

Agenda Item VI: HPD Public Reporting and Products

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Today's Topics

- Year in Review
- Public Reporting Pipeline
- Tour of Reports
- Collecting and Addressing Feedback
- Addressing Feedback

Year in Review

Recently Released Public Reports

Reports Released in the Past Year

- New Data Reports
 - HPD Services
 - HPD Medical Out-of-Pocket Costs and Chronic Conditions, 2022
- Updates to Currently-Existing Data Reports
 - HPD Snapshot
 - HPD Measures
 - HPD Fee-For-Service Drug Costs in California
- HCAI Data Briefs
 - Avoidable Emergency Department (ED) Visits Vary Widely Across California
 - Payment Arrangements in California's Commercial and Medicare Advantage markets in 2023
 - Behavioral Health Spending in California's Commercial Market

Public Reporting Pipeline

Status Update on Project Progress

Public Reporting Pipeline

Reports Released

- HPD Services
- Medical Out-of-Pocket Costs
- Dashboard Data Updates and Data Briefs

Late-Stage Development

- Hospital Inpatient Costs
- HPD Visits

Early/Mid-Stage Development

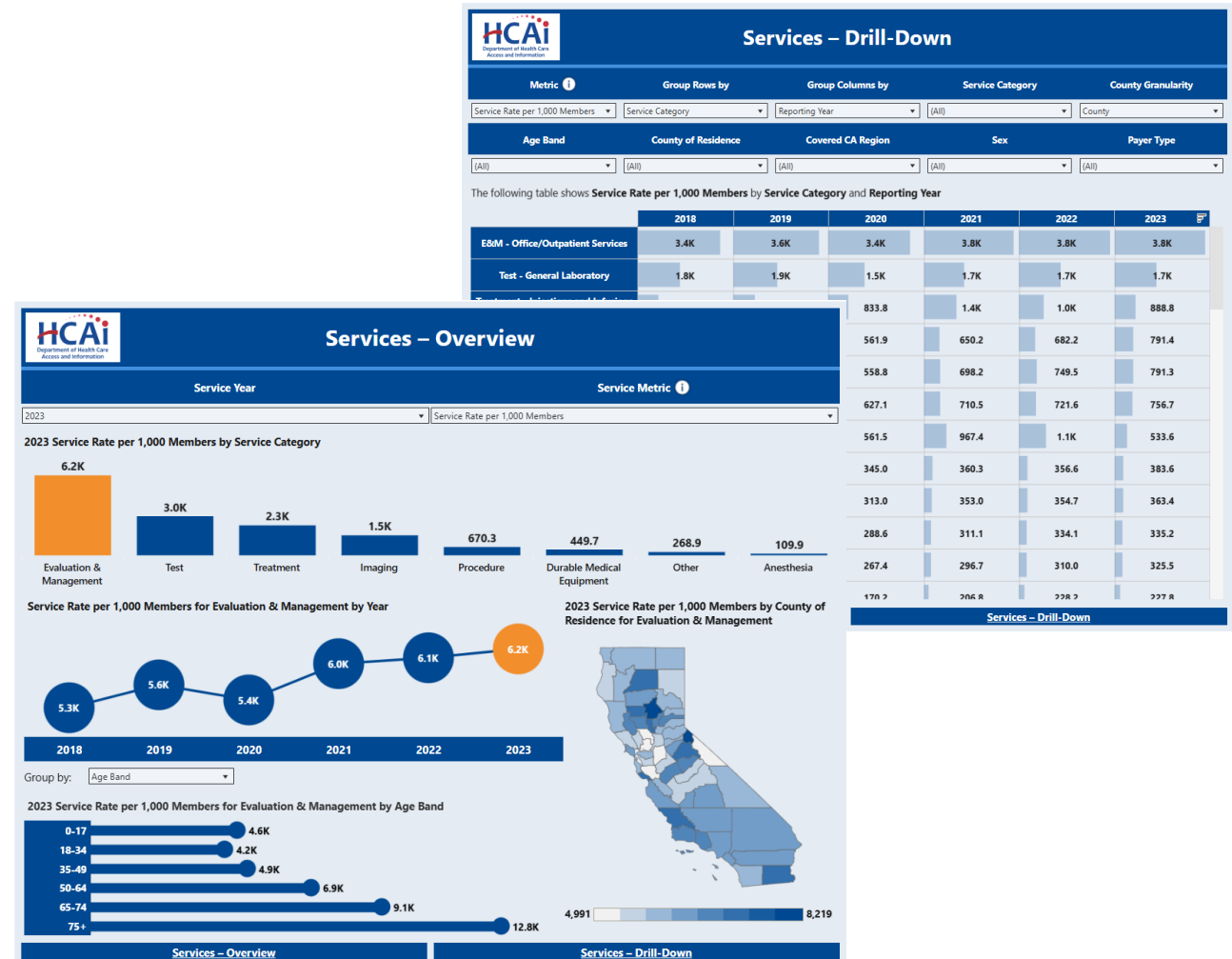
- Primary Care
- Equity/SDOH

Tour of Products

Demonstration of Recently Released Products

HPD Services Report

- **Services:** "Services" correspond to the procedure codes found on single service lines on healthcare claims or encounters, which can range from consultations with specialists to mammograms and anesthesia
- **RBCS:** Restructured Berenson-Eggers Type of Service (BETOS) Classification System (RBCS)
- **Purpose:** Allows the user to explore the types of healthcare services provided to Californians each year at two different levels of granularity
 - **Services Overview:** Presents the data at the most aggregate level, consisting of the eight main RBCS categories
 - **Services Drill-Down:** Presents the data at a more granular view, breaking the aggregate RBCS categories into their relevant subcategories



HPD Services Report

- The report can help answer questions such as:
 - How is the utilization rate for service categories, such as test or procedures, changing over time?
 - What types of services are most commonly used by Californians?
 - How much does the utilization rate for Evaluation and Management Services specific to behavioral health in Medi-Cal compare to the commercial market and to Medicare?

Example Key Finding:

From 2018 through 2023, the service rate per 1,000 members for each of the service categories excluding “Other” was higher for Medicare compared to Commercial and Medi-Cal.

[Report Webpage](#)

HPD Fee-For-Service Drug Costs in California Report

- Allows users to explore many aspects of the costs of pharmaceuticals covered by insurance plans in California in 2021 and 2022
 - Top 25 Costliest
 - Top 25 Most Frequently Prescribed
 - Top 25 Largest Monthly Median Out-of-Pocket (OOP) Costs
- Update to the previously-released Fee-For-Service (FFS) Drug Costs in California report that focused on the commercial market
 - Medi-Cal and Medicare data now available
 - Comparisons across payer types now possible
 - Filtering across drug categories, including biologics, biosimilars, brand names and generics

Top 25 Fee-For-Service Prescription Drugs

Costliest

Most Frequently Prescribed

Out-of-Pocket Costs

Drug Category

Year

All

2021

Statewide Totals, 2021

Drug Category: All

Payer Type	Group	Number of Prescriptions		Number of Individuals		Total Cost		Monthly Median Out-of-Pocket Costs	
All Payers	Overall	245,069,931		17,206,244		37,082.1M		\$2.69	
	Top 25	4,831,313		885,545		8,689.5M		\$20.00	
All, Excluding Medi-Cal	Overall	232,629,137		14,652,754		33,034.5M		\$3.06	
	Top 25	4,595,201		832,093		7,796.9M		\$20.83	
Commercial	Overall	101,590,144		9,712,337		13,325.5M		\$5.00	
	Top 25	3,225,055		1,323,201		3,869.6M		\$0.00	
Medi-Cal	Overall	12,440,794		2,627,873		4,047.6M		\$0.00	
	Top 25	2,512,364		1,163,531		1,852.8M		\$0.00	
Medicare	Overall	131,038,993		5,053,001		19,709.0M		\$1.30	
	Top 25	3,975,068		752,647		4,480.7M		\$13.33	
		0M200M400M		0M10M20M		\$0.0M\$50,000.0M		\$0.00\$10.00\$20.00	

HPD Fee-For-Service Drug Costs in California Report

- Analysis Notes:
 - Retail pharmaceutical costs are included in this report; medical pharmaceutical costs, non-FFS and non-covered drug products are not included
 - All analyses were conducted at the level of the National Drug Code (NDC)
 - The cost data does not reflect rebates, coupons, or other discounts (not reported to HCAI)
 - The number of units dispensed can vary among prescriptions with the same NDC, which affects the cost (i.e. one prescription for a 30-day supply while another represents a 14-day supply); average cost per unit is reported rather than average cost per prescription instead
 - Drug products that were prescribed to less than 100 individuals during the reporting year were excluded from the analysis
 - If more than one payer was involved with paying for a claim, the claim is assigned to a primary payer type based on the one that paid the highest amount

HPD Fee-For-Service Drug Costs in California Report

Key Findings:

Top 25 Costliest Prescription Drugs: The 25 costliest drugs account for just 2.1 percent of all prescriptions in California but account for nearly 23.4 percent of total costs at nearly \$12 billion in 2022.

Top 25 Most Frequent Prescriptions: The three most frequent prescriptions in California in 2021 were all COVID-19 vaccines and had zero out-of-pocket costs. In 2022, the 25 most frequent prescriptions accounted for 7.6 percent of all prescriptions and 3.0 percent of total costs at \$1.5 billion.

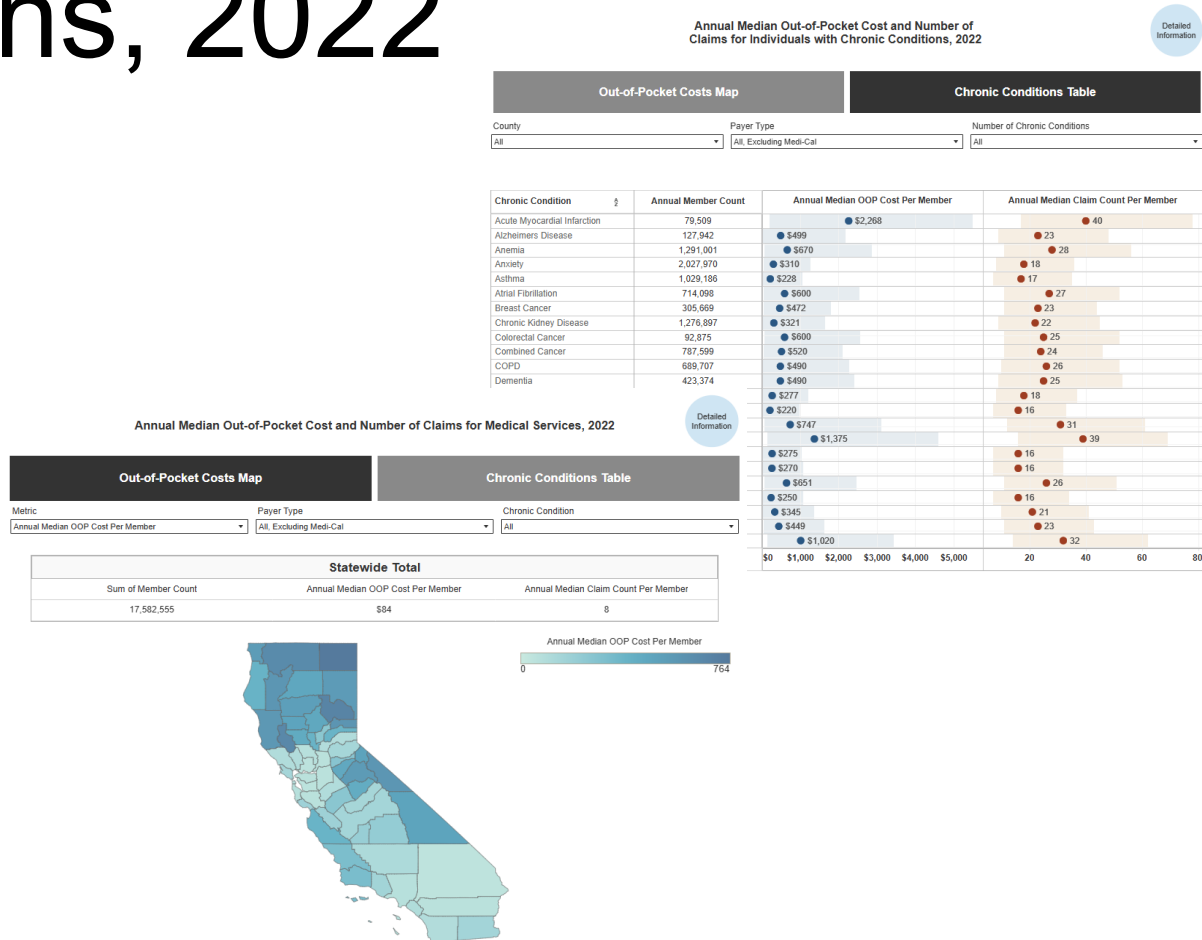
Top 25 Drugs by Out-of-Pocket Costs: The monthly median out-of-pocket cost for the 25 prescription drugs with the highest monthly median out-of-pocket cost ranged from \$150 to \$250 in the commercial insurance market. State policy limits the maximum out-of-pocket cost for the commercial market.

Top 25 Prescriptions List, 2021 Drug Category: Biologic Payer Type: All Payers							
Sort by		Payer Type					
Rank		All Payers					
Drug Name	Therapeutic Class	Rank	Number of Prescriptions	Number of Individuals	Total Cost	Average Cost per Unit	Monthly Median Out-of-Pocket Costs
Lantus SoloStar	Endocrine and Metabolic Agents - Antidiabetics	1	549,572	130,561	\$281,230,986	\$26.75	\$4.00
Shingrix	Vaccines	2	447,773	340,872	\$79,700,360	\$177.57	\$9.20
HumuLIN N	Endocrine and Metabolic Agents - Antidiabetics	3	300,247	98,644	\$61,402,766	\$3.91	\$6.67
Lantus	Endocrine and Metabolic Agents - Antidiabetics	4	282,171	72,154	\$146,677,689	\$21.50	\$4.00

Report Webpage

Medical Out-of-Pocket Costs and Chronic Conditions, 2022

- Purpose: Allows users to explore chronic condition prevalence and examine the medical out-of-pocket costs of Californians.
- The report can help visualize the number of unique individuals with at least one medical visit in 2022, and the median number of claims per member, and the median out-of-pocket costs.
- Available filtering:
 - County
 - Payer type
 - Number of chronic conditions



Medical Out-of-Pocket Costs and Chronic Conditions, 2022

- The report can help answer questions such as:
 - What is the median OOP cost for people with diabetes in 2022? How does it compare to people with diabetes plus other conditions?
 - What counties have the highest and lowest OOP costs?

Example Key Findings:

In 2022, out of 26,749,106 Californians who had at least one medical visit, 10,805,417 of them (40%) are Medi-Cal members. The majority of these Medi-Cal visits had an out-of-pocket medical cost of \$0.

The annual median out-of-pocket cost per member is the highest for members with acute myocardial infarction (\$2,268), followed by hip/pelvic fracture (\$1,375), and stroke (\$1,020) across all payers excluding Medi-Cal. These conditions also had a wider cost range compared to other chronic conditions.

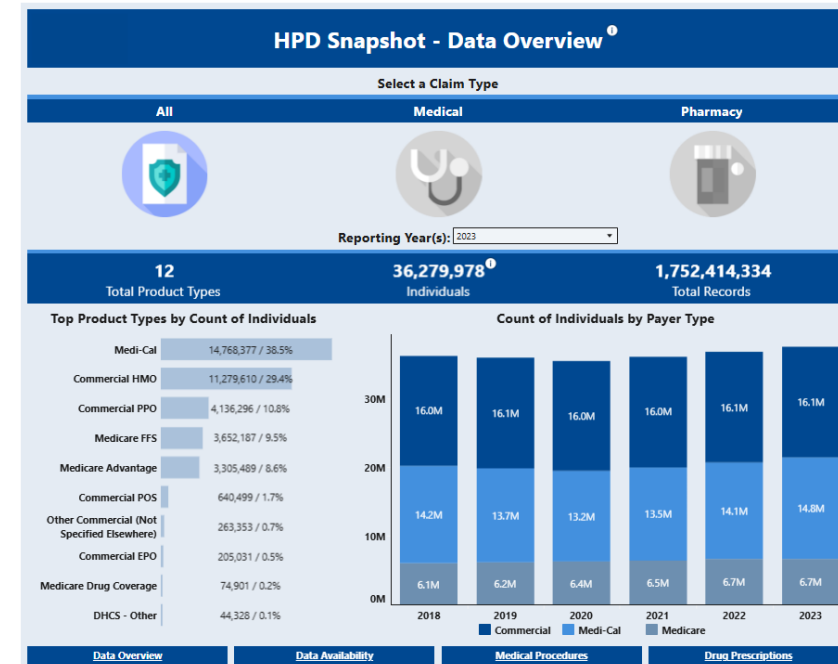
[Report Webpage](#)

Collecting and Addressing Feedback

Possible Future Edits and Improvements for Existing Reports

Data Report and Website Feedback

- HCAI regularly collects feedback on our catalogue of reports and other data products/processes
- Feedback has been solicited during outreach meetings with stakeholders/committee members, and has already begun to inspire changes and improvements that will be considered for future updates to existing products
- Most recently, the HPD Snapshot, recently updated with data through 2023, was the subject of some feedback meetings/discussions



[Access Underlying Data](#)

Data Report and Website Feedback

- Current Example Feedback:
 - It is difficult to know where to navigate for the HPD pages and products
 - It is difficult to find the technical notes for reports (or to be aware that they exist)
 - Certain wording on the dashboards can be made clearer for the various stakeholders viewing them
 - For reports with measure categories created for them, it would be useful to know what makes up each of them (additional details in the technical notes)

HPD Snapshot - Top Medical Procedures ¹			
Procedure Category	Type of Service	Payer Type	Reporting Year
	(All)	(All)	(All)
Rank	Procedure Category	Type Of Service	Total Record Count
1	Office visits	Provider	563,867,195
2	Laboratory - Chemistry and hematology	Independent Labs	562,810,787
3	Laboratory - Chemistry and hematology	Outpatient Facility	382,687,076
4	Other types of lab tests	Independent Labs	225,545,187
5	Physical/occupational/speech therapy - Exercises	Provider	204,310,139
6	Office visits	Outpatient Facility	203,630,381
7	Prophylactic vaccinations and inoculations	Provider	188,492,728
8	Medications (injections, infusions, other forms)	Outpatient Facility	175,159,546
9	Ungrouped Procedures	Provider	163,589,289
10	Laboratory - Chemistry and hematology	Provider	152,192,906
11	Microscopic examination (e.g., lab, toxicology)	Independent Labs	148,243,229
12	Alcohol and drug management, treatment, and rehab.	Provider	136,650,421
13	Psychological and psychiatric evaluation, therapy	Provider	136,357,597
14	Hospital services	Provider	133,454,334
15	CPT codes not classified (F codes)	Provider	127,454,334
16	Ophthalmologic/otologic diagnosis and treatment	Provider	127,454,334
17	Transportation - Patient, provider, equipment	Ambulance	127,454,334
18	DME and supplies	Provider	127,454,334
19	Other types of lab tests	Outpatient Facility	127,454,334
20	Radiology - Diagnostic (other)	Provider	127,454,334
21	Non-hospital-based care (home health, hospice)	Home Health	127,454,334
22	Ungrouped Procedures	Independent Labs	127,454,334
23	Medications (injections, infusions, other forms)	Provider	127,454,334
24	Preventive visits	Provider	127,454,334
25	Microscopic examination (e.g., lab, toxicology)	Outpatient Facility	127,454,334

Snapshot – Medical Procedures Tab

Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology (CPT) codes, and Health Insurance Prospective Payment System (HIPPS) codes are grouped into medical procedure categories using a modified version of the Agency for Healthcare Research and Quality's (AHRQ) Clinical Classification Software (CCS) for services and procedures, v2022.1. The modified version reclassifies some procedures from the "Consultation, evaluation, and preventive care" category into new categories such as "Behavioral health services" or "Critical care services". The data available for download include aggregate counts for individual procedure codes.

Approach to Refine Reports

- The overall message for ways to improve the HPD data reports was to work on accessibility for the user; to do that, HCAI plans to:
 - Hold larger discussions with HCAI leadership to review the placement of HPD reports and information within the larger scope of available data
 - Further highlight the use of the Technical Notes documents accompanying each report as tools containing important background information and context
 - Improve the depth of the information available in the Technical Notes documents for all products
 - Hold ongoing feedback sessions and reviews of draft versions of reports during production to expedite changes and improve quality before release
 - Designate a team of reviewers to push the draft versions of products to during production
 - Create technical notes, web text and other accompanying materials during review

Public Comment