All-Payor Claims Database (APCD) of Texas Submitter Feedback Forum

UTHealth School of Public Health Center for Health Care Data

January 20, 2023
Welcome!

- Welcome and Housekeeping
  - Thank You!
  - Please place your audio on mute
  - Slides and notes will be made available on our website
- Submitter Forum Schedule
- Agenda
  - December Forum Q&A – Hot Topics
  - CDL Field Modifications – Field Length(s)
    - Do Not Use CDL from TDI
  - Testing – Ongoing
  - Extensions – Small Payor
  - Exceptions – Threshold
  - Submitter Feedback/Questions
Welcome!

- **Reminder:** The “Chat” function in Webex can be found on the bottom right-hand corner of your screen on most devices. In some instances it may appear in the upper right-hand corner. Please enter your questions there.
Extensions and Exceptions

4. What if some of our data elements do not meet minimum thresholds?

*If the data submitter is unable to achieve the thresholds set in the CDL, they will need to file either an extension, indicating that you need more time to submit a file that meets the threshold; or, an exception, describing your inability to meet the standard. Both exceptions and extensions require Center approval and are for a specific timeframe and must be submitted prior to the compliance date.*

5. Are there any exceptions to this requirement for carriers with fewer than X number of policies?

*Yes, per the rule, carriers with less than 10,000 covered lives may be granted a temporary extension from the submission requirements. However, the carrier must register and submit an extension request as necessary. Please note, that the 10,000 covered lives threshold is aggregated at the payor/carry level and not at the plan level.*
Notifications

16. Is the historical data from 1/1/2019–10/31/2022? or 1/1/2019–9/30/2022?

Please see https://go.uth.edu/txapcd - Notification Tab for historical file submission window. The historical files are from January 1, 2019 to the date of your first monthly submission. Assuming, a submitter’s first monthly submission starts in March 2023, for November 2022 adjudicated claims data, the historical file end-period would be October 31, 2022.

17. I may have misheard, but for historical data, is it to be broken up by year for submission?

The historical files should be submitted as you would a monthly submission – by year-month. So, if your company is submitting historical files for every month in 2019, the Center would expect 12 files. The files may be sent in any year-month order. Please see https://go.uth.edu/txapcd - Notification Tab for historical file submission window.
Extensions – Small Payor

For small payors, the law itself does not grant a small plan exception. However, TDI permits a one-year extension for insurers that qualify as small payors. A processed registration with the TX-APCD and a completed Extension Request Form submitted to the TX-APCD are both required in order for an extension request to be considered (it is not automatically granted).

**Note:** Small payors should also be aware that the 12-month extension does not modify the fact that, when the extension expires, the historical dataset that must be submitted spans from January 1, 2019, to the most recent reporting period.
CDL Appendix – H

- We are unable to provide these listings because the TXAPCD is not the owner, and the appendix will only direct submitters to the owner/maintainers of these lists.
- These are generally licensed products from the listing entity.
- We may provide sample values from these lists, however, TXAPCD should not be relied upon as the primary lookup resource.
CDL Modifications – ERRATA

- 42 Instances of Errata within CDL Version 1.09
  - 36 elements are *increasing* the MAX LENGTH value.
  - 3 elements were for consistency between the files.
  - 1 to clarify logic between connected elements.
  - 3 for Allowed Amount – incorrectly setting FFS to zero.
# CDL Modifications – ERRATA

## Texas All Payor Claims Data Base-Common Data Layout Components and Requirements – Control Header

<table>
<thead>
<tr>
<th>NEW CDL Data Element #</th>
<th>Data Element Name</th>
<th>Type</th>
<th>Max Length</th>
<th>Description/Valid Values</th>
<th>Required</th>
<th>Minimum Threshold (% of Records Submitted with Value in Field)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CDLHD001</td>
<td>Record Type</td>
<td>char</td>
<td>2</td>
<td>HD</td>
<td>Required</td>
<td>100%</td>
</tr>
<tr>
<td>CDLHD002</td>
<td>Data Submitter Code</td>
<td>varchar</td>
<td>8</td>
<td>APCD-assigned identifier of payor submitting data file. Code assigned to the plan by the APCD registration system (may be multi-tiered to support different platforms). This may or may not be the same code as the payor.</td>
<td>Required</td>
<td>100%</td>
</tr>
<tr>
<td>CDLHD003</td>
<td>Payor Code</td>
<td>varchar</td>
<td>8</td>
<td>APCD-assigned identifier of insurer in the case of premiums-based coverage, or of the administrator in the case of self-funded coverage. Code assigned to the plan by the APCD registration system (may be multi-tiered to support different platforms).</td>
<td>Required</td>
<td>0%</td>
</tr>
<tr>
<td>CDLHD004</td>
<td>Data Submitter Name</td>
<td>varchar</td>
<td>75</td>
<td>Name of data submitter.</td>
<td>Required</td>
<td>100%</td>
</tr>
<tr>
<td>CDLHD005</td>
<td>File Type</td>
<td>char</td>
<td>2</td>
<td>ME = Member Eligibility; MC = Medical Claims; PC = Pharmacy Claims; DC = Dental Claims; PV = Provider File.</td>
<td>Required</td>
<td>100%</td>
</tr>
<tr>
<td>CDLHD006</td>
<td>Period Beginning Date</td>
<td>date</td>
<td>6</td>
<td>CCYYMM. Beginning of period covered for Eligibility. Beginning of paid/adjustment period for claims. Beginning of period for Provider file updates.</td>
<td>Required</td>
<td>100%</td>
</tr>
<tr>
<td>CDLHD007</td>
<td>Period Ending Date</td>
<td>date</td>
<td>6</td>
<td>CCYYMM. End of period covered for Eligibility. End of paid/adjustment period for claims. End of period for Provider file updates.</td>
<td>Required</td>
<td>100%</td>
</tr>
<tr>
<td>CDLHD008</td>
<td>Test File Flag</td>
<td>char</td>
<td>1</td>
<td>T = File submitted is a test file; P = File submitted as a production file.</td>
<td>Required</td>
<td>100%</td>
</tr>
<tr>
<td>CDLHD009</td>
<td>Comments</td>
<td>varchar</td>
<td>50</td>
<td>Comments.</td>
<td>Not Required</td>
<td></td>
</tr>
</tbody>
</table>

A cell highlighted in Yellow indicates an updated value. Reference CDL Errata at [https://go.uth.edu/txapcd](https://go.uth.edu/txapcd)
**CDL Modifications – ERRATA**

For technical guidance on how to submit data files, please reference the following:

- Data Submission Guide (DSG): [PDF | ERRATA](https://go.uth.edu/txapcd)
- Common Data Layout (CDL): [PDF | EXCEL | ERRATA](https://go.uth.edu/txapcd)
- Technical Guide: [PDF](https://go.uth.edu/txapcd)

Please email technical questions to [txapcd@uth.tmc.edu](mailto:txapcd@uth.tmc.edu).

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### Table: Common Data Layout (CDL) - v1.09 - ERRATA

<table>
<thead>
<tr>
<th>Version No.</th>
<th>Section</th>
<th>Element No.</th>
<th>Element Name</th>
<th>Column</th>
<th>Old Value</th>
<th>New Value</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.09</td>
<td>Header</td>
<td>CDL0004</td>
<td>Data Submitter Name</td>
<td>Min Length</td>
<td>75</td>
<td>150</td>
<td>Do not send raw data.</td>
</tr>
<tr>
<td>1.09</td>
<td>Header</td>
<td>CDL0006</td>
<td>Data Submitter Name</td>
<td>Max Length</td>
<td>75</td>
<td>150</td>
<td>Do not send raw data.</td>
</tr>
<tr>
<td>1.04</td>
<td>Header</td>
<td>CDL0007</td>
<td>Control Total of Paid Amount</td>
<td>Min Length</td>
<td>12</td>
<td>15</td>
<td>Do not send raw data.</td>
</tr>
</tbody>
</table>

- **Notification:**
  - Publish by end of day today.
  - Publish under Technical Guides section.
  - Notify on FAQs webpage.
  - Notify by email, with follow-up from this meeting.
Testing – Validation

Q: What are the requirements for submitting test data?

A: There are no required test submission scenarios in the rule. That being said, we would like to test with at least 3 to 6 months of historical data, from the years specified in the rule; prefer at least two sequential months from the same year. The testing period is not only for the benefit of the submitters, but also so that the TX-APCD can validate its intake process. As such, we expect there to be feedback and negotiation during the testing phase.

Once you believe you have completed the testing phase to your satisfaction, and would like documentation to that effect, please do the following:

- Create a ticket at TXAPCD.ORG, with Testing Complete in the Subject.
- TXAPCD will provide a list of successful submissions during the testing phase.
- Please make sure to include the payor code(s) in the text of the ticket.
Testing – Notification Schedule

<table>
<thead>
<tr>
<th>PHASE</th>
<th>NOTIFY DATE</th>
<th>RULE NOTICE (DAYS)</th>
<th>RULE EARLIEST START DATE</th>
<th>APCD PHASE START DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>REGISTRATION</td>
<td>07/11/22</td>
<td>90</td>
<td>NA</td>
<td>10/10/22</td>
</tr>
<tr>
<td>TEST DATA SUBMISSIONS</td>
<td>07/11/22</td>
<td>90</td>
<td>10/01/22</td>
<td>10/10/22</td>
</tr>
<tr>
<td>HISTORICAL DATA SUBMISSIONS</td>
<td>12/01/22</td>
<td>120</td>
<td>01/01/23</td>
<td>04/03/23 [2]</td>
</tr>
<tr>
<td>MONTHLY DATA SUBMISSIONS</td>
<td>09/01/22</td>
<td>180</td>
<td>03/01/23</td>
<td>03/01/23 [1]</td>
</tr>
</tbody>
</table>

[1] Reference Section 1.6 Data Submission Schedules in the Data Submission Guide (DSG) and 28 TAC §21.5405. The first monthly submission data files will contain claims data adjudicated in November 2022. All monthly submissions are due by the 7th of the month.

[2] All historical files should be submitted no later than June 30, 2023 and to include claims data from January 2019 through October 2022; or to the submitter’s first monthly data submission to the TX-APCD. The expected first monthly data submission will be November 2022 data provided during the March monthly submission period. Each historical file submission should contain only a single year-month data period and can be submitted in any year-month order.
Exceptions – Threshold

- Process to submit an EXCEPTION, download and complete the Exception PDF Form and the Exception Spreadsheet.
  - For data elements that you are currently unable to submit, set requested threshold to zero.
- Send PDF form and Threshold Exception Spreadsheet (as applicable) to txapcd@uth.tmc.edu.

Example:

<table>
<thead>
<tr>
<th>Submitter Code</th>
<th>Payer Code</th>
<th>User ID</th>
<th>Data File</th>
<th>CDL Element #</th>
<th>Required Threshold</th>
<th>Requested Threshold</th>
<th>Requested Expiration Date</th>
<th>Justification</th>
</tr>
</thead>
<tbody>
<tr>
<td>TESTCORP</td>
<td>4000111</td>
<td>guest01</td>
<td>PC</td>
<td>CDLP010 - Medicaid Aid Category</td>
<td>50</td>
<td>0</td>
<td>01/31/24</td>
<td>We do not currently capture this information.</td>
</tr>
<tr>
<td>TESTCORP</td>
<td>4000111</td>
<td>guest01</td>
<td>DC</td>
<td>CDLDC007 - Version Number</td>
<td>40</td>
<td>10</td>
<td>01/31/24</td>
<td>We only capture this data in 10% of the records.</td>
</tr>
</tbody>
</table>
Questions?

- Questions –
  - Please submit via chat
January 20, 2023 Submitter Forum

ATTENDEES

- Lee Spangler, Executive Director
- Devin York, Senior Project Manager
- Joseph Harrison, Data Process Manager
- Jodie Nassar, Data Operations Manager

AGENDA

- Introductions
- December Forum Q&A – Hot Topics
- CDL Errata
- Testing - Notification
- Extensions – Small Payor
- Q&A

DISCUSSION TOPICS – Q&A

General

1. General comments from the Center:

    The Center thanks everyone for participating in this submitter forum. The answers provided here are our best understanding of the questions submitted. As always, something may get lost in translation. If there needs to be further clarification on any question, please submit a ticket and we can start that dialogue.

Common Data Layout

2. Can you provide a list of all the specific changes with the Errata and the timeline for implementing these changes? Also, just to clarify, these changes are specifically to Texas' version of the CDL and not the CDL maintained by the APCD Council, correct?

    The Texas CDL is a modified version of the APCD Council’s CDL and can be found at https://go.uth.edu/txapcd. Please do not use the CDL found at the APCD Council, the Texas Department of Insurance (TDI), or through a Google Search, as we have seen submitters using incorrect

* Some questions submitted have been edited for clarity.
CDLs. The latest CDL Errata is available [here](#). These changes should be incorporated into your current testing and for files to be submitted in March. Most of these changes are to relax the max length constraint preventing the need to truncate data.

3. Our system allows Capitated and Non-Capitated claim lines on the same claim.
   The Payment Arrangement Type Indicator (CDLMC132) data element is at the Master level.
   How do we handle those claims that have mixed capitated and non-capitated claim lines?

   The Payment Arrangement Type Indicator should be the payment arrangement particular to that claim line, ignore the Master Level designation.

4. For Dental, CDLDC084 - Claim Line Type, can you clarify the difference between Replacement (R) and Amendment (A)?

   The major distinction between the Replacement and Amendment is whether the original claim is voided by the provider. Claim lines resubmitted by a provider that they have voided and paid by the payor as a new claim are replacement claim lines. Claim lines that are corrected or changed in some fashion, but are not voided are amendment claim lines.
   
   **R** - Replacement, claim is a replacement to the original claim, making the original claim void
   
   **A** - Amendment, claim is amended generally to include additional information or to change a code from the original.

5. On the provider file we received an error on our Dental provider group names. We submitted dental group names in the last name field and the first name field is blank. Is your expectation that a dental group name would be submitted in the first name field only?

   CDLPV006 Entity Type Qualifier should be used to distinguish between a person or an organization. If CDLPV006 is “2”, first name should be blank and then CDLPV012 should populated with the Organization name at 90%.

**Extensions and Exceptions**

6. Will the TXAPCD evaluate some of the thresholds based on the type of procedures to reduce/eliminate this requirement. For example, the "Oral Cavity 1" in the dental submission. Most procedures are inclusive of this information and wouldn't have this additional information associated, so the threshold of having this 50% of the time wouldn't be possible.

   The TXAPCD will review the thresholds, monthly, to determine if the thresholds are unachievable universally, in which case the threshold would be adjusted appropriately and communicated via the CDL Errata. Items documented in the CDL Errata do not need an exception request.
File Submission

7. What is the expectation if a “small payor” has zero claims for the historical period? Will there be a standard created for the multiple files that are empty?

The TXAPCD does not expected data submitters to submit data for data periods for which they had no claims or encounters. Please submit a ticket at txpacd.org documenting those data periods for which you had no claims or encounters.

8. For new payers with market entry 1/1/2023 is an exception required for historical data and March and April files since there will be no data to submit? May 2023 would be the first month with reportable data (Jan 2023).

The TXAPCD does not expected data submitters to submit data for data periods for which they had no claims or encounters. Please submit a ticket at txpacd.org documenting those data periods for which you had no claims or encounters and your initial monthly submission start date.

9. Related to the member eligibility file, the APCD submission guide states “Submitters must provide a data set that contains information on every covered plan member whether or not the member utilized services during the reporting period.” Does this mean each month’s zip will contain one member eligibility file containing all members?

Yes, but please only include those members that were eligible during the submitted data period.

10. On the Submission Guide, under 1.7.6 Provider Data, the requirement states "Health care payors must provide a data set that contains information on every provider in the provider network and every provider (in-network or out-of-network) for whom claims were adjudicated during the targeted reporting period or for those who were reported on the eligibility file during the reporting period." Is the expectation all In-Network providers listed and any Out of Network provider with an adjudicated claim under the month listed?

Yes, the provider file should include all providers in their networks and all providers (in and out of network) for whom a claim was adjudicated in the reporting period month.

11. We're planning on sending multiple zip files (one for medical and one for dental), will both zip files need to include an eligibility submission, or can we send all members in the medical submission.

The dental submission (zip file) would include the dental claims file, an eligibility file with all your members who are eligible for dental services under the plans being reported, and a provider file with all providers in your network(s) or who may have had claims adjudicated in the data period (see section 1.7.6 of the Data Submission Guide).
The same would apply for your medical submission (zip file). It would include your medical claims file, an eligibility file for all members who were eligible for medical services under the plans being reported, and a provider file including all providers in your network(s) or who may have had claims adjudicated in the data period.

Testing

12. What is the SLA for data validation on Initial test files submitted?

During testing, our expectation is to have a 48-hour turnaround. That being said, the TXAPCD is also in test mode and may need additional time to correct programming and validation rules. The Center will communicate any significant delays.

Notifications

13. Is the historical data from 1/1/2019–10/31/2022? or 1/1/2019–9/30/2022?

Please see https://go.uth.edu/txapcd - Notification Tab for historical file submission window. The historical files are from January 1, 2019, to the date of your first monthly submission. Assuming, a submitter’s first monthly submission starts in March 2023, for November 2022 adjudicated claims data, the historical file end-period would be October 31, 2022.

Technical

14. MFA appears to be required for all uploads. Our company wants to automate all these uploads, how can this work with MFA?

Please submit a ticket via the portal at txapcd.org describing your business needs. The TACC Team will address your ticket.

Miscellaneous

15. Can we get a copy of the slides?

Yes, the slides will be posted at https://go.uth.edu/txapcd - FAQs Tab.

ACTION ITEMS

- Send notification for February 2023 Submitter Forum.