

Texas All-Payor Claims Database

September Submitter Forum

Center for Health Care Data

Presented to submitters on September 16, 2025

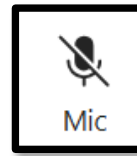
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Welcome

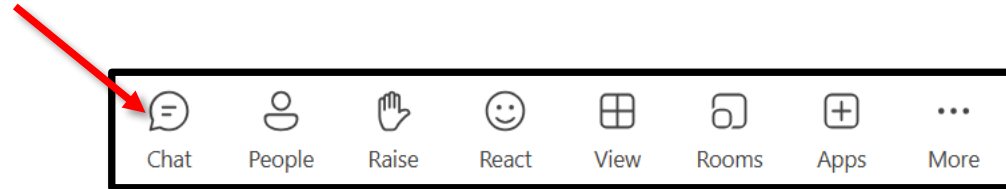
- ❑ Welcome and housekeeping

- Thank you!
- Please place your audio on mute.
- This meeting will be transcribed for our notes.
- Slides and notes will be made available on our website.



Teams & Chat

- ❑ **Reminder:** Please enter all questions in the Chat.
- ❑ The “Chat” function in Teams can be found on the menu ribbon at the top of your screen.



Agenda

- ☐ 2026 Registration
- ☐ Member Insurance/Product Category Code (MIPCC)
- ☐ Rule Types
- ☐ Submission Failure – What to do?

2026 Registration

- The registration window for the 2026 data file submission year will open in October.
- No action is required at this time. Please be on the lookout to receive a notification from our general mailbox (txapcd@uth.tmc.edu) with instructions once the registration window is open.

REMINDER: Registration is required annually and will be due before or by no later than **December 31, 2025.**

Member Insurance/Product Category Code (MIPCC)

- This field occurs in four files in the CDL:
 - Eligibility – ME (CDLME004)
 - Medical – MC (CDLMC004)
 - Pharmacy – PC (CDLPC004)
 - Dental – DC (CDLDC004)
- CDL instructions for use:
 - See Appendix G1: Insurance Type/Product Category for codes. Use the most granular choice available.
- This field is critical in identifying sub-populations within the TX-APCD dataset.
- Two problems exist with the current codeset in Appendix G1:
 1. The codes are not being used consistently across submitters and across files.
 2. There is some overlap in the codes, making it more difficult to choose one.

Member Insurance/Product Category Code (MIPCC): Fix

- After careful study, the TX-APCD is making a modification to the CDL to address the MIPCC issues.
- The core of the change is a modification of Appendix G1 to simplify the set of codes to be used in order to eliminate the ambiguity, as much as possible, resulting from overlapping codes.
- An updated CDL v3.0.2 will be published (<https://go.uth.edu/CDL>) with two changes:
 1. An updated Appendix G1 with the MIPCC codes to be used.
 2. Updated descriptions for field Claim Line Type to align this field with the Claim Versioning Guide (<https://go.uth.edu/versions>) published at the start of the year:
 - ❖ CDLMC160
 - ❖ CDLPC066
 - ❖ CDLDC084

Member Insurance/Product Category Code (MIPCC): Updated Codeset

CODE	NAME	DESCRIPTION
MC	Medicaid	Medicaid Plan Offered by State of Texas
MA	Medicare Advantage	Medicare coverage through Part C of Medicare, provided by a carrier other than CMS
MF	Medicare FFS Part A ONLY	Medicare coverage through Part A of Medicare offered through CMS
MB	Medicare FFS Part A and B	Medicare coverage through Part A and Part B (but NOT C) of Medicare offered through CMS
MD	Medicare Part D	Medicare drug coverage through Part D
CM	Commercial: Market Based Plan	Commercial medical coverage with pharmacy through a market based plan (ACA), all metal levels
CI	Commercial: Individual	Commercial medical coverage with pharmacy offered to individuals NOT market based
CF	Commercial: Fully Insured	Commercial medical plan with pharmacy offered to employers and other groups under a fully insured contract (group insurance)
CS	Commercial: Self Funded	Commercial medical plan with pharmacy offered to employers and other groups under a self funded contract or ERISA (group insurance)
SP	Supplemental	Plan offered to cover services outside of standard health plan coverage (e.g., cancer or accident coverage).
MS	Medicare Supplemental	Plan offered to cover services outside of Medicare coverage
RX	Pharmaceutical	Standalone pharmacy coverage with no medical coverage.
DN	Dental	Standalone dental coverage with no medical coverage.
VS	Vision	Vision coverage
VA	VA	Offered through the Veteran's Administration
TR	Tricare	Offered through the Department of Defense
FD	Federal Health Plan	Federal health plan coverage for federal workers

Member Insurance/Product Category Code (MIPCC): Use Cases

- It is expected that MIPCC is aligned with the plan that is being reported in field Plan Name (TXME1029).
- If a member is enrolled in multiple plans, then an eligibility record for each plan is expected each month, with appropriate MIPCC.
- For example, suppose member 123456789 is enrolled in a Medical Plan (with pharmacy coverage) called Active Choice PPO. Separately, the member is also enrolled in a Dental Plan called ActiveCare Dental.
- In this example, two eligibility records would be expected for this member each month.

	TXME1029	CDLME004	CDLMC004	CDLPC004	CDLDC004
<i>Eligibility record 1</i>	Active Choice PPO	CF	CF	CF	
<i>Eligibility record 2</i>	ActiveCare Dental	DN			DN

Member Insurance/Product Category Code (MIPCC): Implementation Timeline

- The updated CDL v3.0.2 will be published on the TX-APCD website by September 30, 2025.
- Submitters are expected to incorporate the new Appendix G1 codes in submissions starting with files due by January 7, 2026 for the 202511 data file submission.
- This allows for the standard 90-day notice for changes of this type.
- In order to correct the historical data, to the extent possible, a crosswalk has been developed to map values from the current MIPCC codeset to the updated codeset.
- For cases where actual code usage does not have a clear mapping to the updated codeset, the submitter will be contacted to ensure that the mapping is as accurate as possible (based on analysis, this is a small number of submitters).

Rule Types: Stage 1

Currently, there are four basic rule types in the Stage 1 validation reports:

- 1 **NOT NULL – value must not be null**
- 2 **BE NULL – values must be null**
- 3 **BE IN SET – values must belong to a specific codeset**
- 4 **MATCH REGULAR EXPRESSION(s) – values must match pattern(s)**

Rule Types: Stage 1 – NOT NULL

- This is the standard rule used to enforce a threshold on a required field in the CDL

allowed_amount	
Status	Expectation
✓	if <code>payment_arrangement_type_flag > 1</code> , then values must not be null at least <code>90</code> % of the time.
✓	values must match all of the following regular expressions: <code>^-?0{0,12}\d{1,12}\$</code> .
✓	if <code>payment_arrangement_type_flag > 1</code> , then values must match all of the following regular expressions: <code>^-?(?!0{4,})\d{1,12}\$</code> , at least <code>99.75</code> % of the time.

- Look for the key words
- “Must not be null” associated with a threshold (CDLMC131 – 90%)

Rule Types: Stage 1 – BE NULL

- This rule type is applied when a field is expected to BE NULL, typically based on one or more conditions.

place_of_service_professional	
Status	Expectation
✗	<p>if <code>type_of_claim == "1"</code>, then values must not be null, at least 90 % of the time.</p> <p>9376208 unexpected values found. 100% of 9376208 total rows.</p> <p>Sampled Unexpected Values</p> <p>NULL</p>
✓	<p>if <code>type_of_claim == "1"</code>, then values must belong to this set: 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20 21 22 values are shown. Refer to Appendix H for standard code sets.</p>
✓	<p>values must match all of the following regular expressions: <code>^[0,2]\$</code> <code>([\\s])*(\\s \\s)*</code>.</p>
✓	<p>if <code>type_of_claim == "2"</code>, then values must be null, at least 99.75 % of the time.</p>

- In this case, we are expecting that this field will BE NULL when the type of claim is institutional.
- CDL description: Required for professional claims and encounters. Not to be used for institutional claims.

Rule Types: Stage 1 – IN SET

- This rule type is applied when a field is expected to have values from a known codeset.

point_of_origin	
Status	Expectation
✓	if <code>type_of_claim == "2"</code> , then values must not be null, at least <code>0</code> % of the time.
✓	if <code>type_of_claim == "2"</code> , then values must belong to this set <code>1 2 3 4 5 6 7 8 9 A B C D E F G H I J K L M N O P Q R S T U V W X Y Z</code> , at least <code>97</code> % of the time.
✓	values must match all of the following regular expressions: <code>^[0,1]\$</code> <code>(.[\s]*S(.[\s])*)</code> .
✓	if <code>type_of_claim == "1"</code> , then values must be null, at least <code>99.75</code> % of the time.

- Codesets are either directly listed in the CDL, or have a source reference in Appendix H.
- Some smaller codesets are listed directly in the CDL field description.

CDLMC132	Payment Arrangement Type Indicator	char	2	Indicates the payment methodology. Valid codes are: 01= Capitation; 02 = Fee-for-Service; 03 = Percent of Charges; 04= DRG; 05 = Pay for Performance; 06 = Global Payment; 07= Other; 08 = Bundled Payment.
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Rule Types: Stage 1 – MATCH EXPRESSION









- This rule type is applied to align a field's values with the CDL expectations for the field.

member_zip_code	
Status	Expectation
✓	values must not be null, at least 90 % of the time.
✓	values must match all of the following regular expressions: <code>^.{0,9}\$</code> <code>(. s)*\S(. s)*</code> .
✓	values must match any of the following regular expressions: <code>^\d{5}\$</code> <code>^\d{9}\$</code> , at least 97 % of the time.

- The first expression requires that the value can be between 0 and 9 characters, but cannot start with a space, nor can it be a string of spaces.
- The second expression requires that the value be either 5 digits or 9 digits.

Rule Types: Stage 1 – Exceptions

Currently, exceptions are only allowed for NOT NULL rules:

-   **NOT NULL – value must not be null**
 - These are associated with REQUIRED/CONDITIONAL fields with defined CDL thresholds
-   **BE NULL – values must be null**
 - No exception possible for this type of rule
-   **BE IN SET – values must belong to a specific codeset**
 - No exception possible for this type of rule
-   **MATCH REGULAR EXPRESSION(s) – values must match pattern(s)**
 - No exception possible for this type of rule

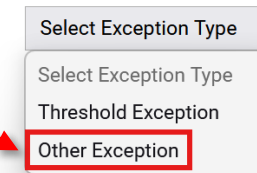
Submission Failure – What to do?

Since exceptions are not available for three of the four existing rule types, what do you do if you have a situation where your submission is failing due to one of the three rule types that do NOT allow exceptions?

- 1 Check whether the issue can be resolved before submitting the data (this is preferred)
- 2 If the issue is isolated to a small number of rows of data, you can submit an “OTHER” exception and explain your need

Select Exception Type

Please select below if you are requesting an excepti



Select Exception Type ▾

Select Exception Type

Threshold Exception

Other Exception

Questions?

- ❏ Questions:
 - Please submit via Chat.
 - If your question is specific to your organization, for:
 - General questions – send email inquiries to txapcd@uth.tmc.edu.
 - Portal and data submission questions – please enter a ticket via the submitter portal at <https://txapcd.org>.