

RAPHIC

REGIONAL ALL PAYER
HEALTHCARE INFORMATION
COUNCIL

Monthly Meeting Agenda

June 1, 2009

2-3pm

Attendees:

Jo Porter (NH), Amy Costello (NH), Kevin Edwards (MN), Linda Green (MA), Craig Schneider (MA), Katherine Pellatreu (ME), Mike Thiry (FL), Al Prysunka (ME), Annette Gabel (Medco), Dian Kahn (VT), Mary Beth (CT), Julie Bartels (WI), Leslie Ludtke (NH), Tyler Brannen (NH), Bruce Boissonnault (NY), Brooks Daverman (TN)

State Updates:

NH (Tyler)

Tyler received several comments about the proposed changes to the NH rule and responded to each of the comments individually; he incorporated some changes, and is hoping for approval of proposed rules from JLCAR and will then develop the timeline with carriers for system changes for new data.

Tyler is also working with Legislation for requirement for collecting data on uninsured (detailed data similar to claims) – data in text format; NH bill only included hospital, CHC, hospital owned providers; there was discussion around use of common patient identifier to be able to track insured and uninsured as they move in and out of coverage.

ME (Al)

Healthcost website is live (<http://www.healthweb.maine.gov/claims/healthcost/Default.aspx>), presenting data on total cost paid for 36 different common services by top 10 payers including Medicare; Al is still working on Medicaid data.

Report about global claims is done and is back to legislative committee; but there is no consensus on resolution. MHDO is trying to work with Maine Heart Center; when facility and professional claims are collapsed into one claim, a lot of information is lost. Al has meeting scheduled with data processor and carrier to talk about NPI – problems with service NPI and billing NPI combination.

VT (Dian)

Working on first consolidated dataset in next couple of weeks; 1 straggler carrier and 1 straggler PBM submitting data for Jan 07-Dec 08; monthly submission through 09 continuing; BCBS – exemplary filers so data is coming in; researchers at the ready but will have caveats as quality checks continue;

In addition, medical home pilot is flagging patient eligibility data for med home pilot participation to be able to track outcomes over time for the pilot;

Also participating in RWJ Share evaluation;

Working with VT legislature on procedures with The Dartmouth Institute for variations in care study;

VT is in serious negotiations to get Medicaid data integrated in APCD;

And VT plans to have first revisit of rules to keep harmonized; submitted technical change to limit to claims for residents.

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MA (Linda)

MA is transitioning from MHIC to in-house processing; retro submission loaded into transactional warehouse; now looking at data; carriers are gradually coming on and signing up for data transfer tools. There is new MA regulation language for collection of race and ethnicity data– threshold for completeness of these fields will be raised gradually over time; carriers are unhappy because not sure which one to use (3 different code sets are possible); Budget year ends June 30 – funding will be directly impacted, including consulting and website, myhealthcareoptions, analytic projects, 1 staff person for administrative function; Linda’s unit will be picking up analytic load and project management; Claims data release plans: plan to do in 2 phases (1) Download of what is in data warehouse: lightly edited and minimally documented data – available to others if purpose aligns with data release policy; (2) hoping to have analytical data set later in year or in 2010 (e.g. for epis that would like to look at it for asthma rates, etc); license Mass Health Quality Partners for provider master list.

MN (Kevan)

MN has completed the rules process; the comment period is over and revisions have been made; rules document is in final review by administrative law judge; registration open for carriers to register with MHIC for submitting data; carriers can start submitting data on July 1. About to convene first meeting of provider peer grouping task force (16-18 individuals – plans, providers, consumer groups,) to determine methodology for reporting results of provider peer grouping and also assemble technical panel (local expertise for quality and cost info into peer index); goal is to write a report on provider peer grouping by fall and then RFP for hiring analytical vendor (early winter). The stakes are higher now because MN legislature recently decided to implement provider peer grouping methodology in reimbursement; after results are published, bottom 10% will no longer be able to contract with public programs; MN expects 8-10 issue papers about peer groupings to lay the foundation for analytical vendor groups bidding on the provider peer grouping analysis work.

TN (Brooks)

Meeting with legislators about proposed legislation to collect claims data; responding to some concerns; making it through committees.

NHQC (Bruce)

NHQC has been able to pull in large insurers; there were 2 side-by-side projects (1 Aetna, UHC; 1 with smaller carriers); all carriers are now submitting data except the 2nd largest; data is starting to line up. The portal for 14 providers is being used as a beta test to check on own data; providers must sign off before NHQC is able to release data for other uses; Future funding for the claims db is uncertain.

FL (Thiry) Listening, find out what others are doing, may be able to get momentum in FL

MHDC (Craig) Craig will be presenting at Academy Health conference later this month.

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Questions:

How many diagnosis codes?

A: AI indicated that he is seeing maybe 2 on claims; not as many as on HDDS

Which states are using DRG?

A: DRG added in NH VT and ME; small proportion of claims paid using DRG by carriers

How are we handling duplicate claims?

AHRQ contract update:

Good meeting with representatives from NAHDO, RAPHIC and Aetna, HPHC, UHC, AHIP, NCSL, Humana, NGA, CMS, Medicaid Medical Directors Learning Network on May 6. Payers were in favor of standardizing collection rules (didn't get to release part); strong agreement to standardize data collection; warm to idea that individual states might want additional elements and standard. There was also some discussion of Health Quality Alliance high value health care project.

Next RAPHIC meeting date: June 29, 2009