NM Health Information System (HIS) Act Advisory Committee Meeting
State Library Building, Piñon Room, Santa Fe, NM
30 March 2017 2:00 - 4:00 pm

HIS Act Advisory Committee Members present
Kristina Fisher - Think New Mexico
Susan Gempesaw - Presbyterian Healthcare System
Nandini Kuehn - Health Consumer, Healthcare Consultant
Michael Landen - NM Department of Health, Chair
Michael Nelson - HSD
Bill Patten - Holy Cross Hospital (Taos)
Janice Torrez - Blue Cross Blue Shield of NM
Judith Williams - Health Data

Members not present
Carleton Albert - Health Consumer
Jeff Dye - New Mexico Hospital Association
Mark Epstein NM Health Connections
Denise Gonzales - Health Consumer
Steven McKernan - UNM Hospital

NM Department of Health Attendees
Ken Geter - Health Systems Epidemiology Program
Paige Best - Health Systems Epidemiology Program

Public Attendees
Ellen Interlandi - NM Hospital Association
Meredith Root-Bowman - Presbyterian Healthcare System
Paige Duhamel - NM Office of Superintendent of Insurance

2:00 pm Introductions

- We have a quorum. No major votes expected. Mike: Looking for reaction to Medicaid cost data.

2:10 pm Review Meeting Minutes

- Highlight: mock-up of website from the QI perspective. We got a lot of good feedback. No issues.

2:15 pm Review Agenda

- Goal/Big Picture: website up before end of calendar year. Not an APCD initially. Have we moved forward on rule making for an APCD? No. Website draft rules are in progress.
- Relevant bills/acts in Legislative Session? Not really. Update to PH act. DOH and HSD budgets? Don't know until after possible special session.

2:25 pm Review & Discuss Mock-Up

- Maryland's APCD mock-up website was presented
    - It shows average costs for six procedures: hip replacement, knee replacement, hysterectomy, colonoscopy, vaginal delivery, and endoscopy.
    - Clicking into one of the procedures leads to a simple, scrolling interface that also shows highest/lowest cost by hospital.
    - Highest/Lowest Risk & Cost are also shown. This shows the proportion of costs attributable to avoidable complications.
    - It was noted that the MD mock-up does not show insurance information. This allows for a much simpler interface.
- The initial NM website will not be a full-fledged APCD, but rather will focus on Medicaid claims paid and quality indicators.
- It was noted that at this point we are not trying to understand specifics of Medicaid data, just trying to review mock-up with actual Medicaid data.
- The New Mexico website mock-up was presented as PowerPoint slides
- Slide 1
    - This represents the top-level or entry point of the website.
    - The idea is to initially present the state level average claims payments for various procedures, then drill down to more specific payment amounts by region, county, MCO & FFS, and facility.
    - State-wide average costs for nine procedures are given: Cesarean Delivery, Colonoscopy, Mammography, MRI Lower Back, MRI Knee, Sleep Study, Upper GI Endoscopy, Vaginal Delivery, and Vasectomy.
    - A map of the NM DOH/HSD Regions is shown. This will be hyperlinked to allow users to drill down into the Regions.
    - The issue of precisely what costs are being shown was addressed: the dollar amounts on this and subsequent slides are average Medicaid ‘last-in-line’ claims paid. This needs to be explicitly stated and defined.
- Slide 2: Shows Cesarean Delivery for the Northwest DOH/HSD region.
    - Represents a possible first-level drill-down into a region.
    - Average claims dollar amount for the state and the NW region are shown.
    - Average highest/lowest claims within the NW region is shown by county.
    - The question was asked: "How useful is it to show payment amounts by county?" Users are likely to be more interested in specific facilities instead.
- Slide 3: Cesarean Delivery, NW region
    - This represents a possible first- or second-level drill-down into the Region
    - Shows average Fee-For-Service and Managed Care Encounter claims for McKinley County.

    - The issue of whether FFS and MCO amounts should be shown together was raised:
        - FFS and MCO need to be explicitly defined.
        - Users may not know which type of plan they have.
- Slide 4: Cesarean Delivery, NW region
    - Another possible first- or second-level drill-down into the Region
    - Lists claims paid for each of the three facilities in the NW Region
- Slide 5: Cesarean Delivery, Northeast region
    - Similar to Slide 2, average highest/lowest claims within the NE region is shown by county.
- Slide 6: Cesarean Delivery, Northeast region
    - Similar to Slide 3, shows average Fee-For-Service and Managed Care Encounter claims for NE Region.
- Slide 7: Cesarean Delivery, Northeast region
    - Shows highest/lowest claims by county in the NE region
    - Also shows claims for each facility in the NE region
- Slide 8: Cesarean Delivery, Metro Region
    - Shows FFS and MCO claims for Bernalillo County
    - Also shows the claims by the three MCOs: Molina Healthcare, Blue Cross Blue Shield, and United Healthcare Community Plan
- Slide 9: Cesarean Delivery, Metro Region
    - Shows claims by facility
- Slide 10: Cesarean Delivery, Southeast Region
    - Highest/lowest average amount by county
- Slide 11: Cesarean Delivery, Southeast Region
    - Like Slide 10 but shows dollar amount and number of claims for each facility in the Region
- Slide 12: Cesarean Delivery, Southwest Region
    - Like Slide 11, dollar amount and number of claims for each facility in the Region
- Slide 13: Cesarean Delivery, Southwest Region
    - Shows average claims paid by the three MCOs.
    - Also shows number of procedure and average claims paid by count in the Region
- Slide 14: Colonoscopy, Northwest Region
    - Highest and lowest cost (by county?)
- Notes on website elements/layout
    - It was generally agreed that the drill-down order should be Region > County > Hospital
    - Use Mouse-overs (hovering) pop-ups for help, extra details, etc.
    - Delete the yellow "upside-down hook" arrow
    - Delete the white square around the map
    - Change "Average cost" to "Average Medicaid payment"
    - Replace the "teeter-totter" and up/down arrows with bar charts comparing the dollar amounts.
    - Replace "NM Centennial Care" with "NM Medicaid Program"
    - Replace the 1912-2012 range with a specific data year.
    - Change the color of the text of the procedure from red to a light shade of blue.

    - Change the background color to a lighter color or white
    - It was noted that color, layout, and functionality may be subject to Section 508 (accessibility) compliance.
    - It was suggested to have tabs on the website: one for cost and one for quality. Another tab schema could be one for consumers and one for providers.
- General notes, questions, considerations
    - What assumptions are we making about what the data mean? Why would the public care that claims paid would be more or less if they're not paying?
    - From the Maryland site, the group liked the language "Paying more doesn't always mean better care."

3:40 pm Review of NAHDO updates

- Oklahoma does not have an APCD.

3:50 pm Next Steps/Future Meeting

- Combine costs data with quality data for the next mock-up.
- Albuquerque meeting, Wednesday 17 May 2017 1:30-3:30 at New Mexico Hospital Association.
- HSD will look further at Medicaid data for mock-up
- Otitis media (ear infection) suggested as a condition to use for the next mock-up, by cost for outpatient vs. emergency department visits.

4:00 pm Adjourn