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

January 13, 2015

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center
for health
information
and analysis

Agenda

- TAG Overview/Housekeeping

- MA APCD Data Updates (Health Information Team)

- Total Medical Expenses (TME) & Alternative Payment Methods (APM) (Health Analytics & Finance)

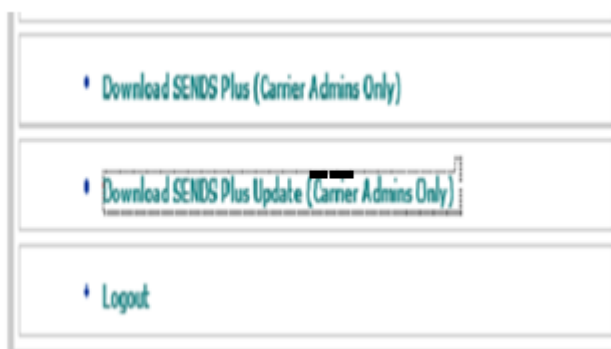- 2015 Annual Premiums Data Request (Health Systems Performance)

- Wrap Up

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Housekeeping

- TAG Overview

    MA APCD Updates

    Total Medical Expense/Relative Prices

    Premium Data Request

- INET/SENDS+

- CHIA on the Move!

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INET/SENDS+

https://inet.chia.state.ma.us/inetn/Login.aspx

Login to INET and from the main menu choose "Download SENDSPlus Update"

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CHIA on the MOVE!

As of Monday January 26th our offices will be at:

501 Boylston Street 5th floor

Boston, MA 02116

Our main phone number will be:

617-701-8100

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MA APCD Updates

- Version 4 Submissions
- Provider MDM
- RA Member Month Tracker
- Risk Adjustment
- Supplemental Diagnoses

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Vers 4.0 Submissions

- Final Guides are on the CHIA website
- Updates required 5/1/2015
- All submissions for periods 10/2013 onward
- Carriers should be actively coding
- Questions to your MA APCD Liaison

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Provider MDM

Provider Portal

- State Innovation Model (SIM) grant
- Feasibility of a "provider portal" on the MA APCD
- Gathering "business requirements" from providers

Master Practitioner Index

- Building a "Master Practitioner Index"
- Link claims from payers back to billing and rendering physicians

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Provider MDM

- Development of method to link providers across years, members, carriers, entities.

- Linkage of Plan Rendering Provider (MC134) to the Provider File

- Review of Provider Type with NPI Type 1 and Type 2 (NPPES)

- Develop Matching Algorithm

Provider MDM

- In instances where a provider practices in two locations (and under two separate contracts), how do payers differentiate between contracts/locations. Is PV 002 used?

- How can CHIA link individual rendering physicians to billing groups and perhaps a larger system?

- Do you require NPI of rendering providers on your claims?

We will have examples from your recent submissions to review.

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CHIA's Member Month Tracker Report

- Membership counts on Connector Risk Adjustment Plans

- October Membership file submitted in November

- Sign Off expected by end of January

Risk Adjustment

- Final Simulation utilize December data due January 31st

- Claims incurred 10/1/13 – 9/30/14 paid through 12/31/14

- Data updates expected to December data to address issues discussed during meetings on Q3 and Q4 Data Quality

- Data updates to December data expected to fully supply ME132 – Total Premium

- Carriers received emails last week outlining particular items

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Risk Adjustment: "Exhibit D"

- Billable Member assignments
- Valid Zip Codes of Member and Employer
- Actuarial Level/Metal Level assignments
- RACP Flag assignments
- CSR/non-CSR assignments

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Membership Reporting: CSR

- CSR plans are the prescribed Benefit Plan IDs for CommCare, MSP, and Connector Care in the Member Eligibility File.

- Plans that do not have these prescribed BP IDs would be considered non-CSR plans.

- Individual non-CSR members are members enrolled in ACA-compliant individual non-subsidized plans. These plans had open enrollment through 3/31/2014. Therefore, member months in individual non-CSR plans after 4/1/2014 should all be RACP=1.

- What Connector/Milliman observed was that a number of member months for the individual non-CSR segment are flagged as RACP=3.

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Supplemental Diagnoses

- Per carriers: usage of current claim file not optimal

- CHIA/Connector working on business requirements for separate submission

- CHIA will develop submission specifications

- Timeline: June submissions due July 2015

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Supplemental Diagnosis Fields

Claim Control Number (link to MC004)

Claim Line Number (link to MC005)

Claim Line Version Number (link to MC005A)

Member ID (link to MC137)

Date of Service From (link to MC059)

Date of Service To (link to MC060)

Servicing Provider

Procedure Code

ICD-CM Procedure Code

Diagnosis Code

Add/Delete Flag

ICD Flag

UPDATES ON PAYER DATA REPORTING

Pursuant to 957 CMR 2.00

January 13, 2015

Agenda

❖ Discuss proposed changes to data filings:

- Total Medical Expenses (TME)

- Alternative Payment Methods (APM)

- Relative Price (RP)

- Provider Payment Methods (PPM)

- Relative Price Network Average Dollar Amount (RP-NADA)

Proposed Changes for Upcoming Filing Cycle

Data Type	Revision	Purpose/Notes
TME	Require at minimum **60 days** claims run-out period from December 31st of the previous year for preliminary TME	• Most payers already use 90 – 120 days run-out period • Payers may file **variance request** for extenuating circumstances*
APM	Align with TME so data sourced from <u>same data cut</u>	• Reduce payer administrative burden
RP	Amend due date to June 1st (previously May 1st)	• Reduce payer administrative burden
PPM/RP-NADA	Suspend data collection and reporting	• Explore alternatives to examining this information

Note: To be granted a variance on this requirement, a petitioner must demonstrate that it meets each of the following criteria:
(1) A good faith reason that it is unable to meet this requirement
(2) The proposed alternative run-out period
(3) A remediation plan outlining the efforts and timeline for compliance

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Tentative Filing Schedule

File Due	Data Year	Deadline
Preliminary Total Medical Expenses	CY 2014	May 1, 2015
Final Total Medical Expenses	CY 2013	May 1, 2015
Alternative Payment Methods	CY 2014	May 15, 2015
Relative Price: Hospitals	CY 2014	June 1, 2015
Relative Price: Physician Groups	CY 2013	June 1, 2015
Relative Price: Other Providers	CY 2014	June 1, 2015

CHIA Next Steps

- ❖ Receive comments from payers
  - Send any comments to tmerp@state.ma.us by 1/22/2015

- ❖ Issue Administrative Bulletin and revised Data Specification Manuals to reflect finalized changes
  - By March 2015

- ❖ Questions?
  - Contact Caitlin Sullivan at 617.988.3128

ANNUAL PREMIUMS DATA REQUEST 2015

Technical Assistance Group Call

January 13, 2015

2:00PM

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Agenda

- ➢ Introductions

- ➢ Overview

- ➢ Request Specifications and Changes from 2014 Request

- ➢ Questions

- ➢ Timeline

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Introductions

Center for Health Information and Analysis

- Deb Schiel, Director of Analytics (HSP)
- Kathy Hines, Director of Data Compliance and Support (HIT)
- Paul Smith, Manager of Data Compliance (HIT)
- Kevin McAvey, Manager of Analytics (HSP)
- Kevin Meives, Senior Health System Policy Analyst (HSP)
- Ashley Storms, Health Policy Analyst (HSP)

Oliver Wyman Actuarial Consulting

- Dianna Welch, Principal
- Peter Scharl, Senior Consultant

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Introductions

Payer Representatives

- Aetna
- Blue Cross Blue Shield of Massachusetts
- CIGNA
- Fallon Community Health Plan
- Harvard Pilgrim Health Care & Health Plans, Inc.
- Health New England
- Massachusetts Association of Health Plans (MAHP)
- Neighborhood Health Plan
- Tufts Health Plan
- United Healthcare
- WellPoint (UniCare)

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Overview of Data Request

Purpose

➢ To assess cost and coverage trends in the Massachusetts commercial market, based on contract-membership (fully- and self-insured)

Data

➢ Aggregated member months, premiums, and claims data

➢ Breakouts by Market Sector, Managed Care Type, and Product Type

➢ Covers last three years (2012, 2013, 2014)

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Overview of Data Request

Request (PDF)

- ➤ Summary
- ➤ Specifications
- ➤ Definitions
- ➤ Frequently Asked Questions (FAQ)

Data Template (XLSX)

Reconciliation Reference Workbook (XLSX)

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Specifications Walkthrough & Changes from 2014

Eliminated

➢ **Renewal Rate Increases**

➢ Benefit Descriptions

➢ Benefit Plan Factors

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➢ **Benefit Plan Factors**

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Specifications Walkthrough & Changes from 2014

Sections

➢ **Membership**

➢ Premiums & Claims

    ❑ Percent of Benefits Not Carved Out

    ❑ In-/ Out-of-network

    ❑ Administrative Service Fees + Claims (SI)

➢ Reconciliation

    ❑ Reconciliation Reference Workbook

➢ Rating Factors

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➢ Rating Factors

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➢ Reconciliation
- ❑ Reconciliation Reference Workbook

➢ **Rating Factors**

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Timeline

Annual Premiums Data Request: 2015 Timeline

Month(s)	Milestone
January 6 – 27, 2015	Request comment period
February 2015 (early)	Finalized Data Request distributed
March - April 2015	Follow-up TAGs for technical questions
May 6, 2015	Data due to Oliver Wyman
May - June 2015	Data verification
July - August 2015	"Annual Report" analysis
September 2015 (early)	"Annual Report" publication

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Contact Information - General

General Questions:

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Contact Information - Technical

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