

## **Minutes of the Health Information and Analysis Oversight Council Meeting of September 21, 2017**

**Council members present:** Secretary Marylou Sudders, Executive Office of Health and Human Services (Chair); Ms. Fay Donohue (Vice Chair); Ms. Alicia B. Curran; Acting Commissioner Gary Anderson, Division of Insurance; Ms. Lauren Peters, designee of Secretary Kristen Lepore, Executive Office for Administration and Finance; Executive Director David Seltz, Health Policy Commission; Mr. Colin Hill; Mr. Bill Geary; Ms. Laura Adams; and Mr. David Brill, designee for Mr. Eric Gold, Office of the Attorney General.

Noting the presence of a quorum, Secretary Sudders called the meeting to order at 3:04 p.m.

### **I. WELCOME AND APPROVAL OF PRIOR MEETING MINUTES [VOTE]**

Secretary Sudders solicited comments on the prior meeting's minutes. Hearing no objections, Mr. Geary made a motion to approve the minutes. Ms. Donohue seconded. The minutes were unanimously approved.

### **II. DISCUSSION OF CLINICAL DATA REPOSITORY**

After opening the meeting, Secretary Sudders turned to Mr. Campbell to begin. Mr. Campbell provided an overview of CHIA's budget status, noting that the transfer of funds to the Community Hospital Reinvestment Trust Fund was resolved without sacrificing core agency functions and responsibilities. He also noted that, with the urgent budget issues largely resolved, it was his hope that the Council would be able to engage with other areas of CHIA activity.

Mr. Campbell then began to review agency plans for a clinical data repository (CDR). He explained that CHIA, the Executive Office of Health and Human Services (EOHHS), and the Health Policy Commission (HPC) were considering developing a CDR focused on quality measures used by accountable care organizations. Mr. Campbell walked the Council through the various strategies being considered, including whether CHIA acts as the repository for the data in some form. He then called for Ms. Adams' opinion due to the nature of this project and its relevancy to Ms. Adams' work. A discussion ensued on how a regulatory framework for a CDR could exist. Overall an agreement was reached that CHIA should not be the sole entity responsible for data collection and maintenance of a CDR; rather, a partnership between public and private entities should coordinate data collection and exchanges as well as the administration of a CDR. A shared mission should be developed that requires active stakeholder engagement from public and private entities. It was also discussed by the Council that CHIA should not solely define the mission of the CDR. The Council considered next steps. Mr. Campbell proposed that CHIA's immediate next steps involve continuing to collect current data and beginning to coordinate with the Massachusetts Health Information Highway. From there, he added, greater strategic questions may be answered, including how to gain consensus among stakeholders for a shared mission, determining which organization acts as a data repository, and potential applications of a CDR.

### **III. DISCUSSION OF TRANSPARENCY EFFORTS**

Secretary Sudders then walked the Council through CHIA's transparency initiatives since the agency was created in 2012, as well the Governor Baker's priorities regarding CHIA's role in such efforts. Mr. Campbell explained to the Council that he is interested in allowing the data tables behind the forthcoming transparency website to be publicly available. A discussion ensued regarding precisely what data would be made available and whether quality indicators would be included. Ms. Cavanaugh, Deputy Executive Director at CHIA, answered that the first phase of data would not include any risk adjustment or episodic groupers. As the data is enhanced more complex procedures will be made available. The Council deliberated over the types of data to be released, and how much CHIA could guarantee data accuracy. Mr. Campbell emphasized during the discussion that many conversations with the Council and stakeholders would be had before any final decisions are made. Various Council members emphasized the impact such data releases would have on the health care marketplace. Mr. Campbell then proceeded

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to walk the Council through the various iterations of data tables that could be made available. The Council expressed broad support for releasing the tables. When asked about next steps and a timeline for making such data transparent, Mr. Campbell explained that payers and providers still needed to be consulted along with the state legislature and, as a result, a timeline was unknown.

### **IV. EXECUTIVE DIRECTOR'S REPORT**

Mr. Campbell moved on to his Executive Director's Report. He highlighted the publication of CHIA's 2017 *Annual Report on the Performance of the Massachusetts Health Care System*, and walked the Council through its key findings.

Mr. Campbell then provided an update on the agency's consumer transparency website. He unveiled the website's name, CompareCare, and explained that CHIA is in the process of obtaining a .gov domain name. Mr. Campbell noted that the website would likely be in beta testing for more than a month by payers and providers. The expectation is to publicly unveil the site in December 2017 or January 2018. A brief discussion ensued on the public rollout of the site and when it could be most valuable to both consumers and payers, particularly for open enrollment periods.

Executive Director Campbell then updated the Council on the MA APCD. He explained that there are four domains for the management of the MA APCD: data intake, database development and enhancement, reporting, and hosting. Mr. Campbell stated that CHIA's current priority is database development and enhancement. In pursuit of this goal, CHIA is developing an RFR to select a vendor to perform this work. Mr. Campbell then explained agency goals related to collecting substance use disorder data. In an effort to preserve this data stream in the wake of changes to the federal rule governing it (42 CFR Part 2), CHIA is removing all unnecessary personal health information data from submissions and plans to work with a vendor to certify that, with these changes, the data set is statistically de-identified. Mr. Campbell concluded the MA APCD update by stating that more payers are submitting their self-insured data, and expressed hope that as the transparency website is rolled out more payers will opt to submit.

Mr. Campbell explained that CHIA has been supporting the work of the state's Digital Health Council, which aims to foster the development and growth of a digital health cluster in the Commonwealth.

The creation of a CHIA Data Science Institute, which will provide CHIA staff and, eventually, other state agencies training to promote shared skills and knowledge in the field of data science . was briefly discussed. The Council expressed strong support for this initiative.

### **V. FINANCE COMMITTEE UPDATE**

Ms. Peters provided the Administration and Finance Committee update to the Council. She discussed the work CHIA had done to manage the \$10 million transfer of funds in next fiscal year's budget. Ms. Peters also explained that the maintenance budget for FY 2019 is due to the Governor's office in November, and will be shared with the Council in their next meeting in December.

### **VI. CLOSING**

There being no other business to discuss, the meeting was adjourned at 5:02 p.m.