

Health Care Facility Fee Report: Methodology Notes

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These methodology notes support the [Detailed Data Set](#), developed for MHDO’s first annual facility fee report initially posted March 2024, and have been updated as of November 20, 2024. This documentation replaces the previous version.

Introduction

Public Law 2023, Chapter 410, *An Act to Create Greater Transparency for Facility Fees Charged by Health Care Providers and to Establish the Task Force to Evaluate the Impact of Facility Fees on Patients*, requires the Maine Health Data Organization (MHDO) to submit an annual report on payments for facility fees made by payers, **to the extent that payment information is already reported to the organization**, to the Office of Affordable Health Care and the Joint Standing Committee on Health Coverage, Insurance and Financial Services. The following methodology supports the Detailed Data Set that was produced as part of the MHDO's first annual report on facility fees, released March 19, 2024.

Data Source, Time Period, and Analytic Selection Criteria

The data source used for the development of the Detailed Data Set is the MHDO's All-Payer Claims Data (APCD) commercial medical claims including Medicare Advantage Plans for individuals under age sixty-five for the time-period April 1, 2022 – March 31, 2023. Vision, dental, retail pharmacy claims and eligibility records were excluded. Procedure codes included in the Detailed Data Set are limited to outpatient encounters.

MHDO's rule 90-590 [Chapter 243, Uniform Reporting System for Health Care Claims Data Sets](#), governs the requirements for data submission including the provisions for the filing of standardized health care claims data sets, including the identification of the organizations required to report; establishment of requirements for the content, format, method, and time frame for filing health care claims data; and the establishment of standards for the data reported.

The data elements submitted by payors aligns with the information that is populated in the standardized claims forms (UB-04 and the CMS-1500) used by hospitals and other health care providers.

The commercial claims reported to the MHDO represent approximately 73% of commercially insured members. Self-funded Employee Retirement Income Security Act of 1974 (ERISA) plans are exempt from submitting data to state APCDs due to a United States Supreme Court decision released in March 2016 in *Gobeille v. Liberty Mutual Insurance Company*. However, several of the largest self-funded ERISA plans submit data to MHDO on a voluntary basis. There are a few other exclusions including health plans with less than \$2,000,000 in annual premiums are exempt from submitting data to MHDO, and MHDO's claims data does not include data for the uninsured.

Data Scrubbing and Preparing Data Structures for Analyses

The claims data that is submitted to MHDO undergoes data scrubbing which is the process of fixing errors in a database by identifying and removing fully reversed claims, incomplete, incorrect, or duplicate data. This process is designed to improve the accuracy and reliability of the data. The impact of the data scrubbing and application of methodologies of the submitted data is summarized in [Appendix A](#).

[Appendix B](#) is the list of the medical claims elements that were used in the development of the Detailed Data Set.

Methodology

MHDO has applied a similar methodology that currently exists in the MHDO’s healthcare cost/payment transparency website, CompareMaine, in the production of the Detailed Data Set. CompareMaine reports the median payment for over 300 health care procedures, by healthcare setting, by the top five commercial payors in the MHDO all-payer-claims data. However, the median estimates in CompareMaine vs the Detailed Data Set will not match as the payment information on CompareMaine provides a more comprehensive picture of the estimated payments associated with procedures that commonly occur with another procedure, whereas the Detailed Data Set reflects specific CPT codes with no other codes included. Appendix C provides more information on the differences between payment estimates on CompareMaine vs the Detailed Data Set.

Episodes of Care

An episode of care is defined as a health care claim or set of claims for a single service or procedure that occurs on a single day for a patient. Payments are assigned to health care settings based on episodes of care. If multiple health care settings are part of the same episode of care, the payment is attributed to the health care setting with the highest portion of the payment. If the payments between health care settings are equal, then the episode of care is attributed to both health care settings. Additionally, some health care settings bill under the same NPI. As a result of these two occurrences, values in each of the tabs displayed in this report may be the same for different health care settings.

Provider Selection and Attribution

The Health Care Settings identified in the Detailed Data Set includes 156 health care settings that are displayed on CompareMaine version 12.0, and commercial claims for select office services, behavioral health services, outpatient services, and radiology and imaging procedures (Table 1).

TABLE 1. MAINE HEALTH CARE SETTINGS INCLUDED IN THE DETAILED DATA SET

n	Health Care Setting	Affiliated vs. Unaffiliated	Health Care Setting Type
1	Acadia Family Health Center (Northern Maine Medical Center)	Affiliated	Non-hospital
2	Arnold Memorial Medical Center	Affiliated	Non-hospital
3	Aroostook Mental Health Center	Unaffiliated	Non-hospital
4	Arthur Jewell Community Health Center (Waldo County General Hospital)	Affiliated	Non-hospital
5	Augusta Women’s Care	Affiliated	Non-hospital
6	Be Well My Friend	Affiliated	Non-hospital
7	Belgrade Regional Health Center (HealthReach Community Health Centers)	Unaffiliated	Non-hospital
8	Bethel Family Health Center (HealthReach Community Health Centers)	Unaffiliated	Non-hospital
9	Bingham Area Health and Dental Center (HealthReach Community Health Centers)	Unaffiliated	Non-hospital
10	Blue Hill Psychological Services	Unaffiliated	Non-hospital
11	Bridgton Hospital	Affiliated	Hospital - CA
12	Bucksport Regional Health Center	Unaffiliated	Non-hospital
13	Calais Community Hospital	Affiliated	Hospital - CA
14	Cary Medical Center	Affiliated	Hospital
15	Catholic Charities Maine	Unaffiliated	Non-hospital
16	Central Maine Medical Center	Affiliated	Hospital
17	Central Maine Orthopedics	Affiliated	Non-hospital
18	Coastal Orthopedics & Sports Medicine	Unaffiliated	Non-hospital

n	Health Care Setting	Affiliated vs. Unaffiliated	Health Care Setting Type
19	Coastal Women's Healthcare	Unaffiliated	Non-hospital
20	Community Health and Counseling Services	Unaffiliated	Non-hospital
21	Concentra Urgent Care	Unaffiliated	Non-hospital
22	Convenient MD LLC	Unaffiliated	Non-hospital
23	Corinth Medical Associates (Mayo Regional Hospital)	Affiliated	Non-hospital
24	Cornerstone Behavioral Healthcare LLC	Unaffiliated	Non-hospital
25	Crossroads Counseling Center	Unaffiliated	Non-hospital
26	DFD Russell Medical Center Inc.	Unaffiliated	Non-hospital
27	Day One	Unaffiliated	Non-hospital
28	Dexter Internal Medicine	Affiliated	Non-hospital
29	Down East Community Hospital	Affiliated	Hospital - CA
30	Elsomore Dixfield Family Medicine (Central Maine Medical Group)	Affiliated	Non-hospital
31	Family Focused Healthcare	Unaffiliated	Non-hospital
32	Franklin Health Farmington Family Practice	Affiliated	Non-hospital
33	Franklin Memorial Hospital	Affiliated	Hospital
34	Freeport Medical Center	Unaffiliated	Non-hospital
35	Goodwill Industries of Northern New England	Unaffiliated	Non-hospital
36	Greater Portland Health	Unaffiliated	Non-hospital
37	Guilford Medical Associates (Mayo Regional Hospital)	Affiliated	Non-hospital
38	Hallowell Family Practice	Affiliated	Non-hospital
39	Health Access Network - Lincoln	Unaffiliated	Non-hospital
40	Health Access Network - Medway	Unaffiliated	Non-hospital
41	Health Affiliates Maine	Unaffiliated	Non-hospital
42	Health Psych Maine	Affiliated	Non-hospital
43	Houlton Regional Hospital	Affiliated	Hospital - CA
44	Intermed	Unaffiliated	Non-hospital
45	Islands Community Medical Services	Unaffiliated	Non-hospital
46	Katahdin Valley Health Center, Houlton	Unaffiliated	Non-hospital
47	Katahdin Valley Health Center, Island Falls	Unaffiliated	Non-hospital
48	Katahdin Valley Health Center, Patten	Unaffiliated	Non-hospital
49	Katahdin Valley Health Center, Patten South	Unaffiliated	Non-hospital
50	Kennebec Behavioral Health	Unaffiliated	Non-hospital
51	Kennebec Medical Consultants	Affiliated	Non-hospital
52	Lawrence High School Health Center (HealthReach Community Health Centers)	Unaffiliated	Non-hospital
53	Life by Design PA	Unaffiliated	Non-hospital
54	Lifespan Family Healthcare	Unaffiliated	Non-hospital
55	Lincoln Medical Partners Family Care Center Boothbay Harbor (LincolnHealth)	Affiliated	Non-hospital
56	Lincoln Medical Partners Family Medicine Damariscotta (LincolnHealth)	Affiliated	Non-hospital
57	Lincoln Medical Partners Family Medicine Waldoboro (LincolnHealth)	Affiliated	Non-hospital
58	Lincoln Medical Partners Family Medicine Wiscasset (LincolnHealth)	Affiliated	Non-hospital
59	LincolnHealth	Affiliated	Hospital - CA
60	Livermore Falls Family Practice	Affiliated	Non-hospital
61	Lovejoy Health Center (Healthreach Community Health Centers)	Unaffiliated	Non-hospital
62	Mabel Wadsworth Center	Unaffiliated	Non-hospital
63	Machias Family Practice	Unaffiliated	Non-hospital
64	Madison Area Health Center (HealthReach Community Health Centers)	Unaffiliated	Non-hospital
65	Maine Behavioral Healthcare	Affiliated	Non-hospital
66	Maine Coast Mobile Med, Ellsworth	Unaffiliated	Non-hospital
67	Maine Heart Center	Affiliated	Non-hospital

n	Health Care Setting	Affiliated vs. Unaffiliated	Health Care Setting Type
68	Maine Medical Center	Affiliated	Hospital
69	Maine Medical Partners Cape Elizabeth Internal Medicine	Affiliated	Non-hospital
70	Maine Medical Partners Falmouth Pediatrics (Maine Medical Center)	Affiliated	Non-hospital
71	Maine Medical Partners Lakes Region Primary Care (Maine Medical Center)	Affiliated	Non-hospital
72	Maine Medical Partners Saco Pediatrics (Maine Medical Center)	Affiliated	Non-hospital
73	Maine Medical Partners Scarborough Family Medicine (Maine Medical Center)	Affiliated	Non-hospital
74	Maine Medical Partners Westbrook Family Medicine (Maine Medical Center)	Affiliated	Non-hospital
75	Maine Urgent Care	Affiliated	Non-hospital
76	MaineGeneral Medical Center	Affiliated	Hospital
77	MaineOrtho	Unaffiliated	Non-hospital
78	Martin's Point Health Care	Unaffiliated	Non-hospital
79	McGeachey Hall Mental Health Center (Maine Medical Center)	Affiliated	Non-hospital
80	Medomak Family Medicine	Unaffiliated	Non-hospital
81	Mid Coast Hospital	Affiliated	Hospital
82	Milbridge Medical Center (Down East Community Hospital)	Affiliated	Non-hospital
83	Millinocket Regional Hospital	Affiliated	Hospital - CA
84	Mount Desert Island Hospital	Affiliated	Hospital - CA
85	Mt. Abram Health Center (HealthReach Community Health Centers)	Unaffiliated	Non-hospital
86	Nasson Health Care	Unaffiliated	Non-hospital
87	Neurobehavioral Services of New England	Unaffiliated	Non-hospital
88	New England Cancer Specialists - Clinic & Imaging Center	Unaffiliated	Non-hospital
89	New England Cancer Specialists - Kennebunk	Unaffiliated	Non-hospital
90	New England Cancer Specialists - Scarborough	Unaffiliated	Non-hospital
91	New England Cancer Specialists - Topsham	Unaffiliated	Non-hospital
92	New England Rehabilitation Hospital of Portland	Affiliated	Non-hospital
93	Northern Light A.R. Gould Hospital	Affiliated	Hospital
94	Northern Light Acadia Hospital	Affiliated	Hospital
95	Northern Light Blue Hill Hospital	Affiliated	Hospital - CA
96	Northern Light Charles A. Dean Hospital	Affiliated	Hospital - CA
97	Northern Light Eastern Maine Medical Center	Affiliated	Hospital
98	Northern Light Inland Hospital	Affiliated	Hospital
99	Northern Light Maine Coast Hospital	Affiliated	Hospital
100	Northern Light Mayo Hospital	Affiliated	Hospital - CA
101	Northern Light Mercy Hospital	Affiliated	Hospital
102	Northern Light Primary Care - Madison	Affiliated	Non-hospital
103	Northern Light Primary Care - Unity	Affiliated	Non-hospital
104	Northern Light Primary Care, Greenville	Affiliated	Non-hospital
105	Northern Light Primary Care, Newport Plaza	Unaffiliated	Non-hospital
106	Northern Light Primary Care, Pittsfield	Affiliated	Non-hospital
107	Northern Light Sebecook Valley Hospital	Affiliated	Hospital - CA
108	Northern Maine Medical Center	Affiliated	Hospital
109	Pediatric Associates of Lewiston	Unaffiliated	Non-hospital
110	Pen Bay Medical Center	Affiliated	Hospital
111	Penobscot Valley Dermatology	Unaffiliated	Non-hospital
112	Penobscot Valley Hospital	Affiliated	Hospital - CA
113	Penobscot Valley Primary Care (Penobscot Valley Hospital)	Affiliated	Non-hospital
114	Plastic & Hand Surgical Associates/Western Avenue Day Surgery Center	Unaffiliated	Non-hospital
115	Portland Foot and Ankle	Unaffiliated	Non-hospital
116	Portland Gastroenterology Center	Unaffiliated	Non-hospital

n	Health Care Setting	Affiliated vs. Unaffiliated	Health Care Setting Type
117	Portland West Family Practice	Unaffiliated	Non-hospital
118	RAYUS Radiology - Bangor	Unaffiliated	Non-hospital
119	RAYUS Radiology - Marshwood Imaging Center	Unaffiliated	Non-hospital
120	Rangeley Family Medicine (HealthReach Community Health Centers)	Unaffiliated	Non-hospital
121	Raymond RediCare	Unaffiliated	Non-hospital
122	Redington-Fairview General Hospital	Affiliated	Hospital - CA
123	Regional Medical Center at Lubec, East Machias	Unaffiliated	Non-hospital
124	Regional Medical Center at Lubec, Lubec	Unaffiliated	Non-hospital
125	Richmond Area Health Center (HealthReach Community Health Centers)	Unaffiliated	Non-hospital
126	Rowland B. French Medical Center Vogl Behavioral Health	Unaffiliated	Non-hospital
127	Rumford Hospital	Affiliated	Hospital - CA
128	Sacopee Valley Health Center	Unaffiliated	Non-hospital
129	Sheepscot Valley Health Center (HealthReach Community Health Centers)	Unaffiliated	Non-hospital
130	Sigrid E Tompkins Health Center (Houlton Regional Hospital)	Affiliated	Non-hospital
131	Southern Maine Health Care	Affiliated	Hospital
132	Southern Maine Health Care Physicians and Walk-In Care Kennebunk	Affiliated	Non-hospital
133	Southern Maine Health Care Physicians and Walk-In Care Saco	Affiliated	Non-hospital
134	Southern Maine Health Care Physicians and Walk-In Care Sanford	Affiliated	Non-hospital
135	Southern Maine Health Care Physicians and Walk-In Care Waterboro	Affiliated	Non-hospital
136	Spurwink Corporation	Unaffiliated	Non-hospital
137	St. Croix Regional Family Health Center	Unaffiliated	Non-hospital
138	St. Joseph Hospital	Affiliated	Hospital
139	St. Mary's Regional Medical Center	Affiliated	Hospital
140	Stephens Memorial Hospital	Affiliated	Hospital - CA
141	Stockton Springs Regional Health Center (Waldo County General Hospital)	Affiliated	Non-hospital
142	Strong Area Health and Dental Center (HealthReach Community Health Centers)	Unaffiliated	Non-hospital
143	Sweetser	Unaffiliated	Non-hospital
144	Swift River Family Medicine	Affiliated	Non-hospital
145	Tri County Mental Health	Unaffiliated	Non-hospital
146	Twin City Family Medicine	Unaffiliated	Non-hospital
147	Waldo County General Hospital	Affiliated	Hospital - CA
148	Waterboro Village Pediatrics	Unaffiliated	Non-hospital
149	Waterville Family Practice	Affiliated	Non-hospital
150	Waterville Pediatrics	Affiliated	Non-hospital
151	Waterville Women's Care	Affiliated	Non-hospital
152	Wells Family Practice	Unaffiliated	Non-hospital
153	Western Maine Family Health Center (HealthReach Community Health Centers)	Unaffiliated	Non-hospital
154	Western Maine Family Medicine (Stephens Memorial Hospital)	Affiliated	Non-hospital
155	Western Maine Pediatrics (Stephens Memorial Hospital)	Affiliated	Non-hospital
156	York Hospital	Affiliated	Hospital

Affiliated vs. Unaffiliated Health Care Settings

Hospitals and their physician owned practices as defined in 90-590 [Chapter 300](#) are categorized as affiliated in the Detailed Data Set; other entities listed in the Detailed Data Set are considered unaffiliated.

Health Care Setting Type

Each health care setting was categorized into one of three categories:

- Hospital - CA (Critical Access)
- Hospital (not CA)
- Non-hospital (all other health care setting types including clinics, physician practices, behavioral health treatment centers, imaging and radiology centers, etc.)

CPT Code Category

The information in the Detailed Data Set is limited to select Current Procedural Terminology (CPT®) codes for office services, behavioral health services, outpatient services, and radiology and imaging procedures (Table 2). CPT codes provide a uniform nomenclature for coding medical procedures and services.

TABLE 2. SERVICES AND PROCEDURES INCLUDED IN THE DETAILED DATA SET

Tab	Category	CPT Code	CPT Code Description
OFFVIS	Office Visits	99202	New patient for low to moderate problems
OFFVIS	Office Visits	99203	New patient for moderate problems
OFFVIS	Office Visits	99204	New patient for moderate to severe problems
OFFVIS	Office Visits	99205	New patient for moderate to severe problems requiring longer visit
OFFVIS	Office Visits	99211	Established patient for minimal problems
OFFVIS	Office Visits	99212	Established patient for limited to minor problems
OFFVIS	Office Visits	99213	Established patient for low to moderate problems
OFFVIS	Office Visits	99214	Established patient for moderate to severe problems
OFFVIS	Office Visits	99215	Established patient for moderate to severe problems requiring longer visit
OFFVIS	Office Visits	99381	New patient preventive care for infant
OFFVIS	Office Visits	99382	New patient preventive care for early childhood
OFFVIS	Office Visits	99383	New patient preventive care for late childhood
OFFVIS	Office Visits	99384	New patient preventive care for adolescent
OFFVIS	Office Visits	99385	New patient preventive care for adult age < 40
OFFVIS	Office Visits	99386	New patient preventive care for adult age < 65
OFFVIS	Office Visits	99391	Established patient preventive care for infant
OFFVIS	Office Visits	99392	Established patient preventive care for early childhood
OFFVIS	Office Visits	99393	Established patient preventive care for late childhood
OFFVIS	Office Visits	99394	Established patient preventive care for adolescent
OFFVIS	Office Visits	99395	Established patient preventive care for adult age < 40
OFFVIS	Office Visits	99396	Established patient preventive care for adult age < 65
OFFVIS	Office Visits	99441	Physician telephone patient service, 5 to 10 minutes of medical discussion
OFFVIS	Office Visits	99442	Physician telephone patient service, 11 to 20 minutes of medical discussion
OFFVIS	Office Visits	99443	Physician telephone patient service, 21 to 30 minutes of medical discussion
BH	Behavioral Health Services	90791	Psychiatric diagnostic evaluation
BH	Behavioral Health Services	90792	Psychiatric diagnostic evaluation with medical services
BH	Behavioral Health Services	90832	Psychotherapy, 30 minutes with patient and/or family member
BH	Behavioral Health Services	90834	Psychotherapy, 45 minutes with patient and/or family member
BH	Behavioral Health Services	90836	Psychotherapy, 45 minutes with patient and/or family member when performed with an evaluation and management service
BH	Behavioral Health Services	90837	Psychotherapy, 60 minutes with patient and/or family member
BH	Behavioral Health Services	90839	Psychotherapy for crisis; first 60 minutes

Tab	Category	CPT Code	CPT Code Description
BH	Behavioral Health Services	90840	Psychotherapy for crisis; each additional 30 minutes
BH	Behavioral Health Services	90846	Family psychotherapy not including patient
BH	Behavioral Health Services	90847	Family psychotherapy including patient
BH	Behavioral Health Services	90849	Multiple-family group psychotherapy
BH	Behavioral Health Services	90853	Group psychotherapy
BH	Behavioral Health Services	90870	Shock treatment and monitoring
BH	Behavioral Health Services	96156	Health and behavior assessment
BH	Behavioral Health Services	96158	Health and behavior intervention
OP	Outpatient Services	45378	Colonoscopy without biopsy for encounter for preventive health services
OP	Outpatient Services	45380	Colonoscopy with biopsy for benign neoplasm
OP	Outpatient Services	45385	Colonoscopy with removal of polyps or growths using an endoscope
OP	Outpatient Services	92507	Treatment of speech, language, voice, communication, and/or hearing processing disorder
OP	Outpatient Services	93971	Ultrasound of veins in arm or leg
OP	Outpatient Services	96110	Developmental screening
RAD	Radiology & Imaging	70450	CT of head without contrast material
RAD	Radiology & Imaging	70486	CT of maxillofacial area without contrast material
RAD	Radiology & Imaging	70491	CT scan of neck, with contrast
RAD	Radiology & Imaging	70496	CT scan of blood vessel of head, with contrast
RAD	Radiology & Imaging	70551	MRI of brain without contrast material
RAD	Radiology & Imaging	70553	MRI of brain with and without contrast material
RAD	Radiology & Imaging	71045	X-ray of chest, 1 view
RAD	Radiology & Imaging	71046	X-ray of chest; 2 views
RAD	Radiology & Imaging	71250	CT of thorax (chest) without contrast material
RAD	Radiology & Imaging	71260	CT of thorax (chest) with contrast material
RAD	Radiology & Imaging	71275	CT scan of blood vessels in chest, with contrast
RAD	Radiology & Imaging	72040	X-ray of spine of neck, 2 or 3 views
RAD	Radiology & Imaging	72070	X-ray of middle spine, 2 views
RAD	Radiology & Imaging	72082	X-ray of spine, entire
RAD	Radiology & Imaging	72100	X-ray of spine, lumbosacral; 2 or 3 views
RAD	Radiology & Imaging	72110	X-ray of lower back, minimum of 4 views
RAD	Radiology & Imaging	72141	MRI of cervical spine without contrast material
RAD	Radiology & Imaging	72148	MRI of lumbar spine without contrast material
RAD	Radiology & Imaging	72158	MRI scan of lower spinal canal, before and after contrast
RAD	Radiology & Imaging	72170	X-ray of pelvis, 1 or 2 views
RAD	Radiology & Imaging	72192	CT of pelvis without contrast material
RAD	Radiology & Imaging	72193	CT of pelvis with contrast material
RAD	Radiology & Imaging	72195	MRI of pelvis without contrast material
RAD	Radiology & Imaging	72197	MRI scan of pelvis, with and without contrast
RAD	Radiology & Imaging	73030	X-ray of shoulder
RAD	Radiology & Imaging	73110	X-ray of wrist; complete, minimum of three views
RAD	Radiology & Imaging	73120	X-ray of hand
RAD	Radiology & Imaging	73130	X-ray of hand, minimum of 3 views
RAD	Radiology & Imaging	73140	X-ray of fingers, minimum of 2 views
RAD	Radiology & Imaging	73221	MRI of joint upper extremity without contrast material
RAD	Radiology & Imaging	73502	X-ray of hip with pelvis, 2 or 3 views
RAD	Radiology & Imaging	73560	X-ray of knee, 1 or 2 views
RAD	Radiology & Imaging	73562	X-ray of knee; minimum of 3 views

Tab	Category	CPT Code	CPT Code Description
RAD	Radiology & Imaging	73564	X-ray of knee, 4 or more views
RAD	Radiology & Imaging	73590	X-ray of lower leg, 2 views
RAD	Radiology & Imaging	73600	X-ray of ankle, 2 views
RAD	Radiology & Imaging	73610	X-ray of ankle
RAD	Radiology & Imaging	73620	X-ray of foot; 2 views
RAD	Radiology & Imaging	73630	X-ray of foot
RAD	Radiology & Imaging	73721	MRI of joint lower extremity without contrast material
RAD	Radiology & Imaging	74018	X-ray of abdomen, 1 view
RAD	Radiology & Imaging	74150	CT of abdomen without contrast material
RAD	Radiology & Imaging	74160	CT of abdomen with contrast material
RAD	Radiology & Imaging	74170	CT of abdomen with and without contrast material
RAD	Radiology & Imaging	74176	CT of pelvis & abdomen without contrast material
RAD	Radiology & Imaging	74177	CT of pelvis & abdomen with contrast material
RAD	Radiology & Imaging	74178	CT of pelvis & abdomen with and without contrast material
RAD	Radiology & Imaging	74183	MRI scan of abdomen, with and without contrast
RAD	Radiology & Imaging	76536	Ultrasound of head and neck
RAD	Radiology & Imaging	76642	Ultrasound of single breast
RAD	Radiology & Imaging	76700	Ultrasound of abdomen; Complete
RAD	Radiology & Imaging	76705	Ultrasound of abdomen; Limited
RAD	Radiology & Imaging	76770	Ultrasound behind abdominal cavity
RAD	Radiology & Imaging	76856	Ultrasound of pelvis
RAD	Radiology & Imaging	77047	MRI scan of both breasts, without contrast
RAD	Radiology & Imaging	77049	MRI scan of both breasts, without and with contrast
RAD	Radiology & Imaging	77065	Diagnostic mammogram, including computer-aided detection single breast
RAD	Radiology & Imaging	77066	Diagnostic mammogram, including computer-aided detection, both breasts
RAD	Radiology & Imaging	77067	Screening mammogram, including computer-aided detection, both breasts
RAD	Radiology & Imaging	77080	Dual-energy Xray absorptiometry (DXA) bone density study, 1 or more sites; axial skeleton (hips, pelvis, spine)
RAD	Radiology & Imaging	77081	Dual-energy Xray absorptiometry (DXA) bone density study, 1 or more sites; appendicular skeleton (peripheral) (radius, wrist, heel)
RAD	Radiology & Imaging	78306	Bone Imaging, Whole Body
RAD	Radiology & Imaging	78452	Nuclear medicine study of vessels of heart using drugs or exercise, multiple studies
RAD	Radiology & Imaging	78815	PET with concurrently acquired CT of skull base to mid-thigh

Payors

The Detailed Data Set represents 17 commercial payors (Table 3) and includes individuals under the age of sixty-five that are enrolled in a Medicare Advantage plan. Data displayed in an “All Payors” category represents a total of all 17 commercial payors.

Data are also displayed for the top five payors in Maine, as defined by volume of payments and are the following:

- Aetna (which includes Aetna Health Inc. and Aetna Life Insurance Company),
- Anthem (which includes Anthem Health Plans of Maine, Inc. and Anthem Insurance Companies, Inc.),
- CIGNA (which includes CIGNA Health & Life Insurance Company),
- Community Health Options, and
- Harvard Pilgrim (which includes HPHC Insurance Company Inc and Harvard Pilgrim Health Care Inc).

These payors represent approximately 80% of the claims data that is used to generate the data used in this analysis.

TABLE 3. PAYORS INCLUDED IN THE DETAILED DATA SET

n	Payor
1	Aetna Health Inc.
2	Aetna Life Insurance Company
3	Anthem Health Plans of Maine, Inc.
4	Anthem Insurance Companies, Inc.
5	CIGNA Health & Life Insurance Company
6	Chesterfield Resources, Inc
7	Gordon Group Investments
8	HPHC Insurance Company Inc
9	Harvard Pilgrim Health Care Inc
10	Health Plans Inc
11	Community Health Options
12	Meritain Health Inc
13	USABLE Mutual Insurance Company
14	UniCare Life & Health Insurance Company
15	United HealthCare Services, Inc.
16	United Healthcare Insurance Company
17	WellCare of Maine, Inc.

CMS-1500 vs UB-04 Claim Designation

MHDO’s rule 90-590 [Chapter 243, Uniform Reporting System for Health Care Claims Data Sets](#), maps each required data element to the UB-04 Form Locator and CMS-1500 (page 59 in Chapter 243). This mapping identifies specific data elements unique to the UB-04 and CMS-1500, which are used to identify which claim form a bill was invoiced on.

A claim that is generated on a UB-04 form is identified based on the presence of a populated MC036_BILLTYPE (Type of Bill) and/or MC054_REV (Revenue Code) field, as these fields do not exist on a CMS -1500 claim form. The presence of MC037_FACTYPE (Place of Service – Professional) indicates a CMS -1500 claim form was used. If a claim is billed globally for a health care setting/payer combination, it is displayed as a UB-04 claim. If all elements are present

(MC036_BILLTYPE, MC054_REV, and MC037_FACTYPE), this indicates both claim forms were used. When a patient receives multiple bills related to the same service that are generated by both a UB-04 and CMS-1500, we refer to this as “split billing”.

Based on the above assumptions, we classified service lines as follows in the Detailed Data Set:

- **UB-04 (Institutional)** – If MC036_BILLTYPE (Type of Bill) and/or MC054_REV (Revenue Code) is not missing on the health care claim, the service line of the episode of care is designated as originating from a UB-04 (institutional) claim.
- **CMS-1500 (Noninstitutional)** – If MC036_BILLTYPE (Type of Bill) and MC054_REV (Revenue Code) are missing on the health care claim and MC037_FACTYPE (Place of Service – Professional) is not missing on the health care claim, then the service line is designated as originating from a CMS-1500 (professional) claim.
- Claims that did not have a value for MC036_BILLTYPE, MC037_FACTYPE, or MC054_REV were excluded from the Detailed Data Set.

Display

Data are displayed in six tabs in the Detailed Data Set Excel workbook:

- **Summary tab** – This tab identifies the specific procedure (CPT Code), affiliation, health care setting, and payor. For each CPT Code, health care setting, and payor combination, displayed is the number of episodes, the percentage of total payments that are paid on a CMS-1500 claim form (professional) vs. a UB-04 claims form (institutional), and the median payment for the total episodes of care. Note that blank cells indicate there were no episodes for the given CPT Code, affiliated vs. unaffiliated, health care setting type, and payor combination.
- **OFFVIS, BH, OP, and RAD tabs** – There is a tab for each CPT Code Category (Office Visits, Behavioral Health Services, Outpatient Services, and Radiology & Imaging). In each of these tabs, for each CPT Code, health care setting, health care setting categorization, and payor combination, the number of episodes, the percentage of total payments that are professional (CMS-1500) vs. institutional (UB-04), and the median total payment for the episode of care are displayed. Note that blank cells indicate there were no episodes for the given health care setting and payor combination.
- **Split Billing tab** – This tab identifies the office visit procedure (CPT code) and the number of episodes where both a UB-04 and CMS-1500 were submitted for payment for the same service. MHDO refers to this as “split billing.”

Report Measures

This section describes the measures utilized in the Detailed Data Set.

Number of Episodes

The number of episodes at the health care setting that the payment data in the Detailed Data Set is based on. Data related to cell sizes of less than 5 have been suppressed and are indicated by an “(s)”.

Percent Payment CMS-1500

This percentage represents the proportion of the total amount paid across all episodes that originated from a CMS-1500. This is calculated by taking the sum of the total amount paid across all episodes from a CMS-1500 and dividing by the sum of the total amount paid across all episodes across from a CMS-1500 and a UB-04, and multiplying that by 100.

Percent Payment UB-04

This percentage represents the proportion of the total amount paid across all episodes that originated from a UB-04. This is calculated by taking the sum of the total amount paid across all episodes from a UB-04 and dividing by the sum of the total amount paid across all episodes across from a CMS-1500 and a UB-04, and multiplying that by 100.

Median Payment

This represents the median total amount paid across all episodes. To calculate the median, the total amount paid per episode is calculated by summing MC063_TPAY (Paid Amount), MC064_PREPAID (Prepaid Amount), MC065_COPAY (Copay Amount), MC066_COINS (Coinsurance Amount), and MC067_DED (Deductible Amount) for each episode. Then, the total amount paid for each episode is sorted from lowest to highest; the middle value is the median. We display the median rather than the mean because it is less likely to be influenced by extreme values.

Example:

- There are 50 episodes of CPT Code 99212 at XYZ Hospital
- The median amount paid across the 50 episodes is \$53.96.
- The total amount paid on the CMS-1500 across all episodes is \$2,385.42.
- The total amount paid on the UB-04 across all episodes is \$392.49.
- The total amount paid across the 50 episodes and across claim forms is the sum of \$2,385.42 and \$392.49, \$2,777.91.
- The percentage of the total amount paid amount across the 50 episodes from a CMS-1500 is $\$2,385.42 / \$2,777.91 = 85.87\%$.
- The percentage of the total amount paid amount across the 50 episodes from a UB-04 is $\$392.49 / \$2,777.91 = 14.13\%$.

Appendices

Appendix A: MHDO Data Intake and Processing

The MHDO All-Payer-Claims Data is submitted to MHDO per the requirements in 90-590 [Chapter 243, Uniform Reporting System for Health Care Claims Data Sets](#). The claims data that is submitted to MHDO undergoes data scrubbing which is the process of fixing errors in a database by identifying and removing incomplete, incorrect, or duplicate data. It also involves standardizing formats and updating outdated information. This process is designed to improve the accuracy and reliability of the data.

After passing the data intake validations, data are ingested in the MHDO Data Warehouse, processed and enhanced with value-add fields and then undergo another set of internal quality checks. The table below outlines the steps in this process.

TABLE A.1. MHDO APCD DATA PROCESSING STEPS IN THE DATA WAREHOUSE

Step	Task	Description
1	Receive Raw Data Files	Once the raw data are received from the source, the data are loaded into the MHDO Data Warehouse.
2	Enhance Data	Process the data files by running queries and batch jobs to load the data into the appropriate file formats and bring the files into output tables. Specifications for enhancements are documented in the Business Rules.
3	Conduct Internal Quality Control (QC)	Execute QC based on data set. This may include: Running variable checks to ensure key variables are used in analysis; checking output tables to ensure the correct relationships are established and information is appearing correctly; comparing current estimates to previous estimates; performing outlier analysis; reviewing data for new procedure or methodological changes; reviewing any open issues identified in past processing iterations. Document progress and results as needed.
4	Investigate and Resolve Issues	Investigate and resolve critical issues identified during the internal QC process.
5	Rerun Data (if necessary)	If data issues are identified, rerun the data and conduct internal QC.
7	Investigate and Resolve Issues	Investigate and resolve critical issues identified during the external QC process, as discussed with the MHDO Compliance Officer and Executive Director.
8	Accept or Reject Data	MHDO accepts or rejects the data deliverable based on the testing results. When accepted, the data is released.
9	Metadata and Release Documentation	Metadata and associated release documentation is updated with changes or data quality concerns and released with data.

Appendix B: MHDO APCD Data Elements Used in the Analysis

This appendix includes a list of MHDO APCD data elements used for this analysis (indicated by the presence of an asterisk), or in the process of creating the underlying dataset for CompareMaine (Table B.1).

TABLE B.1. MHDO APCD MEDICAL CLAIMS

Data Element	Data Element Name - MHDO APCD Medical Claims	Transformation Type
MC001_SUBMITTER	MHDO Submitter ID	As Submitted
MC002_PAYER*	MHDO Payer ID	As Submitted
MC004_CLAIM	Payor Claim Control Number	As Submitted
MC005_LINE	Line Counter	As Submitted
MC013_DOB	Member Date of Birth	Derived
MC017_PDATE	Date Service Approved (AP Date)	As Submitted
MC018_ADMDAT	Admission Date	As Submitted
MC024_PRV	Rendering Provider Number	As Submitted
MC036_BILLTYPE*	Type of Bill - Institutional	As Submitted
MC037_FACTYPE*	Place of Service - Professional	As Submitted
MC038_STATUS	Claim Status	As Submitted
MC054_REV*	Revenue Code	As Submitted
MC055_CPT*	Procedure Code	As Submitted
MC056_MOD1	Procedure Modifier 1	As Submitted
MC057_MOD2	Procedure Modifier 2	As Submitted
MC059_FDATE	Date of Service From	As Submitted
MC060_LDATE	Date of Service through	As Submitted
MC061_QTY	Quantity	As Submitted
MC062_CHG	Charged Amount	
MC063_TPAY*	Paid Amount	As Submitted
MC064_PREPAID*	Prepaid Amount	As Submitted
MC065_COPAY*	Copay Amount	As Submitted
MC066_COINS*	Coinsurance Amount	As Submitted
MC067_DED*	Deductible Amount	As Submitted
MC068_PATCON	Patient Account/Control Number	As Submitted
MC076_BILLPROVIDN	Billing Provider Number	Derived
MC077_NPI	National Provider ID - Billing Provider	As Submitted
MC078_PRVLNAME	Billing Provider Last Name or Organization Name	As Submitted
MC902_IDN	Record ID#	Derived
MC907_MHDO_CLAIM	MHDO assigned replacement for payor's claim ID	Derived
MC911_MHDO_MEMBERID	MHDO assigned Member ID	Derived
MC950_SERVICING_NPI*	National Provider Identifier	Derived

Appendix C: Methodology Differences with the CompareMaine Cost Estimates

The Median Payment in the Detailed Data Set is not comparable to the median cost estimates on CompareMaine, primarily because:

1. Additional processing is undertaken for CompareMaine analysis that results in further episodes being filtered out of the dataset. This means that the final dataset used in this report contains more episodes of care than the final dataset used for CompareMaine.
2. For some procedures, the cost of the service or procedure on CompareMaine includes costs associated with more than just the specified CPT code. For example, for CT scans that include contrast, the payment estimate on CompareMaine includes the fees for taking the image, interpreting the image, and the contrast. For colonoscopies, the payment estimate on CompareMaine includes all services related to the outpatient procedure on the day of the surgery, such as administered medications, medical and surgical supplies, pathology, and surgeon fees. Therefore, the median payment displayed for procedures in the Detailed Data Set is not comparable to the median payment displayed for procedures on CompareMaine, as the payment on CompareMaine is meant to provide a more complete picture of the total expenses a consumer can expect to incur, rather than just the fee for the specified CPT code alone.
3. CompareMaine uses a different facility vs. professional component definition than the current analysis. On CompareMaine, the total payment is displayed and broken down into two components, the facility/technical component and the professional component. The facility/technical component is a combination of the facility and technical components, rather than reporting the facility component alone, which is done in the current analysis. Therefore, the technical/facility fee amount on CompareMaine comes from a UB-04 claim form **OR** a CMS-1500 with a technical modifier and the professional fee amount comes from a CMS-1500 claims form. The difference in categorization means that cost and percentage comparisons between the current analysis and CompareMaine may not be directly equivalent, as the definitions of the components vary.