[](http://mhdo.maine.gov/imhdo/)

April 2024 APCD Data Release Notes

# Opening Statement

This release contains the following data:

* 2023 Q4 Commercial data
* 2023 Q4 MaineCare (Medicaid) data
* 2023 Q1 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 2023 Q4 Release Report
3. MHDO’s 2023 Q4 Payer Index
4. MHDO’s 2023 Q4 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. The Business Rules document was last updated on December 19, 2022 to reflect enhancements made to the MHDO APCD over the past year, including the MHDO de-identified Member, Person, and Provider IDs. Information has also been added regarding the newly available FIPs codes. MHDO’s updated Data Dictionary is now available here: [MHDO Data Dictionaries (maine.gov)](https://mhdo.maine.gov/mhdo-data-dictionary/search). We are currently doing a comprehensive review and update of all data user documentation including the Business Rules and ERDs document, and the FAQs.

# 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 2023 Q4 Release Report.

## Medical Claims File

The overall match rate for the medical claims file is 99.6%.

## Dental Claims File

The overall match rate for the dental claims file is 99.1%.

## Pharmacy Claims File

The overall match rate for the pharmacy claims file is 98.2%.

# 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).

**MaineCare** (G0001)

MaineCare submitted a supplemental medical claims file for claims paid in December 2021 to capture approximately 98,000 previously missing claims. These missing claims were included as part of the 2023 Q3 release and can be identified by the value of ’02 in the MC331 Payment Arrangement Type Indicator field. The value of ‘02’ represents Fee for Service. The MC331 field is blank for all previously submitted 2021 claims because the element was not present in 90-590 Chapter 243, Uniform Reporting System for Health Care Claims Data Sets, at the time.

# 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.

**USABLE Mutual Insurance Company** (T0526)

USABLE’s Q1 2023 medical claims file was noncompliant. Corrected data have since been resubmitted and are included in this release.

## Dental Claims File

None.

## Pharmacy Claims File

**North America Administrators (NAA)** – T0508

NAA’s Q3 2023 Pharmacy claims file was noncompliant. Corrected data have been resubmitted and included in this 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.