

Super Data User Group

APCD Subgroup

Meeting Notes

September 28, 2016

# Meeting Participants

MHDO: Karynlee Harrington

HSRI: Leanne Candura, Allie Myers, Ioana Crisan

SDUG: Judy Loren, Deb Thayer, Roberta Gildart, Becky Symes

# Action Items

| **Item** | **Description** | **Assigned To** |
| --- | --- | --- |
| **Review Release Documentation List & Send Revised List** | Review the release documentation list and determine the level of effort that is put into each. We will work from the documents that are the easiest to put together. | To review during SDUG meeting |
| **Look into DCP-ID’s in the Provider File and Master File** | Follow-up with Becky about the DCP-ID’s and why they don’t align in the Master and Provider files.  | Leanne / Becky |
| **Reschedule next meeting.** | Reschedule the 11/30 meeting for 12/7.  | Allie |

# Notes

Welcome

* APCD Lead (Becky). The lead will report back on some of the issues we discussed, but won't be responsible for updates on Gobeille, the release schedule, etc.
* Other Agenda Items from Users
	+ No items.

High Priority

* Gobeille Update
	+ Karynlee helped draft a proposal to the Department of Labor. Letters of Support have been submitted. Hope to have 100+ Letters of Support.
	+ Schedule A 5400 - Judy reviewed this, and doesn't appear to apply to APCD. States will not be completing these forms.
	+ A memo was sent to submitters, letting them know data is now due by 10/31 (fully insured and non-self-funded ERISA)
	+ We tried to allow the opt-out, but Karynlee received an 8-page document stating we don't have the authority. Decided it wasn't worth going to litigation.
	+ Anthem said that if MHDO is a "health authority" under HIPAA, Anthem will submit data voluntarily. MHDO decided they are a health authority, but their legal obligations are different.
* Release Schedule
	+ Plan to submit first 3 quarters of 2016, the first week of February. This would include Q3 and Q4 2015 Medicare Data. Runout 2015 data will be released in February as well.
	+ The release schedule has been updated on the MHDO website.
	+ If there is a change in the release dates, Karynlee wants to notify the users (through an email alert). We hope to implement this within the next couple weeks.

Medium Priority

* Metadata Strategy
	+ Feedback on Release documents (there are currently 7 documents that are released)
	+ Deb uses the documentations, but the majority of the users don't.
		- Some users don't use the release notes, because they aren't the ones who downloads/unzips the data, and don't know where those documents live.
		- This relates to the Data Request Process and making sure all names are listed on the form. User names should be listed to ensure they get the release notes.
	+ QC Process (Release Notes)
		- Judy provided QC documentation to help others understand the data, and to inform others that they should not make assumptions. Judy's goal was to point out questions users may have, so they don't make assumptions.
	+ There are some basic numbers that may be helpful. For example, if you are only looking at vision plans.
	+ PMPM by payer would be helpful.
		- This is currently part of the release report.
	+ APCD User Guide vs. Release documents (Why some data didn't pass validations, info from the payers/submitters)
		- Judy suggest an APCD user guide across all states.
		- Information that can be digested by all users, regardless of their experience with the data. For example, not everyone may now what an NPI is, and may discard the information related to it.
		- Perhaps MHDO/HSRI can evaluate what reports are easiest to produce, and we can build from there.
	+ Next Step: MHDO/HSRI will reevaluate what is in the release documentation, and determine what is most time consuming. Send a revised version of the documentation list.
		- There are two issues we need to solve: what metadata we should release; and how to release it (especially if users don't see it because they aren't the ones who downloaded the data)
* Valuable Data Elements
	+ Discharge Dates
	+ There is some confusion about how often this field is populated, especially between hospital and APCD data. Can there be a third value added to let users know that it is a full claim or not? Focus on Bill Type 111, and add another digit to the end.
		- HSRI will take this into consideration when revising the validations.
		- For commercial claims, with a bill type of 11, the discharge date should have a higher validation threshold, such as 98%. MaineCare overrides this validation the most.
		- The users would find it helpful to know the different type of inpatient visits (i.e. acute)
	+ Are there other data elements that we should revise the threshold on? Age and DOB are two very important elements (people are still putting the wrong century in, or newborns who are 100 years old)
* DCP-ID /NPI update
	+ The last documentation Becky looked at, the DCP-ID was used to identify all providers, which is misleading.
	+ Users should use NPI.
	+ In the Provider Master document, there is still a DCP-ID column. It appears after HSRI took over as the vendor, there are DCP-IDs that are 6 digits, starting with 8. What are the DCP-ID's that start with 8?
	+ There are DCP-IDs that are in the Provider File, but not in the master file. In the past, these files lined up.
	+ Leanne will follow-up with Becky about this, and have a more in-depth conversation. Becky will email Leanne to set something up
* Common Member ID’s for pharmacy and medical claims
	+ There was a revision to Chapter 243 to make the requirements stronger.

Low Priority

* Themes in data
	+ Are users interested in sharing the work they did with the data; or bringing someone in? Users are unsure at this time.
* Distribution List - the list was included in the calendar appointment.

Next Meeting

* Next meeting is tentatively scheduled for November 30th from 3-4:30pm, but we may need to reschedule because Leanne will be away.
* The next large group meeting will be October 217th 1-3, Allie will send a calendar invite
* Allie will send meeting notes to Becky.