



GAAPCD
GEORGIA ALL-PAYER
CLAIMS DATABASE

Georgia All-Payer Claims Database

Advisory Committee Meeting

January 6th, 2025
2:00 pm to 3:00 pm

Welcome

E-mail Questions/Comments: apcd@opb.georgia.gov

Meeting Agenda

Topic	Presenter	Time
Opening Remarks	Elizabeth Holcomb, Chair	11:00 – 11:05
Operations Update	Elizabeth Holcomb, Chair	11:05 – 11:10
Project Status	Katlynn Sifre, OHSC	11:10 – 11:20
Data Access and Governance	Dr. Jon Duke, GTRI-CHAI	11:20 – 11:30
Analytics	Dr. Jon Duke, GTRI-CHAI	11:30 – 11:40
State agency engagement	Elizabeth Holcomb, Chair	11:40 – 11:45
Questions	Elizabeth Holcomb, Chair	11:45 – 12:00
Meeting Adjournment	Elizabeth Holcomb, Chair	12:00

Committee Roster

Members / Credentials	Statutory Position Titles
Elizabeth Holcomb (Chair): Director, Office of Health Strategy and Coordination	Office of Health Strategy and Coordination Director
Senator Ben Watson, M.D.: District 1 State Senator, Senate Appropriations Health & Human Development Subcommittee Chair	Senate Appropriations Health & Human Development Subcommittee Chair
Representative Darlene Taylor: District 173 State House Rep., House Appropriations Health Subcommittee Chair	House Appropriations Health Subcommittee Chair
Chad Purcell: Chief Technology Officer, Georgia Dept. of Community Health	Department of Community Health Designee
Crysty Odom: (Retired) St. Mary's Foundation Director, St. Mary's Health Care System	Representative of Health Care Philanthropy – Governor Appointee
Vacant	Office of Insurance and Safety Fire Commissioner Designee
Gregory Esper, MD: Chief Clinical Financial Officer, Emory Healthcare	Representative of Medical Providers – Lt. Governor Appointee
Jon Duke, MD: Director, Center for Health Analytics and Informatics	GTRI Center for Health Analytics and Informatics Director
Kathleen Toomey MD, MPH: Commissioner of the Department of Public Health, State Health Officer	Department of Public Health Designee
Matthew Hicks: Sr. VP of Corporate Development, Sellers Dorsey & Associates	Hospital Industry Representative – Governor Appointee
Rick Dunn: Director, Governor's Office of Planning and Budget	Office of Planning and Budget Director
Vacant	Insurance Industry Representative – Speaker's Office Appointee

Key Milestones

Milestone	Date	Status
Rules and Data Submission Guide Published	February 2023	Complete
Submitter Registration Deadline	March 2023	Complete
APCD Portal in Production	April 2023	Complete
Mandatory Submissions – Health & Pharmacy	June 1, 2023	Exceptions
Initial Mandatory Submissions – Dental	December 1, 2023	Complete
Initial Analytic Use Cases	January 2024	Complete
Last Historical Mandatory Submissions - Dental	May 2024	Complete
Data Application Release	July 2024	Complete
Payer Onboarding Completed	December 2024	Complete

Move to Operations

- The Advance Planning Document
 - Submitted by DCH to CMS on December 16, 2024.
 - We have moved our operations date to October 2025 to maximize our federal funding.

Project Status

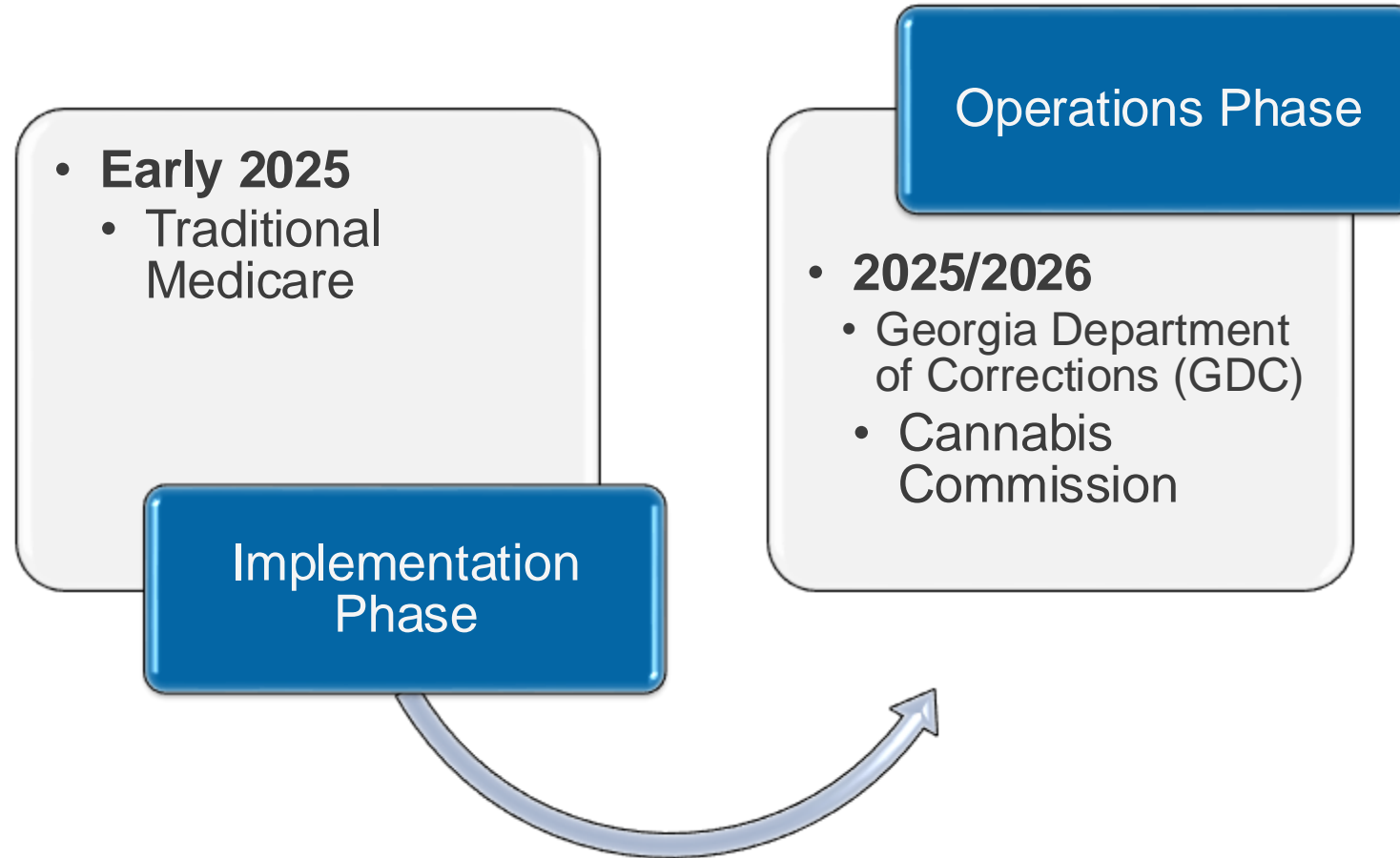
Katlynn Sifre, OHSC

Operation Updates

- Quarterly Extract

- Next extract is slated to be kicked off in December 2024
- Onpoint is working through the file, and data will be available in Jan 2025

Remaining Statutory Submitters



Data Access and Governance

Dr. Jon Duke, CHAI

Who can apply for non-public data?

Types of data requestors may include :

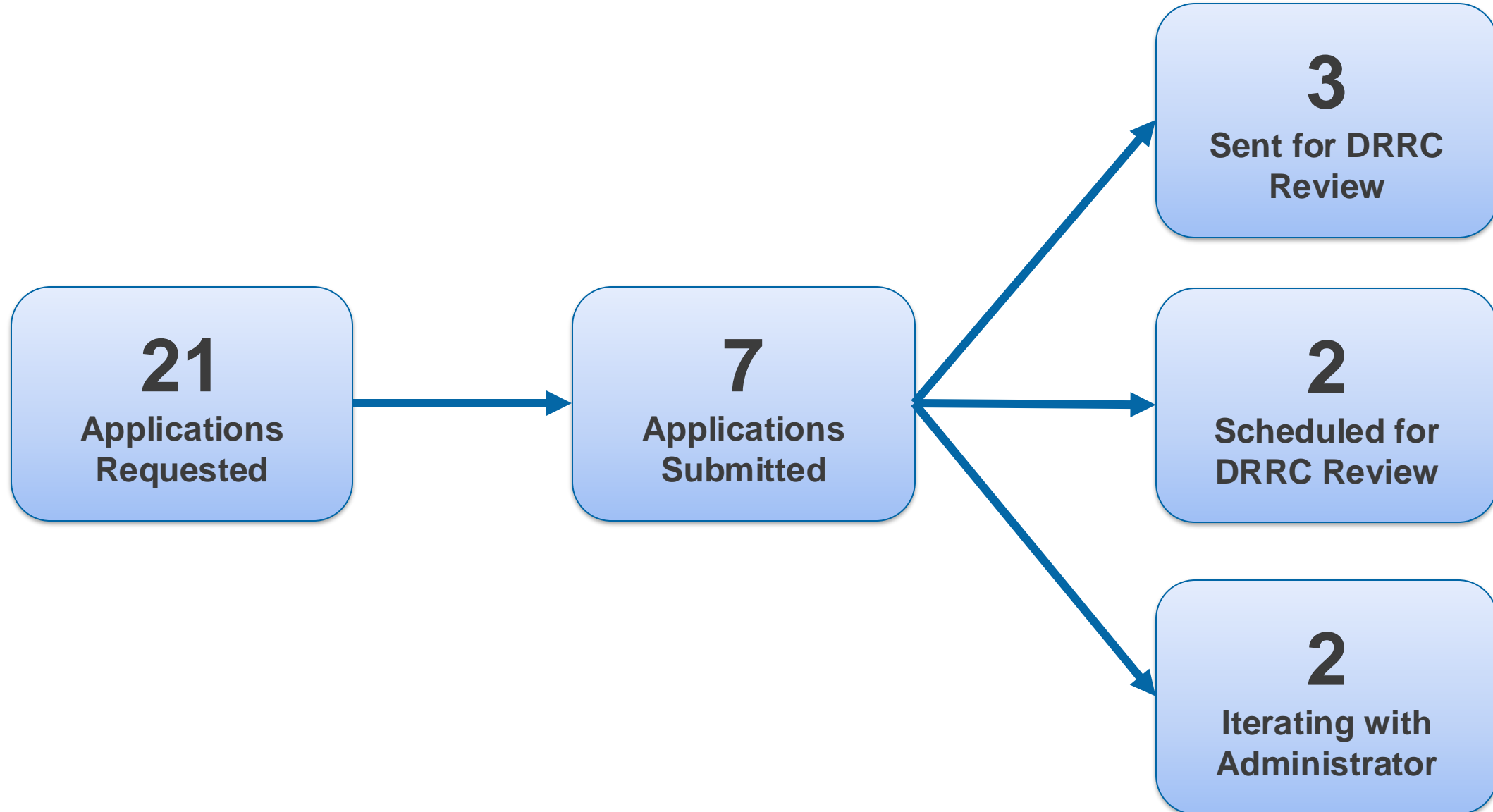
- Researchers
- Government entities
- Providers / health systems
- Payers
- Industry
- Employers

Data requesters must be affiliated with an organization

High-Level Requirements for Receiving Data

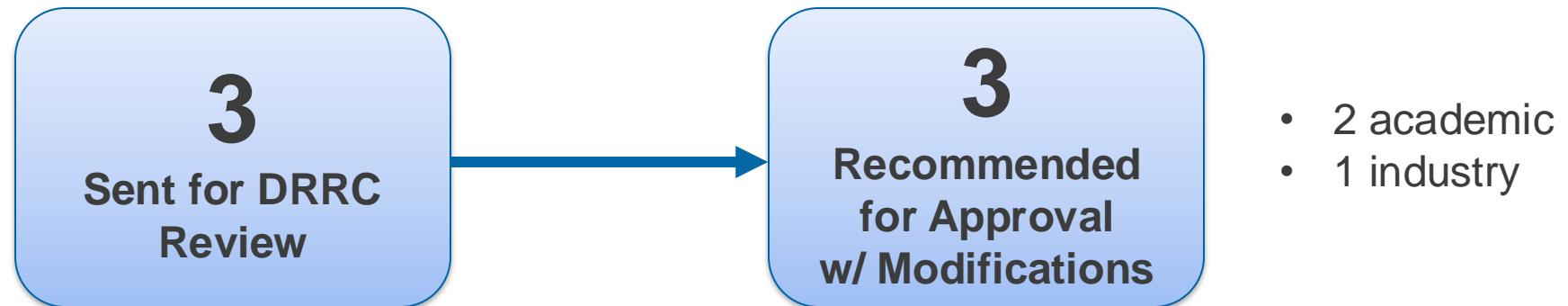
- Purpose
 - Request aligns with Georgia APCD objectives
 - Data use will benefit the citizens of Georgia
- Requester characteristics
 - Methodological expertise to analyze the data
 - Security infrastructure to protect data
- Requested data
 - Limited to minimum data necessary to answer a research question
 - Justification required for certain data elements

Application Stats



Data Release Review Committee

- At the monthly DRRC meeting, the committee has a chance to discuss the applications, meet with the requesters, and refine the final data release



- Modifications required by the committee included:
 - Date → Year
 - ZIP5 → ZIP3
 - Removal of certain sensitive data categories

Learning from our data requests

Cohort Selection

- Row-level data on a specific cohort
- Row-level data on all patients in the GA APCD



Cohort Selection

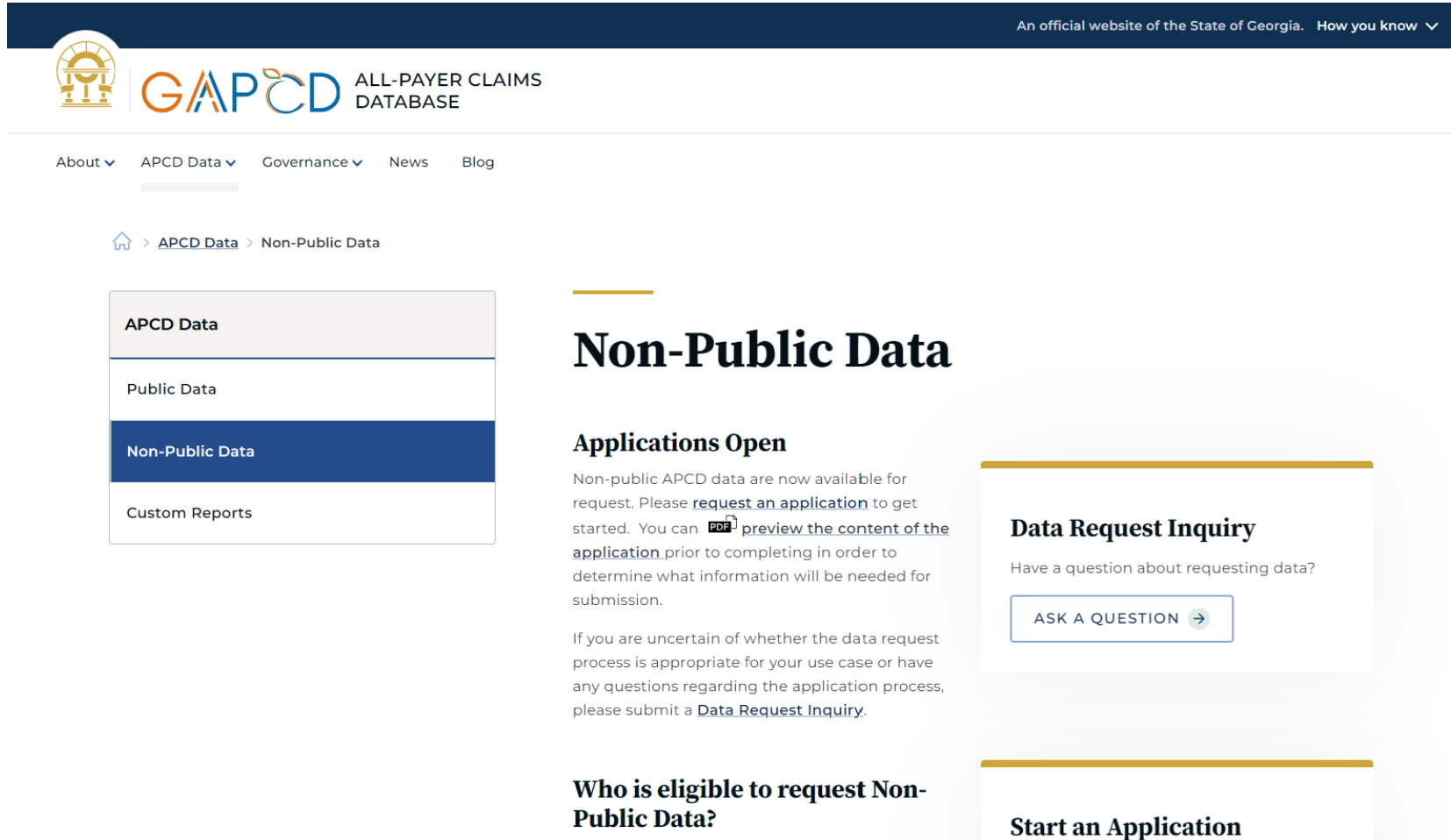
- Row-level data on a specific cohort
- Row-level cohort PLUS aggregate data on full GA APCD population
- Row-level data on all patients in the GA APCD

A Note for State Agencies


If you are a Georgia state agency interested in working with APCD data, please contact OHSC Director Elizabeth Holcomb at elizabeth.holcomb@opb.georgia.gov

All Other Requesters

Visit <https://apcd.georgia.gov/data-reports/non-public-data>



An official website of the State of Georgia. How you know ▾

 **GAPCD** ALL-PAYER CLAIMS DATABASE


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APCD Data
Public Data
Non-Public Data
Custom Reports

Non-Public Data

Applications Open

Non-public APCD data are now available for request. Please [request an application](#) to get started. You can  [preview the content of the application](#) prior to completing in order to determine what information will be needed for submission.

If you are uncertain of whether the data request process is appropriate for your use case or have any questions regarding the application process, please submit a [Data Request Inquiry](#).

Data Request Inquiry

Have a question about requesting data?

[ASK A QUESTION →](#)

Who is eligible to request Non-Public Data?

Start an Application

Analytics

Dr. Jon Duke, CHAI

APCD Patient Counts Q2 vs Q3 2024

CLASS	YEAR	Q2_PTS	Q3_PTS	% CHANGE
DENTAL	2018	2,580,219	3,647,591	41.4%
DENTAL	2019	2,614,882	3,685,229	40.9%
DENTAL	2020	3,003,365	4,007,852	33.4%
DENTAL	2021	3,422,207	4,368,519	27.7%
DENTAL	2022	3,780,229	4,515,013	19.4%
DENTAL	2023	4,169,023	4,593,866	10.2%
DENTAL	2024	3,603,176	4,652,853	29.1%
MEDICAL	2018	4,765,681	4,957,821	4.0%
MEDICAL	2019	4,832,744	5,001,194	3.5%
MEDICAL	2020	5,060,095	5,161,911	2.0%
MEDICAL	2021	5,585,123	5,658,749	1.3%
MEDICAL	2022	5,755,726	5,742,610	-0.2%
MEDICAL	2023	6,065,802	6,051,614	-0.2%
MEDICAL	2024	5,554,488	5,838,756	5.1%
PHARMACY	2018	5,096,311	6,118,375	20.1%
PHARMACY	2019	5,112,875	6,252,877	22.3%
PHARMACY	2020	5,252,319	6,414,590	22.1%
PHARMACY	2021	5,817,286	7,315,640	25.8%
PHARMACY	2022	6,158,571	7,659,777	24.4%
PHARMACY	2023	6,482,473	8,084,360	24.7%
PHARMACY	2024	7,449,897	7,791,520	4.6%

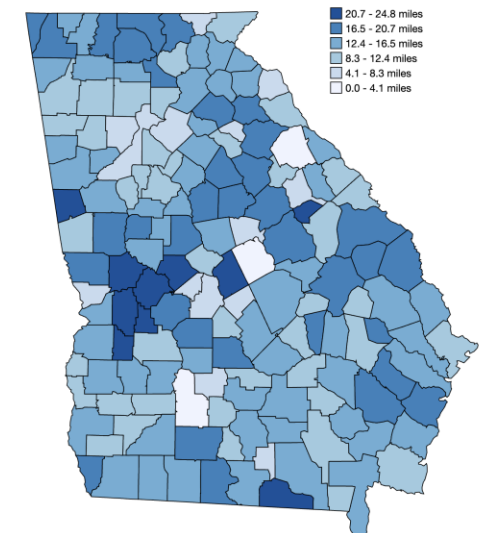
Use Case Updates

- Use Case work has begun!
- Today we will highlight work in progress on two use cases:
 - UC1 - Access to Care in Rural Areas
 - UC2 - Telemedicine Utilization and Cost

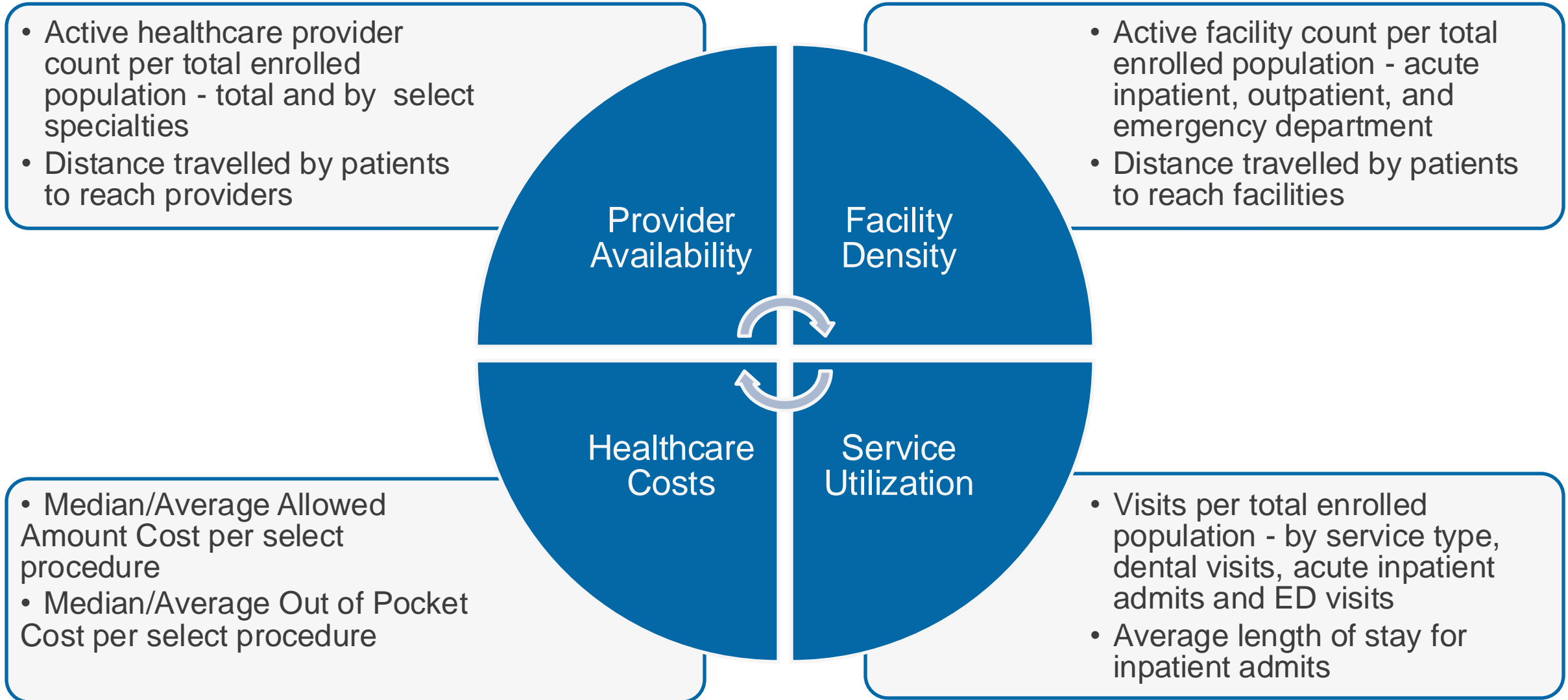
Use Case 1: Access to Care in Rural Areas

- The goal of this analysis is to **characterize access to care** for patients living in rural areas of Georgia, including service setting (e.g., inpatient, outpatient, and emergency care) and well as specialty (e.g., primary care, specialty care, maternity care)

- But **how do we define access to care?**



Use Case 1: Access to Care in Rural Areas

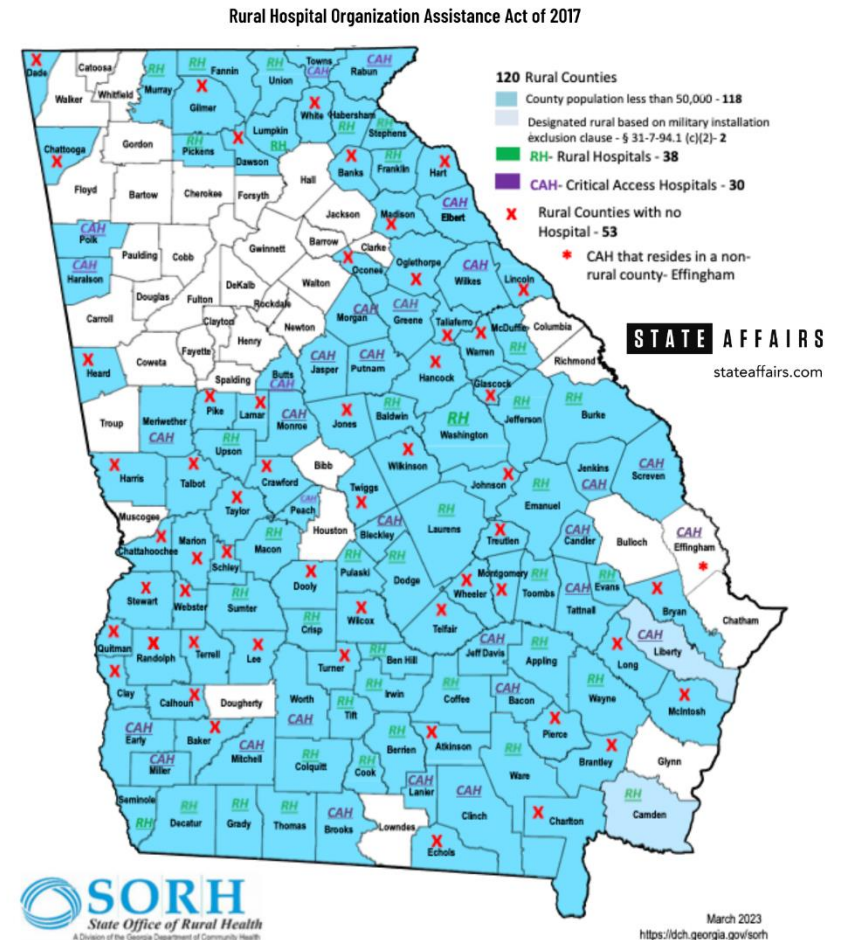


Use Case 1: Access to Care in Rural Areas

Impact of Closures

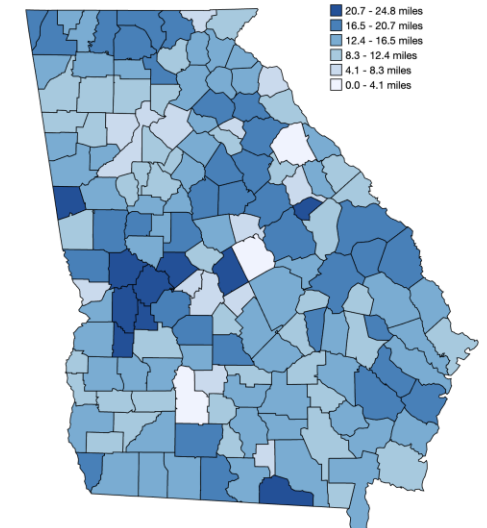
- Compare utilization and distance metrics of patients in surrounding counties pre- and post-rural hospital closures
- Goal is to complement excellent existing resources and move closer to real-time data on this critical topic

GEORGIA RURAL COUNTIES WITH HOSPITALS, CRITICAL ACCESS HOSPITALS, AND RURAL COUNTIES WITHOUT A HOSPITAL



Use Case 1: Access to Care in Rural Areas

- Expected Artifacts
 - Datasets
 - Dashboard
 - Infographics



Use Case 2: Telehealth Utilization and Cost

- The goal of this analysis is to characterize **utilization and costs of telehealth** in Georgia from 2018 to 2024.
- Results will be stratified by provider type, payer type, urban-rural status, SVI, and other factors.



Use Case 2: Telehealth Utilization and Cost

Telehealth Utilization

- Total telehealth visit counts by:
 - Year
 - Provider specialty and top procedures
 - Patient demographics, patient location, and county-level characteristics

Costs for top telehealth procedures

- Market share: Percent of total cost for a given procedure/specialty from telehealth visits
- Cost comparison: Average cost per visit with and without
- Distance-based savings: Average per-visit distance travelled
- Distance-based savings: Average per-visit cost savings based on distance and mileage costs



Use Case 2: Telehealth Utilization and Cost

- Some interesting pearls from early analysis
 - Georgia experienced a >2000% increase in telehealth visit claims 2019 to 2020
 - But disproportionately in metro areas (2700% increase in metro counties vs 1400% increase in rural counties)
 - A significant proportion (37%) were for mental health / behavioral health visits
 - Psychiatry visits account for 1.8% of in-person visits but 7.6% of telehealth visits

State Agency Engagement Update

Elizabeth Holcomb, OHSC

Questions?

Adjournment

Next Meeting – Targeting March 2025