62nd Legislature HB0573



AN ACT INCLUDING WITHIN THE INSURANCE COMMISSIONER'S DUTIES A REQUIREMENT TO STUDY CREATION OF A STATEWIDE ALL-PAYER, ALL-CLAIMS DATABASE FOR HEALTH CARE; REQUIRING USE OF AN ADVISORY COUNCIL; ESTABLISHING REPORTING REQUIREMENTS; AND PROVIDING AN EFFECTIVE DATE AND A TERMINATION DATE.

WHEREAS, comprehensive data about the quality and cost of health care allows state policymakers to monitor the success and efficiency of efforts to reduce health care costs and improve both health care quality and population health; and

WHEREAS, comprehensive health care data can show statewide variation in care, including whether evidence-based guidelines and best-practice clinical standards are being followed and how they affect cost and quality; and

WHEREAS, access to comparative data can help businesses to learn where they stand when compared with their peers with respect to the cost and covered services of health insurance policies; and

WHEREAS, comparative data provides consumers with information that they and their health care providers can use to make informed decisions about the effectiveness of treatments and the quality of care; and

WHEREAS, comparative data supports providers' efforts to design targeted quality improvement initiatives and to compare their own performance with that of their peers; and

WHEREAS, comprehensive health care data helps health care policymakers evaluate reform efforts and identify communities that provide cost-effective care so that successful initiatives can be identified and replicated; and

WHEREAS, other states have learned of the value of all-payer, all-claims health care databases and have implemented them to the benefit of their citizens while protecting the privacy rights of all individuals.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

Section 1. Review of health care insurance -- advisory council. (1) The insurance commissioner shall



convene an advisory council to review the costs, benefits, and procedural and technical requirements necessary to design, implement, and maintain a statewide all-payer, all-claims database for health care. The commissioner shall investigate, as provided in 33-1-311 within available funding, the following insurance matters related to health care:

- (a) specific strategies to measure and collect data related to health care safety and quality, utilization, health outcomes, and cost;
  - (b) data elements that foster quality improvements and peer group comparisons;
- (c) usable and comparable information that allows public and private health care purchasers, consumers, and data analysts to identify and compare health plans, health insurers, health care facilities, and health care providers regarding the provision of safe, cost-effective, high-quality health care services;
- (d) existing health care databases that may provide standards or methods useful in establishing or maintaining a database in a cost-effective and efficient manner;
- (e) elements necessary to measure safety, timeliness, effectiveness, efficiency, equity, privacy, and patient-centered approaches;
- (f) data regarding claims, eligibility requirements, and other publicly available data that may be used to minimize the cost and administrative burden of collecting data; and
- (g) any other health care information that the commissioner or the advisory council considers relevant to creation of a statewide all-payer, all-claims database for health care.
- (2) The insurance commissioner shall report by August 1, 2012, to the children, families, health, and human services interim committee on the results of the advisory council's review and any recommendations for action by the 63rd legislature.

Section 2. Effective date. [This act] is effective July 1, 2011.

Section 3. Termination. [This act] terminates December 31, 2012.

- END -



I hereby certify that the within bill,	
HB 0573, originated in the House.	
Chief Clerk of the House	
Charles of the House	
Speaker of the House	
Signed this	day
of	
President of the Senate	
Signed this	day
of	, 2011.



## HOUSE BILL NO. 573 INTRODUCED BY C. HUNTER

AN ACT INCLUDING WITHIN THE INSURANCE COMMISSIONER'S DUTIES A REQUIREMENT TO STUDY CREATION OF A STATEWIDE ALL-PAYER, ALL-CLAIMS DATABASE FOR HEALTH CARE; REQUIRING USE OF AN ADVISORY COUNCIL; ESTABLISHING REPORTING REQUIREMENTS; AND PROVIDING AN EFFECTIVE DATE AND A TERMINATION DATE.