

ARKANSAS APCD DATA USERS GROUP

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Architecture

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Agenda

- Welcome
- Topics
 - Featured Speaker Dr. Bradley C. Martin, UAMS
 - Social Network Analysis of Opioid Prescribing
 - Trends in Hereditary Cancer Testing
 - Data Request Process Review
 - Data User Questions from Other APCDs
- Latest APCD Release Information and Data Tips
- Questions/Discussion





Presenters

- Kenley Money, MA, MFA Director of Information Systems Architecture/ACPD Director, ACHI
- Bradley C. Martin, PharmD, PhD, College of Pharmacy, University of Arkansas for Medical Sciences



Featured Speaker – Dr. Bradley C. Martin, UAMS





Data Request Process Review





Standard Data Request Process

Application Submission

- Data requester submits data request
- AR APCD Team reviews data request
- AR APCD Team works with data requester on edits and updates

Application Approval

- Arkansas HTI
 Advisory Board
 reviews
 application and
 makes
 recommend ations
- AID
 Commissioner reviews and approves

Request Agreements

- Data Use Agreement is executedAID invoices
- data requester
- Data requester makes full payment

Data Fulfillment

- AR APCD team pulls and packages data request
- AR APCD team encrypts and delivers data request package

Project Execution

 Data requester executes project

Output Review

 Data requester submits output to HTI Advisory Board and AID Commissioner for review and approval

Output Presentation/ Publication

 Data requester can externalize the project output after approval

Arkansas HTI Data Request Process:

https://www.arkansasapcd.net/Other/DataReleaseDocs/





Application Tips – Standard Data Request

- Be as detailed as possible when describing the project. The downstream reviewers must understand exactly how the data will be used and what the intended output is. *This detailed description can be on a separate document.*
- The application contains a section **Evaluation Criteria**. This section is often forgotten and we have to send the application back to the requester for inclusion.
- You must always include project participant resumes.
- Finally, you MUST have your project output reviewed **BEFORE** presenting it externally. No exceptions.





ABI Subscription Data Request Process

Application Submission

- Student or researcher submits data request to ABI*
- ABI reviews data request, working with student or researcher to finalize application
- ABI sends application to AID**

Application Approval

- AID reviews and approves ABI data request
- AID notifies ABI of request approval
- ABI notifies student/ researcher of approval

Data Fulfillment

 Student or researcher works with ABI for access to the ABI copy of the Arkansas HTI/APCD data. NOTE: This data comes from the subscription copy, not from ACHI.

Project Execution

 Student or researcher executes project

Output Review

 Student or researcher submits output to HTI Advisory Board and AID Commissioner for review and approval

Output Presentation/ Publication

 Student or researcher can externalize the project output after approval

^{**}Arkansas Insurance Department (AID)





^{*}Contact Dr. Robert E. McGehee, <u>REM@uams.edu</u>

Application Tips – ABI Subscription

- Be as detailed as possible when describing the project. The downstream reviewers must understand exactly how the data will be used and what the intended output is. *This detailed description can be on a separate document.*
- ABI makes at least two versions of the Arkansas APCD available on older one and newer one. Be sure you know which one you need when you are in the data fulfillment step.
- Finally, you MUST have your project output reviewed **BEFORE** presenting it externally. No exceptions.









- Massachusetts
 - Question: Some athletic trainers have National Provider IDs (NPIs). How
 is an athletic trainer defined as a medical service provider? Does the
 Massachusetts APCD provider file contain data on athletic trainers and
 does the medical claims file contain claims submitted by athletic trainers?

Resource: chiamass.gov/assets/Uploads/User-Workgroup-February-2022.pdf





- Answer: Healthcare Provider Taxonomy Code Set, which is maintained by the National Uniform Claim Committee, has assigned the healthcare provider taxonomy code '2255A2300X' to athletic trainers
- Athletic trainers are defined in the taxonomy code set and by the National Athletic Trainers' Association as follows:
 - Athletic trainers are allied health care professionals who work in consultation with or under the direction of physicians, and specialize in the prevention, assessment, treatment and rehabilitation of injuries and illnesses
 - National board certification is generally required as a condition of state licensure and employment
 - Clinical practice includes emergency care, rehabilitation, reconditioning, therapeutic exercise, wellness programs, exercise physiology, kinesiology, biomechanics, nutrition, psychology and health care administration (source: nata.org)
 - The Massachusetts APCD provider file contains data on 264 athletic trainers and the claims table contains medical claims submitted by athletic trainers; see Table 1 for 10 procedure codes





Table 1. Top 10 Medical Claims Procedures Provided by Athletic Trainers in MA APCD

CPT Code	Description
	Therapeutic procedure, 1 or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of
97110	motion and flexibility
	Manual therapy techniques (e.g., mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions,
97140	each 15 minutes
	Therapeutic procedure, 1 or more areas, each 15 minutes; neuromuscular reeducation of movement, balance, coordination,
97112	kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities
	Therapeutic activities, direct (one-on-one) patient contact (use of dynamic activities to improve functional performance), each
97530	15 minutes
97001	Physical therapy evaluation
97014	Application of a modality to 1 or more areas; electrical stimulation (unattended)
97035	Application of a modality to 1 or more areas; ultrasound, each 15 minutes
	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: A
	detailed history; A detailed examination; and Medical decision making of moderate complexity. Counseling and/or coordination
99284	of care with o
98940	Chiropractic manipulative treatment (CMT); spinal, 1-2 regions
97002	Physical therapy re-evaluation





Top 10 Medical Claims Procedures – Arkansas APCD Athletic Trainers

CPT Codes	Description	Claims
97110	Therapy procedure using exercise to develop strength, endurance, range of motion and flexibility, each 15 minutes.	18,082
97140	Manual therapy techniques, 1 or more regions, each 15 minutes (Mobilization/manipulation, manual lymphatic drainage, manual traction)	4,923
97014	Electrical stimulation (unattended). This untimed code is not appropriate for dysphagia treatment if the SLP must be present to activate electrical stimulation at the appropriate moment.	3,831
G0283	Elec. stimulation (unattended), to one or more areas for indication(s) other than wound care, as part of a therapy plan of care.	2,423
99213	Established patient office or other outpatient visit, 20-29 minutes.	2,183
97112	"Neuromuscular reeducation of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities." Like therapeutic activity, therapeutic procedures also apply to one or multiple body parts and require direct contact with the proper provide	1,486
97161	Physical therapy evaluation: low complexity, requiring these components: A history with no personal factors and/or comorbidities that impact the plan of care.	1,123
76536	Ultrasound, soft tissues of head and neck, real time with image documentation.	1,052
97010	Supervised modality: Any physical agent applied to produce therapeutic changes to biologic tissue; includes but not limited to thermal, acoustic, light, mechanical, or electric energy.	1,038
99214	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least two of these three key components: a detailed history, a detailed examination and medical decision making of moderate complexity.	762





Distinct Arkansas APCD Claim Counts by Year

Service Year	Distinct Athletic Trainer Provider Claims
2013	237
2014	1015
2015	3,090
2016	2,724
2017	3,007
2018	2,905
2019	2,864
2020	4,333
2021	4,512





- Massachusetts
 - Question: We are interested in looking at outpatient births occurring at home and in birthing centers overseen by midwives? Does the MA APCD contain data on midwives and birthing centers?

Resource: chiamass.gov/assets/Uploads/User-Workgroup-November-2021.pdf



- Answer: Yes, the MA APCD has data on over 10,000 midwives practicing in all 50 states including Washington, DC, with the highest volume of data from midwives in Massachusetts, followed by New Hampshire, Connecticut, and New York and less than 100 doulas. Three taxonomy codes are used to determine if the medical care provider is a midwife or doula.
- The MA APCD also contains data on 118 birth centers located. Please note that births can
 occur in other outpatient community health centers, clinics and even in ambulances. However,
 for an outpatient birth center which is a health care facility for childbirth typically staffed by
 midwives, doulas, and other obstetrics specialists, one taxonomy code can be used.

Taxonomy	Description
176B00000X	Midwife
367A00000X	Advanced Practice Midwife
374J00000X	Doula
261QB0400X	Birthing Center





- The Arkansas APCD has data on over 200 midwives and birthing centers in 42 states with the highest volume of data from midwives in Arkansas, followed by Tennessee, Texas, and Missouri
- Arkansas provider and claim counts:

Taxonomy	Description	Providers	Distinct Claims
176B00000X	Midwife	71	95,070
367A00000X	Advanced Practice Midwife	164	57,225
374J00000X	Doula	0	0
261QB0400X	Birthing Center	5	8,930





Top 10 Medical Claims Procedures – Arkansas APCD Birthing Centers

T1015 99213 99214	Description Clinic visit/encounter, all-inclusive as maintained by CMS falls under Other Services. Established patient office or other outpatient visit, 20-29 minutes. Office or other outpatient visit for the evaluation and management of an established nation, which requires at least two of those	18,697 10,514
99214		10,514
	Office or other outpetient visit for the evaluation and management of an established nations, which requires at least two of these	
	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least two of these three key components: a detailed history, a detailed examination and medical decision making of moderate complexity.	6,693
99232	Evaluation and Management services to established hospital inpatients after the initial inpatient encounter during subsequent visits.	4,651
	The patient reports fetal movement as an external monitor records fetal heart rate changes. The procedure is noninvasive and typically takes 20 to 40 minutes to perform.	4,615
99233	Identifies unstable patients, or patients with significant new complications or problems.	3,454
99212	Established patient office or other outpatient visit, 10-19 minutes.	3,306
	Collection of venous blood by venipuncture. Each unit of service (UOS) of this code includes all collections of venous blood by venipuncture during a single episode of care regardless of the number of times venipuncture is performed to collect venous blood specimens.	3,239
	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents.	3,211
97110	Therapy procedure using exercise to develop strength, endurance, range of motion and flexibility, each 15 minutes.	2,384





Distinct Arkansas APCD Claim Counts by Year

Service Year	Distinct Birthing Claims
2013	11,521
2014	13,030
2015	14,734
2016	13,877
2017	15,296
2018	14,843
2019	17,262
2020	14,181
2021	16,494





Latest APCD Release Information and Data Tips





Release Information

- Available APCD data
 - Current APCD Data: Jan. 1, 2013, through June 30, 2021
 - Data user resources: <u>arkansasapcd.net/Resources/APCDDataRequestPricing/</u>
 - Release notes for each release
 - Overall coverage dates
 - Source-specific release notes (problematic submitting entities)
 - Universe Counts
 - Other release resources

Helpful Hint:

Refresh linkage methodology by reviewing the Data Attributes deck





Release Information

- Featured Release Information
 - Arkansas Medicaid PASSE Flags (Data Tip: <u>Data Tip 0047</u>)
 - Arkansas Medicaid utilizes TPAs to manage PASSE claims for Medicaid beneficiaries
 - As part of the administration, these TPAs submit the claims to Arkansas Medicaid
 - Both the TPAs and Arkansas Medicaid submit these claims to the Arkansas APCD
 - These are essentially duplicate claims, however finding them between the TPAs and Arkansas Medicaid has been problematic
 - A new solution has been implemented to flag the Arkansas Medicaid version of the claims as PASSE; Note: The TPA version of the claims should be used in analysis, not the Arkansas Medicaid
 - Arkansas Medicaid PASSE claims will NOT be included in data requests unless specifically requested







Always check the Arkansas APCD Data Issues and Tips page for the latest information!





Data Tips and Issues

- Utilize searchable Arkansas APCD <u>data dictionaries</u> & <u>tip sheets</u>
- Something new!
 - Quick link to Featured Data Tips and Issues
 - Monthly <u>Data Tips and Issues email</u>
 - Features new and updated tips and issues
 - Reviews older, still relevant data tips and issues
 - Highlights newly resolved data issues



Click here for the *Arkansas APCD Latest Data Tips* and *Issues* added or updated in the last 30 days.





APCD Technical Support

 Reach out to <u>adrs@achiapcd.atlassian.net</u> for questions about data requests, data use, or pricing



Call to Action

- Sign up for the ACHI Newsletter
- Follow on social media: ACHI and the Arkansas Healthcare Transparency Initiative featuring the Arkansas APCD







- Check out the blog posts on ACHI website
- Next data users group meeting: July 27, 2022





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achi.net/newsletter





