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**DEPARTMENT OF
HEALTH AND HUMAN SERVICES**
DIVISION OF HEALTH CARE FINANCING AND POLICY
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Stacie Weeks,
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Administrator

Meeting Minutes
Public Workshop
All Payer Claims Database (APCD) Draft Regulation Review

Date and Time of Meeting: August 30, 2023 at 2:00 PM

Name of Organization: The State of Nevada, Department of Health and Human Services (DHHS), Division of Health Care Financing and Policy (DHCFP)

Place of Meeting: Teleconference/Microsoft TEAMS

Agenda

- Introduction of workshop process
- Presentation on proposed APCD Regulations NRS 439B.800 through 439B.875
- Public Comments
 - Jesse Wadhams, Attorney, Black and Wadhams, Representing Nevada Hospital Association
 - Formally submitted comments via email on August 29, 2023. During the public workshop, he gave a high-level overview of what they are recommending.
 - Section one they are proposing an additional definition to give some clarity to the phrase cost of healthcare, and they would like that to be defined as the final payment to a provider for the cost of care.
 - Section six is more of a comment than an actual proposed regulation, but Colorado has a robust data submission guide which is transparent and useful.
 - Section seven they are suggesting shortening the timeframe for the historical data.
 - Recommending adding 2 new sections to the regulations which would create another advisory committee. It would be a similar set up and same representation as the Stakeholder Advisory Group. Looking at data release and data protection and one of the big concerns expressed was the cost of records and this advisory committee could provide additional guidance and be a significant resource to the division.
 - Section thirteen would provide additional guidance for those discretionary releases of data out of the APCD not to the government entities.
 - Helen Foley, Legislative Advocate, Nevada Association of Health Plans, Foley Public Affairs
 - Formally submitted comments via email on August 30, 2023. During the public workshop, she gave a high-level overview of what they are recommending.
 - In February 2022, the State of Nevada hosted a presentation outlining the requirements of SB 40, the expected timing of events, and the actions they would execute. Specifically, they outlined four required activities it must complete: 1. Apply for grant funds 2. Establish regulations 3. Procure APCD vendor 4. Work with vendor to implement APCD

As of today, NVAHP understands that federal grant funding was not secured as initially expected. Nonetheless, funding was approved by the legislature for the 2023-2025

biennium. In addition, while there are numerous references to a “Data Submission Guide” within the proposed regulation, that document has yet to be published. We are aware that the State of Nevada has issued a letter of intent with a vendor and is in current contract negotiations with an expected effective contract date of November 2023. Finally, we understand that the state hopes to have the APCD implemented 6-12 months after that.

Members are concerned regarding the non-standard implementation approach that the vendor has taken in other states – particularly with the apparent perception that a state can rely solely on the vendor to implement and run the APCD. It is imperative that prior to any implementation steps being taken, that the State of Nevada formally publish and adopt detailed regulatory guidance that outlines key items, such as the expected mandatory submitters, membership scope and inclusion, data formatting and submission expectations, and data use and release requirements (the above referenced Data Submission Guide). Only once this detail is formally released can any potential submitters effectively proceed with their detailed implementation analysis.

Our members are also concerned that similar to experiences in other states, the vendor may be under the impression that health plans are actively preparing and programming files ahead of the APCD going live. This assumption led to loss of critical time and the need for extension requests in other states, which we hope to avoid in Nevada. In order to avoid unnecessary expense and effort, health plans will generally not initiate formal implementation efforts until all regulatory reporting requirements are clearly defined and published for reference.

- The NvAHP appreciates the State of Nevada’s distribution of the draft regulations and provides the following comments and concerns:
 - The draft regulations require the submission of 5 to 10 years of historical data. This requested timeframe is in direct contrast with what was initially provided to stakeholders in the February 2022 presentation, which listed a 3-to-5-year timeframe. This shorter range is what most state APCDs require and what is most common.
 - Timeframes that go beyond 5 years will be unduly burdensome to our members and infeasible given the age of the data and the size of the data request. It is unclear how the state will be able to fully decipher and analyze the entirety of this enormous data request.
 - We are extremely concerned that the timeline, format, historical timeframe, and other important details, may be fully delegated to the vendor and the Data Submission Guide. There are numerous references to this guide, and we have not seen where it has been issued. We reiterate that we have experienced issues in other states where a similar non-standard vendor driven APCD implementation process has been adopted.
- Jack H. Kim, United Healthcare
 - Jack began by indicating that he agreed with Helen Foley’s comments and would like to bring up a few more observations.
 - Section three - Advisory Committee members must be based in Nevada. There is concern with this as you have people nationally who have done this and by limiting this matter to Nevada residents, it may limit your ability to have someone with experience on how to implement. This is something we may need to consider by not limiting it to someone in Nevada only.

- Section seven – 10-year historical data. Going back 10 years would be cumbersome and the recommendation here is to limit it going back to at least 8.
- Katie Ryan, Dignity Health Saint Rose Dominican, Southern Nevada
 - Katie began by agreeing with all the feedback presented so far but would like to reiterate something that was mentioned related to the Advisory Committee and the members being restricted to those in Nevada.
 - We have a very large national system and have had other people from other areas already doing this work. We have worked a lot with our counterparts in the State of Colorado to learn more about the inner workings of how this should be completed.
- Public comment regarding any other issue
 - No comments received.
- Adjournment 2:26 pm