Committee Members: Michelle Anderson, Kim Bimestefer, Charlie Brennan, Rick Doucet, Sarah Hassell, David Keller, Philip Lyons, Chris McDowell, Tom Rennell, Cecilia Saffold, Ty Tilghman, Chris Underwood, Nathan Wilkes

CIVHC Staff: Alice Aguirre, Lauren Beaudin, Mohammad Dakkak, Abby Fehler, Kelsey Foland, Sarah Ford, Cari Frank, Valerie Garrison, Darcy Holladay, Ken Holtschlag, Amanda Kim, Andria Koenig, Nicole Kuzmich, Clare Leather, Jacqueline Lewis, Erika Lopez, Paul McCormick, Liz Mooney, Traci Musall, Isaac Nwi-Mozu, Twanisha Parnell, Kristin Paulson, Lucía Sanders, Melissa Sharp, Peter Sheehan, Sauntice Washington, Lindsay Wilkins, Hannah Witting, Stephanie Ziegler

Additional Attendees: Eriko Mori

These notes cover only the discussion of the Committee and such information required to put questions in context.
Please refer to the presentation and materials for more information.
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Topic	Discussion

Administrator Updates	• Open seats:
	  • Pharmacy benefit managers
	  • An organization that processes insurance claims or certain aspects of employee benefit plans for a separate entity

Operational Updates	• Kristin Paulson, Chief Executive Officer and President introduces a review of the Key Performance Indicators that will be in use for 2025 to measure CO APCD goals • Committee Member Questions: Do we know who is using the public CO APCD data and how many people ○ CIVHC Response: CIVHC does have data on number of users visiting each of the public reporting pages and who is requesting public data in Excel files. This information will be shared at the next meeting.
Colorado APCD Successes for the past Fiscal Year (July 1, 2023, to June 30, 2024)	• Kristin Paulson, discusses the successes for CIVHC and the Colorado APCD for fiscal year 2024. Highlights include the development of standard operating procedures, a new data element selection form, and a pilot project on data destruction.
Scholarship Program	• Pete Sheehan, VP of Client Solutions and State Initiatives, provides an update on the APCD Scholarship Program. • **Background Information:** The CO APCD scholarship program is a joint program funded by the General Assembly administered by Colorado Department of Health Care Policy and Financing (HCPF). There are three members of this committee on the scholarship subcommittee: Chris Underwood, David Keller and Sarah Hassell. We appreciate all the time and effort they put into this.

	- 99.67% allocation of $500k in funds last year, remaining balance of under $2,000, and this was a 16.5% increase from the previous year.
	- Committee Member Question: Inquiry about the purpose of the scholarship fund and the potential for organizations to request funding more than once. Discussion regarding the importance of monitoring requests and making certain that funds are available to other organizations.
	  - CIVHC Response: We do not always know if an organization will have follow-up requests or if refreshes will be required for ongoing research (such as for the Long Covid study, Office of saving people money in healthcare.)
	  We can start initiating conversations about this at the start of project discussions. We also will add this information to the Scholarship Application for the subcommittee and HCPF as part of their approval review.
	- Kim Bimestefer: Is there an action item in process to have the University of Colorado, a data requestor, provide data on their own self-insured employer data?
	  - CIVHC Response: We have done outreach to try and determine the contact for this information. The folks that administer the self-funded program and those who are operating the university are not one in the same, and we're trying to figure out who to connect with. It's just not happening as quickly as we may have hoped.
	- Committee Member Question: Concerns about data being used for access to affordable health care and possibly then using it to negotiate contracts with providers (Peak Healthcare Alliance project).
	  - CIVHC Response: We require use of a third party analytic group, so they don't have direct access to the full data set as part of the protections in that area. I want to let you know that that is something we do take into consideration when we are authorizing data use from the Colorado APCD.

Health Equity Fund	- Liz Mooney, VP of Research, Partnerships and Innovation. CIVHC's newest department focused on research partnerships and innovations, which supports community access to Colorado APCD data and research services. We've had tremendous interest and enthusiasm from community-based non-profits. There are five projects for the Health Equity Fund in the current fiscal year with over $350,000 of funding approved.

New Data Vendor Partner Procurement Process	- Paul McCormick, VP of Data Operations provides an update on the procurement process for a new data vendor partner, including the timeline for releasing the RFP, finalist interviews, and transition planning.
	
	- Committee Member Question: Will the RFP be available on the website for those that are interested?
	  - CIVHC Response: We will have it available for download on the site.
	
	- Committee Member Question: What's the budgetary impact for having two different data warehouse vendors for a year?
	  - CIVHC Response: It is a $3 million anticipated cost. We have been working on strategies, forecasting, transition planning, and making sure we increase our reserves to cover the additional expense.

Supporting Legislation in Colorado	- Pete Sheehan, VP of Client Solutions and State Initiatives: We've seen an increase in legislation referencing data from the Colorado APCD as a resource to help inform policy discussions.

	- Please let us know If you're aware of any upcoming legislation that we may be able to provide data to help inform discussion, an opportunity to reference the CO APCD as a resource, studies or policy questions coming up that data might be able to help with. - Committee Member Input: There Primary Care Committee provision will sunset this year and that should be on your radar. - CIVHC Response: Thank you, that is helpful, and we will be monitoring this in the upcoming legislative session.
Products and Services Provided	- Pete Sheehan, VP of Client Solutions and State Initiatives discusses the types of data sets that we can provide. - We're planning to promote the deidentified data sets as updated versions become available. Does the committee have any thoughts in terms of different ways we could be reaching out to connect with more audiences, to promote the different types of data sets that we have? - Committee Member Question: 1) Is the payer and provider data also masked when it's provided? 2)Results are the most interesting to people. Suggest tailoring a presentation that talks about what we've got and what you can do with it, that would be of interest to professional groups. Maybe promote data science competitions. Directly marketing the data to the health care foundations in the state. - CIVHC Response: 1) The payer data is provided with an alias so you will not know what plan it is. You'll know if it's a commercial, PPO, or EPO plan. This is publicly available information. But again, we're very careful about when we provide even masked payer information with the provider information. That's why it's parsed out between the payer available data set and provider available data set. 2) We have not done a significant outreach to specialty groups and others recently, so that would be a great way for us to reach out to the communities as well. Yes, that's a great idea. Thank you all for all your suggestions. These are great. We've been taking notes and we'll be following up on any of those suggestions. If anybody has any other thoughts or ideas, please reach out to any of us, and we will incorporate them into our planning process.
Data Quality & Analytics	- Alice Aguirre, Data Quality Manager, provides information on the upcoming changes under DSG16, Alternative Payment Model files, and the annual Geocoding update. - Committee Member Question: More information requested on pharmacy formula tiers and enforcement options for the annual file validation (data). - CIVHC Response: This is going to be our first year collecting it, so we'll have an opportunity to review the data and see what other changes we may need to make to it next year. But we will take this into consideration as we review this. Some submitters are non-compliant and have received notices. For the most part, we have received a good bulk of those files and have at least done one round of validations on all of them.
Public Reporting Successes FY24	- Cari Frank, MBA, VP of Communication and Marketing and Clare Leather, MPH, Public Reporting Program Manager, with a high-level overview of successes. - Public reporting use case examples in reference to the earlier questions about data users: - We had a physician trying to understand how much average ER visit reimbursement is for hospitals and ER visits. - There was a researcher looking into health care utilization for school age children in Colorado with chronic diseases, and where the greatest needs were for care coordination between schools and health care systems.

- - We had a digital health company looking at our drug rebate information to better understand the impact of drug rebates in the pharmacy supply chain.
    - A state legislator reviewed the wildfire and ozone analysis we did, looking to allocate money for response to air quality and health and safety impact.
    - Another Health Care Consultant looked at driving estimates for reasonable value and helping providers to negotiate rates.
    - Again, this is just a very small sample of all the different use cases that we had, happy to share more with the committee, perhaps at our next meeting, about the different types of folks who are using public reports, and which ones are getting most of the hits.

  Are there other topics we should be considering either this year or next year, would love to get some feedback from the committee members. Also, if there are other avenues that we should be pursuing to get the word out about our public reports.
- Committee Member Question: If you're looking for a service, a lot of times that's just one piece of the whole bill. And is there a tool that allows patients to understand what their total encounter might run?
    - CIVHC Response: There is not currently, we think that using the shop for care tool as a baseline to find a handful of facilities that you want to investigate. Then either contact them directly or contact your insurance company as a starting point.
- Committee Member Question: We started immunizing against RSV last year. Curious about the impact from that on utilization, either in the emergency room for respiratory illness or hospitalizations among children. How are we doing at getting that vaccine out there, and is it making a difference? With all the changes in the rules around reproductive health care, is that impacting things like access to care for sort of routine OB GYN care.
    - CIVHC Response: We could look at utilization trends per person and see if we're seeing those trends going down, and infer that there might be some access issues, delays to follow up care, things like that. There are a couple of the quality measures that we're looking at for Community dashboard for next year that might be able to inform on that too. Then there is an immunization measure that potentially will be able to include in the next Community dashboard for children. Great ideas, thank you.

There were no further comments/questions. Please refer to the slide deck for more information about what was presented.

Next meeting December 10, 2024