December 1, 2016

TO:        Honorable Randi Becker, Chair
           Honorable Annette Cleveland, Ranking Member
           Senate Health Care Committee

           Honorable Eileen Cody, Chair
           Honorable Joe Schmick, Ranking Member
           House Health Care and Wellness Committee

FROM:      David Schumacher
           Director

SUBJECT:   WASHINGTON STATE ALL PAYER CLAIMS DATABASE REPORT

RCW 43.371.080 directs the Office of Financial Management (OFM) to report on the development and implementation of the all-payer healthcare claims database (WA-APCD). I am pleased to transmit this report to you.

If you have any questions, please contact Thea Mounts, WA-APCD Program Director at OFM, at (360) 902-0552.

cc:        Mich’il Needham, Senate Health Care Committee
           Alexa Silver, House Health Care and Wellness Committee
           Mandy Stahre, Office of Financial Management
           Thea Mounts, Office of Financial Management
Washington State
Statewide All-Payer Health Care Claims Database
Report to the Legislature

As required by RCW 43.371.080.

Office of Financial Management
Forecasting Division
December 2016
Executive summary

This is the first report of the Office of Financial Management’s (OFM) progress in establishing the state of Washington’s all-payer health care claims database (WA-APCD) as required in Chapter 43.371 RCW.

In 2014, the Legislature directed OFM in Section 10, Chapter 223, Laws of 2014 (House Bill 2572) to establish a statewide all-payer health care claims database to support transparent public reporting of health care information. OFM was charged with creating policy, providing oversight and competitively procuring the lead organization, which was tasked with coordinating and managing the database.

This report presents background on the legislation creating the WA-APCD; budget and cost for implementation and reporting; procurement history from 2015 through Oct. 5, 2016; details on the policy, guidelines, definitions and procedures development from 2014 through the present; technical progress of implementation, including quality assurance; and current project efforts. To date, major milestones of the WA-APCD include the successful procurement of the Center for Health Systems Effectiveness at Oregon Health and Sciences University as the lead organization and Onpoint Health Data as the data vendor, and the completion of phase 1 rule making and near completion of phase 2 rule making.

Over the next year, OFM will monitor progress of the WA-APCD implementation work plan and provide a report to the Legislature. OFM is learning about two issues highlighted during contract negotiations. First is the requirement in RCW 43.371.020(b) for the lead organization to apply to become a certified qualified entity (QE) by the Centers for Medicare & Medicaid Services (CMS). Accordingly, the lead organization will apply to become a QE, report to OFM its assessment of the limitations of using data obtained through the QE program and provide a recommendation of the best option for obtaining Medicare data. Second, the statute does not include a minimum threshold for the number of covered lives or minimum dollar amount processed in claims to determine eligibility requirements for data suppliers to report data to the WA-APCD. OFM is concerned that insurers covering few lives in the state may be unduly burdened by the requirements of reporting to the WA-APCD.

Introduction and background

In 2014, the Legislature directed OFM in Section 10, Chapter 223, Laws of 2014 (HB 2572) to establish a statewide all-payer health care claims database to improve health care price transparency to:

- Assist patients, providers and hospitals to make informed choices about care;
- Enable providers, hospitals and communities to improve by benchmarking their performance against that of others by focusing on best practice;
- Enable purchasers to identify value, build expectations into their purchasing strategy and reward improvements over time; and
- Promote competition based on quality and cost.

OFM is required in RCW 43.371.080 to submit a report to the Legislature by Dec. 1, 2016, that provides the status of the budget and cost, technical progress and work plan metrics for the database.
In establishing the WA-APCD, OFM was charged with creating rules, providing oversight and contracting with the lead organization, which was tasked with coordinating and managing the database. The lead organization’s responsibilities also include contracting with a data vendor; ensuring protection of the data; developing a financial sustainability plan, including fees for reports and data files; convening data release and data policy committees; and developing reports from the database, including reporting on the Common Measure Set for Health Care Quality and Cost.

Under the original statute, the WA-APCD was to include covered medical services claims, pharmacy claims, dental claims, member eligibility and enrollment data, and provider data with certain identifiers from Medicaid, the Public Employees Benefits program and the Washington Department of Labor and Industries. Commercial health insurance carriers were allowed to voluntarily submit claims data. Use of the data was limited by the restriction that no more than 25 percent of data in a report originate from a data supplier.

The 2015 Legislature amended the statute. Section 2, Chapter 246, Laws of 2015 required OFM to competitively procure for the lead organization, removed the 25-percent reporting restriction and mandated that all health insurance carriers operating in the state and all third-party administrators paying claims on behalf of plans operating in the state submit claims to the database. Self-funded plans can still voluntarily submit claims data.

**Budget and cost**

No state funding has been allocated for the implementation of the WA-APCD. The implementation is being funded with $1.9 million from the two-year, U.S. Department of Health and Human Services CMS Rate Review Cycle III grant to OFM. The Cycle III grant requires the lead organization for the WA-APCD to be a nonprofit or an academic institution. In 2014, OFM received a two-year CMS Rate Review Cycle IV grant, $700,000 of which will be used to produce data sets and reports available for free to the public and for sale. Both grants are currently in one-year, no-cost extension periods:

- Cycle IV grant original award period: Sept. 19, 2014–Sept. 18, 2016
- Cycle IV grant no-cost extension period: Sept. 19, 2016–Sept. 18, 2017

In addition, the Health Care Authority included $6.0 million in the CMS State Innovation Model grant for support of the WA-APCD. The Legislature appropriated $4.0 million of these funds in the 2015–17 biennial budget for OFM to use in support of the WA-APCD. OFM allocated $3.0 million for the lead organization and data vendor to use for improvements to the WA-APCD data collection and the production of the Washington State Common Measure Set for Health Care Quality and Cost quarterly reporting. The additional $1.0 million from the proviso has been set aside to conduct work that will be determined over the next year.

Under the law, the lead organization is required to sustain itself and the WA-APCD through charging of fees for data and data products, securing grants and/or other revenue. A sustainability plan will be submitted to OFM by the lead organization and updated regularly. OFM will assist in pursuing additional funding opportunities, as is possible.
Procurement

In 2015, OFM began development of the request for proposals (RFP) to procure a lead organization and data vendor. This RFP was released in October 2015 and closed in December 2015. Despite hearing from many interested vendors, OFM received no bids. Following the close of the RFP, OFM staff reached out to several vendors that had expressed interest to determine why they had not submitted proposals. Vendors identified several common areas of concern:

- The requirement for the lead organization to subcontract with a data vendor and be a nonprofit or academic institution.
- The requirement for the lead organization to assume the full responsibility for self-sustainability of the WA-APCD without an opportunity to determine system feasibility.
- The shortness of the grant funding timeline for implementing the system.

All-payer claims databases are complex, and the WA-APCD had several unique organizational and financial issues. OFM staff addressed these and other concerns in a second procurement that opened April 15, 2016.

For the second procurement, OFM adopted a three-phased approach. In Phase I, bidders were asked to submit written responses to questions about the bidder’s ability to meet administrative requirements, minimum mandatory qualifications and experience. Four bidders submitted responses in Phase I, three of which passed to Phase II. For Phase II, bidders were invited to an all-day, in-person session to describe their approach and strategy for implementing and operating the WA-APCD. Two bidders were invited to the third and final phase, which required the submission of their final written proposals.

The apparently successful bidder was announced July 27, 2016. The Center for Health Systems Effectiveness at Oregon Health and Sciences University (OHSU) was chosen as the lead organization, holding subcontracts with Onpoint Health Data as the data vendor and Forum One as the marketing and website developer. OHSU has been a leader in finding better ways to deliver health care through the effective use of data. It uses econometric and advanced analytic methods and large data sets, most prominently claims, to answer important health care delivery questions. Onpoint Health Data has four decades of experience designing, constructing, managing and analyzing a wide array of health care databases, including the development of the first multi-payer claims database, in Maine, in 1994. Onpoint Health Data has since implemented seven statewide databases. The WA-APCD contract was signed between OFM and OHSU on Oct. 5, 2016.

Rules

OFM has made significant progress in the development of rules required for establishing the WA-APCD (see Chapter 82-75 WAC). In July 2014, OFM initiated rule making by filing a pre-proposal statement of inquiry (commonly referred to as CR 101) and hosted a general information session to explain the rule-making process. That process was delayed, pending the outcome of the 2015 legislative session, to amend Chapter 43.371 RCW. On May 14, 2015, Gov. Inslee signed Senate Bill 5084 (Section 2, Chapter 246, Laws of 2015), which amended the WA-APCD provisions in Chapter 43.371 RCW related to definitions about data, reporting and pricing of products, responsibilities of the OFM and the lead organization, submission to the database and parameters for release of information.
Phase I rule making began in July 2015 and concluded January 2016, with rules effective Feb. 29, 2016. (OFM published background papers for each rule category and posted these on the WA-APCD website at: http://www.ofm.wa.gov/healthcare/pricetransparency.) The rules passed in this phase are:

- Definition of claims data including billed, allowed and paid amounts and such additional information as defined by the OFM director. Required by RCW 43.471.010(3).
- Definitions of claim and data files that data suppliers must submit to the database, including files for covered medical services, pharmacy claims and dental claims; member eligibility and enrollment data; and provider data with necessary identifiers. Required by RCW 43.371.070(1)(a).
- Deadlines for submission of claim files. Required by RCW 43.371.070(1)(b).
- Penalties for failure to submit claim files as required. Required by RCW 43.371.070(1)(c).

Phase II rule making began in February 2016, with the following rules scheduled to become effective December 2016:

- Procedures for data release. Required by RCW 43.371.070(1)(g).
- Reasons to decline a request for data. Required by RCW 43.371.050(2).

Phase III rule making began in October 2016. That process includes:

- An amendment to WAC 82-75-060 for the historical data time period because of the delay in procurement.
- Penalties associated with inappropriate disclosures or uses of direct patient identifiers, indirect patient identifiers and proprietary financial information.
- Procedures for ensuring that all data received from data suppliers are securely collected and stored in compliance with state and federal law.
- A format for the calculation and display of aggregate cost data consistent with the act that will prevent the disclosure or determination of proprietary financial information.
- Procedures for establishing appropriate fees.
- Procedures for ensuring compliance with state and federal privacy laws.

Additional rules may be developed as needed as more information is learned through WA-APCD development and implementation.

**Quality assurance**

The Office of the Chief Information Officer determined that the WA-APCD project required quality assurance. In the spring of 2016, OFM conducted a procurement, and contracted with Stellar Associates, LLC, to provide quality assurance services. Quality assurance reports are available on the website of the Office of the Chief Information Officer and are updated monthly. See Appendix A.

**Current efforts**

At the commencement of contract signing, work started immediately with the lead organization and data vendor reaching out to stakeholders and contacting data suppliers. The data vendor is drafting the data submission guide and preparing to onboard data suppliers.

Several issues were raised during contract negotiations and statement of work discussions. First, RCW 43.371.020(b) requires the lead organization to apply to be certified as a QE by CMS.
Accordingly, the lead organization will apply to become a QE and develop a better understanding of the limitations on the use of Medicare data as imposed by CMS for all QEs. The lead organization will provide OFM with its findings and a summary of the best option for meeting statutory requirements and accessing Medicare data. Second, in comparison with other state all-payer health care claims databases, the WA-APCD does not stipulate a threshold for the minimum number of covered lives or minimum dollar amount processed in claims to determine eligibility requirements for data suppliers to report data. OFM is concerned that smaller insurers in the state may be unduly burdened by the requirements of reporting to the WA-APCD. OFM will continue researching both these issues over the next year and keep the Legislature apprised of its findings.

**Work plan metrics**

In early October 2016, OFM signed a contract with OHSU to establish the WA-APCD. The contract is deliverables-based; dates for the completion of the deliverables are outlined in the work plan (see Appendix B). OFM will monitor OHSU’s progress on completing deliverables. While the entire work plan will be updated over the next year, OFM anticipates WA-APCD data and results becoming available in fall 2017.

**Conclusion**

OFM has completed procurement of the lead organization for development and implementation of the WA-APCD. Development of rules for definitions and processes for submitting claims have been passed and additional rules are being developed with stakeholder input. OFM will monitor activities and progress of the WA-APCD and prepare a report to the Legislature for December 2017.
Quality Assurance Report

Office of Financial Management

Washington All Payer Health Care Claims Database (APCD) Implementation

Quality Assurance Report

October 2016 Review Period
November 10, 2016

Mr. Marc Baldwin, Assistant Director
Office of Financial Management (OFM)
PO Box 43124
Olympia, WA 98504

Washington All Payer Health Care Database (APCD) Implementation Project
Quality Assurance Report
Reporting Period: October 2016

Dear Mr. Baldwin:

Stellar Associates, LLC is engaged to provide external quality assurance services for the Washington APCD Implementation Project. The attached report represents the quality assurance assessment findings and recommendations, and is based upon a review of project documentation, attendance at project meetings, the Steering Committee, meetings with project participants from the Oregon Health and Science University, and Onpoint during October 2016.

This assessment was conducted independently and contains the findings prepared after completion of the assessment. Our assessment of the APCD Project is based on our professional experience, judgment, and quality assurance methodology. It is intended to provide valuable independent insight into how well project management processes and activities are going within the APCD Project, identifying corrections that are being made or might be needed, anticipating problems before they occur, and ensuring business value is realized.

There are no new recommendations offered in this report. Project staff are working on implementation of Recommendation #1 but did not finish work on the stakeholder management plan. Please contact me if you have any questions.

Sincerely,

Julie Boyer, Principal
Stellar Associates, LLC

cc: Thea Mounts, OFM
    Christina McDougall, OFM
    Kathy Pickens Rucker, OCIO
The Washington Health Care All Payer Claims Database (WA-APCD) Project worked closely with staff from the Center for Health Systems Effectiveness (CHSE) of the Oregon Health and Science University (OHSU) to finalize the initial statement of work, after completing two months of contract negotiations.

The major deliverables identified within the Cycle III grant, which is one of the primary funding source for the WA-APCD, remain unchanged. The major deliverables are due by September 30, 2017, and are cited as:

- Provision of subject matter expertise, planning and design.
- Establishment and convening of advisory committees.
- Establishment of the data submission process.
- Establishment of the WA-APCD system and documentation.
- Collection and loading of historical claims data from submitters – group 1 suppliers.
- Establishment of data processes and criteria.
- Establishment of the WA-APCD website.
- CMS Medicare qualified entity application, impacts and recommendations.
- Report on security and privacy of the WA-APCD and claims data to the state of Washington Office of the Chief Information Officer.

The OHSU project manager is developing the overall WA-APCD work plan and detailed project schedule that is needed to determine when specific deliverables will be completed, what resources will be needed to work on each product, and what dependencies exist between the activities. The OHSU project manager needs to collaborate with the project managers from Onpoint and Forum One to incorporate major milestones from their individual schedules into the overall WA-APCD detailed project schedule. Until the work plan and detailed project schedule is completed, it is not possible to know when the major deliverables associated with the CMS Cycle III grant will be finished. It will be important for OHSU to establish an effective reporting system to monitor progress being made on the major deliverables by each organization.

As the lead organization, OHSU is responsible for leading project management activities for all of the WA-APCD activities defined in the contract. This role will require the OHSU staff to be thinking strategically about what needs to happen and when it needs to happen far enough in advance to assure that all of the activities associated with the WA-
APCD are ready when needed. During early October, the WA-APCD project director at OHSU began meeting with executives from some of the largest health care insurers in Washington, who will also be data suppliers to the database, to introduce himself, to explain the role of the lead organization, and to discuss the general approach to data collection by Onpoint, the WA-APCD data vendor. These meetings will continue at least through November. OHSU staff are also working on the WA-APCD committee structure, charters, and membership.

Onpoint posted the draft data submission guide for the WA-APCD on their website after receiving comments from the OFM. The data submission guide has also been distributed to all of the companies and individuals on the OFM’s APCD list serve who have been following the rule making process for Washington. Comments on the initial draft of the data submission guide are due to Onpoint in mid-November. Onpoint hopes to finalize the data submission guide about December 1, 2016.

Onpoint conducted the first onboarding webinar for WA-APCD data suppliers, with about 50 participants. The participants asked for clarification about the overall schedule for submittal of data, the length of time allowed to test their reporting, whether current month data would be included, who they were required to submit data about, format changes made to the common measure set, and whether they would have to submit data to the Washington Health Alliance as well as to Onpoint for the WA-APCD. Answers to some of the questions were provided during the webinar. Questions regarding the overall schedule, data privacy, and data security will be closely coordinated with the lead organization and the OFM. Onpoint will be documenting the questions and answers received from these webinars and distributing the answers to the participants for future reference.

Forum One conducted the initial work session on branding for the WA-APCD in Olympia. Additional sessions will occur in future months.

The OFM APCD staff met again with the Health Care Authority about the content of an inter-agency agreement to access the $3,000,000 appropriated from the CMS SIM Grant for the WA-APCD Project for enhancement to the data collection and the production of the Washington State Common Measure Set for Health Care Quality and Cost quarterly reporting. OHSU will also have $600,000 to develop and produce data sets and products. The OFM APCD and Health Care Authority staff are also discussing the planned transition of reporting of the common measure set in late 2017 from the Washington Health Alliance to OHSU. The WA-APCD leaders want the reporting
function for the common measure set to be smoothly transitioned without creating any disruption or delay. The inter-agency agreement has not been finalized between the two agencies as they work out the details related to the use of the funding, data collection and usage, and how quarterly reporting will be addressed.

**ASSESSMENT RECOMMENDATIONS**

There are no new recommendations offered to the APCD Project in this assessment. The OFM WA-APCD Project staff are developing the stakeholder management plan in close coordination with the CHSE and Onpoint staff. The plan will have to be updated regularly to reflect the ever changing nature of the messages and the relationships among the many stakeholders.
## QUALITY ASSURANCE (QA) RISK ASSESSMENT SUMMARY

<table>
<thead>
<tr>
<th>QA Assessment Element</th>
<th>Risk Status</th>
<th>Assessment Comments</th>
</tr>
</thead>
</table>
| Overall Project Health and Environment | Mod | ❖ The OFM’s WA-APCD managers and leads are in frequent contact and making every effort to keep each other apprised of events and issues as they arise in order to avoid any confusion or surprises. The project managers are meeting at least twice a week to discuss the status of the schedules that each is working on as well as other emerging issues.  
❖ The risk associated with the Overall Project Health and Environment remains moderate as the work plan and detailed project schedule are being developed to determine how best to complete the work required in the CMS Cycle III grant within the allowable time period. |
| Project Integration Management | Low | ❖ The OFM executive sponsor and program director reviewed and approved the revised project charter for the WA-APCD. The charter describes the objectives, names the person authorized to manage the project, identifies the person authorized to expend project resources, defines the governance model, identifies the Steering Committee members, names the lead organization and its sub-contractors, and documents high level assumptions and constraints. |
| Scope Management | Low | ❖ The scope of the project remains unchanged and includes:  
• Provision of subject matter expertise, planning and design.  
• Establishment and convening of advisory committees.  
• Establishment of the data submission process.  
• Establishment of the WA-APCD system and documentation.  
• Collection and loading of historical claims data from submitters – group 1 suppliers.  
• Establishment of data processes and criteria.  
• Establishment of the WA-APCD website.  
• CMS Medicare qualified entity application, impacts and recommendations. |
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<thead>
<tr>
<th>QA Assessment Element</th>
<th>Risk Status</th>
<th>Assessment Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time Management</td>
<td>Mod</td>
<td>• Report on security and privacy of the WA-APCD and claims data to the state of Washington Office of the Chief Information Officer.</td>
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<tr>
<td></td>
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<td>❖ The OFM’s WA-APCD staff submitted a revision to the investment plan extending the end date of the project to September 30, 2017. The request for extension was approved by the OCIO and posted on the OCIO dashboard.</td>
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<td></td>
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<td>❖ Project managers at OHSU, Onpoint, and Forum One are working together to prepare the overall work plan and detailed schedule for WA-APCD. This is one of the most important project management tools contained in the first statement of work and in the contract between the OFM and the OHSU. The staff are determining the specific deliverables that will be needed to meet contractual requirements produced by the OHSU and their sub-contractors.</td>
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<tr>
<td></td>
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<td>❖ The detailed work plan and schedule will document the assignment of an individual responsible for the production of each deliverable and the due date for each deliverable. Because of the compressed timeframe available for this work, the project managers will have to closely monitor the progress being made on each deliverable and establish effective status reporting tools to avoid falling behind schedule.</td>
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<td></td>
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<td>❖ The project managers from each organization are working collaboratively to develop the tools needed to manage the work, to identify resource contention issues, and to produce the agreed upon deliverables in a timely manner.</td>
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<td>❖ The risk associated with Time Management will trend upward as the weeks pass without an agreed upon work plan and schedule.</td>
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<tr>
<td>QA Assessment Element</td>
<td>Risk Status</td>
<td>Assessment Comments</td>
</tr>
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</table>
| Cost Management       | Mod         | ❖ The OFM’s APCD Project has an established budget for the Cycle III grant activities of just over $3.4 million. The budget includes $1.9 million planned for the initial contract with the CHSE. Expenditures recorded against this federal grant from October 2013 through September 2016 as $1,211,638, leaving $2,195,871 for 2017 costs.  
❖ The Steering Committee expects the CHSE to be able to accomplish all of its activities with the funding defined in the contract and contained within the current budget. This expectation cannot be validated until the detailed work plan and schedule is produced by the OHSU project manager and reviewed by the OFM staff.  
❖ The risk associated with Cost Management will continue to trend upward as the weeks pass without an agreed upon work plan and schedule that can be used to validate the costs associated with the WA-APCD. |
| Quality Management    | Low         | ❖ Metrics for the OHSU to achieve will be defined within the contract and the individual statements of work for the Washington APCD with the OFM. |
| Human Resource Management | Low     | ❖ There are no new activities or changes to report associated with this category. |
| Communications Management | Low      | ❖ The OFM’s WA-APCD rule-making process continues to progress smoothly. Comments received at the public meeting on September 29 were considered and incorporated. Final adoption of the rules will occur on November 1.  
❖ The new rules going into effect on November 1 cover:  
• Process for requests for data from the WA-APCD,  
• Reasons for the denial of a request, and |
<table>
<thead>
<tr>
<th>QA Assessment Element</th>
<th>Risk Status</th>
<th>Assessment Comments</th>
</tr>
</thead>
</table>
|                       |             | • Process for administrative review and appeal of a denial of a request.  
|                       |             | ❖ The next phase of rule-making for the WA-APCD is expected to cover:  
|                       |             | • Penalties,  
|                       |             | • Format for the calculation and display of aggregate cost data,  
|                       |             | • State and federal privacy laws compliance procedures,  
|                       |             | • Data collection and storage in compliance with state and federal security laws procedures,  
|                       |             | • Procedures for establishing appropriate fees, and  
|                       |             | • Encounter data.  
| Risk Management       | Low         | ❖ The project is waiting for the work plan and detailed schedule to arrive from OHSU to determine what risks might be changed due to the schedule or the associated costs. The risk register will be updated again to reflect the new information and shared with the Steering Committee who will discuss the mitigation activities associated with any of the documented risks.  
| Procurement Management| Low         | ❖ There are no new procurement processes anticipated for this phase of the project.  
|                       |             | ❖ Contract management activities occurring by the OFM began in October with the development of the first statement of work with the OHSU. The OFM will be monitoring the progress being made on the activities and products listed in the statement to determine how best to conduct contract management. Contract management activities can require intense oversight by the OFM if the due dates are being missed, the quality of the products is incomplete or poor, or products go undelivered. Intense oversight by the OFM would not be required if the activities are completed by the due date, status reports accurately describe the progress being made by all of the participants, and high quality products are delivered on time.  

Manager and leads working on the WA-APCD Project discuss stakeholder management during their regular meetings. The OHSU project director is already visiting executives in the largest health care insurers who are required to submit data to the Washington APCD. The meetings will continue through November.

Onpoint has had significant interaction with the health care insurers who participated in the onboarding webinar and are reviewing the data submission guide. Many of these stakeholders are waiting to hear back from Onpoint to get answers to their questions.

The executive sponsor and program manager in OFM briefed the OFM director about the status of the WA-APCD and the current policy issues. The executive sponsor and program manager are also in contact with executives and policy makers at the HCA. The OFM staff are hoping to clarify current policy issues that both organizations are involved with through discussions with their HCA counterparts. The more transparency that can be built into the collection, aggregation, computation, and use of the common measure set, the less confusion will be associated with the WA-APCD.
OFFICE OF FINANCIAL MANAGEMENT
WASHINGTON ALL PAYER HEALTH CLAIMS DATABASE IMPLEMENTATION
QUALITY ASSURANCE REPORT

PROJECT MILESTONE ASSESSMENT

The project milestone assessment focuses on key milestones or deliverables that were completed in the current reporting period.

<table>
<thead>
<tr>
<th>Milestone or Deliverable</th>
<th>QA Assessment</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>The OFM and OHSU staff have negotiated the statement of work for upcoming deliverables and products. The detailed work plan is under development by OHSU to determine when each of the products will be completed. Once the work plan is finished, we will update the milestone or deliverable chart to reflect the information.</td>
</tr>
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</table>

PROJECT BUDGET ASSESSMENT

APCD Project Budget Assessment as of September 30, 2016

<table>
<thead>
<tr>
<th></th>
<th>Actual Expenditures</th>
<th>Planned Expenditures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Budget</td>
<td></td>
<td>$3,409,053</td>
</tr>
<tr>
<td>Year 1 Actual Expenditures</td>
<td>$449,680</td>
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<tr>
<td>Year 2 Actual Expenditures</td>
<td>$496,189</td>
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</tr>
<tr>
<td>Year 3 Actual Expenditures through March 2016</td>
<td>$139,503</td>
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<tr>
<td>Actual Expenditures April 2016</td>
<td>$25,349</td>
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<tr>
<td>Actual Expenditures May 2016</td>
<td>$34,073</td>
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<td>Actual Expenditures June 2015</td>
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<tr>
<td>Actual Expenditures July 2016</td>
<td>$1,196</td>
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<td>Actual Expenditures August 2016</td>
<td>$19,129</td>
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<td>Actual Expenditures September 2016</td>
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<tr>
<td>Actual Expenditures to Date</td>
<td>$1,198,950</td>
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</tr>
<tr>
<td>Planned Year 4 Expenditures</td>
<td>$2,210,103</td>
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</tr>
<tr>
<td>Estimated Variance at Completion</td>
<td>-$1,550</td>
<td></td>
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</table>
## Cost Variances

<table>
<thead>
<tr>
<th>Expenditures for vendor contracts originally planned in 2016 have been delayed to 2017.</th>
</tr>
</thead>
<tbody>
<tr>
<td>The APCD Project has expended a total of $1,198,950 as of the end of September. The budget planned for the next year totals $2,210,103.</td>
</tr>
</tbody>
</table>
## RECOMMENDATION STATUS

<table>
<thead>
<tr>
<th>ID#/ Date Offered/ Current Status</th>
<th>Description</th>
<th>Quality Assurance Recommendation</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1 06/2016 Pending, work in progress</td>
<td>The project lacks a stakeholder management plan to guide their efforts for communication and meet the needs of key stakeholders.</td>
<td><em>The APCD Project Director should lead the development and implementation of a stakeholder management plan in order to understand and meet the needs of key stakeholders and increase the likelihood of success for the project.</em></td>
<td>Completion of the stakeholder management plan will benefit the project in multiple ways.</td>
</tr>
</tbody>
</table>
### SUMMARY OF MONTHLY QUALITY ASSURANCE RISK ASSESSMENTS

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Appendix B
Summary work plan for the Washington’s all-payer health care claims database.

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<tr>
<th>Activity</th>
<th>2016</th>
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<tr>
<td>Sign contract</td>
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<tr>
<td>Conduct stakeholder outreach</td>
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<tr>
<td>Begin onboarding of data suppliers</td>
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<td>Finalize data submission guide</td>
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<td>Begin phase 3 rule making</td>
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<tr>
<td>Establish data policy and data release advisory committees</td>
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<tr>
<td>Load historical claims data into WA-APCD system</td>
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<td>Create free and for sale data products from the WA-APCD</td>
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<td>Make available data products from the WA-APCD</td>
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<td>Publish common measure set results for 2017</td>
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<tr>
<td>Launch interactive WA-APCD website</td>
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<td>Send second report to Legislature</td>
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