

Office of Health Reform & Innovation

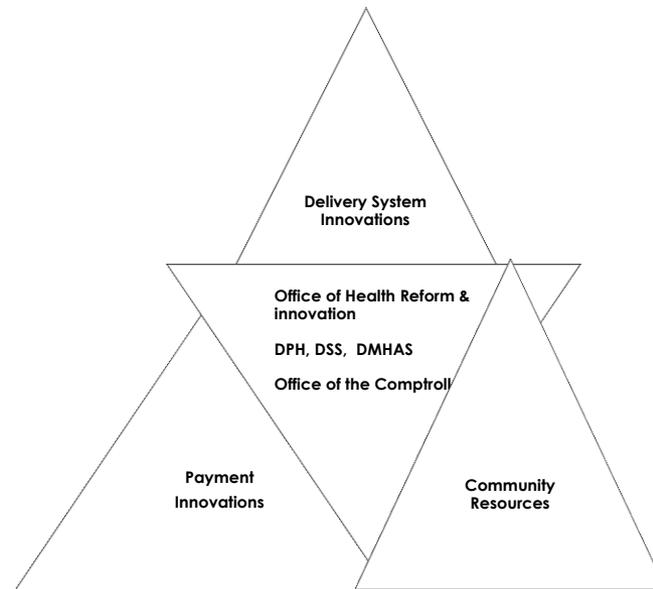
State Innovation Model (SIM)

Consumer Advisory Board

Basic Health Plan Work Group

All Payer Claims Database

State Innovation Model (SIM)



Grant Opportunity through Center for Medicare and Medicaid Innovation: State Innovation Model Initiative

A comprehensive Health Care Innovation Plan that's supported by payment and service delivery models and other "levers and strategies that can be applied to influence the structure and performance of the health care system".

Sample Planning Process (SIM)

Requirements

Work Structure

Costs

Schedule

Project
Organization
Structure

Communication

Procurement

Quality
Management

Risk
Management

Presentation

Kick-off Meeting

Sample Planning Process (SIM)

OHRI – October – December Planning



Consumer Advisory Board

Participation in Health Justice Town Hall

October 23, 2012 LOB-and other locations via social media

Panel discussion

Most advisory board members attended with representatives from their respective organizations

Invited public to participate in health reform activities through the AB

Basic Health Plan Workgroup

Workgroup – Meetings (6) + December 17, 2012

November 19, 2012

October 15, 2012

September 24, 2012

July 9, 2012

May 22, 2012

April 9, 2012

- [Presentation by Milliman Actuarial Consultants](#)
- [Presentation by University of Massachusetts Consultants](#)
- [Governor Malloy's letter to Secretary Sebelius](#)

Basic Health Plan Workgroup

Workgroup Membership

Jeannette DeJesús, Chair
*Special Advisor to the Governor on Health Reform
Office of Health Reform & Innovation*

Senator Terry Gerratana
Co-Chair, Public Health Committee

Representative Betsy Ritter
Co-Chair, Public Health Committee

Senator Anthony Musto
Co-Chair, Human Services Committee

Representative Peter Tercyak
Co-Chair, Human Services Committee

Patricia Baker
*President and CEO
Connecticut Health Foundation*

Roderick Bremby
*Commissioner
Department of Social Services*

Sharon Langer
*Senior Policy Fellow
Connecticut Voices for Children*

Jane McNichol
*Executive Director
Legal Assistance Resource Center of Connecticut*

Jewel Mullen, MD
*Commissioner
Department of Public Health*

Deb Polun
*Director of Government Affairs
Community Health Center Association of
Connecticut*

Patricia Rehmer
*Commissioner
Department of Mental Health & Addiction
Services*

Matt Salner
*Policy Analyst
Office of Health Reform & Innovation*

Keith Stover

Victoria Veltri
State Healthcare Advocate

Susan Walkama
*President and CEO
Wheeler Clinic*

Technical Advisors

Robert Seifert
*Principal Associate
Center for Health Law and Economics
University of Massachusetts Medical School*

Katharine London
*Principal Associate
Center for Health Law and Economics
University of Massachusetts Medical School*

Bobbi Schmidt
*General Counsel
Office of Health Reform & Innovation*

Uma Ganesan
*Medical Care Administration
Department of Social Services*

Basic Health Plan Workgroup

Report to the Working Group-

December 17, 2012 Meeting:

Presentation of the Final Report by Milliman to the Workgroup

Presentation to Healthcare Cabinet
Connecticut All Payer Claims Database (APCD)

Office of Health Reform & Innovation

Jeannette DeJesús, Special Advisor to the Governor

Bobbi Schmidt, General Counsel

November 13, 2012

Connecticut All Payer Claims Database (APCD)

Establishment of an APCD in Connecticut—major accomplishments to date

With the guidance of the APCD Advisory Group and strong support of the payer community and a broad range of stakeholders we are on target to achieving the goal of an APCD that can begin to provide data in 2014

In accordance with Public Act No. 11-58, Section 11, the Office of Health Reform & Innovation convened a work group in the fall of 2011 to develop a plan to implement a state-wide multi-payer data initiative

In the months leading up to the groups first meeting, Jeannette conducted a series of meeting with the payers to gain their commitment to the development of an APCD.

The work group accepted the recommendation and the creation of an APCD dedicated to improving healthcare delivery through the collection, public availability and use of health data to support the state's goals for health care reform became the focus of the OHRI and the advisory group

The APCD will:

- Improve the quality and affordability of health care coverage
- Achieve better clinical and financial outcomes for Connecticut's citizens
- Improve performance of the health care delivery system

Connecticut All Payer Claims Database (APCD)

Establishment, continued

The Governor proposed and the Legislature enacted APCD enabling legislation in the 2012 session.

Public Act No. 12-166 creates a foundation upon which to build an APCD

- APCD is to be administered by the Office of Health Reform & Innovation
- APCD Advisory Group was substituted for the original working group
- Funding: obtained \$6.5 million as part of the Level II Establishment Grant for the Connecticut Health Insurance Exchange for the start-up of the APCD
- Issued Proposed Regulations for the APCD on October 30, 2012. A Public hearing is scheduled for November 19, 2012, and public comment period ends on November 29, 2012
- APCD Work Plan -initial data files and reports to be available to the Exchange in the 2Q of 2014.

CT-All Payer Claims Database

APCDs very specific in purpose

Increasing interest in APCDs as a tool to support broad-based health improvement efforts

11 states Operate APCDs

Massachusetts, New Hampshire and Maine.

Connecticut is one of the states in the region—including New York and Rhode Island—that are at various stages of developing APCDs

CT-All Payer Claims Database

What Data is Included?

- Eligibility and claims data, including member demographic information, type of product (HMO, POS, Indemnity, etc.),
- Diagnosis and procedure codes, service dates, provider information, plan charges and payments, and member responsibility (i.e., co-pay, coinsurance, deductible)
- Claim and eligibility data can be augmented with information on non-claim based financial transactions (i.e., capitation, pharmacy rebates, etc.) product/benefit information, and premium information

CT-All Payer Claims Database

Initial Focus—Supporting the Exchange

- Help consumers make health care purchases
- Monitor the quality of care provided both at the health plan and at the provider level
- Evaluate the impact of the Exchange on access, quality, health status and changes in health outcomes for Exchange enrollees.
- Market coverage and structure decisions
- Evidence of adverse selection

CT-All Payer Claims Database

APCD will also:

- Support activities that improve the cost and quality of health care
- Provide data to support the state's health reform goals
- Provide consumers with information through a web-based portal concerning the cost and quality of healthcare services to allow economically sound and informed health care decisions
- Make data available to the Connecticut Health Insurance Exchange, policy makers, researchers and others to better understand statewide costs, quality, utilization patterns, and other healthcare measures

CT-All Payer Claims Database

Other potential uses:

- To evaluate care coordination and payment models to identify and build on successful models that provide cost-effective, quality care
- Support quality improvement through better understanding of variation in services and disparities in quality
- Enable targeted public health initiatives
- Support informed decision-making by employers in designing health benefits plans for their employees
- Give providers tools to improve quality and effectiveness through performance review and benchmarking

CT-All Payer Claims Database

Examples of questions the APCD may help to answer:

What is the average length of time people are using anti-depressant medications?

How far do people travel for services? Which services?
In what geography is public health improving?

What proactive programs should be established to address chronic conditions—e.g., diabetes?

What is the cost of care in all health care settings for an episode of care for specific conditions, e.g. diabetes, asthma, pregnancies, etc.?

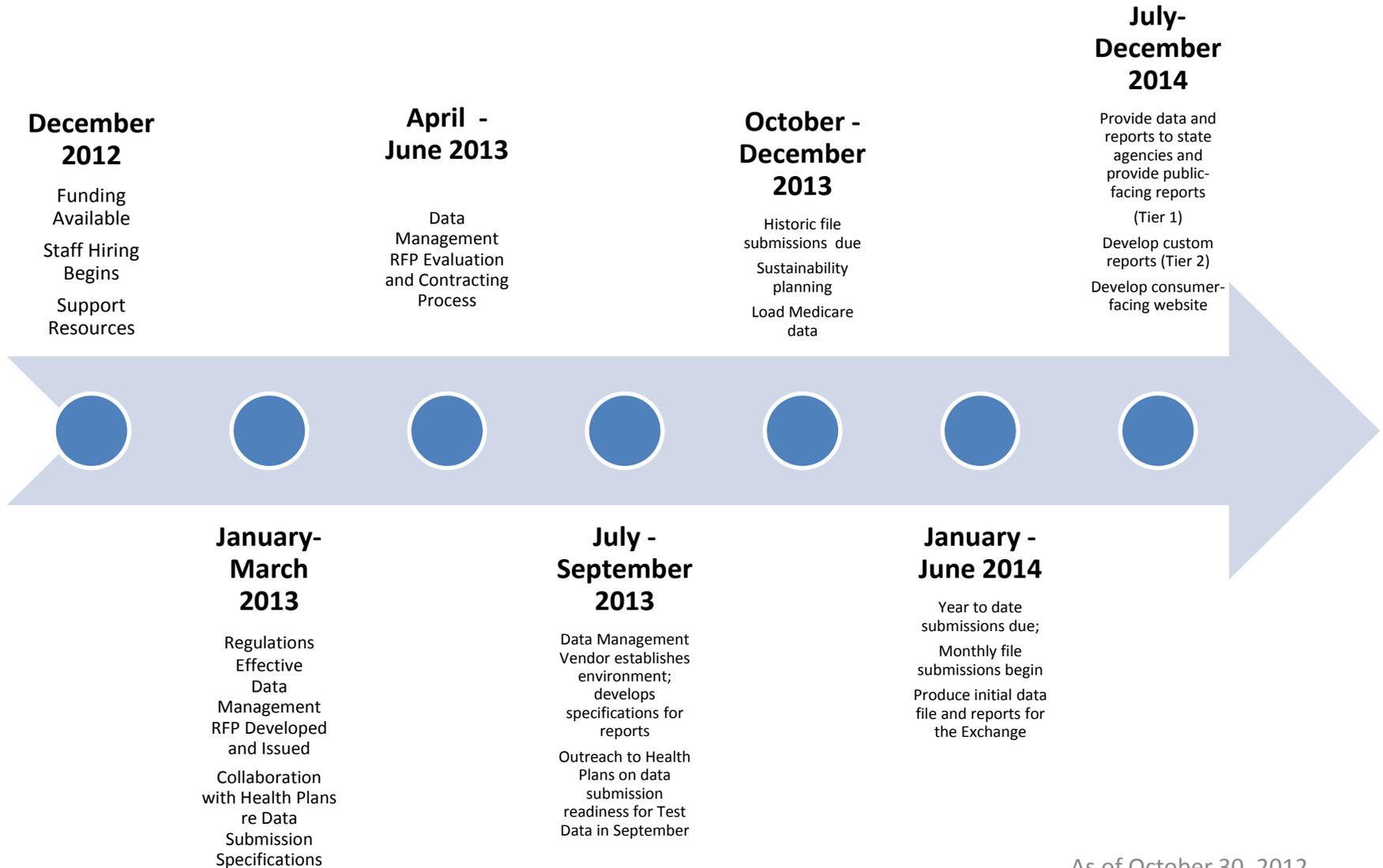
What can be done to reduce the cost of ER Admissions?

CT-All Payer Claims Database

Critical Next Steps

- Finalize Regulations
- Hire APCD Team (Executive Director, General Counsel, Senior Project Manager, Senior Business Analyst, and Contract Manager/Administrative Assistant)
- Prepare and Issue RFP for a Data Management Vendor to provide data intake and warehousing services as well as analytics services
- Develop Data Submission Guide with detailed technical reporting specifications
- Begin Data Collection
 - Once Data Management Vendor is in place, will begin to collect data from reporting entities in phases over a series of months, beginning with test files and ultimately moving to monthly file submissions

Revised CT APCD Timeline



Presentation
Office of Health Reform & Innovation

Questions, Comments, Considerations

Thank You!