

Massachusetts All-Payer Claims Database: Technical Assistance Group (TAG) Substance Abuse Denial Study

August 26, 2014



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Agenda

- Review key dates, survey, and specifications
- Answer questions

Key Dates

- August 6th - Massachusetts legislature passed Chapter 258 of the Acts of 2014.
- August 21st – Substance Abuse Survey sent to carriers
- **Today**, August 26th – TAG Webinar for Questions
- Friday, September 12th – Submission Deadline

Substance Abuse Denial Study - August 2014

As required by Chapter 258 of the Acts of 2014, Section 35 ("An Act to increase opportunities for long-term substance abuse recovery").



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INSTRUCTIONS:

Please complete the request below with unduplicated counts of claims incurred in calendar year 2013 and adjudicated through June 30, 2014 for all Massachusetts residents with primary medical coverage only.

Please include fully-insured commercial lines of business only.

The denied status should be based on the final disposition of the claim.

See **Specifications** tab for definition of substance abuse claims.

Carrier Name:

MA APCD Org ID:

1. Number of Submitted Substance Abuse Claims:

2. Total Charges on Submitted Substance Abuse Claims:

3. Number of Substance Abuse Claims Fully Denied:

4. Total Charges on These Denied Claims:

5. Number of Substance Abuse Claims Partially Denied:

6. Total Charges on These Denied Claims:

7. Breakdown of Denials by Reason:

(Express as a percent of total denied claims (Line 3 + Line 5))

- Patient not eligible
- Non-covered benefit
- Exceeded benefit limit (days, visits, etc.)
- Non-covered provider
- Determined to be not medically necessary
- Other medical policy
- All other reasons (explain in attachment)

	Should sum to 100%

Contact Person:

Email Address:

Phone:

Please return to your CHIA liaison by September 12, 2014.

Questions? Please contact your Liaison. Thank you.

Survey Specifications

- Incurred in CY 2013 and adjudicated thru 6/30/14.
- Insured lines of business only, not self-insured.
- Carrier is primary insured.
- Based on final disposition of claim.
- Massachusetts residents only, regardless of situs.
- Unduplicated claim counts.
- Submitted claims includes both allowed and denied claims.
- Substance abuse claims defined by four conditions.

Definition of Substance Abuse Claims

If the **REVENUE CODE** on any claim line contains a value in the revenue code table,

OR the **PRIMARY HCPCS PROCEDURE CODE** on any claim line contains a value in the HCPCS procedure code table,

OR the **PRIMARY CPT PROCEDURE CODE** equals '90882' **AND** the procedure modifier 1 or procedure modifier 2 equals 'HF' or 'HR',

OR the **PRIMARY ICD-9-CM PROCEDURE CODE** on any claim line contains a value in the ICD-9-CM code table,

the ENTIRE claim should be considered a claim related to substance abuse.

Sample Questions

‘Can any of this information be pulled from the APCD?’

No. APCD submission guidelines say not to submit denied claims. While some carriers in fact do submit denied claims, it’s not consistent across carriers. Thus, this request is needed to meet our legislative mandate.

‘Our TPA that processes our behavioral health claims has many hundreds of payment reason codes that they use with no high level classification. I am unsure if we will be able to have these mapped to the seven categories listed in time for reporting on September 12. Other carriers may have a similar issue.’

Please make your best efforts within the time allowed. If you need to sample or estimate, that is fine. We are not reporting by carrier.

Sample Questions

‘Should we include mental health carve-out business?’

Yes.

‘The list of 7 denial reason categories that is given, is there a priority ranking for them? Often a claim will have more than one denial reason code on it, in this case, we need to know which category to assign the claim to. For example a claim could be denied because it is not a covered benefit but it also is denied because it is a non-covered provider. Which category should the claim go in?’

For the sake of comparisons and ease, please use the priority order noted on the report template.

Sample Questions

‘Regarding the notes below, do we include claims where the substance abuse line was paid but other non-substance abuse lines were denied? If so what category do we put this in?’

Only include those claims where a substance abuse line was denied. If the substance abuse line was denied but other non-substance abuse lines were paid you would include that in the ‘Number of Substance Abuse Claims **Partially Denied.**’

Other Questions

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