

NM Health Information System (HIS) Act Advisory Committee Meeting
Toney Anaya Building, 2550 Cerrillos Road, New Mexico
9 November 2017 2:00 – 4:00 pm

HIS Advisory Committee Members present:

Kristina Fisher – Think New Mexico
Nandini Kuehn – Health Consumer, Healthcare Consultant
Michael Landen – NM Department of Health [NMDOH], Chair
Michael Nelson – NM Human Services Department [HSD]
Judith Williams – Health Data
Jeff Dye – New Mexico Hospital Association
Janice Torrez – Blue Cross Blue Shield of NM
Bill Patten – Holy Cross Hospital (Taos)
Susan Gempesaw – Presbyterian Healthcare System

Members not present:

Denise Gonzales – Health Consumer
Mark Epstein – NM Health Connections

NM Department of Health Attendees:

Victoria Dirmyer – Health Systems Epidemiology Program
Ken Geter – Health Systems Epidemiology Program

Public Attendees:

Ellen Interlandi – New Mexico Hospital Association
Dick Mason – Health Action

2:00 p.m. Introductions

2:10 p.m. Review of Meeting Minutes from September 14th Meeting

- Minutes approved

2:15 p.m. Review Agenda

- Agenda approved

2:25 p.m. Update on Website Rules

- Discussion on Rules Meeting
 - Meeting on November 20th at 9:00 a.m. in the Runnels Building Auditorium.
 - A copy of the draft rules can be requested from NMDOH.

2:35 p.m. Update on Medicaid Data for Website/Discuss Methodology

- Description of methodology for Medicaid claims data (PowerPoint presentation)
 - Measures of location: mean and median
 - Mean: the sum of all observations divided by the number of observations
 - Median: if all observations are ordered from smallest to largest the median is the “middle value.”
 - Measures of spread: range, variance, standard deviation
 - Standard deviation: a measure that is used to quantify the amount of variation or dispersion of a set of data values.
 - To account for ‘extreme’ values, NMDOH chose to remove any claim amounts that were more than 2 standard deviations from a central measure (mean value) per procedure.
 - Example data shown for a procedure (cesarean section).

- Only "adjusted" (not original/unadjusted) data will be shown on the website with asterisk/information bubble referring to the methodology.
- The website will provide the number of claims and average amount paid per procedure, per facility.
- Only one general explanation about methodology will be provided on the website; there will not be a methodology explanation for each procedure.

Discussion Point 1: Why is there a value of \$0 allowed in adjusted numbers (for the example data)?

Medicaid is the last payer of resort for claims. If a patient has third party payer, then a claim will be routed through that insurer prior to going to Medicaid for reimbursement. For this website, any claims with a \$0 paid by Medicaid will be dropped from analysis.

Discussion Point 2: For Medicaid claims data, fee-for-service (FFS) and managed care organization (MCO) claims will be combined for presentation.

3:15 p.m. Review Draft Website

- Evaluation of Website
 - The website will include disclaimers throughout the website pages/views.
 - Concern that these data do not represent actual cost to the patient.
 - Opportunity to educate public how much procedures cost
 - Concern about wordsmithing and approval of text on the website.
 - Facility phone numbers will not appear on the website.
 - NMDOH will find a more appropriate measure for facility infection rating.
 - Will have three measures: average cost, patient experience, and (tentatively) an infection rating.
 - NMDOH will explore all-cause readmissions as an additional quality measure.
 - Revisions to the website can happen after release on January 1st.
 - NMDOH will explore the option for including committee members for user testing.
 - Will have an "i" for further information.
- Suggestions
 - Suggestion to have links to various non-Medicaid insurance providers (i.e. commercial providers).
 - Suggestion to link to Office of Superintendent of Insurance's (OSI) new website.
 - Overall score on HCAHPS Overall Rating would be better -- Concern that star rating system has been debunked (<http://www.hcahponline.org/home.aspx>).
 - Be clear that patient satisfaction is for the facility in general and not procedure specific.
 - Increase font size for state average cost estimate.
 - Do not include the text of facility address since it is on the map.
 - Round to nearest dollar, have comma separator for thousands.
 - Hospitals should be notified that this website is being created and will be public in January.
- Potential Additional Quality Measure
 - Explanation of PSI 02 as a quality indicator ([https://www.qualityindicators.ahrq.gov/Downloads/Modules/PSI/V60-ICD09/TechSpecs/PSI_02_Death_Rate_in_Low-Mortality_Diagnosis_Related_Groups_\(DRGs\).pdf](https://www.qualityindicators.ahrq.gov/Downloads/Modules/PSI/V60-ICD09/TechSpecs/PSI_02_Death_Rate_in_Low-Mortality_Diagnosis_Related_Groups_(DRGs).pdf))
 - Concern that the measure creates alarmist environment (especially given the low numbers observed in the state)
 - Consensus is not to use PSI 02 for the website

4:00 p.m. Adjournment

- Next Meeting: TBD