ADMINISTRATIVE BULLETIN 15-05

957 CMR 8.00: All Payer Claims Database (APCD) and Case Mix and Data Submission

Effective March 31, 2015

The Center for Health Information and Analysis (Center) is issuing this Administrative Bulletin pursuant to 957 CMR 8.07(1) to notify Health Care Payers required to submit claims data to the Center in accordance with 957 CMR 8.00 of changes to the Massachusetts All-Payer Claims Database (MA APCD) file submission guidelines.

The Commonwealth's Risk Adjustment program methodology, in accordance with U.S. Department of Health and Human Services requirements, must accommodate the filing of supplemental diagnosis codes by carriers. Collecting all relevant diagnoses for enrollees in risk adjustment covered plans is important to the accuracy of the risk adjustment program, both for purposes of data collection and data validation.   These supplemental diagnoses are not necessarily contained within a carrier's claim adjudication process/system. Therefore a separate filing has been developed to meet the federal requirement. This Administrative Bulletin allows for the submission of supplemental diagnoses in a separate file. Carriers may choose to use the Supplemental Diagnosis (SD) file or utilize the current medical claim file for submission of supplemental diagnoses. It is optional to submit a Supplemental Diagnosis file. Carriers who choose to submit supplemental diagnosis data through the standard medical claim file are not required to also file through the SD file.

The following table lists new data elements that must be submitted. Technical specifications for these fields are found within the File Submission Guides.

Element	Data Element Name	Description
SD001	Submitter	CHIA defined and maintained unique identifier
SD002	Payer Claim Control Number	Payer Claim Control Identification
SD003	Line Counter	Incremental Line Counter
SD004	Version Number	Claim Service Line Version Number
SD005	Carrier Specific Unique Member ID	Member's Unique ID

SD006	Date of Service - From	Date of Service
SD007	Date of Service - To	Date of Service
SD008	Service Provider Number	Service Provider Identification Number
SD009	Type of Claim	Type of Claim Indicator
SD010	Revenue Code	Revenue Code
SD011	Procedure Code	HCPCS / CPT Code
SD012	ICD-CM Primary Procedure Code	ICD Primary Procedure Code
SD013	ICD Indicator	International Classification of Diseases version
SD014	Diagnosis	ICD Diagnosis Code
SD015	Add/Delete Indicator	Add/Delete Indicator