MINUTES

State Consumer Health Information and Policy Advisory Council Meeting

Date: *March 28, 2018*

Time: *11:00am –3:20pm*

Location: *Agency for Health Care Administration, Florida Center Conference Room*

Advisory Council Members: Justin M. Senior, Secretary; Kim Streit, Chair; Dr. Karen van Caulil, PhD, Vice Chair; Dorene P. Barker; Diane Godfrey; Dr. David Shapiro, MD; Chris Struk; Dr. Jill Sumfest, MD; Wences Troncoso, JD; Dr. Michael Wasylik, MD; Sonya Smith ("proxy for Mary Beth Vickers") **Members Absent:** Pamela Gilman; Tom Herring

Health Care Cost Institute: Carol Bashaw; Kristine Burnaska, **Agency for Health Care Administration Staff:** Nikole Helvey; Cruz Conrad; Carrie Gaudio; Heidi Fox; Adrienne Henderson; Pam King; Suzanne Kirayoglu; Jess Hand; Sean Massey; Jennifer Miller; Brenda Phinney; Jack Plagge; Sarah Shepard; Nancy Tamariz; Trish Vidal; Dana Watson

Interested Parties Present: Minnie Ahuja; Raeanna Bonetti; Katie Bradley; Evan Carter; Kyle Crews; Sarah Gosselin; Tab Harris; Jane Johnson; Frank Lambertsen; Ramon Maury; Marjorie McNeill; Stephanie Miley; Mary Pat Moore; Aaron Parsons; Lisa Rawlins; Linda Renn; Rachel Ringley; Kenney Shipley; Joni Silvestri; Ashley Tait-Dinger; Denise Talarico; Tripp Tart; Jessica Thompson; Brooke Tiner; Vivienne Treharne; Michael Young; Mary Zier

Call to Order, Roll Call, Review and Approve Meeting Minutes: Ms. Kim Streit, Chair, called the State Consumer Health Information and Policy Advisory Council ("Advisory Council") meeting to order, welcomed attendees and called roll. Dr. Michael Wasylik, made a motion to approve the December 2018 Advisory Council draft minutes with a correction to the list of cited attendees. Dr. David Shapiro seconded the motion.

Agency Update: Ms. Nikole Helvey, Bureau Chief of the Florida Center for Health Information and Transparency gave the Agency for Health Care Administration ("Agency") update and began by discussing the following legislative bills:

- Agency Regulatory Reform bill passed during the recent legislative session with the intent to streamline and eliminate duplicative processes;
- House Bill 551 passed and provides a public record exemption for health care facilities- hospitals, Ambulatory Surgical Centers, nursing homes, hospices or intermediate care facilities for the developmentally disabled;
- The Pediatric Cardiology Technical Advisory Panel rule-Senate Bill 622, was passed to provide direction regarding the structure and reporting requirements;
- The Nursing Home Generator rules- House Bill 799 and Senate Bill 7028, were ratified by the legislature and requires nursing homes keep patient care areas cooled at a maximum of 81 degrees or below, for a minimum of 96 hours;
- House Bill 21 and Senate Bill 8 regarding Opioids passed and adds requirements related to the Prescription Drug Monitoring Program; and
- Senate Bill 280- Telehealth Advisory Bill, House Bill 1339- Physician Orders for Life-Sustaining Treatment ("POLST"), and House Bill 35- Patient-safety Culture Survey did not pass to Legislation.

Ms. Helvey noted that rules resulting from Transparency Legislation were recently adopted, including rules 59A-5.032 and 59A-3.256, F.A.C., both adopted on February 19, 2018, covering Hospitals and Ambulatory Surgical Center price transparency and patient safety billing. Rule 59E-9.010, F.A.C. for Claims Data Collection would be effective on April 2, 2018 and provides guidelines for data collection in response to requirements under section 408.05, F.S. Chair Kim Streit responded that sharing the findings of Facility Surveys related rules 59A-5.032 and 59A-3.256, F.A.C., would help the stakeholders. Ms. Helvey noted that the Agency continues outreach and awareness activities.

Florida Center Update: Ms. Nancy Tamariz presented on Data Collection and stated that third-quarter reporting closed on February 28 with only three delinquent facilities. She noted that two recently amended rules were now effective: Rule 59B-9, F.A.C. - adding off-site Emergency Department location codes for hospitals with more than one location and deleting ICD-10 principal procedure codes, and Rule 59E-7, F.A.C.- adding comprehensive rehabilitation elements to the reporting schema. Ms. Tamariz added that the Agency published a Request for Quotes ("RFQ") for consultation on evaluation of the current data collection systems with a goal to streamline internal and external processes.

Shawn Massey, unit manager for Risk Management and Patient Safety, gave a brief summary of the Adverse Incident Reporting System ("AIRS") that launched on June 28, 2017. Mr. Massey updated that the development of the Annual Reporting System is scheduled to go live in May 2018 and discussed the methods by which this information will be disseminated. He concluded that the Risk Management and Patient Safety unit will continue to provide updates on the Annual Reporting System and inform facilities of how to register for healthcare alerts. Dr. David Shapiro asked that the New Annual Reporting Incident dates be communicated with stakeholders.

Ms. Patricia Vidal presented updates for the Office of Data Dissemination stating FloridaHealthFinder ("FHF") web visits totaled 439,272, FloridaHealthPriceFinder visits totaled 9,026 and there have been 20 webinars this year, for 300 Participants. Ms. Vidal noted changes to the FHF, including modification to the Nursing Home Guide Methodology and the addition of Change of Ownership information to the Legal Action section of the FHF Provider Profile page which gives consumers a chronological snapshot of violations in relation to ownership changes. Future updates to FHF would streamline the Comparison and Locator tools, add Emergency Generator Information, and Hospice Measures- which are expected by December 2019.

Ms. Heidi Fox updated the Advisory Council on the Health Information Exchange unit and reported that the Event Notification Service ("ENS") use continues to grow with 95 percent of all acute care beds in Florida are covered by the service and subscribers include 45 health plans and accountable care organizations, and 3 hospital systems and 3 provider groups. And, Electronic Health Record ("EHR") incentive program total payments to date for eligible providers is $244 million and $320 million for eligible hospitals. Ms. Fox spoke on future activities and said enhancements to the ENS coordination tool would occur in April 2018 and will increase functionality for subscribers, the Agency would meet with CMS in Boston to discuss sustainability activities for the EHR incentive program, and e-prescribing which adds security and accountability to patient care, was a focus of outreach for the year. Additionally, the Quality Data Reporting rule would be opened to modernize the data submission requirements and align the rule with current Healthcare Effectiveness Data and Information Set ("HEDIS") practices.

Ms. Fox told the Advisory Council that the Agency and its contracted vendor completed a Health Information Exchange ("HIE") study to assess the current state of HIE in Florida and provide recommendations for achieving an ideal state. Areas of interest for the assessment included infrastructure and services in Florida, information access and sharing across systems and locations, and real-time access to eligibility information. Ms. Fox noted recommendations for increasing engagement of the HIE, which included enhancing existing outreach activities and exploring the potential to leverage the FloridaHealthFinder ("FHF") website to increase awareness. She added that the next steps in the HIE study are a review by Stakeholders, solidifying timelines, and leveraging momentum from the study to pursue immediate projects. The HIE study, including results and recommendations, is available on the HIE website: www.fhin.net.

Dr. Jill Sumfest and Dr. Karen van Caulil inquired about including HIE information on FHF, particularly what information would be included on FHF that was not patient-specific and password-protected. Ms. Fox answered that no personal health information ("PHI") would be included and added that the HIE Value Proposition, videos and information about the services and national initiatives would be accessible on FHF. She said it would be an educational clearinghouse. Dr. Sumfest asked who was the intended audience for the HIE information, and noted that audiences are inclined to go to the Agency website pages for HIE information as opposed to FHF. Ms. Fox noted that there is a consumer side to HIE which includes laws around getting your health records. Ms. Streit noted that it seemed more logical for visitors to visit the Agency's website to get information on accessing health records.

Dr. David Shapiro asked what the difference was between the Agency website and FHF. Bureau Chief Helvey relayed that the AHCA website is stakeholder-focused and reflective of the Agency organizational structure and its regulatory responsibilities. FHF is consumer-oriented and is where consumers can go to find out about hospitals and procedure costs, but it does have a page for researchers and professionals that provides access to aggregate discharge data and hospital financial information. Dr. Shapiro, noting his confusion, suggested a global look and discussion on how the varied Agency websites interact and are linked, what information requires password-protection, and the duplication of information. He proposed that the subject be added as a future agenda item.

Nursing Home Guide: Debra Gressel provided an update on changes to the Nursing Home Guide ("the Guide") which is available on FloridaHealthFinder.gov. Ms. Gressel said that on November 28, 2017, CMS directed state agencies to utilize a new regulatory set of deficiencies- a complete overhaul of the previous Regulation Set had 175 deficiencies and the New Regulation Set has 204 deficiencies. She said that for the next 30 months, the Guide will include a combination of the two regulation sets; after that, only the new regulation set will be utilized. The FloridaHealthFinder methodology has been updated to show the differences in the sub-categories and a few of the critical deficiencies. CMS Nursing Home Compare's 5-star ranking: Is unavailable until the end of the year due to the new regulation set. The 5-star ranking is a comprehensive rating of not only deficiencies, but staffing and quality measures. Ms. Streit inquired about adding a representative from the Nursing home community to the Advisory Council, and Nikole Helvey affirmed that a review of advisory council vacancies would be helpful.

FloridaHealthPriceFinder: Kristine Burnaska and Carol Bashaw with the Health Care Cost Institute presented to the Advisory Council on the FloridaHealthPriceFinder website and upcoming changes to the website. Ms. Burnaska said that the website was launched on November 28, 2017 and currently presents costs at the national, state, and metro-service area ("MSA") level. Ms. Burnaska added that the website displays 295 care bundles based on data submitted from commercial plans. She noted that after rule 59E-9.010, F.A.C., Claims Data Collection is adopted on April 2, 2018, HCCI and AHCA will begin the process of working with payers to onboard data, beginning with Florida Blue and Avmed and by mid-May the website will display costs at the facility level. Ms. Helvey inserted that Florida Blue and Avmed were chosen to onboard first as these plans have the largest population for submission after Aetna and Humana who already work with HCCI.

Carol Bashaw provided a walk-through of the current website for the Advisory Council and included notations of how the website would change after adoption of the April 2, 2018. Ms. Bashaw demonstrated how to access FloridaHealthPriceFinder through the "Price Icon" on FloridaHealthFinder, showed selection of a Care Bundle, and how to change the location within the website. Ms. Bashaw said that FloridaHealthPriceFinder was a great starting point for health care shopping and encouraged consumers to check their plans. The Advisory Council discussed the attribution of total care bundle costs to facilities and Ms. Helvey clarified that average costs for ancillary costs in the care bundle is applied to every facility in the county with available data for the procedure. Dr. Jill Sumfest asked if consumers receive instruction on how to navigate the website and if consumers would know that costs shown are estimates. Ms. Burnaska replied that the website displays average costs but that additional language could be added for clarification.

Ms. Streit noted that facilities and health plan websites are required to display out-of-pocket calculators and link to FloridaHealthPriceFinder. She inquired about monitoring plan compliance with the requirement. Wences Troncoso responded that the majority of health plans already provide out-of-pocket calculators. Dr. van Caulil countered that although the tools are available, they are not reflective of the bundles present on FloridaHealthPriceFinder. Dr. van Caulil noted the need for additional stakeholder education about the website. The Advisory Council agreed that continued education and communication is needed to provide understandable context for the consumer.

Ambulatory Surgery Center Quality Measures: Dr. David Shapiro presented to the Advisory Council on Ambulatory Surgery Center quality measures and began by stating that the ASC Quality Collaboration initiated the process of

developing standardized ASC quality measures in 2006 and CMS implemented the Ambulatory Surgical Center Quality Reporting (ASCQR) Program on October 1, 2012. Measures included in the program are developed using a multi-step process, vetted with internal panel of technical experts and an external panel of individuals, and have been pilot tested in ASCs and assessed for validity, feasibility and reliability. Measures are divided into two categories: Outcome- assesses patients for a specific result of health care intervention, and Process- which evaluates a particular aspect of the care that is delivered to the patient. Dr. Shapiro cited the following as measures:

- Patient burn; patient fall;
- Wrong site, wrong side, wrong patient, wrong procedure or wrong implant;
- All cause hospital transfer or admission;
- Influenza vaccination coverage among healthcare personnel; endoscopy or polyp surveillance;
- Normothermia;
- Unplanned anterior vitrectomy;
- Facility 7-day risk-standardized hospital visit rate after outpatient colonoscopy.
- Improvement in Patient's Visual Function within 90 days following cataract surgery- a voluntary measure.

Dr. Shapiro stated that claims and administrative data is reported via web-based system and ASCs that don't submit data incur up to a 2.0% reduction of their total Federal Medicare reimbursement payment for the specified year. He concluded by noting that 96.9% of Medicare-certified ASCs submitted and will receive full payment for the 2018 calendar year.

Meeting Follow-up: The following items were identified as either requiring follow-up or discussion at the next meeting:
1. Consider adding a representative from the Nursing Home;
2. Invite a Department of Health representative to discuss Prescription Drug Monitoring Program;
3. Follow-up on preparation for disaster response; and
4. Follow-up meeting to discuss stakeholder communication and education planning for the FloridaHealthPriceFinder website.
5. Review FloridaHealthFinder.gov and AHCA website to show differences between the websites
6. Provide details regarding which plans are required to report claims data
7. Create an infographic to educate consumers about pricing data
8. Indicate if the prices shown are for inpatient procedures or outpatient procedures
9. Data Standards Transparency Workgroup may need to meet to discuss pricing and quality measures

The next Advisory Council meeting is scheduled for June 28, 2018 from 1:00 pm to 3:00 pm.

There were no public comments and the meeting was adjourned at 3:20 pm.