The All-Payer Claims Database

Release 2.1 Enhancements
Release Notes

April 2014

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Massachusetts All-Payer Claims Database
Release 2.1
Release Notes – April 2014

The release includes medical, pharmacy and dental claims with dates of service between January 1, 2009 to December 31, 2012 (paid through June 30, 2013) and information for the same period about member eligibility, providers and products. Documentation Guides for this release can be found at http://www.mass.gov/chia/researcher/hcf-data-resources/apcd/accessing-the-apcd.html.

This release includes data from Medicaid (MassHealth) and Medicare in addition to data from private payers. Questions concerning APCD Release 2.1 may be directed to apcd.data@state.ma.us.

The application process remains the same. Updated application materials reflecting the new data elements in release 2.1 can be found on the CHIA website http://www.mass.gov/chia/. Applicants with 2.0 data must submit an amendment with the account team. Release 2.0 data can be enhanced to 2.1 with the addition of additional files provided as a supplemental file. Your account team can provide you with the details

APCD data collection and data release are governed by regulations which are available on the APCD website (see http://www.mass.gov/chia/gov/laws-regs/chia-regulations.html).

HIGHLIGHTS OF APCD 2.1 ENHANCEMENTS

- Release 2.1 includes all the **same data** as Release 2.0, plus the following enhancements:
    - More claim lines have been versioned in the Medical Claims file.
    - The addition of an assigned unique personal Enterprise ID--Member Link EID so members can be tracked across payers and products. Please see technical notes for a description of the probabilistic model used to create these IDs.
    - The creation of a Member Link Matching Confidence Level (MCL) data element – for use with Member Link EID to help uses identify "stronger matches" Please see technical notes for information about this data element and how it was derived.

- Medicals Claims for three additional carriers are versioned using carrier-specific logic. As in Release 2.0, this logic is the source of Derived-MC13 Highest Version Denied.
- A Member Link EID (Enterprise ID) was created on the claims and eligibility files to help users uniquely identify individual members, and allowing users to link members across data files while protecting patient privacy. .
- The creation of Member Link MCL on the claims and eligibility files which represents the Matching Confidence Level (MCL) for the Member Link EID, informing data users on the reliability of the linkages.

Release 2.1 Includes Supplemental data for 4 file types:

        DC   **Dental Claims**
        MC   **Medical Claims**
        ME   **Member Eligibility**
        PC   **Pharmacy Claims**

1. **Dental Claims - DC File, added two new data elements:**
    a. Derived-DC11   Member Link EID
    b. Derived-DC12   Member Link MCL

2. **Medical Claims - MC File, added three new data elements plus one updated element:**
    a. Updated MCXXX   Highest Version Flag
    b. Add Derived-MC13   Highest Version Denied
    c. Add Derived-MC14   Member Link EID
    d. Add Derived-MC15   Member Link MCL

3. **Member Eligibility - ME File, added two new data elements:**
    a. Derived-ME12   Member Link EID
    b. Derived-ME13   Member Link MCL

4. **Pharmacy Claims - PC File, added two new data elements:**
    a. Derived-PC12   Member Link EID
    b. Derived-PC13   Member Link MCL