



**Monthly Meeting Agenda
September 29, 2009
2-3pm**

Attendees:

Craig Schneider (MHDC), Denise Love (NAHDO), Emily Sullivan (NH), Annette Gabel (Medco), Leslie Ludtke (NH), Lalita Pulavarti (MA), dian Kahn (VT), Keely Cofrin Allen (UT), Hal Kilburn (NY), James Oliver (OR), Suanne Singer (MHIC), Amy Costello (RAPHIC), Jo Porter (RAPHIC), Patrick Miller (RAPHIC)

Updates from States:

Oregon – APCD legislation passed; administrative rules are being drafted and will be put in place to collect data on January 1, 2010;

Massachusetts – The public use file of 2.5 years of medical claims and eligibility data was released in early September (July 2006 – December 2008). Pharma claims data coming in 2010. Started with 13 fields to create a unique id; had to take into account the completeness of fields – unique member ID 98% match (using fields that are 100% populated).

Utah – one plan is submitting data. Keely was able to view data tables in Sequel. On the policy side, UT is managing some concerns that are coming in from plans that are joining the process late (after public comment closed in early September) – UT is hearing from plans that are concerned about being compliant; a letter came from AHIP outlining concerns and reservations about the claims data rules – concerns that UT is doing it differently from other states. On the technical side, UT is cleaning data and using matching algorithms and sending data to Care Advantage to be able to analyze for presentation to NAHDO. Data committee meeting will be held on Tuesday at 3:00.

New Hampshire – Study committee is meeting to discuss legislation that went through last year – the difference between hospital and physician billing – difference between service and provider (location of service performed). She spoke with AI about similar issue – idea of whether we want to come up with standard for population of the claims that defines these fields clearly and requires the collection. In NH, if you collect, you must submit. If you don't collect, then you file for exemption. Essentially, NH does not have authority to regulate information that is collected (secondary submission requirement). So, first it should be determined whether legislation for collection (not just submission) is appropriate, and then define whether there is a need for regional standards for requiring collection/population of fields? AI refers to it as clean claim legislation – defining service provider and billing provider etc. Maine spends about \$200K on this matching. Tyler is working on this for healthcost website. Leslie proposed meeting with states that are interested in this proposal to draft legislation. Dian from Vermont and Lalita from Massachusetts both expressed interest.

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Vermont - First data set for medical, pharmacy almost ready to go; working on Medicare Part D ; collecting production files for the major insurers on a monthly basis. Working with the MHIC on a series of report efforts – working with VT medical home pilots so eligibility records are flagged with members in the medical home pilots – working on data release agreements – negotiation with state Medicaid agency to get Medicaid data integrated (coded to meet standard for commercial data) and HHS will control data release and use.

New York – Hal Kilburn noted that there have been a number of internal discussions to talk about moving forward with this. No concrete plans to move forward yet, but higher level of involvement in the agency; will be attending NAHDO – formally exploring the idea.

Massachusetts Health Data Consortium –There is a half day forum at Suffolk University law school on December 1 for policy making community to let them know that MA has this great asset that can be used for healthcare cost and quality study and policy making. . Registration website will be available in October; information will be sent to RAPHIC members at that time.

Updates from Payers:

Annette Gabel is creating a task group for developing standard format for submission of pharma claims.

Update about letters to Senators Baucus and Grassley:

Proposing that a provision be inserted into the Finance Committee bill to serve as a vehicle for controlled state access to Medicare data. http://www.raphic.org/pdf/200909_letter-baucus.pdf

Denise has received acknowledgement from both Senators that they received the letters (everything is on the back burner while the finance bill takes precedence). No meetings or follow-ups scheduled with Senators at this time. Leavitt's office will be at NAHDO. ASPE will also be at NAHDO and will speak. CMS is award of letter which is a good thing. Medicare has de-identified data available but the APDs may require a research data set. Medicare's file structure has changed and Maine is in the process of remapping.

NAHDO conference update:

NAHDO invites all states to bring and share materials about your state APCD initiatives at a NAHDO/RAPHIC table during the meeting. This may include reports, links, rules, demos, etc. There will also be a NAHDO/RAPHIC reception after the APCD session – informal and upstairs

NEXT RAPHIC CALL: October RAPHIC call will be October 26 at 2:00

RAPHIC discussion group launched: <http://groups.google.com/group/raphic>