Massachusetts All-Payer Claims Database:
Technical Assistance Group (TAG)
May 14, 2013

**AGENDA**

* Administrative Bulletin 13-04 Published
* APCD Version 3.0 Submission Timeline
* Submission Guide and Variance Update
* Testing Update
* Field Highlights of the Month

**ADMINISTRATIVE BULLETIN**

* HEALTH CONNECTOR RISK ADJUSTMENT PROGRAM UPDATES
	+ New fields on Member Eligibility
	+ New file type
* EFFECTIVE NOVEMBER 2013 FOR SUBMISSIONS OF OCTOBER DATA

**BULLETIN: ME UPDATES**

|  |  |  |
| --- | --- | --- |
| ELEMENT | ELEMENT NAME | DESCRIPTION |
| ME120 | Actuarial Value (AV) | The actuarial value of the risk adjustment covered plan the member is enrolled in |
| ME121 | Metal Level | Standardized plan level in metal reference |
| ME126 | Risk Adjustment Covered Plan (RACP) | Member enrolled in RACP Indicator |
| ME127 | Billable Member | Billable Member Indicator |
| ME128 | Benefit Plan Contract ID | Identifier for the benefit plan the member is enrolled in as of the 15th of the month |
| ME129 | Member Benefit Plan Contract Enrollment Start Date | Date the member is enrolled in the benefit plan |
| ME130 | Member Benefit Plan Contract Enrollment EndDate | Date the member’s enrollment ends with the benefit plan |
| ME132 | Total Monthly Premium | Employer + Subscriber’s total contribution to monthly premium |

**BULLETIN: ME UPDATES**

Plans not involved in Risk Adjustment will code ME126 = 2.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Element | Element Name | Description | APCD Usage and Guidelines | Condition | Category | % |
| ME126 | Risk Adjustment Covered Plan (RACP) | Member enrolled in RACP Indicator | Report RACP status as of the 15th of the month.EXAMPLE: 1 = Yes, the member was enrolled in RACP as of the 15th of the month. | All | A0 | 100 |
|  | Value | Description |  |  |  |  |
|  | 1 | Yes |  |  |  |  |
|  | 2 | No |  |  |  |  |

ME120, ME121, ME127 – ME130 require no input when ME126 = 2.

**BULLETIN: ME UPDATES**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Element | Element Name | Description | APCD Usage and Guidelines | Condition | Category | % |
| ME132 | Total Monthly Premium | Employer + Subscriber’s total contribution to monthly premium | Report the total monthly premium at the subscriber level. Report 0 if no premium is charged. Do not code decimal or round up/down to whole dollars, code zero cents (00) when applicable. EXAMPLE: 150.00 is reported as 15000; 150.70 is reported as 15070 | Required when Submitter is identified as a Risk Holder Submitter and ME060 = A, I, O, OR P –and- Member = Subscriber | A0 | 100 |

**BULLETIN: BENEFIT PLAN CONTROL TOTAL FILE**

* REQUIRED FOR RISK ADJUSTMENT PROGRAM PLANS ONLY
* EFFECTIVE NOVEMBER 2013 FOR SUBMISSIONS OF OCTOBER DATA

**VERSION 3.0 SUBMISSION TIMELINE**

* PRODUCTION DATA NOW DUE **NOVEMBER 2013** FOR OCTOBER 2013 DATA
* THIS WILL ALLOW:
	+ ADDITIONAL TIME FOR UPDATES
	+ ADDITIONAL TIME FOR TESTING
	+ DECREASE NEED FOR VARIANCES
	+ DECREASE BURDEN ON PAYERS REQUESTED TO MEET OTHER DEADLINES AS WELL

**UPDATES**

* SUBMISSION GUIDE UPDATE
* VARIANCE FORM UPDATE

**TESTING UPDATE**

* TESTING PROCESS
* FORMAT TESTING ONLY
* FULL EDIT TESTING

**FIELD HIGHLIGHTS**

* Product File requirements
* Specific Field Requirements
	+ Delegated Benefit OrgID
	+ Risk Type
* QA Specific Fields
	+ Insured Group or Policy Number (DC/MC/ME/PC006)
	+ Patient Control Number
	+ Payer Claim Control Number (DC/MC/PC004)

**PRODUCT FILE**

PRODUCT FILE IS REQUIRED FROM TPA/PBM/DBAs

|  |  |  |
| --- | --- | --- |
| How does CHIA define a Product | A Product starts as a base offering, often described by a model that it conforms to; HMO, PPO, Indemnity, etc. General accepted values appear in PR004. For non-carriers, a Product will be defined by the business and reported in a free text field to define purpose when PR004 is populated with ZZ = Other | CHIA requires that the disclosure of Pharmacy Benefit Management, Claims Processing, and Third Party Administrator organization business products, as well as Carrier-based products, to accurately assign member detail attribution for aggregate reporting and utilization. |
| What to report for License Type if not a ‘carrier’ | The Product file now has an element to allow for further explanation when License Type is set to PBM or Other | CHIA added two additional values so that PBMs and other non-insurance businesses can report products that they ofefr their clientele |
| What to report for Risk if not a ‘carrier’ | The Product file now has an element that allows for further explanation when Risk is set to Other | CHIA added additional values to the Risk Table to differentiate Risk Offerings. One of the adds is an Other that sets the requirement to populate a text element for explanation |

**DELEGATED BENEFIT ORGID**

* DELEGATED BENEFIT ORGID: MC100, PC072, DC025
* REQUIRED FROM BOTH THE RISK HOLDER AND THE TPA/PBM/DBA
* USED FOR LINKAGE TO ENABLE COMPLETE CLAIM ANALYSIS

**RISK TYPE**



**QA SPECIFIC FIELDS**

|  |  |  |
| --- | --- | --- |
| ELEMENT | DATA ELEMENT NAME | LENGTH |
| DC006 | Insured Group or Policy Number | 30 |
| MC006 | Insured Group or Policy Number | 30 |
| ME006 | Insured Group or Policy Number | 30 |
| PC006 | Insured Group or Policy Number | 30 |
| MC068 | Patient Control Number | 20 |
| DC004 | Payer Claim Control Number | 35 |
| MC004 | Payer Claim Control Number | 35 |
| PC004 | Payer Claim Control Number | 35 |

**WRAP-UP**

QUESTIONS?

**TAG SCHEDULE**

* JUNE 11, 2013 at 10:00 AM Please note time change
* JULY 9, 2013 at 2:00 PM

APCD Version 3.0 Schedule

Production Due November 2013

**QUESTIONS**

* Questions emailed to APCD Liaisons
* Questions emailed to DHCFP

 (CHIA-APCD@state.ma.us).

* Questions on the Data Release and Application emailed to DHCFP (apcd.data@state.ma.us)