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July 2024 APCD Data Release Notes

# Opening Statement

This release contains the following data:

* 2024 Q1 Commercial data
* 2024 Q1 MaineCare (Medicaid) data
* 2023 Q2-Q3 Medicare data

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# Documentation Included with This Release

The documentation included in this release: (a description of each document is provided on page 4 of this document)

1. MHDO’s Release Notes (this document)
2. MHDO’s 2024 Q1 Release Report
3. MHDO’s 2024 Q1 Payer Index
4. MHDO’s 2024 Q1 Validation Report
5. MHDO’s APCD FAQ
6. MHMC’s Methodology for Removing Duplicate Rx Claims
7. Business Rules and Entity Relationship Diagrams (ERDs)
8. CMS/ResDAC Codes

# Reminders

The MHDO APCD Business Rules and Entity Relationship Diagrams (ERDs) document is designed to assist the user with understanding the relationships between tables and the current methodology used to derive the value-added components of the MHDO APCD.

MHDO’s Data Dictionary is available here: [MHDO Data Dictionaries (maine.gov)](https://mhdo.maine.gov/mhdo-data-dictionary/search).

# Member Match to Eligibility

Overall, the match rate (which represents the percentage of claims that have a matching eligibility record for the member) is high for all claim types and payer categories. Information on these match rates can be found in MHDO’s 2024 Q1 Release Report.

## Medical Claims File

The overall match rate for the medical claims file is 99.3%.

## Dental Claims File

The overall match rate for the dental claims file is 99.0%.

## Pharmacy Claims File

The overall match rate for the pharmacy claims file is 99.8%.

# Payer Specific Notes

**Sierra Health and Life Insurance Company, Inc (C0383)**

Starting with Q4 2023, UnitedHealthcare Insurance Company (C0423D) is making MC, ME and PC data file submissions on behalf of Sierra Health and Life Insurance Company, Inc (C0383).

**Express Scripts Administrators (T0292)**

First, Express Scripts Administrators (T0292) is the Third Party Administrator for the Centene companies, and the payor codes for American Progressive Life and Health Insurance Company of NY (C0053), WellCare of Maine, Inc (C0749), and WellCare Prescription Insurance, Inc (C0534) should be assigned to each payor’s records in the Payor fields of ESA’s (T0292) consolidated eligibility and pharmacy claims files since 2024 Q1. However, Express Scripts did not include the payer codes for these entities, and instead submitted the records with submitter code T0292 and payer code T0292. As a result, there are no 2024 Q1 pharmacy claims and eligibility data for payers C0053, C0534, C0749, while there is a large increase in payer T0292’s pharmacy claims and eligibility data for this quarter.

Second, ESA and Centene companies are required to use inter-file identifiers so that pharmacy eligibility and claims from ESA can be tied to Centene medical eligibility and claims for the same members across payors to conform with 90-590 C.M.R. Chapter 243 Sec 2(A)(13)(d) on the use of consistent, inter-file identifiers. Within the Q1 2024 data for ESA and Centene, there are 19,625 matching persons from both entities and none of these persons have the same member identifier (XX009\_Contract).

**United Healthcare of Wisconsin Inc (C0772)**

Beginning in January 2023, claims for United Healthcare of Wisconsin (C0772) were incorrectly reported under Payer ID C0423D. In this release, incorrect payor ID C0423D was removed for the relevant medical claims, medical eligibility, and pharmacy claims and replaced with C0772.

**Medicare (G0002)**

Data identifying the Billing Provider has been integrated into 2023 Q2-2023 Q3 Medicare (G0002) data. Integrating the Billing Provider information into historical Medicare claims will be completed in the October 2024 release.

For Pharmacy claims, the payor type “Medicare” includes Medicare Part D claims for both those insured by Medicare Original and Medicare Advantage.

# Missing Data and Other Data Observations

Refer to the **MHDO Payer Index file** for more information about payer submitter deactivations and data end dates. As a reminder of our data release policy, we typically don’t release claims data if valid eligibility for that reporting period is not available.

**Change Healthcare Cyberattack**

In February 2024, one of the largest payment processing systems – Change Healthcare – experienced a cyberattack. The MHDO connected with the largest payors to assess the potential impact of the cyberattack on claims volume reporting for Q1-Q2 2024. Based on insight from payors, there was minimal impact in claims volume reporting among most of the largest Commercial payors; however, MaineCare (G0001) was unable to submit some data as a result (see below note).

## Medical Claims File

None.

## Dental Claims File

None.

## Pharmacy Claims File

**MaineCare** - G0001

Due to the Change Healthcare cyberattack, MaineCare did not submit Q1 2024 Pharmacy claims data to MHDO. We anticipate this data will be available in the October 2024 release.

# Description of Documentation Included in MHDO APCD Release to support the Data

1. Release Report

This report provides a summary by payer and file type of all the data included in this release (Release Summary Pivot worksheet). It also contains worksheets by claim type (DC, PC, and MC) on the match rate to the eligibility file. This report is produced with each quarterly release.

1. Payer Index

This report provides the registration information for each payer by year. It includes both active and deactivated payers.

1. Validation Report

This report lists all validations that incoming data are checked against and indicates accuracy by payer (payer codes as defined in the APCD Payer table). This report is produced with each quarterly release.

1. MHMC’s methodology for removing duplicate Rx Claims

This document details one user’s methodology for removing duplicate pharmacy claims.

1. Frequently Asked Questions

This resource on the MHDO website is available to answer questions about the APCD: [https://mhdo.maine.gov/faqs\_data.html#apcd data](https://mhdo.maine.gov/faqs_data.html%23apcd%20data)

1. MHDO Data Dictionary

The MHDO Data Dictionary is an interactive tool to assist data users with understanding the content, format and structure of the MHDO All Payer Claims Database (APCD) data sets, and the MHDO Hospital Encounter Data. The MHDO Data Dictionary is available at <https://mhdo.maine.gov/mhdo-data-dictionary/>

1. Business Rules and Entity Relationship Diagrams (ERDs)

This documentation was developed in collaboration with our data users to support the MHDO’s metadata strategy. The Business Rules describe the current methodology used to derive the value-added components of the MHDO APCD. The entity relationship diagrams (ERDs) show the relationships between data tables.

1. CMS/ResDAC Substance Use Disorder Codes

A listing of Substance Use Disorder (SUD) procedure codes developed by CMS/ResDAC. MHDO uses this list to redact the SUD claims from the MaineCare data submitted to the MHDO.