# Monthly APCD User Workgroup Webinar

March 25th, 2014

# Agenda

I. Release 2.1 Announcements / Application Information

II. Release 2.1 Upgrades

III. Questions from Current APCD Users

IV. SME Office Hours

# Release 2.1 Features

- Same data as in Release 2.0
  - Dates of service (2009-12 paid thru June 13)
  - No new data submissions
- Important data enhancements
  - Highest version flags for three more payers
  - Master Patient Index

# Master Patient Index Preview

- Customized probabilistic matching algorithm based on MA APCD data submissions
  - IBM Initiate Software
  - More than 12,000 manual reviews by CHIA staff
- Fields used include Member Name, Member SSN, DOB, Address, Gender, Subscriber SSN, Carrier ID, Org ID
- Resulting data elements
  - EID – Enterprise ID
  - Categorical Variable summarizing "goodness of match"

*More to follow next month and in Release 2.1 documentation.*

# Receiving Release 2.1

- New documentation available on/around April 30th, when Release 2.1 goes live

- Fulfillment times are not expected to change (3 months from initial application to delivery of data, on average)

- You can apply for Release 2.1 on current documentation and start the review process now

# Recent Questions from Users

Question:

Taking the [Payer/OrgID] and
[HashCarrierSpecificUniqueMemebrID] together, we still have
approximately 15M unique member IDs per year.

*Can you explain why there are so many unique ids?*

# So Many Unique Identifiers?

Answer:

- To uniquely identify a member within a carrier, use the combination of: [Payer] and [CarrierSpecificUniqueMemberID].

- We ran internal tests using this method and got similar results as this questioner.  This may be the result of poor data capture on the part of some payers.

- Master Patient Index (in Release 2.1) will help to reduce this number, as it uses a matching algorithm to match members with similar attributes across claims and member eligibility files.

# Another Question…

Question:

Is there a way to identify overlap between submissions from carriers and Third Party Administrators in the data and eliminate duplicate enrollees/data?

# Identifying overlap between submissions

**CHIA.**

Answer:

- Use ME028 (Primary Insurance Indicator), MC038 (Claim Status), MC095 (COB / Third Party Liability), and MC096 (Other Insurance Paid Amount) to capture instances of COB.

- All of these are "A" level fields.

# Another question…

Question:

There are member IDs and subscriber IDs that appear in the medical and pharmaceutical claims data that are not in the member eligibility files. What are these and how do we deal with them?

# Linking Rx and Medical Claims?

Answer:

- There are instances where insurers receive claims for processing that, due to incomplete information, do not validate against their eligibility data.

- CHIA has observed this and has worked selectively with carriers to resolve.

- Master Patient Index might help to address this, as will future enhancements to CHIA's QA systems.

- In the meantime, depending on your analysis, you may choose to use the non-matching claims or exclude them.

# Finding GIC Claims?

Can I find the MA GIC claims payers in the APCD if I get the product name?

You would need ME060, which is a Level 3 data element.

# Another question…

CHIA.

Question:

In the member eligibility file there are fields for spouse plan types and medical coverage-GIC Only: will we need these fields for demographic break down by coverage types?  Or would the spouse have their own record in the table?

# Demographic breakdown by coverage type

Answer:

- These are Level 3 data elements (ME067-70).

- Note they are C fields with a 1% threshold in Release 2.0 (Page 21 of the ME documentation). This means that these carrier-defined reference tables will not be well populated in Release 2.0.

- The GIC data elements are coming in as part of Version 3 submission (effective Dec. 2013) and, assuming carriers submit the data, will be in future releases.

# Another question…

CHIA.

Question:

In the MC003 field, Insurance Code Type, I have a list of descriptions, but the list is missing codes MO and SP. Are there descriptions for those two codes?

# Insurance code type descriptions

CHIA.

Answer:

- As reported on Page 14 of the MC file documentation, this is a "C" level field and thus are not edited for compliance against the lookup table.

- MO is likely Medicaid Managed Care.  SP is likely Supplemental Policy.

# April Dates

- 4/8 – Monthly APCD Technical Assistance Group Meeting
- 4/22 – Monthly APCD User Workgroup Webinar
- 4/24 – Data Release Committee (DRC) Meeting

# Questions?

- General questions about the APCD:
(CHIA-APCD@state.ma.us)

- Questions related to APCD applications:
(apcd.data@state.ma.us)

- Questions related to Casemix:
(casemix.data@state.ma.us)