# ARKANSAS APCD DATA USERS GROUP 

07.22.2020

INSPIRING HEALTHY ACTS

## AGENDA

- Welcome
- Topics
- Service location/member location relationships
- How claims versioning affects users
- Grouping diagnosis and procedure codes
- Latest APCD release information and data tips
- Questions/Discussion


## ARKANSAS APCD TEAM

- Kenley Money, MA, MFA - Director of Information Systems Architecture/ACPD Director, ACHI
- Nichole Sanders, PhD - Assistant Director of Analytics, ACHI
- Mike Motley, MPH Director of Analytics, ACHI


## AGENDA

- Welcome
- Topics
- Service location/member location relationships
- How claims versioning affects users
- Grouping diagnosis and procedure codes
- Latest APCD release information and data tips
- Questions/Discussion


## SERVICE LOCATION/MEMBER LOCATION

- Service provider information can be used for several reasons including (but not limited to) network adequacy, utilization, and/or scope of work analyses.
- Service provider as defined in the Arkansas APCD: Entity or rendering/attending provider directly providing the service.
- Submitters are required to populate the service provider data fields with related information about the entity or individual providing the professional or hospital medical service.


## SERVICE LOCATION/MEMBER LOCATION

- Service provider information is found on the medical claim data and must be merged with member/enrollee information for these analyses.
- Relating service provider location with the member location:
- Understand the analytic objective for service providers.
- Determine which member information to use - from the member/enrollment record or the medical claim record.
- Associate the member information with the service provider information based on analytic objectives.


## SERVICE LOCATION/MEMBER LOCATION

- Service Provider Location Fields
- MC026 - National Provider ID (NPI).
- MC028, MC029, MC030 - First, middle, and last name. NOTE: MC030 can be an organization name.
- MC108, MC033, MC034, MC035 - Address, city, state, ZIP code (full ZIP 5).
- Supporting provider information can be found in the Arkansas APCD provider data or National Provider ID (NPI) data sources.*
*NPI data sources can be purchased from data vendors such as CarePrecise or accessed online at npps.cms.hhs.gov/\#/.


## SERVICE LOCATION/MEMBER LOCATION

- Member Location Fields - 2 types
- Member/enrollment record fields:
- ME107 - Member carrier-specific unique member ID
- ME013 - Member gender
- ME014_Year - Member birth year
- ME017_Zip3 - First 3 digits of member ZIP code
- ME016- Member state
- ME162A/ME163A - Plan enrollment and disenrollment dates
- ME173A - Member county
- Claim record fields:
- MC137 - Member carrier specific unique member ID
- MC012 - Member gender
- MC013_Year - Member birth year
- MC016_Zip3 - First 3 digits of member ZIP code
- MC015 - Member state
- MC059 - Service from date


## SERVICE LOCATION/MEMBER LOCATION

- If the analyses requires county-level segmentation and/or coverage periodrelated specificity:
- Merge the member records with medical claims records
- Submitting entity codes: ME001 = MC001
- Member ID: ME107 = MC137
- Birth year: ME014_YEAR = MC013_YEAR
- Gender: ME013 = MC012
- Service date within enrollment dates: MC059 between ME162A and ME163A
- Analytic Examples
- Member ZIP3 (ME017_Zip3) and/or county (ME173A) can be evaluated in relation to the service provider location ZIP code (MC036) or county derived from service provider ZIP code).
- Medical services can be evaluated in relation to the member location by ZIP3 (ME017_Zip3) or county (ME173A) and coverage period.
- Member demographic information such as birth year and gender can be pulled from the member record.


## SERVICE LOCATION/MEMBER LOCATION

- If the analyses does not require that level of specificity
- Use the member information present on the medical claim record
- Member ZIP3 (MC016_Zip3) can be evaluated in relation to the service provider ZIP code (MC036).
- Medical services can be evaluated in relation to the member location by ZIP3 (MC016_Zip3).
- Member demographic information such as birth year and gender can be pulled from the medical claim record.


## AGENDA

- Welcome
- Topics
- Service location/member location relationships
- How claims versioning affects users
- Grouping diagnosis and procedure codes
- Latest APCD release information and data tips
- Questions/Discussion


## CLAIMS VERSIONING

- Changes can occur to medical, pharmacy, and/or dental claims after they have been delivered to the Arkansas APCD.
- These changes - or 'versions' - are received in later submissions to the Arkansas APCD.
- Each submitting entity (SE) has its own set of rules

Less than
10\% of claims
overall
require
versioning. to integrate the changes with existing claims data, resulting in a final 'version' of a claim. This is claims versioning.

## CLAIMS VERSIONING

- The Arkansas APCD has published a document on its website outlining claims versioning methodologies.
- More detailed claims versioning information including examples of the primary approaches can be found in the Arkansas APCD Data Submission Guide in the Claims Versioning section.


## APPROACH \#1 - VERSION NUMBERS

| \# | Payer Claim <br> Control <br> Number | Line <br> Counter | Version <br> Number | Paid Date | Claim <br> Status | Amount | Description |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\mathbf{1}$ | 789 | 1 | 00 | $2014-07-15$ | 0 | $\$ 10$ | Original submission |

## APPROACH \#2 - VERSION DATE

| \# | Payer Claim <br> Control <br> Number | Line <br> Counter | Version <br> Date | Paid Date | Claim Status | Amount | Description |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\mathbf{1}$ | $\mathbf{3 2 1}$ | 1 | 16015 | $2014-07-15$ | Unavailable | $\$ 10$ | Original submission |

## APPROACH \#7 - PHARMACY CLAIMS

| \# | Payer Claim Control Number | Line Counter | Carrier Member ID | Pharmacy Number | Fill Date | Script \# | Fill \# | Claim <br> Status | Amount* | Description |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1 | 567 | 1 | 120 | 100 | 2014-07-15 | 72 | 00 | 0 | \$10 | Original submission |
| 2 | 1589 | 1 | 120 | 100 | 2014-07-15 | 72 | 00 | A | \$20 | New version of Claim 567 |
| 3 |  |  |  |  |  |  |  |  | \$20 | Total claim amount calculated for APCD <br> (Line 2 replaces Line 1) |
| 4 | 2235 | 1 | 120 | 100 | 2014-08-15 | 72 | 01 | 0 | \$20 | Original submission |
| 5 |  |  |  |  |  |  |  |  | \$20 | Total claim amount calculated for APCD (Line 4 only) |
| 6 | 789 | 1 | 120 | 225 | 2015-08-30 | 175 | 00 | 0 | \$30 | Original submission |
| 7 | 1864 | 1 | 120 | 225 | 2015-08-30 | 175 | 00 | B | -\$30 | New version of Claim 789 |
| 8 |  |  |  |  |  |  |  |  | \$0 | Total claim amount calculated for APCD (Line 6 - Line 7) |

## CLAIMS VERSIONING AND DATA REQUESTS

- Versioning is based on a point in time. A claim can be versioned more than once and in multiple updates.
- Data requesters receive the latest 'version' of the claim record, not the older versions of the claims that were replaced with newer claims. Duplicate claim lines and claim lines with invalid data are not included in data provided to data requesters.


## AGENDA

- Welcome
- Topics
- Service location/member location relationships
- How claims versioning affects users
- Grouping diagnosis and procedure codes
- Latest APCD release information and data tips
- Questions/Discussion


## CLINICAL CLASSIFICATION SOFTWARE

- Clinical Classification Software (CCS) is a tool developed by the Healthcare Cost and Utilization Project (HCUP).
- The Arkansas APCD uses Clinical Classification codes to group patient diagnoses and procedures into a manageable number of clinically meaningful categories.
- Though not offered as part of a data request, CCS codes can be added upon request.


## CLINICAL CLASSIFICATION SOFTWARE

| ICD10 | Category | Code Description | Category Description | Level 1 Category | Level 1 Label |
| :---: | :---: | :---: | :---: | :---: | :---: |
| S85171A | 234 | Laceration of posterior tibial artery, right leg, init | Crushing injury or internal injury | 16 | Injury and poisoning |
| S85171D |  | Laceration of posterior tibial artery, right leg, subs |  |  |  |
| S85171S |  | Laceration of posterior tibial artery, right leg, sequela |  |  |  |
| S85172A |  | Laceration of posterior tibial artery, left leg, init encntr |  |  |  |
| S85172D |  | Laceration of posterior tibial artery, left leg, subs encntr |  |  |  |
| S85172S |  | Laceration of posterior tibial artery, left leg, sequela |  |  |  |
| S85179A |  | Laceration of posterior tibial artery, unsp leg, init encntr |  |  |  |
| S85179D |  | Laceration of posterior tibial artery, unsp leg, subs encntr |  |  |  |
| S85179S |  | Laceration of posterior tibial artery, unsp leg, sequela |  |  |  |

## CLINICAL CLASSIFICATION SOFTWARE

- Available CCS Codes
- ICD-9 Diagnosis and Procedure Codes
- ICD-10 Diagnosis and Procedure Codes
- CPT/HCPC Codes
- Clinical Classification Software (CCS) data and software are free. The website offers many resources to support its use. While the Arkansas APCD can provide the data (like the previous example), it is recommended that the user refer to the information provided by HCUP.


## AGENDA

- Welcome
- Topics
- Service location/member location relationships
- How claims versioning affects users
- Grouping diagnosis and procedure codes
- Latest APCD release information and data tips
- Questions/Discussion


## RELEASE INFORMATION

- The latest Arkansas APCD release: August 1, 2020
- Data coverage: Jan. 1, 2013, through Dec. 31, 2019


## RELEASE INFORMATION

## The latest Arkansas APCD release available to data requesters

| Source | Coverage * |
| :--- | :---: |
| Fully Insured Commercial Data | December 31, 2019 |
| ADH Birth/Death Data | Dec. 31, 2018 |
| ADH Hospital Discharge (for uninsured) | Dec. 31, 2018 |
| ADH Emergency Dept. (for uninsured) | Dec. 31, 2018 |
| Cancer Registry | Dec. 31, 2016 |
| Arkansas Medicaid | December 31, 2019 |
| Arkansas Medicare | Dec. 31, 2017 |
| Arkansas Workers Compensation | December 31, 2019 |
| Arkansas Medical Marijuana Cardholders | August 2018 - March 2020 |

*Data coverage begins on January 1, 2013

## RELEASE INFORMATION

Submitting entities exc/uded from this refresh because of data quality issues:

| ME001 | Submitting Entity | Estimated <br> Members - All <br> Years |
| :--- | :--- | :--- |
| 95885, 12151, <br> 73288 | Humana | 619,779 |
| 62286A | Golden Rule | 6,049 |
| 79413C | United C - PHM only | 5,151 |

Submitting entities previously excluded because of data quality issues but are now included:

| ME001 | Submitting Entity | Estimated <br> Members - All <br> Years |
| :--- | :--- | :--- |
| 79413B | United Healthcare B | 169,279 |
| 64246 | Guardian | 111,908 |

New for next time:
Medimpact (PBM) - estimated member count: 48,313

## DATA TIPS

- Utilize the searchable Arkansas APCD data dictionaries and tip sheets
- Highlights (be sure to review them all!):
- New Information from ResDAC about Arkansas Medicare Medical and DME Claim Payment Calculations
- Identifying Arkansas Employee Benefit Division (99EBD1) in TPA data to reduce duplication with 95442 and 95448B.
- Merged submitters and how to link their data
- Misplaced Member ID for 79413B
- Coming soon - Entity 80799 has acquired part of 70998A/95448A Exchange plans. Rules are forthcoming on how to identify this change in member and claim data.


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

## AGENDA

- Welcome
- Topics
- Service location/member location relationships
- How claims versioning affects users
- Grouping diagnosis and procedure codes
- Latest APCD release information and data tips
- Questions/Discussion


# INSPIRING HEALTHY ACTS 

(3) @oeThompsonMD

Www ACHI.net

