

**MHDO Public Hearing**  
**Proposed Rule Summary of Changes**  
**July 16, 2015**

**Chapter 243: Uniform Reporting System for  
Health Care Claims Data Sets**

*(routine technical)*

**I. General submission requirements**

- A. Sec 2(A)(10) File Format. Requirement to enclose all non-numeric values in double quotes is removed. (page 5)
- B. Sec 2(A)(12) Non-Duplicated Claims. Requirement to make sure that all submitted claims are not replicated. (page 5)
- C. Sec 2(A)(14) Subscriber or Member Identification. Adds language regarding consistency of inter-file identifiers, requiring payers to use common subscriber or member identifiers when medical, dental or pharmacy coverage is offered or administered by one payer and claims are processed and/or reported by one or more subcontracted payers. (page 6)
- D. Sec 2(B)(1) Filled Fields. Unavailable/non-required text, date and integer fields are to be left blank rather than set to null. (page 6)

**II. Additional or deleted fields; revised definitions and descriptions; updated references and element names**

- A. Additional or deleted fields
  - 1. Service Facility information added (MC092, DC051-DC058; pages 34, 53, 71-72, 75)
  - 2. Attending Provider information added (MC107-MC113; pages 35, 53-54)
  - 3. Operating Provider information added (MC114-MC119; pages 35-36, 54)
  - 4. Referring Provider information added (MC120-MC125; pages 36 and 54-55)
  - 5. Billing Provider information added (DC045-DC050; pages 71, 75)
  - 6. Deleted Service Provider City, State, Zip Code (DC027-DC029; pages 69, 74)
- B. Revised definitions and descriptions
  - 1. Non-required fields must be left blank when unavailable (ME008, ME009, ME011, MC007, MC008, MC010, MC028, MC029, MC031, PC007, PC008, PC010, PC043, DC007, DC008, DC010, DC022, DC023, DC025, DC027- DC029, pages 19, 25 – 28, 60, 63, 67-69).
  - 2. Placeholders must be left blank. (MC033-MC035; page 28, 69)
  - 3. Additional information/clarification on how to populate service facility fields (MC085-MC091; pages 33-34)

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C. Updated References and Data Element Names

1. Appendix A. Additional required elements are associated with source references/documentation. (pages 11, 12, 14-15)
2. "Rendering" replaces "Service" for consistency with national standards, including UB-04 (NUBC), CMS-1500 (NUCC) and 837 electronic transactions (ASC X12N). The data element descriptions, definitions and other attributes are unchanged. (pages 27-28, 49-50, 68-69, 74)
3. The types of National Provider Identifiers (NPIs) have been clarified in the data element names and descriptions. The data element definitions and other attributes are unchanged. (pages 27, 32, 33, 50, 52, 61, 65, 68, 71, 75)
4. Corrected errata in mapping of service facility location city, state and zip code (MC089-MC091; page 53)

**Justification:** This proposed rule amendment adds clarifying language to the general submission requirements; revises descriptions and references; and updates data element names in conformance to national and industry standards.

**Rationale:** These changes are intended to give providers direction and time to implement modifications to their reporting systems by 02/1/2016. It is anticipated that these changes will allow for more useful analyses of the data by MHDO data users.

***Rulemaking Timeline:***

- \_\_\_\_\_ Review of rule changes sent to the payers & other interested Parties
- \_\_\_\_\_ Preliminary review of rule changes by AG.'s Office
- 06/04/2015 Board approves initiating rule changes
- Not mandated Permission to *proceed* with rulemaking changes submitted to Governor's Office for approval
- 06/16/2015 MAPA forms sent to SOS/Legislative Council
- 06/24/2015 Newspaper publication date
- **07/16/2015** Public Hearing
- 07/27/2015 Deadline for comments

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- **08/06/2015** MHDO Board approves **adoption** of rule changes (*Board must adopt 120 days from comment period deadline*)
- Not mandated Permission to *finalize* adoption of the rule changes from the Governor's Office (*if different from proposed rule*)
- \_\_\_\_\_ Final review of adoption of the rule changes to the AG's Office
- \_\_\_\_\_ Send final adoption package to the SOS for adoption