

GRANT APPLICATION ELIGIBILITY

Which agency will run this grant program?

Answer: HHS is responsible though the Act does not specify which agency within HHS will run the program. We await further information from HHS about which agency and staffers will oversee it.

Has "existing APCD" been defined?

Answer: Yes, and broadly: "The term 'State All Payer Claims Data base' means, with respect to a State, a database that may include medical claims, pharmacy claims, dental claims, and eligibility and provider files, which are collected from private and public payers."

Will HHS only consider one application from each state?

Yes. Each state is eligible for one grant.

Because the application must come from a "State," does this mean that the state must endorse the application?

Answer: We expect that the application itself will have to come from a state agency, and the Act specifies that grants will be made to states. It seems a state can designate a non-state entity to operate the APCD using those funds, although any limitations and rules around that are not yet known. A non-state entity would have to work closely with their state government to pursue this grant.

For state offices that manage APCDs *and* other datasets, would you advise centering the application on just the APCD side of the office's work, or would it be wise/helpful to broaden the approach to include those other datasets.

Answer: The grant opportunities are specific to APCDs, so the application should focus on the APCD. To the extent that APCD lives in the same space as other data sets that may be germane to the data access program or efforts, that can certainly be mentioned.

Do we need to have these requirements in place to receive the money, or could the money help the APCD to achieve these requirements?

Answer: It is pretty clear that a state APCD must adhere to these requirements, but they do not have to have these requirements in place prior to receiving the funding. It will be a requirement after grant participation. You could use these funds in part to fulfill those requirements. In the grant application to, states will need to describe these processes, whether they have them already or intend to develop them.

As a non-profit operating a voluntary APCD, it seems I should reach out to the state to get them on board. Is that correct?

Answer: Yes, the grant application must formally come from the state, even if on behalf of a non-profit like yours. So, there will need to be at minimum coordination, and possibly a declaration from your Governor or legislature, that your organization is the designated APCD for the state. Although details remain uncertain, this support will strengthen your hand. If your state has more than one existing APCD that could potentially vie for a grant, we recommend proactively speak with state officials to establish yourself as the APCD leader in your state.

SUSTAINABILITY

A couple of larger states have said that \$2.5M is only about 1/3 of the cost to create and run an APCD. How is it expected to fund the shortfall?

Answer: The grant will not fund the full cost of running an APCD, and that is why a sustainability model is going to be critical to understanding how far it will take you. Some states might consider whether this grant is worth it given the new requirements (e.g., data sharing) that are imposed if you accept the grant money. Despite not providing full funding, these grants are substantial, and there are several additional avenues for getting money to support your APCD.

Are there recommended sustainability models for an APCD? We have seen mixed results with HIEs since HITECH passed in 2009.

Answer: Before this grant opportunity came about, states were wrestling with sustainability, and different strategies have worked for different states. Some states get money in their general budget appropriations, some get private foundation grants, some collect fees for releasing data, and about 10 states have received Medicaid match funding. All these avenues still exist. Note that for states with Medicaid match funding, the state portion of the funding cannot come from another federal pool of money—including these APCD grants.

DATA RELEASE PROCESS

States differ in the "public interest" provisions in their data access program. For example, some states preclude use of the data for litigation or for certain commercial uses not directly in the public interest. Will there be a standard definition of what constitutes "public interest" in a state's data access program?

Answer: Not clear. The Act requires three categories of data release: for research, "customized reports," and aggregate data as "non-customized reports." Data need only be shared with authorized users, which may include employers, payers, and providers "for the purpose of quality improvement or cost-containment." These broad aims are not further defined. We expect future rules to clarify, otherwise it may be up to individual states to interpret the data sharing requirement.

Could an individual practice get data?

Answer: Providers are specifically mentioned as a category of possible data recipient, and we expect regulations to clarify for which data and under what circumstances they would be "authorized users."

Which entity determines the granularity of the data the requester is able to gain access to? Is it fair to presume that for providers or insurers, it would be only for their cohorts?

Answer: Pending any regulations issued under the Act, it seems states will judge what is permitted. For example, researchers may well need highly granular data to address specific research questions. Data for other uses may not need such detail. States will need to require a DUA, specify allowable uses, and comply with existing federal and state laws. Additionally, the Act says that requests for non-customized reports must be available free of charge for all authorized users. It seems like HHS will want to see that the APCD intends to have aggregate reports available for free in an easy to obtain way. Our read is that this is meant to set the minimum releases required, and that states may go further in their release programs.

Do the privacy requirements permit linking the APCD data on an individual level to other data sets?

Answer: We believe that, subject to banning attempts at reidentification, or the publication or distribution of individually identifiable data, yes, it could.

The Act says custom data sets may be released at cost. Would “costs” include direct (e.g., analyst time for extract) and indirect (e.g., proportion of use of data enhancement tools) costs?

Answer: Although unspecified, we interpret the Act to allow accounting for fully-loaded costs. We will await any regulations on this subject.

For a state with an existing APCD, will the data release requirements apply to all work done by the APCD, or only products and services created under this program?

Answer: Presumably yes. The Act makes no distinction between data collected before or after the grant is awarded.

Will ERISA plans that don't voluntarily participate in the APCD be allowed to apply for the data as well?

Answer: We don't see any reason why not. They would, of course, still have to meet the requirements of the program, protecting privacy, etc.

OTHER QUESTIONS

How do state DOI's figure into the picture? What do those conversations look like?

Answer: The Act is silent on insurance divisions/departments. Although there is no specific role for them, DOIs in some states are the APCD oversight or operating agencies. In other states, they are partners and data users. If your state has an existing APCD, we suggest you work with your DOI to get a feel for how an expansion would be useful to their policy goals. For states getting started, the DOI is one possible home for the APCD.