# **NH CHIS Annual Meeting**

New Hampshire CHIS comprehensive health care information system Thursday, July 25, 2013 10:00am – 11:30am EDT

In-person (NH DHHS Brown Building Auditorium) and WebEx



## Agenda

- Introductions
  - NH CHIS Team
  - Milliman Team
- Transition Process
  - Status on NHpreprocessor
  - Status of data submissions
  - Status of extracts
- Review the Process for Submitting Submission Exceptions
  - Process, Form, and Approval



## Agenda (Continued)

- Data Quality Issues
  - Gaps in data
  - Field issues in processing data
  - Multiple platforms
  - Carve-outs
- Future Communications
  - Healthcare Processor Stakeholder Team
  - Newsletters
- Questions



#### **NHpreprocessor Status**

#### NHpreprocessor Status

- Initial preprocessor distributed Sept. 12, 2012.
- Updated version distributed Feb. 6, 2013. The main changes were adding the ability for 10 new data elements, the scrubbing of the member and subscriber name, and the file versioning.
- NHpreprocessor available for download via Milliman FTP site.



#### **NH CHIS Submission and Extract Status**

- Data Submission Status
  - Data submissions allowed with distribution of NHpreprocessor.
  - Data validation and threshold processes built and refined.
  - Portal built and available for healthcare processor view of results.
  - Automated emails with data validation results sent to healthcare processors.
- Quarterly Data Extract Status
  - Initial extract provided to DHHS/NHID has data through December 2012.
  - Second extract to have data through March 2013.



#### **DHHS/NHID Exception Process**

- Request form is available on the Milliman Data Validation Reports Portal. (https://nhchis.com/Reports/Pages/Folder.aspx)
- Authorized users will log into portal and access "4-Theshold Exception Request Form", then follow all directions provided in this form.
- Requests must be thoroughly completed (correct Audit ID, date range, threshold limits and specific rational that includes plans for resolving any issues).
- When complete, forms must be submitted to the FTP site.



## **DHHS/NHID Exception Process (Continued)**

- Milliman uploads these requests, processes and submits them to DHHS/NHID for approval.
- DHHS/NHID provides feedback on request to Milliman.
- Milliman reprocesses results and sends emails to notify healthcare processors of updated results.



## **Data Quality**

- Generally of high quality.
- Experiencing gaps in data.
  - Missing Files for some time periods.
    - Missing files during the transition from Onpoint to Milliman and some for other periods.
    - Some files have no records. Please supply file and put 0 records in header.
  - New subsidiaries can cause gaps creating confusion with file tracking.
- Submissions from one healthcare processor but multiple platforms.
  - New technology (i.e. Enterprise Data Warehouse) may be being implemented.
  - Subsidiaries may have different systems which creates confusion in cross walking the data.



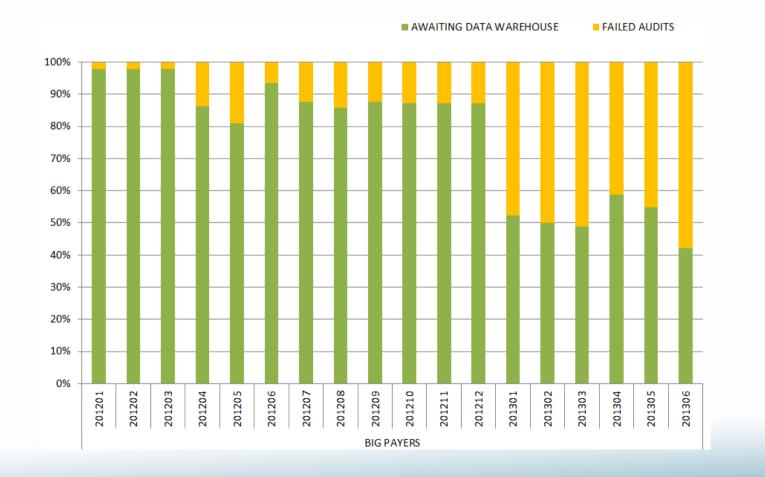
#### **Data Quality (continued)**

- Field issues create many problems in processing the data.
  - Member Sequence number varies across eligibility and claims files.
  - Use of member IDs varies across eligibility and claims files.
  - Provider data is still an issue. NPI continues to gain importance.
- Audit failure themes:
  - Type of Provider data issues are:
    - Dental Provider type, name, NPI
    - Pharmacy Provider name, NPI
    - Medical Billing ID = Service ID
  - Payment amounts low coinsurance and average paid amount



## **Data Quality and Submission Status**

• Large healthcare processors data quality and submission status



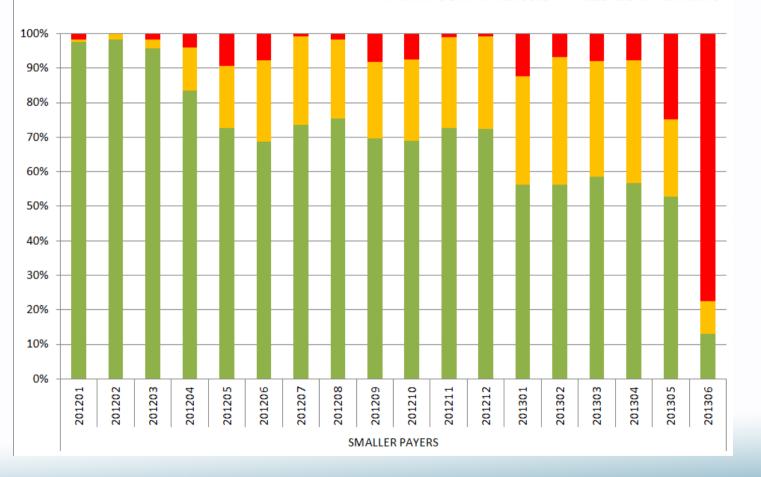


### **Data Quality and Submission Status**

Small healthcare processors data gaps, data quality and submission









## **Data Quality (continued)**

- Carve Outs
  - Inability to associate members' medical claims with pharmacy and/or dental claims because the hashed identifiers don't always match in the eligibility file.
  - Inability to accurately aggregate members by group number due to the assignment of different group numbers for the same employer by the different payers (i.e. medical and pharmacy data).
  - Inability to easily segregate and match claims for each carrier when data files are submitted by a third party in aggregate on behalf of multiple carriers.



#### **Future Communications**

- Milliman is establishing a NH CHIS Healthcare Processor Stakeholder Team to allow a means for communicating about items such as:
  - Inconsistencies with rule requirements vs. historical data submissions.
  - Proposed modifications to the NH claims data reporting rules (Chapter Ins 4000).
  - Load and quality edits.
  - Data completeness, consistency, and quality issues.
  - Milliman system submission issues.
  - Healthcare claims processors issues
  - Anyone interested in participating should contact al.prysunka@milliman.com



## **Future Communications (Continued)**

- Milliman will also continue to communicate with the Healthcare processors through:
  - Newsletters
  - Central email box <u>NHCHISsupport@millliman.com</u>
  - Direct telephone as needed
  - www.nhchis.com



## **Questions/Concerns**

- Questions and concerns from CHIS/Healthcare claims processors
  - With data submittal requirements?
  - Other?
- Thank you.

