	Approved
UConn Health Center	Health Care Cost and Utilization of Commercially Insured Diabetes Patients in Connecticut	1. Overall healthcare utilization patterns and associated costs for individuals commercially insured in Connecticut and diagnosed with diabetes at any time during 2012-2016 2. Differences in prevalence of diabetes related healthcare utilization and costs for patients based on demographics (e.g. age group, gender, town of residence) 3. Comparison of health care costs and cost trends for patients diagnosed with diabetes who received DSME	Dec-17	Approved
MMS Analytics, Inc. d/b/a MyMedicalShopper	MyMedicalShopper Connecticut Expansion	1. Use CT APCD data to augment the MyMedicalShopper platform 2. Use CT APCD data to generate an estimate of provider quality, taking into account market share and specialization	Feb-18	Approved
Southern California University of Health Sciences	Atlas of Integrative Health	1. How patient access to health care services differ by specialty 2. Utilization of chiropractic services associated with reduced use of prescription opioids	Feb-18	Approved

Data Request Summary

Organization	Project Name	Objectives	Date	Disposition
Yale University	Cervical Cancer Screening Trends in Connecticut and New Haven County	1. Cervical cancer screening rate in Connecticut and New Haven County 2. What cervical cancer screening guidelines look like over time	Mar-18	Approved
Yale New Haven Health System and Yale School of Medicine	Population Health Total Cost of Care and Care Continuity Enhancement	1. Identify and understand gaps in care for patients we have treated 2. Understand patterns in care that may present opportunities to improve follow up, enhance quality of care, and reduce total cost of care	Aug-18	Approved
Connecticut Children's Medical Center	Healthcare Utilization Assessment	1. Pediatric care utilization in free-standing urgent care centers and what might be better served by increased primary care or subspecialist access through routine maintenance and prevention 2. With a known behavioral healthcare shortage, where are patients seeking care currently and what is the full course of their healthcare pathway and treatment 3. Where is greatest opportunity for telemedicine to reduce costs and improve access in pediatrics	Oct-18	Approved
Freedman Healthcare (FHC)	Cost and Market Impact Reports (CMIR) for Hospital Acquisitions, 2018-2019	1. Understand current market share for services provided by the parties and if acquisition will lead to dominant market share for these services 2. Understand current relative prices of the parties and if relative prices will increase because of the acquisition 3. Understand the current health-status adjusted total medical expenses (HSA TME) for parties and if the acquisition will result in HSA TME that is higher than the CT median HSA TME	Oct-18	Approved
HMS	Digital Heatlh Cooperative Research Center (DHCRC)	1. Develop predictive model for those most likely to abuse opioids and those most likely to become re-abusive after treatment 2. Compare efficacy of current opioid treatments 3. Develop predictive model to identify those most likely to require readmission after initial inpatient hospital stay	Oct-18	Not Approved

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Data Request Summary

Organization	Project Name	Objectives	Date	Disposition
Remedy Partners Inc.	Provider Level Price and Quality Transparency Through the Lens of Episodes of Care in Public and Commercially Insured Populations	1. How does provider cost and quality differ among public and commercially insured populations within Connecticut and nationwide	Mar-19	Approved
UConn Analytics and Information Management Solutions	Healthcare Analytic Reporting for the Office of Health Strategy	1. Analytics on behalf of the Health Care Cabinet regarding health care utilization and associated costs 2. Analytics on behalf of the OHS and the Office of the State Comptroller regarding prescription drug costs and impacts 3. Analytics on behalf of the OHS regarding healthcare utilization and a facilities, services, and equipment inventory, as well as to aid in the Cost and Market Impact Review.	Mar-19	Approved
The Miriam Hospital / Brown University	Using Big Data to Determine Pre-exposure Prophylaxis (PrEP) Uptake and Persistence in Southern New England	1. Determine PrEP uptake and persistence using APCDs in Southern New England 2. Conduct a GIS analysis to assess rural-urban disparities in PrEP uptake and persistence across Southern New England	Apr-19	Scheduled For DRC Review
The State of Connecticut Office of the State Comptroller (OSC) and The Sesal Group	Health Care Option for Small Group	1. Evaluate historical claims data for Connecticut's small-group, fully-insured population to determine experience and trends. 2. Test feasibility of creating a publicly sponsored health care option for the small group population that can provide rate relief for small employer plan sponsors and coverage for their employees	Apr-19	Scheduled For DRC Review
University of Connecticut School of Medicine	Epidemiology of Chronic Illness among Connecticut Residents	1. Characterize the epidemiology of chronic illness among Connecticut residents from 2012 to 2019.	Apr-19	Submitted to APCD

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Next Meeting

➢ Additional input from neighboring states

➢ Use of APCD data for measurement of quality

➢ Assessment of CT Privacy Policy
  - Components
  - Comparisons to other states / best practices
  - First pass identification of areas for improvement

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