What are the most expensive health care procedures in Minnesota? Where are the best opportunities to negotiate lower prices or achieve more competitive contract agreements? Where should your employees go to get more value from each health care dollar?

A new series of reports that focuses on variation in health care prices for common treatments and procedures in Minnesota can help answer these and other questions.

To offer feedback or share ideas for new reports, or to find out more about how self-insured employers can safely contribute de-identified health care data to the MN APCD, email the Minnesota Department of Health at health.apcd@state.mn.us.

Protecting individual privacy in the MN APCD is of paramount importance. All identifying patient and provider data is de-identified and encrypted before it leaves the data submitter site and is sent to the MN APCD.

The MN APCD has been certified as a Qualified Entity by the Centers for Medicare & Medicaid Services (CMS).

For further information about the MN APCD:
Online: www.health.state.mn.us/healthreform/allpayer
Email: health.apcd@state.mn.us
As you and your partners shape your company’s health benefits to improve and protect employee health at the best value, why not take advantage of evidence from the most robust data source available in Minnesota?

Now available for your use is the first in a series of new reports designed and prioritized by many large employers, and reflecting insights based on care provided to more than 4.3 million people in Minnesota – the largest dataset of its kind.

The first wave of reports will focus on variation in actual prices paid for health care in Minnesota for childbirth, heart procedures, joint replacement, and other surgeries and procedures.

Data in the MN APCD reflect monthly care provided to more than 4.3 million people in Minnesota.

From this series of reports you will be able to:

- Discover how the actual amounts paid (case prices) vary between and even within hospitals for specific treatments
- Bring these pricing data along with quality results into negotiations to discuss the implications for the overall value of care for your employees
- Get more value out of your in-house data, by being able to compare them with aggregated state averages and highest and lowest cost estimates

Other analyses that have been done include pharmaceutical spending and use, potentially preventable health care events, and treatment for chronic conditions. Possibilities for future reports are wide open.

These analyses and reports come from the Minnesota All Payer Claims Database (MN APCD), a dataset of health care claims from private and public payers, reflecting the care provided to about 80 percent of the state’s population. More than 100 entities contribute data to the MN APCD, including many self-insured employers, plus commercial health plans, third-party administrators, Medicaid and Medicare. All self-insured employers are encouraged to contribute de-identified data to the MN APCD as well, through the same encrypted and secure process already used by all health plans in the state.

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"This is eye-opening information for the purchasers of health care. Employers have long suspected that there is a great deal of variation in both the quality and the cost of health care, but to be able to see the actual numbers provides them an opportunity to make better purchasing decisions. Employers can also help employees and their family members identify and access more affordable care."

Carolyn Pare
MN Health Action Group

"We were really pleased to work with employers on this project. We hope this is just the start of future collaborations and ongoing support for using the Minnesota All Payer Claims Database to make informed decisions about health care spending."

Acting Commissioner Daniel L. Pollock
Minnesota Department of Health

The MN APCD is the most robust dataset in Minnesota, with more than 100 entities contributing data.