“Clinical and Claims Data Integration”
Required for Total Cost of Care/Efficiency Measurement
Agenda

- Introduction: RTI
- Context for Claims & Clinical Aggregation Discussion: Patricia MacTaggart
- Round 1 State Round Robin: Interest Areas – Issues – Focus: Facilitated Patricia MacTaggart
- Claims & Clinical Aggregation - Actually Doing it: David Kendrick
- Round 1 State Discussion and Next Action Step(s): Facilitated by Patricia MacTaggart
- Closeout: RTI
• Current Data Infrastructure for Multi-Payer Value-Based Payment Reform is Inefficient
• Providers Need Simplified View of Performance
• Centralized Approach Would Improve Business Efficiency & Scalability
• Roadmap Needed
  – Major gap for States: lack of Health IT infrastructure for measuring cross-payer performance
  – Move from an “every payer to every provider” interface approach for claims and clinical data to a “hub/connector”
• Terminology and Use Cases Must Be Defined
• Barriers must be Identified and Overcome
Round 1 State Round Robin: Biggest Challenge(s) & Unachieved Goal(s)

- State Specific: Current State
- State Specific: Interest Areas, Issues & Focus

**Options for Consideration**

- **Policy:** parameters for attribution; identity management; privacy; an initial model that is a “hub” model – no individual payer to individual provider; financing that includes a CMS funding strategy, state strategy, and private sector strategy; governance, including where it resides & rules for sharing

- **Technology:** technology specifications; hardware and/or software availability (vendors available) for development/operation; provider directory ability to evolve with attribution of patient to provider, provider to clinic, clinic to plan, plan to payer technology specifications; provider/individual identity management/patient matching; connectivity (interfaces) between claims data and clinical data, including APCD and MMIS; data “repository/warehouse”; & analytic tools.

- **Business Processes:** Define/operationalize critical/priority use cases (what data is needed from provider/state/individual, what is the data source, and how is data standardized/validated) and Define within context of what the current state capacities (is there a QE, APCD, or HIE that already performs some of these functions)
• David Kendrick
• Is there a need for a clinical/claims roadmap?

• What are the highest priority (ies) aspects to focus on? *(initial options for consideration on next slide)*
Action Steps and Close-Out of Session

• Next Action Step(s): Facilitated by Patricia MacTaggart

• Close-Out: RTI