Participants

Employee Benefits and Security Administration Attendees: Elizabeth Schumacher, Deputy Director, Office of Health Plan Standards and Compliance Assistance (OHPSCA), EBSA, DOL (Designated Federal Office); Angela Melina, OHPSCA, EBSA, DOL; Justine Sorrentino, OHPSCA EBSA, DOL; and Beth Schumann, OHPSCA, EBSA, DOL.

All Committee Members were present.

Other Participants Who Presented: Viet Nguyen, Stratametrics; Sagran Moodley, United Health Group; Patrick Murta, Humana; Gary Beatty, EDI Partners; Laurie Burckhardt, WPS Health Solutions; Christopher Gracon, Independent Health.

Designated Federal Officer Elizabeth Schumacher called the meeting to order at approximately 9:30 a.m. She introduced herself as the Designated Federal Officer (DFO) and Maureen Mustard as the Committee Chair. Then she turned the meeting over to Chair Mustard.

Maureen Mustard, Advisory Committee Chair, introduced herself and said that members have been in four smaller subcommittee meetings concerning topics related to the Committee’s recommendations and would report on their meetings during this full Committee meeting.

Frederick Isasi, representing Subcommittee Four explained that the purpose of the full Committee was to assist the Secretary of Labor with developing standardized reporting, and that Subcommittee Four was focused on the process for voluntarily collecting data from self-funded group health plans. The previous week the Subcommittee had met with experts to determine how to encourage self-funded plans to submit data to State All Payer Claims Databases (“APCDs”).

DOL staff attorneys thought that using an “opt-out” for self-funded plans would not be considered a voluntary agreement to submit data, noting both the U.S. Supreme Court Case, Gobeille v. Liberty Mutual Ins. Co., and ERISA section 735. Frederick Isasi said that some private attorneys disagreed. In addition, Linda Sanches had discussed HIPAA implications, and Kevin McAvey of Manatt and the individuals representing Oregon’s APCD identified many benefits from collecting data from self-funded plans. Maureen Mustard had also spoken about New Hampshire’s experiences with its APCD system.

There followed a question and answer period between Committee members regarding the topics discussed by Subcommittee Four. Chair Maureen Mustard opened the discussion to the public, but there were no public comments or questions.

There was a short discussion about whether experts should speak to the Subcommittee or to the Full
Committee, and which experts should be asked to speak. Maureen Mustard again asked DFO Elizabeth Schumacher whether any public members wanted to speak. There were none.

After a brief recess, the meeting reconvened.

Maureen Mustard gave the floor to Jo Porter for a presentation for Subcommittee Two, and Testimony from a non-Committee presenter. Jo Porter explained that Subcommittee Two focused on the mode of collection of data, concentrating on the how, rather than the what. The Subcommittee had met with experts and learned about the data collection processes, limitations and successes. The subcommittee talked about frequency and processes of data submission, and quality checks. They discussed methods for data collection that deidentify or do not deidentify data. The Subcommittee was not ready to make recommendations. The Subcommittee recognized that they needed to learn what is happening in the field.

Next there was a presentation from Dr. Viet Nguyen, Sagran Moodley, and Patrick Murta, experts invited to make a presentation about the HL7 Da Vinci and FHIR for bi-directional information exchange. The HL7 Da Vinci Project is a payer-provider-vendor collaboration addressing value-based-care use case and developing HL7 FHIR-based, standard solutions. Sagran Moodley discussed how the project convened a diverse community that could collaborate to create blueprints that could be used by industry. Viet Nguyen noted that the project has identified over a dozen use cases, and that CMS has started using FHIR. Murta explained how FHR worked and how it would be the foundation of implementation of interoperability in the future.

Following the presentation, there was an extensive question and answer period between Committee members and the experts. There were no public questions.

The committee took a one hour break for lunch.

Dr. Cheryl Damberg summarized what Subcommittee One, focusing on Data Layout, had been doing. The Subcommittee had focused on whether the CDL should be used, and if so, should it be simplified, or changed. The Subcommittee also considered other payment models and how data layout should be maintained out of time. The Subcommittee started developing recommendations the day before. Dr. Damberg mentioned some of the things that the Subcommittee had learned. She mentioned that they will be making both current and long-term recommendations.

Maureen Mustard introduced Gary Beatty and Laurie Burkhardt, representatives from X12 who would be discussing data standards systems.

Gary Beatty showed slides and explained that X12 is an ANSI-accredited organization developing standards since the 70s. They define electronic data for all industries. X12 works collaborative with NCPDP and L7 to make sure they don’t have overlap. Standards are on health care side and are virtually all electronically submitted using X12 standard. He introduced Laurie Burkhardt as the Chair of their insurance subcommittee.

There followed a question and answer period between Committee members and these experts. Then Chair Maureen Mustard opened the discussion to the public, and one person, Christopher Greco, asked to speak about his positive experience with X12.

Next Dr. Herbert Wong gave a summary of what Subcommittee Three, Data Security, had been
doing. This Subcommittee was tasked with considering privacy, security, and data release issues. The Subcommittee had explored how states are collecting data, releasing, protecting and considering what DOL could do to promote uniformity and best practices. Experts who presented included Linda Sanches, who talked about HIPAA, including what organizations are covered entities, which usually does not include APCDs. The Subcommittee heard from other experts as well. The subcommittee has been challenged by developing recommendations, but Dr. Wong discussed broad recommendations.

There followed another question and answer period between Advisory Committee members and Subcommittee Three members. Then Maureen Mustard opened up the discussion to the public, but there were no questions or comments.

The Committee then discussed written comments submitted and topics of study for the duration of the Committee meeting. There were two letters, one from AHIP and one from the State of California, which also linked to a 200 page report, that Dr. Cheryl Damberg and Emma Hoo thought was a good resource for thinking through these issues.

Several Subcommittees recommended getting additional time from the Department.

Elizabeth Schumacher reminded the Committee to send any suggestions to her and Maureen Mustard, and reminded members that the next full Committee meetings would be held on June 17, 21, and 24.

There was a brief discussion of how the Committee will define consensus.

Maureen Mustard adjourned the meeting at 3:40 p.m.
I, Maureen Mustard, chair of the Advisory Committee on State All Payer Claims Data Bases, do hereby certify that, to the best of my knowledge, the minutes prepared for the meeting of the Advisory Council on June 11, 2021 are accurate, and the accompanying documents constitute a complete compilation of the record of the meeting.

Signed

Date 8/13/2021