Texas All-Payor Claims Database
November Submitter Forum

Center for Health Care Data
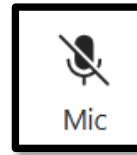*Presented to submitters on November 18, 2025*

#UTHealth® Houston

School of Public Health

Welcome

❑ Welcome and housekeeping

  o Thank you!

  o Please place your audio on mute.

  o This meeting will be recorded and transcribed for our notes.

  o Slides and notes will be made available on our website.

Teams & Chat

- ❑ **<u>Reminder:</u>** 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

❑ Member Insurance Product Category Code (MIPCC)

❑ Individual Relationship Code (IRC)

❑ Exception and Extension Requests

❑ Registration Renewal for 2026

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 was 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 this 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
Eligibility record 1	ActiveChoice PPO 500/1000/25/50	CF	CF	CF	
Eligibility record 2	ActiveCare Dental 100/80/50	DN			DN

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

- The updated CDL v3.0.2 was published on the TX-APCD website on October 1, 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).

Individual Relationship Code (IRC)

- Defined in the CDL as the member's relationship to the insured individual (subscriber).
- Similar to MIPCC, this field occurs in ME, MC, PC, and DC files
- This field has the same problems that MIPCC has:
  - (a) Codeset not being used consistently across submitters
  - (b) Codeset is big (80 entries) with a lot of overlap, making it hard to use

Individual Relationship Code (IRC)

- The IRC occurs in four files:
  - Eligibility - CDLME017
  - Medical - CDLMC017
  - Pharmacy - CDLPC017
  - Dental - CDLDC017
- The codeset includes entries like items from this list (this is not a complete listing)
- As in the case of MIPCC, our goal will be two-fold
  (a) simplify and shrink the codeset
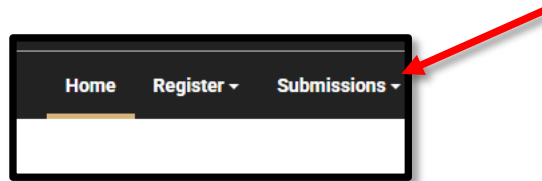 (b) provide guidance on how to use the updated codeset

Code	Description
11	Other Non-Federal Programs
12	Medicare Secondary Working Aged Beneficiary or Spouse with Employer Group Health Plan
13	Medicare Secondary End-Stage Renal Disease Beneficiary in the Mandated Coordination Period with an Employer's Group Health Plan
14	Medicare Secondary, No-Fault Insurance including Insurance in which Auto Is Primary
15	Medicare Secondary Workers' Compensation
16	Medicare Secondary Public Health Service (PHS) or Other Federal Agency
17	Dental
18	Vision
19	Prescription Drugs (Commercial Coverage)
41	Medicare Secondary Black Lung
42	Medicare Secondary Veterans' Administration
43	Medicare Secondary Disabled Beneficiary Under Age 65 with Large Group Health Plan (LGHP)
47	Medicare Secondary, Other Liability Is Primary
AM	Automobile Medical
AP	Auto Insurance Policy
BL	Blue Cross/Blue Shield
C1	Other Commercial (Not Specified Elsewhere)
CF	Commercial: Fully Insured
CH	CHAMPUS
CI	Commercial: Individual
CM	Commercial: Market Based Plan
CO	Consolidated Omnibus Reconciliation Act (COBRA)
CP	Medicare Conditionally Primary
CS	Commercial: Self Funded
D	Disability
DB	Disability Benefits
DM	Dental Maintenance Organization
DN	Dental
E	Medicare – Point of Service (POS)
EP	Exclusive Provider Organization
FD	Federal Health Plan
FF	Family or Friends
FH	Federal Employees Health Benefits Program (HMO)
FP	Federal Employees Health Benefits Program (PPO)
HM	Health Maintenance Organization (HMO)
HN	Health Maintenance Organization (HMO) Medicare Advantage/Risk
HS	Special Low Income Medicare Beneficiary
IN	Indemnity
IP	Individual Policy

Individual Relationship Code (IRC)

- We will be undertaking a similar activity with IRC as we have done with MIPCC. But before we embark on making corrections to how IRC is used, we will wait until the implementation of MIPCC is complete.
- This is a preview to build some awareness of what's coming soon.
- More details will be provided in the next forum which happens in January 2026.

Exception and Extension Requests

- When submitting requests in the TX-APCD portal, only submit once. Hitting submit multiple times creates multiple requests which causes more administrative work to process the requests.
- To see requests submitted in the TX-APCD portal:
  - Click on Submissions on the upper-left side of the screen; then

  - Select "View Exceptions" or "View Extensions" to check the status of your submitted requests from the dropdown menu.

Exception and Extension Requests

- Questions **should not** be submitted within the exception and extension requests as the questions will not be responded to. For questions and/or Technical Support, please submit a ticket via the TX-APCD portal to receive assistance.
- Requests for 2026 cannot be considered until 2026 registration renewal is processed as complete.

<u>**NOTE:**</u> Exception requests will no longer be accepted via form submission after the New Year. **ALL** exception requests will need to be submitted via the TX-APCD portal to receive consideration beginning **January 1, 2026**.

Registration Renewal for 2026

- Registration renewal is due before or by no later than **December 31, 2025** for the 2026 data file submission year.

  - <u>**Reminder:**</u> Even if there are no other changes regarding your organization's profile, such as address or contact information, it is expected that the Coverage Estimates section will be updated annually to reflect the most current numbers as of **December 31** of the previous year.

    Exceptions to this rule are submitters who registered late in 2025, therefore, the same numbers are applicable to registration renewal for 2026, and small carriers that have little to no change from the previous year do due small membership.

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.