

HEALTH CARE DATA METHODOLOGIES

Brief comparison of Data Sources used for Oregon and National Trends

Introduction

The Oregon Health Authority published a report in July 2022 titled [Health Care Cost Trends in Oregon](#). The report shows among many things that total per person health care costs in Oregon were lower than the national average. See the graph to the right.

A single data source comparing per person health care spending in Oregon and the U.S. was not available at the time of publication. Therefore, two different data sources were used: Oregon's All Payer All Claims (APAC) database and the National Health Expenditure Accounts (NHEA).

This document compares the two different data sources.

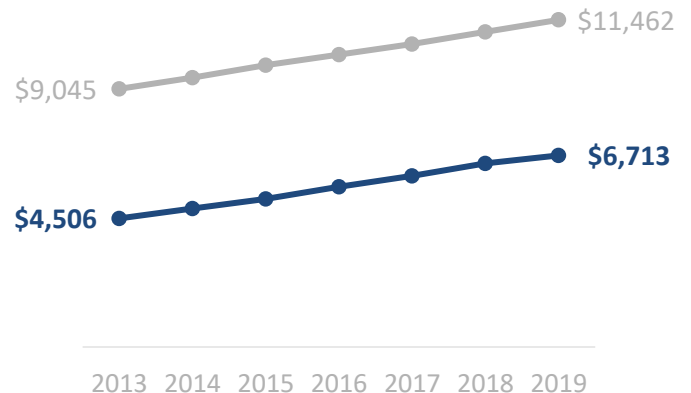
Oregon's All Payer All Claims Database

[APAC](#) is a database of the administrative health care data of Oregon's insured populations. It was established in 2009 through [House Bill 2009](#). The database is sourced from mandatory reporters, which includes commercial insurance companies and licensed third-party administrators (TPAs) with 5,000 or more covered lives in Oregon, along with all pharmacy benefit managers (PBMs) in Oregon, all coordinated care organizations (CCOs) in Oregon, any payers with a dual eligible special needs plan (SNP) in Oregon, payers that participate in Oregon's health insurance exchange, and all insurers providing group health insurance plans to public employees and Oregon educators (PEBB and OEGB). Medicare data are also incorporated into the APAC database.

National Health Expenditure Accounts

Since 1960, the NHEA provides the nation's official estimate of health care spending. The U.S. Center for Medicare and Medicaid Services creates the estimates, which tracks the total dollars spent on health care goods and services, the organizations that utilize those goods and services in all US states, along with the cost and development of property, plant and equipment for health care services and their facilities.

\$ Per person health care costs **in Oregon** are lower than national average.



The following table presents some key differences between the type of data collected in APAC and the NHEA. There are many types of services and spending that are included in the NHEA data but not Oregon’s APAC, which helps explain why the U.S. spending total is higher than Oregon’s spending total, as shown in the first graph.

Payers and Programs Included	Oregon’s APAC	National Health Expenditure Accounts
Health care paid for by commercial health insurance carriers, Medicaid, or Medicare	✓	✓
Non-residents of Oregon who receive benefits from PEBB/OEBB	✓	✗
Children’s Health Insurance Programs (Title XIX and Title XXI)	✓	✓
Department of Defense and Veterans Affairs health care services	✗	✓
Commercial insurers with less than 5,000 covered lives	✗	✓
Indian Health Affairs health care services	✗	✓
Worker’s compensation	✗	✓
Services Included		
Facilities for residential mental health, substance abuse, and intellectual and developmental disabilities.	✓*	✓
Home and nursing care facilities	✓*	✓
Retail sales through mail order (excluding optical goods)	✓*	✓
Substance Abuse and Mental Health Services (SAMHSA) services and grants	✗	✓
Government public health activities (federal, state, and local)	✗	✓
Investments in research, structures, and equipment	✗	✓

✓* - Included in APAC only if there was a health care claim from a payor (e.g., Medicaid, Medicare, commercial insurer)