Office of Health Analytics
All Payer All Claims Reporting Program

The Oregon State Legislature established the All Payer All Claims Reporting Program (APAC) in 2009 as a tool to measure health care costs, quality, and utilization in Oregon. An integral component of the state's ongoing health care improvement efforts, APAC provides access to timely and reliable data essential to improve quality, reduce costs, and promote transparency.

The purpose of the APAC program as described in statute (ORS 442.466) includes:

- Allowing health care policymakers to make informed choices
- Improving the quality and affordability of health care and health care coverage
- Assisting OHA in furthering health policies expressed by the Legislature
- Comparing the costs and effectiveness of treatment settings and approaches
- Providing information to consumers and purchasers of health care

Annually from 2011 to 2016, APAC collected 78-98 million claims, which represents 3.4-3.9 million people (87%-97% of the Oregon population). APAC includes medical and pharmacy claims and payments, member demographics and enrollment, billed premiums and provider information reported by payers. Mandatory reporters to APAC include commercial insurers and third-party administrators with 5,000 or more covered lives, Medicare Advantage, Medicare Part D, pharmacy benefit management organizations, dual eligible special needs plans, Medicaid Coordinated Care Organizations (CCO), Oregon health insurance exchange, PEBB and OEBB plans. APAC data is currently reported by 90 mandatory reporters, as well as OHA (for Medicaid/OHP) and Medicare.

Some claims are not reported to APAC. Accident, vision, dental, disability, hospital indemnity, long-term care, Medicare supplemental, disease specific, stop-loss, student health, corrections or worker compensation plans are excluded. Also, payers are not required to submit data for self-insured plans exempt from state insurance regulation.

APAC data are subject to the federal Health Insurance Portability and Accountability Act (HIPAA), so data release is restricted to protect confidentiality. Data are routinely used by OHA, the Department of Consumer and Business Services and others, including researchers and those seeking to improve health care operations or availability. See more information on use of APAC data in the APAC Use Cases.

Contact us at apac.admin@dhsoha.state.or.us and find additional information at http://www.oregon.gov/oha/HPA/ANALYTICS/Pages/All-Payer-All-Claims.aspx.

May 25, 2018