Agenda

• MA APCD

• Annual Premiums Data Request

• Relative Price Reporting

• DOI Reporting

• Questions
MA APCD Intake

CHIA updates to submission guides for 2020:

- ME131 – TME Global Budget/Payment Indicator (Assigned Submitters only).

  **Updating description to clarify how this field should be populated.**

  **Current language:** 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.

  **Updated language:** Required when Submitter is identified as a TME/RP Submitter. Report whether the member’s primary care provider group’s contract was assigned under a global budget/payment contract. EXAMPLE: 1=Yes, the member’s primary care provider group’s contract was assigned under a global budget/payment contract.
MA APCD Intake

CHIA updates to submission guides for 2020:

- MC023 – Discharge Status.

**Updating Condition column to match the edits on this field.**

*Current language:* Required when MC094 (Type of Claim) = 002 (Facility) and MC069 (Discharge Date) is populated.

*Updated language:* Required when MC094 (Type of Claim) = 002 (Facility) and MC069 (Discharge Date) is populated. **May be present without MC069 populated when MC094 = 002 and MC023 = 30 (interim billing for long term stays).**
Annual Premiums Data Request

Purpose
To assess health insurance coverage and cost trends in the Massachusetts market, based on contract-membership (MA situs)

Data Overview
• Aggregate member months, premiums, claims amounts

• Breakouts by Funding Type (fully-/self-insured), Market Sector (group size), Product Type (HMO, PPO, POS, Other), and Benefit Design Type (HDHP, Limited Network, Tiered Network)

• Covers previous three calendar years (2017, 2018, 2019)
Annual Premiums: Data Submitters

Per 957 CMR 10.00, only payers with at least 50,000 Massachusetts Private Commercial Plan members are required to submit. For the May 2020 Submission, this includes the following payers:

- Aetna
- AllWays Health Partners
- BCBSMA
- BMCHP
- Cigna
- Fallon
- HPHC (incl. HPI)
- HNE
- NHP
- Tufts Health Plan
- Tufts Public
- UniCare
- United
Annual Premiums: Proposed Changes

Additions/Alterations

• The Federal Transitional Reinsurance and Risk Corridor programs were no longer active during this reporting period.

• CHIA will no longer request Risk Adjustment Transfer Amounts by market sector. Payments for the full merged market should be reported in the “No Subsidy/Unknown” market sector column.
Annual Premiums: Proposed Changes

Deletions

- CHIA will no longer collect “Member Months by Standard Industrial Classification (SIC) Code.”
- CHIA will no longer collect Administrative Service Fees for self-insured plans.
Annual Premiums: Payer Review Period

A draft version of the Data Submission Manual will be distributed to payers this week.

Please reach out to Ashley Storms at ashley.storms@state.ma.us with questions, comments, or concerns. We request that feedback be submitted by Friday, February 28th.
Annual Premiums: Data Submission Period

Finalized Data Submission Manual and Reporting Workbook will be posted on CHIA’s website in March.

Completed Workbooks should be sent to CHIAData@gormanactuarial.com no later than Friday, May 15th.
## Annual Premiums: Data Request Timeline

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<tbody>
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<td>Payers review draft materials</td>
<td>Final 2020 Premiums Request released</td>
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<td>Submissions due</td>
<td>Data analysis and reporting</td>
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<td>CHIA’s Annual Report</td>
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Relative Price (RP)

New Filing Template

• RP will no longer be submitted through INET

• Payers will submit an excel-based template through CHIA Submissions

• Hospital Inpatient and Hospital Outpatient will both be submitted in the Hospital RP Template

• Physician Group and Other Provider will have their own templates
Relative Price (RP)
Field Additions/Changes

• Payers will no longer be required to submit **Hospital Base Rates** or **Network Average Base Rates** in the Hospital Inpatient data

• Payers will no longer be required to report **Service Mix** in the Hospital Outpatient, Physician Group, and Other Provider data

• **Claims Payments** and **Non-Claims Payments** will now be submitted at the **Service Category** level
  - **Non-Claims Payments** can be reported as a separate category

• These changes will allow data to be reported in one table instead of four tables
Relative Price (RP)

Data Quality

• Adding a **front page** tab to the RP template with submission overview and data quality questions

• Adding **summary tabs** to allow for review of Total Payments and Multipliers prior to submission

• Adding data checks within the template to validate entered data prior to submission
  • This will replace the current process of validating values in INET and provide instant feedback to the data submitters
Next Steps

- Draft versions of the Data Submission Manual and RP Excel template will be distributed to payers later in February.

- Please reach out to Matthew MacNabb at Matthew.MacNabb@massmail.state.ma.us with questions, comments, or concerns. Payers will be given a two-week window to submit feedback.

- Final Data Submission Manual and Reporting template will be posted on CHIA’s website in March.

- CHIA staff will work with data submitters between now and June to introduce new CHIA submissions platform and provide additional materials.
DOI Reporting

- Q4 2019 HMO Membership & CY2019 Annual Membership reports are in process and will be sent to payers in the coming weeks.

- Claims/Utilization reports:
  - First production run using data through September 2019 sent to payers on 12/23. Signoff was due by 2/6.
Next Meetings

March 10, 2020 @ 2:00 pm

April 14, 2020 @ 2:00 pm
Questions?