



**Comments on Department of Labor Notice of Proposed Rulemaking
Docket# EBSA-2016-0010; RIN 1210-AB63
Submitted by Onpoint Health Data**

On July 21, 2016, the Department of Labor (DOL) and coordinating agencies published a Notice of Proposed Rulemaking^[1] and a Notice of Proposed Revision of Annual Information Return/Reports^[2] proposing changes to the Form 5500 annual report for employee benefit plans. We are responding to DOL's request for public comments on "those conforming amendments and the proposed annual reporting requirements for plans that provide group health benefits, including the new Schedule J, in light of the Supreme Court's recent decision in *Gobeille v. Liberty Mutual Insurance Co.*, 136 S. Ct. 936 (2016)."^[3]

The National Academy for State Health Policy (NASHP) and the All-Payer Claims Database Council (a collaboration between the National Association of Health Data Organizations (NAHDO) and the Institute for Health Policy at the University of New Hampshire) have submitted detailed comments reflecting a proposed approach to support DOL's needs for data and information articulated in the Proposed Rule by leveraging state infrastructure and investment in the collection of claims data in state All-Payer Claims Databases (APCDs). We are writing to express our support for the approach described in the NASHP/APCD Council comments.

Onpoint Health Data is an independent nonprofit working with state governments across the country to support the development and maintenance of their APCD programs. APCDs have become an essential source of data in support of objective, population-wide analysis of the cost and quality of healthcare being delivered within and across communities. APCD data are routinely used to support comparative performance measurement using claims-based cost and quality measures, consumer transparency reporting across providers and regions, program evaluation to assess the effectiveness of health improvement initiatives, and policy analysis, for example. Having a critical mass of data for an individual state or region is fundamental to generating reliable analyses. The loss of 40%-50% of the commercially insured data within a state's APCD, which is the potential impact of *Gobeille*, will have a major, negative impact on essential research and analysis into more efficient health care delivery.

We believe that collaboration with DOL in the partnership expressed in the NASHP and APCD Council's comments would be beneficial to DOL and the states and would address the needs identified by DOL for oversight to the quality and cost of health care provided by ERISA plans, which are among the stated objectives of DOL's creation of Schedule J.

We respectfully request that DOL review the approach brought forward in the NASHP/APCD Council comments and consider the state partnership recommendation in the development of the final rules for the Form 5500 and Schedule J.

Thank you for considering our comments.

Sincerely,



James H. Harrison
President/CEO

^[1] 81 Fed. Reg. 47496 (July 21, 2016)

^[2] 81 Fed. Reg. 47534 (July 21, 2016)

^[3] 81 Fed. Reg. 47534, 47559 (July 21, 2016)