

APCD Use Cases: Innovative State Examples

Spotlight on Rhode Island

September 11, 2025

Welcome & Introductions



Jonathan Mathieu
Senior Consultant
Cost Trends



Ena Backus
Senior Consultant
Health Care System Planning

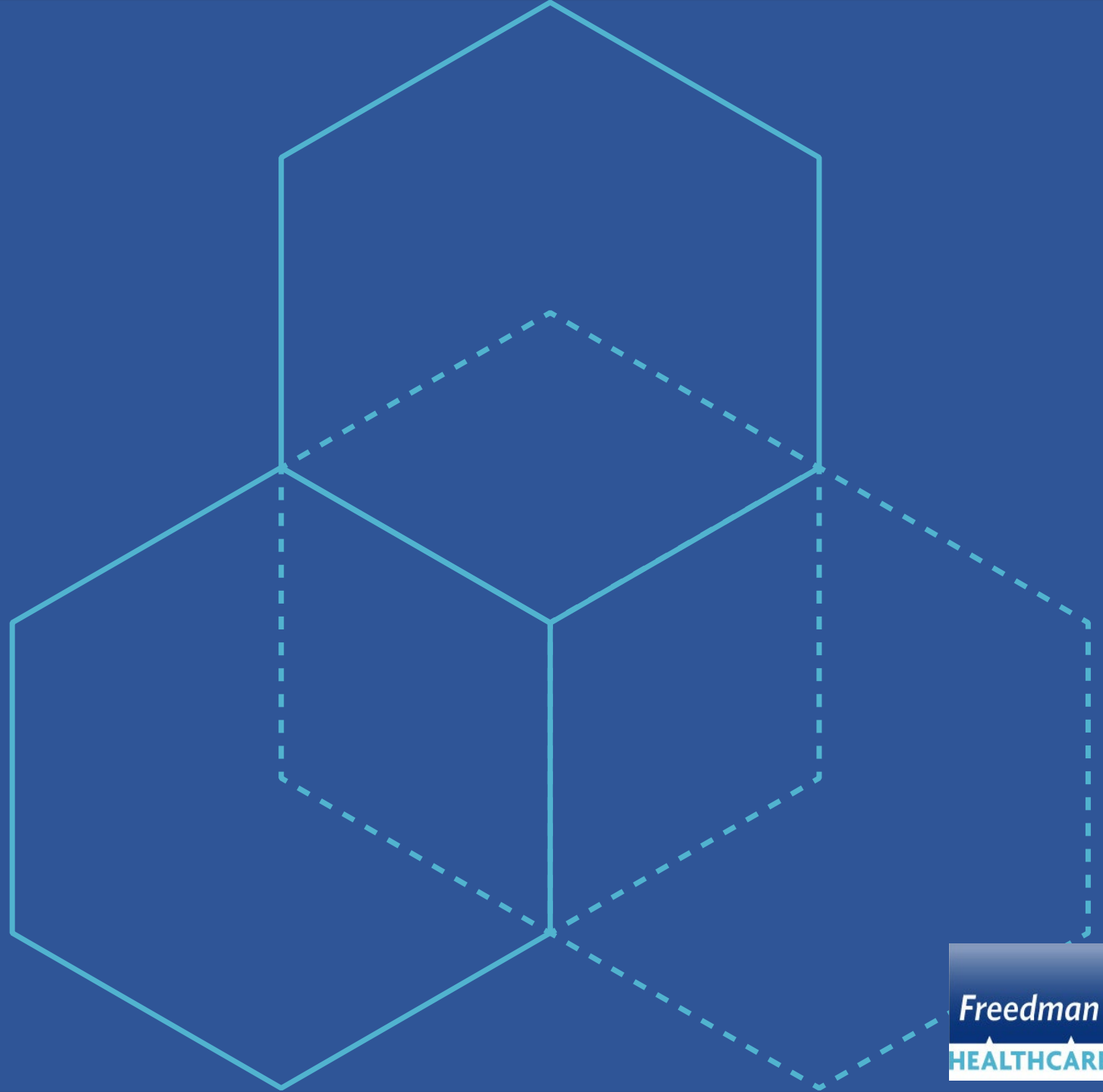


William Hendon
Project Manager
HealthFacts RI (APCD)



Chad MacLeod
Senior Consultant
Ecosystem

HealthFacts RI (RI APCD)



Timeline

2008

Legislation enabled the collection of healthcare claims data from payers



2014

Data collection from commercial, Medicare, and Medicaid payers who have more than 3,000 covered lives



2022

Alternative Payment Model data collection begins



2013

Regulations issued to establish data collection guidelines and data release policies



2019

Dental Claims data collection begins



2023

Health Equity Data regulation enacted

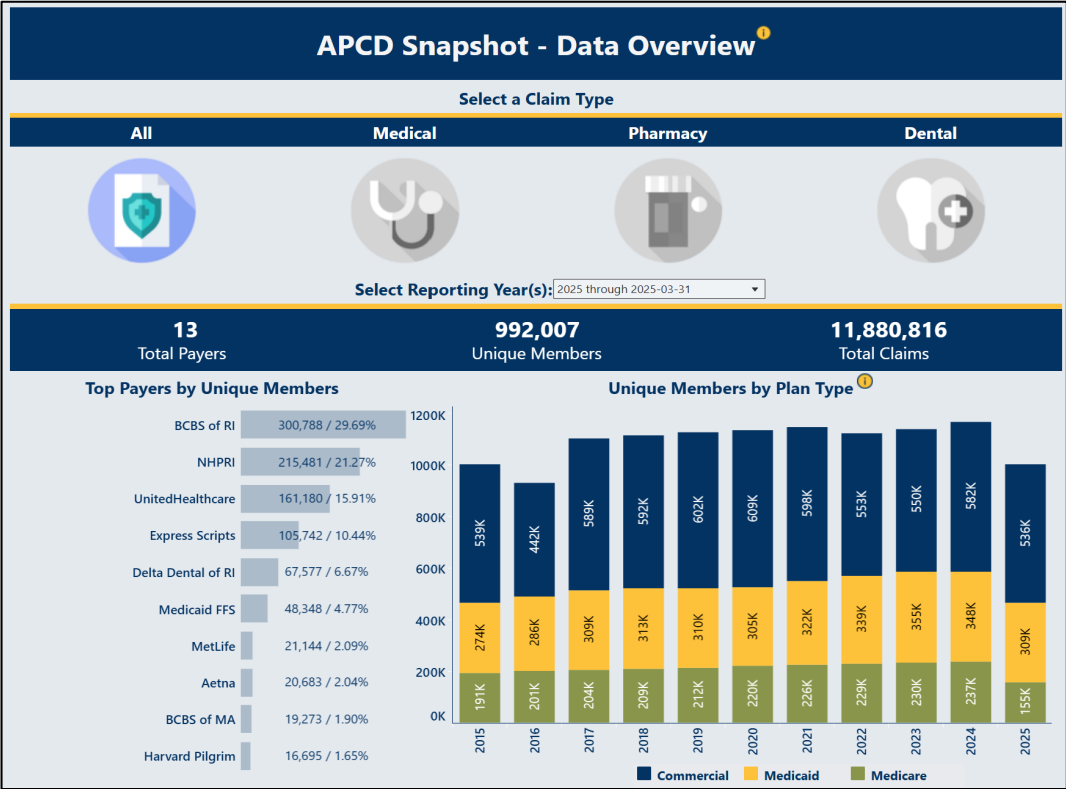


Founding Use Cases

- Department of Health
 - Ensure transparency of healthcare costs, quality, efficiency, and utilization.
 - Publish accessible reports to guide health planning and policy.
- Health Benefit Exchange
 - Provide information to design/manage plans and support consumer decision-making.
 - Meet federal reporting requirements and assess Exchange impact on access, cost, and quality.
- Office of Health Insurance Commissioner
 - Support insurance rate reviews, ACA risk adjustment, reinsurance, and CMS reporting.
 - Monitor affordability standards, reimbursement methods, and contracting.
- Medicaid Program
 - Conduct risk adjustment and inform managed care rate setting.
 - Guide redesign of care and payment models for dual eligibles.

Data Availability

- Available data is summarized in our [APCD Snapshot Dashboard](#)



APCD Snapshot - Data Availability

Select a Metric: Unique Members

Filter by Claim Type: All

Filter by Plan Type: All

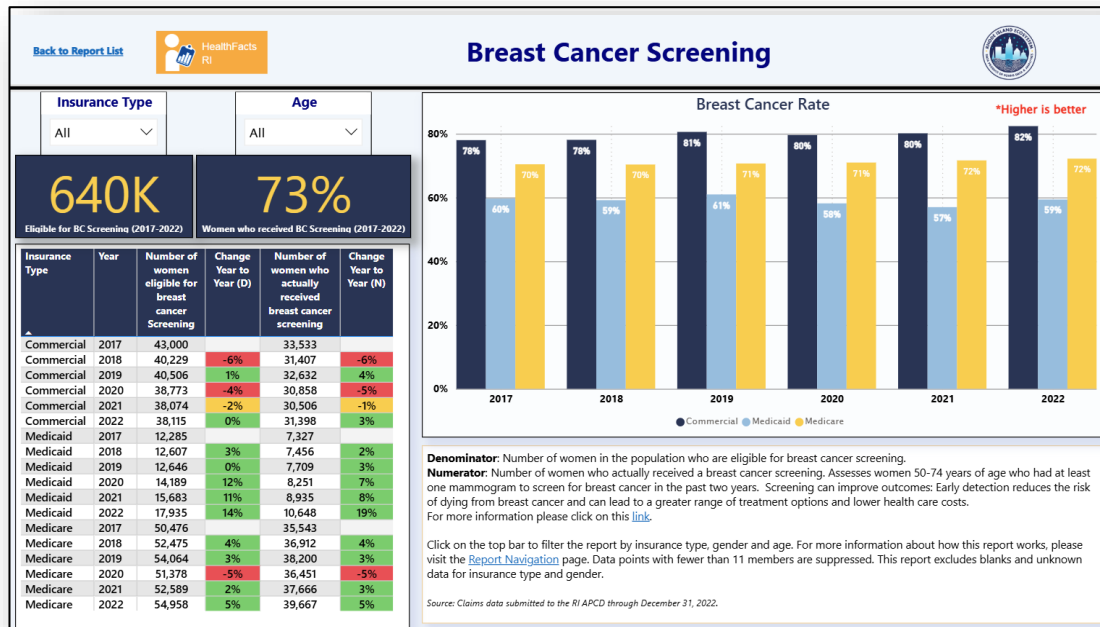
Filter by Reporting Year: (All)

	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Aetna	24,312	7,353	6,592	6,247	9,212	10,612	13,107	14,306	15,125	19,862	
BCBS of MA	20,281	6,479	7,884	8,883	12,278	8,722	12,027	12,948	13,732	17,163	
BCBS of RI	23,251	24,308	28,505	27,331	25,512	25,153	23,647	21,527	22,182	22,562	
CaremarkPCS	17,180	18,580	24,964	24,229	22,707	21,376	21,519	19,969	19,612	20,000	
Cigna	324,748	286,467	288,662	263,900	255,793	302,213	314,621	311,662	317,323	320,181	
Delta Dental of RI	301,385	266,544	279,050	259,084	253,783	294,404	310,936	308,174	310,548	314,489	
Express Scripts	3,479	13,828	14,452	14,995	15,044	14,346	14,533	14,508	14,460	14,261	
Harvard Pilgrim	37,641	45,723	50,719	50,630	51,800	51,595	53,968	57,429	55,978	43,418	
MetLife	25,735	22,851	17,799	18,412	19,383	19,048	18,955	11,161	12,439	12,440	
NHPRI	22,043	14,627	13,740	14,167	15,236	13,756	14,839	10,635	11,109	11,072	
Tufts Health Plan			88,173	96,752	96,240	78,262	62,014	62,322	66,635	73,268	
UnitedHealthcare	176	9,041	217,723	216,993	218,443	186,189	195,088	194,737	197,830	203,975	
			51,951	55,948	63,378	83,889	88,351	99,613	87,679	101,101	
	353	6,603	42,900	50,501	54,144	77,626	96,877	107,642	81,015	105,442	
	11,314	10,668	8,388	7,802	7,331	7,090	7,618	7,502	9,452	18,843	
	9,703	8,915	7,140	6,529	6,151	5,861	6,643	6,506	7,877	15,432	
	73,169	66,548	79,866	77,843	78,051	77,587	65,685	57,859	63,071	76,737	
	144,720	139,797	166,859	168,460	173,765	144,940	152,506	156,720	164,106	164,387	
	120,860	131,960	131,063	132,490	131,934	132,656	128,692	126,954	117,037	116,126	
	144,953	181,322	182,670	186,556	190,315	195,983	203,476	202,749	204,770		
			30,317	30,220	29,082	26,533	26,750	25,390	25,151	25,331	
	85	883	24,058	24,743	22,277	21,687	24,014	22,392	22,223	22,700	
	179,918	188,449	197,290	203,552	205,531	202,650	209,598	217,264	230,816	240,823	
	175,778	186,481	193,237	198,273	193,518	189,141	204,676	208,122	215,699	217,392	
	26,744	49,390	26,001	42,193	40,730	38,426	40,401	39,982	39,637	28,836	
	23,180	36,159	22,412	33,569	32,454	30,802	34,234	32,834	31,310	21,303	
	268,612	198,102	228,941	232,562	239,381	201,898	207,848	177,505	187,782	181,397	
	242,064	183,111	191,691	191,700	187,718	151,683	165,475	170,995	173,335	166,858	

Eligibility Claims

Data Availability

- Summary Tables, Reports, Claims Extracts, and interactive dashboards
 - Aligned measure set based [HealthFacts RI Interactive Public Reports](#)
 - Custom (Dental, Alzheimer's, Children's Behavioral Health)





APCD Alzheimer's Disease and Related Dementias (ADRD) Cost of Care Summary

Select Calendar Year: Multiple selections
Select Stratification Type: By Insurance Type

[Home](#) [Glossary](#)



Calendar Year	Stratification	Members w/ ADRD Dx	Patient Cost	Insurance Cost	Total Cost
2021	Commercial	694	\$157,357	\$2,398,766	\$2,556,123
	Dual Eligible	3,336	\$4,536,943	\$61,532,211	\$66,069,154
	Medicaid FFS	1,997	\$2,751,180	\$64,197,864	\$66,949,044
	Medicaid Managed Care	1,778	\$819,230	\$17,464,023	\$18,283,253
	Medicare Advantage	7,580	\$2,514,401	\$39,863,898	\$42,378,298
	Medicare FFS	8,731	\$8,011,525	\$96,081,815	\$104,093,340
2022	Commercial	671	\$137,659	\$2,208,716	\$2,346,374
	Dual Eligible	3,190	\$4,212,220	\$53,318,269	\$57,530,489
	Medicaid FFS	1,658	\$2,008,541	\$38,922,573	\$40,931,114
	Medicaid Managed Care	1,925	\$1,761,936	\$22,817,505	\$24,579,441
	Medicare Advantage	7,893	\$2,284,229	\$36,032,757	\$38,316,986
	Medicare FFS	8,166	\$6,808,644	\$84,290,773	\$91,099,417
2023	Commercial	609	\$141,496	\$2,023,616	\$2,165,112
	Dual Eligible	2,747	\$4,043,101	\$47,967,986	\$52,011,088
	Medicaid FFS	1,530	\$2,759,574	\$50,038,872	\$52,798,446
	Medicaid Managed Care	1,706	\$1,744,194	\$19,110,867	\$20,855,062
	Medicare Advantage	7,394	\$1,704,069	\$26,596,158	\$28,300,227
	Medicare FFS	7,728	\$5,100,976	\$67,929,200	\$73,030,176

APCD Data Projects – Non-State

Requester	Project Name
University Researcher	Comparing Utilization, Outcomes, and Choice for VHA and non-VHA Health Systems
University Researcher	Evaluating the Design of State Efforts to Reduce Healthcare Prices
University Researcher	Exploring the Health Impacts of Residential Eviction in Rhode Island
University Researcher	Interdisciplinary Data Solutions to the Opioid Crisis in Rhode Island
University Researcher	Empowering the Safe, Effective and Efficient Use of Medications among Older Adults
MA State Agency	Monitoring of Costs and Market Functioning
Hospital	Evaluating HIV Pre-exposure Prophylaxis Implementation
Research Organization	Transitions in Health Coverage

State Partner Engagement

- RI Department of Health
- Sister State Agencies & Partners
 - Executive Office of Health and Human Services
 - The Office of the Health Insurance Commissioner
 - HealthSource Rhode Island (Health Benefits Exchange)
 - RI Governor's Office
- State requests typically fall into one the following topic areas:
 - Enrollment & Coverage
 - Spending & Cost
 - Condition & Population Studies
 - Quality & Preventive Care

Data Projects – State

Requester	Project Name
Department of Health	Actuarial analysis of tobacco interventions
Health Source RI	Analysis of RI exchange member characteristics
Brown University	Spending on cancer treatments, Medicaid share
Rhode Island Attorney Generals Office	Pharmacy claims for PBM review
Office of the Health Insurance Commissioner	Cost-sharing for Behavioral Health parity analysis

Outreach Efforts

- Fiscal sustainability requires promoting the RI APCD as a data source to support State priorities, including:
 - Healthcare Workforce Planning
 - Healthcare System Planning
 - Health Spending Accountability and Transparency Program
- External outreach:
 - Researchers, graduate students and PhD programs
 - Healthcare providers and systems
 - Pharmaceutical companies
 - Consulting and analytics firms

Unlocking Healthcare Insights with the Rhode Island APCD

Your gateway to data-driven health transformation



What is the RI APCD?

The Rhode Island All-Payer Claims Database is a comprehensive repository of health insurance claims from commercial insurers, Medicare, and Medicaid. It enables powerful insights into the cost, quality, access, and utilization of healthcare across the state



Why Use the RI APCD?

- ✓ **Holistic View of Care**
Captures claims across payers, giving a full picture of the RI population utilization and cost of healthcare services
- ✓ **Supports Policy & Innovation**
Empowers data-driven decisions for healthcare reform, cost transparency, and patient outcomes
- ✓ **Ideal for Research**
The data product delivered is perfect for academic studies, state department research projects, value-based evaluations and more
- ✓ **Secure & Confidential**
Stringent data privacy, governance, and review processes ensure safe and ethical use of Rhode Islander's data

Sample Use Cases

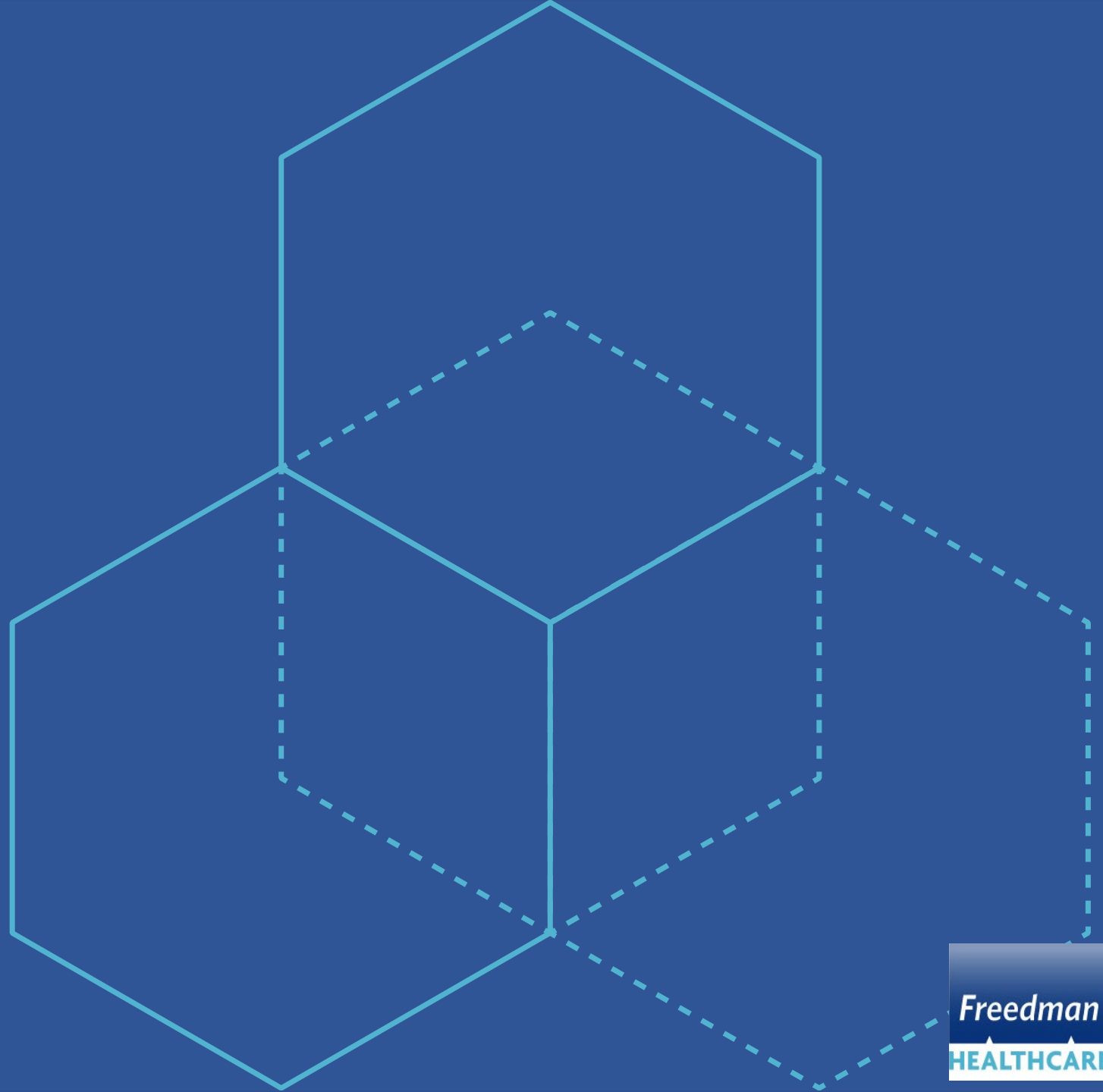
- Evaluating the impact of healthcare reform initiatives
- Identifying disparities in access to care
- Analyzing prescription drug utilization trends
- Monitoring cost containment efforts and outcomes

Who Can Apply?

- ✓ Government Agencies
- ✓ Researchers & Academic Institutions
- ✓ Nonprofits & Advocacy groups
- ✓ Healthcare Organizations & Insurers

DOH.healthfactsri@health.ri.gov

Cost Trends



Overview

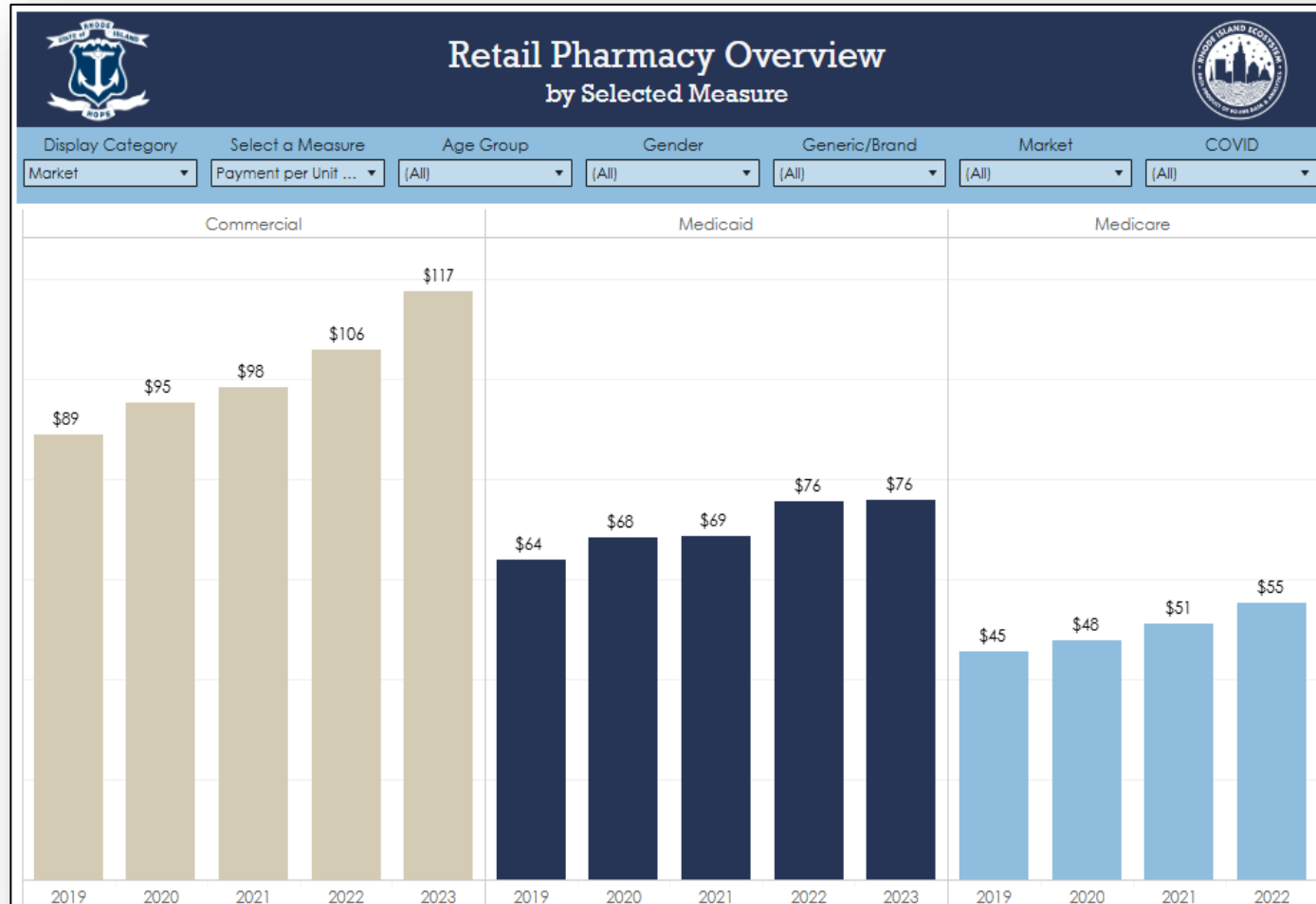
- Health Spending Accountability and Transparency Program (Cost Trends)
- Purpose is to inform provider organizations, payers, purchasers, policymakers, and state residents interested in improving healthcare affordability in Rhode Island
- Cost Trends dashboards provide:
 - Transparent reporting on trends in spending and use of services in Rhode Island
 - Detailed information on cost drivers, including:
 - Total spending, total units
 - Price per unit (PPU), units per thousand members (UPK)
 - Per member per month (PMPM) spending
- Website: <https://ohic.ri.gov/data-reports/ohic-data-hub>

Dashboards

Public dashboards include:

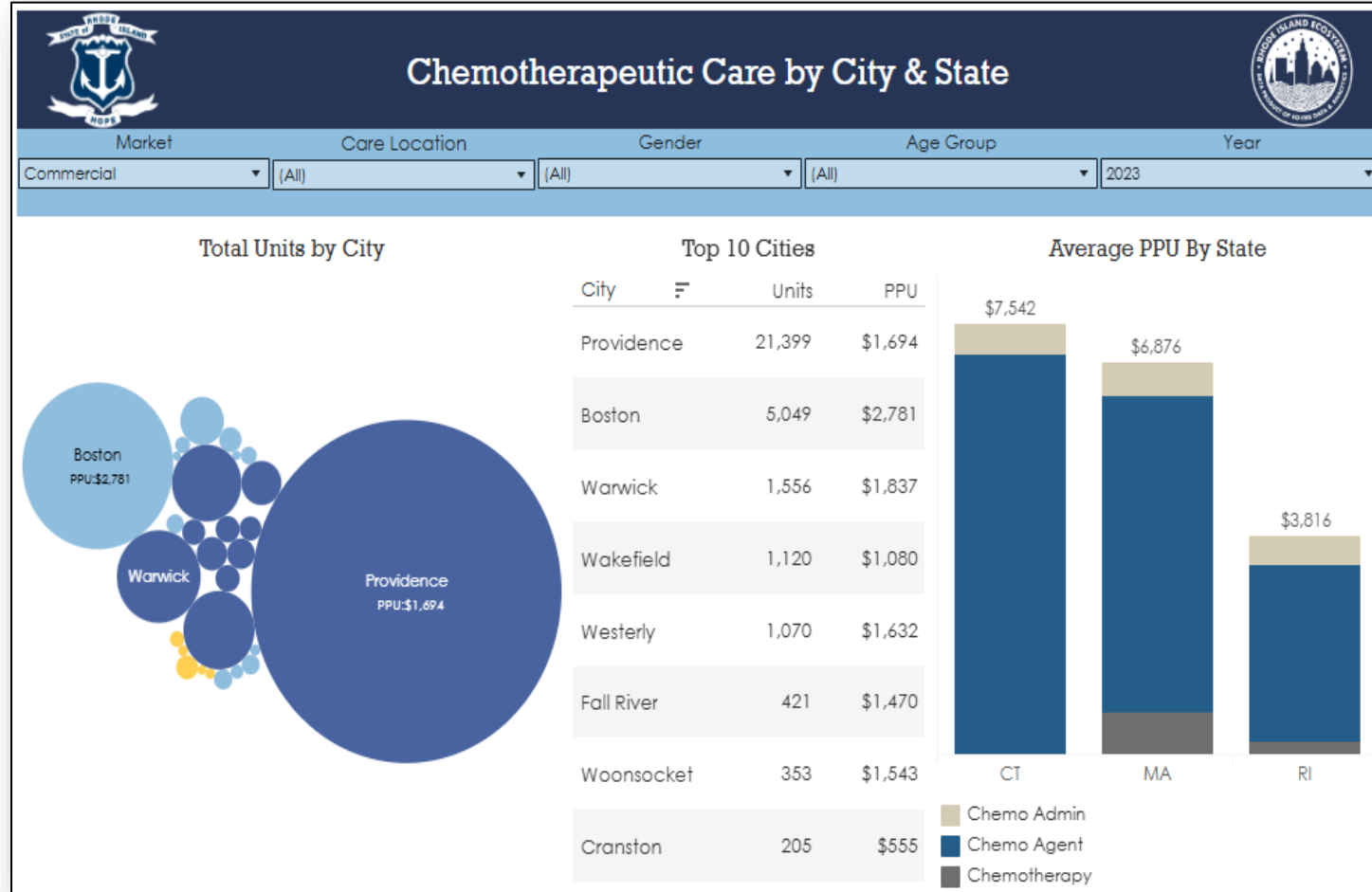
Overview by Service Category	Inpatient Trends (by APR-DRG)
Retail Pharmacy	Emergency Department Visits
Medical Pharmacy	Chronic Conditions
Outpatient and Professional Procedures	Care Migration
Mental Health	Care Migration for OP Chemotherapy

Retail Pharmacy – PPU by Payer



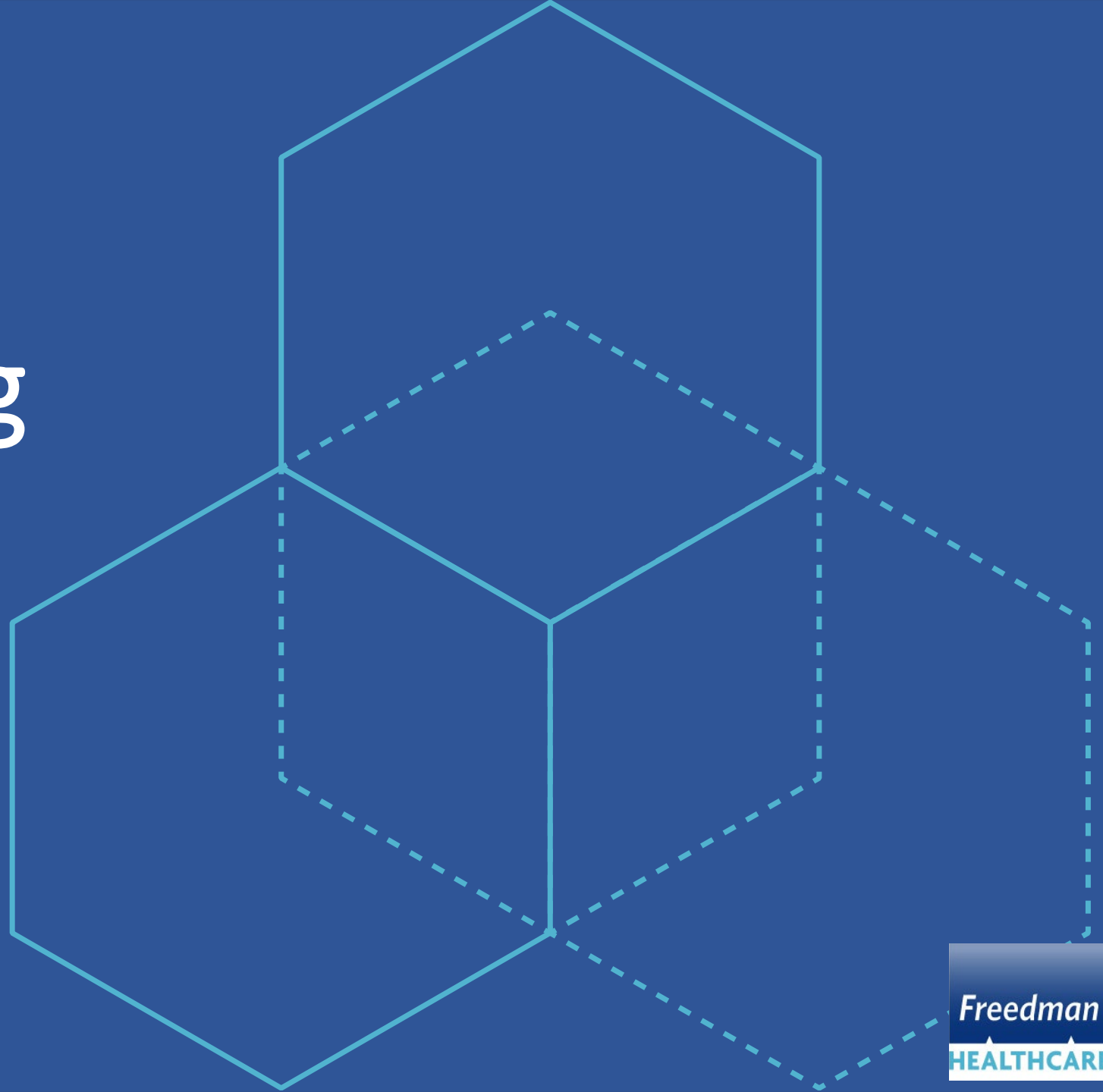
- PMPM, PPU and UPK measures
- View results by drug category/class (51)
- Filter results by age, gender, and status (brand v. generic)
- Additional views:
 - Spend by Drug Category
 - Drug Category Table
 - Highest Spending
 - Category Drilldown

OP Chemotherapy by Location



- Top 10 cities where RI residents receive OP Chemotherapy
- Interactive bubble chart and summary table
- Average PPU by state with drug and administration detail
- Additional views:
 - Top 20 drugs by spend
 - Table with units, total spend, and PPU detail for individual drugs

Health Care System Planning



Overview

- Rhode Island Governor Dan McKee established the Health Care System Planning Cabinet in 2024
- The Cabinet's charge is to use data to ensure access to high-quality, affordable care for all Rhode Islanders
- The Foundational Report was published in 2024 and is the basis for the Rhode Island Health Care System Plan now in development
- Data dashboards and visualizations in the Health Care System Planning Data Center support the Foundational Report and will be expanded to continuously inform data-driven decisions

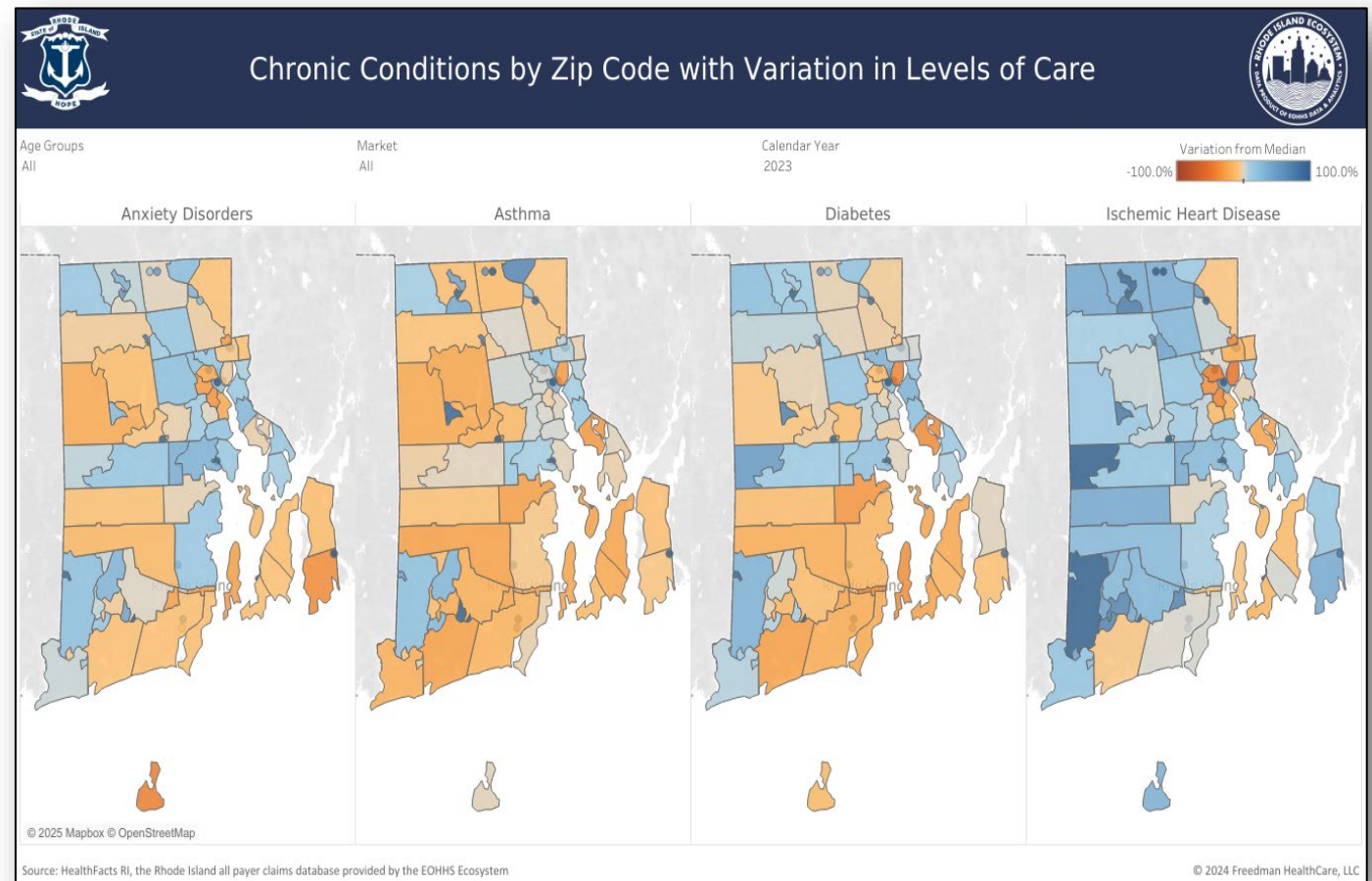
Dashboards and Visualizations

Health Care System Planning Data Center Dashboards:

Long-Term Care and Healthy Aging • Community Health Center Population by Age, Dual Eligible Status • Nursing Home Stars Ratings and Distribution by County • Top Ten Diagnosis by Age and Year	Health Related Social Needs • Chronic Conditions by ZIP Code with Variations in Levels of Care by Payer Type
Interdependencies and Cross Cutting Issues • Inflow and Outflow Among Licensed and Employed Individuals	Rhode Island Health Care Workforce Data Dashboard

Insights from HealthFacts Rhode Island (RI APCD)

- CMS Chronic Conditions Warehouse (CCW) categories group chronic conditions
- Utilization is mapped to highlight geographic variation in the level of care Rhode Islanders with a diagnosed chronic condition receive
 - Darker shades of orange indicate less care delivered than the median
 - Darker shades of blue indicate higher-than-median level of care
- Claims data facilitate payer type and age group comparisons
- Opportunity to pair with additional data relative to Health-Related Social Needs



Rhode Island Health Care System Planning-Data Center

Data Development and Near-Term Priorities

Centralize Health Data in the Ecosystem

Incorporate additional data into the Ecosystem supports holistic planning across the State's system of care

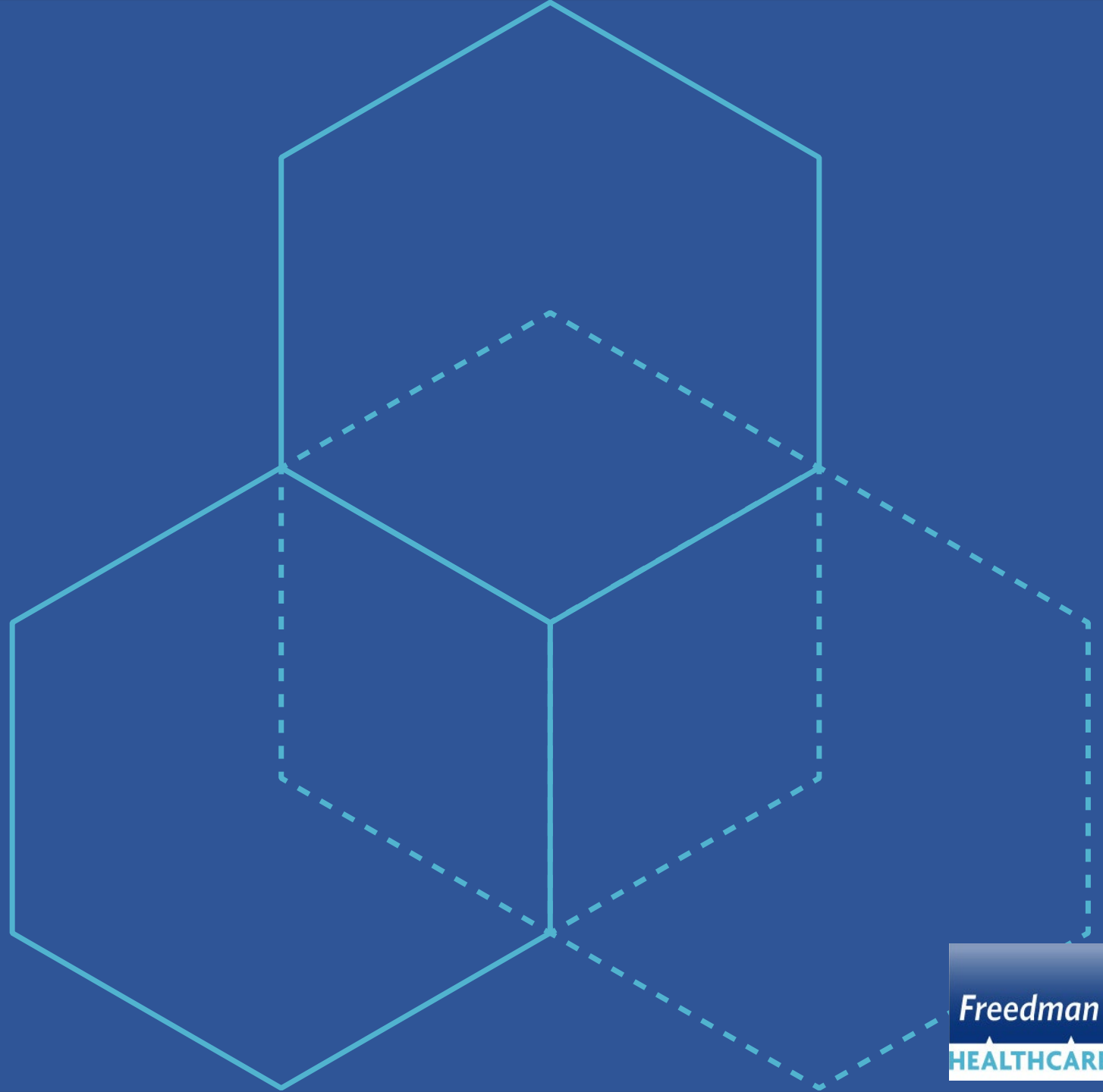
Fiscal Transparency and
Performance-Monitoring

Hospital fiscal transparency and performance-monitoring dashboard

Primary Care Support

Primary care provider capacity assessment

Ecosystem



Overview

- A one-of-a-kind data utility, established in 2017, which acknowledges the ways in which we are raised by our families, rooted in our communities, and products of our histories
- Integrates and makes available person-level, de-identified information sourced from several State agencies and community-based organizations
- Evaluates new data sets as the understanding of how individuals interact with the health, human, and social services systems in Rhode Island evolves
- Involves consensus-based data governance policies, processes, and procedures for collecting and sharing data

Data Sets



Priorities

APCD Integration

Revise the APCD enabling legislation to allow for the collection of direct personal identifiers

RIB Integration

Create automated data feeds from RI Bridges (RIB) to the Ecosystem, e.g., Medicaid, RI Works, SNAP, TANF, CCAP, LTSS

RILDS Collaboration

Investigate opportunities for interoperability between the Ecosystem and the Rhode Island Longitudinal Data System (RILDS)

Analytic Capacity

Build out increased analytic capacity through additional software tools and training

Standardization

Support statewide data standardization efforts by endorsing and facilitating new methods

APCD Identifiers Integration

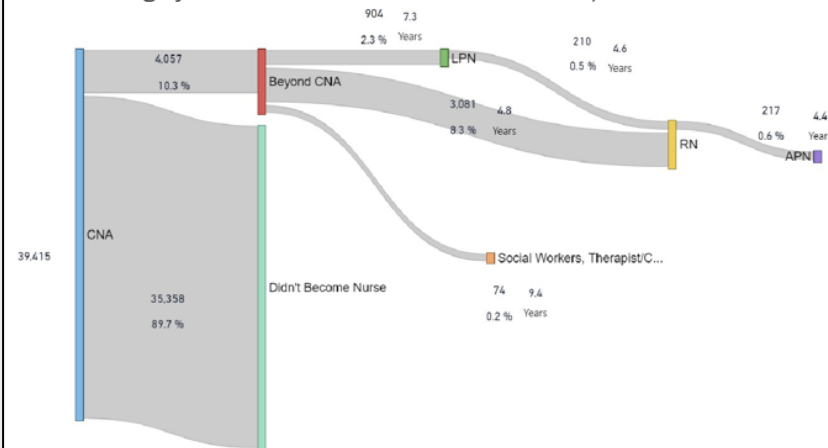
- APCD enabling legislation requires the database to be de-identified, not allowing for the retention or direct use of Personally Identifiable Information (PII)
 - The State uses a third-party 'encrypted unique identification' process that allows for PII to be submitted by payers and used to track members longitudinally and across insurers
 - For the past three years, the State has submitted a request to revise the legislation and regulations to allow for the direct use of PII
- PII would support optimal Person Identity Management practices across data sets, allowing for the most accurate tracking of Rhode Island's APCD population
 - If permitted to collect PII, the State could integrate its APCD with the Ecosystem – a strategic priority of the Ecosystem Governing Board for SFY26

Public Reporting Use Case Examples

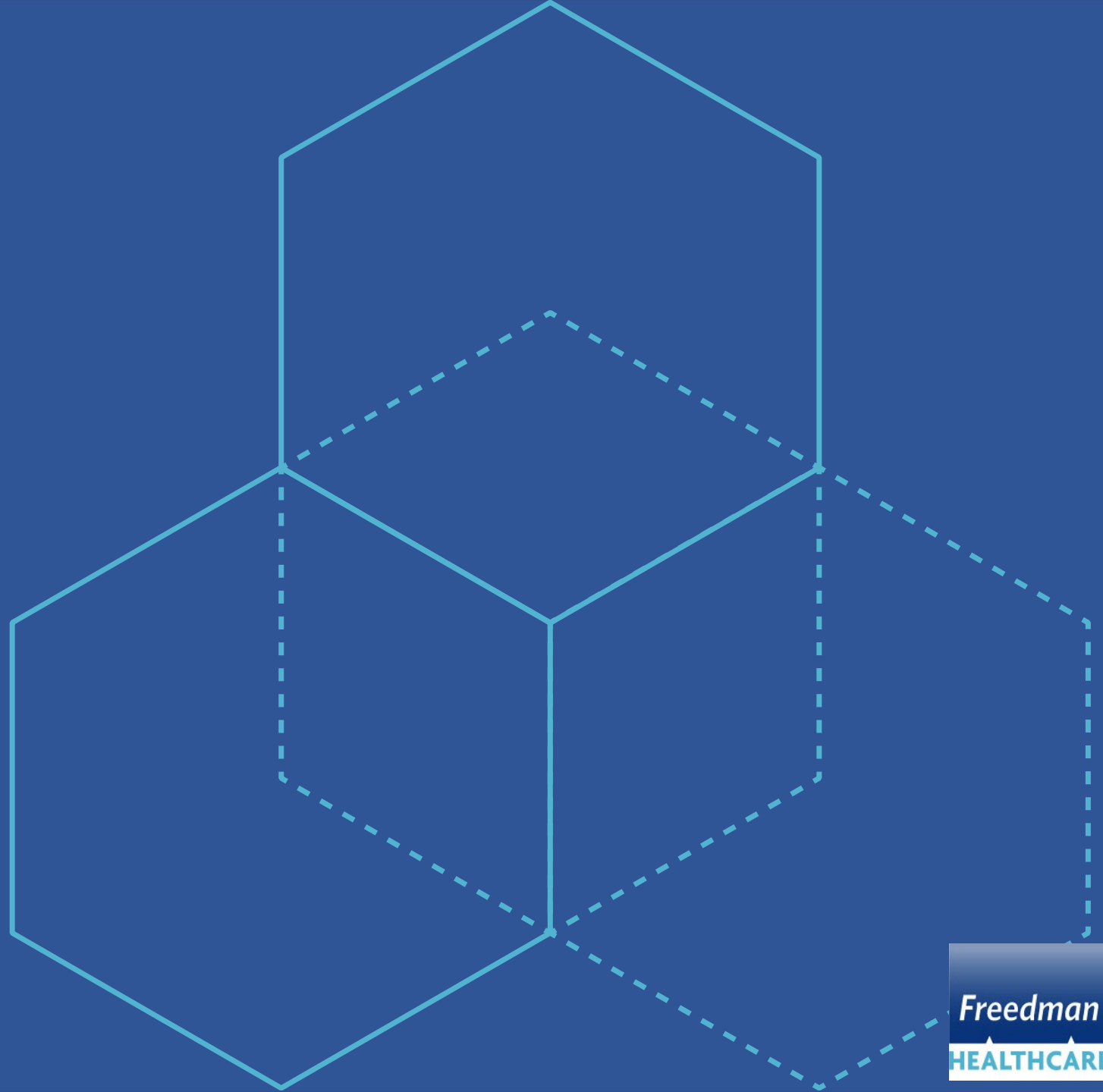
- Health Workforce Data Dashboard:
<https://eohhs.ri.gov/health-workforce-dashboard>
- Rhode Island Justice Reinvestment Dashboards:
<https://justice.ri.gov/statistical-analysis-center-information/justice-reinvestment-dashboards>
- Office of Child Care Data Dashboard:
<https://dhs.ri.gov/programs-and-services/child-care/research-reports-surveys-news>
- Early Intervention Demand Dashboard:
<https://eohhs.ri.gov/consumer/families-children/early-intervention-program/early-intervention-data-dashboard>

CNA Career Progression

A visual representation of individuals currently employed as a Certified Nursing Assistant (CNA) who did not become a nurse or obtain any other advance licensure versus those who obtained licensure beyond a CNA (with the average years to reach each license milestone).



Q&A and Close



Contact Information



Jonathan Mathieu
Senior Consultant
jmathieu@freedmanhealthcare.com



Ena Backus
Senior Consultant
ebackus@freedmanhealthcare.com



William Hendon
Project Manager
whendon@freedmanhealthcare.com



Chad MacLeod
Senior Consultant
cmacleod@freedmanhealthcare.com