

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.
				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)	
% 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!