

Commonwealth of Massachusetts
Center for Health Information & Analysis (CHIA)
Request for Supplement to a Non-Government Application for Data

This form is to be used only to request de minimis changes to the data specifications in connection with a previously-fulfilled Non-Government application for APCD data. Applicants requesting more than a de minimis change may be required to submit a new application for data. For example, requests for additional years of data for a previously-approved project or requests to use existing datasets for a new project or purpose are not de minimis, and such applicants must submit a new application form.

Applicants receiving a supplemental extract may be invoiced for a Support/Production fee in connection with the creation of the extract, in accordance with the applicable fee schedule.

I. General Information

APPLICANT INFORMATION	
Applicant Name:	Pranav Mehta
Title:	SVP Product & Business Planning
Organization:	Harvard Pilgrim Health Care
Project Title:	MA Market and Medical Cost Assessments
Date of Original Application:	2/28/14; revised 5/6/14
Date of Request for Supplement:	6/11/15
Objectives (240 character limit)	Our objective is to apply the data we receive to inform us on how we might continue making our plans affordable and accessible, particularly in providing consumers with what they want in terms of network based products.

II. Requested Supplemental Data Element(s)

Please summarize requested changes to the data specifications for this project and describe why access to the requested data element(s) is necessary to achieve the project's objectives. Please attach a data specification worksheet identifying the supplemental element(s) requested, including any elements required to link the supplemental element(s) to the existing dataset.

We are requesting four additional data elements; they are in the Medical Claims and Member Eligibility tabs:

- 1) National Billing Provider ID: CHIA has recommended this field as a way to more easily categorize types of like providers.
- 2) Member Birth (Year Only): Would allow HPHC to aggregate data by age bands and give us the ability to segment high-level results into adult vs. pediatric categories.
- 3) Date of Last Activity: Would be used as a proxy to establish member months.
- 4) Member Entity Link ID: This would allow us to link members across carriers.

KEY QUESTIONS

- 1) In the attached data specification worksheet, the only elements designated as "Y" for inclusion in the Medical Claims and Member Eligibility tabs are the four above so as to avoid confusion with what we have already received. Likewise, only Medical Claims and Member Eligibility have been requested in the Request Form tab. (All other tabs have been left untouched.) *Please advise if another approach should have been taken.*
- 2) We have been advised that we would receive the additional data elements in a hard drive containing linking variables that would enable us to link the new elements with the initial data set we have already loaded. *In that context, will a CHIA technical SME be able to identify the linking columns for us?*

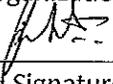
III. Assurances

The undersigned acknowledges that any data provided by the Center for Health Information and Analysis pursuant to this Request for Supplement is subject to the terms and conditions of the data use agreement executed in connection with the original application identified above in Section I. Applicants are further subject to the requirements and restrictions contained in applicable state and federal laws regarding data privacy and security.

IV. Signature

For: Harvard Pilgrim Health Care

Organization



Authorized Signature

6/11/2015

Date

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