

Supporting Comparative Effectiveness Research with Claims Data: Federal Efforts to Develop a Multi-Payer Claims Database

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Brookings Roundtable on Active Medical Product Surveillance

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Multi-Payer Claims Database (MPCD) for Comparative Effectiveness Research (CER)

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Catalyst

- \$1.1 billion investment in CER enterprise funded by American Recovery and Reinvestment Act of 2009
- \$400 million allocated to the Office of the Secretary (OS)
- Federal Coordinating Council (FCC) for CER advised Secretary on how to invest allocated funds
- Due to immediate need, FCC recommended OS focus on CER infrastructure development
- HHS identified value of creating a database that would combine claims data from a range of public and private payers

Objectives

- Goal: Build a MPCD to support CER, on a foundation of public and private payer claims data
 - High priority: Privacy and protection of patients
 - Build a comprehensive database to enable research on priority populations, interventions, and conditions
 - CER broadly defined to include both clinical & delivery system research
 - Increase access and usability of the data
 - Engage private sector in CER infrastructure development and research
 - Lay the foundation for future enhancements with clinical data

Value Added

- Incorporating public and private data into one source will enhance the value of claims data for CER
 - Easier to find and obtain relevant data
 - Greater geographic coverage and density
 - Ability to study less common conditions
 - Increased demographic and clinical representativeness
 - Potential linking across payers and time

Project Flow

- Phase 1: Strategic and technical design
 - Strategic plan completed April 29, 2010 by Avalere Health
 - Technical design pilot testing nearing completion
 - Tools to combine data from different sources Vexcel/Microsoft
 - User interface to create customized data extracts Thomson Reuters
- Phase 2: Implementation of MPCD Awarded to Optum,
 Start date: January 2011

Implementation Phase Overview

- Collaborative effort between ASPE, CMS, Optum and other healthcare industry and research leaders
- Database components
 - Hybrid design
 - Data hosting
 - Distributed/federated data network
 - CMS Chronic Condition Warehouse (CCW)
 - Optum Normative Health Information Database (NHI)
 - Two additional data sources



Data Partner Evaluation Criteria

- Restrictions on use of data
- Quantity and coverage of data
- Quality of data
- Cost to MPCD for their participation
- Overlap with other partners

Advisory Structure

Governance Board

- Members recruited by AcademyHealth
- Consists of researchers, private payers, providers, consumers, states, and the Federal Government
- Guide MPCD's implementation and future sustainability

HHS Leadership Council

- Policy leaders and data experts across multiple agencies within HHS
- Gain insight into potential implementation issues
- Facilitate collaboration with similar initiatives



Governance Board

Voting Members

W. David Helms, PhD (Chair)	Peter Bach, MD
Jeff Allen, PhD	Mark Gaskill, MFT
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Melinda Beeuwkes Buntin, PhD	Craig Jones, MD
Bob Berenson, MD	Patrick Miller, MPH
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Non-Voting Members

Denise Hynes, PhD, MPH, RN	Amol Navathe, MD, PhD
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HHS Leadership Council

Sherry Glied, PhD (Chair)	ASPE
Patrick Conway, MD MSc	ocsq
Terry Cullen, MD MS	OCIO
Anne Elixhauser, PhD	AHRQ
Rick Gilfillan, MD MBA	CMS
Rick Kronick, PhD	ASPE
Farzad Mostashari, MD ScM	ONC
Todd Park	IOS
Tom Reilly, PhD	CMS
Melissa Robb	FDA
Jean Slutsky, PA MSPH	AHRQ

Advisory Structure Cont.

- Data Stewardship Council (DSC)
 - Will include all data contributors
 - Provide recommendations on technical design and data access
 - Monitor processing of data in MPCD
 - Review and approve data requests
- HHS Expert Panel
 - Researchers within HHS familiar with claims data and CER
 - Utilize and test the system
 - Provide feedback on how the system can be improved



Privacy and Security

- Emphasis on privacy and security controls
 - Data use agreements
 - De-identified data at every step of the process
 - PII hashed at source before matching across partners
 - Compliance with FISMA, HIPPA, ARRA, and CMS IT policies
 - Statistician review of inferential de-identification
 - Masking of small cells of data and dates of service
 - Audit reports for contributors to track data processing
 - Data enclave under consideration



Data Access Model

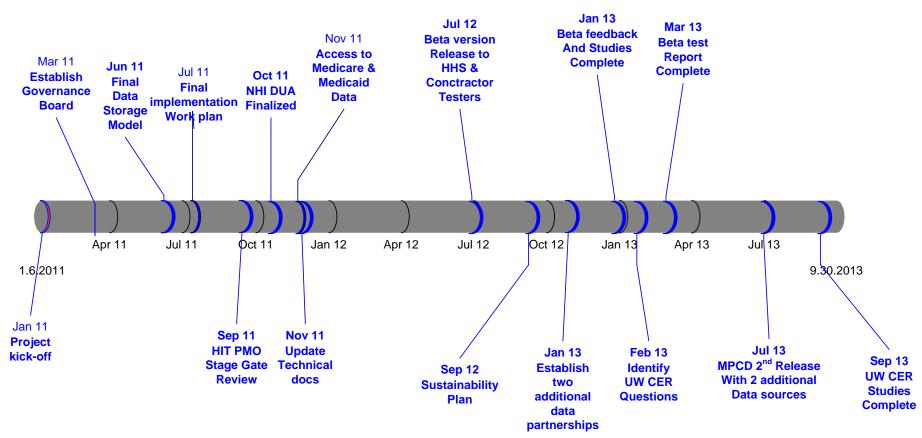
- Web-based interface
- Three tiers of data access
 - Tier 1: May include a perturbed dataset
 - Tier 2: Standard analytic file (SAF)
 - Limited data set
 - Requests subject to approval of Data Stewardship Council (DSC)
 - Tier 3: Extracts from full set of claims files.
 - Obtain richer data than what is available in tier 2
 - Still minimum data necessary
 - Request subject to DSC approval and additional review by data contributors



Modifications Under Consideration

- Later release of final database
- Internal beta version to test fully distributed alternatives
 - Mini-Sentinel model
 - Automated fully distributed regression approach
- Perturbed dataset to assist researchers in understanding the data before they submit queries
- Beta test to demonstrate unique value of MPCD and to evaluate the relevance of various analytic strategies for CER

Potential High-Level Timeline Mod





U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Assistant Secretary for Planning and Evaluation

Key Partners

- AcademyHealth
 - Coordinating Governance Board
 - Supporting outreach to the research community
- National Association of Health Data Organizations (NAHDO)
 - Facilitating state data acquisition
- Buccaneer Computer Systems and Services
 - Hosting MPCD platform
 - CCW data extraction and integration
- University of Washington
 - Participating in database design to ensure value for CER research
 - Will conduct demonstration of CER power and usability of MPCD



Outreach Activities

- Build awareness and demonstrate MPCD utility through:
 - Presentations at selected annual research conferences (e.g., AcademyHealth ARM, APHA, NAHDO)
 - Presentations to other agencies and outside groups (e.g. Brookings)
 - Professional communication from AcademyHealth

Down the road...

- Diffusion of information from Governance Board members
- Publish articles on demonstration analyses and policy applications in selected peer reviewed journals



Future Possibilities

- Include value-added analytics
 - Episode groupers
 - Risk adjustment
 - Quality metrics
- Incorporate non-claims data
 - Lab results
 - Clinical records
 - Electronic medical records

ASPE Project Team

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Roundtable Discussion and Questions

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