ACHI
INSPIRING HEALTHY ACTS

ARKANSAS HEALTHCARE TRANSPARENCY INITIATIVE

The Arkansas Healthcare Transparency Initiative (HTI) was established by the Arkansas General Assembly in 2015. The HTI includes the state's all-payer claims database (APCD) – a large-scale database that contains medical, pharmacy, and dental claims and enrollment data and provider files — as well as vital record, disease registry, hospital discharge, emergency department, and medical marijuana data from the Arkansas Department of Health. This explainer provides information about the data elements available in the HTI and the date range covered for each. HTI data are available for approved analytic uses through the data-release process. Covered individual counts represent unique individuals across submitters based on study identifier, not source-specific member identifier.

NOTE: Covered individuals are counted across submitting entities instead of being aggregated by submitting entity.

	MEDICAL	PHARMACY	DENTAL	ENROLLMENT	PROVIDER
COMMERCIAL 3,882,736 covered individuals	✔ 2013-2023	✔ 2013-2023	✔ 2013-2023	✔ 2013-2023	✔ 2013-2023
ARKANSAS MEDICAID 1,945,815 covered individuals	✔ 2013-2023	✔ 2013-2023	✔ 2013-2023	✔ 2013-2023	✔ 2013-2023
MEDICARE 909,352 covered individuals	✔ 2013-2020	✔ 2013-2020	○	✔ 2013-2020	○
ARKANSAS STATE/ SCHOOL EMPLOYEES 352,726 covered individuals	✔ 2013-2023	✔ 2013-2023	○	✔ 2013-2023	○
ARKANSAS WORKERS' COMPENSATION 60,899 covered individuals	✔ 2013-2023	○	○	○	○

✔ ARKANSAS DEPARTMENT OF HEALTH DATA

BIRTH CERTIFICATE
362,305 children
2013-2022

EMERGENCY DEPARTMENT*
615,115 individuals
2013-2021

DEATH CERTIFICATE
334,161 individuals
2013-2022

CANCER REGISTRY
134,480 individuals
2013-2020

HOSPITAL DISCHARGE*
102,016 individuals
2013-2021

MEDICAL MARIJUANA CARDHOLDERS
100,617 individuals
Aug 2018-Sep 2020

* Self-pay and uninsured only

HTI DATA USES

INFORM — PRICE TRANSPARENCY
MONITOR — QUALITY IMPROVEMENT
— POPULATION HEALTH
STUDY — SERVICE UTILIZATION
SUPPORT — SYSTEM PERFORMANCE

ARKANSAS APCD All-Payer Claims Database

HEALTHCARE **T**RANSPARENCY **I**NITIATIVE

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ARKANSAS HTI DATA REQUEST PROCESS

The Arkansas HTI is now available for data requests through the Arkansas Center for Health Improvement (ACHI), the statutorily named administrator. The steps below will guide the requester through the process to request and receive data output. Currently, only datasets can be requested from the Arkansas HTI. Reports, analytics, counts, and data output that require custom data aggregation are not available at this time.

1 DATA REQUESTER SUBMITS DATA REQUEST
The data requester submits a data request form and data element list. This allows ACHI to ask additional questions and determine feasibility of the request.

2 ACHI WORKS WITH DATA REQUESTER
ACHI determines counts, identifies aggregation requirements (if applicable), and allows the data requester to make changes to the data request before initiating the approval process. A price estimate may be given at this time.

3 DATA REQUESTER COMPLETES DATA REQUEST
The completed data request includes a data management plan, in addition to the data request form and data element list. Data requests are reviewed based on the Arkansas HTI Data Request Monthly Review Schedule. A final price for the data will be provided.

4 DATA OVERSIGHT COMMITTEE REVIEWS
The committee reviews completed data requests. The committee may refer the data request to the Scientific Advisory Committee for academic research. The committee offers a recommendation to the Healthcare Transparency Initiative Board.

5 HEALTHCARE TRANSPARENCY INITIATIVE BOARD REVIEWS
The board reviews data requests on a quarterly basis and makes final recommendations to the Arkansas insurance commissioner. The board may recommend approval to provide access, may recommend approval subject to conditions or modifications, or may deny the request.

6 ARKANSAS INSURANCE COMMISSIONER MAKES DECISION ON DATA REQUEST
The Arkansas insurance commissioner may approve or deny data requests in whole or in part.

7 HEALTHCARE TRANSPARENCY INITIATIVE BOARD REVIEWS
Data request fulfillment begins after a data use agreement is signed with the Arkansas Insurance Department and a project plan is finalized. A Certification of Project Completion & Destruction or Retention of Data form must be completed at the end of the project term.
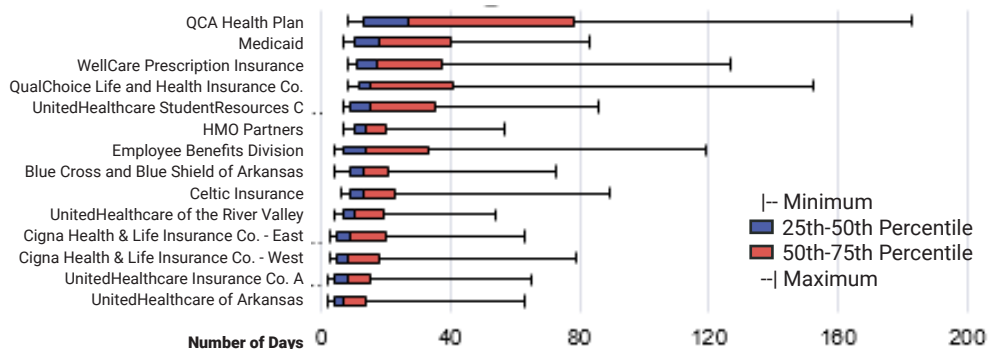
EXAMPLES OF APCD USES

SMOKING-ATTRIBUTABLE SPENDING

Medicaid
$795 Million

Private
$542 Million

Using the APCD, ACHI estimated smoking-attributable costs to Medicaid and private insurance for individuals aged 30-65.

Time to Paid Claim (Office): Oct. 2014-Sept. 2015

QCA Health Plan
Medicaid
WellCare Prescription Insurance
QualChoice Life and Health Insurance Co.
UnitedHealthcare StudentResources C . .
HMO Partners
Employee Benefits Division
Blue Cross and Blue Shield of Arkansas
Celtic Insurance
UnitedHealthcare of the River Valley
Cigna Health & Life Insurance Co. - East
Cigna Health & Life Insurance Co. - West
UnitedHealthcare Insurance Co. A
UnitedHealthcare of Arkansas

Number of Days 0 · 40 · 80 · 120 · 160 · 200

|-- Minimum
■ 25th-50th Percentile
■ 50th-75th Percentile
--| Maximum

APCD data were used to explore the payment aspect of revenue management — an assessment of the number of days until claims are paid in various healthcare settings. The graph above illustrates time to paid claim in an office setting.