

# NYS All Payer Database 2019 Stakeholder Meeting

October 16, 2019 Empire State Plaza, Albany, New York

# Today's Agenda

Welcome and Purpose of Meeting

**Opening Remarks** 

All Payer Database Update

Overview of the OSDS Project

**Lunch and Networking** 

**OSDS Technical Sessions** 

**Closing Remarks** 

### **Meeting Materials**

- ✓ Information Sheet
- ✓ PowerPoint Slide Deck
- ✓ Speaker Biographies
- ✓ Attending Organizations
- ✓ Index Comment Cards



https://nyshc.health.ny.gov/web/nyapd/stakeholder-meetings

# Purpose of the Annual Stakeholder Meeting

- Bring together internal and external stakeholders of the NYS APD for an update on:
  - Progress
  - Current status
  - Future plans
- Elicit feedback and engagement from participants





# Who's here today?

- Consumers
- Researchers
- Academics
- Organizations
- Issuers
- Vendors
- Government

Please refer to "Attending Organizations" for a detailed list of who registered for today's forum.



# **Meeting Logistics and Reminders**

- There is a 1 hour break for lunch and networking
- Please silence cell phones and electronic devices
- Please limit side conversations during presentations
- Phone lines will be muted throughout today's meeting
- If WebEx participants have any difficulty hearing today's presenters, please use the Chat function to let organizers know



## All Feedback Welcome!

- Index cards are available on the tables for written feedback
- Please add cards to the designated wall area
- WebEx attendees can submit feedback via the Chat function





# **Opening Remarks**

**Anne Schettine, Director Office of Quality and Patient Safety** 



# All Payer Database Project Update

### All Payer Data System: At a Glance

The All Payer Data (APD) system facilitates a new era of cutting-edge population health research in New York State to achieve better care for patients, lower costs, and healthier communities.

### Focusing on New Yorkers

The APD system will be the **most complete set of data about New Yorkers**, accelerating
understanding of population health.



# Exploring Variation in Health Care

New York is diverse in population, providers, and geography. The APD system will provide data driven findings on variations in patient outcomes, utilization, price, quality, and safety.





### Improving the Quality of Patient Care

Providing high-quality, patient-centered, effective care improves health outcomes. The APD system will provide quality score cards, evidence-based performance measures, and actionable information to improve care.



# Informing Consumers & Care Givers

Health care is changing rapidly and **New Yorkers need** reliable information to make choices right for them. The APD system will power dashboards, infographics, and other tools to support consumer empowerment.

### All Payer Data System: At a Glance

The All Payer Data (APD) system facilitates a new era of cutting-edge population health research in New York State to achieve better care for patients, lower costs, and healthier communities.

### Connected Data. Driving Transformation. Empowering Consumers.

15 Million New Yorkers

The number of health care experiences captured each year. 1 Billion Medical, Pharmacy, Dental Claims

The volume and type of data collected each year.

600+ Quality Measures

Advanced analytics enables the APD to expand quality reporting. 500,000 users a year

Are empowered with information from HDNY, Health Profiles, & NYS Health Connector

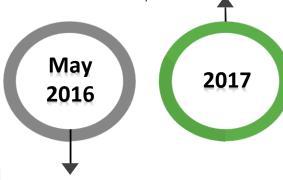


### **Developing the Building Blocks**

- · Published APD regulations & guidance manual
- Approved by IRB as research system
- Held design & requirements sessions
- Build & testing phases
- Developed Master Indexes (Patient/Provider)
- Internal soft releases of APD Analytics Portal & Operational Data Store (ODS)
- Started data acquisition for Essential Plan (EP)

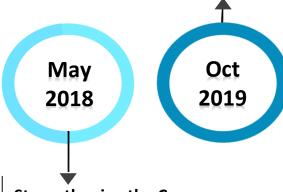
### Realizing the Vision

- · Collecting & integrate commercial data
- Expanding of DOH users
- Releasing additional functionality
- · Expanding research agenda
- Expanding consumer tools
- Creating APD work groups



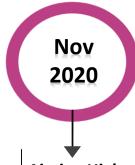
### **Setting the Vision**

- Selected data warehousing/analytic vendor
- · Contract signed and executed
- Secured ACA grant, Medicaid matching, & state funding
- Held design & requirements sessions
- Started data acquisition for QHP



### **Strengthening the Core**

- Launched APD public website
- · Launched APD analytic portal (sign-in)
- Onboarded DOH users
- Matured Master Indexes (Patient/Provider)
- Release additional functionality



### **Aiming Higher**

- Develop sustainability plan
- Integration with other data systems/sources



**Original Source Data** 

Submitter (OSDS) System

# All Payer Data (APD) System

Data Intake & Acquisition



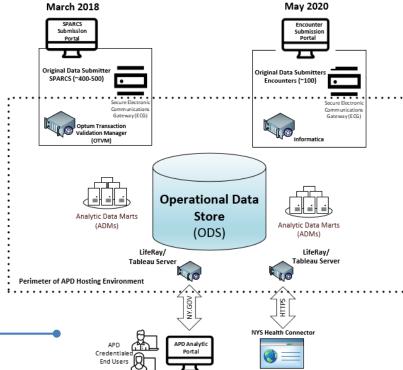
Data Warehousing & Enrichment

2

Research & Analytics

3

Data Access, Release & Products



**SPARCS Data** 

**Submission System** 

# **Main APD Components**

Data Intake &

Member Coverage

Acquisition

Issuer, Plan, & Provider Data

Claims & Encounters

Hospital Discharge Data

Vital Event Data

Non Claim Based Data

Warehousing & Enrichment

**Master Patient Index** 

Master Provider Index

Groupers: Symmetry; AHRQ; 3M DRGs

Address Standardization & Geocoding

Reference File Augmentation

Research & Analytics

Quality Measurement & Patient Safety

Population Health

Service Utilization

Cost/Price Transparency

Data Access, Release & Products

APD Analytic Portal (DOH staff)

NYS Health Connector (publicly available)

Data Products (Research Briefs, Benchmarks, Research Findings)

Data Release Options

NEW YORK STATE OF OPPORTUNITY. Department of Health

# Data Intake & Acquisition

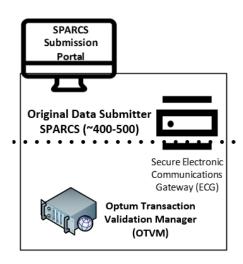


# **SPARCS Data Submission System**

### **Current State**

(May 2018 – October 2019)

- SPARCS data submission system operational since March 2018
- 410 Article 28 facilities submitting data



### **Future State**

(November 2019 – November 2020)

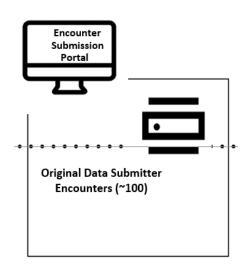
- Ensure submission compliance
- Identify and assist submitters experiencing barriers to submission
- Monitor data quality

# **Encounter Intake System (EIS) Submission**

### **Current State**

(May 2018 – October 2019)

- EIS submission has been in operation since 2015
- Approx. 50 insurers submitting data
- Lines of business include:
  - Medicaid Managed Care (MMC),
  - · Qualified Health Plan (QHP),
  - Child Health Plus (CHP), and
  - Essential Plan (EP) encounters



### **Future State**

(November 2019 – November 2020)

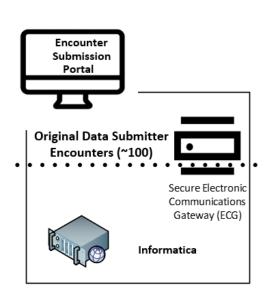
 Migration of EIS submitters to Original Source Data Submitter (OSDS) system for encounter data reporting

# Original Source Data Submitter (OSDS) System

### **Current State**

(May 2018 – October 2019)

- Project started September 2018
- Requirements gathering
- Convened stakeholder informational webinars and break-out sessions
- Published guidance material
- Conducted an Issuer readiness survey
- Completed security workbooks

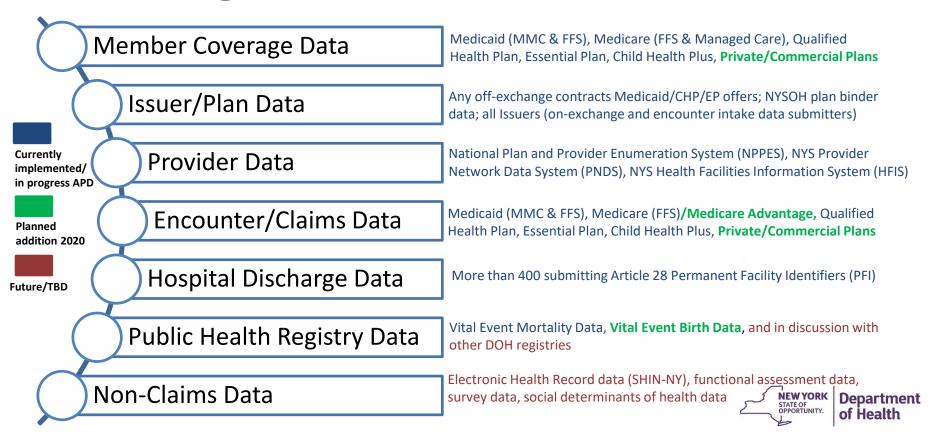


### **Future State**

(November 2019 – November 2020)

- System Testing
- System Launch to Production
- Post-production monitoring

# **Connecting Data Over Time**



# Data Warehousing & Enrichment

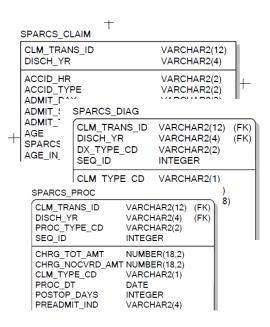


### SPARCS Data Model

### **Current State**

(May 2018 - October 2019)

- SPARCS data model in operation since April 2018
- 14 table relational structure
- Known data defects are being addressed as part of data intake remediation plan (e.g., duplicate claims, active/inactive flags)



### **Future State**

(November 2019 - November 2020)

Provides streamlined data enhancements and routines to support business needs

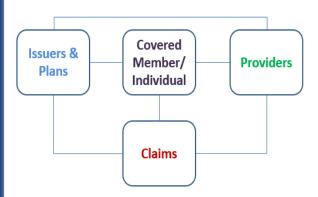
- Enhanced SPARCS/Vital Statistics linking
- Enhanced geocoding

# **Consolidated All Payer Data Model**

### **Current State**

(May 2018 - October 2019)

- Member Data (2014 to Q2 2018)
  - Medicaid, QHP, EP, CHP, Medicare, SPARCS, and VS Mortality Data
- Issuers/Plans (2014 to Q2 2018)
  - Medicaid, QHP, EP, CHP, and Medicare
- Claims (2014 to Q2 2018)
  - · Medicaid, QHP, EP, and CHP
- Provider Data (2014-2016)
  - Medicaid, PNDS, NPPES, HFIS, and Licensure Data



### **Future State**

(November 2019 - November 2020)

Broadens and refines representation of NYS population health through the addition of lines of business

- Bring all data current to 2019
- Integration of:
  - Medicare FFS claims, members, issuer/plan data
  - Commercial claims, members, issuer/plan data

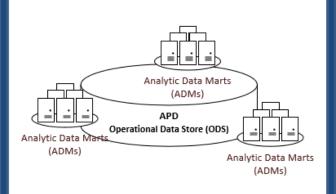
# **Analytic Data Marts (ADMs)**

### **Current State**

(May 2018 – October 2019)

### **Planning & Development**

- Population Health ADM
- SPARCS ADM
- Perinatal Quality ADM
- Annual Quality ADM



### **Future State**

(November 2019 – November 2020)

# Simplifies access across DOH to data and analytics

- Population Health ADM
- SPARCS ADM
- Perinatal Quality ADM
- Annual Quality ADM

# **Data Enrichment – Master Data Management**

### **Current State**

(May 2018 – October 2019)

- Current Member:
  - Medicaid, CHP, EP, QHP, VS Mortality and Historic SPARCS data
- Development Member:
  - Medicare, SPARCS Modernization
- Planning Member:
  - OSDS 834 files
  - Perinatal Data
- Current Providers:
  - NPPES, PNDS, Medicaid, HFIS, and Licensure
- Development Providers:
  - NYS Provider Directory

Estimated

15 million

New Yorkers represented
by June 2020



Estimated 10 to 11 million New Yorkers represented by November 2019

### **Future State**

(November 2019 - November 2020)

Improves capability to conduct longitudinal analyses for population health research

- Medicare data integration
- SPARCS data integration
- Vital statistics birth and death integration
- Commercial data integration

# **Data Enrichment – Geocoding Standardization**

### **Current State**

(May 2018 - October 2019)

- Address standardization
- Geocoding at highest level
- Geographic attribution to align with security protocols
- Inclusion of shape files and geocoding supporting analysis at:
  - Zip Code
  - Regions
  - Counties
  - School Districts
  - Congressional Districts
  - Census Tracts
  - Block Group
  - Block



### **Future State**

(November 2019 – November 2020)

Improves identity protection, supports internal researchers population health research at a variety of geographic levels

- Geographic Attributes and Shape Files to support Public Health ADM
- Geocoding of Historic SPARCS data to align with APD standards
- Deployment of centroid level geocoding to further support analytics and visualizations

# Analytics & Research /

Data Access, Release & Products





# **Achieving Population Health**

Service Utilization & Outcomes Research

**Quality Measurement** 

Population Health Research

**Cost of Care** 

**Patient Safety** 



# Data Enrichment – Grouper Application

### **Current State**

(May 2018 - October 2019)

- Validation of Symmetry Suite
  - Refinement of All Payer Single Input File
  - Validation of EBM Connect with Medicaid DSRIP QM
  - Formed internal DOH workgroup on Episode Treatment Groups (ETGs)
- On load grouping of 3M DRGs and AHRQ CCS

ETG Base Class Code Permutations

ETG Number	Description
<b>163000</b> 000	Diabetes, w/o complication, w/o comorbidity, w/o surgery
<b>163000</b> 001	Diabetes, w/o complication, w/o comorbidity, with surgery
<b>163000</b> 010	Diabetes, w/o complication, with comorbidity, w/o surgery

Category	APR DRG	M S-DRG	
Data requirements	Diagnoses, procedures, age, sex,	Diagnoses, procedures, age, sex, discharge	
Data requirements	discharge status, birth weight	status	
MDCs	Pre-MDC and 25 MDCs	Pre-MDC and 25 MDCs	
Number of base DRGs	1,258 (314 base DRGs x 4 subclasses +	751(749 + 2 error DRGs)	
Number of base DNGs	2 error DRGs)	751(749 + 2 error DRGS)	

Optum Symmetry Suite (EBM, ETG, ERGs)
HCUP/AHRQ Clinical Classification Software (CCS)
3M<sup>™</sup> APR & MS Diagnosis Related Groups (DRGs)

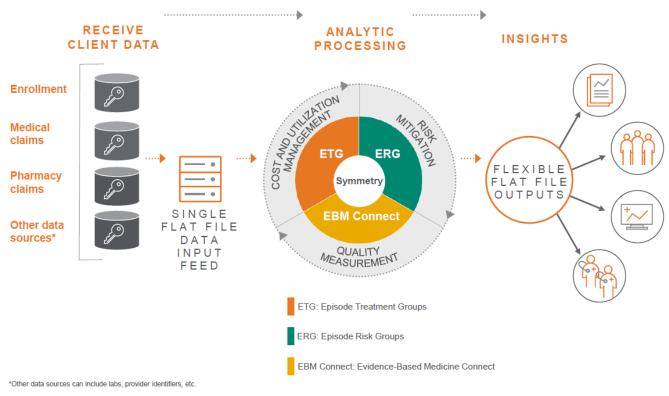
### **Future State**

(November 2019 – November 2020)

Improves capability to access and connect quality measurement and risk scores to members, providers, claims

- Investigate new HCUP/AHRQ CCSR release
- DOH internal workgroup/ETGs

### The Symmetry Suite in the NYS APD

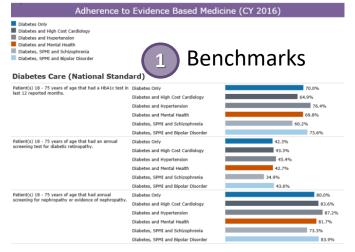






### Symmetry EBM

**Evidence-Based Medicine Connect** for Quality Measurement



### Prevalence by County - Diabetes (CY 2016) 6.5% Population Health 5.7% 5.7% NYC Counties 5.3% Prevalence Rates

Symmetry ETG **Episode Treatment Groups** for Cost & Utilization Management

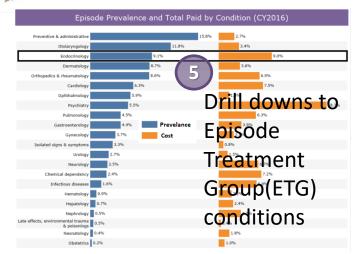
### Symmetry ERG

Episode Risk Groups for Risk Assessment & Mitigation

### Risk Analysis for Members with Diabetes (CY 2016)

Population	ographic Risk	Prospective Risk	Retrospective Risk	Actuarial Risk
Diabetes Only	1.8	3.4	3.2	3.5
Diabetes and High Cost Cardiology	2.2	6.5	6.7	6.5
Diabetes an Ryle Serkon Gro	ups.º	3.1	2.8	3.2
Diabetes and Mental Health	1.9	4.9	4.9	4.8
Diabetes, SPMI and Schizophrenia	1.6	5.4		5.2
Diabetes, SPMI and Bipolar Disorder	1.6	4.9	4.9	4.9

**Predictive** Modeling



# **Cost & Price Transparency**

- APD has statutory authority to collect payment information
- Prior to public release of payment data, APD will conduct extensive quality control and validation
- Release of data must adhere to applicable state and federal laws, regulations, and policies

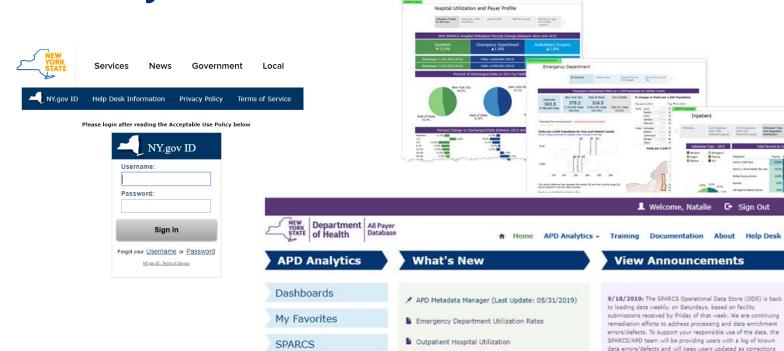
### Payment Data Stored in the APD by APD Data Source

APD Data Source	Amount Allowed	Charge	Amount Paid	Co- insurance / Co-payment	Deductible	Sub- Capitated Proxy Payment
SPARCS		✓				
Medicare FFS		✓	✓	✓	✓	
Medicaid FFS	✓	✓	✓	✓	✓	
Medicaid & Child Health Plus		✓	✓	✓	✓	✓
Commercial		✓	✓	✓	✓	✓
Qualified Health Plan		✓	✓	✓	✓	✓
Essential Plan		✓	✓	✓	✓	✓

Notes: Amount Paid, Co-insurance/ Co-Payment and Deductible may all include other insurance Coordination of Benefits (COB). Facility submitted and audited Ratio of Cost to Charges (RCC) is applied to SPARCS charges to estimate facility costs.

Pharmacy payment information also includes ingredient costs and dispensing fees.

# **APD Analytic Portal**



Vital Statistics

Quality Measurement

Department of Health

are made during the remediation period. Visit DOH's internal SharePoint site for the list of known data errors/defects (SPARCS

Please contact the Optum APD Help Desk (877-790-6538,

servicenow@optum.com) if you have any questions.

History.

Please click to see the previous NY APD announcement

# **APD Analytic Portal**

### **Current State**

(May 2018 – October 2019)

- 50+ SPARCS & VS Tableau reports
- Training schedule
- Meta Data Manager
- Documentation



### **Future State**

(November 2019 - November 2020)

Provides visualizations for a wider audience of DOH staff in support of business needs

- Annual Report Generator
   2.0
- QHP specific data visualizations
- Quality measurement visualizations
- Perinatal quality visualizations

### **APD NYS Health Connector**



### **Available Now**

- Suicide and Self Harm
- Cost and Volume of Procedures
- ED Utilization
- Tracking the Flu
- Adolescent Obesity
- Measles Tracker

### **Next Releases**

- Health Plan Quality Compare (11/19)
- Provider Directory (2/20)



### **Emergency Department Visits Preventable Emergency Department** in New York Sate Visits While it is not possible to eliminate every ED visit that • How often did people visit the eme could have been treated in a different setting, New Total Annual Visits is the number of emergency of York State can move closer to achieving the triple aim of better care, higher quality, and lower costs by Unique Patients by Total Annual Visits reducing just a fraction of these visits. This dashboard includes calculations that estimate whether an ED 432,964(9.9%) visit for certain conditions could have been 69.548(1.6%) 755,616(17.3%) avoided with adequate access to care, care 15,692(0.4%) 3.206(0.1%) coordination, or patient monitoring. Read More 6-10 3 100 561/20 89/3 The bar segments add up to 100% across payers for the Annual Visits. Total Annual Visits 3-5 6-10 11-25 26+ Total Visits Total Visits 3.100.561 1.511.232 1.523.012 496,322 230.512 160,674 7.022.313 95 Total Visite 44.2% 21.5% 21.7% 7.1% 3.3% 2.3% 100.0% Emergency Department (ED) Category Visit % by Total Annual Visits **Emergent** Alcohol / Mental Health Primary Care lubstance Abuse Avoidable Related 21,2% 20.9% 13.8% 10.4% 22.2% 23.5% 6,4% 3-5 22,5% 23.9% 7.4% 14,4% 12.7% 6-10 21.6% 8.2% 13.6% 11-25 19,4% 20,6% 15.0% 9,9% 7.8% 9.1% 10.1%

16.5%

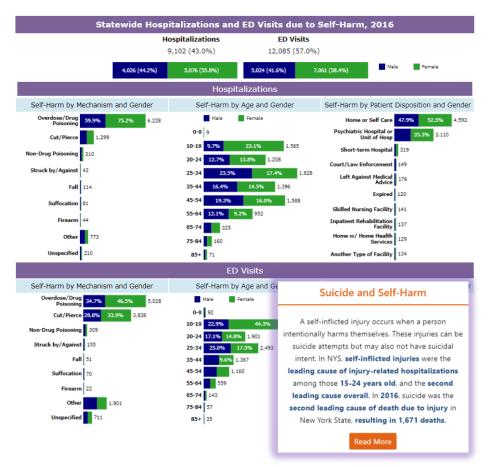
20,7%

8.4% 5.3% 8.3%

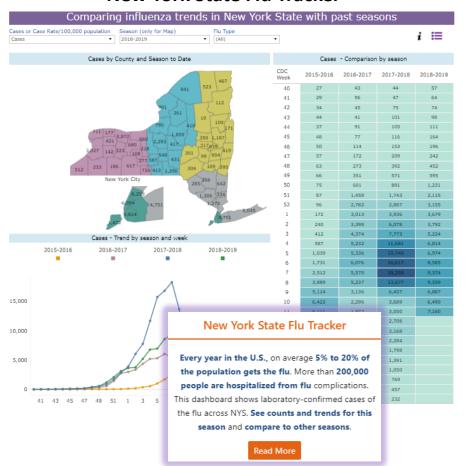
16,6%

26+

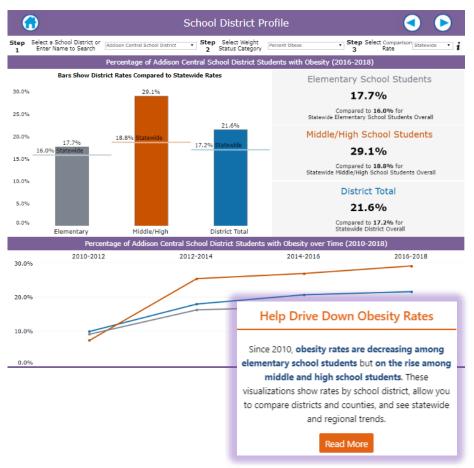
### **Suicide and Self-Harm**



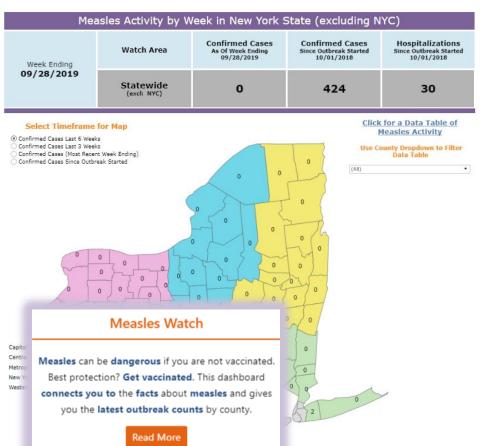
### New York State Flu Tracker



### **Student Weight Data Explorer**



### Measles Watch





## **APD Innovation Areas**



### **Consumer Empowerment**

- Will allow New Yorkers to find relevant health information more easily using plain language searches
- Will support answering questions or directing consumers to reliable information on a range of topics:
  - price, quality, networks, for doctors, hospitals, and health insurers
- Will train, refine, and launch a beta version of the chatbot on the Health Connector in December 2020
- Supported by grants from CMS and the New York State Health Foundation, working with HonestHealth



I need a hip replacement surgery

## **NYS Provider Directory**

New York State's Implementation of the Federal Validated Healthcare Directory Interoperability Initiative



#### **Provider Data Challenges**

#### The "Why" Behind the Initiative

- Existing directories are managed independently, resulting in discordant information which is not interoperable
- As such, provider data have been challenging to manage, merge, and evaluate across systems
- This lack of consistent definition for provider entity types has led to ambiguity and impacted analytic groupings
- Additionally, the fluidity of provider relationships and inconsistent use of identifiers has resulted in confusing outcomes and relationships
- Objectives include: to develop a broad set of validated provider data to support a variety of health directory needs, interoperability, and reduce provider burden

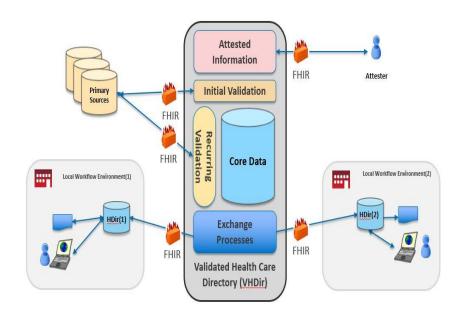


#### **NYS APD Provider Directory**

#### Offering Validated Provider Data Through APIs

#### A Validated Healthcare Directory

- Puts forward cleansed, standardized, and validated provider data for use by all via API
- Drives interoperability by fixing data at a systems level
- API available on the NYS Health Connector
  - Uses HL7 FHIR VHDIR API with ONC & FHA standard
  - Q1 Calendar Year 2020
- Initial Scope
  - Directory data elements will focus on
    - Practitioners, Organizations, Locations, Practitioner Roles, Networks, Insurance Plans, Validation, Healthcare Services, Organization Affiliations





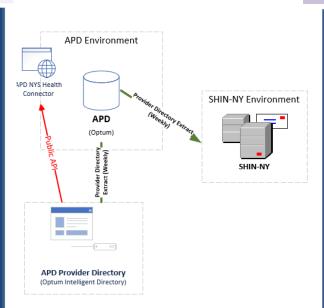
#### **APD Provider Data & NYS APD Provider Directory**

#### The Backbone of Interoperability

#### **Current State**

(May 2018 - October 2019)

- CMS NPPES
- NYS Medicaid
- NYS PNDS
- NYS HFIS
- NYS Licensure



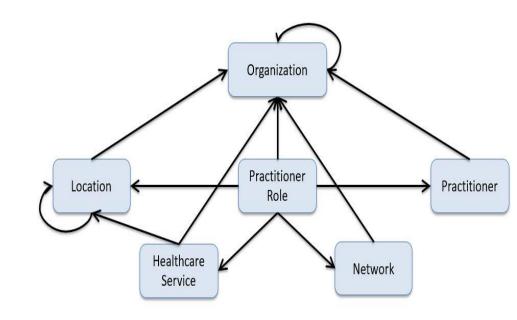
#### **Future State**

(November 2019 - November 2020)

- 630+ data sets including:
  - Urgent Care Centers
  - PECOS
  - NYS Office Based Surgery
  - NYS PNDS
  - NYS HFIS
  - NYS OASAS Articled Facilities
  - NYS OMH Articled Facilities
  - NYS Physicians Profiles
  - National Sanctions
  - National Licensure
  - National Accreditation
  - Office & Practice Outreach
  - License Pharmacies
  - Medicare ACOs
  - Vaccination Locations
  - CLIA

#### **Provider Directory Practitioner Role**

- An individual's role and healthcare services provided
- Locations
- Availability
- Specialty(ies)
- Networks
- Identifiers
- Accepting/Not Accepting New Patients
- Organizations the role is performed with
- Practitioner demographics
- And more...





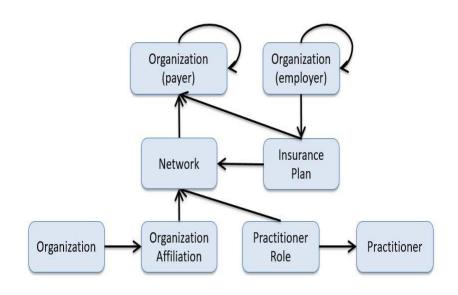
# Provider Directory Organization & Network / Insurance Profiles

#### Organization Profile

- Highlights: Qualifications, Descriptions, Insurance Plans Offered to Employees, and More
- Entities: Corporations, Companies, Healthcare Practices, and Community Groups Amongst Others
- Relationships: Amongst Other Organizations, with Insurance Plans, Networks, and Practitioners

#### Insurance Plan Profile

- Highlights: Coverage Type, Benefits, Costs, and More
- Relationships: Employers, Organizations, Payers, Administrators, and Practitioners





#### Practitioner Role VHDIR API Query Response

Sample of Validated Results for: Organization.name: MRI imaging of Garden City

```
"resourceType": "Location",
                                                                                                                                             "id": "025eb4ad-cc90-424a-9af8-0a6cfab3821f".
                                                                                  Practitioner Role
                              "resourceType": "Bundle",
                                                                                                                                             "meta": {"profile": ["http://hl7.org/fhir/uv/vhdir/StructureDefinition/vhdir-location"]},
                              "type": "collection",
                                                                                                                                             "status": "active",
                              "entry": [
                                                                                                                                             "type": [{"coding": [
                                "fullUrl": "urn:uuid:a7a04d128b2a6f41db18fe685fc2adec3a1b9f817e8684bb30727e2390073c40".
                                                                                                                                                 "system": "http://aperturecvo.com/fhir/extensions/vhdir/pid/locationType",
                                                                                                                                                 "display": "HealthCareFacility"
                                   "resourceType": "PractitionerRole",
                                                                                                                                             }]}],
                                   "id": "a7a04d128b2a6f41db18fe685fc2adec3a1b9f817e8684bb30727e2390073c40",
                                                                                                                                              "telecom": [
                                   "meta": {"profile": ["http://hl7.org/fhir/uv/vhdir/StructureDefinition/vhdir-practitionerrole"
                                                                                                                         Location
                                                                                                                                                 "system": "phone",
                                   "extension":
                                                                                                                                                 "value": "+1 516-794-2244"
                                                                                                                         Information
                                        "url": "http://aperturecvo.com/fhir/extensions/vhdir/pid/network-reference".
                                        "valueReference": {"reference": "Network/014847623"}
                                                                                                                                             "address":
                                                                                                                                                 "line": ["1103 Stewart Ave Ste 104"],
Organizations
                                                                                                                                                 "city": "Garden City",
                                        "url": "http://aperturecvo.com/fhir/extensions/vhdir/pid/gualifiers".
                                                                                                                                                 "state": "NY",
                                        "valueCodeableConcept": {"coding":
                                                                                                                                                 "postalCode": "11530"
                                                                                                                                              "position":
                                   "active": true.
Locations
                                                                                                                                                 "longitude": -73.594184,
                                   "organization": {"reference": "Organization/025eb4ad-cc90-424a-9af8-0a6cfab3821f"},
                                                                                                                                                 "latitude": 40.735784
                                   "specialty": [{"coding": [
                                     "system": "http://aperturecvo.com/fhir/extensions/vhdir/pid/Specialty",
                                     "display": "DIAGNOSTIC RADIOLOGY"
                                  "location": [{"reference": "Location/025eb4ad-cc90-424a-9af8-0a6cfab3821f"}]
                                                                                                                                                                                                                          Department
```

#### Practitioner Role VHDIR API Query Response

Sample of Validated Results for: Organization.name: MRI imaging of Garden City

```
"resourceType": "Organization",
                          "id": "025eb4ad-cc90-424a-9af8-0a6cfab3821f"
                          "meta": {"profile": ["http://hl7.org/fhir/uv/vhdir/StructureDefinition/vhdir-organization"]},
                          "extension": [
                          "identifier": [ {
                             "extension": [
                                "url": "http://aperturecvo.com/fhir/extensions/vhdir/pid/identifier-status",
                                "valueCoding":
                                   "code": "active",
                                   "display": "active"
Extensions
Accepting Medicare
                             "type":
                                "coding": [
                                   "system": "http://aperturecvo.com/fhir/extensions/vhdir/pid/type",
                                   "display": "Medicare Flag"
                                "text": "Medicare Flag"
                             "system": "Medicare Flag",
                             "value": "N"
                          11,
                          "active": true.
                          "type": [{"coding": [{"system": "http://aperturecvo.com/fhir/extensions/vhdir/pid/type"}]}],
                          "name": "Mri Imaging Of Garden City",
```



#### **Provider Directory Roadmap**



#### Calendar Year Q2 Release

- Network
- Plan
- **Organization Affiliation**
- Validation



#### Calendar Year Q4 Release

- Expansion of Input Sources
- Alignment with upcoming Department and Federal Initiatives



#### Calendar Year Q1 Release

- · Production Deployment available on NYS Health **Connector Including:** 
  - Practitioner
  - Organization
  - Location

2020

- · Healthcare Services
- · Practitioner Role



#### Calendar Year Q3 Release

#### **Improving Functionality**

- Sorting
- Filtering
- · Advanced Queries





2021

## **APD Year 4 Strategic Objectives**

- Collect & integrate commercial data
- Finalize integration of Medicare data
- Expand DOH state users
- Release additional functionality
- Expand research agenda
- Deploy APD Provider Directory via API on NYS Health Connector
- Expand NYS Health Connector dashboards
- Implement NYS Health Connector Chat Bot
- Create APD work groups





# Overview of the Original Source Data Submitter (OSDS) Project

### Statutory Authority for APD Data Submission

- Public Health Law Section 2816 authorizes DOH to collect covered person data and claims data in its APD ("APD Data")
- "APD Data Submitters" must submit complete, accurate, and timely data to the APD
- Includes third-party health care payers as defined by DOH regulation at 10 NYCRR Section 350.1, means an insurer, organization, or corporation licensed or certified pursuant to:
  - Article 42, 43, or 47 of the Insurance Law; or
  - Article 44 of the Public Health Law; or
  - An entity, such as a pharmacy benefits manager, fiscal administrator, or administrative services provider that participates in the administration of a third-party health care payer system, including any health plan under 42 USC § 1320d
- ERISA plans that operate in NYS may participate as voluntary data submitters



## **OSDS** Project Scope

- Support the required functions of the NYS APD by expanding the collection of member roster and encounter data to commercial products not offered through NY State of Health ("off-exchange commercial")
- Consolidate all payer encounter data collection to a single platform
- Allow for the collection of Medicare Part C members and encounters
- Voluntarily collect ERISA/self-insured plan members and encounters



## The OSDS Project Also Includes...

- Mechanisms to receive enrollment data from NY State of Health and eMedNY for validation of encounter data collection
- Tier 2 Editing
- Volume testing prior to system transition
- Training and a Help Desk for OSDS data submitters



## Key Stakeholders for OSDS Project

DOH OQPS

**DOH OHIP** 

NY State of Health

Department of Financial Services

Optum

**NYSTEC** 

Data
Consuming
Entities

Data Submitters



#### APD Data Submitters At a Glance

- 63 unique Issuers will submit to the OSDS when it goes live in Spring 2020
- 4 Third Party Administrators (TPAs) will represent some of these Issuers
- 50 unique Issuers will be migrating from the EIS for encounter data reporting
  - 42 Issuers (84%) will submit Medicaid Managed Care
  - 16 Issuers (32%) will submit Essential Plan
  - 20 Issuers (40%) will submit Qualified Health Plan
  - 15 Issuers (30%) will submit Child Health Plus
  - 20 Issuers (40%) will submit off-exchange commercial member and encounter data
- There will be 9 new commercial off-exchange Issuers that will be first time reporters for member roster and encounter data



## **Project Time Frames**

## System Design & Development

September 2018 – December 2019

- Project Start Date: September 10, 2018
- Stakeholder Kick Off Meeting: November 29, 2018
- Requirement Validation: November 2018 February 2019
- System Development: March 2019 –
   December 2019

#### **Issuer Testing**

January 2020 – April 2020

- System Integration Testing / QA Testing: July 2019 – April 2020
- Issuer Testing Begins: January 2020

## EIS Switchover / OSDS Operations

May 2020 forward

- Estimated project go live: May 2020.
- OSDS project staff will work with Data Submitters on a production schedule



## OSDS Reporting Requirements

Payer	Member	Medical / Dental	Pharmacy
Medicaid Managed Care		PACDR 837	NCPDP
Child Health Plus		PACDR 837	NCPDP
Essential Plan		PACDR 837	NCPDP
Qualified Health Plan		PACDR 837	NCPDP
Off-Exchange Commercial	834	PACDR 837	NCPDP
Medicare Part C	834	PACDR 837	NCPDP
ERISA/Employer- Based (Voluntary)	834	PACDR 837	NCPDP

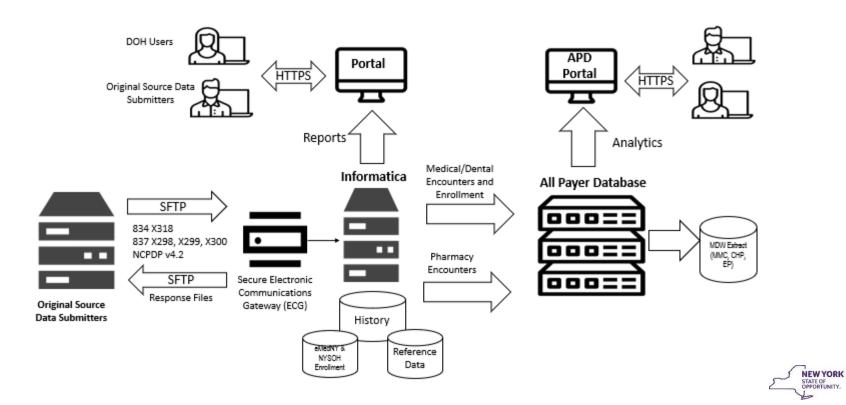
- There is no change in reporting requirements for current EIS submitters; there is minimal change in submission requirements
- Current EIS submitters will not submit 834 member roster data in OSDS for products other than offexchange commercial.
- The OSDS infrastructure will receive weekly feeds of eMedNY and NYSOH member data for encounter data validation
- Release notes between the EIS and OSDS are available in the NYS Health Connector OSDS Information Library

New



Department of Health

#### A Broad Overview of the APD Data Submitter Solution



## OSDS Data Submitter Agreements (DSA)

APD Data Submitter (Payer)	Authority	OHIP / NYSOH TPA	OSDS Data Submitter Agreement (DSA)
Medicaid Managed Care	Contract	✓	✓
Essential Plan	Contract	✓	✓
Qualified Health Plan	Contract	✓	✓
Child Health Plus	Contract	✓	✓
Commercial	Regulation		✓
Medicare Part C	Regulation		✓
ERISA / Employer-Based Commercial	Voluntary		✓

Project goal is to have all DSAs on file prior to submitter testing on or before 12/31/2019



# OSDS Project Documentation for APD Data Submitters

- Submitter Set-Up Instructions
- Training Materials
- Helpdesk
- Questions and Answers
- Other Knowledge Articles developed as needed

- Companion Guide: 834 Plan Member
- Companion Guide: PACDR 837
- Companion Guide: NCPDP
- Companion Guide: Data Submitter
- Tier 2 Edit Disposition Matrix
- NYS Health Connector OSDS Information Library
  - Informational WebEx Materials
  - Change Log Tier 2 Edit Disposition Matrix
  - EIS to OSDS Migration Release Notes

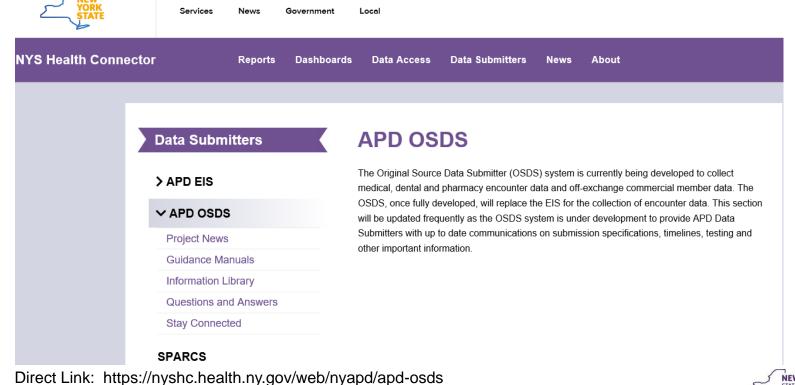
### EIS to OSDS Migration At A Glance\*

#	EIS	OSDS
1	TPA as part of Contract	Data Submitter Agreement; TPA as part of Contract remains in effect
2	EDI Registration with GDIT/CSRA	EDI Registration with Optum
3	SFTP Connection with GDIT/CSRA	SFTP Connection with Optum
4	Collect all encounter data	Collect all encounter data & Off-Exchange Commercial Member Roster
5	Medicaid and CHP transactions combined	Medicaid and CHP transactions separated
6	Processes 837, NCPDP Transactions	Processes 837, NCPDP, 834 X318 Transactions
7	Provides Tier 1 & 2 Editing	Provides Tier 1 & 2 Editing with additions, changes and removals
8	· ·	Sends Standard X12 responses: TA1, 999, <b>277DRA</b> responses
	responses	
9	Proprietary responses:	Proprietary responses:
	NCPDP: RxTA, RxFA, RxCA.	NCPDP: <b>RJ</b> , RxTA, RxFA, RxCA
	X12: 837 RJ	X12: 837 RJ, 834 RJ, 834 RL
10	Issuer Portal - CSRA/GDIT Connection	Data Submitter Portal through NY.Gov Connection
11	Issuer Portal Summary Reports in Excel	Data Submitter Portal Summary Reports in Excel using Tableau
12	Test Environment is Not Secure – No PHI or	Test Environment Secure - PHI and Member Data can be submitted
	Member data can be submitted	



<sup>\*</sup>Full Release Notes Available at: https://nyshc.health.ny.gov/web/nyapd/information-library

#### **External Communication**



Department of Health

#### **Questions and Answers**

**Department** All Payer

Database

# APD OSDS Questions and Answers > APD EIS - APD OSDS - APD OSDS - Project News - Guidance Manuals Information Library Questions and Answers Stay Connected APD OSDS Questions and Answers APD OSDS Data Submitters will be updated on a regular basis by the OSDS Project Team. Questions are listed in the order in which they were received. APD OSDS Data Submitters are urged to familiarize themselves with this entire document to be fully informed on the most recent communications from the OSDS Project Team. We welcome questions and feedback at: apd.osds@health.ny.gov. Questions and Answers (last updated on 09/17/2019)

Original Source Data Submitter Project

Questions and Answers Document for APD Data Submitters

Version 1.0 - September 2019

Prepared by: OSDS Project Team Last Updated: September 17, 2019

#### Contents

1.	Overview and Purpose of Document	2
2.	General Information	2
3.	Data Submitter Information	3
4.	Migration from Current Encounter Intake Submitters	7
5.	X12 834 X318 Plan Member Reporting	8
6.	X12 837 PACDR Reporting	. 14
7.	NCPDP Reporting	. 15
8.	Edits	. 15
9.	Data Response Files and Feedback Reports	. 16
10.	Testing	. 18
Acro	nym Definitions	. 20
	nge Log	21

The OSDS Project Team welcomes feedback and comments on this document, please contact us at:

Original Source Data Submitter Project Division of Information and Statistics Office of Quality and Patient Safety New York State Department of Health Corning Tower Room 1911 Albany, New York 12237 Phone: 518-474-4987

Email: apd.osds@health.ny.gov

NYS Health Connector: https://nyshc.health.ny.gov/web/nyapd/apd-osds



#### APD Data Submitter Informational WebEx Series

- On a monthly basis an Informational WebEx is conducted for internal and external stakeholders
- Questions and Answers are published on NYS Health Connector
- Slide Decks are published on NYS Health Connector Information Library
  - 1. February 2019 OSDS Project Overview
  - 2. March 2019 Submitter, Product, Plan Level Identification; Member ID
  - 3. April 2019 834 X318 Data Collection and Response Files (Part #1)
  - 4. May 2019 834 X318 Data Collection and Response Files (Part #2)
  - 5. August 2019 Guidance Manuals; PACDR and NCPDP Feedback
  - September 2019 OSDS Updates; Data Submitter; 834 Plan Member, Tier
     Edit Disposition Spreadsheet

## Submitter Readiness Survey

- To assess the readiness of commercial off-exchange data submitters, and current EIS data submitters, an OSDS submitter readiness survey was released on September 30, 2019 to APD Data Submitters
- As of October 15<sup>th</sup>, 23/63 organizations have responded (37% response rate)
  - 18/23 (78%) currently report to EIS
  - Nearly all respondents are aware of the guidance material being prepared and disseminated by the OSDS Project Team on the NYS Health Connector
  - Survey respondents are indicating that they are still reviewing all the information that is necessary for data submission
- We urge data submitters to please complete the survey
- When the survey period is complete, anonymized and aggregated results will be shared with all APD Data Submitters as part of our Informational WebEx series



# Lunch / Networking (12:15 to 1:15 pm)





## **OSDS Onboarding Process**

## Key Milestones to Onboarding

Guide

 Obtain from the NYS Health Connector and Review the latest OSDS Data Submitter Information Companion Guide

DŠA

Execute an OSDS Data Submitter Agreement (DSA)

EDI

 Complete an EDI Registration Form and Obtain Optum-issued Data Submitter Registration Number

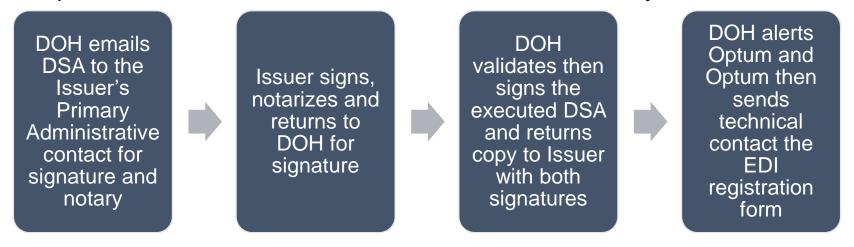
SFTP

- Connect to OSDS System via SFTP for Processing
- Network Connectivity and Data Testing



#### **DSA Process Flow**

The DSA outlines the terms and conditions under which data submitters and the DOH will exchange data, and lists the obligations of both parties with respect to documentation, communication and data security





## **EDI Registration Process Flow**

**Optum** creates Data Data Optum sends **SFTP** submitter submitter data performs returns the connection submitter an simple read completed and provides EDI EDI data write tests to Registration Registration confirm submitter form form **SFTP** connection credentials



## **EDI Registration Form Purpose**

- Establish the relationship between the data submitter and Optum, including connectivity
- Data submitters are responsible for completing their own EDI forms (this includes Issuers and TPAs)
- Issuers must manage their TPA relationships and ensure relationships are reflected accurately on the EDI registration form
- Optum cannot accept establishment of an Issuer/TPA relationship from anyone other than the Issuer



## Training & Help Desk Operations

- Technical support is available from both the OSDS Project Team and the Optum Help Desk to assist data submitters with all aspects of data submission
- Tickets can be submitted by phone or through ServiceNow
  - Optum will work with you to set up your Help Desk account
- Training
  - Optum will provide training webinars and other training materials pertaining to EDI registration and data submission

#### **DOH OSDS Project Team**

Email: apd.osds@health.ny.gov

Web: <a href="https://nyshc.health.ny.gov/web/nyapd/apd-osds">https://nyshc.health.ny.gov/web/nyapd/apd-osds</a>

Phone: 518-474-4987

#### **Optum Help Desk**

ServiceNow: <a href="https://optumgov.service-now.com/itss2">https://optumgov.service-now.com/itss2</a>

Phone: 1-877-363-5630



#### Notes for Current EIS Submitters

- Current EIS submitters will have time to test the new system, then transition their encounter data submission to OSDS production
- While the OSDS is being developed, current EIS submitters will continue to submit CHP, QHP, EP and MMC encounter data to EIS to ensure no disruption in essential encounter data collection
  - NY State of Health and eMedNY enrollment feeds will continue to be used for encounter data validation
- There <u>will not</u> be parallel production systems of encounter data submission



# Notes for New Off-Exchange Commercial Submitters

- Off-exchange commercial data submitters will be allowed time to test the submission of enrollment and encounter data before the move to production
- At the end of interactive system testing, off-exchange commercial data submitters will begin to submit enrollment and encounter data to OSDS production for coverage and service dates January 1, 2018 forward
- The issuer notification letter released in November 2018 provided issuers sufficient notice to begin necessary steps to prepare for interactive testing of data submission in the required submission formats and retention of CY 2018 and CY 2019 information



#### Timing of Submissions

- For off-exchange commercial submitters, the *minimum* frequency of submission for all file types will be weekly
- Medicaid issuers should continue to adhere to the encounter submission frequency required by the Medicaid Model Contract
- Data submitters must submit at least 95% of APD data within 60 days from the end of the month of the adjudicated claims being submitted for payment, and 100% of APD data within 180 days from the end of the month of the adjudicated claims being submitted for payment
- In the event that technical difficulties prevent timely submission of APD data, data submitters should contact the DOH APD team at <a href="mailto:apd.osds@health.ny.gov">apd.osds@health.ny.gov</a> for assistance. DOH may issue extensions of the submission deadline when deemed appropriate





# An Overview of OSDS Guidance Manuals

#### **OSDS Guidance Manuals**

Data Submitter
Information
Companion Guide
Version 1.0

X12 837 PACDR
Companion Guide
Version 1.1

X12 834 Plan Member Reporting Companion Guide Version 1.0

NCPDP Post-Adjudication Standard Companion Guide Version 1.0

Tier 2 Edit Disposition Excel Spreadsheet Version 1.0



## **OSDS** Supported Transactions

Inbound Transaction	Outbound Transaction
OSDS Companion Guide: Plan Member 834 X318  Plan Member Reporting (834): version 005010X318	<ul> <li>RJ File Rejection</li> <li>TA1 Response: File Level Handshake</li> <li>999 Acknowledgments: Implementation Acknowledgement for Health Care Insurance ASC X12C 005010X231A1</li> <li>834RL: 834 Record Level Response</li> </ul>
OSDS Companion Guide: 837 PACDR  PACDR (837): Professional version 005010X298 PACDR (837): Institutional version 005010X299 PACDR (837): Dental version 005010X300	<ul> <li>RJ File Rejection</li> <li>TA1 Response: File Level Handshake</li> <li>999 Acknowledgments: Implementation Acknowledgement for Health Care Insurance ASC X12C 005010X231A1</li> <li>277 DRA Acknowledgment: Data Reporting Acknowledgement ASC X12N 005010X364</li> </ul>
OSDS Companion Guide: NCPDP PACDR  Post-Adjudicated Claim Standard (NCPDP) version 4.2	<ul> <li>RJ File Rejection</li> <li>RxFA Acknowledgement: Rx Healthcare File</li> <li>RxTA Acknowledgement: Rx Healthcare Transaction</li> <li>RxCA Acknowledgement: Rx Healthcare Claim</li> </ul>

NEW YORK STATE OF OF PHORITUNITY.

Department of Health

#### **OSDS Data Submitter Companion Guide**



**Original Source Data Submitter** 

#### Data Submitter Information Companion Guide

Instructions related to the Exchange of Electronic Data Interchange (EDI) with the OSDS system

Based on X12 Implementation Guides, Version 5010 and NCPDP Post-Adjudication Standard Implementation Guide, Version 4.2 and Related Documents

> Data Submitter Information Version Number: 1.0 September 2019

- Instructions related to the exchange of EDI with the OSDS system.
- Intended to provide information needed by data submitters to exchange EDI data with the OSDS system.
- Includes information about registration, testing, support, and other information.

## Inbound File Naming Convention

(Tran Category).(OSDS Submitter ID + Payer ID).(Transaction)(Program Suffix).(Frequency).(Date Time).(SEQNO).(DAT)

Tran Category	TR - Transaction					
OSDS Submitter ID + Payer ID	OSDS Submitter ID is Assigned by Optum (Ex. Z12345) Payer ID is the (HIOS, NAIC or OSDS Submitter ID) (Ex. 67890) Example: Z1234567890					
Transaction	837I – Institutional 837 837D – Dental 837 PDP – NCPDP pharmacy 834F – Full File Plan Member Reporting 834C – Correction File Plan Member Reporting					
Program Suffix	Q – QHP E – Essential Plan M – Medicaid K – CHP C – Off-exchange commercial					
Frequency	D – Daily W – Weekly B – Bi-weekly M – Monthly					
Date	12-digit date and time stamp (24-hour time, in the format YYMMDDHHMMSS)					
Sequence Number SEQNO	The sequence of files within a specified timestamp. This will only contain a value other than 1 when more than one file is created within the same second.					
DAT	This is always .DAT					

Note: Updated versions of the Data Submitter Companion Guide will include a program suffix for Medicare Advantage



# Outbound File Naming Convention (Tran Category).(UserID).(Transaction)(Program

(Tran Category).(UserID).(Transaction)(Program Suffix).(Frequency).(DateTime).(SEQNO).(DAT)

Tran Category	RJ – Reject File IA – TA1 X12 or RxFA (Interchange Acknowledgment) FA – Interchange Acknowledgment (999 or RxTA Report) HN – Data Reporting Acknowledgment (277DRA, RxCA, 834RL)					
UserID	NYOSDS					
Transaction	837I – Institutional 837 837P – Professional 837 837D – Dental 837 834F – Full File Plan Member Reporting X318 834C – Correction File Plan Member Reporting X318 PDP – NCPDP pharmacy					
Program Suffix	Q – QHP M – Medicaid E – Essential Plan K – CHP C – Off-exchange commercial					
Frequency	D – Daily W – Weekly B – Bi-weekly M – Monthly					
Date	12-digit date and time stamp (24-hour time, in the format YYMMDDHHMMSS)					
Sequence Number SEQNO	The sequence of files within a specified timestamp. This will only contain a value other than 1 when more than one file is created within the same second.					
DAT	This is always .DAT					

Note: Updated versions of the Data Submitter Companion Guide will include a program suffix for Medicare Advantage



#### Transaction File Restrictions

- Limit the file size to no more than 50 MB per file
  - If your file is greater than 50 MB, multiple transactions must be created of less than 50 MB and put into a single Zip file in order to ensure sequential processing
  - If you have a multiple part file in a Zip file, each file must be a standalone file following the file formatting requirements for each file type and naming conventions listed in Section 3.1.4 of the OSDS Data Submitter Companion Guide. Each file will be processed separately.



#### 834 Plan Member Companion Guide



Original Source Data Submitter (OSDS)

X12 834 Plan Member Reporting
Standard Companion Guide
Transaction Information

Instructions Related to Transactions
Based on ASC X12 834 X318 Plan Member
Reporting Implementation Guide, Version 5010

APD Data Submitters are urged to familiarize themselves with the section on 834 Member Reporting in the most

recent Questions and Answers

Instructions related to Transactions

Implementation Guide, Version 5010,

Based on the X12 834 X318

and related documents

document

Transaction Information Companion Guide Version Number: 1.0 – August 2019



## Plan Member Reporting

- 834 X318 requirements are for off-exchange commercial data submitters
- Unique subscriber and member identification numbers are generated by the data submitter
- 834 X318 is not a bi-directional process
- Enrollment and encounter data related to members covered by an insurance policy offered in NYS under a NYS licensed insurer must be submitted to the OSDS system, regardless of member residency



## Plan Member Reporting

- The OSDS expects a full file submission of member reporting data at least weekly
  - The initial submission is expected to include all members that had coverage on or after January 1, 2018
  - All records submitted in the initial submission should be submitted as an "Add"
  - Subsequent submissions will be identified as situationally appropriate according to the Implementation Guide
- Corrections to rejected records can be submitted more frequently if an update is required before the next full file submission
- A full replacement consists of all active or changed (inclusive of terminations or cancels) coverage segments
- Cancellations and terminations only need to be sent once unless retrospective change occurs



#### 837 PACDR Companion Guide



Original Source Data Submitter (OSDS)

X12 837 Post-Adjudicated Claim Data Reporting Implementation Guides

> Standard Companion Guide Transaction Information

Instructions Related to Transactions
Based on ASC X12 837 Post-Adjudicated Claim Data
Reporting Implementation Guides, Version 5010

Transaction Information Companion Guide Version Number: 1.1 - September 2019 Instructions related to Transactions Based on X12 837 X298, X299, X300 Implementation Guides, Version 5010, and related documents

Unique ID	Name
005010X298	Post-Adjudicated Claims Data Reporting: Professional (837)
005010X299	Post-Adjudicated Claims Data Reporting: Institutional (837)
005010X300	Post-Adjudicated Claims Data Reporting: Dental (837)
005010X231A1	Implementation Acknowledgment For Health Care Insurance (999)
005010X364	Data Reporting Acknowledgment (277DRA)



#### NCPDP Companion Guide



Original Source Data Submitter (OSDS)

NCPDP Post-Adjudication
Standard Companion Guide
Transaction Information

Instructions Related to Transactions
Based on NCPDP Post-Adjudication Standard
Implementation Guide, Version 4.2, and Related
Documents

Transaction Information Companion Guide Version Number: 1.0 - August 2019 Instructions related Transactions
Based on NCPDP PostAdjudication Standard
Implementation Guide, Version
4.2, and related documents





#### **OSDS Edits**

# Tier 1 and Tier 2 Edits in the OSDS

https://nyshc.health.ny.gov/web/nyapd/apd-osds-guidance-manuals

- If a submission file passes
   Tier 1 editing (standard level
   syntax and structure
   editing), the OSDS system
   will perform Tier 2 editing on
   each record
- The OSDS system process will check to ensure functional edits are met (external code sets and logical validation)
- Edit descriptions and logic for each OSDS edit are found on the Tier 2 edit document





Document Title:

Project: Produced For: Produced By:

Date: Notes:

Spreadsheet Tabs

Tier 2 Edit Dispositions

NYS OSDS NYS OSDS Project Optum OSDS Team August 2019

Version 1.0

Version 1.0 contains edits and dispositions by LOB.

Title	Description
Professional (298) Edits	Listing of edits and dispositions by LOB for the x298 Professional transaction
Institutional (299) Edits	Listing of edits and dispositions by LOB for the x299 Institutional transaction
Dental (300) Edits	Listing of edits and dispositions by LOB for the x300 Dental transaction
NCPDP Pharmacy Edits	Listing of edits and dispositions by LOB for the NCPDP Pharmacy transaction
834 X318 Plan Member Edits	Listing of edits and dispositions for 834 X318 Transaction



#### 834 Edits

- Edit Logic
- OSDS Edit #
- OSDS Edit Description
- OSDS Edit Disposition Code (Hard/Soft)

#### Example...

OSDS Edit Logic	Original Source Data Submitter Edit Code and Description (Found only on Tier II Edit Summary Reports)						
Edit Logic	OSDS Edit #	OSDS Edit description	OSDS Edit Disposition Code (Hard/Soft)				
If Social Security Number or Federal Taxpayer ID is reported, If REF01 = "SY" (Social Security Number) must be 9 digits, cannot begin with 9 and cannot be all 0s. must be a 9 digit number with no separators Numbers with all zeros in any digit group (000######, ###000###, ####0000) are considered invalid; numbers with 666 or 900-999 in the first digit group	00405	Invalid Member SSN	Hard				
If Federal Taxpayer ID is reported (REF01= "TJ", must be 9 digits, cannot begin with 9 and cannot be all 0s. must be a 9 digit number with no separators	00406	Invalid Member Taxpayer Identifier	Hard				
If the member is not the subscriber (INS01=N), a subscriber record REF01=0F should be populated with the subscriber id	00407	Missing Subscriber Identifier	Hard				
Maintenance Reason Code INSO4 - Situational Rule Required value when INSO3 is 001, 021 or 024	00408	Missing Maintenance Reason Code	Hard				
DTP - Member Level Maintenance Date 2000 - DTP01 - Required when reporting effective date of change to existing if the segment is reported must be 303	00409	Missing Member Level Maintenance Date	Hard				
INSO7 Consolidated Omnibus Budget Reconciliation Act (COBRA) Qualifying Event Code is required when INSO5 Benefit Status Code is equal to "C"	00410	Missing Qualifying Event Code	Hard				
A valid Employment Status Code INS08 is required when INS01 = "Y	00411	Missing Employment Status Code	Hard				
Must be a valid State code OR valid Province code. This edit will only be performed if the address is in	00412	Invalid Member State or Province Code	Hard				



## Edit Disposition Change Log

- Found in Information Library: https://nyshc.health.ny.gov/web/nyapd/information-library
- All 834 Edits are new to the OSDS

Tab	Description	Details			
		X298 11 Additions, 4 Changes, 1 Deletion			
		to current EIS Tier 2 Edits			
X12 837 Edit	t Listing of edits by LOB for Addition, Changes and Deletions	X299 21 Additions, 3 Changes, 1 Deletion			
Differences		to current EIS Tier 2 Edits			
		X300 10 Additions, and 1 Change to			
		current EIS Tier 2 Edits			
NCPDP Edit	Listing of new edits for NCPDP	13 New Edits have been added to the			
Differences Listing of new edits for NCPDP		OSDS System			



## 837 Edits and Differences

- Transaction (x298, x299, x300)
- Health Care Claim Status Code
- Health Care Claim Status Code Description
- Edit Logic
- OSDS Edit #
- OSDS Edit Description
- Edit Disposition (Hard/Soft)
- Change Type (Addition, Change of Logic, Deletion)

Transaction	Health Care Claim Status Code	Health Care Claim Status Code Description	Edit Logic	OSDS Edit #	OSDS Edit Description	Edit Disposition	Change Type
Professional (x298)	26	Entity not found	The member record for the patient not found for the Date of Service		Member Record for the patient Not found for Date of Service	Hard	Addition
Professional (x298)	54	Duplicate of a previously processed claim/line	Multiple voids for the same original submitted encounter can not be accepted	00250	Multiple Voids for same encounter not allowed	Hard	Addition
Professional (x298)	85	Entity Not primary	Ensures each claim is representative of a single adjudication of the claim by that payer. Verifying there is only one SBR06 = 6 per claim.	00239	Multiple adjudications of a claim by a payer.	Hard	Addition
Professional (x298)	90	Entity not eligible for medical benefits for submitted date of service	The member record is not found for the patient for the Submitting plan for the date of service on the encounter		Member Record for the patient not found for submitting plan for the date of Service	Hard	Addition
Professional (x298)	145	Entity's specialty/taxonomy code	Must be valid Health Care Provider Taxonomy Code		Invalid Referring Provider Taxonomy Code	Soft	Addition
Professional (x298)	178	Submitted Charges	Total charge amount must not be negative	00238	Invalid Total Charge Amount	Hard	Addition
Professional (x298)	187	Date(s) of service	Ensure when there are date ranges the "from" date is prior or equal to the "to" date 2400-0TP-DATE-SERVICE DATES When DTP01 = 472 and DTP02 = "RDB" CCYYMMDD-CCYYMMDD from date populate is prior to or equal to "to" date populated in DTP03	00242	Invalid Service Date Range	Soft	Addition



#### NCPDP Edits and Differences

#### Example...

- Transaction (NCPDP)
- Error Code
- Error Code Description
- Edit Logic
- OSDS Edit #
- OSDS Edit Description
- Edit Disposition (Hard/Soft)
- Change Type (Addition)

Transaction	Error Code	Error Code	Edit Logic	OSDS Edit #	OSDS Edit Description	Edit	Change Type
		Description				Disposition	
NCPDP	65	Patient Is Not	The member record is not found	00258	Member Record for the	Hard	Addition
		Covered	for the patient for the Submitting		patient not found for		
			plan for the date of service on the		submitting plan for		
			encounter		the date of Service		
NCPDP	N1	No patient	The member record for the patient	00257	Member Record for the	Hard	Addition
		match found.	not found for the Date of Service		patient Not found for		
					Date of Service		
NCPDP	R4	Procedure Modifi	If Product/Service ID Qualifier is	00256	Invalid Product ID	Hard	Addition
			equal to zero, 407-D7		Qualifier / Product ID		
		Product/Service ID must be zero.		Combination			
		If Product/Service ID is equal to					
		zero, 436-E1 Product/Service ID					
			Qualifier must be zero.				
NCPDP	81	Claim too old	Service Date must be less than 2	00255	Invalid Service Date -	Soft	Addition
			years from processing date.		Two Years Prior to		
					Date Received		





# Additional Information on EIS to OSDS Migration

#### EIS to OSDS Migration At A Glance\*

#	EIS	OSDS				
1	TPA as part of Contract	Data Submitter Agreement; TPAs as part of Contract remain in effect				
2	EDI Registration with GDIT/CSRA	EDI Registration with Optum				
3	SFTP Connection with GDIT/CSRA	SFTP Connection with Optum				
4	Collect all encounter data	Collect all encounter data & Off-Exchange Commercial Member Roster				
5	Medicaid and CHP transactions combined	Medicaid and CHP transactions separated				
6	Processes 837, NCPDP Transactions	Processes 837, NCPDP, 834 X318 Transactions				
7	Provides Tier 1 & 2 Editing	Provides Tier 1 & 2 Editing with additions, changes and removals				
8	Sends Standard X12 responses: TA1, 999, 277CA responses	Sends Standard X12 responses: TA1, 999, <b>277DRA</b> responses				
9	Proprietary responses:	Proprietary responses:				
	NCPDP: RxTA, RxFA, RxCA.	NCPDP: <b>RJ</b> , RxTA, RxFA, RxCA				
	X12: 837 RJ	<b>X12:</b> 837 RJ, <b>834 RJ</b> , <b>834 RL</b>				
10	Issuer Portal - CSRA/GDIT Connection	Data Submitter Portal through NY.Gov Connection				
11	Issuer Portal Summary Reports in Excel	Data Submitter Portal Summary Reports in Excel using Tableau				
12		Test Environment Secure - PHI and Member Data can be submitted				
	Member data can be submitted					





# APD Data Submitter Response Process and Reports

## Member Acknowledgements

- OSDS 834 x318 Record Level Response File (834 RL)
- All member response records will be returned to the data submitter via Optum's Secure File Transfer Protocol (SFTP) tool: Electronic Communication Gateway (ECG)
- The OSDS will provide a detailed acknowledgment of each individual member record. The acknowledgment will indicate the accept/reject status for each record
- The OSDS will provide all edit reasons for each rejected member record.
- There is no limit on the number of edits that can be listed in the response file.



## Member Acknowledgements

- OSDS 834 x318 Record Level Response File (834 RL)
- The purpose of this response file is to link the response status to the submitted records
- The OSDS NYS specific response file will be a pipe delimited text file

#### Reported for all records:

- Submitter Identifier
- Information Source Name
- File Name
- Transaction Set Creation Date
- Subscriber Identifier
- Member Identifier
- OSDS Record Disposition (Accept/ Accepted with Error/ Reject)

#### Reported only for accepted with error or rejected records:

- Value Reported
- Edit ID
- Edit Description



#### Member Acknowledgements

#### 5.2 Sample Pipe Delimited Text File

Included below is a sample of 834 pipe delimited text file.

1234|ABCDE|HN.NYHBE.834C.W.130430135202.001.DAT|20190501|123456XY|123456XY|ACCEPT

1234|ABCDE|HN.NYHBE.834C.W.130430135202.001.DAT|20190501|654321AB|654321AB|ACCEPT

1234|ABCDE|HN.NYHBE.834C.W.130430135202.001.DAT|20190501|987654AB|987654AB|REJECT|99999|123|Invalid Member Zip Code|HARD

1234|ABCDE|HN.NYHBE.834C.W.130430135202.001.DAT|20190501|45678900|45678900|REJECT|20500101|346|Invalid Member Birth Date|HARD

1234|ABCDE|HN.NYHBE.834C.W.130430135202.001.DAT|20190501|654321AB|65432101|ACCEPT| |789|Missing Member Race/Ethnicity Code|SOFT

1234|ABCDE|HN.NYHBE.834C.W.130430135202.001.DAT|20190501|654321AB|65432101|ACCEPT||789|Missing Member Race/Ethnicity Code|SOFT

#### 5.3 Pipe Delimited Text File Converted to Excel (column heading added)

The table below shows the 834 pipe delimited text file converted to Excel.

Submitter ID	Information Source	File Name	Created Date	Subscriber ID	Member ID	Record Status	Value Reported	Edit ID	Edit Description	Edit Status
1234	ABCDE	HN.NYHBE.834C.W.130430135202.001.DAT	20190501	123456XY	123456XY	ACCEPT				
1234	ABCDE	HN.NYHBE.834C.W.130430135202.001.DAT	20190501	654321AB	654321AB	ACCEPT				
1234	ABCDE	HN.NYHBE.834C.W.130430135202.001.DAT	20190501	987654AB	987654AB	REJECT	99999	123	Invalid Member Zip Code	HARD
1234	ABCDE	HN.NYHBE.834C.W.130430135202.001.DAT	20190501	45678900	45678900	REJECT	20500101		Invalid Member Birth Date	HARD
1234	ABCDE	HN.NYHBE.834C.W.130430135202.001.DAT	20190501	654321AB	65432101	ACCEPT	NULL	789	Missing Member Race/Ethnicity Code	SOFT
1234	ABCDE	HN.NYHBE.834C.W.130430135202.001.DAT	20190501	654321AB	65432101	ACCEPT	NULL	789	Missing Member Race/Ethnicity Code	SOFT

Table 5: 834 Response Text File converted to Excel File



## **Encounter Acknowledgements**

- NCPDP acknowledgements will be in the same format that EIS submitters receive today:
  - RxFA File Acknowledgement
  - RxTA Transaction Acknowledgement
  - RxCA Claim/Encounter Acknowledgement

#### NCPDP Acknowledgement Changes

- RJ File Level Rejection
- 837 acknowledgements (TA1 and 999) will be in the same format that EIS submitters receive today:
  - Only Negative 999s will be sent

#### 837 Acknowledgement Changes

Receive 277 DRA instead of a 277 CA



## **Encounter Acknowledgements**

- 277 DRA Changes:
  - 277 structure modified to represent the data reporting entity/data submitter relationship, rather than provider/payer relationships
  - Soft Edits are supported referred to as "accepted with errors" within the transaction
  - OSDS will be provided enhanced edit identification by using more than one status trio: (status category code, status code, entity code)
  - Various codes throughout the implementation guide have been reevaluated and modified to provide a cleaner representation of the intent



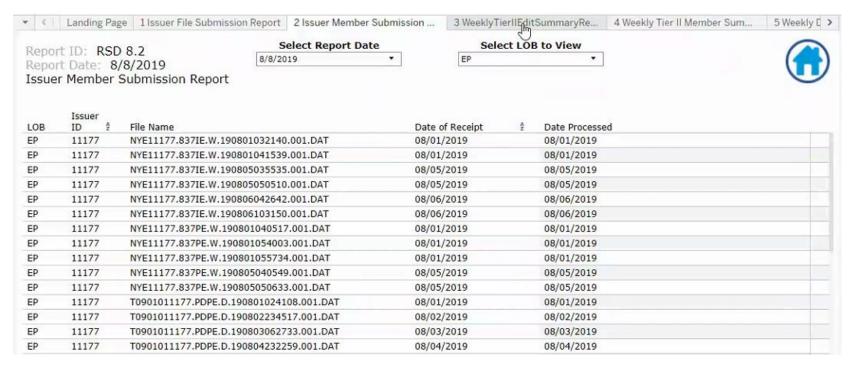
#### Portal Report Landing Page\*



- Data submitter reports will be available in csv or Excel format
- All registered and approved data submitters will have access to reports
- The OSDS will produce summary reports tailored for issuers and data submitters
- The OSDS enhances interface generating reports through Tableau
- There will be 834 reports for commercial off-exchange data submitters



#### Example of a Portal Report in Tableau







## What to Expect During Testing

#### When will Testing Start?

- The OSDS system's project schedule currently allows for testing to begin in January 2020
- If the test environment is live prior to January 2020, the OSDS Project Team will
  evaluate the ability to provision testers to the environment ahead of schedule
- There is a shared interest in ensuring OSDS Data Submitters are given as much time to test and refine their process as possible



#### Testing Success Criteria

- Successful testing criteria is defined as being able to:
  - exchange files with the OSDS;
  - 2. submit at least 6 files with 40 or more records having an acceptance rate of 90%; and
  - 3. to be able to process the associated response files
- Once the data submitter has successfully been certified for a transaction type, they will be approved to submit production files to the OSDS system for that transaction type



## **Testing Data**

- In the OSDS system, a submitter will be able to submit test files using production data
  - Security in the test environment is equivalent to production
- For off-exchange commercial data submitters, an 834 X318 member file must be submitted prior to any 837 or NCPDP to enable the OSDS system to properly establish member enrollment information used for encounter member validation
- Test files cannot exceed 50 MB in size
- Further specification in Section 3.1.4 of the OSDS Data Submitter Companion Guide



#### Alpha Testing

- Advantages of being an Alpha Tester:
  - Opportunity to get feedback earlier in the process
  - Alpha testers have a stronger influence on processes if unanticipated issues arise
- Keep in Mind:
  - The environment is still being developed and tested
  - Errors will have to be identified as system related or data related
- Phases of Testing (Q4 2019)
  - EDI Registration Testing and Connectivity
  - II. 837 Testing and NCPDP Testing
  - III. 834 Testing
  - IV. Portal Testing



#### Want to be an Alpha Tester?

- Email the apd.osds@health.ny.gov
- Include in the Subject Line: Alpha Testing Request
- Include your organization's name
- Include transactions that you are ready to alpha test
- DOH will select a set of alpha testers that will support full system testing
- All alpha testers will need a fully executed Data Submitter Agreement (DSA)
- All alpha testers will need to go through EDI Registration Testing and Connectivity



## Moving Toward Production

- At the start of testing in January 2020 and through April 2020, new and existing data submitters are expected to be production ready at cut over.
- Data submitters with off-exchange commercial lines of business are expected to have enrollment and encounter data from January 1, 2018 forward ready for production.
- Files submitted to the production environment prior to testing certification will be rejected
- As data submitters become certified, OSDS project staff will work with submitters on a production schedule





## **Closing Remarks**

#### **Contact Information**

All Payer Systems and Informatics
Division of Information and Statistics
Office of Quality and Patient Safety
New York State Department of Health
Corning Tower Room 1911
Albany, New York 12237

Phone: 518-474-4987

Email: <a href="mailto:nysapd@health.ny.gov">nysapd@health.ny.gov</a>

NYS Health Connector: <a href="https://nyshc.health.ny.gov/web/nyapd/home">https://nyshc.health.ny.gov/web/nyapd/home</a>

To subscribe to the **APD Listserv**, send an e-mail request to listserv@listserv.health.state.ny.us. In the body of the message, type:

SUBSCRIBE NYS-APD-L First Name Last Name