**Virginia All-Payer Claims Database (APCD)**

**Advisory Committee Meeting Minutes**

June 18, 2019

(866)-906-0123 #6824846

Richmond, Virginia 23219

Members Participating by Phone: Dr. Charles Frazier (Chair), Jonathan (Jon) DeShazo, Al Hinkle, Cheryl Turney, Marcia Yeskoo

Others Participating by Phone: Kyle Russell (Virginia Health Information- VHI), Nicole Sidrak (Virginia Health Information- VHI)

Call to order at 4:00 p.m.

Dr. Frazier welcomed the members and guests of the All-Payer Claims Database (APCD) Advisory Committee (hereafter “the Committee”).

Dr. Frazier asked if any members of the public were attending; There were none.

Committee members received the appended document outlining each request prior to the meeting (See Appendix). Before beginning their review of all requests contained in this document, the Committee agreed to review and vote on requests 3, 4, and 5 at one time rather than separately.

**Request 1:** (See Appendix, *1. Approval of Standardized Proxy Reimbursement Methodology*) Kyle summarized that the first request is to publish an overview of the current standardized proxy reimbursement methodology, allowing payers the option to request more detailed calculation information to validate their own data. The purpose for this request is to increase transparency without risking the calculation of actual amounts via reverse engineering. Kyle added that Committee approval would be valid for the next year, during which time alternative methodologies will be explored.

Dr. Frazier asked if the Committee had any clarifying questions; There were none.

Jonathan DeShazo moved to approve the request. The motion was seconded and carried.

**Request 2:** (See Appendix, *2. Virginia Center for Health Innovation*) Kyle detailed that this data is being requested by the Virginia Center for Health Innovation (VCHI) as part of a grant project to share internal data with six major health systems in the Commonwealth. Since each health system would be receiving only their own data rather than public reports being generated, a Data Subscriber Agreement (DSA) is needed to cover the work. Kyle mentioned that the data being requested is an extension of what has already been done and includes no plan-specific identifiers, but since the DSA is needed, the Committee must approve the request.

Jon asked about the rules and regulations associated with resharing APCD data outside of the approved organization.

Kyle explained that sharing APCD data with someone who hasn’t signed a DSA is considered public release of data and that organizations should disclose their distribution plan to the committee for review.

Dr. Frazier asked if the Committee had any clarifying questions; There were none.

Jon moved to approve the request. The motion was seconded and carried.

**Requests 3-5:** (See Appendix, *3. Carilion Clinic Health System*, *4. Inova Health System*, and *5. Hospital Corporation of America (HCA) Capital Division*)Dr. Frazier reiterated that the Committee agreed to review and vote on these requests at one time due to their similar nature.

Kyle explained that these requesting entities are aware of the mandate approaching and are requesting data in light of losing access to Milliman’s MedInsight platform on July 1, 2019.

Dr. Frazier asked if the Committee had any clarifying questions. Jon asked about the nature of the one-year timeline for each request. Kyle confirmed that the requests will need to be approved again after one year.

Jon moved to approve the request. The motion was seconded and carried.

**Request 6:** (See Appendix, *6. Joint Commission on Healthcare*) Kyle described that unlike the Virginia Department of Health, the Joint Commission on Healthcare is an entity subject to the Committee review process when requesting data. He summarized that they are attempting a study related to comparing retail vs. mail order pharmacies, the findings of which will be made public.

Dr. Frazier asked if the Committee had any clarifying questions. Al Hinkle asked what the criteria is for an entity to sign a shortened DSA. Kyle answered that the requested report must contain no plan or provider identifiers and no observation counts greater than 11.

Jon moved to approve the request. The motion was seconded and carried.

**Request 7:** (See Appendix, *7. Virginia Commonwealth University (VCU)*)Kyle outlined that the purpose of this request is to add Ph.D. student Cindy Crump as an authorized user to Virginia Commonwealth University’s (VCU’s) existingDSA, signed by Alex Krist. Cindy is requesting data to develop a risk scoring model for telehealth. Kyle added that the request is predominately Medicare data and contains no plan or provider identifiers but is fairly granular.

Jon mentioned that Cindy is one of his students and recused himself from the vote.

Al asked if the Committee can expect more or less requests for similar intended uses for the data in the future. Kyle answered that since the newly mandated funding structure is more favorable for data subscribers than in the past, people are incentivized to request more.

Al moved to approve the request. The motion was seconded and carried.

Dr. Frazier asked if there were any public comments or any further discussion needed from Committee members, and there were none. Dr. Frazier adjourned the body at 4:31 p.m.

**Data Requests Submitted for APCD Data Review Committee Consideration**

Prepared by VHI for 6/18/19 meeting

1. **Approval of Standardized Proxy Reimbursement Methodology**

Milliman’s GlobalRVU software assigns Relative Value Units (RVUs) to all healthcare services, including those on physician, facility and pharmacy claims. Medicare’s RBRVS methodology assigns RVUs to most professional services. Milliman GlobalRVUs extend this concept to assign RVUs to facility and pharmacy claims as well as other professional fee schedules (e.g. anesthesia, DME, lab), so that RVUs can be calculated for all services and applied to all lines of business (commercial, Medicaid, etc). Regardless of the type of service (e.g. inpatient admissions, outpatient surgery, MRI), procedures or services requiring similar levels of resources will have approximately the same number of RVUs.

Milliman receives actual billed, paid and member cost share dollars on the source claims from the VHI data suppliers. Allowed dollars are derived from the submitted financial data in the source claims by adding the paid amounts and member cost share. For each line of business, Milliman sums the allowed and paid dollars from all data suppliers by Metropolitan Statistical Area (MSA) and Health Cost Guideline (HCG) benefit category, and calculates conversion factors for RVUs by dividing dollars by the RVUs. The proxy allowed and paid dollars for each service is calculated by multiplying the number of RVUs by the conversion factor for each HCG benefit category and MSA (data from some smaller MSAs are combined).

Using this methodology, the conversion factor is reflective of allowed and paid amounts within the Commonwealth of Virginia, but does not represent the actual allowed dollars of any specific data supplier or provider. The conversion factor is essentially a blend of all the allowed dollars by all the contributing data suppliers. This approach prevents users from determining actual allowed amounts through reverse engineering. This methodology will be applied to all claims regardless of payer type, except for Medicare FFS claims. Additional information on the standardized proxy reimbursement amount is available by request.

1. **Virginia Center for Health Innovation**

**Point of Contact-** Beth Bortz, President and CEO, bbortz@vahealthinnovation.org

**Overview of Request:**

With support from Arnold Ventures, the Virginia Center for Health Innovation (VCHI) launched a statewide pilot to reduce the provision of low-value health care in Virginia. Low-value health care includes medical tests and procedures that research has proven add no value in particular clinical circumstances and can lead to potential patient harm and a higher total cost of care.

This project is aligned with Aim I (reducing low-value care) of VCHI’s [Health Value Dashboard.](https://www.vahealthinnovation.org/virginia-health-value-dashboard/) The project will utilize a two-part strategy to drive a significant reduction in seven provider-driven low-value care tests and procedures. Over three years, we will focus specifically on producing a 25 percent relative reduction in seven low-value care measures that are provider-driven while also prioritizing up to six consumer-driven measures for our next phase of work.

VCHI will work with the leadership of six Virginia health systems and three clinically integrated networks on this project: Ballad Health; Carilion Clinic; HCA and Virginia Care Partners; Inova and Signature Partners; Sentara and Sentara Quality Care Network; and VCU Health System. In addition, a complimentary employer task force will be formed with the aims of increasing employer knowledge of low-value health care, exposing Virginia employers to employers that are mobilizing for improvement, and engaging employers in action they can take in employee communications, benefit design, and contracting to drive sustainable improvement. Both the Virginia Chamber of Commerce and the Virginia Business Council are project partners.

<https://www.vahealthinnovation.org/virginia-health-value-dashboard/smartercarevirginia/>

**Data considerations for request:**

* Reports from the Virginia APCD will be shared with leadership at each health system using the health waste calculator tool from Milliman
* All information will be displayed using a standardized proxy reimbursement amount
* None of the data provided will identify individual health plans
* Data and reports provided will include individual provider identifiers, the total number of services that correspond to each health waste calculator measures, the number of services identified as low-value for each health waste calculator measure, the total standardized proxy reimbursement amount associated with each service and other major geographic and demographic parameters

**Can shortened Data Subscriber Agreement (DSA) be signed?** No

**Length of Agreement:** 3 years

1. **Carilion Clinic Health System**

**Point of Contact-** David Haws, Director of Planning, dihaws@carilionclinic.org

**Overview of Request:**

Carilion Clinic Health System is requesting a data extract from the Virginia APCD for the following intended uses:

* Market share calculations
* Determining changes in overall Payer Mix (Medicare vs Medicaid vs Commercial)
* Healthcare utilization trends within the region
* Determining how to distribute physician FTEs by regional needs
* Physician referral patterns

**The data extract will be comprised of the following fields:**

1. Member County of Residence
2. Member Zip Code of Residence
3. Member Age Band
4. Member Gender
5. De-identified Person Key
6. Health Cost Guideline (HCG) categories
7. Payer Line of Business (Medicaid, Medicare, Commercial)
8. Total Proxy Allowed
9. Total Utilization
10. DRG Code and Description
11. Primary ICD Diagnosis Code, Description and Category
12. 2nd ICD Diagnosis Code, Description and Category
13. CPT Procedure Code, Description and Category
14. Primary ICD Procedure Code and Description
15. Claim ID
16. Attributed PCP NPI, Name
17. Service Provider NPI, Name, Specialty
18. Billing Provider NPI, Name Specialty
19. Revenue Code
20. Place of Service Code
21. Incurred Date
22. Admit and Discharge Dates

**With the following filters/constraints:**

* Carilion Clinic defined geographical service area only (Exhibit 1)
* Inpatient facility, outpatient facility and professional claims only
* Within these HCG the following HCGs are not being requested:
1. Vision
2. DME
3. Pharmaceuticals
4. Lab
5. Anesthesia
6. Ambulance
7. Private Duty Nursing
8. Hearing and Speech
9. I  Prosthesis
10. Benefits Glasses, Contacts
11. Office Administered Drugs
12. SNF
13. Benefits Other
14. Preventive Immunizations
* 2015 claims through data updates made available over the upcoming year

**Can shortened DSA be signed?** No

**Length of Agreement:** 1 year

1. **Inova Health System**

**Point of Contact:** Paul Dreyer, Director of Strategic Planning, paul.dreyer@inova.org

**Overview of Request:**

Inova Health System is requesting a data extract from the Virginia APCD for the following intended uses:

* Market share calculations
* Physician referral patterns
* Patient utilization pattern analysis

**The data extract will be comprised of the following fields:**

1. Incurred Date
2. Claim ID
3. De-Identified Person Key
4. Member Zip Code of Residence
5. Member Age Band
6. Member Gender
7. HCG Categories
8. Medical Episode Grouper Label, Number
9. Medical Episode Grouper Managing and Primary Provider
10. Payer Line of Business
11. Service Provider NPI, Name, Specialty
12. Attributed PCP NPI, Name
13. Billing provider NPI, Name
14. CPT Procedure Code and Groupings
15. ICD Procedure Codes and Groupings
16. Diagnosis Codes (primary and secondary) and Groupings
17. Total Proxy Allowed
18. Total Utilization
19. DRG Code And Description
20. Primary ICD Procedure Code and Description
21. Revenue Code
22. Admit and Discharge Dates
23. Place of Service Code

**With the following filters/constraints:**

* Limited to Planning District 8 (northern Virginia)
* Professional, inpatient and outpatient claims only
* 2016 claims through data updates made available over the upcoming year

**Can shortened DSA be signed?** No

**Length of Agreement:** 1 year

1. **Hospital Corporation of America (HCA) Capital Division**

**Point of Contact:** Dan Thurman, Director of Decision Support Services, daniel.thurman@hcahealthcare.com

**Overview of Request:**

HCA Health System is requesting a data extract from the Virginia APCD for the following intended uses:

* Market share calculations
* Physician referral patterns/Leakage analysis
* Patient utilization pattern analysis
* Overall utilization trends

**The data extract will be comprised of the following fields:**

1. Member Age Band
2. Indicator for if Member is over 18
3. Member Gender
4. HCG Categories
5. Incurred date
6. Member Zip Code of Residence
7. Member County of Residence
8. Payer Line of Business
9. CPT Procedure Code and Groupings
10. Total Proxy Allowed
11. Total Utilization
12. Billing Provider NPI, Name
13. Service Provider NPI, Name and Specialty
14. All primary and secondary diagnosis codes, descriptions and categories
15. Attributed PCP NPI, Name
16. Claim ID
17. De-Identified Person Key
18. Claim Status
19. Place of Service Code

**With the following filters/constraints:**

* 2015 claims through all data updates made available over the upcoming year
* Outpatient facility and professional claims only

**Can shortened DSA be signed?** No

**Length of Agreement:** 1 year

1. **Joint Commission on Healthcare**

**Point of Contact-** Andrew Mitchell, Senior Health Policy Analyst, amitchell@jchc.virginia.gov

**Overview of Request:**

Per Joint Commission- “The JCHC study is focused on HB 2223, which would have required insurers/PBMs to allow patients to fill any mail order-covered prescriptions at a network participating retail community pharmacy under certain conditions. A report on trends in pharmaceutical prescriptions filled by mail order and retail community pharmacies will provider background information to the study”

How the data will be used- “findings from the report will be incorporated into the JCHC study report given to JCHC legislators as both a PPT presentation and written final report”

**Data considerations for request:**

* Data will be provided in the form of an aggregate report
* The parameters of the report have been requested as:

“By 1) mail order pharmacies (healthcare taxonomy code 3336M0002X) vs retail/community pharmacies (3336C0003X), and 2) therapeutic class:

* Annual quantity of prescriptions filled
* Annual quantity of prescriptions for multi-source drugs
* Annual quantity of prescriptions for multi-source drugs dispensed as generics
* Annual quantity of prescriptions for single-source drugs”
* Time period: The most recent 2-3 years of claims
* Included Health plans: all plans regulated by the State, excluding Medicaid (not individual health plan specific)

**Can shortened DSA be signed?** Yes

1. **Virginia Commonwealth University (VCU)**

**Point of Contact:** Alex Krist, MD, MPH, Professor and Family Physician, alexander.krist@vcuhealth.org

**Overview of Request:**

A doctoral student at VCU would like to utilize a data extract from the Virginia APCD as the foundation of her dissertation “A Risk-Based Scoring Model for Telehealth”. Below is an abstract from her dissertation:

“The objective of the proposed research is to develop a predictive model of the effect of patient characteristics on outcomes and resource utilization in telehealth interventions for chronic disease management. Clinical studies have shown the effectiveness and economic efficiencies of home telehealth, with improved access to care, better health outcomes and patient adherence to treatment. However, results show high variability across settings and populations. The hypothesis of this study is that patient characteristics, including disease type, demographics, socio-economic factors, technology affinity, and self-efficacy may play a role in determining telehealth intervention outcomes. The proposed model borrows approaches and methodologies from the domain of risk-based credit scoring in the finance sector. Translating the concept of a risk-based financial model to the telehealth setting, risk stratification could identify patients who are expected to respond well to telehealth-based treatment for chronic illness, or for whom telehealth-based care may not be the best approach. The envisioned model, embodied in a patient “Health Needs” score, would enable providers to deliver treatment tailored to each patient’s needs and preferences, thereby achieving population health objectives that realize the promise of value-based care.”

**The data extract will be comprised of the following fields:**

1. Member County of Residence
2. Member Zip code of Residence
3. Member Ethnicity
4. Member Race
5. Member Gender
6. De-identified Person Key
7. Relation Detail and Type
8. Chronic Condition Hierarchical Grouping (CCHG) and Label
9. Total Proxy Allowed
10. Total Proxy Paid
11. Total Proxy Member Paid
12. Total Admits
13. Total RX Days Supply
14. Total Utilization
15. Total RVUs
16. Primary and Secondary Diagnosis Codes
17. CPT Procedure Codes and Groupings
18. DRG Code and Descriptions
19. Primary and Secondary ICD Procedure Codes
20. HCG Categories

**With the following filters/constraints:**

* Only data for Medicare FFS patients will be provided
* Data set will only include claims from 2016 through the first half of 2018
* Data will only be provided for patients with a claim for a valid telehealth modifier or meet the control group criteria (diagnosed with heart failure, COPD, hypertension, type 2 diabetes)

**Can shortened DSA be signed?** No, VCU already has signed a full DSA which will be updated with Cindy Crump, Ph.D. candidate as an authorized user and this specific dissertation research added as an approved use of the data

**Length of Agreement:** VCU’s current agreement runs through March of 2020

**Exhibit 1- Carilion Service Area**

24523, 24526, 24536, 24551, 24556, 24095, 24178, 24104, 24570, 24121, 24122, 24174, 24416, 24435, 24555, 24439, 24450, 24415, 24578, 24579, 24472, 24473, 24483, 24065, 24067, 24088, 24092, 24101, 24146, 24102, 24137, 24151, 24176, 24184, 24072, 24079, 24091, 24105, 24380, 24086, 24093, 24124, 24128, 24134, 24136, 24147, 24150, 24167, 24060, 24073, 24061, 24062, 24063, 24068, 24111, 24087, 24138, 24149, 24162, 24324, 24058, 24126, 24129, 24132, 24084, 24347, 24301, 24141, 24142, 24143, 24064, 24066, 24077, 24130, 24438, 24083, 24085, 24090, 24175, 24127, 24131, 24011, 24012, 24013, 24014, 24001, 24002, 24003, 24004, 24005, 24006, 24007, 24008, 24009, 24010, 24022, 24023, 24024, 24025, 24026, 24027, 24028, 24029, 24030, 24031, 24032, 24033, 24034, 24035, 24036, 24037, 24038, 24040, 24042, 24043, 24044, 24045, 24048, 24015, 24016, 24017, 24059, 24070, 24018, 24019, 24020, 24179, 24153, 24155, 24157, 24314, 24315, 24318, 24366, 24601, 24602, 24604, 24605, 24606, 24608, 24609, 24612, 24613, 24619, 24622, 24630, 24635, 24637, 24639, 24640, 24641, 24377, 24651, 24313, 24312, 24322, 24323, 24350, 24360, 24368, 24374, 24382, 24422, 24426, 24448, 24457, 24474, 24054, 24055, 24113, 24114, 24115, 24078, 24089, 24112, 24148, 24165, 24168, 24053, 24076, 24082, 24120, 24133, 24177, 24171, 24185, 24712, 24714, 24701, 24724, 24729, 24732, 24737, 24738, 24739, 24751, 24715, 25820, 25841, 24731, 24733, 25971, 24736, 24740, 24747, 25922, 24918, 24941, 24945, 24951, 24963, 24974, 24976, 24985, 24983, 24984, 24993, 24421, 24430, 24431, 24432, 24411, 24463, 24469, 24476, 22939, 24437, 24440, 22952, 24459, 24467, 22843, 24477, 24479, 24482, 24485, 24486, 24401, 24402, 22980, 24603, 24239, 24614, 24620, 24622, 24624, 24627, 24628, 24631, 24634, 24639, 24646, 24647, 24656, 24657, 24658, 24312, 24317, 24325, 24328, 24343, 24351, 24352, 24381, 24333, 24326, 24330, 24348, 24363, 24378, 24292, 24540, 24543, 24544, 24541, 24527, 24530, 24069, 24531, 24549, 24557, 24563, 24565, 24566, 24569, 24139, 24586, 24161, 24594, 24517, 24528, 24538, 24550, 24576, 24554, 24571, 24588, 24501, 24502, 24505, 24506, 24512, 24513, 24514, 24515, 24503, 24504, 22801, 22802, 22803, 22807, 22811, 22812, 22815, 22820, 22821, 22827, 22830, 24441, 22831, 22833, 22848, 22850, 22832, 22834, 22840, 22841, 22846, 24471, 22853, 24311, 24316, 24319, 24354, 24370, 24375, 24910, 24916, 24925, 25958, 24902, 24961, 25972, 24931, 24938, 24943, 24901, 24957, 25981, 25962, 24966, 24970, 25984, 24977, 24986, 24991, 24815, 24828, 24844, 24850, 24862, 24868, 24873, 24879, 24884, 24830, 24831, 24836, 24842, 24843, 24846, 24848, 24853, 24855, 24861, 24866, 24871, 24872, 24878, 24881, 24887, 24888, 24892, 24894, 24895, 24808, 24811, 24813, 24816, 24817, 24824, 24826, 24829, 24523, 24526, 24536, 24551, 24556, 24095, 24178, 24104, 24570, 24121, 24122, 24174, 24416, 24435, 24555, 24439, 24450, 24415, 24578, 24579, 24472, 24473, 24483, 24065, 24067, 24088, 24092, 24101, 24146, 24102, 24137, 24151, 24176, 24184, 24072, 24079, 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24076, 24082, 24120, 24133, 24177, 24171, 24185, 24712, 24714, 24701, 24724, 24729, 24732, 24737, 24738, 24739, 24751, 24715, 25820, 25841, 24731, 24733, 25971, 24736, 24740, 24747, 25922, 24918, 24941, 24945, 24951, 24963, 24974, 24976, 24985, 24983, 24984, 24993, 24421, 24430, 24431, 24432, 24411, 24463, 24469, 24476, 22939, 24437, 24440, 22952, 24459, 24467, 22843, 24477, 24479, 24482, 24485, 24486, 24401, 24402, 22980, 24603, 24239, 24614, 24620, 24622, 24624, 24627, 24628, 24631, 24634, 24639, 24646, 24647, 24656, 24657, 24658, 24312, 24317, 24325, 24328, 24343, 24351, 24352, 24381, 24333, 24326, 24330, 24348, 24363, 24378, 24292, 24540, 24543, 24544, 24541, 24527, 24530, 24069, 24531, 24549, 24557, 24563, 24565, 24566, 24569, 24139, 24586, 24161, 24594, 24517, 24528, 24538, 24550, 24576, 24554, 24571, 24588, 24501, 24502, 24505, 24506, 24512, 24513, 24514, 24515, 24503, 24504, 22801, 22802, 22803, 22807, 22811, 22812, 22815, 22820, 22821, 22827, 22830, 24441, 22831, 22833, 22848, 22850, 22832, 22834, 22840, 22841, 22846, 24471, 22853, 24311, 24316, 24319, 24354, 24370, 24375, 24910, 24916, 24925, 25958, 24902, 24961, 25972, 24931, 24938, 24943, 24901, 24957, 25981, 25962, 24966, 24970, 25984, 24977, 24986, 24991, 24815, 24828, 24844, 24850, 24862, 24868, 24873, 24879, 24884, 24830, 24831, 24836, 24842, 24843, 24846, 24848, 24853, 24855, 24861, 24866, 24871, 24872, 24878, 24881, 24887, 24888, 24892, 24894, 24895, 24808, 24811, 24813, 24816, 24817, 24824, 24826, 24829