DEPARTMENT OF HEALTH



Minnesota All Payer Claims Database SUBMISSION REQUIREMENTS

Background

The Minnesota All Payer Claims Database (MN APCD) contains comprehensive medical and pharmacy enrollment and cost data for Minnesota residents to support statewide analyses of health care costs, quality, and utilization. The MN APCD aggregates Medicare fee-for-service, Medicaid and other state fee-for-service claims, managed care for Medicaid and Medicare, and services provided by commercial payers of health care costs for Minnesota residents. Health plans, third party administrators (TPAs), and pharmacy benefit managers (PBMs) submit the data to a data aggregation contractor who processes the data and submits it to the Minnesota Department of Health (MDH). The Health Economics Program (HEP) collects data in the MN APCD under <u>Minnesota Statutes, section 62U.04</u>.

An important area of MDH's efforts associated with the MN APCD concerns studying and documenting data quality, with a focus on data accuracy, consistency, and reliability. This is particularly important work for two reasons: First, a complete understanding of data quality is key to continuously improving data over time, and this is paired with the development of new logic checks and data intake procedures. Second, when making public use files available for independent research in the community, it is essential that researchers have a full understanding of data quality to guide the development of research studies and make appropriate statistical adjustments to the data.

Registration Requirements

All health plan companies, TPAs, and PBMs that pay, or process claims for Minnesota residents are required to register annually with the state's data aggregation vendor even if they are not required to submit data. The registration is due by April 1 of every year and must include the dollar amount of health care claims paid for covered individuals during the previous calendar year.

Information typically gathered during registration includes:

- Contact information for the reporting organization and individuals.
- TPA, PBM, and mental health carve-out identification.
- Covered lives, claims volume, and paid claims' value estimates.

For more information about the registration process contact the claims data aggregator at <u>cdm-support@onpointhealthdata.org</u>.

Submission Requirements

Health plan companies and TPAs are required to submit health care claims data for Minnesota residents to the MN APCD if they paid a total of at least \$3,000,000 in health care claims for Minnesota residents during the previous calendar year. PBMs must submit health care claims data for Minnesota residents if they paid at least \$300,000 in claims for Minnesota residents during the previous calendar year. To determine if a health plan company, TPA, or PBM is required to submit data to the MN APCD under these thresholds, each potential submitter must consider the *total* volume of health care claims paid for covered Minnesota individuals, regardless of whether the data on those claims will ultimately be submitted to the MN APCD.

Health plan companies, TPAs, and PBMs that meet requirements set out in Minnesota laws and rules are obligated to submit health care claims data for Minnesota policyholders to the MN APCD. These regulations impose the duty to submit data on companies that pay and process claims, not an employer.

For more information return to <u>Minnesota All Payer Claims Database website</u> and review the frequently asked questions (FAQ) document.

Variance Management

<u>Minnesota Rule 4654.0700</u> provides discretionary authority for the Minnesota Commissioner of Health to grant variances to a data submitter for a reported submission specification if the data submitter demonstrates good cause. There are two types of variances for data submitters: (1) a threshold variance for meeting a specified threshold which is an automated process through an online interface with the designated claims data manager and (2) a rule variance for submission of specific data elements or submission specifications.

For more information about variance management, click on the link to view the <u>Minnesota All</u> <u>Payer Claims Database Variance Procedure</u>.