Agenda

- Welcome

- Topics
  - Claims per Member Counts and Methodology
  - Events per Payer Examples and Methodology
  - Latest APCD Release Information and Data Tips

- Questions/Discussion

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI

Arkansas APCD Team

- Kenley Money, MA, MFA — Director of Information Systems Architecture/ACPD Director, ACHI

- Nichole Sanders, PhD — Assistant Director of Analytics, ACHI

Administered by:
ACHI

Agenda

- Welcome

- Topics

    - Claims per Member Counts and Methodology

    - Events per Payer Examples and Methodology

    - Latest APCD Release Information and Data Tips

- Questions/Discussion

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI

Claims Per Member Counts

- Understanding the number of claims per member can provide valuable context for understanding cohorts, total services cost and spend, utilization, etc.

- Two levels of claim counts by member will be illustrated

  - Unique claim counts by unique member

  - Claims / members with claim (rate)

- Unique members are represented by the Study ID (SE ID + Member ID)

- Unique \claims are represented by distinct claim numbers (MC004, PC004, DC004)

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI

Claim Counts by Member/Methodology

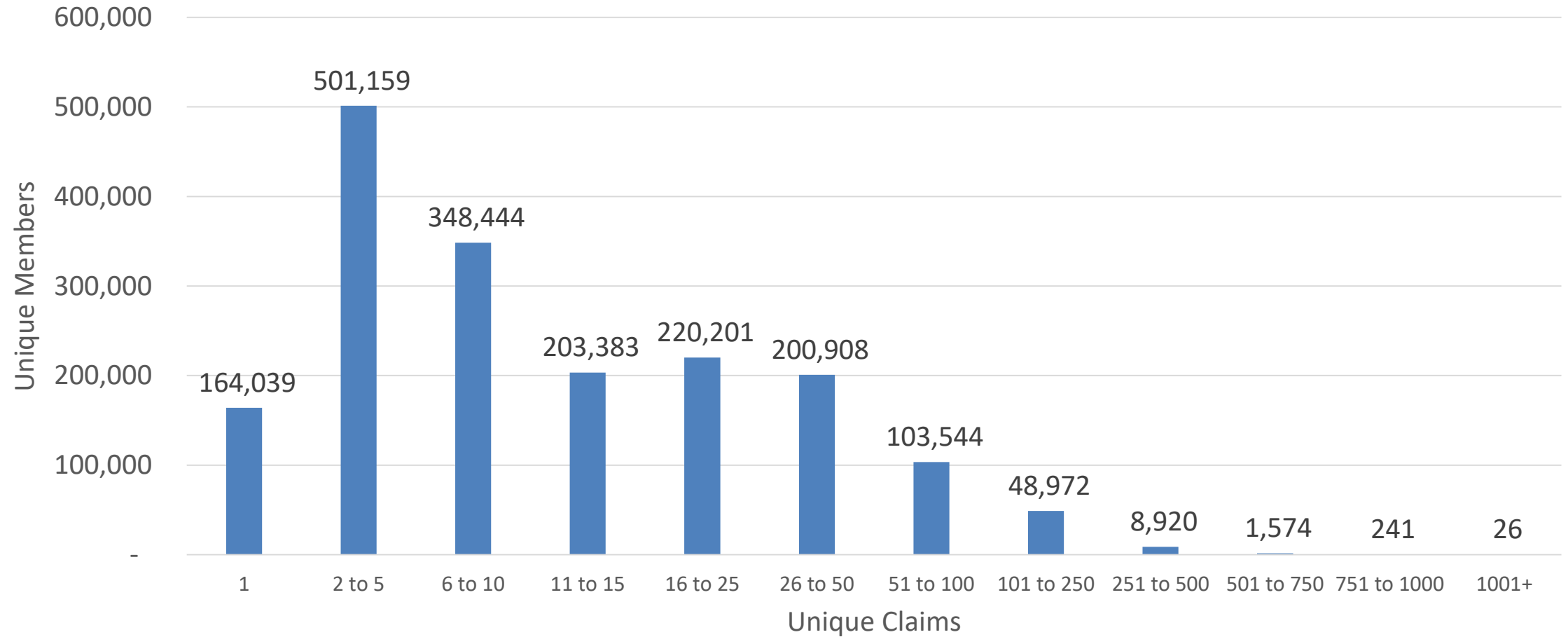| # of Claims	Members / Medical Claims	Member / Pharmacy Claims	Member / Dental Claims
1	164,039	191,315	240,573
2 to 5	501,159	466,335	524,028
6 to 10	348,444	274,335	46,268
11 to 15	203,383	172,854	2,615
16 to 25	220,201	214,785	279
26 to 50	200,908	269,326	18
51 to 100	103,544	167,967	1
101 to 250	48,972	43,056	-
251 to 500	8,920	758	-
501 to 750	1,574	33	-
751 to 1000	241	15	-
1001+	26	5	-

Methodology:

- Select medical, pharmacy, and dental claims based on claim service date in 2018
- Group by Study ID* and claim number
- Count number of distinct claims by member for each file type
- Assign flag representing number of claims per member groups
- Categorize and report the number of claims per member ID

*Remember, Study ID is the concatenated Entity ID (ME001, MC001, PC001, DC001) and Member ID (ME107, MC137, PC107, DC056).
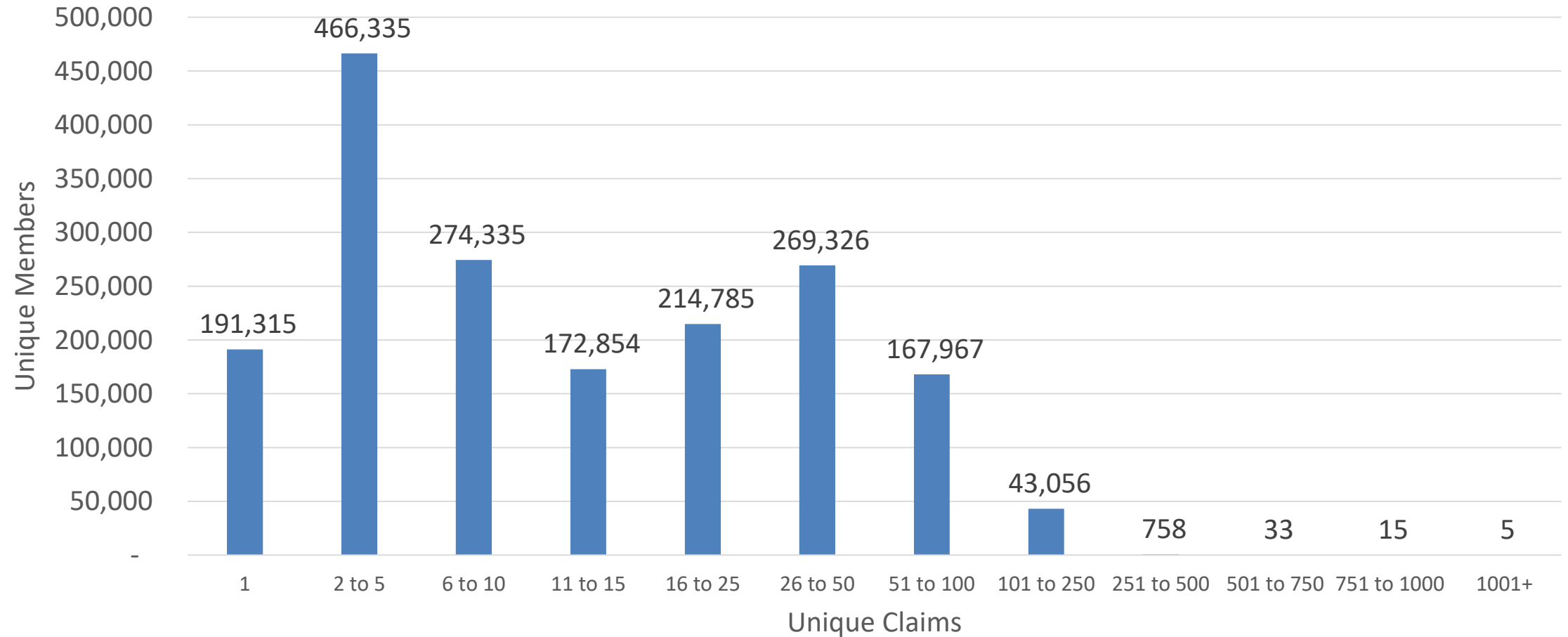
HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI

Medical Claims

2018 Medical Claims Per Member

Bar chart showing Unique Members (y-axis) by Unique Claims (x-axis):

Unique Claims	Unique Members
1	164,039
2 to 5	501,159
6 to 10	348,444
11 to 15	203,383
16 to 25	220,201
26 to 50	200,908
51 to 100	103,544
101 to 250	48,972
251 to 500	8,920
501 to 750	1,574
751 to 1000	241
1001+	26

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI

Pharmacy Claims

2018 Pharmacy Claims Per Member

Chart: Bar chart showing Unique Members (y-axis) versus Unique Claims (x-axis).

Unique Claims	Unique Members
1	191,315
2 to 5	466,335
6 to 10	274,335
11 to 15	172,854
16 to 25	214,785
26 to 50	269,326
51 to 100	167,967
101 to 250	43,056
251 to 500	758
501 to 750	33
751 to 1000	15
1001+	5

Dental Claims

2018 Dental Claims Per Member

Unique Members (y-axis: 600,000 / 500,000 / 400,000 / 300,000 / 200,000 / 100,000 / -)

Unique Claims	Unique Members
1	240,573
2 to 5	524,028
6 to 10	46,268
11 to 15	2,615
16 to 25	279
26 to 50	18
51 to 100	1
101 to 250	-
251 to 500	-
501 to 750	-
751 to 1000	-
1001+	-

HEALTHCARE TRANSPARENCY INITIATIVE

Administered by: ACHI
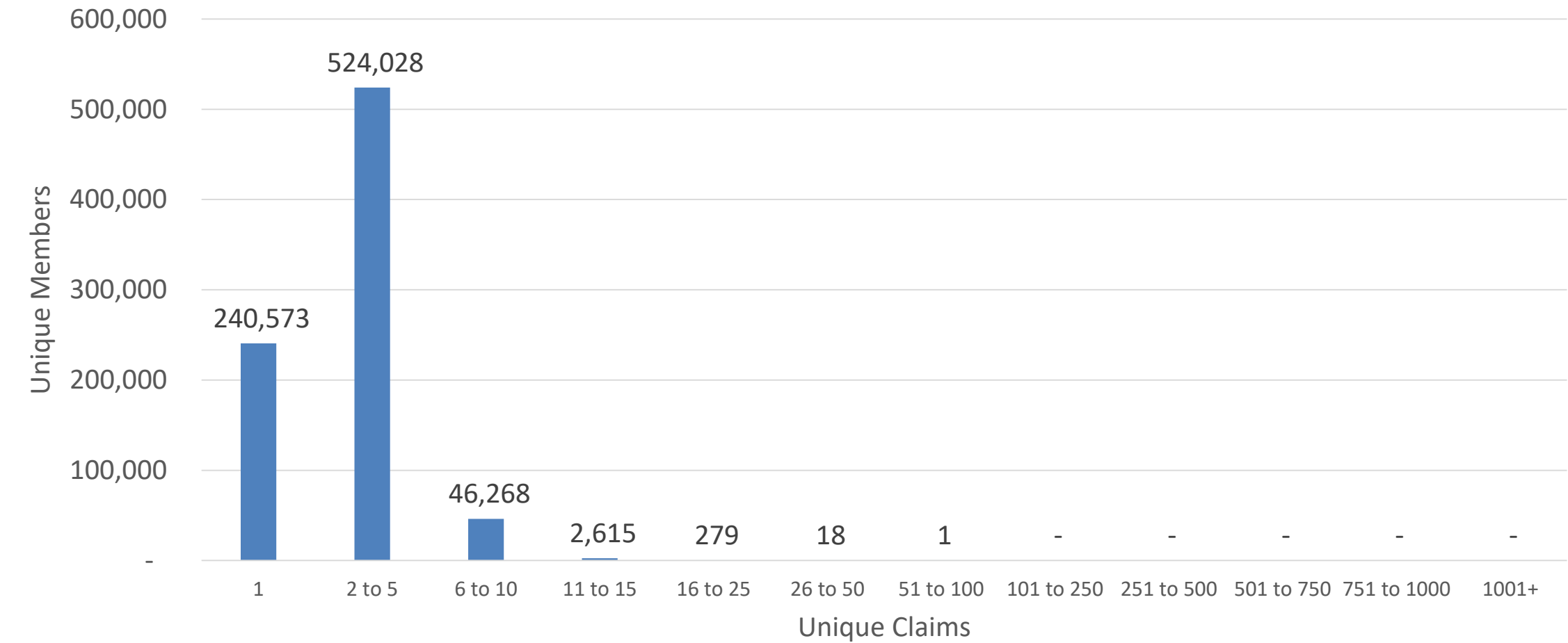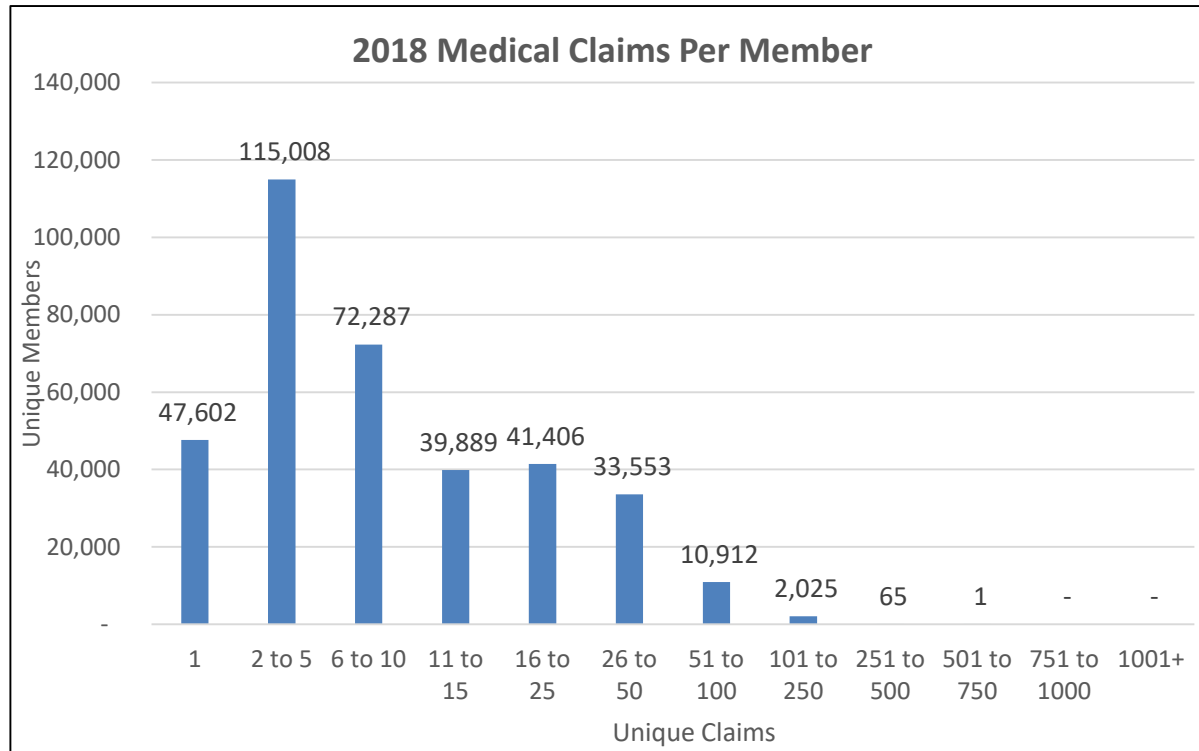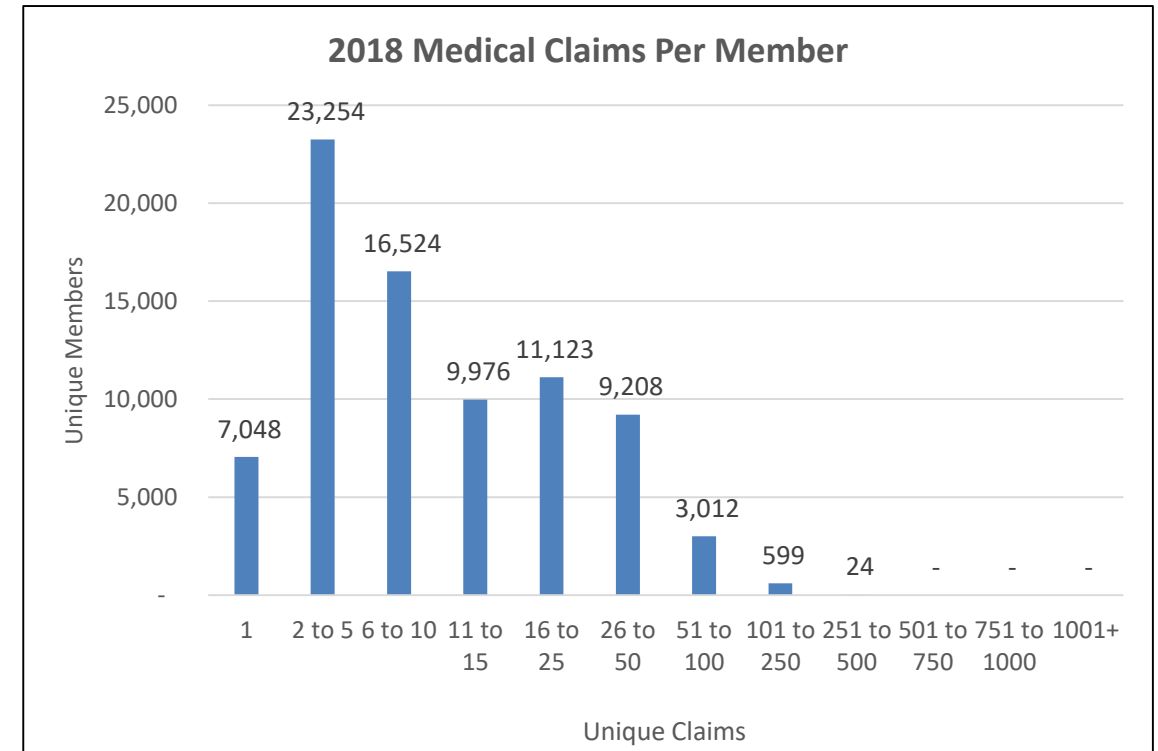
AR Medicaid (99MCD1)

Humana (73288)

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI
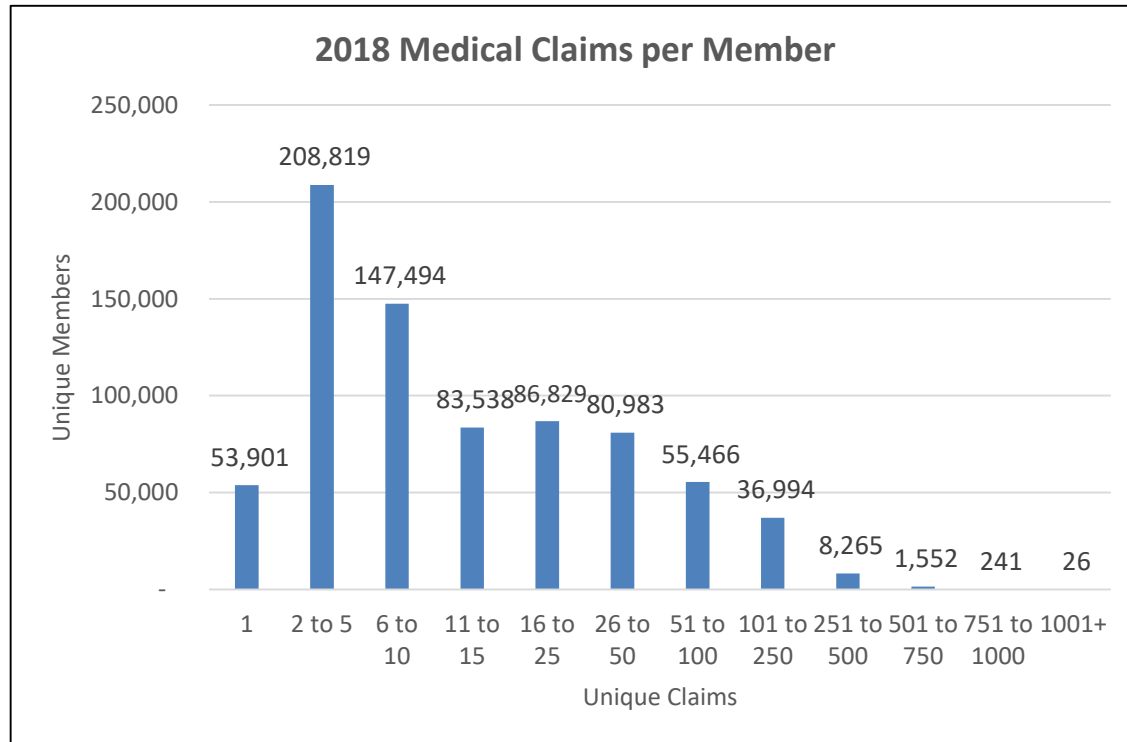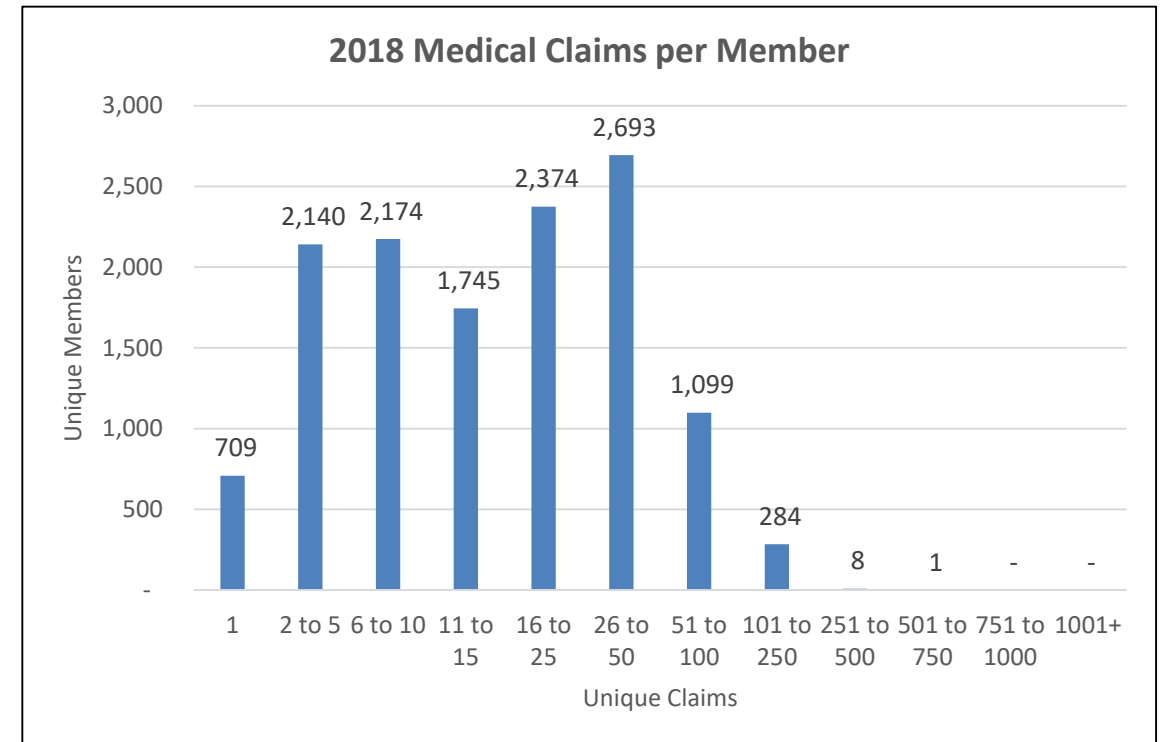
Caremark/CVS (99CAR1)   Delta Dental (47155)

2018 Pharmacy Claims per Member

Unique Members (y-axis): 80,000 / 70,000 / 60,000 / 50,000 / 40,000 / 30,000 / 20,000 / 10,000 / -

Unique Claims	Unique Members
1	27,601
2 to 5	67,101
6 to 10	43,627
11 to 15	30,879
16 to 25	42,330
26 to 50	59,259
51 to 100	42,601
101 to 250	14,591
251 to 500	288
501 to 750	6
751 to 1000	2
1001+	1

2018 Dental Claims per Member

Unique Members (y-axis): 300,000 / 250,000 / 200,000 / 150,000 / 100,000 / 50,000 / -

Unique Claims	Unique Members
1	119,342
2 to 5	241,535
6 to 10	11,757
11 to 15	210
16 to 25	21
26 to 50	-
51 to 100	-
101 to 250	-
251 to 500	-
501 to 750	-
751 to 1000	-
1001+	-

HEALTHCARE TRANSPARENCY INITIATIVE

Administered by: ACHI

Claim Counts by Hash ID Methodology

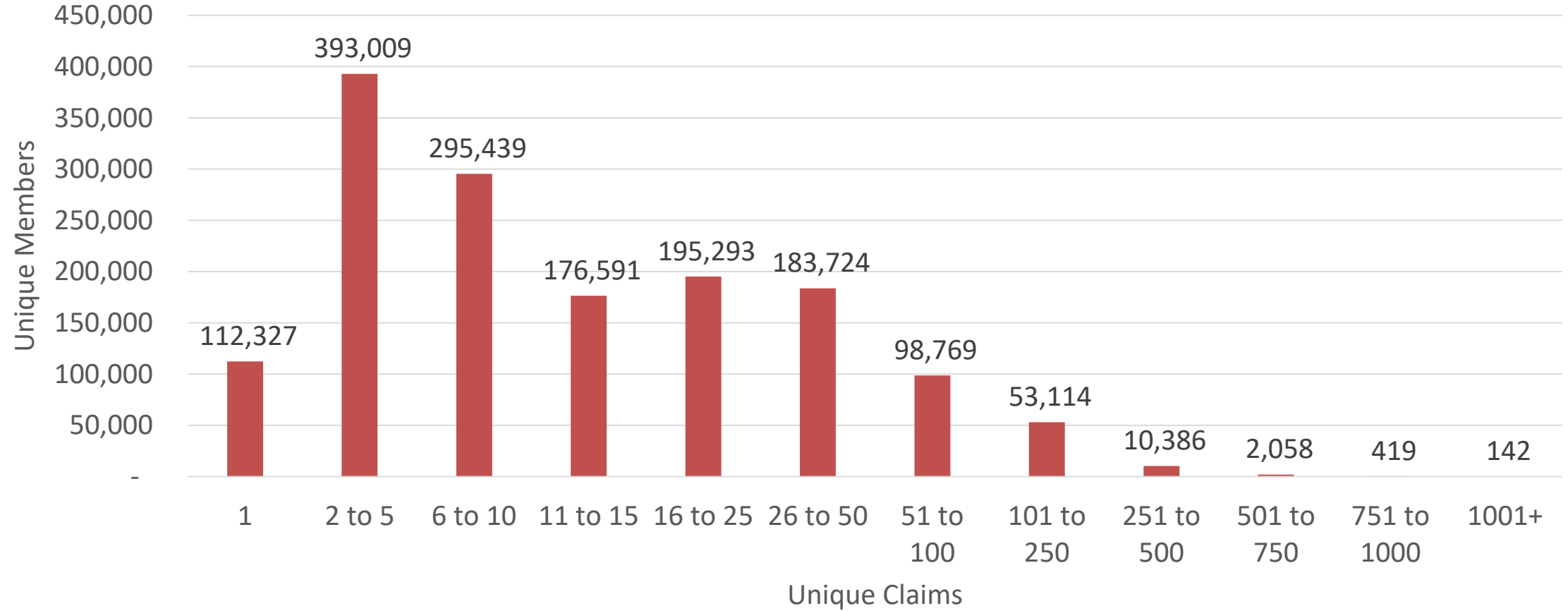| # of Claims	Members / Medical Claims	Member / Pharmacy Claims	Member / Dental Claims
1	112,327	109,991	121,757
2 to 5	393,009	315,794	431,035
6 to 10	295,439	206,791	78,835
11 to 15	176,591	130,650	6,909
16 to 25	195,293	176,086	1,902
26 to 50	183,724	242,540	39
51 to 100	98,769	181,632	1
101 to 250	53,114	80,788	-
251 to 500	10,386	7,407	-
501 to 750	2,058	400	-
751 to 1000	419	41	-
1001+	142	21	-

Methodology:

- Select medical, pharmacy, and dental claims based on claim service date in 2018
- Append Hash ID* from member record
- Group by Hash ID and SE ID+claim number
- Count number of distinct claims by individual for each file type
- Assign flag representing number of claims per individual groups
- Categorize and report the number of claims per Hash ID

*Remember, the Hash ID is the concatenated APCD Unique ID (ME998) and Member Gender (ME013)
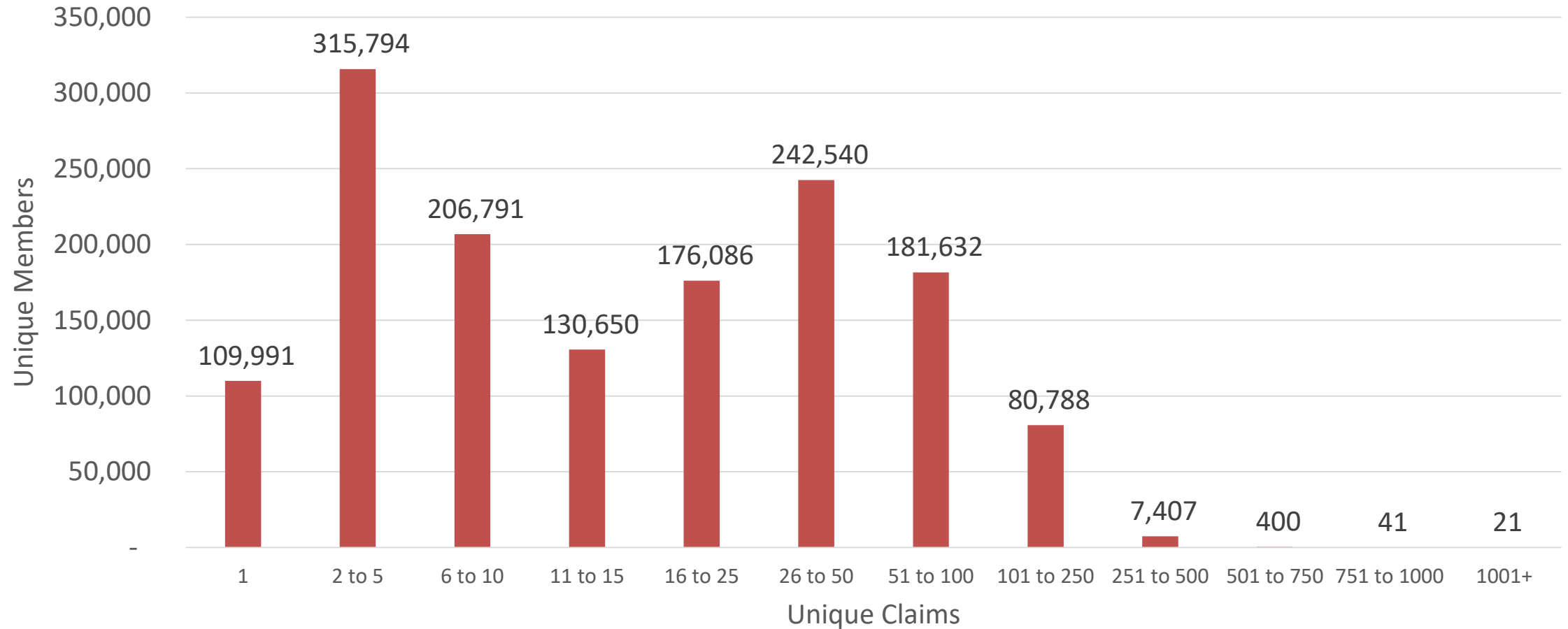
HEALTHCARE TRANSPARENCY INITIATIVE

Administered by:
ACHI

Medical Claims – Hash ID

2018 Medical Claims per Individual

Chart: Unique Members (y-axis) vs Unique Claims (x-axis)

Unique Claims	Unique Members
1	112,327
2 to 5	393,009
6 to 10	295,439
11 to 15	176,591
16 to 25	195,293
26 to 50	183,724
51 to 100	98,769
101 to 250	53,114
251 to 500	10,386
501 to 750	2,058
751 to 1000	419
1001+	142

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI

Pharmacy Claims – Hash ID

2018 Pharmacy Claims per Individual

Bar chart showing Unique Members (y-axis) versus Unique Claims (x-axis):

Unique Claims	Unique Members
1	109,991
2 to 5	315,794
6 to 10	206,791
11 to 15	130,650
16 to 25	176,086
26 to 50	242,540
51 to 100	181,632
101 to 250	80,788
251 to 500	7,407
501 to 750	400
751 to 1000	41
1001+	21

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI

Dental Claims – Hash ID

2018 Dental Claims per Individual

Bar chart. Y-axis: Unique Members (from - to 500,000). X-axis: Unique Claims.

Unique Claims	Unique Members
1	121,757
2 to 5	431,035
6 to 10	78,835
11 to 15	6,909
16 to 25	1,092
26 to 50	39
51 to 100	1
101 to 250	-
251 to 500	-
501 to 750	-
751 to 1000	-
1001+	-

HEALTHCARE TRANSPARENCY INITIATIVE

Administered by:
ACHI
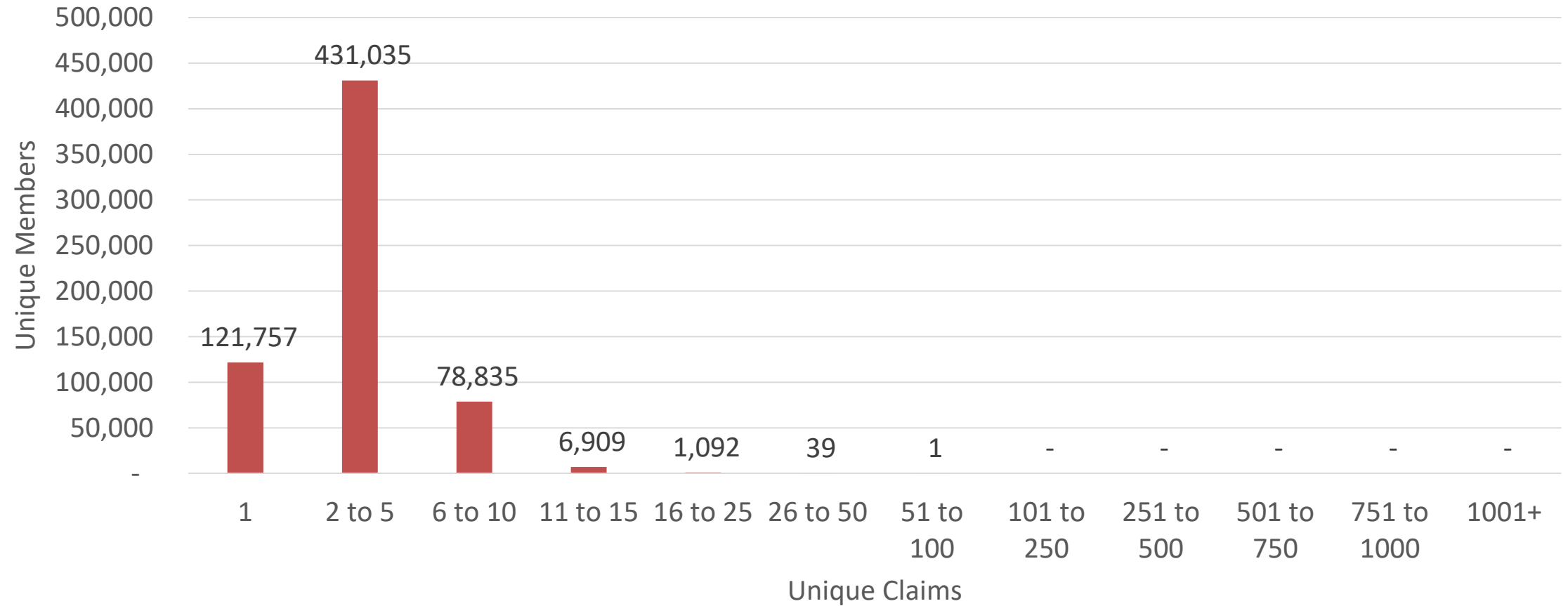
Claims / Members with Claims

- Claim counts by member can distort the level of utilization because submitting entities have varying coverage and/or members.

- The rate of claims to members can be used instead of counts to allow comparison of the level of claims to members, not just the count.

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI

Claims / Members with Claims

SE_ID	Submitting Entity Name	Mbrs with Med Claims	Unique Medical Claims	Rate	Mbrs with Phm Claims	Unique Pharmacy Claims	Rate	Mbrs with Dnt Claims	Unique Dental Claims	Rate
47155	Delta Dental Plan of Arkansas	0	0	**0**	0	0	**0**	372,865	848,822	**2.28**
67369B	Cigna Health & Life Insurance Company Inc.-Cigna East	13,360	158,087	**11.83**	4,261	61,136	**14.35**	0	0	**0**
73288	Humana Insurance Company	13,227	306,247	**23.15**	78,231	2,877,507	**36.78**	1,869	3,309	**1.77**
80799	Celtic Insurance	80,768	1,051,293	**13.02**	76,812	1,843,084	**23.99**	376	861	**2.29**
83470	USAble Mutual Insurance Company	362,748	4,510,568	**12.43**	311,705	5,379,115	**17.26**	92,530	217,895	**2.35**
99CAR1	Caremark	0	0	**0**	327,225	5,311,635	**16.23**	0	0	**0**
99MCD1	Medicaid	764,108	20,981,564	**27.46**	504,506	5,790,459	**11.48**	297,342	857,097	**2.88**

Formula: Unique medical, pharmacy, or dental claims / unique members with medical, pharmacy, or dental claims

HEALTHCARE TRANSPARENCY INITIATIVE

Administered by:
ACHI

Claims / Enrolled Members

- This rate can also be calculated to understand the number of claims as they relate to all enrolled members, not just those with a claim.

- Formula: Unique medical, pharmacy, or dental claims / unique, enrolled members (whether they had a claim or not).

- ME018, ME019, ME020 indicate if the member's coverage type is medical, pharmacy, or dental. (This does not mean the member has claims of these types).

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI

How to Determine Coverage Type

- Values indicating coverage type:
  - ME018 – Medical Services Indicator = 1
  - ME019 – Pharmacy Services Indicator = 1
  - ME020 – Dental Services Indicator = 1

- Value definition:
  - 1 = Yes, the member has that type of coverage
  - 2 = No, the member does not have that type of coverage
  - 3 = It is unknown if the member has that type of coverage
  - 4 = Other
  - 5 = Not Applicable

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI

How to Determine Coverage Type

- <u>Use ME018, ME019, ME020 with caution</u>; not all submitting entities are able to populate them because their claims and plan systems do not communicate with each other.

SE	ME018 (CLM)	ME019 (PHM)	ME020 (DNT)	Note
99CAR1	3	1	3	Correct Values
99MCD1	1	3	3	ME019 and ME020 are not correct.
60217	1	2	2	Correct Values
60217	2	1	2	Correct Values
60217	2	2	1	Correct Values

See the Data Tip!

HEALTHCARE TRANSPARENCY INITIATIVE

Administered by:
ACHI

Agenda

- Welcome

- Topics

  - Claims per Member Counts and Methodology

  - Events per Payer Examples and Methodology

  - Latest APCD Release Information and Data Tips

- Questions/Discussion

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:

ACHI

What is a Procedure?

- Specifically – procedure codes; MC055 (HCPCS or CPT codes) and MC058 to MC058L (ICD 9/10 CM PCS)
  - 1 distinct MC055 per claim line
  - Repeating MC058s on every claim line related to inpatient stay
- Generally – usually includes everything involved in a healthcare episode or event
  - a single claim with multiple lines
  - multiple claims from different service types (facility claim and professional claim)
  - Multiple related claims over a time period

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI

Methodology for Counting Procedures

- How many EKGs per patient?

MC001	MC137	MC004	MC005	MC055	MC059	MC060	MC063
83470	ABCD1234	182390482	1	93005	03OCT2018	03OCT2018	$13.50
83470	ABCD1234	182390482	2	93005	03OCT2018	03OCT2018	$13.50
83470	ABCD1234	182390482	5	93010	03OCT2018	03OCT2018	$27.00
99EBD1	UVWX9876	302493849	1	93010	30OCT2018	30OCT2018	$27.00
99EBD1	UVWX9876	302659841	1	93010	30OCT2018	30OCT2018	$27.00

- Always confer with your SME!

HEALTHCARE TRANSPARENCY INITIATIVE

Administered by:
ACHI

Methodology for Counting Procedures (cont.)

- Count distinct MC001 [submitter], MC137 [member ID], MC004 [claim number] , MC005 [claim line]
  - Per MC055 [CPT/HCPC procedure codes]; compare screening and diagnostic procedures
- Considerations:
  - How many similar procedure codes might appear on the same claim or on the same day
  - How different payers reimburse
  - A submitter might assign a new claim number during adjudication – rare for medical claims
  - The subscription is versioned to avoid those situations, but rely on submitters to share versioning

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI

Methodology for Counting Events/Episodes

- How many emergency room visits included an EKG procedure?

MC001	MC137	MC004	MC005	MC055	MC059	MC060	MC063
83470	ABCD1234	182390482	1	93005	03OCT2018	03OCT2018	$13.50
83470	ABCD1234	182390482	2	93005	03OCT2018	03OCT2018	$13.50
83470	ABCD1234	182390482	5	93010	03OCT2018	03OCT2018	$27.00
99EBD1	UVWX9876	302493849	1	93010	30OCT2018	30OCT2018	$27.00
99EBD1	UVWX9876	302659841	1	93010	30OCT2018	30OCT2018	$27.00

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI

Methodology for Counting Procedures (cont.)

- Count distinct MC001 [submitter], MC137 [member ID], MC059 [date of service]
  - Per year(MC059) [year function on date of service]
- Considerations:
  - To count per year per person use ME998 (hash ID from the member table) and ME013 or MC012 (gender) to get the "healthcare experience" of the individual

HEALTHCARE TRANSPARENCY INITIATIVE

Administered by:
ACHI

Agenda

- Welcome

- Topics

  - Claims per Member Counts and Methodology

  - Events per Payer Examples and Methodology

  - Latest APCD Release Information and Data Tips

- Questions/Discussion

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI

Release Information

- Latest APCD update is now available.

  - APCD Data: Jan. 1, 2013, through June 30, 2020

- [Release Information](#)

  - Release Notes: https://www.arkansasapcd.net/Resources/APCDReleaseNotes/

    – Overall coverage dates

    – Source specific release notes

  - Universe Counts

HEALTHCARE TRANSPARENCY INITIATIVE

Administered by:
ACHI

New Submitters

Submitter	Issue	Resolution
12282 – Humana Regional Health Plan	Versioning issues exist for pharmacy claims data.	Pharmacy data included with conditions. Dental claims through 3/31/20. No issues with medical claims. Versioning workaround available in Data Tips.
60052 – Humana Benefit Plan of Illinois, Inc.	Versioning issues exist for pharmacy claims data.	Pharmacy data included with conditions. No issues with medical claims. Versioning workaround available in Data Tips.

HEALTHCARE TRANSPARENCY INITIATIVE

Administered by:
ACHI

New Submitters

Submitter	Issue	Resolution
60984 – CompBenefits Insurance (Humana)	Versioning issues exist for pharmacy claims data.	Pharmacy data included with conditions. No issues with medical claims. Versioning workaround available in Data Tips.
67369 – Cigna	Two Cigna entities, 67369A and 67369B, have combined into a single entity, 67369. Data exists for all three entities.	See the Data Tips for more information.

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI

Previously Omitted Submitters

Submitter	Issue	Resolution
99MDI1 - MedImpact	Member IDs did not align between member data and pharmacy claims.	Resubmission of all data.
12151 – Arcadian Health Plan (Humana Entity)	Member IDs were not consistent. Versioning issues exist for pharmacy claims data.	Resubmission of all data. Member ID issue resolved. Versioning workaround available in Data Tips.
16256 – Arkansas Total Care	Member IDs did not align between member data and pharmacy claims.	Resubmission of all data through 3/31/20.
62286A – Golden Rule Insurance Company	A significant number of claims are present that have no corresponding member records.	Orphans resolved.
64246 – Guardian	Several data quality issues existed that had no workarounds.	Resubmission of all data.

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI

Previously Omitted Submitters

Submitter	Issue	Resolution
67369B – Cigna Health & Life Insurance Company (Cigna East)	Versioning issues existed with medical claims.	Resubmission of all data. Versioning workaround available in Data Tips.
70408 – SunLife/Union Security Insurance Company	Member IDs were not consistent.	Resubmission of all data.
73288 – Humana Insurance Company	Member IDs were not consistent. Versioning issues exist for pharmacy claims data.	Resubmission of all data. Member ID issue resolved. Versioning workaround available in Data Tips.
79413B – United Healthcare Insurance Company, Inc.	Several data quality issues existed that had no workarounds.	Resubmission of all data.

HEALTHCARE TRANSPARENCY INITIATIVE

Administered by:
ACHI

Previously Omitted Submitters

Submitter	Issue	Resolution
70580 – Humana Dental Insurance Company	Member IDs were not consistent.	Resubmission of all data. Member ID issue resolved.
79413C – United Healthcare Student Resources	Versioning issues existed with medical claims.	Issues resolved.
95885 – Humana Health Plan	Member IDs were not consistent. Versioning issues exist for pharmacy claims data.	Resubmission of all data. Member ID issue resolved. Versioning workaround available in Data Tips.

Administered by:

Excluded Submitters

| Submitter	Issue	Resolution
67676 - Lincoln National Life Insurance Company	An issue exists with versioning rules utilized for this submitter therefore no versioning has been developed.	Issues still exist. Not included.

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI

Always check the Arkansas APCD Data Issues and Tips page for the latest information!

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI

Data Tips

- Utilize searchable Arkansas APCD [data dictionaries](#) & [tip sheets](#)

- Highlights (be sure to review them all!):

  - Resolved issues

  - Updated Tips/Issues

  - Featured Tips/Issues

    – [Tip: Orphaned Medical Claims – 60054A](#)

    – [Tip: Orphaned Medical Claims - 67369](#)

    – [Issue: PC043 and PC050 Values/Pharmacy Versioning - Humana Entities](#)

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI
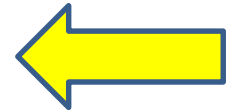
APCD Technical Support

- Reach out to adrs@achiapcd.atlassian.net for questions about data requests, data use, or pricing

Agenda

- Welcome

- Topics

  - Claims per Member Counts and Methodology

  - Events per Payer Examples and Methodology

  - Latest APCD Release Information and Data Tips

- Questions/Discussion

HEALTHCARE
TRANSPARENCY
INITIATIVE

Administered by:
ACHI

Call to Action

- Sign up for ACHI Newsletter

- Follow on social media: ACHI and the Arkansas Healthcare Transparency Initiative featuring the Arkansas APCD

- Check out the blog posts on ACHI website

- Take our survey!

- Next users group meeting: July 28, 2021

SUBSCRIBE FOR UPDATES

achi.net/newsletter