

All-Payer Claims Database Advisory Group Meeting  
**Draft Meeting Minutes**

**Date:** Thursday, November 12, 2015  
**Time:** 9:00 a.m. – 11:00 a.m. ET  
**Location:** Legislative Office Building, Room 1D

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**Members Present**

James Wadleigh, Tamim Ahmed, Robert Aseltine, Jr., Mary Ellen Breault, Phyllis Hyman and Corrine Seibert on behalf of Commissioner Roderick Bremby, Bernadette Inskeep, Kimberly Martone, Dean Myshrall on behalf of Mark Raymond, Jean Rexford (by phone), Robert Scalettar, Robert Tessier, Victor Villagra, Michael Michaud on behalf of Commissioner Miriam Delphin-Rittmon

**Members Absent**

Benjamin Barnes, James D. Iacobellis, Matthew C. Katz, Kevin Lembo, Jewel Mullen, Victoria Veltri, Katherine Wade, Thomas Woodruff

**AHCT Staff Participants**

Robert Blundo, Frank Hoefling Susan Rich-Bye, Ryan O'Neil

**Other Participants**

Joan Feldman, Esq., William Roberts, Esq. (Shipman & Goodwin)  
Patrick Quinn (Onpoint Health Data)

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**I. Call to Order and Introductions**

James Wadleigh called the meeting to order at 9:00 a.m.

**II. Public Comment**

There was no public comment.

**III. Approval of August 13, 2015 Meeting Minutes**

**James Wadleigh asked for a motion to approve August 13, 2015 meeting minutes. Robert Tessier moved for the minutes to be accepted. The motion was seconded by Mary Ellen Breault. The minutes were unanimously approved.**

**IV. CEO/ ED Updates**

Mr. Wadleigh asked Dr. Tamim Ahmed to provide an update on Access Health CT's APCD. Dr. Ahmed stated that Onpoint Health Data successfully passed the security audit and is now ready to start accepting data from carriers. Dr. Ahmed expressed that it was a thorough audit and his confidence that the data will be secure.

Dr. Ahmed introduced Ryan O'Neil, a new Access Health CT employee. He thanked Frank Hoefling for his service and wished him good luck as Mr. Hoefling moves on.

Dr. Ahmed updated the group on the consumer decision tool, which was launched on the Access Health CT site as the Health Plan Selector tool. He thanked the group for its input in creating the tool, including the use of Google Analytics to capture how many consumers are using the tool.

Dr. Ahmed discussed the new timeline. The new timeline is similar to the previous timeline but with modifications in the dates due to the delay. Dr. Ahmed said carriers will have 60 days to submit the first test file since they will need time to build their infrastructure. He expects the first reports to be on APCD's website in the third quarter of 2016 with more cost transparency reports being published on the site in the fourth quarter of that year.

Dr. Victor Villagra asked when the dataset would be ready for researchers to request the data. Dr. Ahmed said he expected that to happen in the third quarter of 2016 since carriers would still be submitting data in the second quarter of 2016.

Robert Tessier expressed concern about transparency reports not being able until 2017 and asked about the obstacles in the way of it happening sooner. Dr. Ahmed said there were both technical and policy obstacles. Tessier stressed the importance of the transparency reports and Dr. Ahmed agreed. Mr. Tessier asked for reports to be sent to the group covering the progress being made. Mr. Wadleigh then recommended Dr. Ahmed send monthly status reports talking about what issues are problems and the progress being made in meeting the timeline. Dr. Ahmed agreed this was a good idea.

#### **V. Legal Review of Anti-Trust Legislation**

Joan Feldman and William Roberts discussed the potential antitrust implications at the state and federal level of the APCD and the requirements of PA 15-146 (SB 811). PA 15-146 clarified things in terms of antitrust issues at the state level. It specifies that APCD work with the Department of Public Health (DPH) and the Department of Insurance (CID) to publish information. Feldman stated that everything appears fine under state law since it is mandated by the state legislature. From a state law point of view, before PA 15-146, Feldman was concerned about what mandated reports might be considered proprietary but not now since there's an exception when that information is state mandated. On the federal level, antitrust laws exist to protect consumers, not competitors, so this information is not within that realm of regulation.

Ms. Feldman and Mr. Roberts also discussed how they consulted with other states that have an APCD. New Hampshire publishes bundled costs instead of individual costs. New Hampshire officials believed this would avoid antitrust problems plus give consumers an easier look at what they would actually be paying since consumers pay for services as a whole and individual fees.

Dr. Villagra asked what would happen if an anesthesiologist used in an operation is unexpectedly out of network and a consumer ends up with a big surprise bill. Mary Ellen Breault explained that current contract language does not allow this to happen any longer. The out-of-network anesthesiologist would be billed to the consumer as if in network.

#### **VI. SB 811 Update**

Dr. Ahmed provided an update on the progress of complying with the requirements of SB 811 (PA 15-146). He stated that the APCD website, the consumer decision tool, and working on price transparency are all steps towards complying with the law. He continued saying that the law appeared to intend for APCD to collect clinical data. Tessier pointed out SB 811 had been co-sponsored by the House speaker and the Senate president pro tem and that their staffs helped draft the legislation. We could approach them about their intent.

Dr. Villagra had a question about language in the bill concerning making information available in a "format understandable to the average consumer." He asked what the legal interpretation of "average" is. Mr. Wadleigh explained that Access Health CT had recently examined the language on its site and changed it so that it reflected a score of sixth grade when assessed by Microsoft Word. He acknowledged this was not a foolproof method but it was one step to take in the right direction of increasing accessibility. He also said health insurance terms can be difficult to understand and that Access Health CT is working to increase consumers' health insurance literacy. Dr. Villagra asked for a metric that would measure whether the needs of those deficient in English. Mr. Wadleigh said that any suggestions for such a metric could be given to Dr. Ahmed.

Phyllis Hyman and Corrine Seibert of the Department of Social Services (DSS) discussed the creation of the Memorandum of Agreement (MOA) between DSS and Access Health CT concerning the sharing of Medicaid data. They explained that federal law allows the sharing of Medicaid data only for the administration of Medicaid, so there will need to be a process to demonstrate that sharing the data aids in the administration of Medicaid. Dr. Villagra asked how the disclosure of data would be relevant to the administration of Medicaid. Hyman said she understood his question and that it might have to be done on a case-by-case basis and possibly that the Medicaid director would be best suited to making that determination.

Mr. Tessier pointed out that one portion of the original legislation not mentioned often is Section 4, which prohibits carriers and providers from including provisions about pricing information being confidential. This provision does away with the idea that pricing information is a trade secret.

Dr. Ahmed displayed some tables with sample data to show what the tables required by SB 811 might look like. There were some critiques, including suggestions to make these more understandable by the typical consumer as well as checking with how other states are displaying this information. Dr. Ahmed said that not only can we learn from what other states have done, we can learn from the mistakes they have made.

Kim Martone said there are limits to what data is being collected. DPH does not collect data from hospitals on out-patients and it just started collecting data on out-patient surgeries. There was further discussion about data availability and what the law said regarding that.

#### **VII. Completion of Consumer Decision Support Tool**

Dr. Ahmed discussed how the tool is complete and available for consumers to use on the Access Health CT website. He also demonstrated how many users have used it so far and their pattern of uses per Google Analytics. Brokers were instructed on how to use the tool to help shoppers pick a plan that would reduce their overall monthly costs. Tessier asked how Access Health CT was measuring the outcome of the desired goal for people to use the tool to help select the plan yielding the lowest monthly cost not just the lowest monthly premium. Mr. Wadleigh said those questions can be added to the annual survey Access Health CT conducts with its customers.

#### **VIII. Showcase of the APCD Website**

Patrick Quinn, of Onpoint Health Data, conducted a demonstration of the APCD website, which is still in development. Mr. Quinn demonstrated many design and technical features of the site, including the ability to geographically display results by state, Health Service Area, town, and county. He stated that there would be a feature that allowed for a pop-up when browsing over any term requiring definition for the average consumer. There was a discussion as to what other reports would be displayed on the site. Mr. Quinn encouraged people to visit Maine's APCD website, [comparemaine.org](http://comparemaine.org), to see what works and what does not.

#### **IX. Next Steps**

No Next Steps.

#### **X. Future Meetings**

The next regular meeting of the APCD Advisory Group is February 11, 2016 from 9:00 to 11:00 a.m. in a location to be determined. The other meeting dates in 2016 are May 12, August 11, and November 10. Those three meetings will be from 9:00 a.m. until 11:00 a.m. and will be held in the Legislative Office Building.

#### **XI. Adjournment**

**Mr. Wadleigh entertained a motion to adjourn the meeting. Dr. Villagra motioned. Ms. Martone seconded the motion. Motion passed unanimously. The meeting was adjourned at 11:00 a.m.**