# Agenda Item IV: HPD Data Collection, Use, and Release Updates

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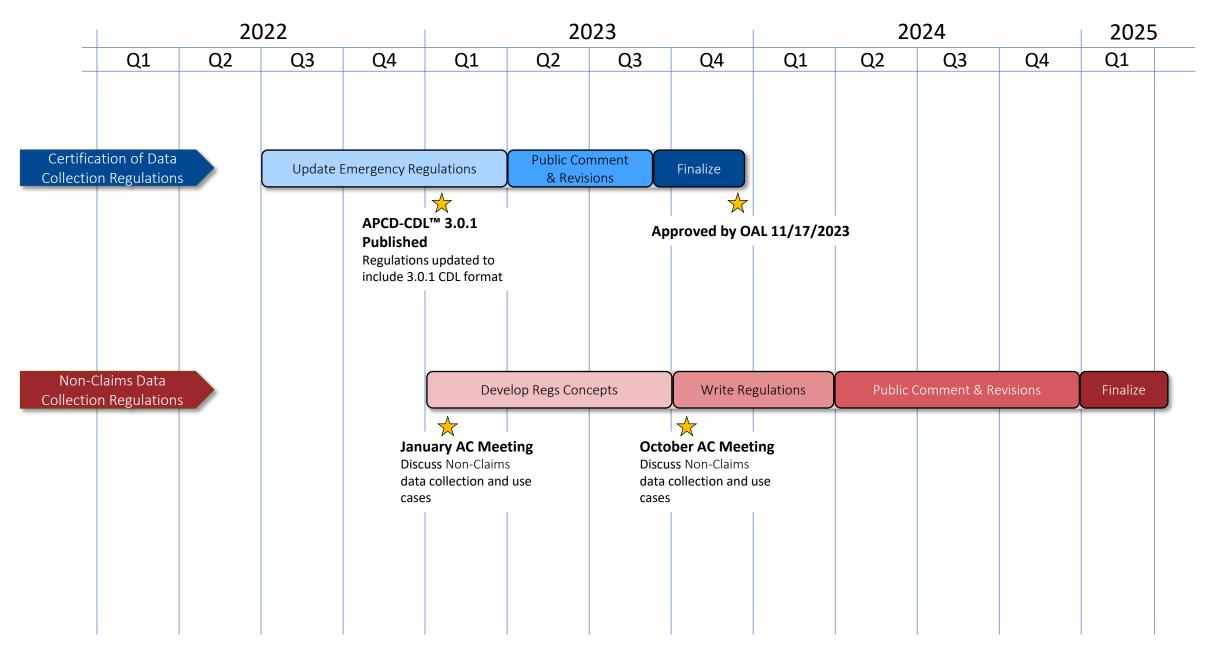


## HPD Data Collection Update

- Commercial health plans/submitters continue monthly submissions.
- DHCS data successfully processed through September 2023.
- Medicare FFS data acquired from CMS: 2018-2021 and Q1-Q4 2022;
  2021 data came in after HPD Snapshot Public Report; Renewed DUA and obtained approval for 2022 annual and 2023 quarterly data.
- Regulations: HPD data collection certification approved and chaptered.
- Published updated Data Submission Guide and Reporting Manual.
- Continue preparations for March 2024 Legislative Report.



#### **HPD Data Collection Regulations Packages and Advisory Committee Meetings**



## Plan/Submitter Outreach and Engagement

- Submitter Group Meetings for plans/submitters held quarterly.
- Individual Dental Plan/Insurer meetings are ongoing.
- Onpoint training sessions scheduled for Q1 2024 for annual registration and specific dental data implementation requirements.
- Planning for regular reviews of data collection and completeness with individual plans.
- Non-Claims Payment data collection

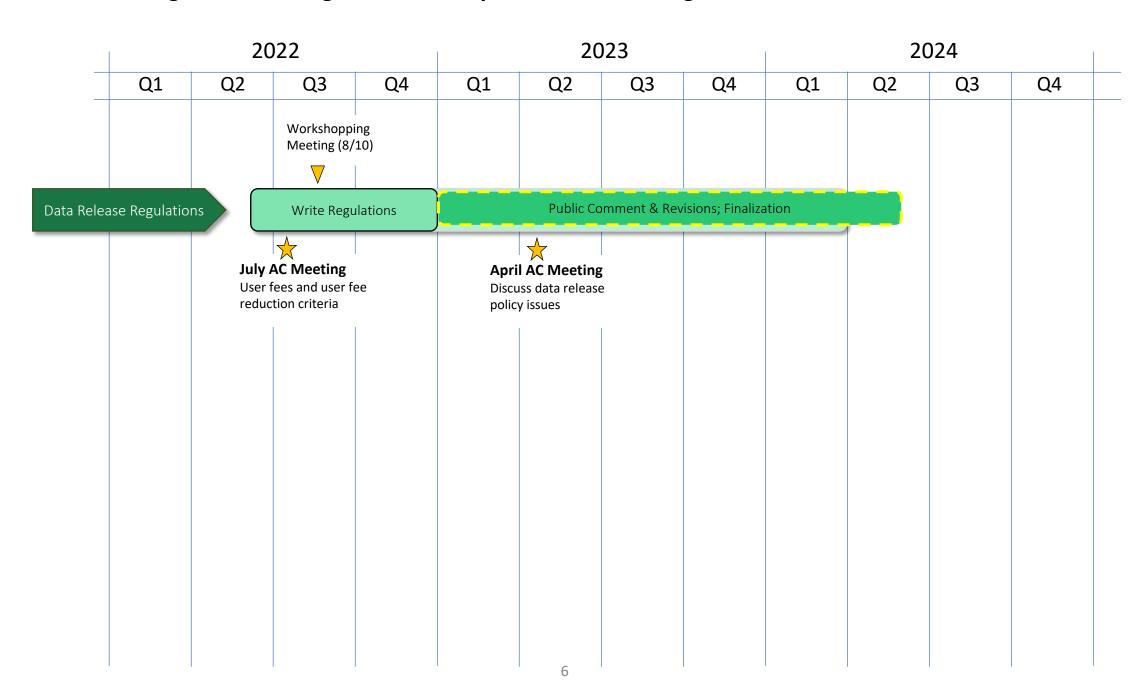


## HPD Data Release Update

- HCAI working with Data Release Committee on board procedures, including developing criteria for decision making and developing a manual for members.
- Data release regulations were posted for a second public comment period. They were posted on December 18, 2023, and the period closes February 1, 2024.
- HCAI continues to develop and test the data request and data enclave systems.



#### **HPD Data Release Regulations Packages and Advisory Committee Meetings**



## 2024 Public Reporting Priorities

## **Specific Topics prioritized:**

- 1. Health Equity
- 2. Enhancement of Prescription Drug Costs Report
- 3. Hospital Costs

### Refresh Current Reports

HCAI will also refresh the HPD Snapshot and HPD Measures reports with new data in 2024.



## Preparation for Future Reporting

- Discussed at the October AC Meeting
- Members indicated several topics that HCAI should prioritize for future reporting
- Request your input on each of the following, one per meeting, to support preparation and capacity building:
- 1. Out-of-Pocket Costs
- 2. Primary Care Utilization
- 3. Behavioral Health Utilization
- 4. Los Angeles County: Add Service Planning Areas



## Future Reporting: Out-of-pocket Costs

- Transparency to respond to growing concern about consumer affordability, medical debt
- Medical OOP costs include coinsurance, copayments, and deductibles but not share of premiums
- Analyses will treat reported OOP costs as actual (not estimated) for both claims and encounter data
- HPD has data on cost share at point of service but not whether the payment was actually made



## Future Reporting: Out-of-pocket Costs

Under consideration for future reporting:

- Compare out-of-pocket costs for Fee-for-service (FFS) vs. Managed Care
- Trends over time
- Variation by payer type, product type, type of setting, geography, and demographic factors
- Focus on specific procedures

What input do you have for HCAI on out-of-pocket cost reporting?



# Public Comment

