Robert Wood Johnson Foundation

AcademyHealth

Serif Health Price Transparency Data Description

This is supporting information for the 2023 Health Data for Action (HD4A) Call for Proposals. To apply, or for more information about the funding opportunity, please visit **www.rwjf.org/cfp/hd4a4**.

Under the 2023 Call for Proposals, Serif Health provides access to a national repository of Transparency in Coverage (TiC) price transparency data. TiC data consists of negotiated rate data between insurance payers and in-network providers for commercial fully-insured, self-insured, and marketplace insurance plans publicly posted by payers as machine readable files (MRF), updated monthly.

Transparency in Coverage data has a standardized JavaScript Object Notation (JSON) schema defined by the Centers for Medicare & Medicaid Services (CMS); Serif Health makes the data more easily accessible by aggregating data across payers and converting the JSON to a simplified columnar format. The complete aggregated dataset contains TiC postings for 135 payers and over 400 unique plan networks across all fifty states, covering approximately 2.5 million provider entities. Plans and networks available represent over 100 million covered lives.

However, given the significant data volumes and file sizes of the MRF data, researchers should consider limiting their proposal to a single state or geographic region (e.g., Washington, Texas, Pacific Northwest, etc.) or focusing on a specific set of procedure codes or taxonomic specialties. Reimbursement rates for procedures (defined by CPT/HCPCS, DRG, and/or Revenue Codes) are tied to specific organizations and providers by their corresponding EINs and NPI numbers.

The data element dictionary has additional information on each of the elements included in the dataset. The dataset only contains contracted billing and rate data. It does not contain any patient diagnosis, utilization, or volumes data.

There are no restrictions on joining the data to outside data sources.

For HD4A proposals, Serif Health will license data directly to academic institutions or research-focused organizations. Successful applicants are required to complete a Research Data Services Agreement granting access to the Serif Health data for twelve (12) months following file delivery. At the end of 12 months, successful applicants will have the option to renew their data license at current rates (at cost to the researcher)

Serif Health data can support a broad range of topics, including, but not limited to, the following:

- Cross-market comparison of contracted rates and prices for identical services within and across payers
- Negotiated rate dispersion for similar providers in a given market across payers
- Network density, gaps, and access by market, across different provider taxonomy or facility types
- Research joining contracted reimbursement rate data with provider quality/performance, and claims data to assess:
  - Network performance across payers/markets
  - Evaluate relationships between cost and quality
  - Investigate unit costs (contracted rates) vs. total cost of care
- Evaluate commercial contract pricing vs. Medicare/Medicaid rates
- Investigate fee for service pricing vs. value-based pricing (if value-based data is available to researcher)

Data Dictionary: The data dictionary is available **here.**