Arkansas Healthcare Transparency Initiative Board Meeting

January 12, 2016



Agenda

- I. Welcome
- II. Approval of Minutes
- III. Submitting entity registration/submission status
- IV. Data release process/forms
- V. Sustainability planning
- VI. Other business
- VII. Public comment

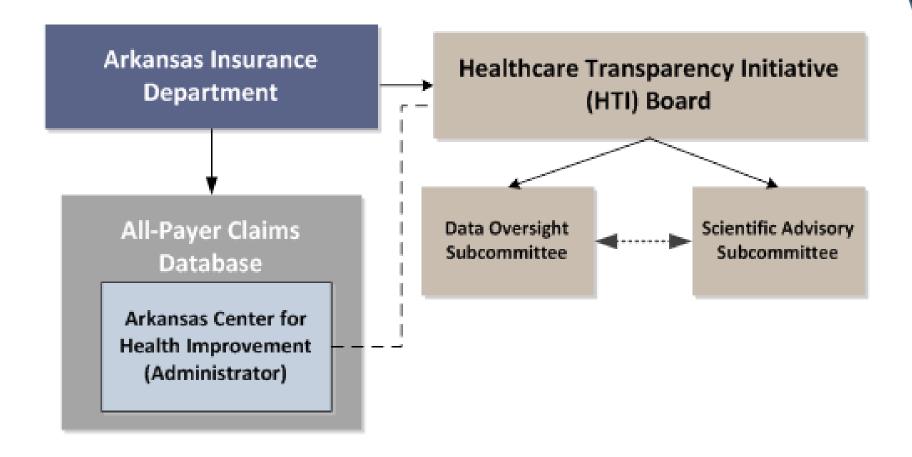


All-Payer Claims Database (APCD) Registration/Onboarding Status

- 20 groups have registered to submit data
- 64 usernames/passwords have been assigned
- 17 exemptions have been requested
- 3 entities have submitted test files
- Timeframe for submissions
 - 1/1/2016 test file deadline, although many have received exemptions to delay
 - 3/31/2016 historical file deadline for first group and every quarter through end of year



Governance Structure





Subcommittee Duties

- Found in bylaws based on statute and Rule 100
- Data Oversight Subcommittee—Review and make recommendations to AID through the Initiative Board regarding data requests
 - Consistency with the intent and purpose of the Initiative
 - Compliance with applicable federal/state law and regulation
- Scientific Advisory Subcommittee—Serve as peer review for researchers and provide advice regarding data requests for proposals and the scientific rigor of analytic work



Proposed Data Request Process

How it works

Step 1 - Data Request

The data requester will submit:

- Data Release Request
- Data Management Plan
- List of Requested Data Elements
- Certificate of Project Completion & Destruction of Data

Step 2 - Data Request Review and Approval

The Arkansas Center for Health Improvement (ACHI) will review data request forms and provide them to the Data Oversight Subcommittee, which will make recommendation to the Initiative Board. The Board will review the Subcommittee's recommendation and make a recommendation to the Insurance Commissioner for final decision. ACHI will inform the data requestor of the Commissioner's determination.



Proposed Data Release Process/Request

- Establish streamlined path for approval
 - Standard v. customized, academic v. nonacademic
- Request form contains:
 - Contact information
 - Project information
 - Data elements
 - Data linkage
 - Publication and dissemination
 - Other project participants



Proposed Data Products

- Standard/limited, pre-populated dataset
 - E.g., hospital discharges, physician visits, provider file
- Comprehensive dataset
 - E.g., all hospital claims/fields
- Custom dataset/report
 - Aggregated report
 - Analytic (the list of requested data elements will be used to specify elements)



Potential Pricing/Fee Schedule

	Hospital	Physician Price increases wi	Pharmacy	Dental	
Standard/ Limited	\$	\$\$	\$\$\$	\$\$\$\$	
Comprehensive	\$\$	\$\$\$	\$\$\$\$	\$\$\$\$\$	
Custom	\$\$\$	\$\$\$\$	\$\$\$\$\$	\$\$\$\$\$\$	



Business Model Considerations

- Price scaled to parameters of use and data comprehensiveness
 - Standard v. customized
 - For customized, report v. analytic dataset
 - One-time use v. multiple use
 - Length of time to be used
 - Academic v. non-academic



Sustainability in Other States

Kansas

- Imposes assessment on insurers, health maintenance organizations, group self-funded pools, and other reporting entities as authorized by the state
- Gifts, donations, and grants

Maine

- Annual assessment on providers and payers as authorized by the state
- User fees
- Grant funding



Sustainability in Other States

- Massachusetts
 - Data purchases
 - Partnerships with other state agencies
 - Grant funding
- Vermont
 - "Bill-back" approach for expenses rather than a prospective fixed fee
 - Receives a portion of annual state tax imposed on health insurers
 - Grant funding



Sustainability in Other States

Colorado

- Received funding from the Colorado Health
 Foundation and the Colorado Trust
- The Department of Health Care Policy and Financing received set-aside funding to offset the cost by offering scholarships
- Long-term sustainability will rely on fees for non-public datasets and reports
- Only APCD that is not directly supported by state funding



Arkansas Funding Strategies

- State funding
 - Bureau of Legislative Research
 - Taskforce dashboard
 - Attorney General
 - Set-aside scholarship fund
- Subscription fees/products
- Support of national/state initiatives
- Grant funding



Initiative Website

PRIMARY LEVEL								
Arkansas Healthcare Transparency Initiative Home Page								
SECONDARY LEVEL								
About the Healthcare Transparency Initiative			Reports		For Data Requesters	For Data Submitters		
TERTIARY LEVEL								
Initiative Governance	All-Payer Claims Database	How to use this page	News / Recent Documents	Access	Cost	Quality	Link to	Portal



Initiative Website

	Access	Network adequacy data	
Reports		Medicaid Dashboard – Per capita costs per eligibility category	
	Cost	Reports on costs to treat specific chronic diseases	
		Medical services pricing	
	Quality	State and county health rankings	
		"Choosing Wisely" recommendations	



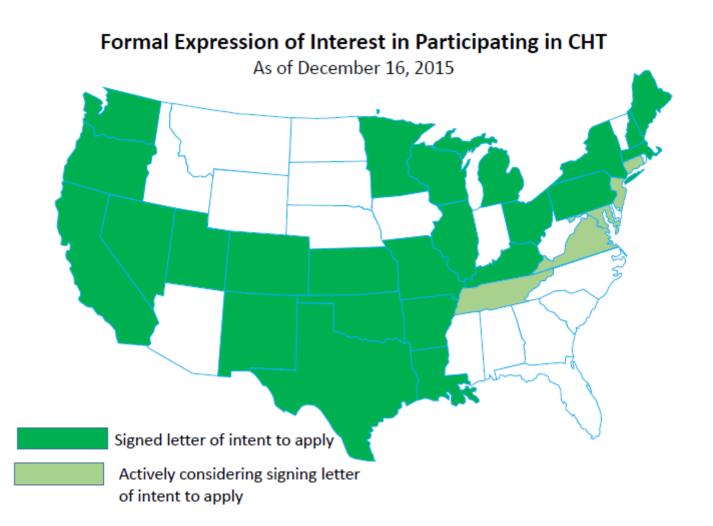
National Center for Healthcare Transparency

Vision:

- Through a national network of locally governed regional entities, the Center for Healthcare Transparency (CHT) will make information on the relative cost and quality of healthcare services available to 50 percent of the US population by 2020.
- Enable access to information for:
 - Employers, public purchasers, and health plans to pay for value and purchase high-quality healthcare at a fair cost;
 - Providers and health systems to improve their care, enhance provider and patient communication, and make more informed referrals; and
 - Patients to make informed choices and engage in healthcare decisions.



Center for Healthcare Transparency





- Other Business
- Public Comments
- Next Meeting

