**Maine Health Data Organization (MHDO)**

**2014 Q1 APCD Release**

**August 4, 2014**

**Release Notes:**

**Opening Statement**

In an effort toward our goal of continuous quality improvement the Maine Health Data Organization (MHDO) has contracted with the Maine Health Management Coalition (MHMC) for an external review of our APCD data. The MHMC has reviewed a sample of the commercial data that is included in this release.  The issues that the MHMC identified in the sample fall into two categories:

1. Immediate issues that we have addressed in this release (documented in our release notes)
2. Longer term issues that we either need to work with specific payers on addressing or we need to consider a validation and or rule change in order to address the systemic issue.

Note that some of the issues that we have addressed in this release are based on our current structure.  As we work towards building our master indices (provider, individual and payer) we are confident that greater improvements will be realized.

Lastly, we continue to work on improving our documentation.  We are providing the users with several documents as part of this release:

1. MHDO’s Release Notes (this document)
2. MHDO’s 2014Q1 Release Report
3. MHDO’s Compliance Status Report
4. MHMC’s methodology for removing duplicate Rx Claims

**Update on Previously Reported Issues**

1. Anthem Run Out Data

Anthem recently reported that for the time period April 2013 forward, “run out” claims for members that were terminated prior to the claim being paid has not been submitted. Anthem is working on identifying this missing data and submitting to the MHDO. Anthem plans to submit this block of run out data to the MHDO in November 2014. This would mean the run out data will be included in the 2014 Q4 release, which is tentatively planned for end of March 2015.

1. Missing Anthem data (C0065 & C0541)

The previously reported Anthem Insurance Companies, Inc. replacement data which was not included in the refresh release is included in the current release. The missing data falls into the following years, months and data types impacted:

**Year 2010 (C0541):**

* January-May Medical file
* June –Rx file
* July-August-Medical file
* September –Medical and Rx files
* October-Medical and Rx files
* November-Medical Files

**Year 2012 (C0541):**

* March, August and September- Medical Files

**Year 2013 (C0065):**

* July-December - Medical Files
* July-December - Rx Files
* July-December - Eligibility Files

1. Optum Rx/UMR duplicate claims (T0172/T0216)

A spreadsheet listing 77,551 Pharmacy Claims primary key values (IDN) is being included with this release. These records were included in previously released data and have since been identified as being duplicative. These records should be removed from any analysis of the data.

**Update on Medicare Data**

1. Medicare SSN, Contract and Member ID issue

The SSN, Contract and Member ID values assigned to Medicare members in the 2012 and 2013 data were not properly assigned. Most Medicare members for 2012 and 2013 were assigned new release values, meaning they would not link to previous years, nor would they link across other payers within the same years. A crosswalk is being included in the current release which will allow users to link to the correct values. All future releases will include the corrected values. Users who wish to receive a complete replacement of the 2012 and 2013 Medicare date previously released should contact the MHDO.

1. Medicare 2013 Q3 and 2013 Q4 Data

The MHDO has received the 2013 Q3 and 2013 Q4 and is working on mapping it to the APCD format, with the goal of including both quarters in the 2014 Q2 APCD release which is tentatively planned for end of September 2014.

**Missing Data**

1. Payers with missing data

Several payers are missing data that was due for inclusion in the current release. The MHDO is working with these payers to bring them back into compliance. Please refer to the spreadsheet ComplianceInfo140801.xlsx for additional detail.

**Additional Notes**

1. A new support spreadsheet is being included with this release. This spreadsheet contains several sheets:
   1. Release Summary Pivot - This report provides a high-level overview of the record counts available in the 2014Q1 release by Incurred Year and Payer. This is a pivot table, so users can filter by file type, view claim and member counts and also view by Incurred Month.
   2. DC Match to Eligibility, MC Match to Eligibility, PC Match to Eligibility – These reports show the percentage of claim records which have a corresponding eligibility record for year and month in which the claim was incurred.
   3. DC PMPM, MC PMPM, PC PMPM – These reports show the total paid amount by payer and incurred year and month as well as the total number of eligible members in the same period. From this, the amount paid per member is calculated. By default, this report is filtered to only show 2009 forward.