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David Schumacher, Director Office of Financial Management State of Washington PO Box 43113 Olympia, WA 98504-3113

Dear Mr. Schumacher:

The Center for Health System Effectiveness at Oregon Health & Science University, as the lead organization for the Washington All-Payer Health Care Claims Database (WA-APCD), is providing the Office of Financial Management with the below list of reports and deliverables to be produced during calendar year 2019 utilizing data from the WA-APCD. This report is required under RCW Chapter 43.371.060 (1)(b) to be submitted to you as the Director of OFM and for subsequent submission by you to the appropriate committees of the legislature.

	Report Name	Report Description
1.	Washington	The Washington State Common Measures Set for Health Care Quality
	State	and Cost Performance will be reported on the Washington HealthCare
	Common	Compare website and publicly available via a Public Use File (see
	Measures Set	below). The Common Measures Set will be reported at multiple levels
	for Health	of accountability including statewide, Accountable Communities for
	Care Quality	Health regions, and market sectors. Provider-specific quality
	and Cost	performance results are included here and in reports listed below.
2.	Facility-Based	Common shoppable procedures and services provided in the inpatient
	Price &	and outpatient facility setting will be available to the public free on
	Quality	Washington HealthCare Compare. The cost metrics, which are provider-
	Transparency	specific, are consolidated all-insurer commercial allowed cost amounts.
	Report	Shoppable services examples include vaginal delivery, C-section, hip
		replacement, knee replacement, knee arthroscopy, colonoscopy,
		mammography, Magnetic Resonance Imaging (MRI), and ultrasounds.
		The cost metrics will be created using the 3M All Patient Refined
		Diagnostic Related Groups (APR-DRG) grouper to construct hospital
		inpatient episodes and same-day event logic will be used to construct
		outpatient treatment and diagnostic service bundles. Hospital quality
		results patient experience, complications, and outcomes measures
		will be sourced from the Washington State Hospital Association and the
		Centers for Medicare and Medicaid Services (CMS). A hospital summary
		quality performance indicator – an aggregation of individual quality
		measure scores also will be reported. Hospital quality measures will
		be facility not procedure specific. These performance results will be free
		to the public on Washington HealthCareCompare.

	Report Name	Report Description
3.	Professional	Medical practice quality performance will be reported based on a set of
5.	Services Price	Healthcare Effectiveness Data and Information Set (HEDIS) and other
	& Quality	quality measures. A medical practice summary quality performance
	Transparency	indicator – an aggregation of individual quality measure scores also
	Reporting	will be reported. Medical practices, comprised of four or more primary
		care practitioners, are reportable organizations. The cost of
		ambulatory, office-based care services will be reported at the county
		level. Examples of ambulatory services cost metrics include allowed
		cost amounts for common office and preventative visits, behavioral
		services, and ambulatory-based therapeutic services such as physical
		therapy. Cost of care will be based on allowed amount for services
		specified by Current Procedural Terminology (CPT) codes. The cost
		metrics, which are area-specific, not provider-specific, are consolidated all-
		insurer commercial allowed cost amounts. These performance results will
		be free to the public on Washington HealthCareCompare.
4.	Person-Level	Person-level analytic file reporting per person cost and utilization
4.	Analytic File	performance. These data will contain Health Insurance Portability and
	Analytic The	Accountability Act (HIPAA) compliant information, including a person's:
		gender, age group (<18, 18-44, 45-64, 65+ years), payer type,
		attribution to medical practice, coverage time period, total cost,
		inpatient cost, outpatient facility cost, professional cost, prescription
		cost, other cost, inpatient charges, inpatient days, Emergency
		Department (ED) visits, primary care visits, medical specialist visits,
		surgical specialist visits, and advanced imaging services (MRI, CT scan).
		These performance data will be available to WA-APCD data clients for a
		fee.
5.	Analytic	The Analytic Enclave is a managed, cloud-based platform, which houses
5.	Enclave	the all-payer data and a set of analytic tools for Enclave subscribers.
	LIICIAVE	The Analytic Enclave includes January 2013 – June 2017 data that was
		initially submitted by thirty-two insurers. The number of data suppliers
		increased in 2018 to 55 with the addition of the dental data. These
		performance data are available to WA-APCD data clients for a fee.
5a.	Analytic	To meet data analytic needs of various WA data clients/state
Jd.	Enclave –	agencies/stakeholders, the following standard extracts are delivered to
	Standard	the analytic enclave on a quarterly basis:
	Datasets	- Limited Use: Cost and Provider Information
	Dalasels	
		 Limited Use: Cost, no Provider Information Safe Harbor
6	Custom	
6.	Custom	WA-APCD data is also leveraged to meet the needs of custom data
	Datasets	requests that cannot be fulfilled by the above-listed standard analytic enclave extracts. These custom extracts are available to WA-APCD data
		clients for a fee and to date have been produced and delivered to 3
-	Quality and	data clients/state agencies/stakeholders.
7.	Quality and	All of the cost and quality measures results, reported on the
	Cost Summary	Washington HealthCareCompare site, will be free to the public via a
	Report /	downloadable Public Use File on the website.
	Public Use File	

	Report Name	Report Description
8.	Quality Assurance Reporting	 Following quarterly claims extract production, the QA report is created for internal teams to perform in-depth quality assurance into the following areas: Record counts of medical claims by paid and incurred dates for all submitters Record counts of pharmacy claims by paid and incurred dates for all submitters Distinct member counts for the overall extract and by year Distinct member counts for each submitter by year for the extract period Distinct member counts for each submitter by month and by product for the extract period Record counts by service month for all submitters for medical claims broken out by type of claim: Inpatient, outpatient, facility, professional Averages and sums of amount fields in the extract (paid amount, copay amount, coinsurance amount, deductible amount) Summary of bill types and place of service codes assigned to claim types (hospital inpatient, hospital outpatient, other) Summary of paid and member amounts by ACH
9.	Completeness Report	 PEBB and Exchange Member Counts This report is created to better understand the completeness/ percentage of data elements populated across the four WA-APCD file types – eligibility, medical, pharmacy and dental. Also reported is the completeness of data elements that data suppliers use to report their provider information.
9a.	Completeness Report – Substance Abuse Data (SUD	This report is created to better understand the completeness of substance abuse disorder (SUD) data submitted to the WA-APCD. It provides a detailed review of the percentage of data submitted and/or excluded by various WA data suppliers.
10.	Medicare Common Measures Set Reporting	Using measure scoring methodologies, results for this report will be inclusive of those Common Measure Set results relevant for Medicare population.

Respectfully,

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Lorie Geryk, MPH, PhD Senior Project Manager, WA-APCD Lead Organization

cc: Thea Mounts, OFM WA-APCD Program Director