

# HOW MASSACHUSETTS TACKLED THE CHALLENGE OF IDENTIFYING THE FINAL VERSION OF THE PAID CLAIM WITHIN ITS ALL-PAYER CLAIMS DATABASE

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# THE CHALLENGE:

**CHIA has a business requirement to identify the accurate VIEW of a CLAIM at a point in time to measure health care cost and utilization.**

## USES OF CHIA DATA



### Good Government

Many Massachusetts state agencies use CHIA's data in their work. This streamlined data sharing supports administrative simplification. Notably, the Massachusetts Health Connector uses the MA All-Payer Claims Database to design and implement the state's risk adjustment program, a requirement of the Affordable Care Act (ACA).



### Helping Hospitals

Massachusetts healthcare providers use CHIA's financial and patient-level data for many purposes, including benchmarking, strategic planning, market analyses and clinical integration initiatives.



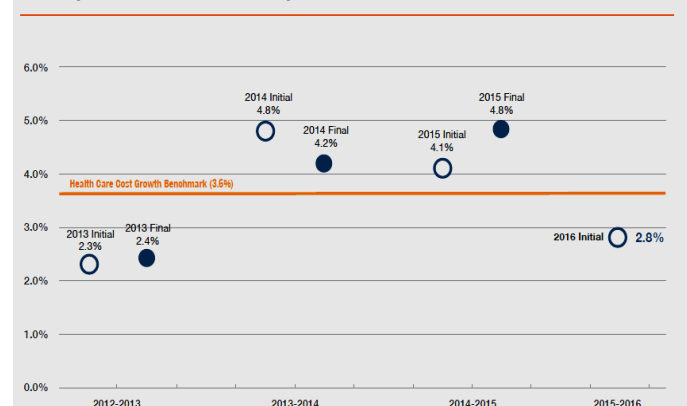
### Advancing Research

Researchers from leading universities, foundations, public policy think tanks and advocacy groups use CHIA's data to advance the Triple Aim of reducing costs, improving population health and improving quality.

## PERFORMANCE OF THE MASSACHUSETTS HEALTH CARE SYSTEM

## ANNUAL REPORT SEPTEMBER 2017

### Per Capita Total Health Care Expenditures Growth, 2012-2016



# MA APCD Data is Claim-Line, Level Data



Payer Claim Control Number	Line Number	Version Number	Procedure Code	Paid Amount	Highest Version Flag
<b>Claim #1: Original Version Submitted</b>					
123	1	1	36415	\$20.00	No
123	2	1	83880	\$200.00	No
123	3	1	85025	\$15.00	No
<b>Claim #1: Reversal / Void Submitted</b>					
123	1	2	36415	-\$20.00	No
123	2	2	83880	-\$200.00	No
123	3	2	85025	-\$15.00	No
<b>Claim #1: Replacement / Amendment Submitted (HIGHEST VERSION)</b>					
123	1	3	36415	\$22.00	Yes
123	2	3	83880	\$256.00	Yes
123	3	3	85025	\$35.00	Yes

# MA APCD Data is Line-Level, Claim Data

**Finding:**  
**Heterogeneous data due to variation in adjudication patterns among submitters**

## High-Level Issues

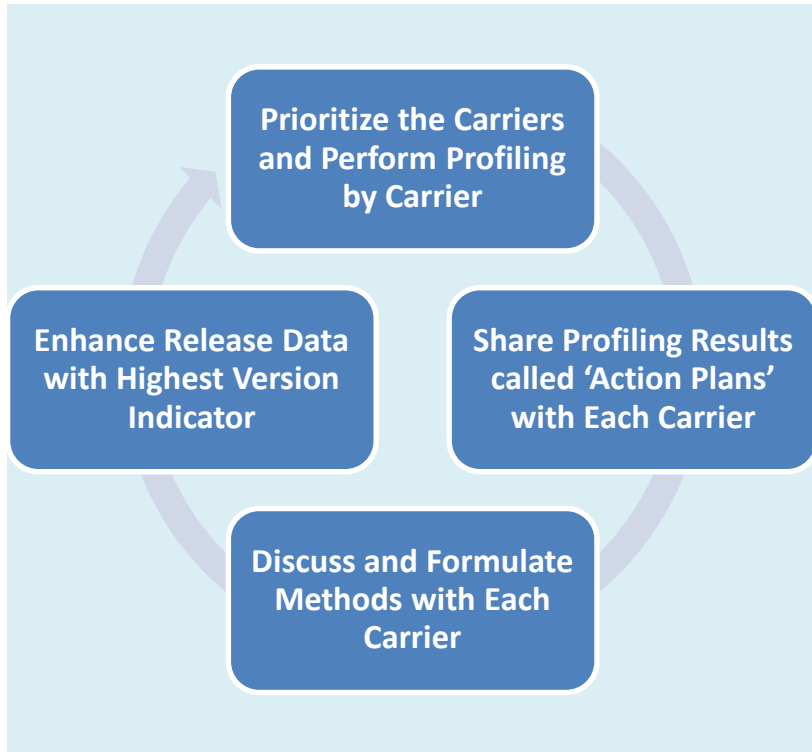
- Different Methods for Voiding, Amending, and Replacing Claims among submitters.
- Different Reporting patterns for the critical data elements (Claim Line Type, Claim Status, and Version Number).
- It's Complex – especially for submitters with multiple patterns within submissions.
- Some submitters reported they could not “version” the data.

**How much data to be versioned in latest release?**

**1.8 Billion Medical Claim Lines**

**930 Million Pharmacy Claim Lines**

# CHIA's Process for Versioning Data



## Action Plan for Submitter X

**OBJECTIVE:** The objective of this quality assurance effort is to satisfy one of CHIA's key business requirements: to identify the accurate VIEW of a CLAIM at a point in time to measure health care cost and utilization. To that end, CHIA would like to establish an accurate and consistent process for medical claims versioning without undue burden on the submitters of the data (payers) or the recipient of the data (CHIA.) CHIA is very appreciative of the opportunity to discuss this important work with the key contacts at each payer.

**APPROACH / METHODS:** CHIA performed profiling on the 2016 incurred claims.

**FINDINGS:** Submitter X started submitting data to CHIA with January 2015 submission files. A profile of the medical claims shows that the majority of the claims (85.93%) have a claim line type of Original with no versioning required. Submitter X also submitted claims with multiple versions. The most prominent pattern for claims with multiple versions is two original claims. Although the version number is '1' for both versions, the second original looks like a reversal (void) with negative paid and charge amounts. Submitter X also submitted a smaller percentage of claims as two amendments. For the majority of cases of two amendments, the version number decreases from '2' in the first version to '1' in the second version. The second version looks like a reversal (void) with negative paid and charge amounts. See profile in tab called 'Summary Profile.'

**PROPOSED VERSIONING METHOD(S):** CHIA would like to use the process of elimination to determine which claim lines should remain active within its data releases. The CHIA process called 'Versioning' inactivates claim lines and assigns a designation of 'Highest Version' to the surviving claim lines. The purpose of the first meeting with Carrier X is to discuss the summary profile and examples within this spreadsheet with the ultimate goal of establishing a consistent process for versioning.

### Data Profile

**TIME FRAME(S) FOR VERSIONING:**

Patterns of Claim Line Type, Version Number, and Claim Status for

**QUESTIONS:**

Lines Grouped by Member ID, Service Provider Number, Payer Claim Control Number, and Line Counter

Claim Line Type	Version Number	Claim Status*	# of Records
Original(O)	1	01	2,048,790
Original(O)	1	04	446,028
Original(O)	1	1	195
Original(O)	1	22	323
Amendment(A)	1	1	1,480
Amendment(A)	1	04	169
Amendment(A)	1	22	15
Amendment(A)	2	01	111,490
Amendment(A)	2	04	34,863
Amendment(A)	2	22	45
Original - Original (OO)	1-1	01-22	176,464
Original - Original (OO)	1-1	04-04	206
Original - Original (OO)	1-1	04-22	67,304
Original - Original (OO)	1-1	22-01	832
Original - Original (OO)	1-1	22-04	348
Amendment - Amendment (AA)	1-1	01-22	82
Amendment - Amendment (AA)	1-1	04-22	6
Amendment - Amendment (AA)	2-1	01-22	10,642
Amendment - Amendment (AA)	2-1	04-04	6
Amendment - Amendment (AA)	2-1	04-22	4,242
Amendment - Amendment (AA)	2-2	01-22	22
Amendment - Amendment (AA)	2-2	04-22	12
Amendment - Amendment (AA)	2-2	22-01	158
Amendment - Amendment (AA)	2-2	22-04	76

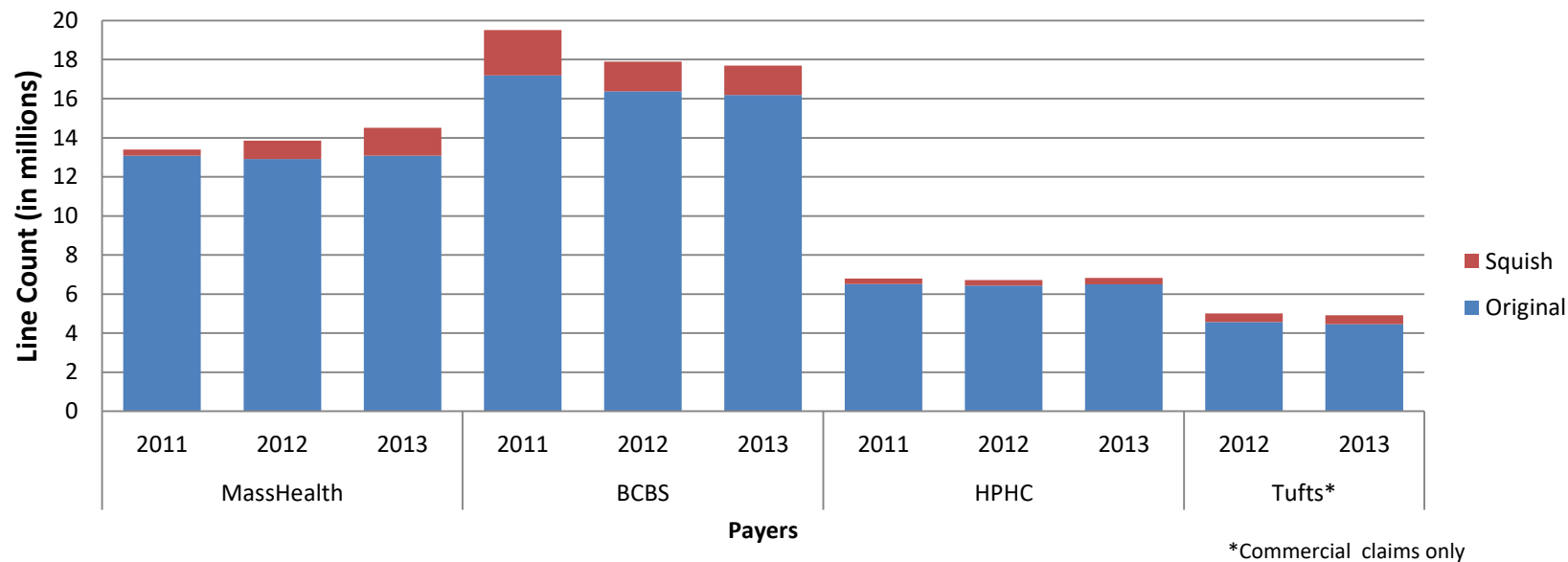
Claim Status of '1' or '01' is Processed as Primary

Claim Status of '04' is Denied

Claim Status of '22' is Reversal

# MA APCD Pharmacy Versioning

## APCD Release 3.0 Pharmacy Data Impact of Versioning



## **Current Status:**

- **Versioning Implemented for 17 Carriers' Medical Claims and 14 Carriers' Pharmacy Claims**

## **Continuing Challenges:**

- **Monitoring Newly Submitted Data for Consistent Patterns**
- **Processing and Storing Terabytes of Data**
- **User Education**

## **Next Steps:**

- **Working on Rx Versioning for 4 Carriers and Medical Claims Versioning for 1 Carrier**

# QUESTIONS?



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# THANK YOU!



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