

# Agenda Item V: HPD Data Collection and First Public Report

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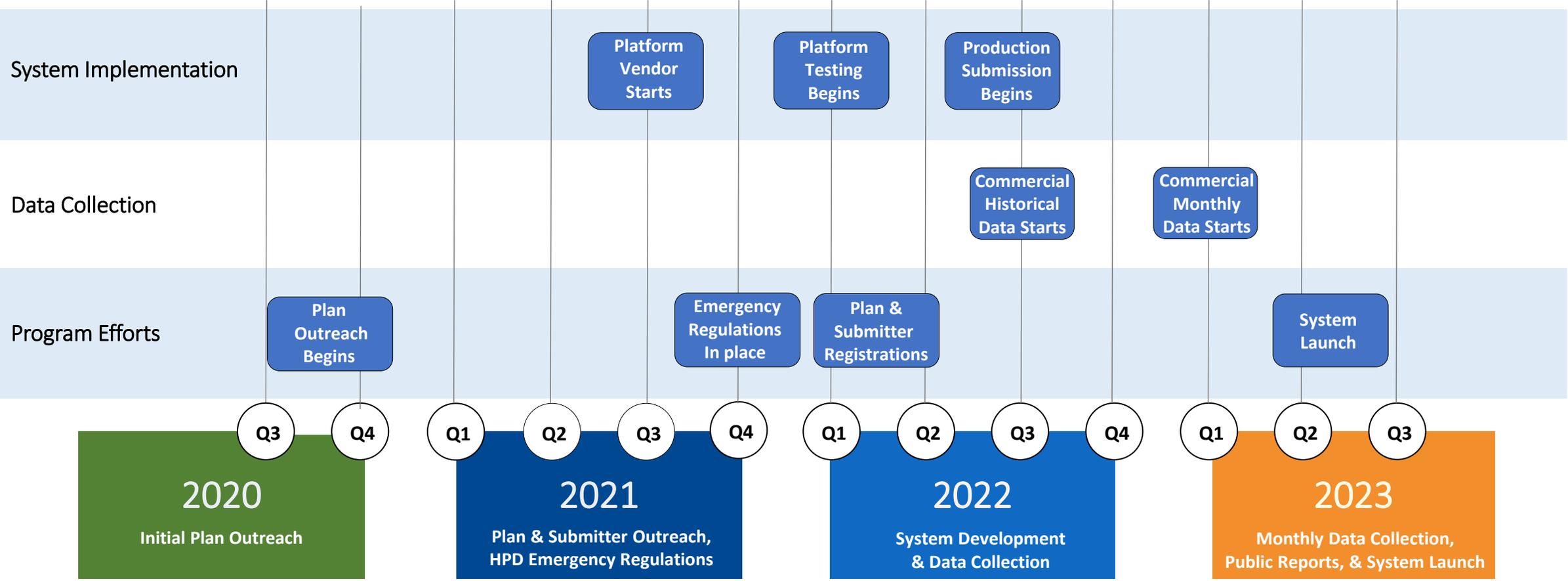
Christopher Krawczyk, PhD - Chief Analytics Officer, HCAI

# For Today

- HPD data collection overview
- Walkthrough of the HPD Snapshot
- Data element completeness profiles

# Data Collection

# Data Collection Milestone Timeline



# Plans, Insurers, and Public Entities

- There are 50 plans, insurers and public entities registered with HPD
  - 29 plans licensed through Department of Managed Health Care (DMHC)
  - 16 insurers licensed through California Department of Insurance (CDI)
  - 5 public entities
  - Mandatory status defined by 40,000 threshold of covered lives or being a Covered California Qualified Health Plan (QHP)
  - Includes 3 voluntary registrations
- There are 38 registered data submitters
- Only one mandatory plan is yet to submit data
- The HPD Snapshot includes over 98% of the expected commercial (includes Medicare Advantage) covered lives

# HPD Data Submitters

- During registration, a plan, insurer or public entity identifies which organization(s) will technically submit their data to HPD
- In some cases, the plan and submitter are the same entity
- In other cases, a plan contracts with another organization to submit data on their behalf
  - Particularly relevant for public entities
  - Common for pharmacy data to be submitted by a Pharmacy Benefits Manager (PBM)
- The same submitter may submit data for multiple plans, data for multiple payers is submitted in the same file with each record clearly identified as who it belongs to

# HPD Data – Strong Member Matching Capability

- HPD data relies upon the ability to uniquely identify individuals across the various datasets and payers
- HPD uses a number of key identifiers for member matching
  - Data element completeness for the HPD key identifiers is at, or close, to 100%
- HPD displays a strong capability for member matching

# HPD Data File Types

- HPD accepts data in three main types of files:
  - Eligibility – member demographics, enrollment and coverage details
  - Claims/Encounters – specifics of the service provided, what was done, where, by whom, and cost (if applicable) – Medical, Pharmacy included, Dental in 2024
  - Provider – demographics, location and specialty (must include all providers included on the previous two file types)
- Two main file formats:
  - National standard APCD-CDL™ - used by all commercial submitters and DHCS
  - CMS Medicare FFS – proprietary format
- Medicare FFS data for 2021 was NOT available for the extract used for Public Reporting

# HPD Snapshot Live Demonstration

Visualization and underlying data publicly available

# HPD Snapshot - Data Overview <sup>1</sup>

Select a Claim Type

All



Medical



Pharmacy



Select Reporting Year(s):

12

Total Product Types

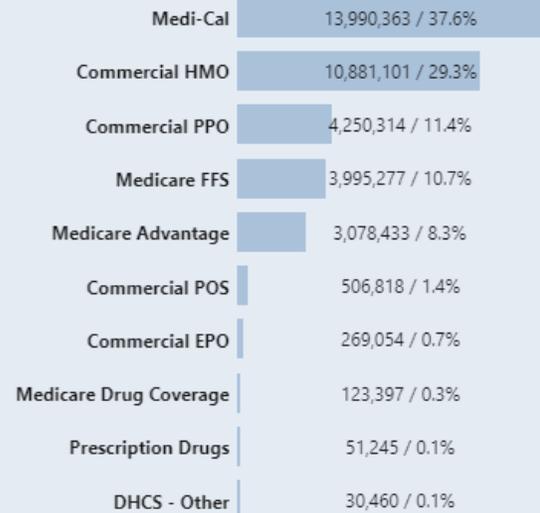
35,348,125 <sup>1</sup>

Individuals

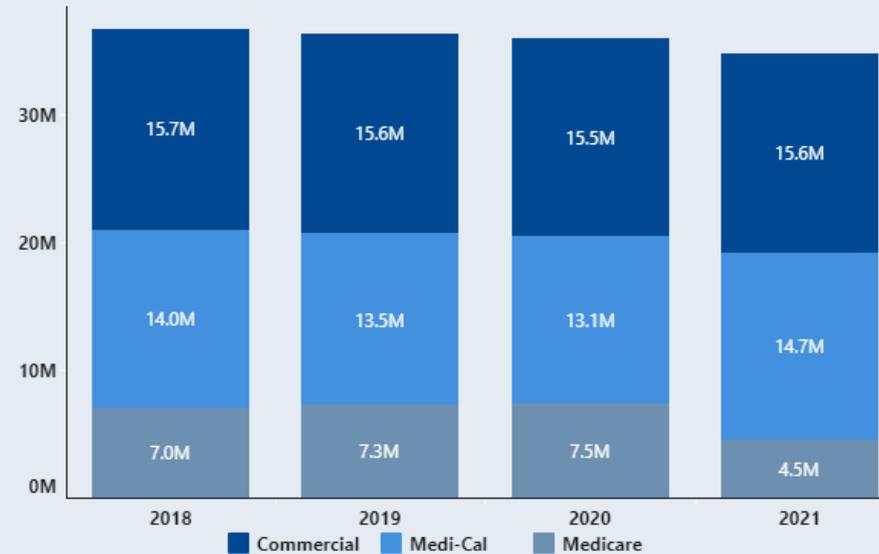
1,622,708,825

Total Records

Top Product Types by Count of Individuals



Count of Individuals by Payer Type



[Data Overview](#)

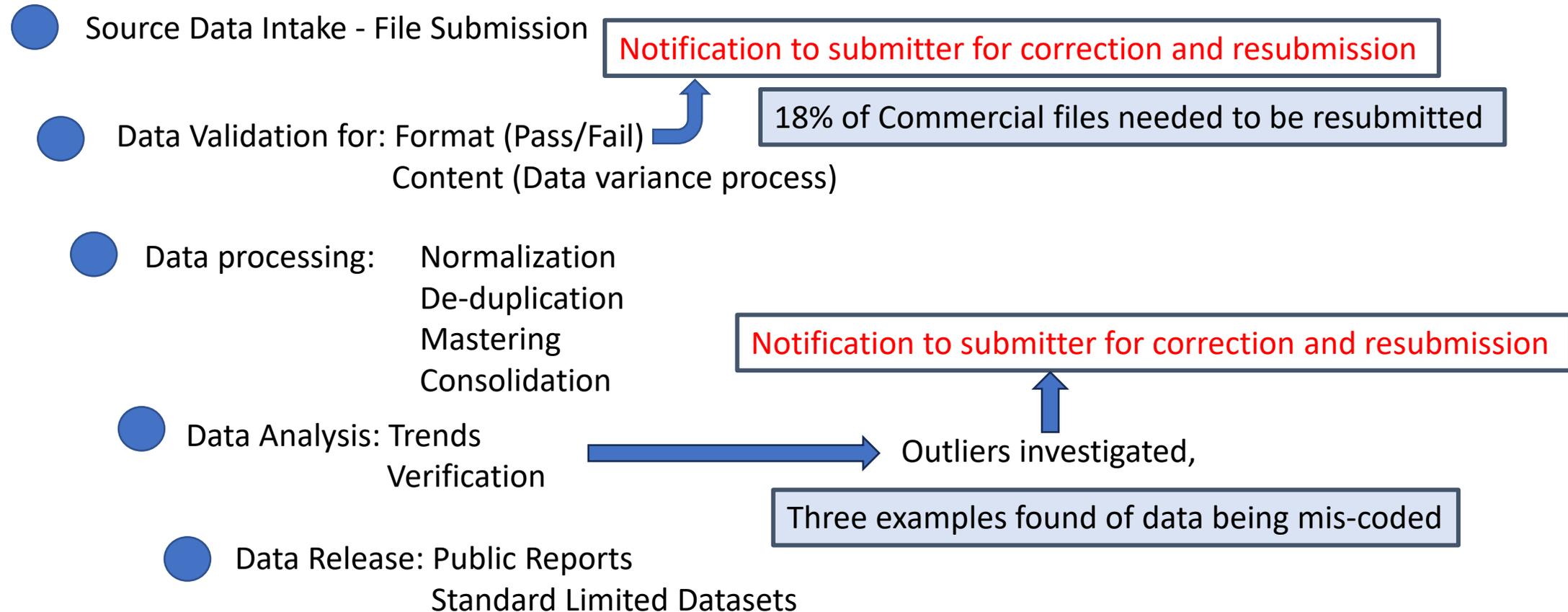
[Data Availability](#)

[Medical Procedures](#)

[Drug Prescriptions](#)

# Data Element Completeness

# HPD Data Collection Process



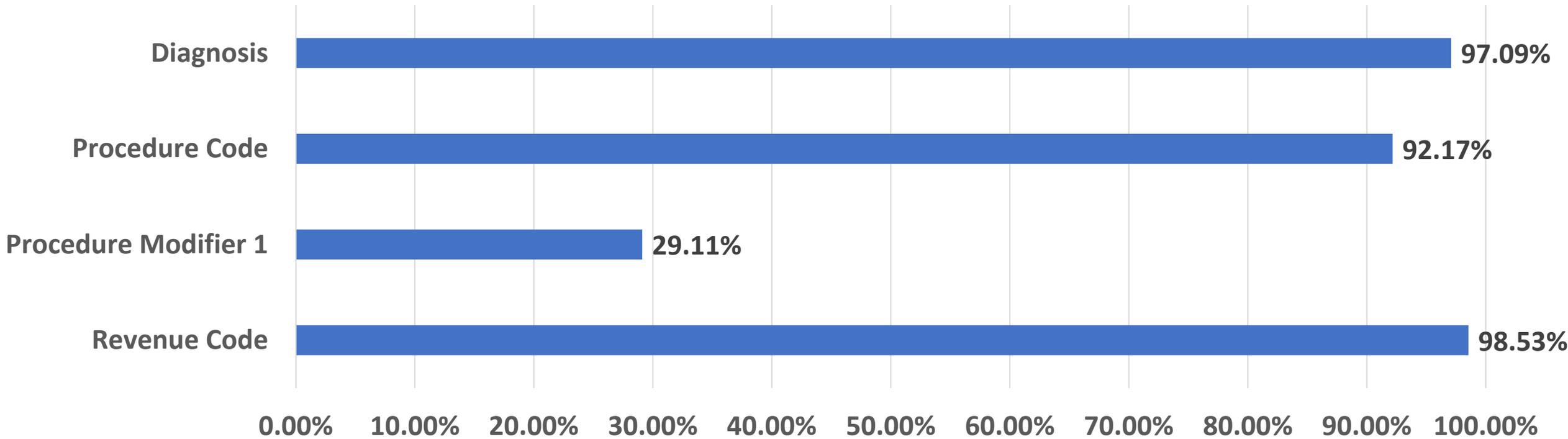
# Data Quality

- In March 2024, HCAI will submit a report to the Legislature that will include information on HPD data quality.
- Today's focus is on data completeness a key aspect of data quality. Data completeness informs HCAI's approach to public reporting.

Preview of topics to be covered in the March 2024 Status Report to Legislature:

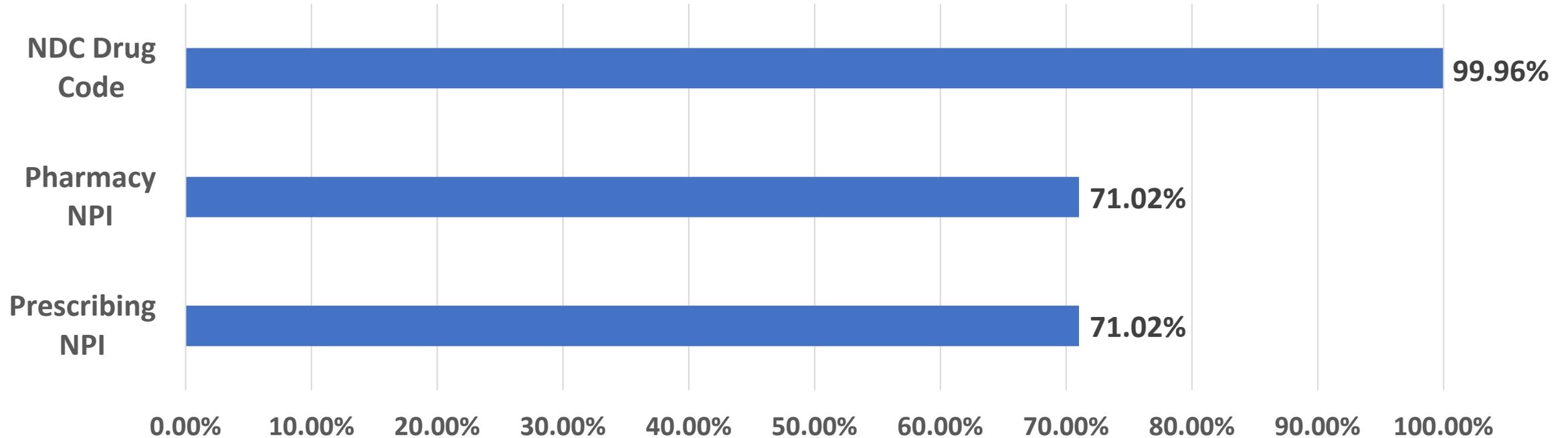
- Covered lives
- Percent of population
- Voluntary submission (e.g., ERISA, small plans)
- Variation of completeness across geographic regions
- Frequency of submissions by type of data
- Hospital and physician data

# Data Completeness – Identification of Medical Services



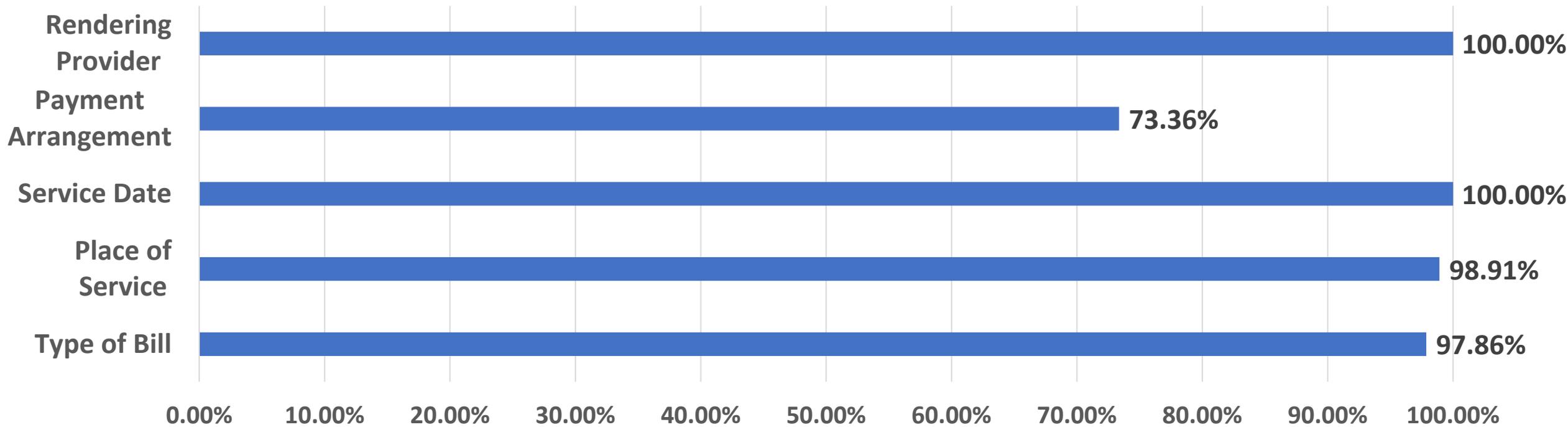
The high population of these fields allows HPD to confidently and reliably identify common services and diagnoses. Procedure Code includes services such as office visits and the good population of the Procedure Modifier allows for further detail. Revenue code only applies to Inpatient services.

# Data Completeness - Pharmacy Claims/Encounters



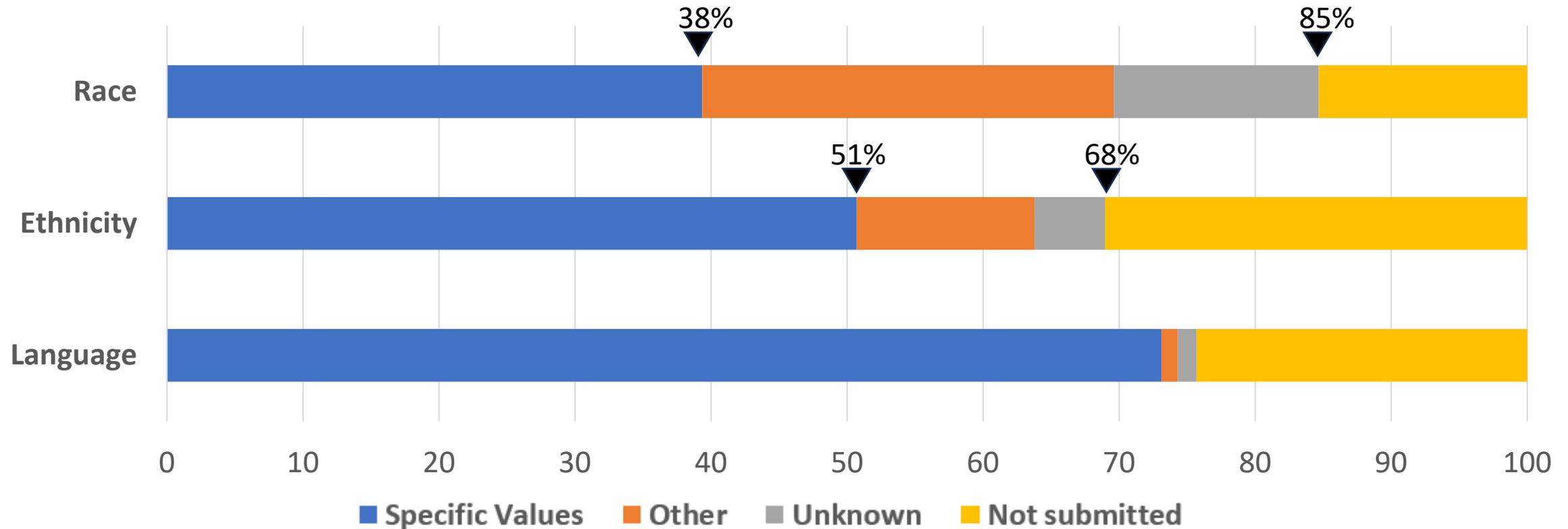
The high population of the NDC Drug Code allows HPD to identify common prescriptions. The lower percentages for Prescribing NPI and Pharmacy NPI that identify who wrote the prescription and where it was filled are due to Medicare FFS data, both Commercial and Medi-Cal are 100%

# Data Completeness – Claims/Encounters Characteristics



These key fields tell HPD about the type of location of the service provided, when it occurred, who rendered the service and whether it was paid under Fee-for-Service (FFS) or Capitation

# Data Element Completeness – Race, Ethnicity & Language



Although the technical completeness of Race appears high (85%), a closer look at the submitted values shows a high percentage of “Other” and “Unknown” which are valid values. Data for 2020 across all payer types.

# Discussion questions for Advisory Committee members

- From this presentation on data element completeness, what did you find helpful?
- What other data quality analyses would you want to see at future AC meetings?
- This is a subset of the items that will be in the 2024 report. What other data quality analyses would you like to see in the 2024 report?

# Public Comment