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**HEALTH CARE PAYMENTS DATA (HPD) PROGRAM ADVISORY COMMITTEE**  
**January 27, 2022**  
**DRAFT MEETING MINUTES**

**Members Attending:** Charles Bacchi, California Association of Health Plans (CAHP); Steffanie Watkins, Association of California Life and Health Insurance Companies (ACLHIC); Jodi Black, California Medical Association (CMA); Amber Ott, California Hospital Association; Emma Hoo, Pacific Business Group on Health (PBGH); Ken Stuart, California Health Care Coalition; John Kabateck, National Federation of Independent Businesses (NFIB). Anthony Wright, Health Access California; Joan Allen, Service Employees International Union- United Healthcare Workers West (SEIU-UHW); Cheryl Damberg, RAND Corporation; William Barcellona, America's Physician Groups.

**Members not in attendance:** Jodie Black, California Medical Association (CMA)

**Ex-Officio Members Attending:** Dr. Linette Scott, California Department of Health Care Services (DHCS); Isaac Menashe Covered California; Michael Valle, Department of Health Care Access and Information (HCAI).

**Presenters:** Elizabeth Landsberg, Director, HCAI; Michael Valle, Chief Information Officer and Deputy Director, HCAI; Starla Ledbetter, Chief Data Officer, HCAI; Jill Yegian, HPD Consultant; Jonathan Mathieu, Freedman Healthcare; Linda Green, Freedman Healthcare.

**Public Attendance:** 67

**Agenda Item # 1: Welcome and Meeting Minutes**  
*Ken Stuart, Chair*

Ken Stuart, Advisory Committee Chair, welcomed the Committee members and members of the public and called the meeting to order. The Committee also received a brief presentation by Bobbie Wunsch on remote meeting ground rules.

The Committee reviewed the October 28, 2021, meeting minutes. The Committee voted and approved the October 28, 2021, meeting minutes. Ken Stuart made a motion for approval of the minutes. The motion was seconded by Anthony Wright and Cheryl Damberg and passed by a vote of the Committee.

Public Comment: No comments.

**Agenda Item # 2: Department Update**  
*Elizabeth Landsberg, Director, HCA*

Director Landsberg greeted and welcomed everyone to the HPD Advisory Committee meeting and began by discussing HCAI and the Governor's commitment to getting the proposal for the Office of Health Care Affordability (OHCA) passed this year while also touching on the

importance of health care access for all Californians. The Director also provided a brief overview of health care workforce proposals to address workforce shortages. Director Landsberg thanked the Advisory Committee members for their continued support and dedication.

#### *Questions and Comments from the Committee*

Members of the Committee expressed their support for the development of OHCA and made comment about the legislative vehicle expected for the office. Members also commented on work HCAI is doing to support health care workforce burnout due to the COVID-19 pandemic. Lastly committee members inquired about the community benefits proposal to require nonprofit hospitals to allocate 25% of their investments into community-based organizations, which is a current proposal in the Governor's budget where HCAI would have an enforcement role.

Public Comment: No Comments

#### **Agenda Item # 3: Deputy Director Update**

*Michael Valle, Chief Information Officer & Deputy Director, HCAI*

Michael Valle commented on the importance of the Advisory Committee's guidance in preparation for the release and access of HPD data. Michael thanked the Committee for their participation and feedback in today's discussion. Lastly Michael provided an introduction to Assembly Bill 1204 (Wicks), the Hospital Equity Reporting Program, that will require HCAI to collect health care quality and equity reports from hospitals.

No committee member questions or comments.

Public Comment: No Comments

#### **Agenda Item # 4: Health Care Payments Data (HPD) Program Implementation**

*Starla Ledbetter, Chief Data Officer, HCAI*

Starla Ledbetter provided a presentation on updates on the HPD Program implementation, and progress to date of HPD submitter outreach activities.

#### *Questions and Comments from the Committee*

The Advisory Committee had comments regarding the updates related to the Master Provider Index, the collection and utilization of the five years of historic data, updates on voluntary submitter data submission, and the future growth of the HPD team.

Public Comment: No Comments

#### **Agenda Item # 5: Goals for Data Access and Release**

*Starla Ledbetter, Chief Data Officer, HCAI*

*Jill Yegian, HPD Consultant, HCAI*

Starla Ledbetter and Jill Yegian provided a presentation on key statutory provisions pertaining to HPD data access and release and the related development of goals for the HPD Program.

*Questions and Comments from the Committee*

The Committee members asked for clarity regarding the authority of the Data Release Committee versus the Advisory Committee to approve or deny requests for non-public data. The Committee also expressed their support for the release of nonpublic data to have a “benefit to Californians” requirement given the unique health care landscape in California. However, they also did note that this should not limit national requests that may be doing comparative work and that a narrow definition might create a disincentive for multistate self-funded employers to participate. Committee members provided suggestions for the expansion of the qualified applicant list to include 501(c)(3) organizations, certain federal entities including US Department of Health and Human Services, local governments, as well as a broader definition of consumer groups.

Public Comment: No Comments

**Agenda Item # 6: Framework for Data Access and Release**

*Linda Green, Freedman Healthcare,  
Jonathan Mathieu, Freedman Healthcare  
Jill Yegian, HPD Consultant, HCAI*

Linda Green and Jonathan Mathieu from Freedman HealthCare provided an overview of other state All-Payer Claims Database approaches to data access and release. Jill Yegian led a discussion on the framework for access to non-public HPD data.

*Questions and Comments from the Committee regarding learnings from other state APCDs*

The Committee commented on the difference in cost and complexity between generating a limited dataset and a public dataset and inquired about the IT capabilities and cost to produce the dataset factoring in for other state APCDs’ determinations of the kind of nonpublic data products to produce. The Committee also noted the changes at the federal level of price transparency requirements and the potential impacts on how states should be thinking about releasing price information. Lastly, Committee members inquired about the frequency of the usage of total cost of care reports by other APCDs.

*Questions and Comments from the Committee regarding the proposed HCAI Framework for data access and release*

Regarding the proposed objectives for data access and release committee members identified concerns about the need for sustainability and how the user fee should not be a factor when granting access to nonpublic data. The Committee discussed suggestions for the data access and release objectives, including meeting the passthrough requirements of source data, such as for Medi-Cal, Medicare, and vital statistics data. The Committee also discussed if it made sense to include an objective that the release of nonpublic data will be done in a fair and equitable manner, or if that was implied in the process. The Committee also discussed the benefits of sharing research and reports conducted using HPD data as a resource to help inform

improvements to the database, and discussed the importance of data end users providing feedback about the data to HCAI.

Regarding the framework for data access and release that HCAI is proposing, the Committee clarified that statute allows limited datasets to be transmitted outside of the enclave. The Committee also discussed that HCAI is still in the stages of developing this framework and there are areas still to be formalized. The Committee discussed providing some ideas for standard datasets and using what HCAI has learned from other state APCDs to inform the development of these datasets. Lastly, the Committee commented on wanting to prioritize access for research related to the topics of health care equity, noting that is urgent topic for the state to address; and commented on the importance of providing researchers early access to the data in order for them to identify issues and provide feedback about any data quality problems that may arise.

Public Comment: No Comments

#### **Agenda Item # 7: Data Enclave**

*Wade Luele, HPD Consultant, HCAI*

Wade Luele provided an overview of the role of a data enclave in HPD data access and release.

#### *Questions and Comments from the Committee*

The Committee commented that it is important for the enclave to have sufficient capacity to support large datasets and numerous users. Committee members also suggested that the enclave have the ability to save data so that it can be updated on an annual basis if needed, be able to share data analysis and queries across different members of the same organization and allow for the import of external datasets to be linked to HPD data. The Committee also mentioned the opportunities that can be gained with the use of cloud-based technology solutions like the HCAI enclave. Lastly, the Committee inquired about the protections against, and consequences for, those who may misuse the data.

Public Comment: No Comments

#### **Agenda Item #8 Public Comment**

There were two public comments provided.

The first comment regarded the democratizing aspect of an enclave to provide access to computing resources for researchers who may not have access to machine learning or other potential advanced technology, for example researchers at under-resourced institutions). They also noted that most enclave vendors would have the capacity to intake and support users in building linked datasets, so it should be possible to do a more comprehensive data analysis.

The second public commenter noted their appreciation for the discussion and also the continued partnership with the department. They said that they are in the process of reviewing the Governors' significant investments in behavioral health this year and look forward to supporting

the department's efforts throughout the legislative process. Lastly, they commented that community-based providers continue to struggle with workforce issues, like many others in the behavioral health area.

**Agenda Item #9      Adjournment**  
*Ken Stuart, Chair*

Ken Stuart thanked everyone for their attendance and participation.