

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

UTHealth School of Public Health
Center for Health Care Data

January 20, 2023

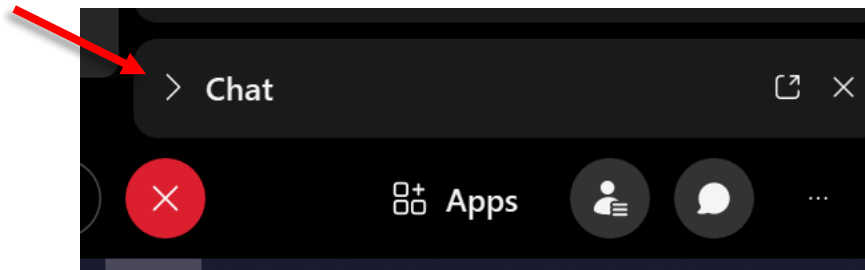
Welcome!

- ◆ 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

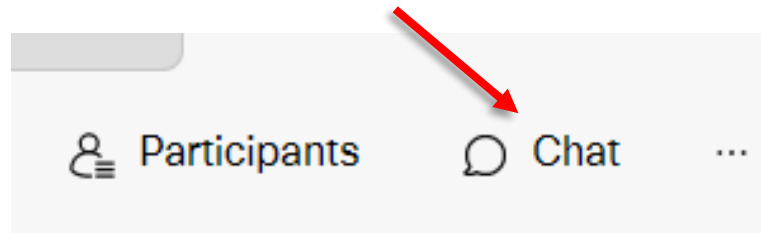
Welcome!

- ◆ **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.

Desktop Application



Website Application



December Forum Q&A – Hot Topics

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/carrier level and not at the plan level.

December Forum Q&A – Hot Topics

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.


CDLMC088	Procedure Code	varchar	5	<p>Healthcare Common Procedural Coding System (HCPCS). This includes the CPT codes maintained by the American Medical Association. This field should not include modifiers. Modifiers are submitted in different fields. [Institutional claims may not provide a procedure code per line if not required by the revenue codes]</p> <p>See Appendix H: External Code Source, American Medical Association.</p>	<p>2400 SV202-02 where SV202-01 = HC (I); 2400 SV101-02 where SV101-01 = HC (P)</p>
----------	----------------	---------	---	--	---

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

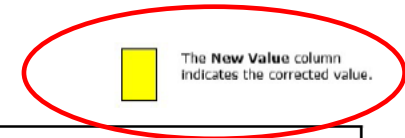
UTHealth School of Public Health
Common Data Layout (CDL) - v1.09

 A cell highlighted in Yellow indicates an updated value.
Reference CDL Errata at <https://go.uth.edu/txapcd>

Texas All Payor Claims Data Base-Common Data Layout Components and Requirements – Control Header						
NEW CDL Data Element #	Data Element Name	Type	Max Length	Description/Valid Values	Required	Minimum Threshold (% of Records Submitted with Value in Field)
CDLHD001	Record Type	char	2	HD.	Required	100%
CDLHD002	Data Submitter Code	varchar	8	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.	Required	100%
CDLHD003	Payor Code	varchar	8	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).	Required	0%
CDLHD004	Data Submitter Name	varchar	75	Name of data submitter.	Required	100%
CDLHD005	File Type	char	2	ME = Member Eligibility; MC = Medical Claims; PC = Pharmacy Claims; DC = Dental Claims; PV = Provider File.	Required	100%
CDLHD006	Period Beginning Date	date	6	CCYYMM. Beginning of period covered for Eligibility. Beginning of paid/adjudicated period for claims. Beginning of period for Provider file updates.	Required	100%
CDLHD007	Period Ending Date	date	6	CCYYMM. End of period covered for Eligibility. End of paid/adjudicated period for claims. End of period for Provider file updates.	Required	100%
CDLHD008	Test File Flag	char	1	T = File submitted is a test file; P = File submitted is a production file.	Required	100%
CDLHD009	Comments	varchar	50	Comments.	Not Required	

CDL Modifications – ERRATA

UTHealth Science Center at Houston
Common Data Layout (CDL) - v1.09 - ERRATA



Version No.	Section	Element No.	Element Name	Column Change	Old Value	New Value	Comments
1.09	Header	CDLHD004	Data Submitter Name	Max Length	75	150	Do not want truncated data.
1.09	Trailer	CDLTR004	Data Submitter Name	Max Length	75	150	Do not want truncated data.
1.09	Trailer	CDLTR007	Control Total of Paid Amount	Max Length	12	15	Do not want truncated data.
1.09	Dental	CDLDC064	Allowed Amount	Description	When payment arrangement type in CDLDC065 is equal to 01 for capitated services, report the maximum amount that would have been paid under fee-for-service for a particular procedure or service. When payment arrangement type in CDLDC065 is equal to 02 for fee-for-service, report the maximum amount contractually allowed, and that a carrier will pay for a particular procedure or service. Report 0 if there is no allowed amount. Do not code decimal point or provide any punctuation (e.g., \$1,000.25 converted to 100025).	When payment arrangement type in CDLDC065 is equal to 01 for capitated services, set to 0. When payment arrangement type in CDLDC065 is equal to 02 for fee-for-service, report the maximum amount contractually allowed that a carrier will pay for a particular procedure or service. Report 0 if there is no allowed amount. Do not code decimal point or provide any punctuation (e.g., \$1,000.25 converted to 100025).	A change should have been made to apply to TDI comments.
1.09	Dental	CDLDC080	Billing Provider Last Name or Organization Name	Max Length	60	150	Do not want truncated data.
1.09	Dental	CDLDC021	Member First Name	Max Length	35	100	Do not want truncated data.
1.09	Dental	CDLDC020	Member Last Name	Max Length	60	100	Do not want truncated data.
1.09	Dental	CDLDC074	Rendering Provider City Name	Max Length	30	100	Do not want truncated data.
1.09	Dental	CDLDC069	Rendering Provider First Name	Max Length	35	100	Do not want truncated data.
1.09	Dental	CDLDC071	Rendering Provider Last Name or Organization Name	Max Length	60	150	Do not want truncated data.
1.09	Dental	CDLDC072	Rendering Provider Name	Max Length	95	100	Do not want truncated data.

<https://go.uth.edu/txapcd>

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

- Data Submission Guide (DSG): [PDF](#) | [ERRATA](#)
- Common Data Layout (CDL): [PDF](#) | [EXCEL](#) | [ERRATA](#)
- Technical Guide: [PDF](#)

Please email technical questions to txapcd@uth.tmc.edu.

◆ **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

4

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

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

^[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:

Submitter Code	Payor Code	User ID	Data File	CDL Element #	Required Threshold	Requested Threshold	Requested Expiration Date	Justification
TESTCORP	4000111	guest01	PC	CDLPC010 - Medicaid AID Category	50	0	01/31/24	We do not currently capture this information.
TESTCORP	4000111	guest01	DC	CDLDC007 - Version Number	40	10	01/31/24	We only capture this data in 10% of the records.

Questions?

- ◆ Questions –
 - ◆ Please submit via chat