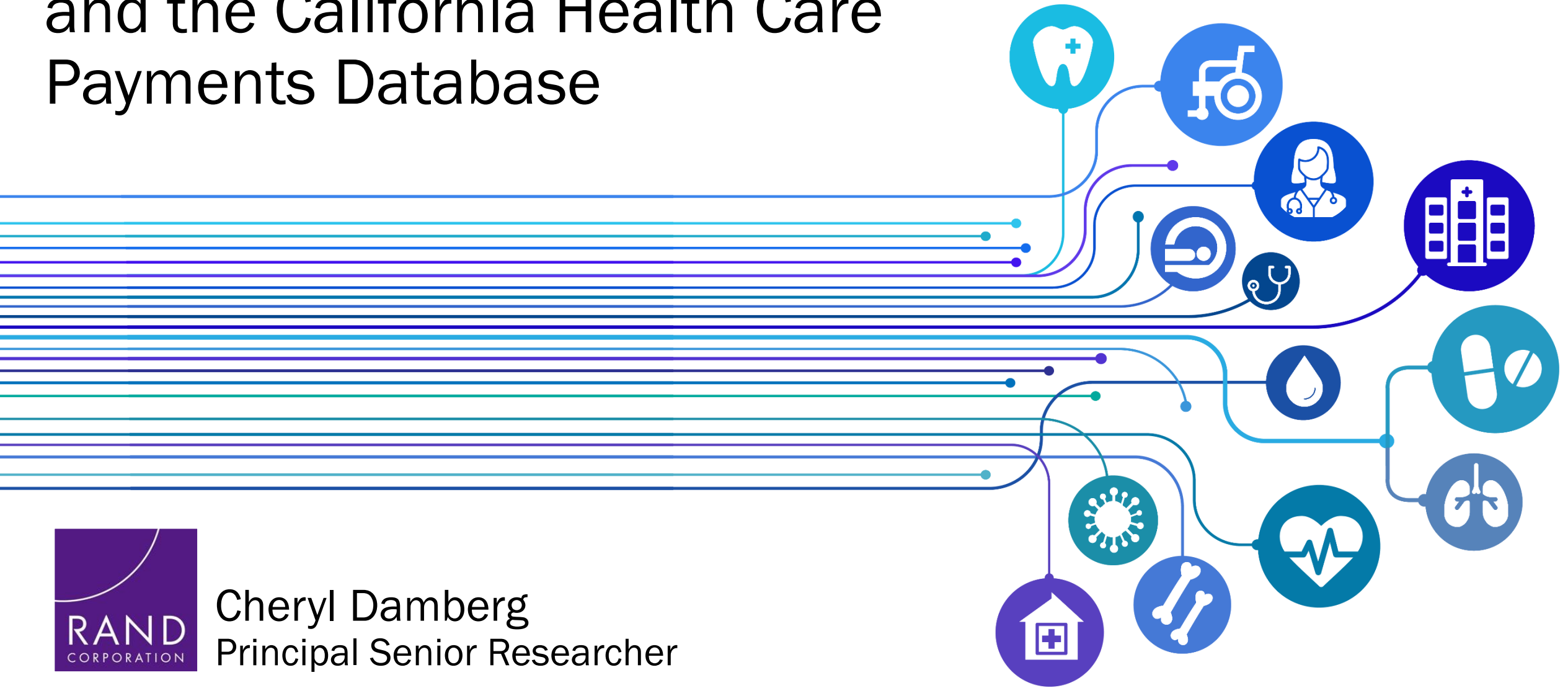
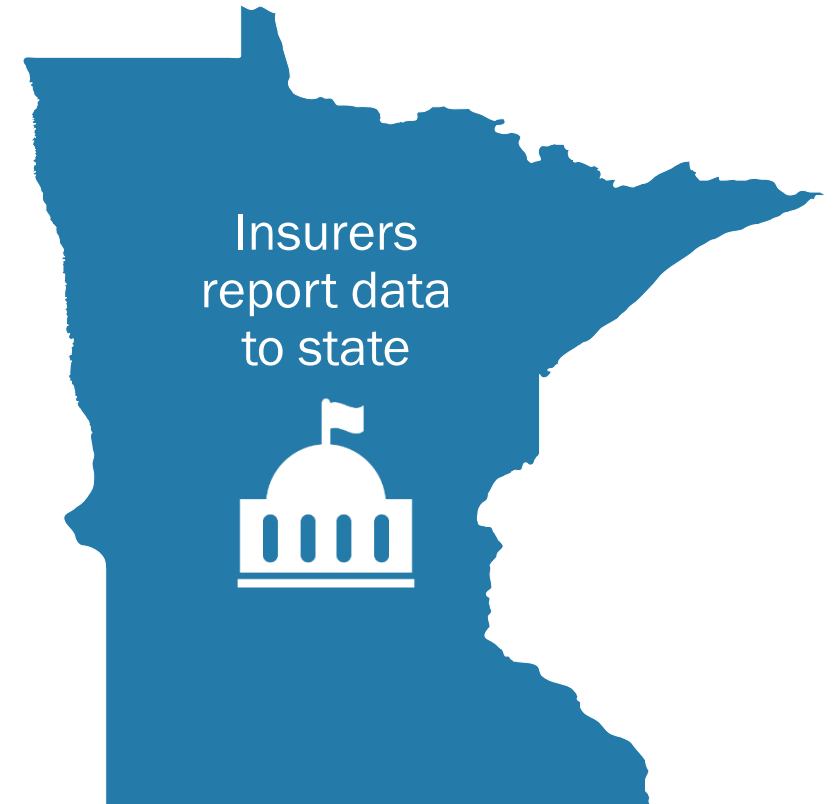
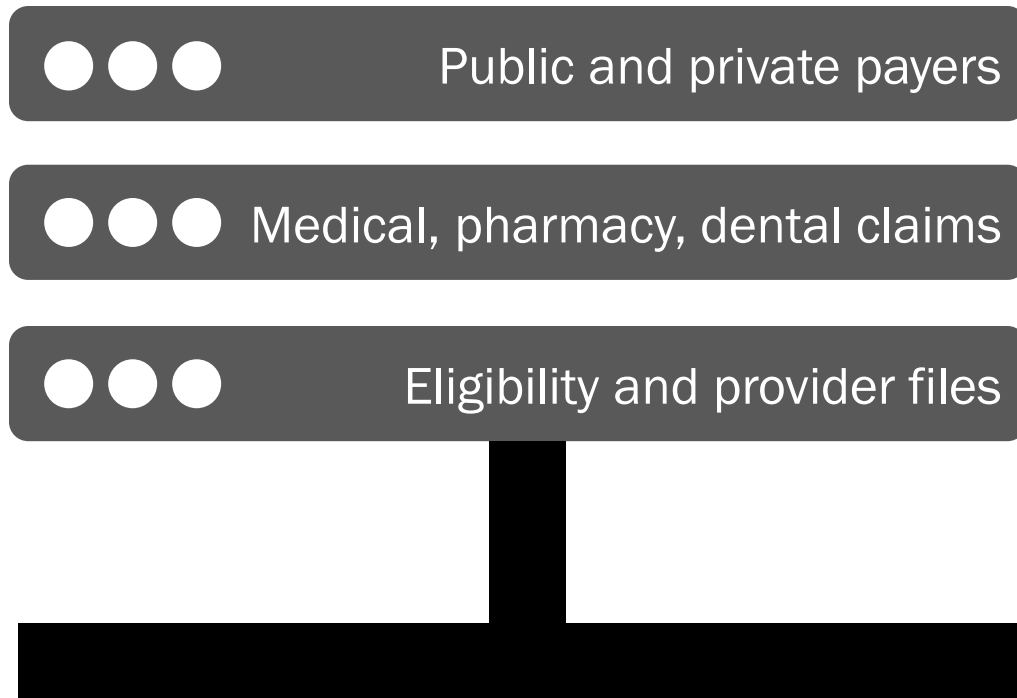


ALL-PAYER CLAIMS DATABASES and the California Health Care Payments Database

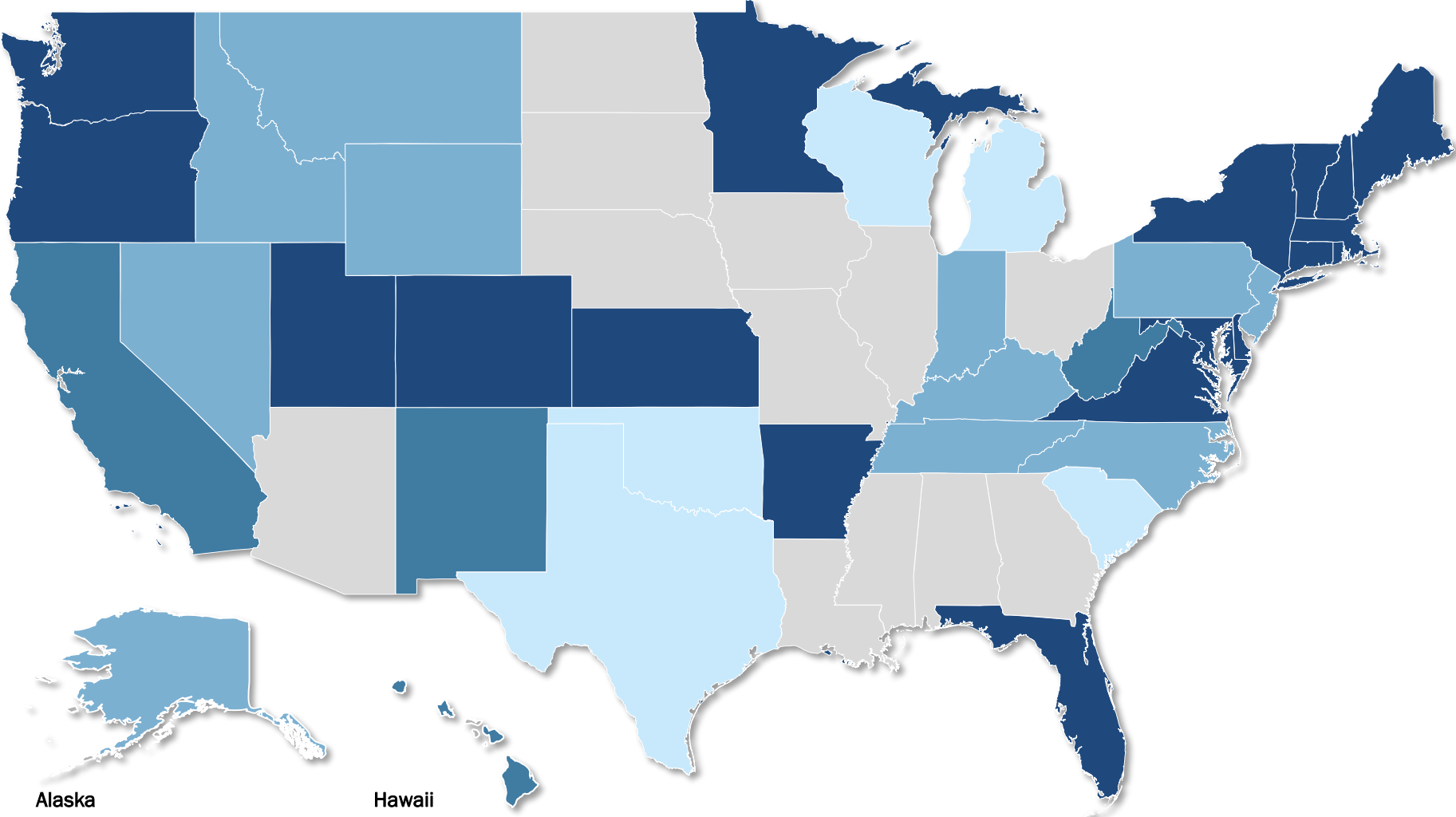


Cheryl Damberg
Principal Senior Researcher

What is an All-Payer Claims Database (APCD)?



States with APCDs: 2020 State Progress Map



17
have APCDs (2020)

3
are implementing
APCDs (CA, NM, WV)

Strong interest

Voluntary efforts

None

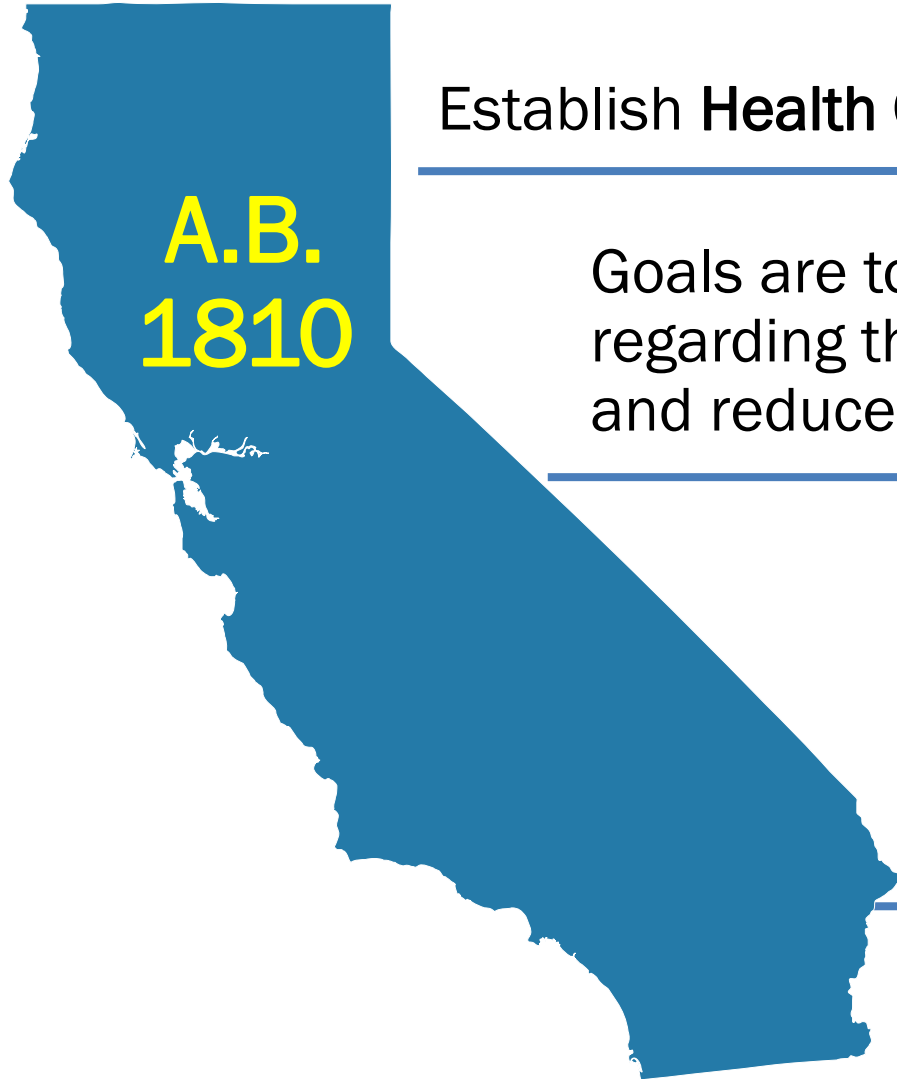
Alaska

Hawaii

APCDs have advantages over other datasets

- Include information on private insurance
- Surpass voluntary reporting efforts that typically only include a limited number of data submitters and restrict use of data
- Include data from most or all of a state's insurers
- Contain information on care across all types of care sites, rather than only hospitalizations and emergency department visits reported as part of discharge data systems maintained by most states (e.g., OSHPD)
- Large sample sizes, geographic representation, and longitudinal information on individual patients and providers

California is establishing its own APCD



Establish Health Care Cost Transparency Database by July 1, 2023

Goals are to generate information to inform policy decisions regarding the provision of quality health care, reduce disparities, and reduce health care costs

OSHPD convened a review committee of stakeholders and experts to advise OSHPD on the establishment, implementation, administration of the database and a sustainability plan

Healthcare Payment Database (HPD) is essential to California's cost containment efforts

Trends in spending

Variation in costs of care

Effects of provider consolidation

“Wasteful” health care spending

Impact of payment reforms

Primary care spending as share of total spending

Transparent cost information for consumers



The HPD can also address other critical questions

■ How is **provider consolidation** affecting the quality of care?

■ Are **social risk factors** associated with quality performance?

■ Does **utilization of care** change in response to payment policy changes?

■ Are there **disparities in care** and are disparities shrinking/growing over time?

■ How does **utilization of services** differ across patient populations?

■ Are some **providers more efficient** in delivering quality than others?

■ What is the **quality of care** and how does quality vary across providers and/or patient populations?

How have other states used their APCDs?

VIRGINIA

Waste

\$586M



MINNESOTA

Trends in prescription
drug spending

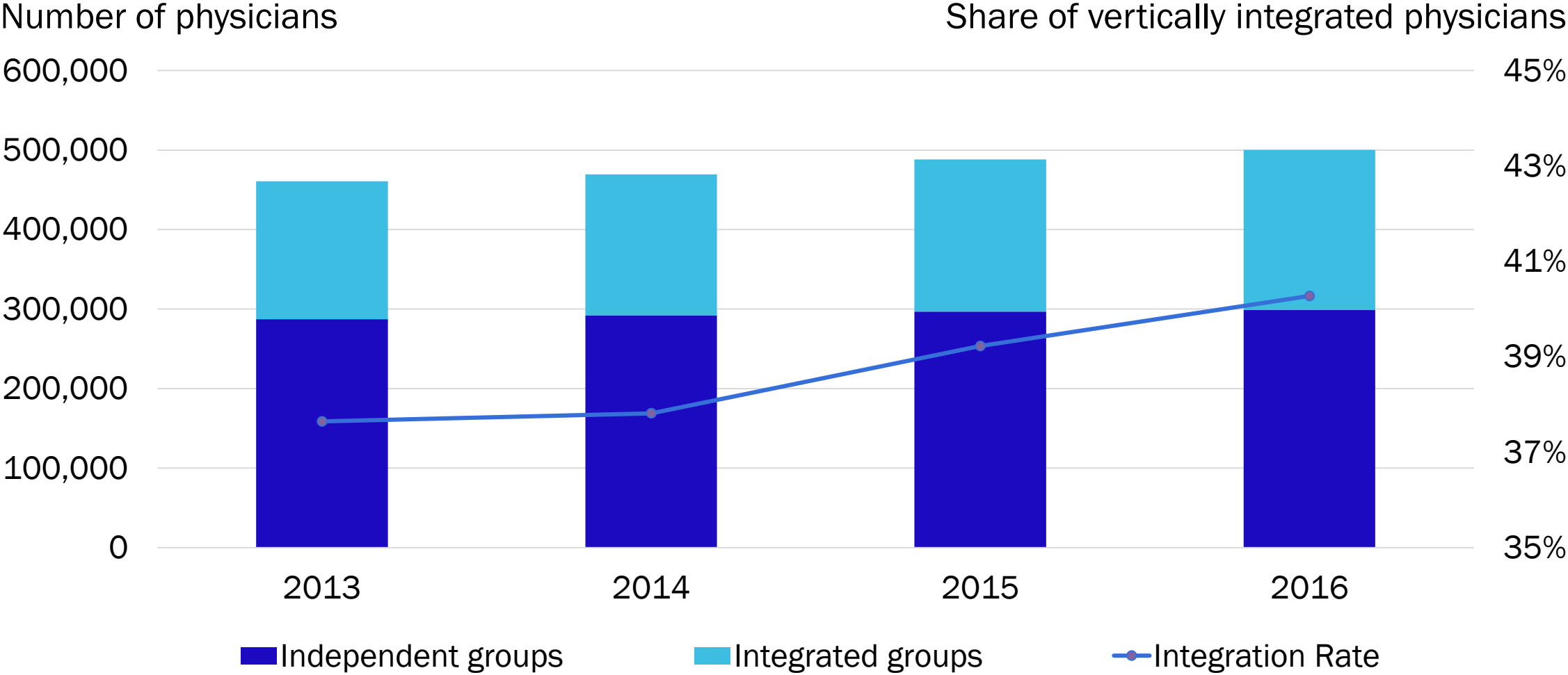


UTAH AND COLORADO

Insurance
transitions

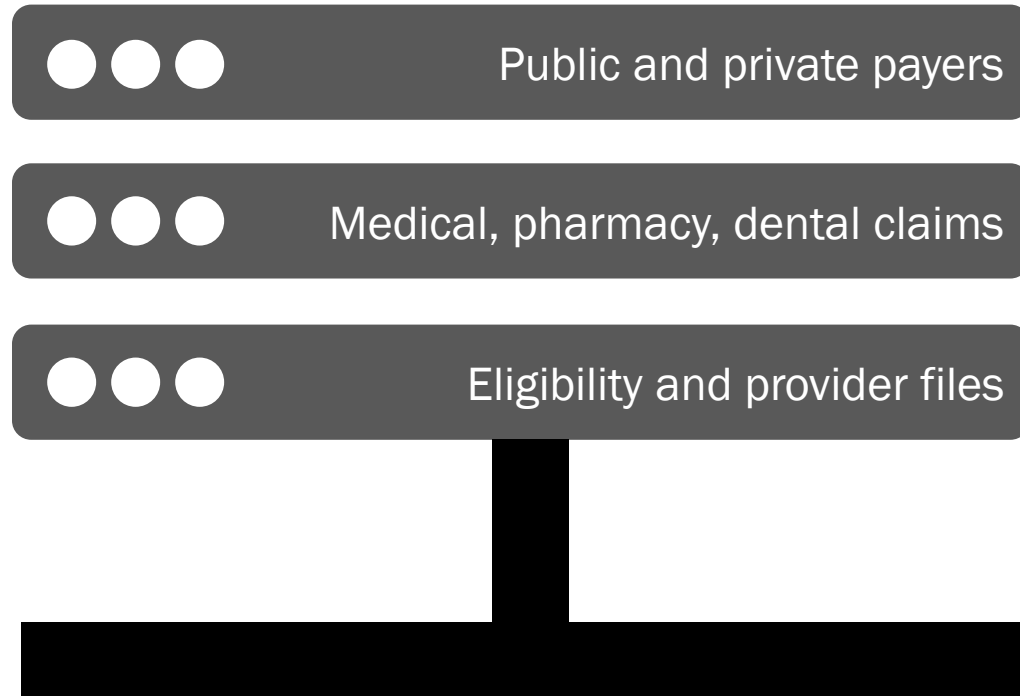


How does more vertical integration affect spending?



=> More physician groups are integrated; more physicians work in integrated groups (based on Medicare data)

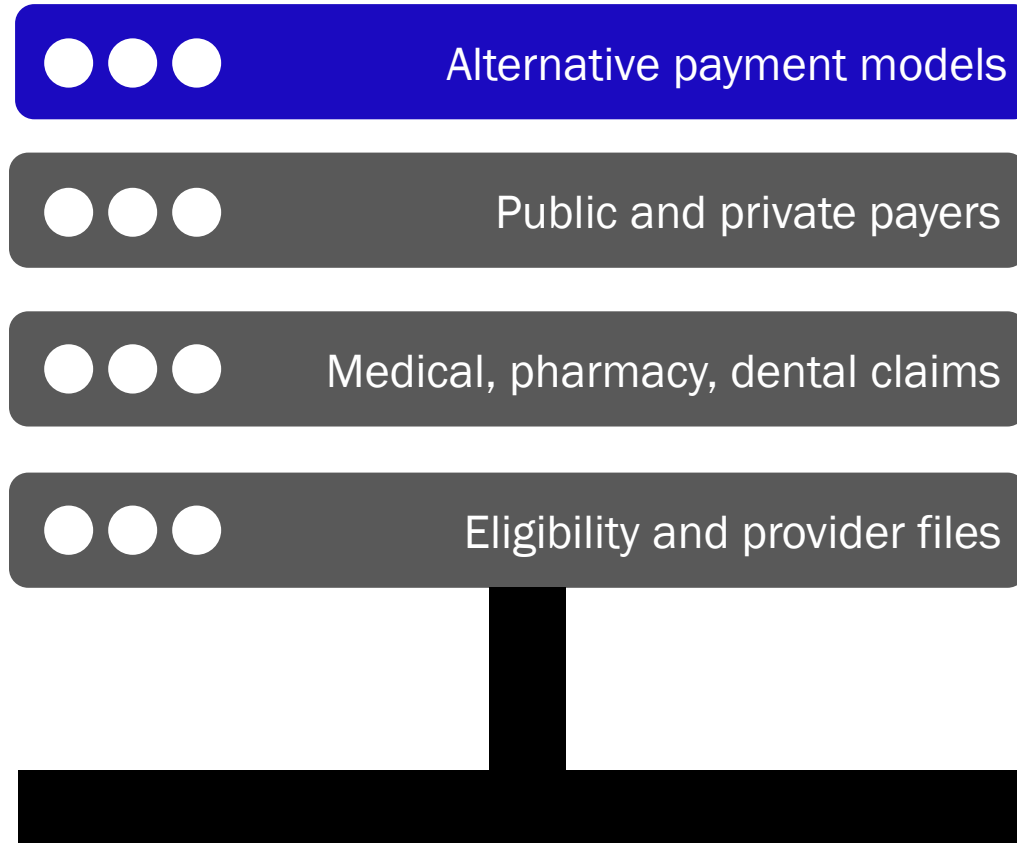
Capturing alternative payment models is a critical issue for California's HPD



APCDs typically exclude **alternative payment model (APM) payments**

- capitation payments
- pay-for-performance payments
- shared saving payments
- payments for primary care or patient-centered medical homes

Capturing alternative payment models is a critical issue for California's APCD



It's important to capture both claims based and APM payments to estimate the totality of payments and health spending

Other states have found ways to include APM payments, including those with significant Kaiser penetration (e.g., Colorado)

Other important issues for California's APCD

- **Inclusion of Medi-Cal data** (covers ~1/3 of Californians)---the HPD Program should pursue the collection of Medi-Cal data directly from DHCS
- **Unique patient identifier** to track patients over time and across settings
- **Unique provider identifiers** that can be mapped to physician groups and health systems
- **Access to the data for researchers** who can help leverage it to address the critical questions

California HPD Review Committee

- Made **36 unanimous recommendations** to OSHPD
- Recommended a **tiered approach to implementation** that will expand the database over time, given the complexities of California
- Made recommendations about who should be mandatory data submitters, agreed to by all committee members.
- OSHPD is now working to finalize the Legislative Report to deliver it to the Legislature by July 1

