A BILL FOR AN ACT

RELATING TO INSURANCE.

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

1	SECTIO	ON 1.	Article 2 of chapter 431, Hawaii Revised
2	Statutes, i	is an	mended by adding a new section to be appropriately
3	designated	and	to read as follows:
4	" <u>§</u> 431 :	:2-	De-identified claims data; disclosure. (a)
5	The commiss	sione	er shall annually provide claims data collected
6	pursuant to	sec	ctions 432:1- , 432:2- , and 432D- to a
7	large group	p pui	chaser at no charge if the large group purchaser
8	requests th	ne da	ata and is:
9	<u>(1)</u>	Able	to demonstrate its ability to comply with state
10	ā	and f	Tederal laws; and
11	(2)	Is ei	ther:
12	<u>(</u>	(A)	An employer with an enrollment of greater than
13			one thousand covered lives and at least five
14			hundred covered lives enrolled with the health
15			organization providing the information; or
16		(B)	A multiemployer trust with an enrollment of
17			greater than five hundred covered lives and at

1	least two hundred and fifty covered lives
2	enrolled with the health organization providing
3	the information.
4	(b) Nothing in this section shall be construed to prohibit
5	a health organization and large group purchaser from negotiating
6	the release of additional information not described in this
7	section.
8	(c) All disclosures of data to the large group purchaser
9	made pursuant to this section shall comply with the federal
10	Health Insurance Portability and Accountability Act of 1996
11	(Public Law 104-191) and the federal Health Information
12	Technology for Economic and Clinical Health Act, Title XIII of
13	the federal American Recovery and Reinvestment Act of 2009
14	(Public Law 111-5), and implementing regulations.
15	(d) All disclosures of data to the large group purchaser
16	made pursuant to this section shall comply with the
17	confidentiality requirements of section 432D-21.
18	(e) De-identified claims data provided to the commissioner
19	shall be deemed confidential information that shall not be made
20	public by the commissioner and shall be exempt from disclosure
21	under chapter 92F except as provided in this section.

1	(f) For purposes of this section, "health organization"
2	means a mutual benefit society governed by article 1 of chapter
3	432, fraternal benefit society governed by article 2 of chapter
4	432, or health care service plan or health maintenance
5	organization governed by chapter 432D."
6	SECTION 2. Article 1 of chapter 432, Hawaii Revised
7	Statutes, is amended by adding a new section to be appropriately
8	designated and to read as follows:
9	"§432:1- De-identified claims data; disclosure. (a)
10	Each society shall annually provide to the commissioner at no
11	charge claims data that a qualified statistician has determined
12	are de-identified so that the claims data does not identify or
13	does not provide a reasonable basis from which to identify an
14	individual; provided that if the statistician is unable to
15	determine that the data has been de-identified, then the data
16	that cannot be de-identified shall not be provided by the
17	society to the commissioner; provided further that a society may
18	provide the claims data in an aggregated form as necessary to
19	comply with section 431:2-

1	(b)	As an alternative to providing claims data required
2	pursuant	to subsection (a), the society shall provide, at no
3	charge to	the commissioner, all of the following:
4	<u>(1)</u>	De-identified data sufficient for a large group
5		purchaser to calculate the cost of obtaining similar
6		services from other health providers and evaluate
7		cost-effectiveness by service and disease category;
8	(2)	De-identified aggregated patient-level data on
9		demographics, prescribing, encounters, inpatient
10		services, outpatient services, and any other data that
11		is comparable to what is required of the society to
12		comply with risk adjustment, reinsurance, or risk
13		corridors pursuant to the federal Patient Protection
14		and Affordable Care Act (Public Law 111-148), as
15		amended by the federal Health Care and Education
16		Reconciliation Act of 2010 (Public Law 111-152), and
17		any rules, regulations, or guidance issued thereunder;
18		and
19	(3)	De-identified aggregated patient-level data used to
20		experience rate the large group, including diagnostic

1	and procedure coding and costs assigned to each
2	service that that society has available.
3	(b) The society shall obtain a formal determination from a
4	qualified statistician that the data provided pursuant to
5	subsection (a) has been de-identified so that the data does not
6	identify or does not provide a reasonable basis from which to
7	identify an individual. If the statistician is unable to
8	determine that the data has been de-identified, the society
9	shall not provide to the commissioner the data that cannot be
10	de-identified. The statistician shall document the formal
11	determination in writing and shall, upon request, provide the
12	protocol used for de-identification to the commissioner."
13	SECTION 3. Article 2 of chapter 432, Hawaii Revised
14	Statutes, is amended by adding a new section to be appropriately
15	designated and to read as follows:
16	"§432:2- De-identified claims data; disclosure. (a)
17	Each society shall annually provide to the commissioner at no
18	charge claims data that a qualified statistician has determined
19	are de-identified so that the claims data does not identify or
20	does not provide a reasonable basis from which to identify an
21	individual; provided that if the statistician is unable to

	decermine	that the data has been de-identified, then the data
2	that cann	ot be de-identified shall not be provided by the
3	society t	o the commissioner; provided further that a society may
4	provide t	he claims data in an aggregated form as necessary to
5	comply wi	th section 431:2
6	(b)	As an alternative to providing claims data required
7	pursuant	to subsection (a), the society shall provide, at no
8	charge to	the commissioner, all of the following:
9	(1)	De-identified data sufficient for a large group
10		purchaser to calculate the cost of obtaining similar
11		services from other health providers and evaluate
12		cost-effectiveness by service and disease category;
13	(2)	De-identified aggregated patient-level data on
14		demographics, prescribing, encounters, inpatient
15		services, outpatient services, and any other data that
16		is comparable to what is required of the society to
17		comply with risk adjustment, reinsurance, or risk
18		corridors pursuant to the federal Patient Protection
19		and Affordable Care Act (Public Law 111-148), as
20		amended by the federal Health Care and Education
21		Reconciliation Act of 2010 (Public Law 111-152), and

1		any rules, regulations, or guidance issued thereunder;
2		<u>and</u> .
3	(3)	De-identified aggregated patient-level data used to
4		experience rate the large group, including diagnostic
5		and procedure coding and costs assigned to each
6		service that that society has available.
7	(b)	The society shall obtain a formal determination from a
8	qualified	statistician that the data provided pursuant to this
9	subsectio	n have been de-identified so that the data does not
10	identify	or does not provide a reasonable basis from which to
11	identify	an individual. If the statistician is unable to
12	determine	that the data has been de-identified, the society
13	shall not	provide to the commissioner the data that cannot be
14	de-identi	fied. The statistician shall document the formal
15	determina	tion in writing and shall, upon request, provide the
16	protocol	used for de-identification to the commissioner."
17	SECT	ION 4. Chapter 432D, Hawaii Revised Statutes, is
18	amended b	y adding a new section to be appropriately designated
19	and to re	ad as follows:
20	¹¹ <u>§43</u>	2D- De-identified claims data; disclosure. (a)
21	Each heal	th maintenance organization shall annually provide to

1	the commissioner at no charge claims data that a qualified
2	statistician has determined are de-identified so that the claims
3	data does not identify or does not provide a reasonable basis
4	from which to identify an individual; provided that if the
5	statistician is unable to determine that the data has been de-
6	identified, then the data that cannot be de-identified shall not
7	be provided by the health maintenance organization to the
8	commissioner; provided further that a health maintenance
9	organization may provide the claims data in an aggregated form
10	as necessary to comply with section 431:2
11	(b) As an alternative to providing claims data required
12	oursuant to subsection (a), the health maintenance organization
13	shall provide, at no charge to the commissioner, all of the
14	Eollowing:
15	(1) De-identified data sufficient for a large group
16	purchaser to calculate the cost of obtaining similar
17	services from other health providers and evaluate
18	cost-effectiveness by service and disease category;
19	(2) De-identified aggregated patient-level data on
20	demographics, prescribing, encounters, inpatient
21	services, outpatient services, and any other data that

T		is comparable to what is required of the health
2		maintenance organization to comply with risk
3		adjustment, reinsurance, or risk corridors pursuant to
4		the federal Patient Protection and Affordable Care Act
5		(Public Law 111-148), as amended by the federal Health
6		Care and Education Reconciliation Act of 2010 (Public
7		Law 111-152), and any rules, regulations, or guidance
8		issued thereunder; and
9	(3)	De-identified aggregated patient-level data used to
10		experience rate the large group, including diagnostic
11		and procedure coding and costs assigned to each
12		service that that health maintenance organization has
13		available.
14	(b)	The health maintenance organization shall obtain a
15	formal de	termination from a qualified statistician that the data
16	provided p	oursuant to this subsection have been de-identified so
17	that the	data does not identify or does not provide a reasonable
18	basis from	m which to identify an individual. If the statistician
19	is unable	to determine that the data has been de-identified, the
20	health ma	intenance organization shall not provide to the
21	commission	ner the data that cannot be de-identified. The

1	SCACISCIC	Tail Shall document the formal determination in writing
2	and shall	, upon request, provide the protocol used for de-
3	identific	ation to the commissioner."
4	SECT	ION 5. Section 92F-13, Hawaii Revised Statutes, is
5	amended to	o read as follows:
6	"§92:	F-13 Government records; exceptions to general rule.
7	This part	shall not require disclosure of:
8	(1)	Government records which, if disclosed, would
9		constitute a clearly unwarranted invasion of personal
10		privacy;
11	(2)	Government records pertaining to the prosecution or
12		defense of any judicial or quasi-judicial action to
13		which the State or any county is or may be a party, to
14		the extent that such records would not be
15		discoverable;
16	(3)	Government records that, by their nature, must be
17		confidential in order for the government to avoid the
18		frustration of a legitimate government function;
19	(4)	Government records which, pursuant to state or federal
20		law including an order of any state or federal court,
21		are protected from disclosure; [and]

1	(5)	Inchoate and draft working papers of legislative
2		committees including budget worksheets and unfiled
.3		committee reports; work product; records or
4		transcripts of an investigating committee of the
5		legislature which are closed by rules adopted pursuant
6		to section 21-4 and the personal files of members of
7		the legislature[+]; and
8	<u>(6)</u>	De-identified claims data provided to the insurance
9		commissioner pursuant to articles 1 and 2 of chapter
10		432, and chapter 432D, except as provided in those
11		sections."
12	SECT	ION 6. Section 432D-21, Hawaii Revised Statutes, is
13	amended t	o read as follows:
14	"[+]	§432D-21[+] Confidentiality of medical information.
15	(a) Any	data or information pertaining to the diagnosis,
16	treatment	, or health of any enrollee or applicant obtained from
17	such pers	on or from any provider by any health maintenance
18	organizat	ion shall be held in confidence and shall not be
19	disclosed	to any person except to the extent that it may be
20	necessary	to carry out the purposes of this chapter, upon the
21	express c	onsent of the enrollee or applicant, pursuant to



- 1 statute or court order for the production of evidence or the
- 2 discovery thereof, or in the event of a claim or litigation
- 3 between such person and the health maintenance organization
- 4 wherein such data or information is pertinent. A health
- 5 maintenance organization shall be entitled to claim any
- 6 statutory privileges against disclosure which the provider who
- 7 furnished the information to the health maintenance organization
- 8 is entitled to claim.
- 9 (b) Nothing in this section shall prohibit a health
- 10 maintenance organization from releasing relevant information
- 11 described in this section for the purposes set forth in section
- 12 432D- ."
- 13 SECTION 7. Statutory material to be repealed is bracketed
- 14 and stricken. New statutory material is underscored.
- 15 SECTION 8. This Act shall take effect on July 1, 2015.

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INTRODUCED BY:

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Report Title:

Insurance; Health Organizations; De-identified Claims Data;
Disclosure

Description:

Requires a health organization to annually disclose deidentified claims data to Insurance Commissioner. Requires Insurance Commissioner to annually disclose de-identified claims data to a large group purchaser upon request. Exempts deidentified claims data from public disclosure except as provided. Makes conforming amendments.

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.