



Annual Report

Fiscal Year 2020

November 2020

Mission Statement

The Association is charged with the charitable and educational purposes of assisting state health data organizations and members of the public by creating, exchanging, and providing information and resources that promote the effective collection, analysis, and dissemination of health care data.

The Association aims to meet its purpose by developing and facilitating networks of health information professionals to:

- Advocate for proper protections of health information while preserving access to such data by the appropriate users
- Promote comparability of health information through the development of guidelines and standards for data collection, analysis, and dissemination
- Share and transfer knowledge across a diverse network of individuals and organizations

About NAHDO

NAHDO is a non-profit 501(c)(3) membership and educational organization, established in 1987, to promote the public availability of healthcare data and improve statewide health care surveillance systems.

To achieve its mission, NAHDO provides technical assistance and guidance to states and advocates for uniformity in data standards. NAHDO is governed by a Board of Directors whose members are from public and private organizations and recognized nationally for their expertise in the health information industry.

NAHDO convenes experts in national meetings, testifies to national and state policymakers, and implements grants and projects consistent with its mission. Through membership, meetings, and projects, NAHDO has established working relationships with health information professionals in nearly all 50 states, including private sector and local health agencies in many of these states.

NAHDO's members are experts in health care data collection and use and represent the only community of practice dedicated to population-based healthcare data issues.

Letter from the Executive Director

Fiscal year 2020 was atypical in just about every way imaginable. COVID-19 disrupted our operations to a certain extent, leading to the last-minute switch to a fully virtual conference in August 2020. However, the silver lining of that switch was a record attendance of over 400 people (compared to a typical attendance of 150-175) while still meeting financial projections. It turned out that COVID-19 was just one of many disruptive factors for NAHDO.

NAHDO experienced a complete turnover in our professional staff. In November 2019, the NAHDO board hired me to be the Executive Director, replacing Denise Love who had served the association well for many years. Shortly after, Emily Sullivan, the Deputy Director chose to leave the association to pursue other opportunities. After conducting a national search, we hired Charles Hawley to join NAHDO as the Director of Projects. This gave us an opportunity to restructure roles and responsibilities to align with the skills and abilities of the new leadership team. Along with my appointment as Executive Director, the NAHDO Board elected a new chair and vice chair, bringing new energy and enthusiasm.

The NAHDO team focused on righting our financial situation. One of NAHDO's top priorities was to reverse course on three consecutive years of net operating losses. We conducted an in-depth analysis of our cost structure and found several opportunities to reduce costs, including allowing the lease on our office space to expire and a planned move to a fully remote or virtual environment. While this decision was made December 2019, it proved to be fortuitous timing as we were already equipped and ready to deal with the COVID-19 pandemic. Ultimately, actions taken during FY2020 have closed the budget deficits and a proposed budget for FY2021 projects a healthy positive net operating income.

NAHDO is entering a period of transformation. At the board's direction, NAHDO also conducted a thorough analysis of our programs and situation with an eye toward improving relevance and sustainability for the future. This review was completed and a draft transformation plan was presented to the board in late September 2020.¹ The plan includes several strategies that will lead to NAHDO's sustainability:

1. Improve NAHDO's presence, relevance, and value
2. Change NAHDO's business model
3. Increase NAHDO's capacity to deliver needed services
4. Change NAHDO's service model and how we deliver services to members
5. Expand focus to serve new types of members or service audiences
6. Form new external partnerships
7. Offer additional membership benefits

These strategies are tied directly to seven initiatives:

1. Enhance the APCD Council
2. Improve and Expand Conferences and Events
3. Expand Membership and Participation
4. Facilitate Collaboration and Networking

¹ The final plan was approved by the Board on November 20, 2020.

5. Advocacy
6. Promote Standardization and Best Practices
7. Information Gathering and Sharing

As we enter a new fiscal year, COVID-19 is still here, but we are optimistic that changes that we have made along with many more planned for the next few years will leave NAHDO in a much stronger position to provide value to our members.

I appreciate the many people that have volunteered their time to help us manage change in a positive direction and I look forward to working in a collaborative environment for years to come!

Sincerely,



Norm Thurston
Executive Director

Projects and Collaborations

Historically, NAHDO has relied primarily on grants and contracts as its major source of revenue. For the past few years, the board has been supportive of NAHDO becoming sustainable through program revenues, decreasing reliance on grants and contracts. While that transformation is happening, NAHDO continues to be involved in existing grant and contractual relationships.

Federal Collaborations

During FY2020, NAHDO continued to collaborate with our federal partners on multi-year projects:

- The Centers for Disease Control and Prevention's (CDC) Environmental Public Health Tracking Network (EPHTN) NAHDO-CDC Cooperative Agreement (Year 3 of 5), Identifying Common and Unique Barriers to the Exchange of Hospital Inpatient and Emergency Department Data: The National Association of Health Data Organizations (NAHDO) provides content expertise and technical guidance on the collection and use of administrative healthcare data to the Centers for Disease Control and Prevention (CDC) Environmental Public Health Tracking Program as described by Cooperative Agreement (CDC-RFA-EH18-180202) titled Identifying Common and Unique Barriers to the Exchange of Hospital Inpatient and Emergency Department Data.
- The Agency for Healthcare Research and Quality (AHRQ) Three-year Small Conference Grant, "Improving the Utility and Comparability of Health Care Data for Health Services Research, Policy Decisions and Transparency Reports", in the AHRQ category of "Improved Analytics" to improve the utility and comparability of statewide hospital and claims-based datasets for health services research, policy decisions, transparency, and other broad uses. The funding request provides a unique opportunity to leverage NAHDO conferences, its convening expertise, and sustain adjunct activities throughout the year, beyond an annual conference, to support multi-state shared solutions.
- Subcontractor to IBM-Watson for AHRQ's Healthcare Cost and Utilization Project: Partner Technical Support and National Standards Representation (NUBC/NUCC).

California Office of Statewide Health Planning and Development

NAHDO is contracted to provide technical and subject matter expertise to the California Healthcare Cost Transparency Database development project. This contract is based on providing deliverables that support California's efforts to establish a Health Payments Database.

Other NAHDO Projects

- **NAHDO Data Quality Forum**
NAHDO established the Data Quality Forum to share effective practices for improving data quality in administrative healthcare databases and to provide opportunities to collaborate on challenges and barriers to data quality improvement. Data Quality Forum participants produced quality

assurance metrics for inpatient discharge and claims data in 2019. These metrics were used for a multi-state quality assessment and are currently being reviewed as part of another multi-state initiative led by the DQF Metrics Workgroup. The newly formed DQF Metrics Workgroup plans to develop APCD and hospital data quality assurance metrics and share results with the intention of fostering direct communication between organizations for addressing quality improvement and sharing local data quality documentation. The Data Quality Forum is open to NAHDO members and meets quarterly. The Metrics Workgroup meets ad hoc more frequently.

- **Source of Payment Typology: Coordination and Maintenance**

The Source of Payment Typology is a standardized Payer Type classification system. It is a mechanism for consistent reporting of payer data to state health data organizations and supports data comparisons by payer type across states, various provider types, and to national benchmarks. Developed by the Public Health Data Standards Consortium (PHDSC) Payer Typology Subcommittee, the typology includes broad hierarchical payer type categories with more specific subcategories. NAHDO has taken over leadership from PHDSC.

Membership 2020

As of September 30, 2020, NAHDO membership totaled 39, including three new or returning lapsed members. One member from the prior year dropped their membership.

Agency for Healthcare Research & Quality	Federal	Government
American Hospital Association	Association	Non-Profit
Arkansas Center for Health Improvement	Public	Government
Arkansas Department of Health	Public	Government
Arkansas Foundation for Medical Care	General	Non-Profit
California Office of Statewide Health Planning and Development	Public	Government
Center for Health Data at the University of Texas	General	Academic
Center for Health Information Analysis, University of Nevada Las Vegas		
	General	Academic
Center for Improving Value in Health Care	Public	Government
Dallas-Fort Worth Hospital Council Foundation	Association	Non-Profit
Delaware Health Information Network	Public	Government
Florida Agency for Health Care Administration	Public	Government
*Freedman Healthcare, LLC	Corporate/Vendor	For Profit
Green Mountain Care Board	Public	Government
Hawaii State Health Planning and Development Agency	Public	Government
HCCI	General	Non-Profit
Human Services Research Institute	Corporate/Vendor	Non-Profit
Maine Health Data Organization	Public	Government
Manatt Health	Corporate/Vendor	For Profit
Maryland Health Care Commission	Public	Government

Massachusetts Center for Health Information and Analysis	Public	Government
*MedicaSoft	Corporate/Vendor	For profit
Michigan Data Collaborative	General	Non-Profit
Milliman MedInsight	Corporate/Vendor	For profit
Minnesota Department of Health / State of MN	Public	Government
Mississippi State Department of Health	Public	Government
National Center for Health Statistics	Federal	Government
*New York State Department of Health	Public	Government
NORC at the University of Chicago	Corporate/Vendor	Non-Profit
Onpoint Health Data	Corporate/Vendor	Non-Profit
OPTUM	Corporate/Vendor	For Profit
Oregon Health Authority, Health Policy & Analytics Division	Public	Government
Project Patient Care	General	Non-Profit
Tennessee Department of Health	Public	Government
Utah Department of Health	Public	Government
Virginia Health Information	Public	Government
Vizient	Corporate/Vendor	For profit
Washington State Department of Health	Public	Government
WV Department of Health and Human Resources	Public	Government
* New or rejoining lapsed members		
Dropped during FY2020:		
Alaska Department of Health and Human Services	Public	Government

NAHDO Board 2020

The FY2020 board elections included openings for three public members and one corporate/vendor member. Board office elections were held shortly after the board elections. Current members, terms of service and officers are as follows:

Janice Bourgault	2018 Q4–2021 Q4	
Onpoint Health Data, Corporate/Vendor		
Niall Brennan	2018 Q4–2021 Q4	
Health Care Cost Institute, Corporate/Vendor		
Leanne Candura	2019 Q4–2022 Q4	
Human Services Research Institute, Corporate/Vendor		
María de Jesús Díaz-Pérez	2018 Q4–2021 Q4	
Center for Improving Value in Health Care, Public		
Helen Figge	2020 Q1–2021 Q1	
MedicaSoft , Corporate/Vendor, Appointed		
Stefan Gildemeister	2018 Q4–2021 Q4	
Minnesota Department of Health, Public		
Karynlee Harrington	2016 Q4–2022 Q4	CHAIR
Maine Health Data Organization, Public		
Nikole Helvey	2017 Q4–2020 Q4	
Florida Center for Health Information and Transparency, Public		
Kathy Hines	2018 Q4–2021 Q4	
Center for Health Information and Analysis, Public		
Starla Ledbetter	2016 Q4–2022 Q4	SECRETARY
California Office of Statewide Health Planning and Development, Public		
Michael Lundberg	2019 Q4–2022 Q4	VICE CHAIR
Virginia Health Information, Public		
Kevin McAvey	2017 Q4–2020 Q4	TREASURER
Manatt Health, Corporate/Vendor		
Patricia Merryweather-Arges	2018 Q4–2021 Q4	
Partnership for Patient Safety, General		
Kenley Money	2020 Q1–2021 Q1	
Arkansas Center for Health Improvement, Public, Appointed		
Srinivas Sridhara	2017 Q4–2020 Q4	
Optum, Corporate/Vendor		

Financial Report FY 2020

NAHDO ended its fiscal year on September 30, 2020 in a strong financial position. Despite some significant costs associated with the transition of personnel, NAHDO was able to engage in a series of cost-reducing activities to offset those expenses. Grant and contract revenue remained similar to the prior fiscal year and the 34th Annual Conference (Little Rock) was financially successful. Even without the extraordinary net revenue that occurred due to having two annual conferences in the same accounting period, NAHDO has returned to a position of positive net revenue after three consecutive years of operating in the red.

	9/30/2015	9/30/2016	9/30/2017	9/30/2018	9/30/2019	9/30/2020 ¹
Membership & Partnership Revenue	\$151,126	\$138,375	\$118,775	\$92,000	\$166,042	\$156,329
Grants and Contracts	\$640,399	\$412,033	\$200,620	\$159,171	\$309,697	\$300,162
Annual Conference ²	\$172,985	\$172,985	\$177,045	\$173,899	\$130,800	\$142,800
Second Conference ²	-	-	-	-	-	\$110,046
Other Income ³	\$848	\$114	\$189	\$473	\$694	\$33,688
Total Revenue	\$965,358	\$730,367	\$487,084	\$425,543	\$607,233	\$743,025
Total Expense	\$875,755	\$709,931	\$533,540	\$511,001	\$679,245	\$641,527
Gain/Loss	\$89,603	\$20,436	(\$46,456)	(\$85,458)	(\$72,014)	\$86,585
Net Assets	\$723,184	\$743,620	\$697,164	\$611,706	\$539,692	\$641,190

Notes:

- (1) FY2020 figures are from independent accountant's reviewed figures
- (2) Due to changes in the conference calendar, FY2020 includes two annual conferences. Direct expenses for the first conference were \$89,817 and for the second conference, \$5,216.
- (3) Sources of other revenue include savings interest, dividends and interest on securities, realized and unrealized investment gains/losses, and liquidation of assets.