



CENTER FOR IMPROVING
VALUE IN HEALTH CARE

CIVHC: Developing an APCD, Consumer Engagement and Payment Reform

*New York State Health Foundation
Leveraging Big Data to Create a Value-
based Health System*

March 3, 2015

Ana English, President and CEO, CIVHC
Higher Quality. Lower Cost. A Healthier Colorado.

The CO All Payer Claims Database is Functional and Available

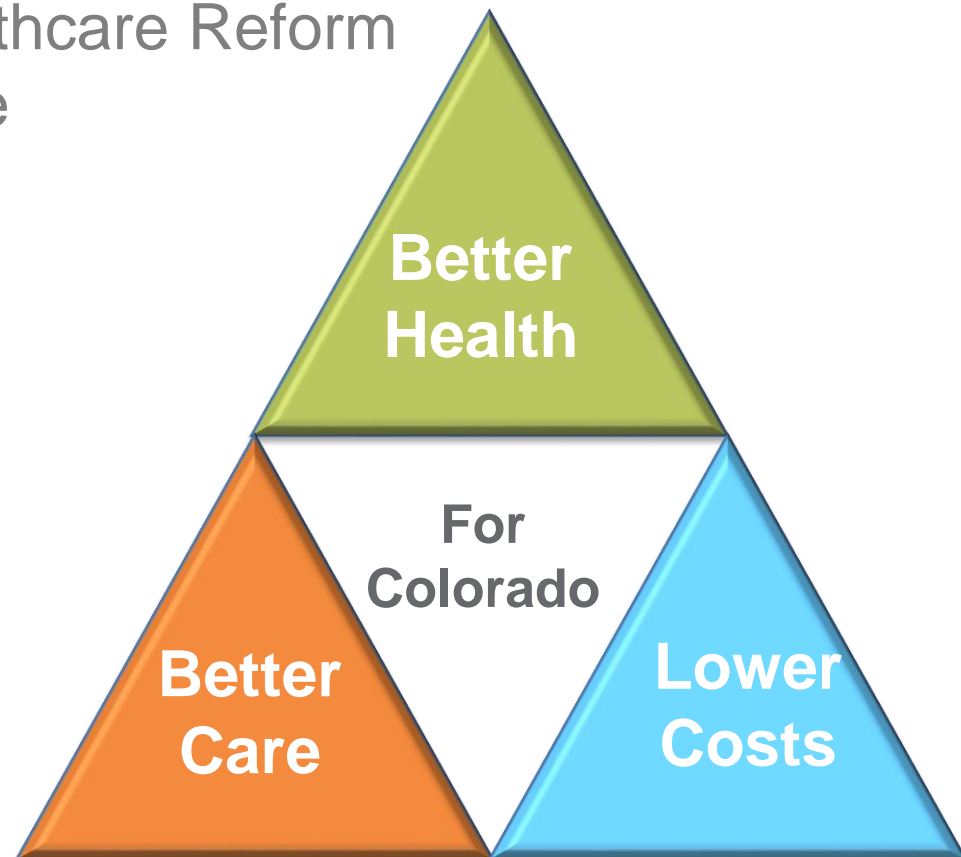
*So... how do we collectively make
the best use of it to make positive
health care changes?*

By Making it Accessible!

*(As long as it is appropriate, efficient, value-added,
and within privacy/security guidelines)*

Who We Are

- Non-profit, non-partisan organization
- Founded out of recommendation from Blue Ribbon Commission on Healthcare Reform and Governor's office
- Triple Aim Mission:



What We Do

We help Colorado:



Drive



Deliver

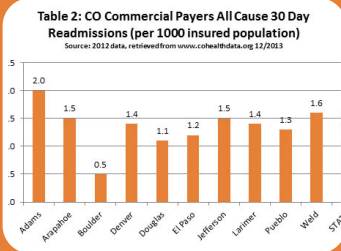


Buy

Value in Health Care

How We Do It

DATA



- We administer the Colorado All Payer Claims Database, the state’s most **comprehensive source** of health care cost, quality and utilization claims data.



CONSULTING

- We **unlock information and insights** that guide how health care gets delivered, used and paid for.



CONNECTING

- We **bring together** organizations and individuals who share our cause, to **design and drive collective change**.

Who We Do It For



Our Values



CIVHC STRATEGY

TRUSTED & OBJECTIVE

We exist to serve the needs of all our stakeholders, not one or more interest groups. Our work is unbiased, objective and trustworthy.

1

VALUE ORIENTED

Everything we do is meaningful, actionable, and identifies real opportunities to make positive change.

2

TRIPLE AIM DRIVEN

All of our work is grounded in our mission to improve care, improve health, and lower costs. We continually seek innovative opportunities to collectively achieve the Triple Aim.

3

CREDIBLE & COMPREHENSIVE

Our data and analytics are valid, accurate and the most comprehensive available. We continually explore opportunities to expand our data and its availability.

4

STAKEHOLDER FOCUSED

Everything we do is focused on meeting customer needs and improving health and health care. We strive to provide the best service and experience possible.

5

Strong, Profitable and Sustainable Business

Keys to Success

Effecting Change through Triple Aim Related Programs

Sustainable Business Model

Increasing awareness and value through growing use of data and analytics

Health
Care
Delivery

Public
Awareness:
Increasing
Health Care
Transparency

Payment
Reform

Data and Analytics

Identifying Opportunities to Effect Change in Health Care

Colorado APCD Data & Covered Lives



Medicaid



**Medicare &
Medicare
Advantage**



***20 Largest
Commercial
Payers**



330 Million

**Medical & Pharmacy
Claims**



3.5 Million

Unique Lives



65% of

Insured Coloradans

Medicaid, Medicare Advantage and commercial payer claims currently encompass 2009-2014 adjudicated claims. Medicare currently includes 2009-2011 claims. Covered lives estimates based on 2013 Colorado Division of Insurance Health Cost Report dated December 8, 2014.

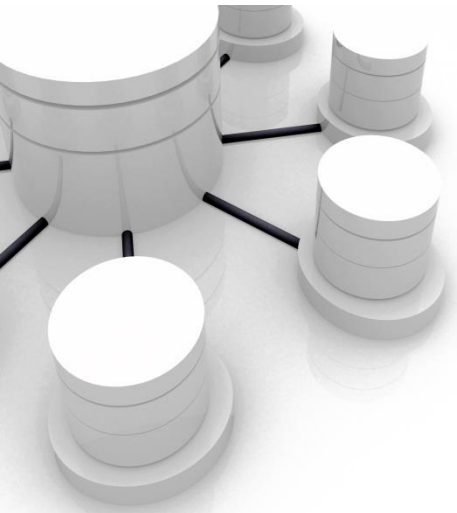
*Commercial claims in the APCD do not currently include self-funded lines of business.

Updated January 2015

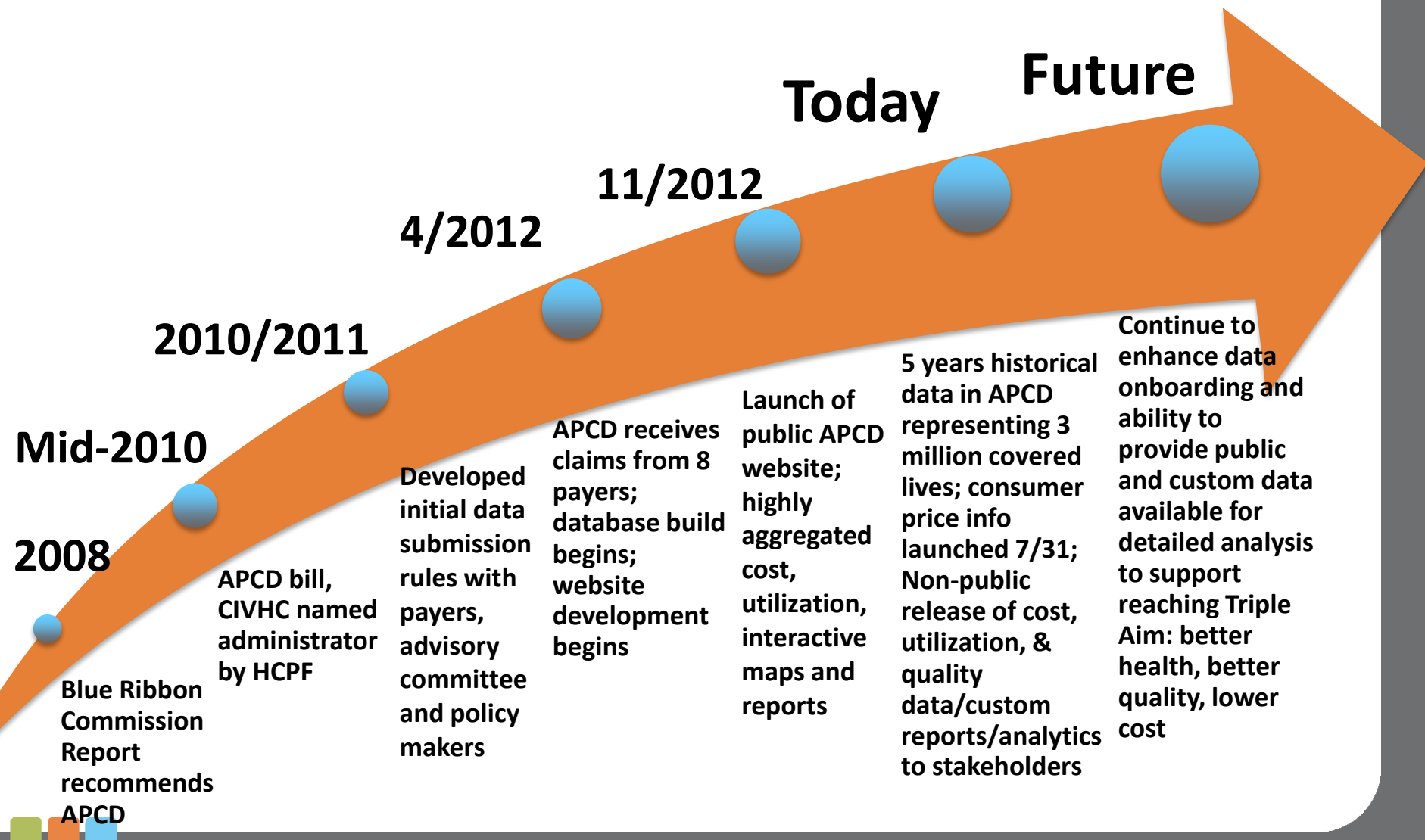
Colorado's All Payer Claims Database



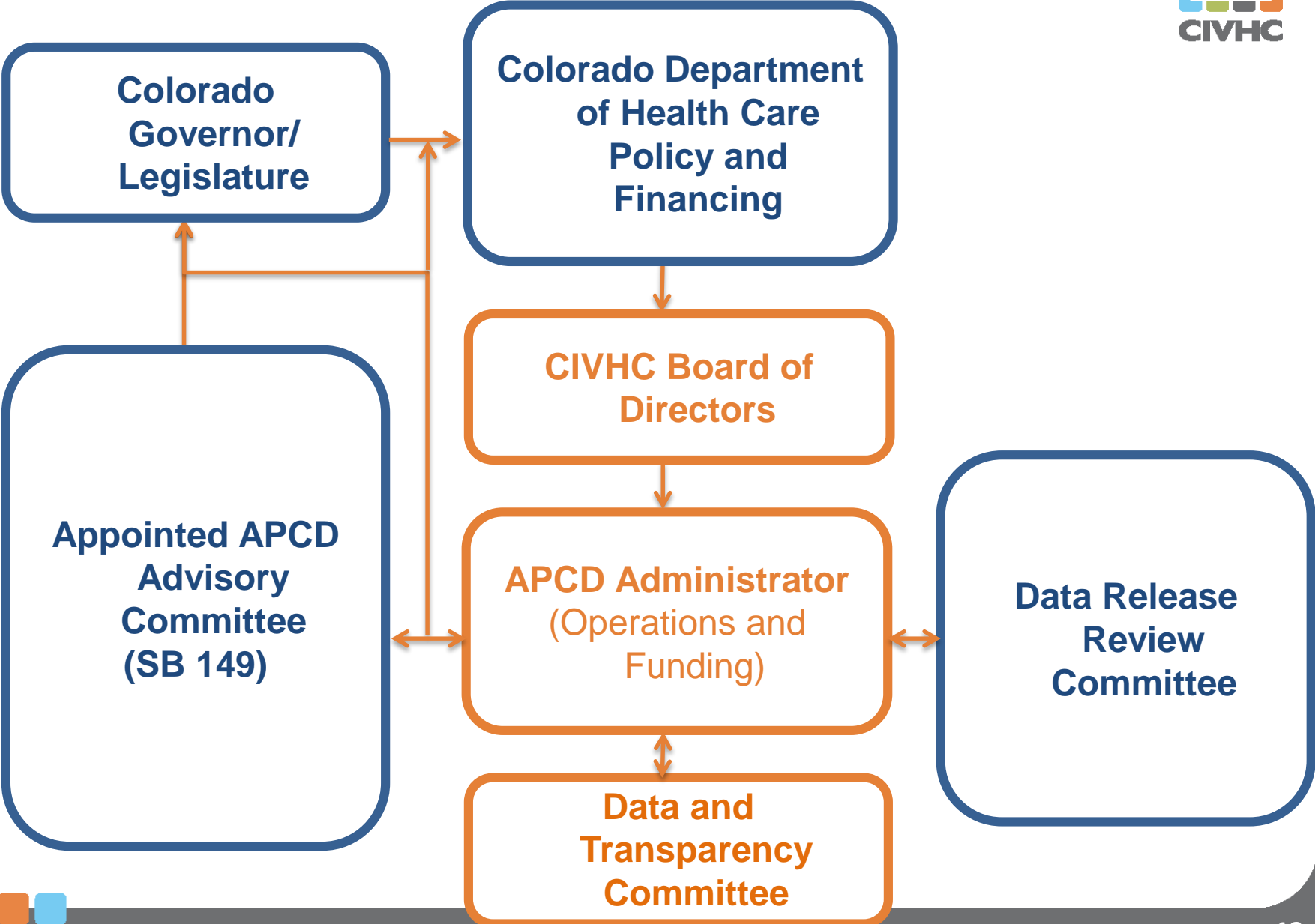
- State mandate, 2010 legislation
- CIVHC named administrator by State Medicaid agency (HCPF)
- Claims data collected from public/private payers
- First aggregated public reports published in Q4 2012
- No general state funds, currently grant funded, targeting sustainability by 2016



The CO APCD Journey...



APCD Oversight and Governance



Stakeholder Engagement and Governance



- “No surprises” approach to get buy-in/input from stakeholders early and often
- APCD Advisory Committee:
 - Legislative mandate
 - Broad representation
- Data and Transparency Advisory Committee
- Data Release Review Committee
- Stakeholder Groups:
 - CO Hospital Association and Ambulatory Surgery Center Association
 - CO Medical Society, Local Medical and Specialty Societies, Nurses, Community Health Centers
 - Consumer Groups, Policy Shops, etc.
 - State Government Agencies

Public and Custom Data Available

- Public Website: www.comedprice.org
 - Aggregated county/state-level data
 - Of interest to policymakers, researchers, communities, etc.
 - Facility specific price/quality info
 - Of interest to consumers, employer purchasers, payers, providers
- Non-public datasets and custom reports
 - Of interest to providers, purchasers, researchers, policymakers, health plans, state agencies, non-profit stakeholders, etc.

Release of Custom APCD Data

Non Public Data Release Request Criteria

- Request must be consistent with the statutory purpose of the APCD
- Request must come from a state entity or organization and support Triple Aim for Colorado
 - Written request must detail purpose, methodology and qualifications of the entity
- Must execute a data use agreement to comply with HIPAA requirements

For a limited or fully identifiable data request:

- An extensive application must be completed
- The Data Release Review Committee (DRRC) must review and advise on request

APCD Privacy, Security & Anti-trust

- **Privacy**
 - Data release processes driven by HIPAA Privacy and Security rules
- **Security**
 - Encrypted, role-based, and limited access
- **FTC/DOJ Guidelines**
 - Statements of Antitrust Enforcement Policy in Health Care, Statement 6

Data Issues/Challenges


- Self-funded data *Coming soon!*
- Medicare restrictions
- Hospital/Provider concerns
- National competition
- Assessing the health care system needs to be more than just claims but it is a great start
- Claims data can be messy
- Lag time in collecting/processing

CIVHC is considered the “model” for other states to follow

- Quasi Public-Private organization
- Strong Governance Model
- Stakeholder Transparency focus – versus solely for internal state use.
- Public and Non-Public Use
- Sustainability Model
- Focus on Accessibility
- Expanding data set and uses
- Overarching requirement – Must benefit Coloradoans

How the APCD Supports Consumer Engagement

July 2014 Price/Quality Launch





[Home](#)

[Medical Service Prices](#)

[State Costs & Utilization](#)

[About CIVHC](#)

ADMINISTERED BY 

POWERED BY 

Find Prices for Medical Services

Search for comprehensive prices for select hospital-based services.

Step 1
Service

Step 2
Location

Step 3
Insurance

Your selected search criteria will appear here.

Select a Medical Service

What type of service are you searching for?

Select a Category...

Maternity Care

Surgical and Other Services

Next

Find Costs and Utilization by Geography

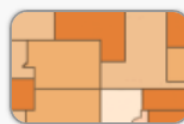
Search for health care costs and utilization of services by county and ZIP Code 3.

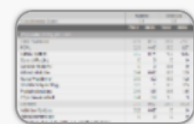
Choose one of the most viewed selections.

- Total Cost of Care (TCC)
- TCC Compared to Expected (C2E)
- Percent Generic Scripts
- 30 Day All Cause Readmissions (per population)
- ER Visits
- Diabetes Prevalence
- Asthma Prevalence
- Illness Burden

Total Cost of Care

represents the total dollars paid for all health care services received by an individual such as hospital, clinic, physician visits, and prescription costs. Amounts paid by both the insurer and by the individual in the form of copays, deductibles and other cost sharing mechanisms are included. The results are displayed as a total dollars per person for the year. The rate represents the population living in that geography, not where the services were received.





View Map

View Report

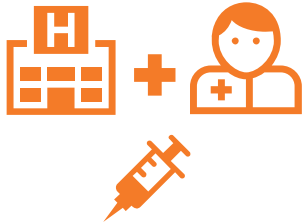
[View all Maps or Reports](#)

www.comedprice.org

What's Different About [comedprice.org](https://www.comedprice.org)?



Prices based on *actual payments*, not charges

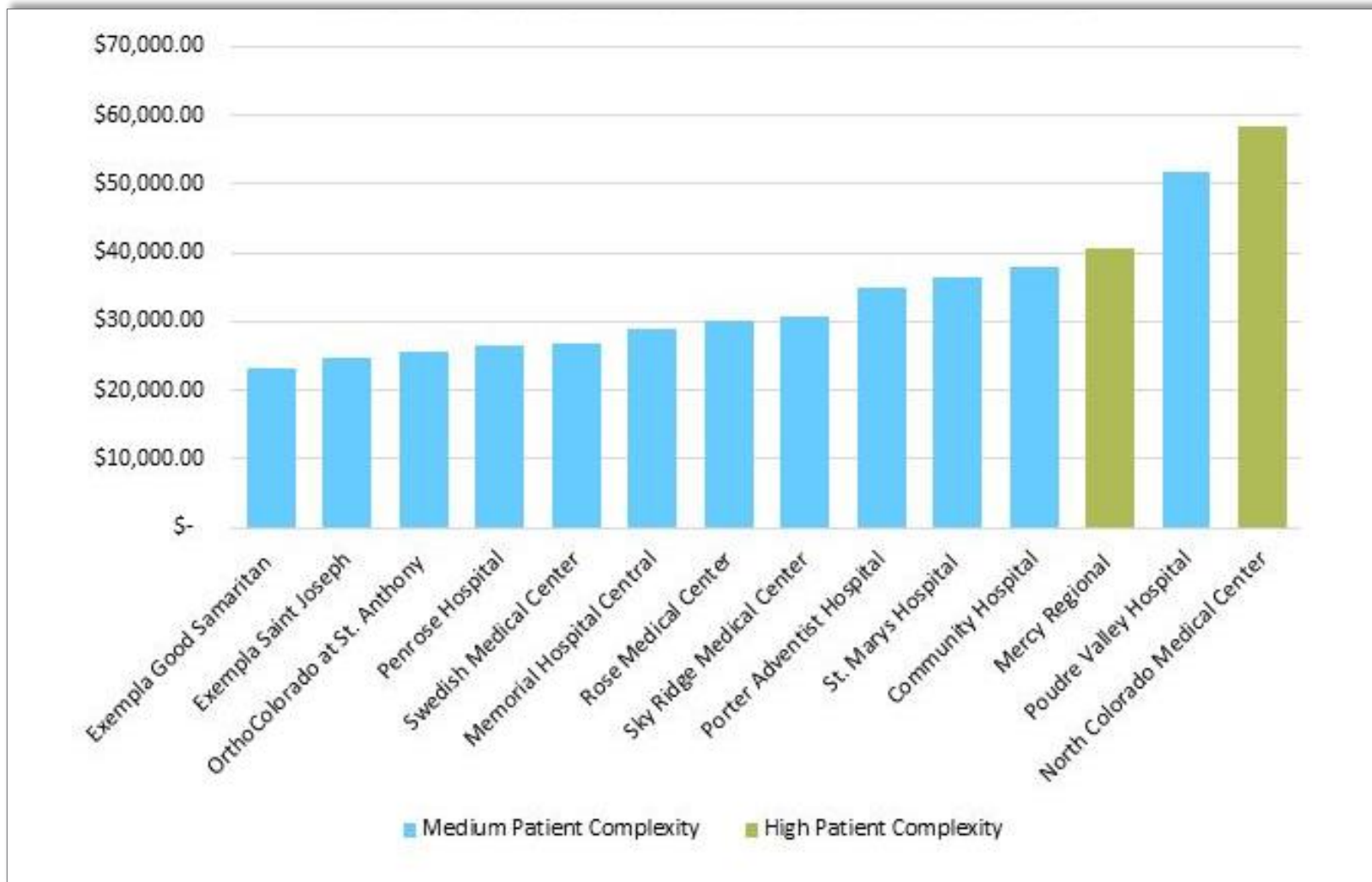


Prices include payments for the entire health care service (hospital, physician, lab, etc.)



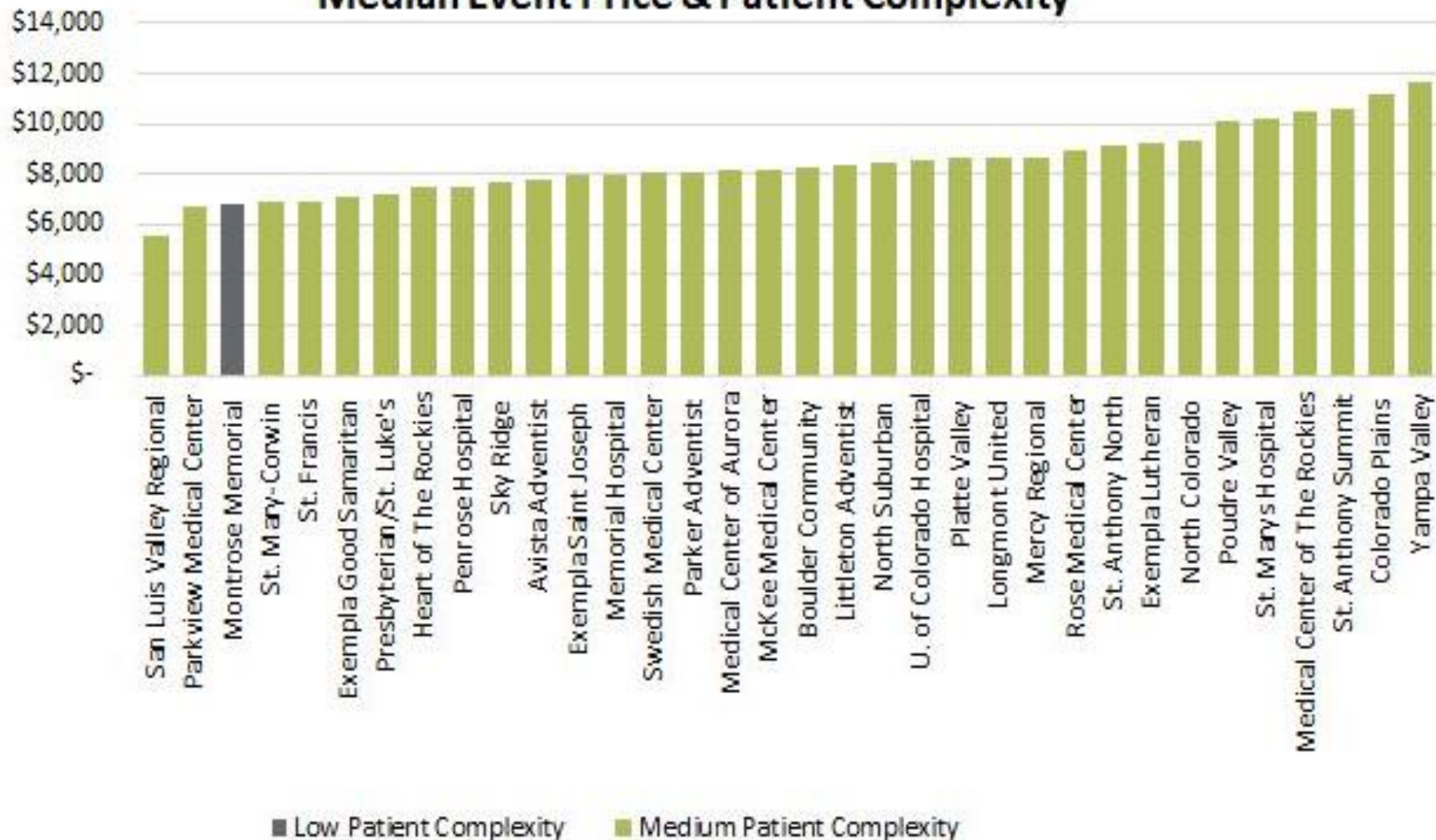
Prices represent median amounts paid by 20 private health insurance payers & Medicaid

Knee Replacement Median Price & Patient Complexity (Commercially insured, < 65 years of age, comedprice.org)



For all facilities displayed, including Good Samaritan and St. Joseph Hospital, prices reflect median payments made by health plans and patients. These payments include facility, physician and ancillary payments. Prices reflect 2012 data available on www.comedprice.org.

Commercially Insured Vaginal Birth: Median Event Price & Patient Complexity



For all facilities displayed, including Good Samaritan and St. Joseph Hospital, prices reflect median payments made by health plans and patients. These payments include facility, physician and ancillary payments. Prices reflect 2012 data available on www.comedprice.org.

Future Plans – Consumer Site



Timeline	Facility/ Provider Types	Health Care Services (Prices by name facility)	Payers	Year Represented
<p>Planned for 2015</p>	<ul style="list-style-type: none"> • Ambulatory Surgery Centers • Endoscopy Centers 	<ul style="list-style-type: none"> • Emergency Room Visits • Knee Arthroscopy • Breast Biopsy • Skin Lesion Removal • Gall Bladder Removal • Hernia Repair • Kidney Stone Removal • Tonsillectomy • Colonoscopy 	<ul style="list-style-type: none"> • Additional display of Medicare prices 	<ul style="list-style-type: none"> • 2013
<p>Planned for 2016</p>	<ul style="list-style-type: none"> • Imaging Centers • Physician Groups 	<ul style="list-style-type: none"> • Imaging Services (CT Scans, MRIs, Ultrasounds, X-Rays) • Annual preventive visits • Various types of primary care visits including new patient and mild to moderate complexity exams 	<ul style="list-style-type: none"> • Self-funded claims added 	<ul style="list-style-type: none"> • 2014

Consumer Transparency – Next Steps

- Additional round of Consumer Focus Groups/Feedback to begin in Q1 2015
- Outreach to employers, physician groups and other organizations to promote website and make available through their digital sites
- Work with digital development orgs to create apps (e.g. ER visit prices combined with wait times and driving directions) or other tools and resources

Uses of Custom APCD Data

- Site: www.comedpriceshowcase.org

HCPF Scholarship Fund

- \$500,000 in funding available
- Eligible organizations:
 - Non-profits & research organizations with annual revenues of less than \$5 million/year
 - State agencies
- Funding available through June 2015, expected continuation in FY16.
- 13 projects have been awarded as of February 2015.

Using the APCD to Support New Payment Models

Why Payment Reform?

- Impetus for new payment models:
 - Wide price variation
 - Wide variation in quality/outcomes
- Price & Quality Transparency:
 - Employers Frustrated!!
 - National Center of Excellence Model: Wal Mart, Lowes
 - Sending employees across country for hearts, spines, joints, organ transplants.
 - Employers will/are driving change nationally and in Colorado
 - CIVHC developing reports to show employers price variation in their markets so they may design benefits to encourage employees to choose high value providers.

CIVHC Payment Reform Goals

- CIVHC is dedicated to helping move providers toward bundled payments and global/prospective payments.
- Want to bring about lasting changes in the delivery system that allow providers to provide the care in a patient centric manner.
- Patient Centered Medical Homes (PCMH) and initiatives like Comprehensive Primary Care Initiative (CPCI) are steps along the way but not the end solution.



Updated version at
<http://www.civhc.org/Resources/PaymentReform/CIVHC-Resources.aspx/>

How CIVHC Can Help

- Actionable data is first step toward care redesign
- Need comparative risk adjusted data sets
- Isolate group practice and measure total cost of care against region
- Data can show cost variation and isolate higher costs of care by service line
- Base knowledge is total cost of care PMPM
- Examples of some reports

Contact Information

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Stay Connected!

- Join our email list (from the www.comedprice.org or www.civhc.org home page)
- Follow CIVHC on social media:



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Facebook.com/CIVHC



LinkedIn (linkedin.com/company/2096991)