CIVHC Overview

Center for Improving Value in Health Care (CIVHC) is an objective, not for profit organization that uses data to help organizations across the state improve care and lower costs. On behalf of the state of Colorado, we administer the Colorado All Payer Claims Database, also known as the CO APCD, the most comprehensive collection of health care claims data available in Colorado.

CO APCD Overview
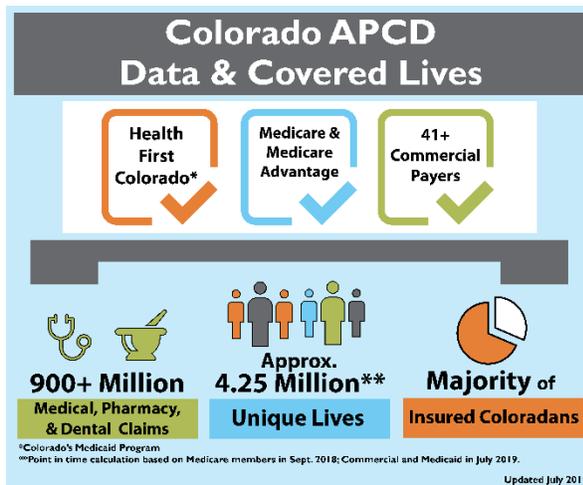
An All Payer Claims Database is a collection of health care claims data from multiple different kinds of health care payers or insurers. The CO APCD collects information from public programs like Medicaid and Medicare, and from all private payers like Anthem and United Healthcare. In Colorado, payers are required to submit data to the CO APCD every month, giving us a remarkably complete database of health care costs and trends across the state, and a comprehensive view of the health care landscape. This allows communities, researchers, policy makers, and others to understand patterns of health care provision, access, and cost regardless of who is providing the care, who paid for the care, or whether people have switched payers.

Who submits data to the CO APCD?

Health Insurance Payers submit data to the APCD every month. The CO APCD receives claims from Medicaid, Medicare, Medicare Advantage, and over 40 commercial payers.

What data do they submit?

The payers submit claims data to the CO APCD. We currently have over 875+ million medical, dental, and pharmacy claims.

Who is represented in the CO APCD?

The CO APCD represents over 4.3 million unique lives, and over 80% of insured Coloradans.

What can claims data do?

Claims data contains a lot of information that can provide insights into health care utilization and trends, costs, and quality of care. For example, health care claims data can help you understand:

- *Who* received what care?
- *Who* provided those health care services?
- *What* services were provided?
- *Where* were those services provided?
- *How* often were health care services provided?
- *Why* were those services needed?
- *How much* was charged for the services and who actually paid what?

The data elements in the claims data can also be combined and analyzed to provide more complex insights into the care being provided to Coloradans, such as:

- How many people in a region are receiving the appropriate preventive care for their conditions?
- Are people receiving low value or medically unnecessary care?
- What are some of the biggest reasons people misuse emergency rooms and how much does that misuse cost?
- Where does the state have provider shortages and what kind of providers are needed?
- How far are people travelling for health care?

What *can't* claims data do?

Claims data is data generated for billing purposes, so it only contains the information the health care insurers need to make sure a bill is appropriate and ready to be paid. It has no information about the results of tests, x-rays/imaging, or blood work. For example, claims data has no information about what a blood pressure reading was, only whether medication for high blood pressure was prescribed or not. Claims data cannot tell whether a treatment worked or whether prescriptions were taken as they were prescribed. It's important to remember what data is NOT in the APCD when thinking about using the data to answer questions.

Thank you for participation in our first module in CIVHC's Data Academy. Please stay tuned for upcoming modules including a deeper dive into the Colorado All Payers Claims Database and about the APCD Data Submission Guide (DSG).

It is important to note that all data that comes out of any APCD, including the CO APCD, must meet all federal privacy requirements, such as HIPAA and HITECH in order to be released. Please refer to our website at www.civhc.org to learn how patient privacy is protected and considered a number one priority in every release of information.

For more information about CIVHC or to learn about using claims data please email info@civhc.org