Review Minutes from October 18, 2018 Meeting

- The final bullet under the “Update on the Health Value and Access Commission” should be attributed to DOH.
- It was asked with then 2017 HIDD Report will be made available. Answer: December 31.

All-Payer Claims Database (APCD) update: C2 funding proposal presentation

- The presentation for C2 funding for an APCD that was initially presented to Department of Information Technology (DoIT) and the Legislative Finance Committee on October 30, 2018 was presented to the group.
- The APCD C2 funding proposal was one of three DOH C2 funding proposals presented to DoIT and LFC.
- How are DoIT projects funded? LFC and Department of Finance & Administration (DFA) decides DoIT’s budget, the top IT projects end up in DoIT’s budget.
- DoIT will manage the project, and will work with three DOH staff.
- If C2 funding were granted for an APCD, after two years funding request cycle would begin again.
- Components of the funding proposal include:
  - Professional Services (a contract)
  - 3 DOH staff
  - IT software – this would be a one time cost
- If the C2 funding is not approved, what are the options?
The bill for the Health and Access Commission – which includes and APCD – is currently being written.
Representative Armstrong is interested in an alternate bill
Think New Mexico would propose a standalone funding appropriation.

**Medicaid Costs Presentation: Revised Analysis of bundling facility and professional fees for the Colonoscopy and Vaginal Delivery procedures**
- Since the October 18 meeting, HSD sent the CY2017 Medicaid claims with a date of service variable, instead of the previous month of service variable.
- This analysis focused on bundling claims with service dates within ±30 days of each other as well as “bundling” the claims for major medical groups of a county, e.g. Presbyterian, UNM, Lovelace in Bernalillo County.
- Colonoscopy
  - “Double” bundling (by ±30 days and medical group) was recommended for Colonoscopy and other outpatient procedures.
- Vaginal Delivery
  - Is the Medicaid Global Fee for Pregnancy and Perinatal claims included in the analysis of the Vaginal Delivery Claims? No.
  - Can Pre-natal care be bundled with the delivery? No.
  - Some “bundled” medical groups claims amounts, e.g., Womens Specialists, seem very high. This case should just be a professional fee, but facility fees appear to be included.
  - ±30 Date bundling appears to be combining facility and professional fees.
  - Need to separate the professional and facility fees components.
  - There is too much variation with the professional fees for vaginal delivery, it was suggested that professional fees not be shown on the website.
    - For Vaginal Deliveries, only facility fees will be shown.
- The documentation for the nine procedures on the website will need to be updated to describe the bundling methodology.

**2019 Advisory Board Membership discussion**
- It is unclear what direction the new administration will go with advisory groups such as this one.
- It isn’t known if the new administration will want new members on this committee.
- There are currently vacancies that should be filled.

**Schedule next meeting in Albuquerque**
- DOH will wait until after the 60-day legislative session has ended before scheduling the next meeting.