New Hampshire Comprehensive Healthcare Information System Annual Healthcare Claim Processors Meeting

Wednesday, August 17th 2022 1:00pm – 2:30pm EDT



Agenda

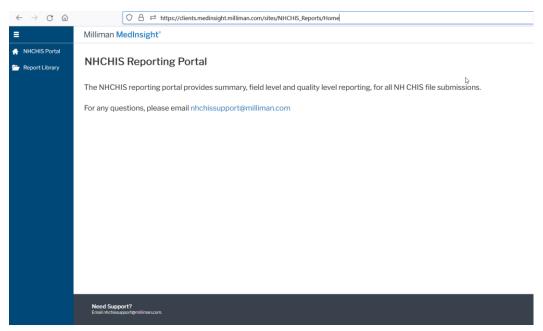
- Introduction
 - DHHS
 - NHID
 - Milliman
- NH Reporting Site
- Medicare Supplemental
- Future file layout changes
- CHIS Statistics
- How CHIS data is used
- Benefits of contributing to CHIS
- NH Exception Requests
- NH CHIS Registration
- Opt-In Attestation
- Questions



Presenter: Rose Hess (Milliman)

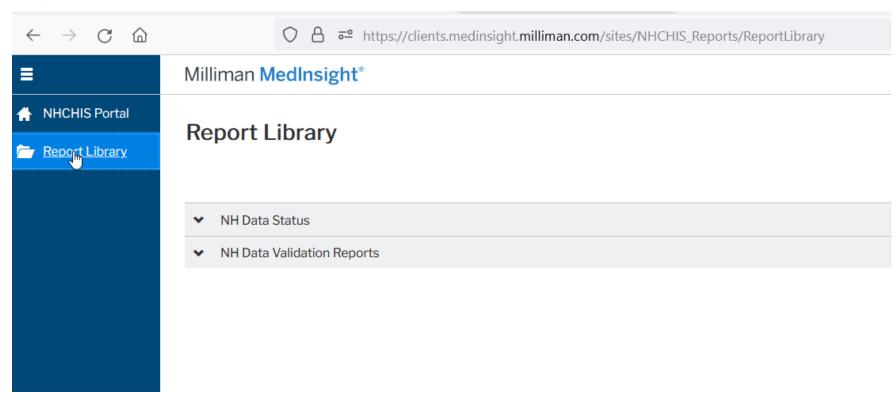


- Where is the NH Reporting site found?
 - https://clients.medinsight.milliman.com/sites/NHCHIS_Reports/Home
- Who has access?
 - Contacts who receive monthly file notifications Contacts must be registered contacts on the company's NH CHIS Registration.



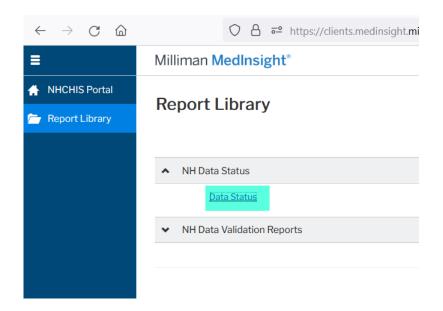


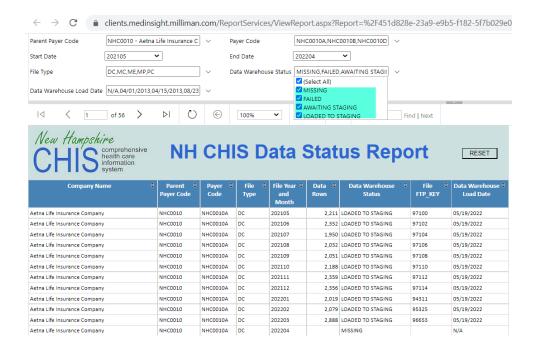
- What reports are available?
 - Contacts who receive monthly file notifications Contacts must be registered contacts on the company's NH CHIS Registration.





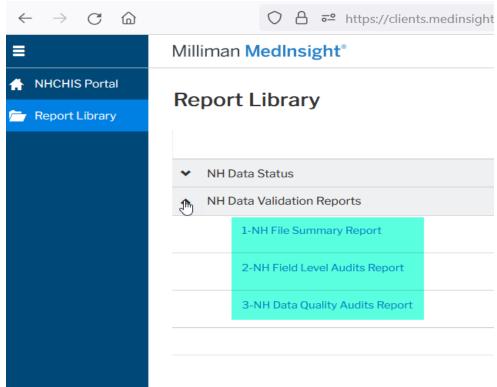
- NH Data Status report:
 - The Data Status report is available to all payers. This report is also available to the general public on the NHCHIS.com website.
 - Reports all files, by file type and year-month that have been loaded to the NH CHIS data warehouse. Data is loaded quarterly and does not show current submission status of files.







- NH Data Validation reports:
 - Status of current monthly submissions only available to payers and the contacts listed in the NH CHIS registration.
 - Payers can only see their own company submissions.
 - Reports are available at a summary, field level and quality check level.
 - The NH Reporting Site shows real-time results for files that are processed.





Medicare Supplemental

Presenter: Rose Hess (Milliman)



Medicare Supplemental

- Medicare Supplemental reporting required as of January 1, 2021.
- Report Insurance Type Codes (ME003, MC003, PC003, DC003) with 'SP' (Supplemental Policy)



Future File Layout Changes

Presenter: Rose Hess (Milliman)



Future File Layout Changes

- Currently there are no file layout changes.
- In the event of a file layout change, at least 6 month's notice will be provided to all payers.



CHIS Statistics

Presenter: Rose Hess (Milliman)



CHIS Statistics

NH CHIS Data - Did you know?

- Approximately 50 payers submit to NH CHIS.
- Milliman processes the CHIS data quarterly (2011 to current).
 - The process takes approximately 3 weeks and then a review of the data takes another 3 weeks.
 - Once the review of the data is complete, the data is available for analytics and research.
- The NH CHIS warehouse contains Commercial, Medicare and Medicaid data.
- Average of 50 million service records incurred every year.
- Average of 9 million medical member months every year.
- Average of 12 million pharmacy member months every year.
- Average of 8 million dental member months every year.
- The States with the highest membership in NH CHIS(Top 5 highest to lowest): New Hampshire, Massachusetts, Maine, Vermont, and Florida.
- Since the last Annual meeting, 23 NH CHIS Public Use requests were provided.
- Since the last Annual meeting 8 NH CHIS Limited Use requests were provided.
- All PII data is de-identified when using the NH CHIS preprocessor. Milliman employs processes to not
 accept data into the NH CHIS data warehouse unless it is de-identified.



How CHIS data is used

Presenter: Mary Fields (DHHS)



How is CHIS data used?

- Public Use Extracts
- Limited Use Extracts
- Public Health
- Various NHID Initiatives
- Pharmacy Drug Affordability Board (PDAB)



How is CHIS data used?

Public Use Extracts

- Available to any requester.
- Only Commercial claims data is available from 2011 through 2022-03.
- There is no member identifiable data present in the Public Use extracts.
- Some provider data is also blinded in the Public Use extracts.
- Requesters submit a request form: <u>Public Use Request Form</u>.
- There is no charge for the Public Use Extracts.
- Provider and reference table data is also provided.
- Past Public Use Extract requests are found at <u>Public Use Data Requests</u>.



Limited Use Extracts

- May contain Medical, Dental and or Pharmacy claims as well as member eligibility.
 - Limited Use Extracts are only approved for true research.
 - Requesters can apply for Limited Use Extracts through a formal request and approval process. That process includes a formal committee made up of various stakeholders to include:
 - One member representing insurance carriers;
 - One member representing health care facilities;
 - One member representing health care practitioners;
 - One member representing the general public;
 - One member representing purchasers of health insurance;
 - One member representing health care researchers; and
 - Two members of the department.
 - Applications are carefully reviewed and data elements are strictly limited to those needed for the project.
 - Limited Use Extracts are custom and are created using requested and approved fields from the requester's application.
 - Limited Use Extracts can contain member and claim data. Medicaid data can also be included in the extracts with approval from NH DHHS. Approval is rare and researcher must demonstrate benefits to NH Medicaid.
 - Data usage can be approved for up to two years of use. An annual extension may be granted with formal request.
 - Mary Fields from NH DHHS manages the requests and approvals of the extracts.
 - Past approved Limited Use Extracts are found at <u>Limited Use Data Requests</u>.



Public Health

- The Department of Health and Human Services has and continues to use the data to inform legislature and the public about topics such as Substance Use Disorders, HIV prescriptions and other epidemiology topics.
- We also anticipate several studies regarding COVID-19.



NHID Initiatives (Detail Not Currently Available For These)

- NH Insurance Department's Health Cost website: https://nhhealthcost.nh.gov/
- A statewide rate report, produced quarterly, shows charge and paid amounts for thousands of procedures
- An innovative network adequacy rule adopted in 2018 supports increased transparency and market competition
- Claims data are often used to determine the potential implications of mandate and market reform efforts
 - These analyses help to inform lawmakers of the potential impact of a particular piece of legislation on cost.



Pharmacy Drug Affordability Board (PDAB)

- Data is used to inform our newly formed board about costs, payments and cost shares.
- The Board's duties falls under RSA126-BB



Benefits of contributing to CHIS

Presenter: Jason Aziz (NHID)



Benefits of contributing to CHIS

- #1 reason: COST-CONTROL
 - This was the major driver for the creation of APCDs
 - Price transparency exerts downward pressures on procedure and Rx prices
- Fully de-identified data—protects your customers.
- Informs clinical, epidemiological, and Public Health policymakers.
- Help other states; and thus, Federal Government.
- Create and 'even playing field' for insurers.



NH Exception Requests



Exception Requests

Pursuant to RSA: 4009.09 (b)

..."If a file is processed and rejected for failing to meet the field level or quality audit default thresholds, the healthcare claims processor can request an exemption to the default threshold through a standardized process. Exemptions or adjustments may be granted for data variances that cannot be corrected due to systematic issues."

Threshold exception requests should include data field OR data quality-specific reasoning to support the request. Failure to provide this may result in the exception request denial and/or complete file failure.

Do:

- Submit your exception request within 10 days of a file failure notification. If an exception request is not received, your failed file will expire and a new file will need to be resubmitted.
- Submit threshold changes for failed field and quality checks.
- Provide reasoning why you aren't able to meet the threshold reiterating the description of the quality check is not reasoning why you aren't able to meet the threshold.
- Request the exception request based on your annualized needs for threshold changes instead of monthly needs for a threshold change.
- Include overall comments about the file if the file size is impacted by significant events like the pandemic or the add/loss of a large client group



- Submit files to be accepted as is with no threshold changes.
- Leave the Notes section empty.
- Reiterate the description of the quality check in the "Reason For Request".
- Assume the reviewer will remember the comments you included last year, if the same reason applies year to year please include details each time.









Exception Request Example

New Hampshire

Exception Request System

File Partic	culars											
Data Suppi	lier Name NHC	HIS Data Submi	tter									
File Name	MEN	HNHC01232020	06_20200620	318635.txt								
Records	625											
ile Date	Jul 2	7 2020 10:12:28A	M									
ile Check	ed Jul 2	7 2020 8:33:33AN	MI.									
hresholds) Threshol	by using the for d Exceptions	m at the bottom o	f the page la	oelled "File Ex	ception Re	equest". (Cl	ck <u>here</u> to take	you to the bottom of the page)	sues. Once you have verified that the data are being pulled appropriately and have determined that the data are of the highest attainab	le quality, you may eithe	request that the thresholds be c	hanged using the form "Threshold Exception
Selow is a	list of all thresh	olds that were not	met by the f	ile. You may re	equest that	thresholds	be changed for	this and future files by completing the form.				
• Fill : • You • Click • You	in the new threst may enter option to the submit but request will be	nal notes to help e	explain why t	his threshold c	hange is n	the final de						
	el Failures	allow you to request n	nuitipie tiresnoi	d changes. New re	squests will a	arways overwr	te previous requis	its.				
Field Nan												
(Position) Click to vie		Test Type	Current Threshold	Comparison Criteria	File Results	Request Exception	Threshold Requested	Exception Notes				
ME032-G	roup Name (32)	Minimum Lengti	h 100.0000	>=Percentage	0.000			.:				
Quality F	ailures											
Name	Description								MIN File Threshold Result	MAX Request Threshold Exception	Thresholds Requested Minimum - Maximum	Exception Notes
DQE316	(Ratio of distinc	t non-blank group	names to dis	tinct non-blanl	k group nu	imbers) - N	imber of record	ds with distinct non-blank Group Names (MEC	332) divided by the total number of records with distinct non-blank Insured Group or Policy Number (ME006).24 0.25 0.00	1.00		
	id notes in the f		x that will be	presented to th	e reviewe	er. Use this s	pace to make a	my suggestions as to why the file as a whole sh	hould be passed.	1		

To request the file be passed without changing the thresholds, simply add notes explaining why and then click the "Request File Exception" button. The system will keep you up to date on the status of your request.





NH CHIS Registration Website

Presenter: Rose Hess (Milliman)



NH CHIS Registration Website

- No updates to the NH CHIS Registration Website this year.
- Annual registration notices to be emailed to all payers, February 2023.
- Update Registration for your payer when:
 - Any Contacts have been added or are no longer with your organization.
 - Changes to your organization that affects your ability to report to NH CHIS.
- Adding or removing personnel to email file report notifications are only done after the NH CHIS registration website has been updated.



Opt-In Attestation

Presenter: Jason Aziz (NHID)



Opt-In Attestation

- In accordance with INS 4005.03, adopted 11/17/2016, each third-party administrator and carrier is required to provide the NHID Opt-In Form to any self-funded private employer within 60 days of the effective date of the rule.
- Pursuant to INS 4005.03 (d): "Each carrier and third-party administrator shall provide to the department annually on March 15 an attestation of compliance with this section with respect to all accounts to which this section was applicable during the prior year."
- NHID is tracking compliance with the submission(s) of the Attestation of Compliance with the rules set forth in 4005.03 beginning in March 2023.



Opt-In Attestation Form

- March 15th is the annual submission deadline for the Opt-in Attestation form.
- Ins-4005.03(b): The "NHID Opt-In Form" shall be presented at least once for each contractual period but need not be presented annually if the contractual period exceeds one year.
- E-mail: Karen.L.McCallister@ins.nh.gov with questions.

The State of New Hampshire Insurance Department



21 South Fruit Street, Suite 14 Concord, NH 03301 (603) 271-2261 Fax (603) 271-1406 TDD Access: Relay NH 1-800-735-2964

NHID Opt-In Form

All-Payer Claims Database Indication of Intent for Private Employers Offering Self-Funded Health Coverage in New Hampshire

You are receiving this form under a 2016 New Hampshire law allowing a self-funded private employer to direct its claims administrator to include the health care claims data of its employees and covered dependents in the state's All-Payer Claims Database (APCD) (NH RSA 420-G:11, V).

- In response to rising health care costs, the New Hampshire Insurance Department has, since 2003, collected health care claims data from insurers and third-party administrators in an APCD. To protect privacy, under state law the database "shall not include or disclose any data that contains direct personal identifiers".
 (NH RSA 420-G:11-a, I)
- The APCD enhances transparency, providing employers, policymakers, payers, and health care providers with vital information about the factors contributing to rising health care costs in New Hampshire. In addition, the Insurance Department uses the database to provide health cost information to the public, including employers and their employees, through the NH HealthCost website: http://nhhealthcost.nh.gov/.
- New Hampshire's database has always included data from self-funded employers, because the accuracy of information derived from the database increases when more claims are included. In 2016, the U.S. Supreme Court ruled that Vermont could not require self-funded private employers to submit data to the state's APCD. To clarify New Hampshire law after that ruling, the legislature required the creation of this form to allow self-funded private employers to direct their claims administrators to include their data.

If you elect to participate, please indicate your intent below by checking, signing, and providing the requested information; then return this form to your claims administrator. If you have questions about New Hampshire's APCD or the department's efforts to improve health care cost transparency, contact the NH Insurance Department at 603.271.2261 or requests@ins.nh.gov, or visit http://www.nh.gov/insurance/. Thank you.





Questions or Comments Regarding Policy?

Please direct any questions or comments to:

Jason Aziz

Jason.J.Aziz@ins.nh.gov
New Hampshire Insurance Department
(603) 271-4191

Mary Fields

Mary.fields@dhhs.nh.gov

New Hampshire Department of Health and Human Services (603) 271-9358



Questions or Comments?

Please direct any questions or comments to:

NH Ticketing System

NHCHISSUPPORT@milliman.com

You may copy

Rose Hess

Rose.Hess@Milliman.com

206-504-5468



Thank you

