

Agency/Organization:

Contact Email:

All measures are for 2017 claims data submissions

Please submit by July 1, 2019

| APCD Measures  | Percent Valid | Numerator | Denominator | Special Instructions  | Value Statement: High Quality APCD  |
|--|---------------|-----------|-------------|---|---|
| % of provider records that contain a valid NPI number                                |               |           |             | This calculation should be run post data processing. If a state has a standardized process to infer NPIs when they are missing then these values should be included in the numerator for comparison | % of time the field is populated.   |
|  |               |           |             | Numerator =Total number of distinct provider records that contain a valid NPI number  |   |
|  |               |           |             | Denominator =Total number of distinct provider records  |   |
| % of medical claims with a valid 2nd, 3rd, or 4th diagnosis code                     |               |           |             | Numerator =Distinct count of medical claims records where ICD diagnosis code 2, 3 or 4 <> NULL  | Claims should have more the one diagnosis code X% of the time. All codes should be valid. |
|  |               |           |             | Denominator=Distinct count of medical claims records  |   |
|  |               |           |             |   |   |
| % of outpatient facility claims with a valid CPT code                                |               |           |             | Numerator = Total number of medical claims records where bill type = "13*" and that contain a valid CPT code value  | Outpatient claims should have valid CPTs 100% of the time.                                |
|  |               |           |             | Denominator =Total number of medical claims records where bill type = "13*"   |   |
|  |               |           |             |   |   |
| % of members with a valid race value   |               |           |             | Numerator =Total enrollment records where member race is not null and <> "Unknown" or "Other"   | Race and Ethnicity information is important and should be available X% of the time.       |
|  |               |           |             | Denominator =Total number of distinct enrollment records  |   |
|  |               |           |             |   |   |
| % of members with a valid ethnicity value  |               |           |             | Numerator=Total enrollment records where member ethnicity is not null and <> "Unknown" or "Other"   |   |
|  |               |           |             | Denominator=Total number distinct enrollment records  |   |
|  |               |           |             |   |   |
| % of commercially insured members under age 65 with medical and pharmacy eligibility |               |           |             | Numerator=Total member months for commercially insured individuals under age 65 that had medical and pharmacy enrollment in a given month   | All members should have 12 member months.   |
|  |               |           |             | Denominator=Total member months for commercially insured individuals under age 65 with medical or pharmacy coverage in a given month  |   |
|  |               |           |             |   |   |

|  |  |  |              |   |   |
|--|--|--|--------------|---|---|
|  |  |  |              |   |   |
| % total commercial market represented  |  |  |              | Numerator =Total medical member months for individuals with payer line of business = "COMMERCIAL" and insurance type = "PRIMARY" divided by 12.   | APCDs should represent X% of the commercial market.                   |
|  |  |  |              | <a href="#">Total Individuals covered under "Employer" and "Non-Group" covered as reported by the Kaiser Family Foundation for 2017 (originally from Census Bureau's American Community Survey)</a> |   |
|  |  |  |              |   |   |
| % of medical claims lines where claim status = 'PAID' and copay, coinsurance and deductible all = 0 for commercially insured individuals |  |  |              | Commercial for this purpose + Non medicare, Non medicare Advantage, Non Medicaid  |   |
|  |  |  |              | Numerator=Total number of medical claims recordswhere claim status = "PAID" and copay, coinsurance, and deductible = 0 for commercially insured individuals   |   |
|  |  |  |              | Denominator=Total distinct medical claims in 2017   |   |
|  |  |  |              |   |   |
| Most recent month of paid claims available for request   |  |  | NOT MEASURED | Please enter in the Numerator Column the most recent year-month available for request by outside organizations that can be fulfilled using paid APCD claims data                                    | Timely data is important to making public health and policy decision. |

Thank you!