

Item 2: HPD Program Updates and November Meeting Recap

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November Meeting Recap

November 2024 DRC Meeting Topics

- APCD Panel
- Federal Health Care Price Transparency Requirements

HPD Advisory Committee Updates

The next meeting will take place on July 23, 2026, from 9:00 a.m. to 12:30 p.m. and will discuss topics such as:

- HPD Data Collection

Program Updates

HPD Program Goals

1. Provide **public benefit** for Californians and the state **while protecting individual privacy**.
2. Increase **transparency** about health care costs, utilization, quality, and equity.
3. Inform **policy decisions** on topics including the provision of quality health care, improving public health, reducing disparities, advancing health coverage, reducing health care costs, and oversight of the health care system and health care companies.
4. Support the development of **approaches, services and programs** that deliver health care that is cost effective, responsive to the needs of Californians, and recognizes the diversity of California and the impacts of social determinants of health.
5. Support a **sustainable health care system** and more **equitable access** to affordable and quality health care for all.

HPD Data Access & Release Objectives

1. Protect Patient Privacy
2. Support Program Goals
3. Ensure appropriate data users, uses, methodologies, and compliance with all requirements
4. Provide timely data access to qualified applicants and make decisions in a consistent manner
5. Enable & support diverse users, representing multiple audiences & levels of expertise
6. Complement the HPD public reporting program
7. Support sustainability through data costs that balance program support and affordability

Legal Requirements for DRC Review

- Per HPD Statute, in making recommendations, the DRC is required to consider one or more of the following:
 - whether the use of the data is consistent with the goals of the system,
 - whether it provides greater transparency regarding health care costs, utilization, quality, or equity, or
 - how the information may be used to inform policy decisions regarding the provision of quality health care, improving public health, reducing health disparities, advancing health coverage, or reducing health care costs.
- These considerations are broad and open to interpretation.
- There are no regulations or specific criteria the DRC must use.

Optional DRC Considerations

- Privacy:
 - Is reason or justification provided for all confidential or sensitive data elements requested?
 - Does the request satisfy minimum data necessary standards?
 - Does the requestor demonstrate ability to protect data privacy and security for requests that include direct personal identifiers?
- Anticompetitive Use & Commercialization of HPD Data:
 - Is there potential for anticompetitive use of the data?
 - Could the data be used for commercialization or marketing?

Optional DRC Considerations

- Results and Information Products:
 - Any concerns about the proposed objectives, methodologies, or potential limitations of the data?
 - What are the expected findings/outputs?
 - How will results be made available to policymakers or the public?
 - What level of aggregation will be applied to reports, presentations, and other information products intended for public dissemination?
 - How does the proposed project generate a public benefit for California?

- What is the state's involvement, if any?

DRC Recommendation Options

- **Recommended:** The committee votes to recommend approval of the application. If recommended, HCAI will make a final determination and provide information on data user fees, the method of data access (Enclave, direct transmission), and the Data Use Agreement (DUA) with the written notification. However, even if the committee recommends approval, HCAI may still deny the application.
- **Conditional:** The committee can recommend conditional approval for applications that require additional information to address minor issues or deficiencies. In these cases, conditional approval letters listing the issues and deficiencies will be provided to the requestor, and HCAI will work with the requestor to modify the application or obtain additional information to address the DRC's concerns. These applications will not need to return to the DRC for review.
- **Tabled:** The committee can recommend tabling applications that require substantive changes or if a recommendation does not receive a majority vote. In these cases, tabled letters listing the substantive changes will be provided to the requestor, and HCAI will work with the requestor to modify the application to address the DRC's concerns prior to the application returning to the primary reviewers and subsequently the committee.
- **Not Recommended:** The committee does not recommend approval of the application. In these cases, denial letters listing the reasons for denial will be provided to the requestor.

There is no appeal process for recommendations. HCAI will make a final determination on approval on all applications and shall notify the DRC of its final determinations

Data Collection Regulations

In March 2025-26, HPD updated its data collection regulations to add three non-claim payment data files to the required submissions:

- **Annual Payment File** -- contains data on contractually based non-claims payments.
- **Pharmacy Rebate File** -- contains data on prescription drug rebate payments.
- **Capitation File** -- contains data on payments for member-attributable services under a capitation arrangement.

Data Collection Status

- Production APCD-CDL data submissions have been collected from DHCS and commercial payers, including claims data through February 2026.
- Medicare Fee-for-Service data has been acquired from CMS, including claims data through Q2 2025.
- Production dental data collection is in progress.
- Test non-claims payment data collection is in progress.
- PBM data collection regulations are in development.

HPD Analytic Dataset Changes

Starting in 2026, the HPD has built additional safeguards for excluding non-CA records that may be submitted by commercial payers (determined by the state code and ZIP code fields).

This rule is not applied to Medi-Cal and Medicare FFS data files acquired from DHCS and CMS.

Standard Limited Dataset Changes

The Standard Limited Datasets (SLD and SLD+) have been modified to exclude sensitive records:

- All claim service lines for abortion procedures (including medical and pharmacy claims) have been removed
- Enrollment and claim records have been removed for members with at least one diagnosis code of Gender Dysphoria and/or History of Sex Reassignment

If an applicant needs access to these records, they must submit a request for a custom dataset.

Data Release - By the Numbers*

* As of 5/12/2026

Overview:

Received	Active	Completed
66 (62 New, 4 Supplemental)	31 (30 New, 1 Supplemental)	16 (13 New, 3 Supplemental)

Access Method:

	Active	Completed
Enclave	22	16
Direct Transmission	9	0

Dataset Type:

	Active	Completed
Standard Limited	10	2
Standard Limited Plus	7	11
Custom Limited	5	1
Research Identifiable	9	2

Summary of Completed Projects: Numbers

* As of 5/12/2026 (non-supplemental)

Requestors:

Research Organization	University	State Agency	Other
3	5	2	3

Access Method:

Enclave	Direct Transmission
13	0

Dataset Type:

Standard Limited	Standard Limited +	Custom Limited	Research (SA)
2	9	1	1

Summary of Active Projects: Topics

- **Access, Equity & Affordability**

- Geographic variations
- Out-of-pocket costs
- Novel diabetes treatments

- **Cost Drivers & Market Dynamics**

- Hospital upcoding
- Hospital spending target
- Effects of insurer-physician integration

- **Population & Behavioral Health**

- ACE (Adverse Childhood Experiences) screening
- Telehealth in explaining mental health access

Projects in the Enclave*

* As of 5/12/2026

# of applications	# of users	# of import files	# of export files
11*	26	60	45

Public Reports - Released

- [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.
- [The Healthcare Measures Report](#) presents a series of visualizations for health conditions, healthcare utilization, and patient demographics.
- [The HPD Fee-For-Service Drug Costs in California](#) is the second iteration of a report on healthcare costs from the HPD and presents the top 25 costliest, most prescribed, and highest out-of-pocket cost fee-for-service paid drugs in California in 2021-2022.
- [The HPD Services Report](#) consists of two dashboards that allow users to explore the types of healthcare services provided to Californians each year.
- [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.
- [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.
- [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.
- [Data Brief: Behavioral Health Spending in California's Commercial Market](#) presents mental health and substance use disorder spending by year and service category.

Conflict of Interest and Form 700

Overview of Conflict-of-Interest Laws

Conflict of Interest Laws (non-exhaustive List):

- 1) **Financial Conflicts**: A DRC member “shall not make, participate in making, or in any way attempt to use the [their] official position to influence a governmental decision in which the [member] knows or has reason to know the [member] has a financial interest.”
- 2) **Common Law Doctrine**: A DRC member is “prohibit[ed] from placing themselves in a position where their private, personal interests may conflict with their official duties.”
- 3) **Incompatible Activities**: A DRC member “shall not engage in any employment, activity, or enterprise which is clearly inconsistent, incompatible, in conflict with, or inimical to his or her duties as a state officer or employee.”