



CENTER FOR IMPROVING
VALUE IN HEALTH CARE

Colorado All Payer Claims Database Data Release Application Part I

Part I of the Data Release Application should be used to submit background information related to your organization's request for data from the Colorado All Payer Claims Database (CO APCD). This information will help the Center for Improving Value in Health Care (CIVHC), the Administrator of the CO APCD, understand the questions you are trying to answer with your data request and assist us in helping you through the data request process. All CO APCD data requests go through a careful review and approval process and involve a licensing fee. CIVHC has a team of Health Data Solutions Consultant who will work closely with you throughout the data request process.

Prior to completing the questions below, please review the information on requesting data and reports located at <https://www.civhc.org/get-data/non-public-data/>.

Project Information	
Project Title:	SonderMind Quality Initiative and Provider/Client Experience Improvement
Date:	6/15/2023
Organization Requesting Data:	SonderMind, Inc.
Contact Person:	Valerie Young
Title:	Director, Analytics & Business Operations
E-mail:	vyoung@sondermind.com
Phone Number:	603-731-8600
Address:	2000 S. Colorado Blvd., Tower I, Suite 8000, Denver, CO 80222
CIVHC Contact:	Mason Thaxton

Project Purpose

- I. Describe your project and project goals/objectives in detail.

At SonderMind, we know that therapy works. SonderMind provides accessible, personalized mental health care that produces high-quality outcomes for individuals. SonderMind's individualized approach to care starts with using innovative technology to help people not just find a therapist, but find the right, in-network therapist for them. From there, SonderMind's clinicians are committed to delivering best-in-class care to all people by focusing on high-quality clinical outcomes. To enable our clinicians to thrive, SonderMind defines care expectations while providing tools such as clinical note-taking, secure telehealth capabilities, outcome measurement, messaging, and direct booking.

With APCD Data SonderMind aims to accomplish the following three main goals:

- Improve Quality Care for Clients
- Understand Healthcare Systems of Care
- Become Highest Quality Provider Group

2. What specific research question(s) are you trying to answer or problem(s) are you trying to solve with this data request? (Please list and number the individual questions.)

- Improve Quality Care for Clients

- Can we measure and improve clinical and quality outcomes of SonderMind clients? What opportunities can we identify to improve quality of care?
- Understanding the full healthcare needs of our client population will give us novel insights into how to best serve our clients. Insights from this data will allow us to improve care coordination, transitions of care, and understand external healthcare factors impacting client outcomes to ultimately improve outcomes.

- Understand Healthcare Systems of Care

- Understand common pathways of client care within the broader healthcare system.
 - At a system level, how can we assess opportunities to improve coordination of care and better coordinate transitions of care between higher levels of care (ED, IOP, PHP, inpatient, etc.)
 - What common referral patterns exist between our provider network and the broader healthcare system? Are there opportunities to better partner with external organizations to streamline care and improve continuity of care?
- Understand and evaluate the impact of our care to prevent the need for higher levels of care resulting in higher quality care and reduction of total cost of care.

- Become Highest Quality Provider Group

- Better understand our provider group, including their caseload and capacity, in order to drive quality improvement across our group and ensure network sufficiency.
 - What does a typical caseload look like for our providers? How can we improve engagement with SonderMind Providers specifically to enable improved monitoring and tracking of clinical outcomes for clients (through sessions with SonderMind oversight)?
 - How can we better personalize clinical content, support, and experiences for our providers to improve clinical outcomes and drive more effective and efficient care (ultimately improving client outcomes and reducing costs)?
3. How will this project benefit Colorado or Colorado residents? (This is a statutory requirement for all non-public releases of CO APCD data. Contributions to the generalizable knowledge is not sufficient.)
- SonderMind was founded in and is headquartered in Denver and we continue to see our best clinical outcomes, most efficient care and other positive metrics from our Colorado providers and clients.
 - With this data, specific to Colorado, we are seeking to increase the ability of SonderMind to provide in-network care to more Colorado residents (improving access, affordability and driving improved outcomes).
 - We believe bringing more providers into SonderMind's group or becoming a larger portion of the caseload, with our commitment to access, utilization, and outcomes (rather than just maximizing economics) will ensure more individuals in Colorado get the highest quality care possible (with providers subject to our rigorous clinical standards). This will enable us to provide even more in-network and affordable sessions to Coloradans.

4. Describe how the project will meet one or more of the Triple Aim criteria below.
 - a. Improve the patient experience of care (including quality and satisfaction)
 - Improved understanding of the full healthcare needs of our client population will enable us to provide higher quality care to our clients and improve the patient experience by streamlining care coordination.
 - We believe that with better understanding of our providers' caseload patterns as well as further insights into client total care we will be able to build more effective training for our providers which will lead to more consistent care across our group, driving up satisfaction. We can also more accurately assess and improve quality and clinical outcomes with this data and a full understanding of our provider group.
 - b. Improve the health of populations
 - With better understanding of care handoffs and transitions for specific populations we can improve those transitions and better equip our provider group for them, ultimately improving care. As a measurement-based care organization, we are fully committed to a population health approach to care delivery and management.
 - Expanding access to high quality, measurement-based, in-network therapy through SonderMind can improve access and availability of care for Colorado.
 - c. Reduce the per capita cost of health care
 - As with above, a more holistic understanding of population care patterns will allow us to more effectively and efficiently serve them as clients, driving down the ultimate cost of care.
 - Our hope is also that this data will allow us to begin to understand total cost of care and leading to a better understanding of the levers SonderMind has to bend the cost curve.

5. The State of Colorado and CIVHC are committed to ensuring everyone, regardless of demographics, has access to the care they need when they need it. How might your project contribute to that?
 - Given the vast majority of our Colorado sessions are in-network, we are confident that any data that allows us to drive additional sessions within SonderMind's group will improve access to affordable care for more individuals, regardless of demographics.
 - Any data that allows us to better understand the Colorado landscape and provider practice patterns will also help us improve our unique matching algorithm to match clients with the right provider at the right time, meeting that provider's caseload goals, improving speed to care.

6. Can CIVHC publicly share your organization's' name in the work we do to promote our Change Agent clients in our [Change Agent Index](#)? ☒ Yes ☐ No

Type of Output Requested: Select the level of detail that you are requesting. If you are unsure, please contact us at ColoradoAPCD@civhc.org.

- ☐ Standard De-identified Data Set
- ☒ Limited Data Set
- ☐ Identified Data Set
- ☐ Standard Report
- ☐ Custom Report

Lines of Business: Which payers do you need for your project purpose?

- ☒ **Commercial Payers (Includes Medicare Advantage)**
- ☐ **Health First Colorado (Colorado's Medicaid Program)** – Note: Medicaid only data requests must be reviewed by the Colorado Department of Health Care Policy and Financing (HCPF) to ensure alignment with administration of the Medicaid program as required by federal law.
- ☐ **Medicare Fee For Service (FFS)** – Note: Data requests for Medicare FFS are only available for authorized users for research purposes and must be approved by HCPF.

Years Requested: What years of claims do you need to meet your project purpose?

- | | |
|-------------------------------|--|
| <input type="checkbox"/> 2012 | <input checked="" type="checkbox"/> 2018 |
| <input type="checkbox"/> 2013 | <input checked="" type="checkbox"/> 2019 |
| <input type="checkbox"/> 2014 | <input checked="" type="checkbox"/> 2020 |
| <input type="checkbox"/> 2015 | <input checked="" type="checkbox"/> 2021 |
| <input type="checkbox"/> 2016 | <input checked="" type="checkbox"/> 2022 |
| <input type="checkbox"/> 2017 | |

Data Needs

The following questions are related to Protected Health Information (PHI) to determine if you need a Limited Data Set or an Identifiable Data Set. The Data Elements Dictionary detailing the fields available for both types of data can be found at <https://www.civhc.org/get-data/non-public-data/>. **Note that any data request including PHI will need Part 2 of the Application and approval by the Data Release Review Committee.**

1. Do you need patient-specific dates (e.g., dates of service or DOB) or 5 digit zip code? If so, this is a request for a **Limited Data Set**. (Dates of Service, Zip, DOB)

☒ Yes ☐ No
2. Do you need direct patient identifiers such as name, address, or city? If so, this is a request for an **Identifiable Data Set** (requires IRB approval).

☐ Yes ☒ No

Authorized Signatories

Please provide the name and title of the contact that will be providing signature for the Data Use Agreement (DUA) and the Data Release Fee (DRF). If separate contacts, please specify.

DUA Signatory:

Name _Valerie Young_____

Title _Director, Analytics & Business Operations_____

DRF Signatory:

Name _Valerie Young_____

Title _Director, Analytics & Business Operations_____

APPLICATION SIGNATURE

By signing this Agreement, the Receiving Organization agrees to the information provided in Application 1 and Application 2.

SIGNATURES:

For Receiving Organization: SonderMind

Name: Valerie Young

Title: Director, Analytics & Business Operations

Signature: /s/ Valerie Young

DED SIGNATURE

The Receiving Organization has reviewed the Data Extract Elements Request document (DED) for this projected titled _SonderMind Quality Initiative and Provider/Client Experience Improvement_ and agrees that it represents the final and approved set of data requested to meet the project objectives described above.

SIGNATURES:

For Receiving Organization: SonderMind

Name: Valerie Young

Title: Director, Analytics & Business Operations

Signature: /s/ Valerie Young

Colorado All Payer Claims Database Data Release Application Part 2

(Limited Data Sets and Fully Identifiable Data Sets ONLY)

Project Information from Part I of Application	
Project Title:	SonderMind Quality Initiative and Provider/Client Experience Improvement
Date:	June 15, 2023
Organization Requesting Data:	SonderMind, Inc.

The CO APCD is committed to protecting the privacy and security of Colorado's claims data. The CO APCD will limit the use of the data to purposes permitted under applicable laws, including APCD Statute/Rule, HIPAA/HITECH, and Antitrust laws, to information reasonably necessary to accomplish the project purpose as described in this Application. Under HIPAA, PHI may only be released in limited circumstances for public health (public health agency), health care operations, and research purposes under the terms of a HIPAA compliant data use agreement (DUA).

Any requestor receiving a CO APCD data set, must submit to APCD Administrator a Data Management Plan that outlines data security and data management policies and procedures to safeguard the data. This Data Management Plan must be approved by APCD Administrator prior to any data release.

I. Data Element Selection Member-level Detail – Do you need member level PHI data for your project purpose? In keeping with the minimum necessary standard established under HIPAA, CO APCD policy is to release only those data elements that are required to complete your project.

☐ No

☒ Yes (Justification must be provided for each)

This level of detail is required to identify patient location, Age, Gender to understand patient population/demographics and potential risk adjustment.

- ☐ 3-digit zip
- ☐ Name (first, last, middle)
- ☐ Street Address
- ☐ City
- ☒ Zip
- ☒ DOB
- ☒ Gender

2. Claim-Level Detail – Include specific diagnosis codes, CPT4, CDT, ICD9 or I0, APR-DRG, or revenue codes in an attachment.

- ☐ No
- ☒ Yes (Justification must be provided for each)

To understand care continuum and handoffs as well as details to drive total cost of care understanding. We'd like to see within client diagnoses how they change either over time or between providers to guide our clinical research and programs.

- ☐ Age at time of service
- ☒ Age at year end
- ☒ Diagnosis
- ☒ Procedure/Revenue Code

3. Claim Type – What types of claims do you need for your project purpose?

We would like to understand the full patient picture, requiring IP, OP, PROF, PC.

- ☒ Inpatient (**IP**) – Related to individuals who receive care in hospital settings
- ☒ Outpatient (**OP**) – Related to an individual receiving medical treatment in any setting other than a hospital admission (i.e. ambulatory surgery center; doctor's office, imaging center, emergency room, home health, etc.)
- ☒ Professional (**PROF**) – Related to medical procedures within professional settings (e.g. physician office, imaging center, etc.) and clinics
- ☒ Pharmacy (**PC**) – Related to prescriptions with an 11-digit National Drug Code
- ☐ Dental (**D**) – Related to individuals receiving dental care in any dental setting

4. Provider-Level Detail – Do you need claims limited to specific providers or provider type(s) for your project purpose? (Provider IDs, locations, hospitals, medical groups, etc.)

- ☒ No
- ☐ Yes (check all that apply)
 - ☐ Facilities (please specify) Click or tap here to enter text.
 - ☐ Professionals
 - ☐ Provider Taxonomy - Specialty Designations
 - ☐ National Provider Identifier
 - ☐ Other (please specify) Click or tap here to enter text.

5. Provider Geography – Do you need provider geography or location data?

- ☐ No
- ☒ Yes (check all that apply)
 - ☒ Provider location address
 - ☐ Provider Zip 3
 - ☐ Provider Health Statistic Region <http://www.cohid.dphe.state.co.us/brfssdata.html>
 - ☐ Provider County
 - ☒ Provider Zip 5
 - ☐ Other (please specify) Click or tap here to enter text.

6. Payer-Specific Details – *Do you need specific named payer details? (only available for authorized requestors)*

- ☒ No
- ☐ Yes

7. Payment Type – *Which elements of cost data do you need to support your project purpose?*

- ☒ Charged Amount
- ☒ Plan Paid Amount
- ☒ Member Liability, i.e., amount the member is responsible for
 - ☒ Coinsurance
 - ☒ Deductible
 - ☒ Copay
- ☒ Total Allowed Amount – (summation of plan paid and member liability)
- ☒ Prepaid Amount – (to be considered for capitated payment plans only)

8. Data Element Selection

If you have not already done so, complete the Data Element Dictionary (DED) to identify the specific data elements that are required for this project.

9. Data Source Linkage – *Will you link the CO APCD data to another data source?*

- ☐ No
- ☒ Yes. If yes, please answer the following questions.
 - a. What is the other data source or sources you plan to link CO APCD data with?
 - We may link with SonderMind's internal data to link to our internal clinical quality and provider quality metrics.
 - b. Which CO APCD identifying data elements will be used to perform the linkage?
 - Zip code, NPI, CPT Code
 - c. Once the linkage is made, what non-CO APCD data elements will appear in the new linked file?
 - Anonymized session data, patient reported outcome measures

10. Institutional Review Board – *Have all necessary approvals been obtained (e.g., IRB or Privacy Board approval)?*

- ☒ No or N/A, reason: IRB approval N/A based on data elements selected
- ☐ In progress. Anticipated approval date: [Click or tap here to enter text.](#)
- ☐ Yes. If so please provide copy.

11. Distribution of the Report or Product – *Requires review before publication*

If you are producing a report for publication in any medium (print, electronic, lecture, slides, etc.) the CO APCD Administrator must review the report prior to public release. This requirement is further spelled out in the Data Use Agreement. The CO APCD Administrator will review the report for compliance with CMS cell suppression rules, risk of inferential identification, and consistency with the purpose and methodology described in this Application. Do you acknowledge this requirement?

- ☐ No
- ☒ Yes

I2. Project Schedule:

Proposed Project Start Date:	8/1/2023
Project End Date:	8/1/2025
Proposed Publication or Release Date:	N/A
Data Destruction Period:	All data must be destroyed within 30 days of the project end date and data destruction certificate returned to CIVHC at datacompliance@civhc.org . The Data Destruction Certificate form can be found at https://www.civhc.org/get-data/non-public-data/ .

Benefit to Colorado: Solves Access issue matching patient to therapist.