

## ADMINISTRATIVE BULLETIN 17-02

### 957 CMR 8.00: APCD and Case Mix Data Submission

Effective August 1, 2017

The Center for Health Information and Analysis (Center) is issuing this Administrative Bulletin pursuant to 957 CMR 8.07(1) to notify Health Care Payers required to submit claims data to the Center in accordance with 957 CMR 8.00 of changes to the Massachusetts All-Payer Claims Database (MA APCD) file submission guidelines.

In order to reduce CHIA's footprint of patient identifying information within the MA APCD, the Center is issuing this Administrative Bulletin to update data submission requirements in the existing Data Submission Guides. The Center recognizes that reducing its patient identifying information footprint is in all parties' best interests and will further protect individual privacy. The updates include removing certain data elements, hashing other data elements before submission to the Center, and adding a requirement that Health Care Payers may not submit patient identifying information in any fields unless specifically instructed to do so within the Data Submission Guides. Additional direction is provided within the Data Submission Guides in order to clarify requirements and provide code, edit and category/threshold updates.

The following table lists data elements with updated specifications. Technical specifications for these fields are found within the Data Submission Guides.

Element	Element Name	Guideline Change
ME009, MC008, PC008, DC008	Plan Specific Contract Number	Update category/threshold
ME010, MC009, PC009, DC009	Member Suffix or Sequence Number	Update category
ME015, MC014, PC014, DC014	Member City Name	Remove and update category/threshold
ME016, MC015, PC015, DC015	Member State	Update category/threshold

ME017, MC016, PC016, DC016	Member Zip Code	Modify to 5 Digit Only and update category/threshold
ME043, MC082, PC061, DC043	Member Street Address	Remove and update category/threshold
ME044, MC140, PC109, DC058	Member Street Address 2	Remove and update category/threshold
ME023	Filler	Update length
ME027	Other Ethnicity	Remove and update threshold
ME034	Member language preference – Other	Remove and update threshold
ME039	Health Care Home Name (PCMH)	Remove and update threshold
ME058	Subscriber Street Address	Remove and update threshold
ME108	Subscriber City Name	Remove and update threshold
ME109	Subscriber State	Update threshold
ME110	Subscriber Zip Code	Modify to 5 Digit Only
MC006, PC006, DC006	Insured Group or Policy Number	Update category/threshold
MC007, PC007, DC007	Subscriber SSN	Remove and update category/threshold
MC010, PC010, DC010	Member SSN	Remove and update category/threshold
MC013, PC013, DC013	Member Date of Birth	Remove DAY portion of date and update category/threshold
MC101, PC101, DC050	Subscriber Last Name	Remove and update category/threshold
MC102, PC102, DC051	Subscriber First Name	Remove and update category/threshold
MC103, PC103, DC052	Subscriber Middle Initial	Remove and update category/threshold

MC104, PC104, DC053	Member Last Name	Remove and update category/threshold
MC105, PC105, DC054	Member First Name	Remove and update category/threshold
MC106, PC106, DC055	Member Middle Initial	Remove and update category/threshold
MC240, PC119, DC066	GIC ID	Remove and update category/threshold
MC107	ICD Indicator	Update category