All Payer Claims Database Advisory Board Meeting Wednesday, September 20, 2023, 10:00 a.m. to 11:30 a.m. Conference Room 17 Harrison Hall, Indiana Government Center South 302 W. Washington Street Indianapolis, IN 46204

Virtual via Teams Platform

Board Members Present

☑ Jonathan Handsborough APCD Executive Director

☑ David Wilmot Physician

☑ Meghann Leaird Indiana Department of Insurance

☐ Brian Arrowood Family and Social Services Association (FSSA)

☑ Robert Davis Indiana Department of Health

Board Members Virtual

☑ Dawn Moore☑ Cheryl AckermanIndiana Pharmacists Associations☑ Proteus Wealth Management

☑ Candace Shaffer Purdue University

☑ Hon. Donna Schaibley Indiana House of Representatives

Board Members Absent

Hon. Vaneta Becker Indiana State Senate

Hon. Robin Shackleford Indiana House of Representatives

Hon. Shelli Yoder Indiana State Senate

Logan Harrison Anthem

Brian Tabor Indiana Hospital Association

Attendees In Person

Gina Robertson Onpoint Health Data
Jim Harrison Onpoint Health Data
Dominic Gayton Onpoint Health Data

Josh HarmsHaystackDylan ZyrowskiHaystackRomarie QuiñonesHaystack

Attendees Virtual

Grace Chandler Brilient

Monique Cote Onpoint Health Data
Joanna Duncan Onpoint Health Data
Amy Kinner Onpoint Health Data

Yana Kotliar Haystack Mirza Baig ILab Marvin Stiger ILab

Bernadette Inskeep United Healthcare Michael Hampton United Healthcare Gary Shearer Physicians Health Plan James O'Neil Physicians Health Plan Managed Health Services Micha Burket Gloria Sachdev Employers Forum of Indiana Employers Forum of Indiana Sara Otte Employers Forum of Indiana Lauren Velda

Ted Williams Family and Social Services Administration

Indiana APCD Status Update

Director Jonathan Handsborough opened the meeting at 10:00 AM. Stacy French read the roll call, and a quorum was met. Jonathan Handsborough moved to approve the minutes from the June 28, 2023, advisory board meeting. Meghann Leaird motioned to approve the minutes; Brian Arrowood 2nd the motion—meeting minutes were approved.

Director Handsborough started the meeting by introducing the Indiana All Payer Claims Database (APCD) team members. Director Handsborough reported to the advisory board members, the recent accomplishments the APCD team has made since the last advisory board meeting. He said that the data security and privacy plans for the Indiana APCD are at 100% completion. This includes reviewing security measures for personal identifiable information (PII) and personal health information (PHI). Director Handsborough reported that the data collection services are currently at 72% completion, which involves data submission and registration on the IN APCD. Director Handsborough provided a data consolidation update. He reported that the data consolidation efforts are at 3% completion. This phase includes user acceptance testing, data delivery, and data quality plans. The analytic environment is at 11% completion. The launch of the consumer-facing website is planned for the first quarter of 2024. The submitter registration process is nearing completion, with a few outliers remaining. Catch-up data collection efforts are also underway to collect three years of catch-up data, amid challenges related to data collection.

Director Handsborough discussed obtaining Medicare data from ResDac (Research Data Assistance Center), a CMS contractor. The application process, intake review, technical review, and administrative review have been completed as of 09/19. The APCD team expects to receive the data by the end of November. Director Handsborough reports quality HEDIS measures related to healthcare services, including PDS measures used to analyze data quality. These measures are crucial for assessing healthcare utilization data.

Director Handsborough concluded his update by introducing Onpoint Health Data (Onpoint) representative Dominic Gayton to provide updates regarding the developments on the consumer-facing website.

Haystack Consumer-Facing Website Report

Mr. Gayton introduced himself and the Onpoint team members before yielding the first half of the presentation to Josh Harms of Haystack. Mr. Harms mentioned that they had previously discussed the blueprints for the consumer facing website. Mr. Harms emphasized that they would showcase a test environment that has not been available to the public. Mr. Harms proceeded to present the progress on the homepage of the website. He mentioned that they had incorporated colors and logos to represent Indiana. He noted that some images and copies were still being worked on and that everything needed to be finalized. The team aimed to highlight metrics as the project continued. Mr. Harms discussed the different target groups: consumers, how the website would impact their decision-making, and researchers for their specific research needs.

Mr. Harms highlighted the importance of dashboards in the project. These dashboards provide a visual representation of data and how it looks. He reported that visitors to the page will have an interactive experience once the final version is rolled out. They can select procedures, interact with maps, and explore data points. He discussed that the resource guide was a significant component of the project. It would contain text information, links, PDFs, and various forms of media to assist users in accessing external resources for decision-making and research. Data Request Page would outline the steps for researchers and distributors to obtain additional information not covered in the interactive report. Accessibility was a priority in the development of the site. The team worked on ensuring contrast minimums for individuals needing visual assistance. Efforts are being made to ensure compatibility with

assistive tools. Mr. Harms ended his presentation by informing the board that the Haystack team was dedicated to making the site as user-friendly and accessible as possible.

Advisory Board member Dawn Moore sought clarification regarding the user interface and its functionality. She asked if the "insurance" section on one of the screens is where users enter their insurance information or coverage details to understand how it applies to the prices displayed, or is it solely for viewing different prices for specific procedures?

Dominic Gayton of Onpoint answered the question by saying that patients can select their plan, and the prices will be more directed to a general overview of pricing. Mr. Gayton stated that a more detailed demonstration of the three imperative dashboards would follow shortly, giving attendees a deeper understanding of their functionality and features. Mr. Gayton pointed out an area on the dashboard labeled "plan name" and mentioned that discussions were needed regarding the wording in that section. This indicates that further refinement of the dashboard's user interface is being considered. Mr. Gayton explained that all information displayed on the page would be customized based on the plan selected. This dynamic content adjustment is crucial for providing tailored data to users. Mr. Gayton discussed the procedures and imaging dashboard, comparing prices with a good core set of procedures and mapping them with various facilities and the typical costs at the facility locations. He stated that the team envisions a more extended dashboard with additional viewing options at the bottom.

Advisory Board member Brian Arrowood noted that more disclaimers and methodological information go against a tool's simplicity. Simplicity is one of the most critical things. The information that is presented is complex and challenging to understand. Advisory Board Member Bob Davis asked if there will be a call-in, call center, or email for people who have questions. Director Handsborough responded by telling the board that there would be dedicated staff to answer questions from consumers. APCD team will also be available to walk through and discuss the dashboard and to help navigate the website. He added that a significant component will be the videos and the website's directions.

Onpoint Health Data Dashboard Report

Mr. Gayton of Onpoint Health proceeded to introduce the next portion of the presentation: The interactive dashboards. He initiated this discussion starting with the procedures & imaging dashboard. Mr. Gayton described how the dashboard would compare prices for a core set of procedures and mapping them to various facilities. The dashboard would display the average cost for those procedures at different facility locations. Mr. Gayton expressed that Onpoint envisions a longer dashboard, with more viewing options at the bottom. The content of this dashboard would be primarily procedures and imaging, mainly impatient services with some outpatient procedures. Mr. Gayton explained that the price would be typical for the whole episode of care, including provider charges such as the surgeon or the anesthesiologist, but also the facility charges. Quality scores would be sourced from CMS Care Compare. Onpoint intends to download their quality data and incorporate it with the dashboard. Users will be able to hover the stars displayed on the dashboard and see each of the five quality components from CMS. Mr. Gayton described other features such as the map for this dashboard, which will be interactive. Users will be able to click on individual facilities or click & drag a box over a portion of the map to compare all the facilities within the boundaries. The table below the map will filter for those facilities.

Advisory Board Member Dawn Moore inquired about the frequency of the data being refreshed. She noted that often times there is a "lag-time" for CMS reporting data, and expressed concerns that the quality data being used may be out of date.

Mr. Gayton responded by stating that the quality rating being referred to is at the hospital level. The data is sourced from CMS (Centers for Medicare & Medicaid Services) and will be displayed accordingly. There will be a link provided to the CMS page for more detailed information. However, the current rating system does not provide ratings at the procedure level. The way the rating will be displayed is still being

determined. Mr. Gayton introduced the Plan Selection Dashboard and explained that it is where a user can choose a particular plan. He emphasized the importance of this dashboard in allowing consumers to select the appropriate plan for their needs. Mr. Gayton discussed various aspects of the project, including website integration, pricing, website layout, provider list, and dashboard functionalities- including quality scores.

Advisory Board Member Dawn Moore said that this dashboard is very good. She inquired if there is going to be a similar dashboard exploring health outcomes correlated with insurance companies. Mr. Gayton stated that currently there was not a plan to explore this comparison. Onpoint's Jim Harrison stated that this was something we could explore in the upcoming population health dashboard, released later in the year. Mr. Gayton agreed users will be able to select and filter by insurance companies within the population health dashboard.

Five-year Outlook

Director Handsborough concluded the meeting by reporting that the APCD division will continue to meet with insurers, Hospital Association and Employers Forum. He hopes that the next advisory board meeting will ideally happen after session to ensure that lawmakers can attend. Director Handsborough said the APCD team will be leaning on the advisory board for ideas such as quality and cash prices, that could help expand the APCD program over the next five years. Director Handsborough said that questionnaires will be sent out to help with the planning efforts.

Board Member Arrowood asked if the team was looking to identify pilots, getting feedback from different groups and if certain groups were being identified. Director Handsborough responded by saying that this plan is under consideration and will talk to Onpoint about how we are going to launch it. Advisory board meeting adjourned at 11:15 am