

# Massachusetts All-Payer Claims Database: Technical Assistance Group (TAG)

April 12, 2022



center  
for health  
information  
and analysis

# Agenda

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- MA APCD
- Enrollment Trends
- DOI Reporting
- Questions

# MA APCD Intake

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- All APCD submissions through March 2022 are due by April 30<sup>th</sup>. This includes any re-submissions.
- Please work with your liaison in submitting any overdue files and alert them if you expect any delays.
- Data will be used for Q1 2022 DOI membership, Mar-2022 bi-annual claims utilization and quarterly Enrollment Trends reporting.
- CHIA is revisiting Medical Claim versioning methods with select payers. We'll reach out when we have examples to share with each company.

# MA APCD – 2022 Provider Submission Guide Update (Page 9)

| Specification Question   | Clarification   | Rationale   |
|--|---|---|
| Should inactive providers be included on the file and what is the reporting time <u>period</u> ? | Yes, all providers, both active and inactive must be included. Providers that were inactive prior to January <del>2010</del> <u>2015</u> are not to be included. It is necessary to report <u>any and all</u> provider information that aligns to the eligibility and claims data to insure that linking between files can occur. | CHIA collects the most up to date provider data that can be used to analyze claims data. Since claims data is collected monthly, the provider file can be synced with the claims <u>file, and</u> can be a snapshot of how the provider file looked at the end of the period for which claims are sent. |

# MA APCD – 2022 Pharmacy Claims Submission Guide Update (Page 21)

| File | Co I | Elm t  | Data Element Name        | Date Modified     | Type                          | Type Description                  | Format / Length | Description                | Element Submission Guideline  | Condition | %   | Cat |
|------|------|--------|--------------------------|-------------------|-------------------------------|-----------------------------------|-----------------|----------------------------|---|-----------|-----|-----|
| PC   | 33   | PC 031 | Compound Drug Indicator  | 11/8/12           | Lookup Table - Integer        | tkpFlagIndicators                 | int[1]          | Compound Drug Indicator    | Report the value that defines the element.<br><b>EXAMPLE:</b> 1 = Yes, drug is a compound.        | All       | 98% | A2  |
|      |      |        |                          |                   |                               |                                   |                 | <b>Value</b>               | <b>Description</b>  |           |     |     |
|      |      |        |                          |                   |                               |                                   |                 | 1                          | Yes   |           |     |     |
|      |      |        |                          |                   |                               |                                   |                 | 2                          | No  |           |     |     |
|      |      |        |                          |                   |                               |                                   |                 | 3                          | Unknown   |           |     |     |
|      |      |        |                          |                   |                               |                                   |                 | 4                          | Other   |           |     |     |
|      |      |        |                          |                   |                               |                                   |                 | 5                          | Not Applicable  |           |     |     |
| PC   | 34   | PC 032 | Date Prescription Filled | 6/24/10           | Full Date - Integer           | Century Year Month Day - CCYYMMDD | int[8]          | Prescription filled date   | Report the date the pharmacy filled AND dispensed prescription to the patient in CCYYMMDD Format. | All       | 99% | A0  |
| PC   | 35   | PC 033 | Quantity Dispensed       | 11/8/12<br>3/3/22 | Quantity - Integer<br>Decimal | Counter                           | ±varchar[10]    | Claim line units dispensed | Report the number of metric units of medication dispensed.  | All       | 99% | A1  |

# MA APCD – 2022 Medical Claims Submission Guide Update (Page 48)

| File | Co  | Elmt  | Data Element Name  | Date Modified    | Type                   | Type Description | Format / Length | Description                      | Element Submission Guideline  | Condition | %    | Cat |
|------|-----|-------|--------------------|------------------|------------------------|------------------|-----------------|----------------------------------|---|-----------|------|-----|
|      |     |       |                    |                  |                        |                  |                 | 2                                | HCPCS Level II Code   |           |      |     |
|      |     |       |                    |                  |                        |                  |                 | 3                                | HCPCS Level III Code (State Medicare code).   |           |      |     |
|      |     |       |                    |                  |                        |                  |                 | 4                                | American Dental Association (ADA) Procedure Code (Also referred to as CDT code.)                                    |           |      |     |
|      |     |       |                    |                  |                        |                  |                 | 5                                | State defined Procedure Code  |           |      |     |
|      |     |       |                    |                  |                        |                  |                 | 6                                | CPT Category II   |           |      |     |
|      |     |       |                    |                  |                        |                  |                 | 7                                | CPT Category III Code   |           |      |     |
| MC   | 132 | MC131 | InNetworkIndicator | 11/8/23/<br>3/22 | Lookup Table - Integer | tkpFlagIndicator | int[1]          | Indicator - Network Rate Applied | Report the value that defines the element. <b>EXAMPLE:</b> 1 = Yes claim line was paid at an <u>InNetwork</u> rate. | All       | 100% | A2  |
|      |     |       |                    |                  |                        |                  |                 | <b>Value</b>                     | <b>Description</b>  |           |      |     |
|      |     |       |                    |                  |                        |                  |                 | 1                                | Yes   |           |      |     |
|      |     |       |                    |                  |                        |                  |                 | 2                                | No  |           |      |     |
|      |     |       |                    |                  |                        |                  |                 | 3                                | Unknown   |           |      |     |
|      |     |       |                    |                  |                        |                  |                 | 4                                | Other   |           |      |     |
|      |     |       |                    |                  |                        |                  |                 | 5                                | Not Applicable  |           |      |     |
|      |     |       |                    |                  |                        |                  |                 | 6                                | <u>OON, InNetwork facility, patient consents</u>  |           |      |     |
|      |     |       |                    |                  |                        |                  |                 | 7                                | <u>OON, InNetwork facility, patient does not consent</u>  |           |      |     |
|      |     |       |                    |                  |                        |                  |                 | 8                                | <u>OON, OutofNetwork facility, patient consents</u>   |           |      |     |
|      |     |       |                    |                  |                        |                  |                 | 9                                | <u>OON, OutofNetwork facility, patient does not consent</u>   |           |      |     |

# MA APCD Intake Version 2022

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- APCD submitters may send test files in July 2022. Please work with your liaison if you want to do this.
- Production files with submission guide changes are due by 8/31 for July 2022 data.
- There is no change to the version field in the header record – it remains '2019'.

# Enrollment Trends Update

The next Enrollment Trends reporting cycle will be based on data through March 2022 and is scheduled to be published in August 2022.

CHIA requested Supplemental Data from certain payers last week. The due date for Supplemental Data through March 2022 is May 13, 2022.

Payers will be sent MA APCD-sourced enrollment counts for review in **June 2022**.

- **For questions on Enrollment Trends:** Contact your CHIA liaison and Lauren Almquist at [lauren.almquist@chiamass.gov](mailto:lauren.almquist@chiamass.gov)



# Enrollment Trends Timeline

| Apr 2022                               | May 2022  | Jun 2022  | Jul 2022  | Aug 2022 |
|--|---|---|-----------|----------|
|  |   |   |           |          |
| Payers submit March 2022 MA APCD files |   |   |           |          |
|  | Supplemental enrollment reports due (select payers) |   |           |          |
|  |   | MA APCD enrollment counts sent to payers for review |           |          |
|  |   |   | Reporting |          |

# DOI Reporting

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- Q4 2021 HMO Membership reports were sent on 3/3. Signoff is due by 4/18.
- CY2021 Membership reports were sent on 3/16. Signoff is due by 4/29.
- Claims/Utilization:
  - Reports using data through September 2021 were sent on 3/7. Signoff is due by 5/7.
  - We continue to meet with select payers to reconcile differences in certain report categories.

# Next Meetings

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May 10, 2022 @ 2:00 pm

June 14, 2022 @ 2:00 pm

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# Questions?