Format Requirements for the Calculation and Display of Aggregate Cost Data Rules Summary of Stakeholder comments and OFM response to comments

	Stakeholder Comments	OFM Response to Comments	
WA-APCD Program Director designated by the Lead Organization			
1.	WAC 82-75-510(3). This section states that the lead organization shall adopt criteria to prevent disclosure or determination of proprietary information. Request that "to any third party" be added to the end of the sentence to clarify the intent of the rule; to prevent disclosure to third parties.	OFM agrees that adding "to any third party" at the end of the sentence will provide clarity as to the intent and operation of the rule prohibition.	
2.	WAC 82-75-520(3). This section provides that provider-specific allowed amount data shall be suppressed if the payer accounts for more than fifty percent of that provider's patient market share. Request that the language be changed to apply to providers with more than two-thirds of the market share.	2. OFM does not agree that a change should be made at this time. Since the WA-APCD is new, there is no experience yet to draw from as to the appropriate market share. OFM would like to wait until it obtains sufficient experience to analyze and determination if a change should be made and what that change should be.	
Pr	Premera Blue Cross		
1.	WAC 82-75-500(4). This section defines "cell suppression." Request that "providers, payers, companies, or corporations" be added to the definition.	 Premera provided this comment on a previous draft. OFM did agree and added "providers" to the definition. OFM still does not believe the other entities are appropriate to add to this definition, since the focus is on financial, and not health information. 	
2.	WAC 82-75-510(1)(b). Request that an exception be made for units of Washington local government.	2. This provision is governed by statute. OFM does not believe it has the authority to grant such an exception.	
3.	WAC 82-75-510(1)(c). Request that a definition for "IRB approval" be added.	 OFM does not agree that a definition needs to be added in the rules. 	
4.	WAC 82-75-520(2). Request that "insurer or payer" be deleted.	 OFM does not agree that these terms should be deleted. Those are the entities upon which this requirement applies, so deletion would cause confusion. 	
5.	WAC 82-75-520(3). Request clarification as to how the market share will be determined in order to apply this rule.	 OFM agrees that greater clarity will be needed in regards to how the market share determination will be made. OFM will be working on this process and will either memorialize it in a policy document or amend the rule. 	

Washington State Medical Association

The comments were provided for information purposes. No specific request for changes was made. OFM did review all the comments, which generally fell in the following categories:

- 1. Confusion as to the meaning, intent or application of certain provisions, especially as they relate to federal standards that apply to health care information or certain entities that maintain such information.
- 2. Confusion as to the use of the term proprietary financial information verses proprietary financial data.
- 3. Requests to see provisions that relate to provider contracts or other factors that are covered by other agreements.
- 4. Additional safeguards for a number of other sensitive or confidential data sets.

OFM disagrees with the need to make additional changes as to these areas or to cover areas not already included. The federal standards generally do not apply so to otherwise include them in the rules would be more confusing to those entities that do not need to follow them. In addition if an area is covered by a contractual agreement, OFM does not believe it is proper to include this area in the rules. Finally, the additional safeguards for other data is not necessary as that data is not being collected in the WA-APCD.

OFM does agree that there was an improper use of terms. OFM did change all references to "proprietary financial data" to "proprietary financial information."

Regence/Cambia Health Solutions

"We are supportive of the OFM moving forward with adopting the proposed changes in the CR-102"

No response needed.