OHS CONNECTICUT
Office *of* Health Strategy

All-Payer Claims Database
Data Submission Guide Workgroup Regular Meeting
DRAFT Meeting Minutes
June 2, 2022 | 9:00 – 10:00 a.m.| Virtual (Zoom Recording)

Workgroup Members					
Olga Armah, OHS	R	Sandra Czunas, OSC	R	Sheryl Turney	R
Laurel Buchanan	R	Bernie Inskeep	R		
Supporting Leadership					
Adrian Texidor, OHS	R	Amy Tibor, OHS	R	Jesse Drummond, OnPoint	R
Sumit Sajnani, OHS	R	Robert Viens, OnPoint	R	Jacqueline Pellerin	R

R = Attended Remotely, **IP** = Attended in Person, **X** = Did not Attend

Agenda			
	Topic	**Responsible Party**	**Time**
1.	**Welcome and Call to Order**	**Olga Armah**	**9:02 am**
	The All-Payer Claims Database (APCD) Data Submission Workgroup (DSGW) meeting was held on June 2, 2022, by webinar. Ms. Armah called the meeting to order at 9:02 a.m. and welcomed members and participants. It was determined by roll call that a quorum was present.		
2.	**Public Comment**	**Attendees**	**9:03 am**
	There was no public comment.		
3.	<u>Action</u>: **Review and Approval of Minutes: May 23, 2022 Meeting**	**Olga Armah**	**9:04 am**
	(Vote) Ms. Armah requested a motion to approve the May 23, 2022 minutes. Bernie Inskeep made the motion. The motion passed unanimously.		
4.	**Denied Claims Discussion** • **Claims Adjustment Reason Codes (CARCs)** • **OnPoint Recommendation**	**Olga Armah & Robert Viens, Jesse Drummond, OnPoint**	**9:05 am**
	Ms. Armah provided a recap of the previous meeting, stating that the workgroup had discussed OnPoint's recommendation to collect all fully denied claims except for those denied due to non-coverage and duplicate claims. Ms. Armah indicated that a list of CARC codes had been shared with the workgroup prior to this meeting for review and to decide whether to exclude additional codes and consider whether to recommend additional modifications to the Data Submission Guide (DSG). Ms. Armah opened the floor for discussion. A discussion took place regarding those codes within the list considered to be non-coverage and duplicate, and the process by which claims make it into the carrier's data warehouse. Ms. Armah inquired if the group is ready for a motion to accept the recommendation by OnPoint to collect all claims and all CARC codes except for what is not in the warehouse including non-coverage and duplicates. Discussion ensued. • Ms. Armah stated that the data dictionary explains what the CARC codes are and how they are being grouped and provides instructions to carriers. The dictionary will be updated to exclude fully denied claims due to non-coverage and duplicates. Ms. Czunas commented that there will be a need for definitions for non-coverage and duplicates to enable exclusion. • It was agreed that carriers would not be given a list of claims *not* to submit as it would be easier for carriers to submit all denied claims. It would then become the responsibility of the vendor to identify		

and sort the codes that are likely to be associated with duplicates or non-coverage and group the data in such a way that can be used for information.

Action item: Ms. Czunas inquired if a predetermination process is available for review. Upon discussion, it was agreed to provide a high-level predetermination process to the group.

(Vote) Ms. Armah requested a motion to collect all fully denied claims that carriers have in their data warehouse related to denied claims. Ms. Czunas made the motion. Ms. Inskeep seconded. The motion passed unanimously.

5.	**Continued Dental Claims Discussion**	**Olga Armah**	**9:35 am**

Ms. Armah shared a list of carriers registered with OnPoint to report dental claims as a follow up item from the previous meeting. It was determined that the list is not exhaustive and when it is decided to begin collecting dental claims, it will have to be determined how to reach other carriers. Ms. Armah also shared that another follow-up item from the meeting was for OnPoint to verify whether standalone dental plans and those that are part of a medical plan will be differentiated. Mr. Drummond stated that the coverage would be submitted through *dental coverage class* which would be seen as a separate record in the eligibility table.

Ms. Armah stated that in the previous meeting OnPoint presented the different types of dental claim layouts from other states. The group was provided with the layout for Washington State and the Common Data Layout (CDL) for the APCD Council and asked to review and determine which data fields to include in the DSG or eliminate. A discussion took place regarding whether the CDL, as written, is in a format consumable by both submitters and analysts. Ms. Armah commented on the desire for simplicity and ease. Ms. Turney commented that the State All Payer Claims Database Advisory Committee (SAPDAC) recommended the CDL for data submission. It was agreed to continue discussing the dental CDL in the next meeting. A brief discussion regarding data field thresholds took place. Mr. Viens stated that the threshold can be customized for every field to accommodate what payers have in their systems. The CDL will include fields suggested by OnPoint and adjustments or variances can apply it to those fields if needed. The group agreed to table the discussion and vote on the dental claims layout.

5.	**Next Meeting Topics**	**Olga Armah & Members**	

Ms. Armah stated that the dental claims discussion will continue in the next meeting. A review of the DSG will also take place to determine which aspects will be modified, for example, the eligibility table and the instructions on what is to be reported.

6.	**Adjournment**	**Olga Armah**	

Ms. Armah requested a motion to adjourn. Ms. Czunas made the motion and Ms. Inskeep seconded. The motion passed and the meeting adjourned at 9:56 a.m.

Upcoming Meeting Date: June 9, 2022 at 9 a.m.

All meeting information, materials, and audio/visual recordings are published on the OHS website:
https://portal.ct.gov/OHS/HIT-Work-Groups/Data-Submission-Guide-Workgroup