

# Data Release Review Committee Meeting Notes January 10, 2024

Committee Member Attendees:	CIVHC Staff Attendees:				
Ako Quammie (Contexture)	□ Kelsey Foland (facilitator)	🛛 Maggie Mueller			
Andy Woster (CCMCN)	🛛 Amanda Kim	🛛 Martha Meyer			
Beth Martin (HCPF)	Chris Dalton	🛛 Mason Thaxton			
<u>Caleb Wright</u> (Elevance Health)	☑ Danielle Evergreen	Paul McCormick			
Chris McDowell (Valley Health Alliance)	Darcy Holladay Ford	Pete Sheehan			
<b>Essey Yirdaw</b> (Colorado Hospital Association)	🛛 Hannah Witting	□ Sauntice Washington			
□ <u>Jesse Villines</u> (Craig Hospital)	Iennifer Carpenter	Twanisha Parnell			
Megan Denham (Georgia Tech)	Kristin Paulson	🛛 John Francis			
Nathan Wilkes (Headstorms, Inc.)	LaDios Muhammad	🛛 Abby Fehler			
Sheri Herner (Kaiser Permanente)	🛛 Liz Mooney	□ Click to enter staff name			
	🛛 Lucía Sanders	□ Click to enter staff name			

# Agenda

Time	Opportunity Number	Project Details
10:30 AM	24.23	Lewis & Ellis, LLC
		Doula Actuarial Review
<u>11:00 AM</u>	24.107.35	Colorado Department of Public Health & Environment (CDPHE)
		Colorado Alzheimer's Disease and Related Dementias State Plan
<u>11:30 AM</u>	24.19	University of Colorado, Anschutz Medical Campus (CU)
		Hearing Health Care Equity in Colorado
<u>12:00 PM</u>	21.02r	Georgetown University
		Assessing Disparities in Employment Outcomes among Cancer Survivors



Presentation Time:	me: 10:30 AM						
Opportunity Number:	24.23	3					
Requesting Organization:	Lewis	s & Ellis, LLC					
Project Title:	Doul	a Actuarial Re	view				
CIVHC Presenter:	Amai	nda Kim, Dire	ctor of Colora	dc	State Initiatives		
Project Presenter(s):	Mike	Brown, Color	ado Division	of	Insurance (DOI)		
Extract Type:	Limit	ed Extract					
Finder File Included:	No						
			PHI Data	Ele	ements		
Available for Limited and lo	dentifi	able Extracts:			Available for Identifiable Extra	acts Only:	
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Employer Tax ID			Member Geocoded Address				
Member Dates of Service			$\boxtimes$				

- Amanda Kim gives brief overview of DOI contract with Lewis & Ellis
- DOI Actuary Mike Brown joins call to share additional context and present slides
- Nathan: curious if there is a standard definition for doula services that will be applied in this case? Or are doula services currently regulated by DORA?
  - Mike: we have not specifically defined it yet, but we know doula services are not a requirement
- Nathan: bill passed recently that mandated the availability. Do we know if there are certain payers covering doula services?
  - Beth: Medicaid is bringing up a doula program
  - Mike: still in the process of starting work with the Division to better understand the nuances. Most of what is showing is under Medicaid, but we want to be sure that translates to the Commercial market
- Nathan: a lot of questions around economic impacts. Can you explain how you are modeling without the healthcare baseline?



- Mike: preliminarily, we have reviewed Medicaid studies that have shown significant reductions in C Sections and premature births, so we will use that to help predict how those will be lowered in the future to lower costs. We don't have exceptional data telling us how people will actually use doula services, so the plan is to develop scenario analyses to determine potential ranges. Utilizing a lot of what was found in the Medicaid data to estimate utilization, and then estimate decline in C Sections and premature encounters. Rolling all these together to determine financial impact
- Nathan: curious to see if providers are bundling doula services inside grouped birthing services
  - Mike: that will be part of the investigation. We don't think it's a very common way of offering, but hopefully will see more in the coming months
  - Ako: expresses curiosity on the same topic, had similar anecdotal experience as Nathan
- Mike Brown drops from the call, Jennifer opens up for further committee conversation
- Nathan: this is an important study that needs to be done to fulfill the current legislation
  - Beth: agrees, this is exactly in alignment with the proposed bill
- Project production is approved by the committee without objection

Objections to Project Production				🛛 No	□ Yes	
Committe	ee Member	Basis for Objec	tion			
Motions to Recommend for Production				🗆 No	🛛 Yes	
First:	irst: Beth Martin					
Second:	Second: Nathan Wilkes					
Final Decision: Recommended for Production						
Notes on decision (action items or denial justification)						



Presentation Time:	11:00 AM						
Opportunity Number:	24.107.35						
Requesting Organization:	CDPHE						
Project Title:	Colorado Alzhei	mer's Disease	e an	d Related Dementias State Plan			
CIVHC Presenter:	Lucía Sanders, K	ey Account N	Лап	ager			
Project Presenter(s):	Danelle Hubbard Alzheimer's Asso	-	s As	ssociation; Hannah Peterson, CD	PHE; Monica I	Maly,	
Extract Type:	Limited Extract						
Finder File Included:	No						
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- Lucía gives brief overview of team and project
- Danelle Hubbard, Hannah Peterson, and Monica Maly join call to present materials
- Nathan: is the comorbidity code list intended to be as short as it is? Some things like mental health codes might be associated with ARD
  - Hannah: a lot of back and forth happened on what to include on the list. CDPHE wants to facilitate the work on the specific subset that they can have the most impact with, recognizing that a more expansive list could show a wider snapshot but isn't doable within this project scope/funding
- CDPHE and AA team members drop from call, Jennifer opens it up for additional committee conversation
  - o Beth: seems like a great study
  - Andy: really excited to see CDPHE utilizing this data, it's hard to find data sources on this topic and this is a very meaningful use



#### • Project production is approved by the committee without objection

Objections to Project Production			⊠	No	□ Yes
Committe	ee Member	Basis for Objec	tion		
Motions 1	to Approve Project Prod	uction	C	] No	🛛 Yes
First: Nathan Wilkes					
Second:	nd: Chris McDowell				
Final Decision: Recommended for Production					
Notes on decision (action items or denial justification)					



Presentation Time:	11:30 AM	11:30 AM						
Opportunity Number:	24.19	24.19						
Requesting Organization:	University of Co	lorado, Ansch	nutz	Medical Campus				
Project Title:	Hearing Health	Care Equity in	ר Co	lorado				
CIVHC Presenter:	Lucía Sanders, K	ey Account N	/lana	ager				
Project Presenter(s):	Liza Creel, CU							
Extract Type:	Identifiable Extr	act						
Finder File Included:	No							
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Member Dates of Service								

- Lucía gives brief overview of team and project
- Liza Creel joins the call to present slides
- Nathan: when newborns go through their required screening, do you have Dx codes for that?
  - Liza: we won't have the test results, but will identify the diagnostic codes going back to time of birth and going forward to time of utilization. We know newborn screening has been happening long before mandates came into play, so rates have been high over time. We want to acknowledge relevant policy changes and account for known occurrences in trends
- Ako: for the screenings done in schools, do you have access to that data?
  - Liza: unless it's billable under an insurer, we do not have access to view or link. Unfortunately school data is locked down and not part of this study
- Nathan: you are looking at plan types public/private, are you looking at type of private plan since highdeductible plans discourage intervention?



- Liza: as far as we are able to delineate type of plan, we want to look at that. There are clear barriers, especially in the Medicare population (Medicare does not cover hearing aids, for example). The benefit design piece is really important and there's a lot to learn from public plan coverage
- Liza drops from the call, Jennifer opens it up for further committee discussion
  - Ako: this is an excellent use of APCD data. To Nathan's point about availability, it seems like there's so much out there on the school screening front. The follow up that does and does not happen, and with federal data being locked down, there's thousands of kids being screened in our state that we don't have data for. It would be so valuable to have that information
- Project production is approved by the committee without objection

Objections to Project Production				🖾 No	□ Yes	
Committe	ee Member	Basis for Objec	tion			
Motions	to Approve Project Prod	uction		🗆 No	🛛 Yes	
First:	irst: Ako Quammie					
Second:	ond: Nathan Wilkes					
Final Decision: Recommended for Production						
Notes on decision (action items or denial justification)						



Presentation Time:	12:00 PM						
Opportunity Number:	21.02r						
Requesting Organization:	Georgetown Un	iversity					
Project Title:	-	-	ovm	ent Outcomes among Cancer S	unvivors		
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CIVHC Presenter:	Lucía Sanders, K	•	Jana	ager			
Project Presenter(s):	Thomas DeLeire	,					
Extract Type:	Identifiable Extr	act					
Finder File Included:	No						
		PHI Dat	ta El	ements			
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	Requested	Approved			Requested	Approved	
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Member County				requesting more than year only)			
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Member Eligibility Date				Member Street Address			
Employer Tax ID				Member Geocoded Address			
Member Dates of Service		×					

Previously presented to DRRC 9/1/2021 and recommended for production pending IRB approval. Represented today because of the request for additional PHI Data Elements: Member Census Tract, Member County, Employer Tax ID, Member Date of Birth, and Member Geocoded Address.

- Lucía gives brief overview of team and project, noting that matching will occur for census data
- Tom joins call to present slides while primary PI is OOO
- Ako: looking at the control group document that was provided, seeing some ICD codes were removed. Is there a particular reason why certain codes are being excluded from that list?
  - Tom: from the control cohort, we wanted to have some kind of control group that is considered to be cancer-free. We didn't want individuals with other cancers, newly-diagnosed or not, to be in the comparison cohort



- Nathan: curious about the comparison cohort as well. What is the scope of that? Are you taking the newlydiagnosed cancer cohort and trying to find people with similar demographics that have not been diagnosed?
  - Tom: on the earnings data that we have from the census bureau, we will have virtually all earnings on all individuals and get them reasonably matched. Hoping for a broad set of working-age Coloradans, then restrict the request from COAPCD to the age range of the cancer cohort. We will have demographic information and employment industry information from the match data. We wanted to get a broad set of individuals to serve as the control non-cancer cohort, then adjust to make them comparable
- Tom drops from the call, Jennifer opens up for further committee conversation
- Nathan: how often do we provide SSN?
  - o Jennifer: fairly rare, we always let them know we don't have complete data
  - Lucía: this is the first project in the past year requesting it. They do need it to match against census data for two fields. The cancer registry will send back cancer registry ID, so SSNs will be removed after matching
- Ako: some of the Dx codes being excluded are for cancers such as lip and mouth. Dental claims are not being requested on the application, do we need to adjust the dental claims to build the exclusionary list? Some of those codes might come from dental claims, it might be worth investigating that piece
  - Lucía: CIVHC can follow up with HSRI during extract production to confirm we are excluding those with mouth cancer that might be under dental claims on the front end
- Nathan: how many patients are we talking about in this defined control cohort?
  - Lucía: they did ask us to provide at least 150,000 patients to give them enough individuals to align with the study group under the same age groups but cancer-free. Data vendor (HSRI) will randomly select 150,000 people from that cohort
- Project production is approved by the committee without objection

Objections to Project Production			Þ	🛛 No	□ Yes	
Committ	ee Member	Basis for Objec	tion			
Motions to Approve Project Production			[	□ No	🛛 Yes	
First:	irst: Chris McDowell					
Second:	Second: Beth Martin					
Final Decision: Recommended for Production						
Suggested Action Item: CIVHC to follow up with HSRI during extract production to confirm we are excluding those with mouth/lip cancers that might be under dental claims on the front end						