| 1 | AN ACT relating to health care to provide for an all-payer claims database and |
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| 2 | making an appropriation therefor. |
| 3 | WHEREAS, the Centers for Medicare and Medicaid Services (CMS) found that |
| 4 | national health expenditures as a percentage of gross domestic product reached 19.7 |
| 5 | percent in 2020; and |
| 6 | WHEREAS, CMS has projected an increase in national health spending at an |
| 7 | average annual rate of 5.4 percent between 2019 and 2028; and |
| 8 | WHEREAS, all-payer claims databases collect health care claims, eligibility files, |
| 9 | and provider files, which are created at the point of service and detail what was provided, |
| 10 | who provided it, how much was charged, and how much was paid; and |
| 11 | WHEREAS, more than 30 states, in an attempt to support price transparency efforts |
| 12 | and make information more accessible for consumers, employers, researchers, and others, |
| 13 | have already established, are developing, or have a strong interest in developing all-payer |
| 14 | claims databases; and |
| 15 | WHEREAS, a 2018 joint report, entitled "Reforming America's Healthcare System |
| 16 | through Choice and Competition," was issued by the United States Department of Health |
| 17 | and Human Services, the United States Department of the Treasury, and the United States |
| 18 | Department of Labor; and |
| 19 | WHEREAS, the report recommended that states "build consumer-friendly websites |
| 20 | capable of displaying price information for the most common transactions, coordinate |
| 21 | their efforts on maximizing the utility of claims data," and simplify the process for |
| 22 | reporting data "using a standard reporting format"; and |
| 23 | WHEREAS, the continued increase in health care prices is a burden on Kentucky |
| 24 | households and consumers; |
| 25 | NOW, THEREFORE, |
| 26 | Be it enacted by the General Assembly of the Commonwealth of Kentucky: |

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→ SECTION 1. A NEW SECTION OF KRS CHAPTER 194A IS CREATED TO

| 1 | READ AS FOLLOWS: |
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| 2 | (1) As used in this section: |
| 3 | (a) ''APCD common data layout'' means the vetted data layout developed and |
| 4 | maintained through the All-Payer Claims Database (APCD) Council; and |
| 5 | (b) "Executive director" means the executive director of the Office of Data |
| 6 | Analytics. |
| 7 | (2) Within forty-five (45) days of the effective date of this Act, the executive director |
| 8 | shall appoint an advisory committee in accordance with subsection (3) of this |
| 9 | section to make recommendations regarding the creation of a framework and |
| 10 | implementation plan for a Kentucky all-payer claims database for the purpose of |
| 11 | facilitating the reporting of health care and health quality data that results in |
| 12 | transparent and public reporting of safety, quality, cost, and efficiency |
| 13 | information at all levels of health care. |
| 14 | (3) (a) The advisory committee shall be composed of the following members: |
| 15 | 1. A member of academia with experience in health care data and cost |
| 16 | efficiency research; |
| 17 | 2. A representative from the Kentucky Hospital Association; |
| 18 | 3. A representative from the Kentucky Medical Association; |
| 19 | 4. A representative from the Kentucky Pharmacists Association; |
| 20 | 5. A representative of self-insured employers; |
| 21 | 6. A representative of an organization that processes health insurance |
| 22 | claims or certain aspects of employee benefit plans for a health care |
| 23 | <u>payer;</u> |
| 24 | 7. A person with a demonstrated record of advocating on behalf of |
| 25 | health care consumers; and |
| 26 | 8. Two (2) representatives of health insurers, one (1) of whom shall |
| 27 | represent nonprofit insurers and one (1) of whom shall represent for- |

| 1 | | profit insurers. |
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| 2 | <u>(b)</u> | In addition to the members described in paragraph (a) of this subsection, |
| 3 | | the following persons, or their designees, shall serve as ex officio members |
| 4 | | of the advisory committee: |
| 5 | | 1. The executive director; |
| 6 | | 2. The commissioner of the Department of Insurance; |
| 7 | | 3. The executive director of the Commonwealth Office of Technology; |
| 8 | | 4. The commissioner of the Department of Employee Insurance; |
| 9 | | 5. The commissioner of the Department for Medicaid Services; and |
| 10 | | 6. The secretary of the Cabinet for Health and Family Services. |
| 11 | (4) The a | dvisory committee shall make recommendations that: |
| 12 | <u>(a)</u> | Include specific strategies to measure and collect data related to health care |
| 13 | | safety, quality, utilization, health outcomes, and cost; |
| 14 | <u>(b)</u> | Focus on data elements that foster quality improvements and peer group |
| 15 | | <u>comparisons;</u> |
| 16 | <u>(c)</u> | Facilitate value-based, cost-effective purchasing of health care services by |
| 17 | | public and private purchasers and consumers; |
| 18 | <u>(d)</u> | Result in usable and comparable information that allows public and private |
| 19 | | health care purchasers, consumers, and data analysts to identify and |
| 20 | | compare health plans, health insurers, health care facilities, and health |
| 21 | | care providers regarding the provision of safe, cost-effective, and high- |
| 22 | | quality health care services; |
| 23 | <u>(e)</u> | Use and build upon existing data collection standards and methods that |
| 24 | | establish and maintain the database in a cost-effective and efficient |
| 25 | | <u>manner;</u> |
| 26 | <u>(f)</u> | Incorporate and utilize claims, eligibility, and other publicly available data |
| 27 | | to the extent it is the most cost-effective method of collecting data to |

| 1 | | minimize the cost and administrative burden on data sources; |
|----|------------|--|
| 2 | <u>(g)</u> | Promote the inclusion of data on the uninsured; |
| 3 | <u>(h)</u> | Address the use of: |
| 4 | | 1. A master person identification process to enable matching members |
| 5 | | across health plans; and |
| 6 | | 2. The APCD common data layout; |
| 7 | <u>(i)</u> | Ensure the privacy and security of personal health information and other |
| 8 | | proprietary information related to the collection and release of data as |
| 9 | | required by state and federal law, including but not limited to the Health |
| 10 | | Insurance Portability and Accountability Act of 1996, Pub. L. No. 104-191, |
| 11 | | as amended; |
| 12 | <u>(j)</u> | Address ongoing oversight of the operations of an all-payer claims |
| 13 | | database, including where the database should be housed; and |
| 14 | <u>(k)</u> | Address the feasibility and advisability of working with all-payer claims |
| 15 | | databases in other states to establish a single application for access to data |
| 16 | | by authorized users across multiple states. |
| 17 | (5) (a) | The executive director shall seek and accept grants, or raise funds, from |
| 18 | | any available source, public or private, that the executive director |
| 19 | | determines will support the development, implementation, operation, and |
| 20 | | maintenance of a Kentucky all-payer claims database in accordance with |
| 21 | | this section. |
| 22 | <u>(b)</u> | The Kentucky all-payer claims database fund is hereby created in the State |
| 23 | | Treasury. All funds raised by the executive director pursuant to this |
| 24 | | subsection and any fees or fines collected under this section or Section 4 of |
| 25 | | this Act shall be deposited into the fund. Notwithstanding KRS 45.229, |
| 26 | | moneys in the fund not expended at the close of the fiscal year shall not |
| 27 | | lapse but shall be carried forward to the next fiscal year. Any interest |

| I | | earnings of the fund shall become part of the fund and shall not lapse. |
|----|-----------|---|
| 2 | <u>(c</u> | Moneys in the fund established in paragraph (b) of this subsection are |
| 3 | | hereby appropriated by the General Assembly for the purposes provided in |
| 4 | | paragraph (a) of this subsection, subject to the requirements of subsections |
| 5 | | (6) and (7) of this section. |
| 6 | (6) (a | If sufficient funding for the development, implementation, operation, and |
| 7 | | maintenance of a Kentucky all-payer claims database, as determined by the |
| 8 | | executive director, is not received within two (2) years from the date on |
| 9 | | which the first funds were deposited into the fund established in subsection |
| 10 | | (5)(b) of this section: |
| 11 | | 1. Any moneys in the fund shall be returned to the individual or entity |
| 12 | | that provided the funds; and |
| 13 | | 2. Any interest earnings of the fund shall revert to the general fund of |
| 14 | | the Commonwealth. |
| 15 | <u>(b</u> |) The Office of Data Analytics shall maintain records necessary to facilitate |
| 16 | | the return of funds described in this subsection. |
| 17 | (7) (a |) If sufficient funding for the development, implementation, operation, and |
| 18 | | maintenance of a Kentucky all-payer claims database, as determined by the |
| 19 | | executive director, is received: |
| 20 | | 1. The executive director shall develop, implement, operate, and |
| 21 | | maintain a Kentucky all-payer claims database in accordance with |
| 22 | | this section; and |
| 23 | | 2. The fund established in subsection (5)(b) of this section shall be |
| 24 | | available to the executive director to carry out subparagraph 1. of this |
| 25 | | paragraph. |
| 26 | <u>(b</u> |) The executive director shall: |
| 27 | | 1. Promulgate administrative regulations necessary to carry out this |
| | | |

| 1 | subsection, including but not limited to designating the: |
|----|--|
| 2 | a. Health care payers that shall be required to report health care |
| 3 | <u>claims data;</u> |
| 4 | b. Data elements to be collected by the database; |
| 5 | c. Reporting format and frequency of data submissions; and |
| 6 | d. Process for making data and reports available to the public, |
| 7 | including the establishment of any related data access fees which |
| 8 | shall be deposited into the fund established in subsection (5)(b) |
| 9 | of this section; and |
| 10 | 2. Seek to establish agreements: |
| 11 | a. For voluntary reporting of health care claims data from health |
| 12 | care payers that are not subject to mandatory reporting |
| 13 | requirements. If feasible, the executive director shall implement |
| 14 | the reporting format for self-insured group health plans |
| 15 | described in 29 U.S.C. 1191d, as amended; |
| 16 | b. With the federal Centers for Medicare and Medicaid Services to |
| 17 | obtain Medicare health care claims data; and |
| 18 | c. With all-payer claims databases in other states to establish a |
| 19 | single application for access to data by authorized users across |
| 20 | multiple states, if the executive director determines that the |
| 21 | agreements are feasible and beneficial for the operation of the |
| 22 | Kentucky all-payer claims database. |
| 23 | (8) The Kentucky all-payer claims database shall: |
| 24 | (a) Be available to: |
| 25 | 1. The public, in a form and manner that ensures the privacy and |
| 26 | security of personal health information as required by state and |
| 27 | federal law, as a resource to insurers, consumers, employers, |

| 1 | | providers, purchasers of health care, and state agencies to allow for |
|----|-----|--|
| 2 | | continuous review of health care utilization, expenditures, quality, and |
| 3 | | safety; and |
| 4 | | 2. Entities engaged in efforts to improve or benefit the health care system |
| 5 | | through research and analysis, subject to administrative regulations |
| 6 | | promulgated by the executive director; and |
| 7 | | (b) Present data in a manner that: |
| 8 | | 1. Allows for comparisons of: |
| 9 | | a. Geographic, demographic, and economic factors; and |
| 10 | | b. Institutional size; and |
| 11 | | 2. Is consumer-friendly. |
| 12 | | → Section 2. KRS 194A.101 is amended to read as follows: |
| 13 | (1) | The Office of Data Analytics is hereby created in the Office of the Secretary. The |
| 14 | | office shall: |
| 15 | | (a) Provide oversight and strategic direction for, and be responsible for the |
| 16 | | coordinating \underline{of} , the data analysis initiatives \underline{of} [for] the various departments |
| 17 | | that regulate health care and social services to ensure that policy is consistent |
| 18 | | with the long-term goals across the Commonwealth: and |
| 19 | | (b) Administer and implement Section 1 of this Act. |
| 20 | (2) | The office shall have the authority to review all data requests received by the |
| 21 | | cabinet from the public, review the requests for content to determine the cabinet's |
| 22 | | response, and approve the release of the requested information. The office shall |
| 23 | | review data analyses conducted by the departments within the cabinet to ensure the |
| 24 | | consistency, quality, and validity of the analysis prior to its use in operational and |
| 25 | | policy decisions. The office shall facilitate the process of data integration by |
| 26 | | initiating and maintaining data-sharing agreements in order to improve inter-agency |
| 27 | | and cross-cabinet collaboration |

1 (3) The Office of Data Analytics shall promulgate administrative regulations in accordance with KRS Chapter 13A to implement this section.

- 3 → Section 3. KRS 304.2-100 is amended to read as follows:
- 4 (1) The commissioner shall personally supervise the operations of the department.
- 5 (2) The commissioner shall examine and inquire into violations of this code, shall
- 6 enforce the provisions of this code with impartiality and shall execute the duties
- 7 imposed upon him or her by this code.
- 8 (3) The commissioner shall have the powers and authority expressly conferred upon
- 9 him or her by or reasonably implied from the provisions of this code.
- 10 (4) The commissioner may conduct such examinations and investigations of insurance
- matters, in addition to examinations and investigations expressly authorized, as the
- commissioner may deem proper upon reasonable and probable cause to determine
- whether any person has violated any provisions of this code or to secure information
- useful in the lawful administration of any such provision. The cost of such
- additional examinations and investigations shall be borne by the state.
- 16 (5) The commissioner may establish and maintain such branch offices in this state as
- may be reasonably required for the efficient administration of this code.
- 18 (6) The commissioner shall have such additional powers and duties as may be provided
- by other laws of this state.
- 20 (7) The commissioner shall assist any other state agencies the Office of Health Data
- 21 and Analytics] in carrying out Subtitle 17B of this chapter, [and] KRS 194A.099,
- 22 and Section 1 of this Act.
- → SECTION 4. A NEW SECTION OF SUBTITLE 99 OF KRS CHAPTER 304
- 24 IS CREATED TO READ AS FOLLOWS:
- 25 <u>The commissioner shall promulgate administrative regulations designating the</u>
- 26 assessment of a fine for any person that fails to comply with the reporting
- 27 requirements established for that person by administrative regulations promulgated

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- 1 under Section 1 of this Act. Any fines collected by the department under this section
- 2 shall be deposited into the Kentucky all-payer claims database fund established in
- 3 Section 1 of this Act.
- 4 → Section 5. In accordance with his or her authority under subsection (5) of
- 5 Section 1 of this Act, the executive director may make an application for a grant under 42
- 6 U.S.C. sec. 247d-11, as amended, in a manner and under the conditions described in that
- 7 section.
- Section 6. This Act may be cited as the Kentucky Transparency and Health Care
- 9 Pricing Act of 2023.