



Monthly MA APCD / Case Mix User Workgroup Webinar

November 24, 2015

Agenda



- Announcements
 - MA APCD Release 4.0 – website updates & user documentation
 - 11/5 User Symposium Recap
- Common Application Issues
- User Questions
- Q&A

MA APCD Release 4.0



- Now accepting applications!
- Features / Enhancements:
 - Data for CY 2010-2014 as paid through June 30, 2015
 - Limited Dataset (LDS) for Non-Government applicants
 - Master Patient Index applied to all years
 - Claim line versioning for the largest payers
 - MassHealth Enhanced Eligibility Data (for Government Applicants only)

MA APCD Release 4.0

Updates to the CHIA Website



Today's Overview:

- Application documents posted to same place
- MA APCD tab has changed
- Location(s) of Documentation for Gov't and Non-Gov't Users
- How to find the Data Submission Guides

MA APCD Home Page



www.chiamass.gov/ma-apcd



This tab will bring you to the homepage

[CHIA Data » MA APCD](#)

Massachusetts All Payer Claims Database

Massachusetts All Payer Claims Database

The Massachusetts All Payer Claims Database (MA APCD) is the most comprehensive source of health claims data from public and private payers in Massachusetts. With information on the vast majority of Massachusetts residents, the MA APCD promotes transparency, and affords a deep understanding of the Massachusetts health care system.

CHIA's enabling statute allows for the collection of data from commercial payers, third party administrators and public programs (Medicare and MassHealth, Massachusetts' Medicaid program). These data sets come both from medical insurers and from specialty insurers and administrators of "carved-out" services including pharmacy, mental health/chemical dependency, dental, and vision.

It is used by health care providers, health plans, researchers, and others to address a wide variety of issues, including price variation, population health and quality measurement.

How is MA APCD unique?

While several states have All Payer Claims Databases, the MA APCD has a unique focus on the efficiencies to be achieved by having a single independent agency - as opposed to multiple state agencies - collect data from payers.

CHIA offers the additional benefit of having the infrastructure to work collaboratively with payers to improve data quality and completeness and having the specialized staff needed to normalize data across payers to support cross-payer analyses.

MA APCD Overview Information	
<ul style="list-style-type: none">• MA APCD Overview• MA APCD Non-Technical Overview (PPT)• MA APCD Data Profile Reports• MA APCD Release Notes (R4.0)	
Steps to Request the Data	
Government Requests	Non-Government Requests
MA APCD Current Release Documentation	
Government <ul style="list-style-type: none">• Documentation Guide• Data Element Specifications	Non-Government (Limited Data Set-LDS) <ul style="list-style-type: none">• Documentation Guide• Data Element Specifications
MA APCD Documentation Archive	
User Support / Contact Us	

Link to overview of the application process and application forms



Link to Release 4.0 user documentation (including LDS Specifications)



LDS Specifications



Protected View This file originated from an Internet location and might be unsafe. Click for more details. Enable Editing										
A3 fx 2										
Level 2 - Medical Claims (MC) File										
Release Level	Data Element Source	Data Element Name	COLUMN NAME	SG Data Type	SG Length	FLAG Carrier Specific TLK	Field Type	Hashed	Redaction	
2	Derived-MC1	Submission Month	RIGHT([SUBMISSIONYEARMONTH],2) as "SubmissionMonth"	int	2		Derived			
2	Derived-MC2	Submission Year	LEFT([SUBMISSIONYEARMONTH],4) as "SubmissionYear"	int	4		Derived			
2	Derived-MC5	Medical Claim ID	MEDICALCLAIMID	int	9		Derived			
2	Derived-MC6	Member ZIP code (first 3 digits)	LEFT([MEMBERZIPCODECLEANED],3) as "Standardized_MemberZIPFirst3"	int	3		Derived			
2	Derived-MC7	Member ZIP Code (5 digits)	LEFT([MEMBERZIPCODECLEANED],5) as "Standardized_MemberZIP_5"	int	5		Derived		Y	
2	Derived-MC8	Submission Control ID	SUBMISSIONCONTROLID	int	5		Derived			
2	Derived-MC9	CHIA Incurred Date (Year and Month Only)	INCURREDDATE	int	6		Derived			
2	Derived-MC10	Highest Version Paid Flag	VERSIONINDICATOR	int	1		Derived			
2	Derived-MC11	Highest Version Denied	HIGHESTVERSIONDENIED	int	1		Derived			
2	Derived-MC12	Highest Version Indicator	HIGHESTVERSIONINDICATOR	int	1		Derived			
2	Derived-MC14	Medicaid/HSN Indicator	MEDICAIDHSNINDICATOR	bit	4		Derived			
2	Derived-MC15	Fully Denied Claim	FULLYDENIEDCLAIM	int	1		Derived			
2	Derived-MC16	Member Link EID	MEMBERLINKEID	bigint	8		Derived			
2	Derived-MC18	Member Age At Service	MEMBERAGEATSERVICECLEANED	int	3		Derived			
2	MC001	Payer	ORGID	varchar	6					
2	MC003	Insurance Type Code/Product	INSURANCETYPECODEPRODUCT	char	2					
2	MC004	Payer Claim Control Number	PAYERCLAIMCONTROLNUMBER	varchar	35					
2	MC005	Line Counter	LINECOUNTER	varchar	4					
2	MC005A	Version Number	VERSIONNUMBER	varchar	4					
2	MC011	Individual Relationship Code	INDIVIDUALRELATIONSHIPCODE	char	2					
2	MC012	Member Gender	MEMBERGENDERCLEANED	char	1		Cleaned			
2	MC015	Member State or Province	MEMBERSTATEORPROVINCE	char	2		Derived			
2	MC017	Date Service Approved (AP Date)	DATESERVICEAPPROVEDAPDATE	int	8					
2	MC017	Date Service Approved (AP Date) - Year	DATESERVICEAPPROVEDAPDATEYEAR	int	4		Derived			
2	MC017	Date Service Approved (AP Date) - Month	DATESERVICEAPPROVEDAPDATEMONTH	int	2		Derived			
2	MC018	Admission Date	ADMISSIONDATE	int	8					
2	MC018	Admission Year	ADMISSIONDATEYEAR	int	4		Derived			
2	MC018	Admission Month	ADMISSIONDATEMONTH	int	2		Derived			
2	MC020	Admission Type	ADMISSIONTYPE	int	1					
2	MC021	Admission Source	ADMISSIONSOURCE	char	1					
2	MC023	Discharge Status	DISCHARGESTATUSCLEANED	char	2					
2	MC024	Service Provider Number	SERVICEPROVIDERNUMBER_LINKAGE_ID	bigint			Derived	Y		
2	MC026	National Service Provider ID	NATIONALSERVICEPROVIDERIDCLEANED	int	10		Cleaned			
2	MC027	Service Provider Entity Type Qualifier	SERVICEPROVIDERENTITYTYPEQUALIFIER	int	1					
2	MC031	Service Provider Suffix	SERVICEPROVIDERSUFFIX	int	1					
2	MC032	Service Provider Specialty (Standard/Carrier-Specific Custom Val	SERVICEPROVIDERSPECIALTYCLEANED	varchar	10	1			Y	
2	MC034	Service Provider State	SERVICEPROVIDERSTATE	char	2		Derived			
2	MC035	Service Provider ZIP Code	SERVICEPROVIDERZIPCODECLEANED	varchar	9		Derived		Y	

Data Submission Guides

CHIA.

www.chiamass.gov/information-for-data-submitters/



[CHIA Data » Information for Data Submitters](#)

Information for Data Submitters

For more information on how to submit the following data sources, please use the links below.

[INET Questions and Answers](#) (including registration and user agreement information)

Payer Data:

- All-Payer Claims Database
- Alternative Payment Methods Data
- Enrollment Data
- Network Average Relative Price Dollar Amount
- Premiums Data
- Provider Payment Methods Data
- Relative Price Data
- Total Medical Expenses Data

Hospital Data:

- Acute Hospital Case Mix Data
- Hospital Charge Book Data
- Hospital Cost Reports
- Hospital Financial Performance Data

Provider Cost Reports:

- Adult Day Health Cost Reports
- Adult Foster Care Cost Reports
- Ambulance Cost Reports
- Community Health Center Cost Reports
- Group Adult Foster Care Cost Reports



Data Submission Guides

CHIA.



HEALTH INFORMATION AND ANALYSIS CHIA DATA ABOUT CHIA

MA APCD	Case Mix Data	Information for Data Submitters	Hospital and Other Provider Data	Public Records Request
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CHIA Data » MA APCD » Information for Data Submitters

Information for Data Submitters: MA APCD

CHIA collects health care information from private and public health care payers, including third-party administrators. This information includes:

- Medical Claims
- Pharmacy Claims
- Dental Claims
- Member Eligibility
- Provider
- Product
- Benefit Plan Control Total Files



RESOURCES OF MA APCD DATA SUBMITTERS

- Technical Advisory Group Webinars
- Data Submission Guides
- Related Regulations

Data is collected monthly through [CHIA-INET](#), a web-based transaction service. Data submitters register to submit data to CHIA by completing:

- [A Business Partner Security Agreement Form](#)
- [A User Agreement for Insurance Carriers](#)

Registration forms should be sent to chia.data@state.ma.us.

For more information about INET, please see [INET Questions & Answers](#). For any other questions related to MA APCD data reporting, please email CHIA at apcd.data@state.ma.us.

CENTER FOR HEALTH INFORMATION AND ANALYSIS



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CONNECT WITH CHIA

LOGIN TO INET

PRIVACY STATEMENT

CHIA IS AN AGENCY OF THE COMMONWEALTH OF MASSACHUSETTS



WWW.MASS.GOV

Data Submission Guides



www.chiamass.gov/apcd-data-submission-guides/



HEALTH INFORMATION AND ANALYSIS CHIA DATA ABOUT CHIA

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[CHIA Data](#) » [MA APCD](#) » [APCD Data Submission Guides](#)

All Payer Claims Database Data Submission Guides

Version 4.0

User Submission Guides	Format
Medical Claims File Submission Guide	PDF Word
Pharmacy Claims File Submission Guide	PDF Word
Dental Claims File Submission Guide	PDF Word
Member Eligibility File Submission Guide	PDF Word
Product File Submission Guide	PDF Word
Provider File Submission Guide	PDF Word
Benefit Plan Control Total File	PDF Word
Supplemental Diagnosis File Submission Guide	PDF Word
File Edits	
Preliminary List of Version 4 File Edits (includes edits to Medical Claims, Dental Claims, Pharmacy Claims, Member Eligibility, Product File, Provider File, Benefit Plan Control Total File and Supplemental Diagnosis File)	Excel

Version 3.1

User Submission Guides	Format
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MA APCD User Symposium



- Held November 5th in Boston
- Sponsored by the Blue Cross Blue Shield Foundation of MA
- Included an update on the MA APCD, a user panel and a discussion on future MA APCD enhancements
- ~85 attendees

Goals of the User Symposium



- Highlight research that has been made possible as a result of the MA APCD
- Provide an opportunity to share best practices in using the MA APCD
- Encourage discussion about future opportunities to enhance the MA APCD in an effort to continuously support data-driven research and policy development in the Massachusetts health care sector
- Inform CHIA's efforts to foster continuous improvement in both data quality and processes for data acquisition and release

Key Takeaways and Recommendations



- Expand and Improve Data Collection
 - Increase data elements collected to enhance and expand the policy and research questions that can be addressed based on this data source
 - Examples:
 - Plan Design Information (including benefit design, network structure (tiered network, limited network, etc.)
 - Demographic information – race/ethnicity fields, improvement in demographic data (e.g., age and gender) captured within prescription drug claims
 - Ensure collection and comprehensiveness of substance use disorder data

Key Takeaways and Recommendations



- Reduce Latency
 - CHIA has recognized concerns associated with time between request for data, review process, and receipt of data (if approved)
 - Developed expedited limited data set (LDS) in response to this concern
 - CHIA is reducing the run-out period and enhancing its IT processes so 2015 MA APCD data will be available in June 2016

Key Takeaways and Recommendations



- Improve Usability of the Data
 - Enhance ability to link providers to practices and systems (akin to master patient index, develop master provider index)
 - Identify opportunities and mechanisms to link to other state agency data (e.g., birth/death data)
 - Reduce the complexity and size of the eligibility file and provide more information on MassHealth programs

Key Takeaways and Recommendations



- Expand User Knowledge
 - Continue current user workgroups, but also consider development of additional “interest groups” based on specific issues/areas of interest (e.g., prescription drugs, complex patients, methods, etc.) to identify opportunities for sharing best practices for coding, algorithm development, etc.
 - Use CMS’s Research Data Assistance Center (ResDAC) as an example of a useful resource for user support and training



Common Application Issues and Questions

MEIDs for Subsequent Data Requests



- If you currently have MA APCD data and are applying for a new year of data, you should request refreshes of all previous years of data that you received
 - New MEIDs are generated for each release
(example: if you previously received Release 3.0 with MEIDs for 2010-2013, those MEIDs will not match the MEIDs in Release 4.0 for the same years)
 - Some data may also be more complete
 - No additional cost

Application Revisions



- Please remember to “lock” your application on IRBNet after you’ve finished making revisions to your application
- Locking the application will send an automatic notification to CHIA staff letting them know that your revisions are complete and uploaded

Hard Drives



- Please remember to return your hard drive to CHIA after you've loaded your data
- CHIA has a limited number of hard drives, so help us ensure we have a steady supply ready to deliver data to the MA APCD user community



User Questions

Question: Why were Discharge Hour and Admission Hour excluded from the Limited Data Set?



Answer: Due to missing data from one of the high volume carriers, the discharge hour and admission hour for acute care inpatient admissions are not complete.

In checking acute care admissions/discharges for one month (January 2012), the discharge hour was 65% complete and the admission hour 74%.

In addition, inconsistencies were found in how providers define discharge hour, with some simply using computer software default time for the beginning of the day '0000' hours. In speaking with providers on how they define time, some record the time of written order to admit/discharge, while others record the time the patient physically leaves the facility.

Once data quality issues are resolved, these data elements might be included in a future release of the Limited Data Set.

Question: Does CHIA have any data at all on Veterans?



Answer: Hospital inpatient discharge case mix data contains a Veterans Status indicator. This field code indicates the patient's status as a **United States veteran**.

FY2012 to FY2014 Veterans Inpatient Discharge Volume

The recent decrease in Veteran Inpatient volume has paralleled the over decreasing trend in inpatient utilization.

	FY2012	FY2013	FY2014
Distinct VA Patients	43,423	42,815	39,807
Total VA Inpatient Discharges	67,426	65,605	61,234

Also, MA APCD Medical Claims reflects the portion of payments made by private carriers for medical care provided at VA facilities.

Question: Does MA APCD cover claims for college students or other young people living in MA, but who are covered by their parent's out-of-state payers?



Answer: Yes, it does to the extent the parents' carriers are required to submit to MA APCD. ME012 (Individual Relationship Code) allows you to determine the Member to Subscriber Relationship and ME061 (Student Status) allows you to determine the Member's Student Status.

Question: Our project includes linkage of MA APCD inpatient records to pharmacy claims to determine post discharge medication use and we have been unable to get expected. Does the Medical Claims and Pharmacy Claims have a low linkage rate?

To answer this questions, we ran two tests:

Test 1: One month of medical claims data for beneficiaries with a **principal diagnosis of V681 (Issue of Repeat Prescription)** was linked to pharmacy claims. The rationale for using V681 is that if a pharmacy claims match failure occurred for a diagnosis related to refills, this would provide the best evidence of a linkage problem. In MC file, there were **454 distinct MEIDs** with this V681 diagnosis. In the PC file, 95% of the MEIDs (**431 distinct MEIDs**) successfully linked with the MC file.

Test 2: One month of acute care hospital inpatient medical claims were linked to pharmacy claims. Rehab, nursing, mental health, and other specialty hospitals were excluded. To get an estimate of expected inpatient distinct MA APCD cases, we obtained the case mix inpatient discharge distinct count for non-Medicare patients under 65 years old for the month of interest (n = 25,814). The MA APCD inpatient distinct count was 6% less than case mix (n=24,126). In the PC file, 96% of MEIDs (**23,059 distinct MEIDs**) successfully linked with the MC file.

Answer: No, the MA APCD Medical Claims and Pharmacy Claims do not have a low linkage rate.

Questions?



- General questions about the APCD:
(CHIA-APCD@state.ma.us)
- Questions related to APCD applications:
(apcd.data@state.ma.us)
- Questions related to Case Mix:
(casemix.data@state.ma.us)

REMINDER: Please include your **IRBNet ID#**, if you currently have a project using CHIA data

Calendar



- December 17 – Data Release Committee Meeting
[a week early]
- December 22 – Next User Workgroup Webinar