# Agenda

- Welcome and introductions
- Overview of proposed APCD governance rules
- Overview of submitter onboarding and implementation timeline
- Introduction to the APCD-CDL™ and the Data Submission Companion Guide
- Overview and demonstration of the submitter registration process
- Questions?
- APCD-CDL™ (Version 2.1) Frequently Asked Questions (FAQs)

# Introducing the APCD Data Collection Team

- **Indiana Department of Insurance (IDOI)**
  - Jonathan Handsborough, *Executive Director*
- **Onpoint Health Data**
  - Gina Robertson, *Data Operations Manager*
  - Kelly Goulet, *Data Operations Analyst for the IN-APCD*
  - Grace Chandler, *Project Manager for the IN-APCD*
  - Monique Cote, *Account Manager for the IN-APCD*

# Overview of APCD Governance Rules

Jonathan Handsborough, *IDOI's APCD Executive Director*

# IN-APCD Governance Rules

- Expected to be published March 24, 2023

- Will be available for review on IDOI's website: https://www.in.gov/idoi/

- Defines criteria that determine which plans are required to submit data to the APCD

- Outlines the requirement for submitters to register in the upcoming registration period (due April 28, 2023)

- Provides an overview of the files to be collected, their expected formats, the timeline for submission, the data quality checks that are performed prior to file acceptance, and the variance request process required for submitters unable to meet data quality standards

# IN-APCD Governance Rules – Overview

| Topic | Proposed Rule |
|---|---|
| Covered lives threshold | 3,000 covered lives as of 12/31 of the previous year |
| Calculation of covered lives | 3,000 covered lives in aggregate across all plans, rather than more than 3,000 lives in any one specific plan; once a payer exceeds the 3,000 lives threshold in aggregate, it must submit all non-ERISA claims across all plans |
| Population | Includes all claims for Indiana residents, regardless of where the service took place |
| Submission frequency | <ul><li>Monthly submission; each file must be submitted by the first business day of the second month after the month being reported (e.g., April submissions are due by the first business day in June)</li><li>Per monthly submission, each file type should contain the following:<br>- Medical/Pharmacy: all claims **adjudicated** during the reporting period<br>- Eligibility: all members enrolled during the reporting period<br>- Provider: all providers reported in the claims or eligibility files during the reporting period</li></ul> |

# IN-APCD Governance Rules – Submission Timeline

| Topic | Proposed Rule |
|---|---|
| Registration deadline | Registration must be completed no later than April 28, 2023 |
| Test data exchange | Send or upload a PGP-encrypted test file to the data collection portal no later than June 30, 2023 |
| Historical and catch-up data submissions | Historical data (1/1/2020 – 12/31/2022) and catch-up data (1/1/2023 – 7/31/2023) for all file types are due by 8/31/2023, with all data quality validations achieved and/or all variance requests approved |
| Regular monthly data submissions | The first month of regular data submissions will cover the August 2023 reporting period and be due by September 30, 2023 |

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# Submitter Onboarding Roadmap

| 1 | 2 | 3 | 4 | 5 | 6 |
|---|---|---|---|---|---|
| Register to submit data to the APCD | Prepare for file transfer and encryption | Get started with the APCD-CDL™ and Companion Guide | Explore Onpoint CDM (Claims Data Manager) | Join one-on-one onboarding meetings | Reach out to Onpoint for ongoing support |

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# Implementation & Training Timeline

| Date | Details |
|---|---|
| 3/22/2023 | **Webinar:** Training on APCD implementation, the APCD-CDL™, and submitter registration |
| 3/24/2023 | Submitter registration opens for IN-APCD data submitters |
| 3/29/2023 | **Webinar:** Training on PGP encryption and the SFTP submission process |
| 4/5/2023 | Onpoint CDM opens for registered IN-APCD data submitters |
| 4/11/2023 | **Webinar:** Training on Onpoint CDM and data variances |
| 4/25/2023 | **Webinar:** Overview of Onpoint CDM and data submission best practices |
| 4/28/2023 | Submitter registration due for the IN-APCD |
| 6/30/2023 | Successful submission of encrypted test file due via Onpoint CDM |
| Ongoing | One-on-one submitter support meetings |

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# Getting Started with the APCD-CDL™ (Version 2.1)

- Governed by the APCD-CDL Maintenance Committee
- Updated every other year
- Use the following link to request a free copy (registration required):
  - [www.apcdcouncil.org/request-apcd-cdl%E2%84%A2](www.apcdcouncil.org/request-apcd-cdl%E2%84%A2)

# Understanding the APCD-CDL™ Structure

| B- Eligibility | | | | | |
|---|---|---|---|---|---|
| **NEW CDL Data Element #** | **Data Element Name** | **Type** | **Max Length** | **Description/ Codes/ Sources** | **ASC X12 271 and 834 References** |
| CDLME001 | Data Submitter Code | varchar | 8 | APCD-assigned identifier of payer 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 used in the Payer Code field. | N/A |
| CDLME002 | Payer 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). | N/A |
| CDLME003 | Plan ID | varchar | 30 | CMS National Plan ID. The National Plan ID is a code assigned by CMS. (PLACEHOLDER) | 271/2100A/NM1 / XV/09 |

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# Introducing the Data Submission Companion Guide

- Available on IDOI's website: https://www.in.gov/idoi/
- To be used in conjunction with the APCD-CDL™ (Version 2.1)
- Outlines additional guidance for submitters to clarify, supplement, and further define specific data content requirements

| Col. # | Field ID | Field Name | Additional Notes/Description/Codes/Sources | Threshold | Condition (Denominator) |
|--------|----------|------------|--------------------------------------------|-----------|-------------------------|
| 1 | CDLME001 | Data Submitter Code | Use this field to report your Onpoint-assigned submitter code for the data submitter. Note that the first two characters of the submitter code are used to indicate the reporting state and the third character designates the type of submitter. For the Indiana APCD, valid prefixes include:<br><br>INC = Commercial carrier<br>ING = Governmental agency<br>INT = Third-party administrator / pharmacy benefits manager<br><br>Notes: A single data submitter may have multiple submitter codes if they are submitting from more than one system or from more than one location. All submitter codes associated with a single data submitter will have the same first six characters. A suffix will be used to distinguish the location and/or system variations. This field contains a constant value and is primarily used for tracking compliance by data submitter. | 100% | All |

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# Overview & Demonstration of the Submitter Registration Process

Gina Robertson, *Onpoint's Data Operations Manager*

# Overview of Submitter Registration

- Required as part of IN-APCD's governance rules, expected to be published 3/24/2023
- Registration helps us identify...
  - Key submitter contacts
  - TPA, PBM, and carve-out relationships
  - Product offerings and other attributes of each registered entity
- Getting started
  - Submitter registration opens 3/24 and is due 4/28
  - Save your progress at any time
  - Data collection portal opens 4/5; submitters cannot submit data until their registration is complete and approved

# "Am I Required to Register with the APCD?"

- ~~You are required to register if your organization met any of the following criteria in 2022:~~
  - ~~Served as a health payer who conducted health insurance-related business for a total of 3,000 or more residents in the state of Indiana in accordance with Indiana Code: 27-1-44.5-2 (e.g., Medicare, Medicaid or Managed Care Organization, Pharmacy Benefits Manager)~~
  - ~~Was approved by IDOI to send files to the IN-APCD as a voluntary data submitter, even if your organization did not quality as a required IN-APCD submitter, in accordance with Indiana Code: 27-1-44.5-2~~ **Updated 03/28/2023 with Emergency Rules, see next slide.**

# "Am I Required to Register with the APCD?"

- **Updated 03/28/2023 with Emergency Rule LSA-23-127:**
- All Health Payers are required to, at minimum register for the APCD.
  - A Health Payer has the meaning set forth in IC 27-1-44.5-2 (e.g., Medicare, Medicaid or Managed Care Organization, Pharmacy Benefits Manager)
- A health payer will be required to **submit data** if they conducted health insurance-related business for a total of **3,000 or more non-ERISA covered** residents in the state of Indiana
- For more information, please review the IN-APCD governance rules rules or reach out with questions ([in-support@onpointhealthdata.org](mailto:in-support@onpointhealthdata.org))

# "What Happens after I Register?"

- Submitters will receive confirmation of registration approval from Onpoint
- Submitters will be assigned a submitter code for incorporation into their submission mappings
- Submitters should plan to…
  - Attend onboarding trainings hosted by Onpoint in March and April
  - Reach out to the IDOI and Onpoint teams with any questions or concerns related to the submitter rules, field-level interpretations, or file submission timelines ([in-support@onpointhealthdata.org](mailto:in-support@onpointhealthdata.org))

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## Questions?

**Technical questions:**
in-support@onpointhealthdata.org

**Regulatory questions:**
apcd@idoi.in.gov

# Submitter Code Assignments

- Submitter codes must be reported within each file type
- Submitter codes will be assigned to submitters upon completing an approved registration (March – April 2023)

| B- Eligibility | | | | | |
|---|---|---|---|---|---|
| **NEW CDL Data Element #** | **Data Element Name** | **Type** | **Max Length** | **Description/ Codes/ Sources** | **ASC X12 271 and 834 References** |
| CDLME001 | Data Submitter Code | varchar | 8 | APCD-assigned identifier of payer 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 used in the Payer Code field. | N/A |

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# Submission Formatting: General Reminders

- Pay attention to the "Type" and "Max Length" columns
- For fields where leading zeroes are valid, ensure that the field is formatted as a *varchar* or *string* data type; *integer* or *numeric* data types drop leading zeroes
- Pipe delimiters are required
- "Un-assigned" placeholder fields must be reported as '||'

| D- Pharmacy | | | | | |
|---|---|---|---|---|---|
| **NEW CDL Data Element #** | **Data Element Name** | **Type** | **Max Length** | **Description/ Codes/ Sources** | **NCPDP References** |
| CDLPCXXX | Un-assigned | char | 1 | Reserved for future use. Elements will only be added with review from states and payers. | N/A |

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# Submission Formatting: Decimals

| Data Element(s) | Decimal? | Decimal Places | Example | Report As |
|---|---|---|---|---|
| Dollar amounts | No decimal | 2 | $1,000.25 | 100025 |
| Actuarial value | Include decimal | 4 | 88.27689% | 0.8828 |
| Diagnosis codes | No decimal | Variable | E11.351 | E11351 |
| Service units / Quantity (Medical) | Include decimal | 3 | 1 | 1.000 |
| Quantity dispensed (Pharmacy) | Include decimal | 2 | 30 | 30.00 |

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# Submission Formatting: Hyphens

| Data Element | Hyphen? | Example | Report As |
|---|---|---|---|
| Social Security number | No hyphen | 123-45-6789 | 123456789 |
| ZIP code (if reported as ZIP+4) | No hyphen | 95827-0800 | 958270800 |
| Ethnicity | Include hyphen | 2156-8 | 2156-8 |
| HIOS ID | No hyphen | 25198CA0040001-00 | 25198CA004000100 |
| Tax ID | No hyphen | 01-2345678 | 012345678 |
| National Drug Code (NDC) | No hyphen | 0777-3105-02 | 0777310502 |
| Negative dollar amounts and quantities | Include hyphen | -$100.00 | -10000 |

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# Submission Reporting Periods

- Reporting period indicated in each submission's header must align with the data
  - Example: A medical claims file with a header with a Period Beginning Date (CDLHD006) of '202101' and a Period Ending Date (CDLHD007) of '202107' must include only claims with a Paid Date (CDLMC024) between January and July of 2021

| File Type | Reporting Period | Corresponding APCD-CDL™ Data Element |
|---|---|---|
| Eligibility | Start Year of Submission | CDLME005 |
| Eligibility | Start Month of Submission | CDLME006 |
| Medical | Paid Date | CDLMC024 |
| Pharmacy | Paid Date | CDLPC024 |
| Provider | Aligns with eligibility/claims | N/A (includes active providers in eligibility/claims) |

# Eligibility Reporting: Important Reminders

- Eligibility should be reported per member per month (e.g., if a member had enrollment throughout the entire year of 2021, the APCD expects to receive a total of 12 enrollment records for that member – one for each month of 2021 eligibility)

- Key fields to note when reporting enrollment data:
  - Start Year of Submission (CDLME005) – Year of enrollment reported per member
  - Start Month of Submission (CDLME006) – Month of enrollment reported per member; each month of enrollment per member requires its own record in a file
  - Plan Effective Date (CDLME050) – Very first date of enrollment for a member; this date can precede the submission reporting period
  - Plan Term Date (CDLME051) – Last date of enrollment for a member; this field should be reported as null if a member's coverage is still active

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# Eligibility Reporting: Quarterly File Examples

## Example 1: Member with Continuous Coverage

| Record | Period Beginning Date | Period Ending Date |
|---|---|---|
| Header | 202101 | 202103 |
| Trailer | 202101 | 202103 |

| Member | Start Year of Submission | Start Month of Submission | Plan Effective Date | Plan Term Date |
|---|---|---|---|---|
| 1 | 2021 | 01 | 20191015 | |
| 1 | 2021 | 02 | 20191015 | |
| 1 | 2021 | 03 | 20191015 | |

# Eligibility Reporting: Quarterly File Examples (cont.)

**Example 2: Member Coverage Terminates During the Reporting Period**

| Record | Period Beginning Date | Period Ending Date |
|---|---|---|
| Header | 202101 | 202103 |
| Trailer | 202101 | 202103 |

| Member | Start Year of Submission | Start Month of Submission | Plan Effective Date | Plan Term Date |
|---|---|---|---|---|
| 2 | 2021 | 01 | 20200101 | |
| 2 | 2021 | 02 | 20200101 | 20210215 |

# Eligibility Reporting: Quarterly File Examples (cont.)

**Example 3: Member Coverage Begins During the Reporting Period**

| Record | Period Beginning Date | Period Ending Date |
|---|---|---|
| Header | 202101 | 202103 |
| Trailer | 202101 | 202103 |

| Member | Start Year of Submission | Start Month of Submission | Plan Effective Date | Plan Term Date |
|---|---|---|---|---|
| 3 | 2021 | 03 | 20210315 | |

# Provider Data Reporting Standards

| Provider Type | File Types with Provider Included | Entity Type Options | Notes |
|---|---|---|---|
| Attending | Medical, Provider | Individual | |
| Billing | Medical, Provider | Non-individual | |
| Member PCP | Eligibility, Provider | Individual | |
| Pharmacy | Pharmacy, Provider | Non-individual | |
| Prescribing | Pharmacy, Provider | Individual | |
| Referring | Medical, Provider | Individual | |
| Rendering | Medical, Provider | Individual, Non-individual | Should be same as billing for institutional claims |

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# Thank you.

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