



**Monthly Meeting Agenda
December 22, 2008
2-3pm**

Dian Kahn (VT), Patrick Miller (NH), Craig Schneider (MA), Tyler Brennan (NH), Bill Perry (ME), Jeff Ross (VT), Bob Woodward (NH), Brooks Daverman (TN), Al Prysunka (ME), Kevan Edwards (MN), Suanne Singer (ME), Tim Bartholow (WI), Jo Porter (NH)

1. Welcome New Members

MN – Kevan Edwards, MN Dept of Health. MN passed legislation last year focused on health reform. As part of that, they have been putting out RFPs for data collection and analysis for claims data. Some RFPs have been closed and others are still accepting bids. They have an aggressive timeline for implementation.

TN – Brooks Daverman. TN has some interest in building a claims data system, including interest by the Commissioner of finance and administration. They are very early in the process.

2. Updates from the States -

ME: Amended rules for harmonization with VT, NH. They have a January 8 hearing with board. There has been some resistance with data submitters (particularly new fields with providers) and addressing the mixing of billing with service providers. That issue will probably not be cleared up by end of 2008, but Al should have a better feeling about when issues will be resolved at the next RAPHIC meeting.

NH: NH is in the rules process, and changes have been submitted. There will likely be a hearing in Jan or Feb to allow comment. Changes will increase number of variables and align with harmonization.

VT: VT is receiving test files and notifying carriers if they have not received test files. They are finding that Medicare supplement/Medicare part D is posing unique challenges. They are working out issues with carriers for those lines of business.

MA: The Healthcare Quality and Cost Council site went live this month after a long effort and process. Due to budget cuts, the Healthcare quality and cost council staff has been disbanded; the responsibility is now in the Division of Health Care Finance and Policy. MA will continue contract MHIC through June 30 and will bring the data responsibilities in-house after the contract period.

WI: WHIO just distributed the datamart for pilot testing; it has been open for about 10 days. They have a 3 month period of investigation (no reporting) for testing.



3. Updates from the Payers

None represented

4. AHRQ grant updates

Contract: Convening grant submitted by RAPHIC (via UNH and NAHDO) to build support for standardization for APCD for this spring. We should hear back in mid-January.

Conference: 3 year convening grant submitted by RAPHIC (via UNH and NAHDO) to hold APCD conferences twice a year – one stand-alone; 1 with NAHDO. It is a competitive application, and we should hear back in May.

5. Other

Brooks Daverman (TN) asked if we have materials that states can use to make the “marketing” case. Craig directed him to the RAPHIC website for April 2008 conference presentations.

Bob W. asked if we can look into adding a discussion board to the RAPHIC website to allow for conversations. Also, have inquiries included in the newsletter that goes out with the monthly agenda.

We discussed the idea of bringing the issues of the claims data development to the Obama transition team, perhaps during a listening session around these issues. Jo/Amy will look into that.

Dian expressed a strong need for keeping the provider issue moving along, and would like the group to consider the best forum or mechanism for moving forward on that issue. Al mentioned that he has a conference call on Dec. 29 with major carriers (Anthem, Cigna, Aetna, Harvard Pilgrim, United) and will talk about billing versus service provider and issue of global claims. Carriers have concerns about systems changes that might be needed. NH, ME, VT will talk off-line to try to combine the conversations. WI will check to see if they are able to get the service provider in their data.