

# MA Center for Health Information & Analysis

## **MA APCD User Workgroup**

March 27, 2018

## **Agenda**



- Updates on MA APCD Release 6.0
- Summarized Data Reports
- Publications Using CHIA Data CHIA Website Update
- User Support Slide Topics:
  - New data linkage elements in Release 6.0
  - Alternative medicine claims
  - Pharmacy claims drug codes
  - Hospice claims
- **Q&A**

## MA APCD Release 6.0



- Encompasses data from January 2012 December 2016 with six months of claim runout
- Data specifications are now available online Available here: <a href="http://www.chiamass.gov/ma-apcd/">http://www.chiamass.gov/ma-apcd/</a>
- Release documentation should be posted very soon
- Apply now by listing 2016 (and any other years you want from Release 6.0) in the "Years Requested" section of the current application form

Available here: <a href="http://www.chiamass.gov/application-documents">http://www.chiamass.gov/application-documents</a>

# MA APCD Release 6.0 Highlights



- 4 carriers added to the Pharmacy versioning:
  - (P1) 301 Health New England
  - o (P2) 12226 Minuteman Health
  - o (P3) 10632 Anthem
  - o (P4) 302 Health Plans Inc.
- 3 new data submitters:
  - Catamaran
  - Harvard Pilgrim Medicare Advantage
  - United Healthcare Medicare & Retirement SCO

# MA APCD Release 6.0 Highlights



## New and improved Member Enterprise ID (MEID)

- Allows de-identified linkage of members across plans/products/years – has been retooled and improved
- Master Data Management (MDM) approach updated to work with hashed patient information
- Added Nickname processing for first names (Joe, Joseph)
- Added NYSIIS phonetic processing for last names (Smith, Smyth)
- Removed the Pharmacy Benefit Manager data from the MDM process to decrease the duplication of member data by upwards of 40%

## **Future Years of Data**



Applicants can now request <u>FUTURE YEARS OF DATA</u> for both MA APCD and Case Mix.

- Initial project requires Data Privacy Committee and Data Release Committee review
- Additional years or release versions of data will be released upon availability and the Recipient's completion of a <u>Certificate</u> of <u>Continued Need</u> (Exhibit B of the DUA)
- No additional review required for these additional years of data unless your request changes
- Normal data fees still apply

## **Future Years of Data**



- In the Data Requested section of the main application form, list the years you would like to request and we will fulfill all years available with the current Release
- To request future years of data (no longer limited to the upcoming 5 years), just click the box for "Subscription"

Exhibit A: CHIA Non-Go	vernmer	nt All-Payer Claims Data Application	August 2017 v.1.0		
List years of data requested (only list years available in the <u>current Release Version</u> ):					
2. Please indicate below whether this is a one-time request, or if the described Project will require a subscription.					
☐ One-Time Request	OR	☐ Subscription			

# **Summarized Data Reports**



- CHIA has updated our <u>Data Release Regulations</u> to allow for Summarized Data Reports
- Will contain only aggregate data (data summaries) and Deidentified Data, sourced from MA APCD and Case Mix data
  - Examples of Summarized Data Reports include: counts; totals; rates per thousand; index values; and other standardized metrics.
  - Will be subject to CHIA's cell suppression policy (no cell less than 11 will be displayed)
- Request form can be found on the MA APCD Application Documents page: <a href="http://www.chiamass.gov/application-documents">http://www.chiamass.gov/application-documents</a>
  - Data Management Plan and Data Use Agreement are not required.

## **Summarized Data Reports**



- In determining whether to compile such a report, CHIA will consider the public interest served, the availability of its resources, the complexity of the request, and privacy concerns (i.e. that there is no more than a minimal risk to individual privacy in the public release of the report)
- The Executive Director (or his/her designee) will approve or deny such requests. Such approval/denial is final and not subject to further review or appeal.
- A support/production fee of \$140/hour will be charged
   \*\*We will let you know the expected number of hours required, as well as when we expect to complete the work, prior to proceeding\*\*

## **Publications Using CHIA Data**



- MA APCD and Case Mix websites now have galleries highlighting research completed by previous applicants for CHIA data using MA APCD and Case Mix
- If you would like to be included in the list, please send the publication citation and/or hyperlink to the publication to <u>Adam.Tapply@state.ma.us</u>
- These lists will be updated continually and will contain links to requestor's original application form on the public comment page

# MA APCD Release 5.0 Documentation Government Non-Government (Limited Data Set-LDS) Documentation Guide Documentation Guide

MA APCD Documentation Archive

#### User Support / Contact Us

MA APCD / Case Mix User Workgroup

Data Specifications

apcd.data@state.ma.us (Please include your IRBNet Number and/or name of PI, if a current data user)

Data Specifications

MA APCD Technical Data Profiles

#### Information for Data Submitters

Health Care Data Submission Information

#### CHIA Projects Using MA APCD Data

- Report on the Performance of the Massachusetts Health Care System
- Enrollment Trends
- MassHealth Baseline Statistics

#### External Projects Using MA APCD Data

See a sample of external research using MA APCD Data

# **Publications Using CHIA Data**



Link to the MA APCD gallery: <a href="http://www.chiamass.gov/resultant-research-using-apcd-data/">http://www.chiamass.gov/resultant-research-using-apcd-data/</a>



CHIA Data » MA APCD » MA APCD Applications Received and Commenting » Resultant Research Using APCD Data

Resultant Research Using APCD Data

Below are a sample of publications using research from CHIA APCD data

Investigator and Organization	Article Title (hyperlink if available)	Journal	Full Citation	CHIA APCD Application
Amresh Hanchate, Associate Professor, Boston University School of Medicine	Massachusetts Health Reform's Effect on Hospitals' Racial Mix of Patients and on Patients' Use of Safety-net Hospitals	Medical Care	Lasser, Karen E; Hanchate, Amresh D; McCormick, Danny; Chu, Chieh; Xuan, Ziming; Kressin, Nancy R: Massachusetts Health Reform's Effect on Hospitals' Racial Mix of Patients and on Patients' Use of Safety- net Hospitals. Medical Care. 54(9):827-836, September 2016.	Patterns in ED Use With and Without Ambulance Use, and Subsequent Healthcare Utilization
Eric Roberts, PhD Candidate, Johns Hopkins, Bloomberg School of Public Health	Do Medicaid MCOs Affect Office-Based Physicians' Incentives to Participate in Medicaid? An Analysis Using Massachusetts Data	Dissertation	Robert ET. Do Medicaid MCOs affect office-based physicians' incentives to participate in Medicaid? An analysis using Massachusetts data. Dissertation, Chapter 4. Johns Hopkins University Bloomberg School of Public Health; March 2015: 181-288.	Do Commercial MCO's Influence Physicians' Incentives to Accept Medicaid Patients?
Robert Town and Elena Prager, Associate Professor / PhD Candidate, Northwestern University, Kellogg School of Management	Consumer Responsiveness to Simple Health Care Prices: Evidence From Tiered Hospital Networks		Prager E. Consumer responsiveness to simple health care prices: evidence from tiered hospital networks. Kellogg School of Management, Northwestern University; September 2017.	The Effect of Limited and Tiered Provider Networks on Utilization, Quality, and Cost of Care

### Case Mix FY17 Release Calendar



### \*CURRENT\* RELEASE TIMEFRAMES FOR EACH FILE:

Inpatient (HIDD)

#### **JUNE**

Emergency Department (ED)

### **AUGUST**

Outpatient Observation (OOD)

#### **SEPTEMBER**



## **QUESTIONS?**

# Question: What is the purpose and use of the three new linking variables (LINKORGIDME, LINKORGIDPV, LINKORGIDPR) that appear in MA APCD Release 6.0 and to what fields do they link?

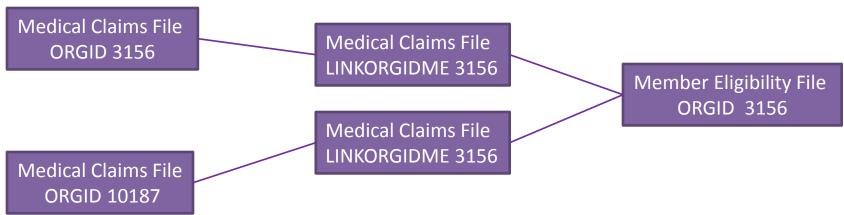


<u>Answer</u>: These three new standard link-reference variables were added to the claims files to facilitate between-file linkage of claims to the correct carrier data without, for example, having to worry about untangling the intricacies of ORGIDs that share eligibility data submitted under only one ORGID. This standardization not only ensures that the claims data will be automatically linked to an ORGID's correct eligibility, provider or product reference file data, but ensures correct linkage for any point in time – no matter how carrier filing relationships have changed over time.

**LINKORGIDME** – Links to the ORGID field of the relevant Member Eligibility data in the ME file **LINKORGIDPV** – Links to the ORGID field of the relevant Provider data in the PV file **LINKORGIDPR** – Links to the ORGID field of the relevant Product data in the PR file

### **Example**

Both ORGID 3156 and ORGID 10187 each submit medical claims under their ORGIDS in their MC file. However, they share eligibility data submitted under one ORGID (3156) in the ME file. The LINKORGIDME in the MC file ensures linkage to shared eligibility data.



Note: Also remember to use the MC file **MemberLinkEID** linked to the ME file **MemberLinkEID** 

# **Question:** Does the MA APCD contain medical claims for alternative medical procedures like acupuncture?

<u>Answer</u>: Yes, there are alternative medical procedures in the MA APCD. Since calendar year 2012, the number of acupuncture medical claim lines have more than doubled. The acupuncture procedure codes include '97780', '97781', '97810', '97811', '97813', '97814'. The top three acupuncture procedure codes in the medical claims are '97810', '97811', and '97814' described as follows:

Procedure Code	Description	
97810	Acupuncture, 1 or more needles; without electrical stimulation, initial 15 minutes of personal one-on-one contact with the patient	
97811	Acupuncture, 1 or more needles; without electrical stimulation, each additional 15 minutes of personal one-on-one contact with the patient, with re-insertion of needle(s) (List separately in addition to code for primary procedure)	
97814	Acupuncture, 1 or more needles; with electrical stimulation, each additional 15 minutes of personal one-on-one contact with the patient, with re-insertion of needle(s) (List separately in addition to code for primary procedure)	

The MA APCD Release 6.0 includes paid claims from over 4,000 acupuncture providers in both hospital and community based settings. It is important to note that a portion of the community based alternative care providers in various Wellness Clinics and Holistic Health Centers are reimbursed by carriers even though they do not have a National Billing Provider ID or National Service Provider ID in the medical claims data.

# Question: I am using the Pharmacy Claims. Why do some of the drug codes in the MA APCD Pharmacy Claims have 11 digits, some 10 digits, some 9 digits, some 8 digits?



<u>Answer</u>: The MA APCD Pharmacy Claims specifications require carriers to report the National Drug Code (NDC) as defined by the Food and Drug Administration in an **11 digit format** (5-4-2) <u>without</u> hyphenation.

#### Components in 11 digit NDC Code

First 5 digit labeler code identifies the manufacturer Second 4 digit product code identifies the drug's active ingredient and dosage Third 2 digit package code identifies the packaging size and type

In MA APCD Release 6.0, there are 67,100 distinct NDC codes, only 9 of these distinct codes are not in 11 digit format. The APCD has 805,676,569 pharmacy claim lines. These 9 codes with less than 11 digits appear on only 0.0034% of the pharmacy claim lines. If you are seeing even a half percent of pharmacy claims with less than 11 digits in the NDC code, make sure you are importing the code as a text field so that you do not lose any lead zeroes.

The data user also asked does adding a 1 lead zero padding to a 10 digit code fix? The answer is 'no' since for a 5-4-2 NDC code the lead zero could be the lead on any segment of the code:

OXXXX-XXXX-XX XXXXX-OXXX-XX XXXX-XXXX-OX

# Question: Are there Hospice Claims in the MA APCD and how do I find them?

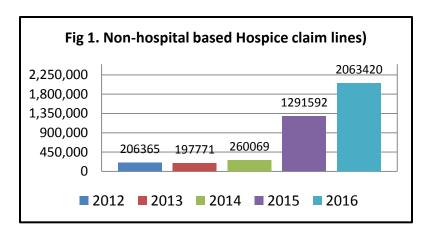


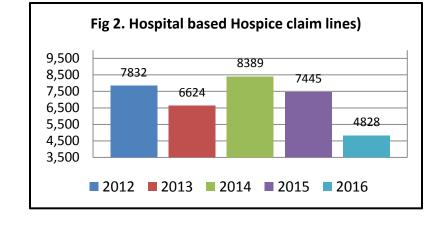
**Answer**: Hospice claims can be found by using the field MC036 - Type of Bill on Facility Claims Codes:

'81' = Hospice (non-hospital based)

**'82'** = Hospice (hospital based)

In MA APCD Release 6.0, the highest volume of hospice claim lines are for non-hospital based hospice care, see figures 1 and 2 below.





Please note that there are specific revenue codes, HCPCS codes, CPT codes, occurrence codes, and patient status codes used to describe hospice care. For example, see patient status codes in Table 1.

#### Table 1. Patient Status Codes Relevant to Hospice Care

40 Expired at home (hospice claims only)

- **41** Expired in a medical facility such as hospital, SNF, ICF, or freestanding hospice. (Hospice claims only)
- 42 Expired place unknown (Hospice claims only)
- 43 Discharged/transferred to a federal hospital
- 50 Hospice home
- 51 Hospice medical facility

## **Questions?**



- Questions related to MA APCD: (apcd.data@state.ma.us)
- Questions related to Case Mix: (<u>casemix.data@state.ma.us</u>)

REMINDER: Please include your IRBNet ID#, if you currently have a project using CHIA data

# **Call for Topics and Presenters**



If there is a **TOPIC** that you would like to see discussed at an MA APCD or Case Mix workgroup in 2018, contact Adam Tapply [adam.tapply@state.ma.us]

If you are interested in **PRESENTING** at an MA APCD or Case Mix workgroup in 2018, contact Adam Tapply [adam.tapply@state.ma.us]

You can present remotely from your own office, or in-person at CHIA.