

ADMINISTRATIVE BULLETIN 24-03

957 CMR 8.00: All Payer Claims Database (APCD) and Case Mix and Charge Data Submission

Effective May 30, 2024

The Center for Health Information and Analysis (CHIA) is issuing this Administrative Bulletin pursuant to 957 CMR 8.06(1) to notify hospitals required to submit data to CHIA in accordance with 957 CMR 8.00 of changes to the Case Mix and Charge Data file submission guidelines.

CHIA updated the FY 2025 Case Mix and Charge Data submission requirements with two new data elements to collect National Provider Identifiers (NPI) for Other Physician and ED Physician in Emergency Department Data (EDD).

Other assorted Case Mix changes to the submission requirements include updated field lengths to accommodate the intake of certain hospital data with increasing size, updated field edits and updated descriptions.

Data code tables for Hospital Inpatient Discharge Data (HIDD), Emergency Department Data (EDD), Outpatient Observation Data (OOD) are updated to align with MassHealth’s standards or the code set that is required for the Electronic Health Record Dataset (EHRD) collection.

Further, CHIA changed the required file format for HIDD and EDD from fixed length to an asterisk delimited format. All Filler (empty) fields are removed from both filing types. Record Type 21 – Patient Reason for Visit is also removed from the required EDD specifications.

The following table lists data elements with updated specifications. Technical specifications for these fields are found within the related Submission Manuals. The changes noted herein and within the Submission Manuals will be in effect beginning with the quarterly submission of 10/1/2024 – 12/31/2024 (1st Quarter 2025). The due date for the filing of 1st Quarter 2025 is January 31, 2025. The submittal schedule is not changing for Case Mix and EHRD data submissions.

New Data Element	File Type
Other Physician or Clinician National Provider Identifier (NPI)	Emergency Department
ED Physician or Clinician National Provider Identifier (NPI)	Emergency Department

New File Format	File Type
Asterisk Delimiter	Inpatient Discharge
Asterisk Delimiter	Emergency Department

Data Element with Updated Field Length	File Type
Medical Record Number	Inpatient Discharge, Emergency Department, Outpatient Observation, Electronic Health Record Dataset
Permanent Patient Street Address	Inpatient Discharge, Emergency Department, Outpatient Observation, Electronic Health Record Dataset
Temporary Patient Street Address	Inpatient Discharge, Emergency Department, Outpatient Observation, Electronic Health Record Dataset
Homeless Indicator	Inpatient Discharge, Emergency Department, Outpatient Observation, Electronic Health Record Dataset
Board of Registration in Medicine (BORIM) Physician License Number	Inpatient Discharge, Emergency Department, Outpatient Observation
Billing Number, Acct_N	Inpatient Discharge, Emergency Department, Outpatient Observation
Race 1	Inpatient Discharge, Emergency Department, Outpatient Observation
Race 2	Inpatient Discharge, Emergency Department, Outpatient Observation
Hispanic Indicator	Inpatient Discharge, Emergency Department, Outpatient Observation
Ethnicity 1	Inpatient Discharge, Emergency Department, Outpatient Observation
Ethnicity 2	Inpatient Discharge, Emergency Department, Outpatient Observation
Patient Sex at Birth	Inpatient Discharge, Emergency Department, Outpatient Observation
Provider Name	Inpatient Discharge, Emergency Department
Provider Address	Inpatient Discharge, Emergency Department
Submitter EIN	Inpatient Discharge
Submitter Name	Inpatient Discharge
Mother's Medical Record Number	Inpatient Discharge
Accommodations 1-5	Inpatient Discharge

Units of Service (Accom. Days)	Inpatient Discharge
Total Charges (Accom.)	Inpatient Discharge
Ancillaries 1-5	Inpatient Discharge
Units of Service (Ancillary)	Inpatient Discharge
Total Charges (Service)	Inpatient Discharge
Number of hours in ED	Inpatient Discharge, Outpatient Observation
Number of Discharges	Inpatient Discharge
Total Days	Inpatient Discharge
No. of Providers on File	Inpatient Discharge
Count of Batches	Inpatient Discharge
Batch Type Counts	Inpatient Discharge
Provider City	Emergency Department
Medicaid Claim Certificate Number (New MMIS ID/Medicaid ID), MMIS_ID	Emergency Department, Outpatient Observation
Registration Date	Emergency Department
Discharge Date	Emergency Department
EMS Patient Care Report Number	Emergency Department
Other Ethnicity	Emergency Department
Group Element: Service Line Items 2 - 30	Emergency Department
Group Element: Site Summaries 2 - 4	Emergency Department
Surgeon	Outpatient Observation
Att_MD	Outpatient Observation
Surgeon for Associated Procedure 1 - 3	Outpatient Observation
Hospital Name	Electronic Health Record Dataset

Data Element with Updated Field Edit	File Type
Patient Birthday, Date of Birth, DOB	Inpatient Discharge, Emergency Department, Outpatient Observation

Data Table with Updated Codes	File Type
Patient Sex at Birth	Inpatient Discharge, Emergency Department, Outpatient Observation
Type of Admission, Type of Visit, Obs_Type	Inpatient Discharge, Emergency Department, Outpatient Observation
Race	Inpatient Discharge, Emergency Department, Outpatient Observation
Hispanic Indicator	Inpatient Discharge, Emergency Department, Outpatient Observation
Ethnicity	Inpatient Discharge, Emergency Department, Outpatient Observation
Homeless Indicator	Inpatient Discharge, Emergency Department, Outpatient Observation, Electronic Health Record Dataset