The Connecticut Health Insurance Exchange dba Access Health CT (AHCT) operates the All Payer Claims Database for the State of Connecticut pursuant to Connecticut Public Act 13-247. Various data submitters are required to report healthcare information to AHCT for inclusion in the APCD. The Act allows AHCT to: (i) utilize healthcare information collected from data submitters to provide healthcare consumers in Connecticut with information concerning the cost and quality of healthcare services that allows such consumers to make more informed healthcare decisions; and (ii) disclose data to state agencies, insurers, employers, healthcare providers, consumers, researchers and others for purposes of reviewing such data as it relates to health care utilization, costs or quality of healthcare services.

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 APCDs. As members of NAHDO, the APCD Council and as the agency operating Connecticut's All Payer Claims Database, we are writing today to express our support for the approach described in the NASHP/APCD Council comments. We believe that collaboration with DOL in the partnership expressed in those comments would be beneficial to DOL and the states, and 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 in the development of the final rules for the Form 5500 and Schedule J.

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