#### CENTER FOR

### HEALTH CARE TRANSPARENCY

## A Collaborative Approach to a Nationally Standard Claims Data Submission Guide

**Kristy Thornton** 

kthornton@pbgh.org

Senior Manager, CHT & PBGH

NAHDO 30<sup>th</sup> Anniversary Meeting October 28, 2015

#### Who are we?





#### **Nonprofit**

**Grant funded planning** initiative

CENTER FOR

## HEALTHCARE TRANSPARENCY

## CHT's Vision: Patients, Providers and Purchasers Have Equal Access to Meaningful Information



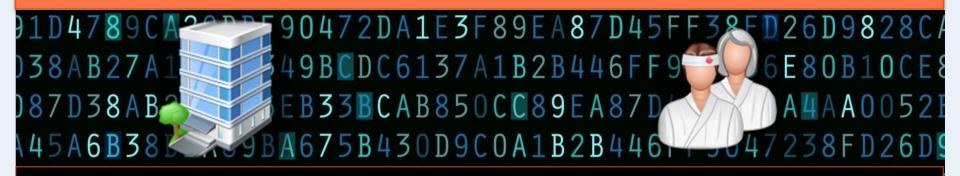
Through a national network of locally governed regional data intermediaries ("RDIs"), the Center for Healthcare Transparency (CHT) will ensure meaningful and actionable information on the relative cost and quality of healthcare services is available to 50 percent of the U.S. population by 2020.







#### The Time is Right



# Transparency



#### CHT is Public, Private & Multi-stakeholder

Executive Committee

Marc Bennett, HealthInsight

Patrick Conway, MD CMS

Karen DeSalvo, MD ONC

Jon Foley, OPM

David Lansky, PhD PBGH (Co-Chair)

Arnie Milstein, MD Stanford Clinical Excellence Research Center

Elizabeth Mitchell, NRHI (Co-Chair)

David Pryor, MD Comcast

Alicia Staley, Akari Health (patient engagement)

User Advisory Council

**Technical Advisory Council** 

13 Regional Health Improvement Collaboratives (RHICS) make up CHT's regional "Design Team"







#### **Current Regional Collaboratives**



























LOUISIANA HEALTH CARE QUALITY FORUM



CENTER FOR IMPROVING VALUE IN HEALTH CARE

\* CHT Innovation Pilot Sites







#### **CHT Goals, Data & Barriers**

Triple Aim Goals	Data Needed	Barriers
Better value	Claims Data	<ul> <li>Access to complete data, including allowed amounts</li> <li>Cost of getting to "clean" data</li> <li>Resistance to public reporting</li> </ul>
Better health	Clinical Data	<ul><li>Data access</li><li>Lack of standards &amp; interoperability</li><li>Resistance to public reporting</li></ul>
Better care	Patient Reported Data	<ul> <li>Inadequate tools/methods</li> <li>Cost &amp; burden of data collection</li> <li>Patient survey fatigue</li> <li>Provider skepticism and resistance</li> </ul>







#### **Building Blocks**

**APCD Core Set of Data Elements** 

Post-Adjudicated Claims Data Reporting Guides (PACDR)

**APCD Claims Database Development Manual** 

**CHT Data Submission Guide** 







#### Data Submission Objective & Process to Date

Objective: Develop a more efficient and standardized process for accessing claims data

#### **Process**

- CHT regional data intermediaries with APCD/MPCD
  - Iterative review
  - Analysis of recommended best practices
  - Consideration of tradeoffs
  - Focus on consensus-building for common good

The goods news: RDIs <u>already</u> have most data elements in common!





#### Standardized Data Submission Benefits

#### Could include:

- 1) Greater clarity into overall data submission expectations
- 2) Common, consistent understanding of data elements definitions
- 3) Enhanced data quality through consistency across sources which can lead to stronger analytics
- Faster, more efficient data auditing process, with reduced mapping error
- 5) Reduced claims data submission burden, especially for national and multi-region data suppliers
- 6) Reduced vendor claims data intake difficulty and scope
- 7) Enhanced ability to share best practices across APCDs that are getting data the same way







#### **CHT Claims Data Submission Guide Features**

#### **Files**

Eligibility; medical and dental, claims & encounters; provider

#### **Data Element Information**

- All APCD Council core medical claims (86) and eligibility data elements (43)
- A description for each data element
- PACDR / NCPDP Reference\*
- Reference sets for Insurance Type/Product Code, Relationship, Race, Ethnicity, Admission Source, Discharge status, Type of Bill, Place of Service and Claims status
- Required or optional indicator







#### **CHT Claims Data Submission Guide Features**

#### **Standard Layout**

- File format
- Field Type
- Field length

# Data elements can be left blank

#### Other Value-Add Resources

- Global dataset parameters (e.g., filing responsibility)
- Recommended file submission methods
- Filing period tradeoffs
- Recommended data quality audits





#### **Next Steps**

#### 2015

- PACDR and NCPDP references included
- Data quality audit definitions included
- Additional review and input from national organizations

#### 2016

- Dissemination to all interested parties
- Roll-out to CHT sites begins

More efficient, less costly way of producing high value measures





#### **CENTER FOR**

## HEALTHCARE TRANSPARENCY

Kristy Thornton <a href="https://kthornton@pbgh.org">kthornton@pbgh.org</a>





