**ADMINISTRATIVE BULLETIN 13-02**

**114.5 CMR 21.00: Health Care Payers Claims Data Submission**

Effective April 5, 2013

The Center for Health Information and Analysis (Center) is issuing this Administrative Bulletin to notify Health Care Payers required to submit claims data to the Center in accordance with 114.5 CMR 21.03 of changes to the All-Payer Claims Database (APCD) file submission guidelines.

The Center is reinstating the requirement that payers submitting claims and encounter data on behalf of an employer group submit claims and encounter data for employees who reside outside of Massachusetts.

The following table lists new data elements that must be submitted and also updates the descriptions, specifications, and usage information for some existing data elements. Further, some previously required data elements are changing to “Filler” fields and will no longer require any data submission.

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| **Element** | **Element Name** | **Description, Usage or Guideline Change** |
| PV032 | Payment Arrangement Type | Registered Provider Organization ID – Registered Provider Organization Number assigned by the Health Policy Commission |
| PV065 | TME – Non-Claims Payments: Incentive Programs | Filler – No Input |
| PV066 | TME – Non-Claims Payments: Risk Settlements | Filler – No Input |
| PV067 | TME – Non-Claims Payments: Care Management | Filler – No Input |
| PV068 | TME – Non-Claims Payments: Other | Filler – No Input |
| PV069 | TME – Non-Claims Payments: Total | Filler – No Input |
| PV070 | TME – Non-Claims Payments: Date | Filler – No Input |
| ME119 | Tobacco Use Flag | Filler – No Input |
| ME124 | TME – Health Status Adjustment Tool | Attributed PCP Provider ID |
| ME125 | TME – Health Status Adjustment Tool Version | TME OrgID - Physician Group of the Member’s PCP |
| ME126 | TME – Health Status Adjustment Tool Date | Filler – No Input |
| ME127 | TME – Member’s Health Status Adjustment Score | Filler – No Input |
| ME128 | TME – Member’s Health Status Adjustment Score - Normalized | Filler – No Input |
| ME129 | TME – Member’s Health Status Adjustment Score Start Date | Filler – No Input |
| ME130 | TME – Member’s Health Status Adjustment Score End Date | Filler – No Input |
| ME131 | Payment Arrangement Type | TME Global Budget/Payment Indicator |
| ME132 | Employer Contribution | Total Contribution |

The following fields have a category change:

|  |  |  |
| --- | --- | --- |
| **Element** | **Element Name** | **Category** |
| ME045 | Purchased through Massachusetts Exchange Flag | B |
| ME120 | Actuarial Value | B |
| ME121 | Metal Level | B |

Technical specifications for these fields are:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Element** | **Element Name** | **Type** | **Length** | **Description** | **APCD Usage and Guidelines** | **Condition** | **Category** | **%** |
| *Provider File* | | | | | | | | |
| PV032 | Registered Provider Organization ID | Char | 30 | Placeholder for Registered Provider Organization ID | Total Medical Expenses & Relative Price reporting requirement. Registered Provider Organization Number assigned by the Health Policy Commission. | Assigned submitters only. | Z | 0 |
| PV065 | Filler | Char | 0 | Filler | The APCD reserves this field for future use. Do not populate with any data. | All | Z | 0 |
| PV066 | Filler | Char | 0 | Filler | The APCD reserves this field for future use. Do not populate with any data. | All | Z | 0 |
| PV067 | Filler | Char | 0 | Filler | The APCD reserves this field for future use. Do not populate with any data. | All | Z | 0 |
| PV068 | Filler | Char | 0 | Filler | The APCD reserves this field for future use. Do not populate with any data. | All | Z | 0 |
| PV069 | Filler | Char | 0 | Filler | The APCD reserves this field for future use. Do not populate with any data. | All | Z | 0 |
| PV070 | Filler | Char | 0 | Filler | The APCD reserves this field for future use. Do not populate with any data. | All | Z | 0 |
| *Member Eligibility File* | | | | | | | | |
| ME045 | Purchased through Massachusetts Exchange Flag | Int | 1 | Indicator – MA Exchange Purchase | Report the value that defines the element. Example: 1 = Yes, policy for this eligibility was purchased through MA Health Exchange. Required for Risk Assessment. | All | B | 100 |
| ME119 | Filler | Char | 0 | Filler | The APCD reserves this field for future use. Do not populate with any data. | All | Z | 0 |
| ME120 | Actuarial Value | Decimal-Numeric | 6 | Calculated Score for Risk Adjustment | Report the Actuarial Value of this member for the time period indicated by Enrollment Start and End dates in 0.0000 Format. Required for Risk Assessment. | Required when Submitter is identified as a Risk Holder Submitter | B | 100 |
| ME121 | Metal Level | Int | 1 | Standardized plan level in metal reference | Report the Metal Level benefits that the member is associated to in this line of eligibility. Required for Risk Assessment. | Required when Submitter is identified as a Risk Holder Submitter | B | 100 |
| ME124 | Attributed PCP Provider ID | Text | 30 | ID Link to PV002.  PV002 for PCP attributed to patient for prior year. | Required for Total Medical Expense Reporting. OrgID specific. The PCP attributed to a member by the payer. | Assigned submitters only.  Required in December file only.  Required when ME131 = 1 and ME046 is ‘999999999U’ or ‘999999999NA’ or missing. | A2 | 100 |
| ME125 | TME OrgID - Physician Group of the Member’s PCP | Integer | 6 | TME Provider OrgID | Required for Total Medical Expense Reporting. OrgID specific. TME Provider OrgID for the Physician Group of the Member’s PCP and not the place of service for the claim | Assigned submitters only. | A2 | 100 |
| ME126 | Filler | Char | 0 | Filler | The APCD reserves this field for future use. Do not populate with any data. | All | Z | 0 |
| ME127 | Filler | Char | 0 | Filler | The APCD reserves this field for future use. Do not populate with any data. | All | Z | 0 |
| ME128 | Filler | Char | 0 | Filler | The APCD reserves this field for future use. Do not populate with any data. | All | Z | 0 |
| ME129 | Filler | Char | 0 | Filler | The APCD reserves this field for future use. Do not populate with any data. | All | Z | 0 |
| ME130 | Filler | Char | 0 | Filler | The APCD reserves this field for future use. Do not populate with any data. | All | Z | 0 |
| ME131 | TME Global Budget/Payment Indicator | Integer | 1 | TME Global Budget/Payment Indicator | Required when Submitter is identified as a TME / RP Submitter. Report whether the member’s contract was assigned under a global budget/payment contract.  EXAMPLE: 1 = Yes, the member’s contract was assigned under a global/budget/payment contract. | Assigned submitters only. | A2 | 100 |
|  |  |  |  | **Value** | **Description** |  |  |  |
|  |  |  |  | 1 | Yes |  |  |  |
|  |  |  |  | 2 | No |  |  |  |
|  |  |  |  |  |  |  |  |  |
| ME132 | Total Contribution | Integer | 10 | Employer + Subscriber’s total contribution to monthly premium | Required for Cost Trends Analysis. | Risk Holders report a value when ME060 = A, I, O or P and Member = Subscriber | B | 100 |

The following table lists general changes and updates to be made to file types:

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| **ACTION** | **NARRATIVE** |
| Reset Length on ICD-CM Procedure Codes | Set length of all Medical Claim Procedure Codes to varchar(7) to accommodate ICD-10 Updates (MC058, MC083-MC088). |