



# National Updates

## What we know, what we learned

NAHDO Conference  
November 7, 2019

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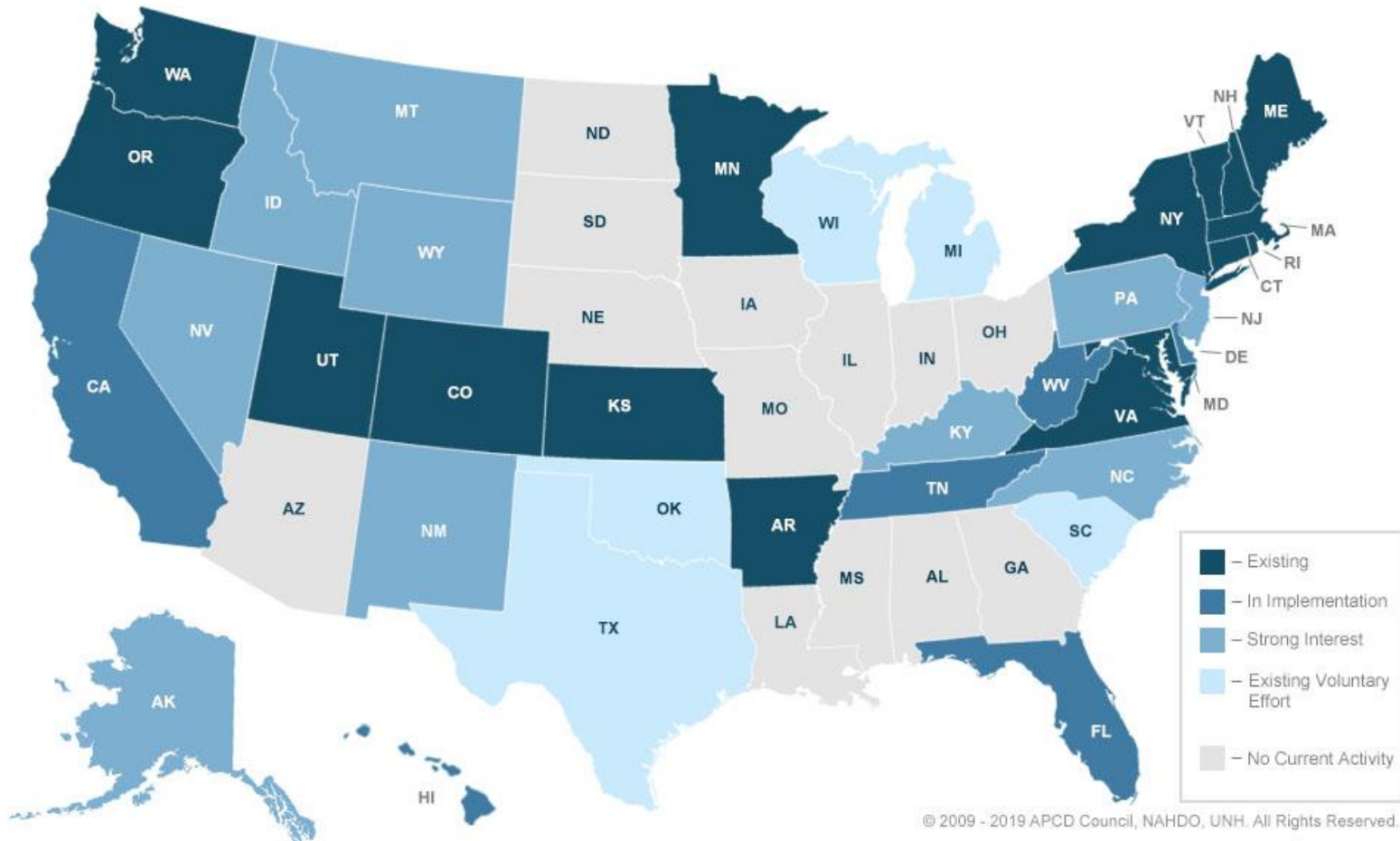
## About the APCD Council

The APCD Council is a learning collaborative of government, private, non-profit, and academic organizations focused on improving the development and deployment of state-based all payer claims databases (APCDs). The APCD Council is convened and coordinated by the Institute for Health Policy and Practice (IHPP) at the University of New Hampshire (UNH) and the National Association of Health Data Organizations (NAHDO).

## Our Work

- Early Stage Technical Assistance to States
- Shared Learning
- Catalyzing States to Achieve Mutual Goals
- Advocacy for state/federal policies

# November 2019 State Progress Map



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## Key Issues

- Surprise Medical Bills
- Transparency
- Substance Use Disorder Data
- Alternative Payment Models

## Bi-Partisan Issue

- Several bills in House and Senate
- Arbitration and/or Independent Dispute Resolution (IDR) concept
  - References to median in-network rates
  - Need data source
- Two bills with APCD reference
  - S1895, “Lower Health Care Costs Act”, HELP
    - Title III: Improving Transparency in Health Care
    - Sec. 303. Designation of a nongovernmental, non-profit transparency organization to lower Americans’ health care costs
    - Comments: <https://www.apcdouncil.org/apcd-council-response-lower-health-care-costs-act>
  - HR 3630, “No Surprises Act”, Energy and Commerce
    - Sec. 4. State All Payer Claims Databases

## Emphasis area of this administration

- Executive Order on Improving Price and Quality Transparency in American Healthcare to Put Patients First, June 2019
  - “Health and Human Services shall propose a regulation, consistent with applicable law, to require hospitals to publicly post standard charge information, including charges and information based on negotiated rates and for common or shoppable items and services”
- CY 2020 Medicare Hospital Outpatient Prospective Payment System (OPPS) and Ambulatory Surgical Center (ASC) Payment System Proposed Rule, (CMS-1717-P)
  - “Section XVI. Proposed Requirements for Hospitals to Make Public a List of their Standard Charges” stipulates hospitals publish “Negotiated charges”
  - Submitted comments in September

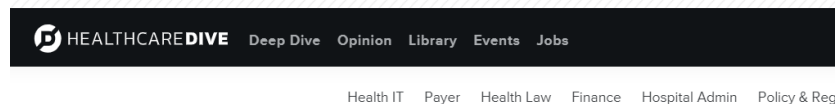
<https://www.whitehouse.gov/presidential-actions/executive-order-improving-price-quality-transparency-american-healthcare-put-patients-first/>

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalOutpatientPPS/Hospital-Outpatient-Regulations-and-Notices-Items/CMS-1717-P.html>

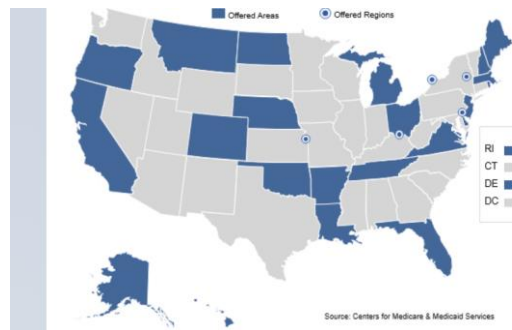
## SAMHSA Proposed Changes to 42 CFR Part 2

- § 2.52 Research: “For example, under the current provisions of § 2.52, the disclosure by a lawful holder of SUD records for the purpose of research to a State agency without a part 2 patient consent may be barred, given that most State agencies are neither HIPAA covered entities nor directly subject to the Common Rule. It is not SAMHSA’s intention or policy to make it more burdensome for these sorts of stakeholders to carry out scientific research.”
- § 2.53 Audit and Evaluation: “First, some stakeholders have voiced frustration that part 2 programs have been unwilling or unable to disclose patient records that may be needed by federal, state, and local agencies, to better serve and protect patients with SUD. ...Therefore, a part 2 program or other lawful holder may share non-identifiable information with government agencies (federal, state and local) for many types of activities.”
- Comments here: <https://www.apcdouncil.org/apcd-council-comments-confidentiality-substance-use-disorder-patient-records>

## Data to Support and Track APMs



### HHS chief keeps focus on alternative payment models



“Primary Care First Model Options is a set of voluntary five-year payment options that reward value and quality by offering an innovative payment structure to support delivery of advanced primary care.”

### FierceHealthcare

HOSPITALS & HEALTH SYSTEMS TECH PAYER FINANCE PRACTICES REGULATORY SPECIAL REPO

Hospitals & Health Systems

### CMS: More hospitals will get value-based purchasing program payment bonuses in FY2020

by Robert King | Oct 29, 2019 12:45pm

<https://innovation.cms.gov/initiatives/primary-care-first-model-options/>

<https://www.healthcarediver.com/news/hhs-chief-keeps-focus-on-alternative-payment-models/566094/>

[https://www.fiercehealthcare.com/hospitals-health-systems/cms-more-hospitals-will-get-value-based-purchasing-program-payment-bonuses?utm\\_source=internal&utm\\_medium=rss](https://www.fiercehealthcare.com/hospitals-health-systems/cms-more-hospitals-will-get-value-based-purchasing-program-payment-bonuses?utm_source=internal&utm_medium=rss)



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