

Texas All Payor Claims Database Stakeholder Advisory Group

Notes

August 21, 2024 – 3:30 pm – 5:00 pm

Attendees:	
Dr. Cecilia Ganduglia Cazaban, UTHealth	Pati McCandless, Blue Cross Blue Shield
Dr. Bob Morrow, UTHealth	Jimmy Blanton, Texas Health and Human Services Commission
Lee Spangler, UTHealth	Elena Marks, Episcopal Health Foundation
Devin York, UTHealth	Dr. Lane Aiena, Huntsville Family Medicine
Donna Alexander, UTHealth	Blaise Duran, Employee Retirement System of Texas
Jodie Nassar, UTHealth	Dr. Rick Snyder, Texas Medical Association
Gladys Rodriguez, UTHealth	Monica Thyssen, Meadows Mental Health Policy Institute
Liam McElhiney, UTHealth	Holly Holcomb, Childress Regional Med Center
Laura Chamber, UT System	Kyle McKay, Teacher Retirement System
Karen Love, Cook Children’s Health Plan	Charles Miller, Texas 2036
Jennifer Miff, Dallas-Fort Worth Hospital Council Foundation	Jeff Tullos, DistributionNOW

1. Welcome **Robert Morrow, MD; Executive in Residence & Associate Professor, UT Health School of Public Health**

2. Formal TDI Regulatory Changes & CDL 3.0.1 **Lee Spangler, JD; Associate Professor, MPACH, & Executive Director, Texas APCD**

- Mr. Spangler presented an overview of the Texas Department of Insurance (TDI) formally proposed regulations that were published in the Texas Register on August 16, 2024. Changes include:
 - A 30-day public comment period for any stakeholders to submit their commentary during the formal rule review process has been implemented.
 - Deadline for adoption is 180 days and any final adoptions will be published in the Texas Register.
 - Updated Advisory Group provisions and the inclusion of a new Institution of Higher Learning member with a designated term limit. HB 3414 compliant.
 - Payor applicability clarifications are addressed.
 - Removal of duplicate provisions and amending any errors.
 - Adoption of an updated Common Data Layout (CDL).
- Common Data Layout (CDL v3.0.1). Mr. Spangler discussed briefly reviewed the changes to the CDL that will be reflected on v3.0.1. A summary is as follows:
 - Changes were made to better align with the current version of the CDL that is maintained by the APCD Counsel and the National Association for Health Data Organizations (NAHDO).
 - No new fields were added and any changes proposed aligned with the Insurance code.

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- Technical changes (*e.g., number of characters or acceptable characters for a given field*) to the CDL require at least a 90-day notice for carriers to be notified of the changes. The center will notify all and will support data submitters any time we opt to adopt a new version of the CDL.
- Payor Submission Changes.
 - Timing: Carriers currently submit data to the center 90-days after the claim is first adjudicated. Some payors have asked to be able to submit sooner. The new proposed timeline would be a 30-day delay in place of the current 90-day delay in data submission. Mr. Spangler provided the Stakeholder Advisory Group members the benefits of this change in addition to how it will support initiatives i.e., the waste water program (TEPHI) which is charged with identifying pathogens found in waste water systems. A quicker turnaround allows the center to support the program and identify how these findings affect patients in other settings (i.e., clinics, hospitals, physician offices, etc.).
 - Submission method: USB via Mail/Courier as a submission method will be removed and not accepted.
- Clarifications on Extensions and Exceptions.
 - TDI will have greater oversight over Extensions and Exceptions. The Center will submit an annual report to TDI that outlines granted exceptions and extensions in addition to methodologies for how the process for requesting extensions and exceptions are made available to certain small payors (incl. timeline).
- Comments/Questions:
 - Ms. Pati McCandless (Blue Cross Blue Shield) enquired on data (or fields) that are not collected by payors and thus not available. Mr. Spangler responded and confirmed that the provision that requires the CDL (and any new subsequent changes to the CDL) to be in alignment with the insurance code does cover these instances.

3. TX-APCD Report

Lee Spangler, JD; Associate Professor, MPACH, & Executive Director, Texas APCD

- Mr. Spangler advised the group of the TX-APCD biennial report that must be filed and is due to the legislature. A copy of the draft report was shared with the Stakeholder Advisory Group members for any comments. A high-level, bullet summary of the draft report components is shown below:
 - Basic overview of what All Payor Claims Databases are and who the TX APCD is.
 - Payor Data received overview (and graphics)
 - Update(s) since the last report – We are actively receiving claims data from payors.
 - Just under 2-billion claim lines received. House 23.3 million covered lives (Jan 01 – present).
 - 2.5 million received their coverage with Medicaid FFS.
 - 17-18 million (non-Medicaid FFS) covered lives in the TX APCD for 2023.
 - Graphic representations for Pharmacy and Dentals claims (aggregated by parent organizations) will be reflected. The Center is working with Express Scripts (Cigna) to accurately capture these data.
 - TX APCD Project Phases of Implementation
 - Data Submissions (incl. Submission portal creation, automation functionality, and Conformance and Quality) has been completed.

- Data Enhancement efforts are active and ongoing (i.e., Data Quality efforts/checks in addition to the Master Patient Index; Master Provider Registry; Data Linkage, etc.).
- Future Phases include Data availability and Research/Public reporting.
- Recommendations to the Legislature including state funding support.

4. Dollar Reconciliation in Claims Data **Trudy Krause, DrPH, MS, CPHQ, Professor, MPACH, & Center for Health Care Data**

- Dr. Trudy Krause elaborated on the intensive Data Quality efforts that the center has been engaging in now that the data is being actively received. Currently the center is performing Stage 2 of the Data Quality checks. In this stage, the center has been examining the dollar amounts of the claims and ensuring that the amounts reflected on any particular claim is accurate and reasonable. Due to the nature of the claims data submissions, it is important for the claims to be reconciled so as to avoid any false dollar amounts being represented (incl. capturing any subsequent versions of a particular claim – claim versioning). The dollar values are not reliable at this time without examination and manipulation by the center.
- Dr. Krause summarized the elements and Life Cycle of a Claim.
 - During instances where claims are pended, denied, and/or negotiated, the claim may be resubmitted or adjusted. In these instances, efforts to reconcile the claims is necessary.
- Claim Versioning – is the set of processes by which the best and final claim is determined. When a claim is resubmitted by the provider and/or adjusted by the payer, the TX-APCD receives two or more versions of the claim covering the same visit/event. The center has identified fields in the CDL (e.g., CDLMC005 – CDLMC008 and CDLMC160 that denote Payor Claim Control Number, Version Number, Claim Line Type, etc.) that would help to ensure claim versioning efforts are supported.
- Currently, most carriers are not adhering to the CDL guidelines resulting in a thorough review of each carrier and plan. Scenarios that have surfaced include:
 - Some resubmissions are submitted with a new claim number without linkage to the prior/initial claim submission which could reflect as a different claim entirely. (e.g., one claim had 198 different claim versions/submissions). Our aim is to create a “final” version of the claim amongst its multiple submissions and versions.
 - Claim lines are not being linked.
 - Reversals are not shown as a negative and are not carried through the units of service.
 - Some resubmissions do not repeat valid claim lines
 - Duplicate claims can occur
- To further support the claim versioning and Data Quality efforts, the center is:
 - Developing a supplemental file to the Data Submission Guide that specifies the expectation for standard versioning of claims. Examples/Scenarios will be included.
- The goal is to have valid and accurate data in the TX APCD from which report, analyses, and statements may be generated.

5. Adjourn **Robert Morrow, MD; Executive in Residence & Associate Professor, UT Health School of Public Health**

- Next meeting will be held in November 2024

General Attendees:

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Rachel Bowden, TDI
Jonathan Hortman, TDI
Kenisha Schuster, TDI
Lisa Kalakanis, Texas Health and Human Services Commission
Maggie M, TAHP
Alex Goldson, Superior Health Plan
Will McGowan, Superior Health Plan
Elizabeth Moseley, Superior Health Plan
John Dowd, Superior Health Plan
Ben Wright, Texas Medical Association
Victoria Ford, Texas Healthcare and Bioscience Institute (THBI)
Teresa Devine, BCBSTX
Dustin Moyer, Center for Improving Value in Healthcare
Ahreum Han, Trinity University
Galen Harris, Delta Dental
Chris Williams, Guardian Life
Jim Locke, Molina Healthcare
Carol Weil, Molina Healthcare
Cindy Fortress, Molina Healthcare
Rosario Groomes, Molina Healthcare
Brittani Bilse, Principal
Veronica Shafer, PHI Network
Shondra Chester Green, Companion Life