

Connecticut Health Insurance Exchange
Policies and Procedures: All-Payer Claims Database
Report on Public Comments
November 1, 2013

The Connecticut Health Insurance Exchange (the Exchange) is proposing to adopt “Policies and Procedures: All-Payer Claims Database” pursuant to sections 138(a)(8) and (9) and 144(b)(3)(A) of Public Act 13-247, which established the All-Payer Claims Database (APCD). These policies and procedures establish how reporting entities are to report information and include a data submission guide which contains the specification for and definitions of data elements. They set out a reporting schedule; the assessment for non-compliance; and, the appeal process. It is contemplated that separate policies and procedures that describe how the data may be used and disclosed will be published for comment in the next several months.

The Exchange Board of Directors approved the posting of draft policies and procedures for public comment at their meeting on July 30, 2013. A notice of this posting was published in the Connecticut Law Journal on August 13, 2013, which was the beginning of a thirty day public comment period. By the end of this public comment period, on September 12, 2013, several comments were received. The comments, and the Exchange’s responses, are summarized below, organized by section of the draft policies and procedures. The revised draft policies and procedures, with changes marked, follow the comments and responses.

A summary of the comments and responses on the draft data submission guide, along with the revised draft data submission guide, appear in an attached document.

Introduction

Comments: One commenter suggested that the Exchange promulgate regulations, rather than policies and procedures, to govern the APCD.

Response: The Exchange is a quasi-public agency, and thus is not subject to the Connecticut Administrative Procedures Act. Therefore, the Exchange does not issue regulations. Policies and procedures approved by the Exchange’s Board of Directors have the same legal authority as regulations.

Definitions

- Medical Claims Data File

Comments: Some commenters suggested that the APCD should collect denied claims data in addition to paid claims data.

Response: The APCD will collect only paid claims. Complexities surrounding the capture and interpretation of denied claims were deemed very challenging in the first year for the APCD from various technical and content management perspectives. This does not rule out a future change in such policy.

- Member

Comments: One commenter suggested expanding the definition of “member” to include any individual insured by a self-insured health plan. Another commenter observed that the policies and procedures define “member,” while the data submission guide defines “Connecticut resident”.

Response: The definition of “member” has been revised and is inclusive of any “Connecticut resident.” This includes any “individual whose address is within the State of Connecticut.” Therefore, all individuals and dependents who are covered by self-insured plans, as well as those covered by fully insured plans and government-sponsored programs and who are Connecticut residents are included in the definition of “member,” and claims data for these individuals are required to be submitted to the APCD. Claims data for additional individuals who are insured by individual and small group plans issued in Connecticut, but who are not Connecticut residents, will be collected in order to potentially conduct state-based risk adjustment.

Reporting Requirements

Comments: One commenter asked whether reporting entities would have to provide complete data, even those claims managed or generated by subcontractors.

Response: It is important that reporting entities provide the APCD with complete data. Carriers have better knowledge regarding their carve-out benefits plans or employers, which would make them much more effective in consolidating data for the APCD. Thus, carriers will consolidate all carve-out data and submit them to the APCD. In situations where a carrier cannot perform that task, the carve-out entity will be required to submit data to the APCD.

Reporting Entities’ Data Submission Schedule

- Test Files

Comments: One commenter asked whether the test file submission timeline can be extended.

Response: The current timeline of 150 days is adequate based on feedback from reporting entities, who have been encouraged to work with the draft data submission guide as a model for the data file layout.

- Historic Files

Comments: One commenter asked whether the historic file timeline for data submission can be extended.

Response: The current timeline of 60 days is adequate based on feedback from reporting entities, who have been encouraged to work with the draft data submission guide as a model for the data file layout.

- Dental Files

Comments: One commenter requested clarification on the dental file submission guideline and timeline.

Response: Dental claims data will not be required in the first year, but will be added in the second year and onwards.

Annual Registration

Comments: One commenter inquired regarding the timeline to submit the annual registration form.

Response: Due to the unanticipated changes in the timeline for the implementation of the policies and procedures (and data submission guide), the APCD needed to make changes to the annual registration process. The policies and procedures are scheduled to be approved by the Exchange's Board of Directors on December 5. The annual registration form will be distributed to the reporting entities, and will be due back by January 10, 2014. Reporting entities will be required to submit the annual registration form for 2015 by October 1, 2014, and by October 1 in all subsequent years.

Non-Compliance and Penalties

Comments: One commenter suggested that audits of reporting entities be mandatory, and that penalties should be required to be imposed on any reporting entity which does not fully comply with all reporting requirements. Another commenter suggested that reporting entities be allowed to help determine protocols for audits, and that reporting entities not be penalized for failure to report data which is unnecessary for their own business purposes.

Response: The policies and procedures allow the Exchange to decide whether and when audits of reporting entities are necessary. Such audits will be useful in determining whether reporting entities are compliant with requirements. Reporting entities will be considered non-compliant if they do not adhere to reporting requirements, and the APCD Administrator will communicate with non-compliant entities to resolve any issues. If the APCD Administrator and a non-compliant reporting entity are unable to reach a resolution, enforcement of requirements will follow the process described in the policies and procedures.

Data Utilization and Disclosure, Fees

Comments: Several commenters made specific suggestions regarding the utilization and disclosure of data from the APCD. These comments included recommendations for the processes through which data are requested and released, types of entities which may request data, parties who are involved in the approval of data requests, restrictions on the uses of data, categories of data elements which may be disclosed, and fees which may be charged for data sets.

Response: These policies and procedures are primarily focused on data submission. We are in the process of formulating additional policies and procedures which will govern data utilization and disclosure, as well as fees for data sets, and will address the issues listed above. Once these are drafted, they will be posted for public comment.

Privacy and Confidentiality

Comments: Several commenters expressed general concerns regarding the privacy and confidentiality of protected health information (PHI) in the APCD. They specifically suggested that the APCD maintain high standards of security and protection of these data. Commenters also mentioned privacy and confidentiality in the context of comments on data utilization and disclosure.

Response: We take the issues of privacy, confidentiality, and security very seriously, and we understand the concerns of commenters. The policies and procedures explicitly state that the APCD will maintain privacy, confidentiality, and security standards which are consistent with HIPAA and other applicable state and federal laws. Policies and procedures regarding data utilization and disclosure will be released at a later date, and will also be consistent with these standards.