

Healthcare Payments Data Program

Background

Assembly Bill 80 (AB 80) (Chapter 12, Statutes of 2020) requires the Department of Health Care Access and Information (HCAi) to create and administer a statewide Healthcare Payments Data (HPD) Program, often referred to as an All-Payer Claims Database or APCD.

HCAi is required to establish and administer the HPD Program to collect health care data from health care plans, health insurers, government agencies and others (Health and Safety Code Section 127671.1). HPD data is intended to support greater health care cost transparency and will be used to inform policy decisions regarding the provision of quality health care, and to reduce health care costs and disparities. The information will also be used to develop innovative approaches, services, and programs that may have the potential to deliver health care that is both cost effective and responsive to the needs of all Californians.

The [HPD Advisory Committee](#) meets quarterly and advises HCAi on the ongoing administration of the database, such as key public reporting priorities that can inform the most pressing public policy issues. Meetings are open to the public. In July 2024, the HPD Advisory Committee made recommendations, as required by HPD statute, on [integrating state public health data with the HPD System](#).

Public Reporting

HCAi is required to produce publicly available information from the HPD database, including data products and analytic reports, to support the goals of the program. HCAi released its first public report in June 2023 and has published five analytic reports from the HPD to date:

1. [The HPD Snapshot](#) provides a wealth of information about what data is available in the HPD, with visualizations that allow users to explore how many Californians received coverage from each payer type and the number of medical or pharmacy service records generated.
2. [The Healthcare Measures Report](#) presents a series of visualizations for health conditions, healthcare utilization, and patient demographics.
3. [The Fee for Services Drug Costs in California Report](#) presents the top 25 costliest, most prescribed, and highest out-of-pocket cost fee-for-service paid drugs in California.

4. [**The HPD Services Report**](#) consists of two dashboards that allow users to explore the types of healthcare services provided to Californians each year.
5. [**The Medical Out-of-Pocket Costs and Chronic Conditions Report**](#) allows users to explore various aspects of the financial responsibility for medical care experience by California consumers with at least one visit in 2022.
6. [**Data Brief: Avoidable Emergency Department Visits Vary Widely Across California**](#) examines potentially avoidable ED visits across payer types and geographic areas of California using 2023 data from the HPD Program.
7. [**Data Brief: Payment Arrangements in California's Commercial and Medicare Advantage Markets in 2023**](#) provides a comprehensive picture of payment arrangements currently in use in California's market.
8. [**Data Brief: Behavioral Health Spending in California's Commercial Market**](#) presents mental health and substance use disorder spending by year and service category.

Data Access & Release

The [Data Release Program](#) was launched in December 2024, as required by statute, to allow researchers, state agencies, and other qualified applicants to request access to non-public HPD data. To support effective implementation of the Data Release Program, the department regularly convenes the [HPD Data Release Committee](#) to advise HCAI on the release of HPD data. Meetings are open to the public.

Improvement & Expansion

To maximize its utility and value for California policymakers, researchers, and others interested in improving California's healthcare system, HCAI intends to make the HPD System as comprehensive as possible by increasing the volume and variety of data collected over time. HCAI will continue to evaluate and report on HPD data quality and completeness for transparency to support continuous improvement.

To that end, HCAI submitted a [Program Report to the California Legislature on the Status of the HPD](#) in March 2024 with a focus on the completeness and quality of data included in the initial five years of historical data that has been loaded into the HPD System.

Upcoming Activities

The list of upcoming activities below outlines the activities HCAI will conduct to implement and operate the HPD Program from January 2025 to June 2027.

Projected Time	Period Program Activities
January to June 2025	<ul style="list-style-type: none">• Continue producing analytic reports and processing applications for non-public data.• Complete collection of initial historical dental data; being collection of monthly dental data files.• Complete rulemaking to establish non-claims payments data collection regulations.
July to December 2025	<ul style="list-style-type: none">• Continue producing analytic reports and processing applications for non-public data.• Begin collection of initial historical non-claims payment data, such as capitation payments.• Prepare analytic dental datasets for use.
January to June 2026	<ul style="list-style-type: none">• Continue producing analytic reports and processing applications for non-public data.
July to December 2026	<ul style="list-style-type: none">• Continue producing analytic reports and processing applications for non-public data.• Complete collection of initial historical non-claims payment data.
January to June 2027	<ul style="list-style-type: none">• Continue producing analytic reports and processing applications for non-public data.

For information about the upcoming Pharmacy Benefit Manager (PBM) data collection program, see the [PBM Data Submission Fact Sheet](#).

Privacy & Security

HCAI has collected, managed, and successfully protected sensitive and confidential health data for decades. HCAI ensures that the security, privacy, and confidentiality of consumers' individually identifiable health information is protected in a manner consistent with state and federal privacy laws. A core principle is that protected health data managed by HCAI is used to learn and provide information about healthcare systems and populations at large, not individual patients. [Read more about how HCAI data is protected.](#)