Welcome

THCE Data Submitter Workgroup – Agenda

1. THCE Documentation Updates
2. DSG File Overview and Member Attribution
3. Data Validations
4. Onpoint Claims Data Manager (CDM) Introduction and Demo
5. Submitter Support
6. Submitter Roundtable
7. Next Steps

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THCE Documentation Updates

Updates to DSG and Attribution Addendum

- OHCA submitted documentation updates to the Office of Administrative Law (OAL) on June 7, 2024

- Proposed updates include:
  - Adding RR99 Unspecified Region code to DSG Appendix C
  - Adding non-spatial Los Angeles ZIP codes to DSG Appendix C
  - Adding **184** physician organizations to the Attribution Addendum

- DSG v1.1 and updated Attribution Addendum will be published on the OHCA website following OAL approval

Updates to DSG and Attribution Addendum

- Thank you for submitting PO-TIN lists with registration
- OHCA will **not** be adding TINs to the Attribution Addendum
  - TINs are not a unique identifier for a physician organization
  - Too many instances of the same TIN associated with multiple POs added confusion, not clarity
  - Some POs had hundreds of TINs reported, which increases the likelihood of a practitioner's personal identifier being included
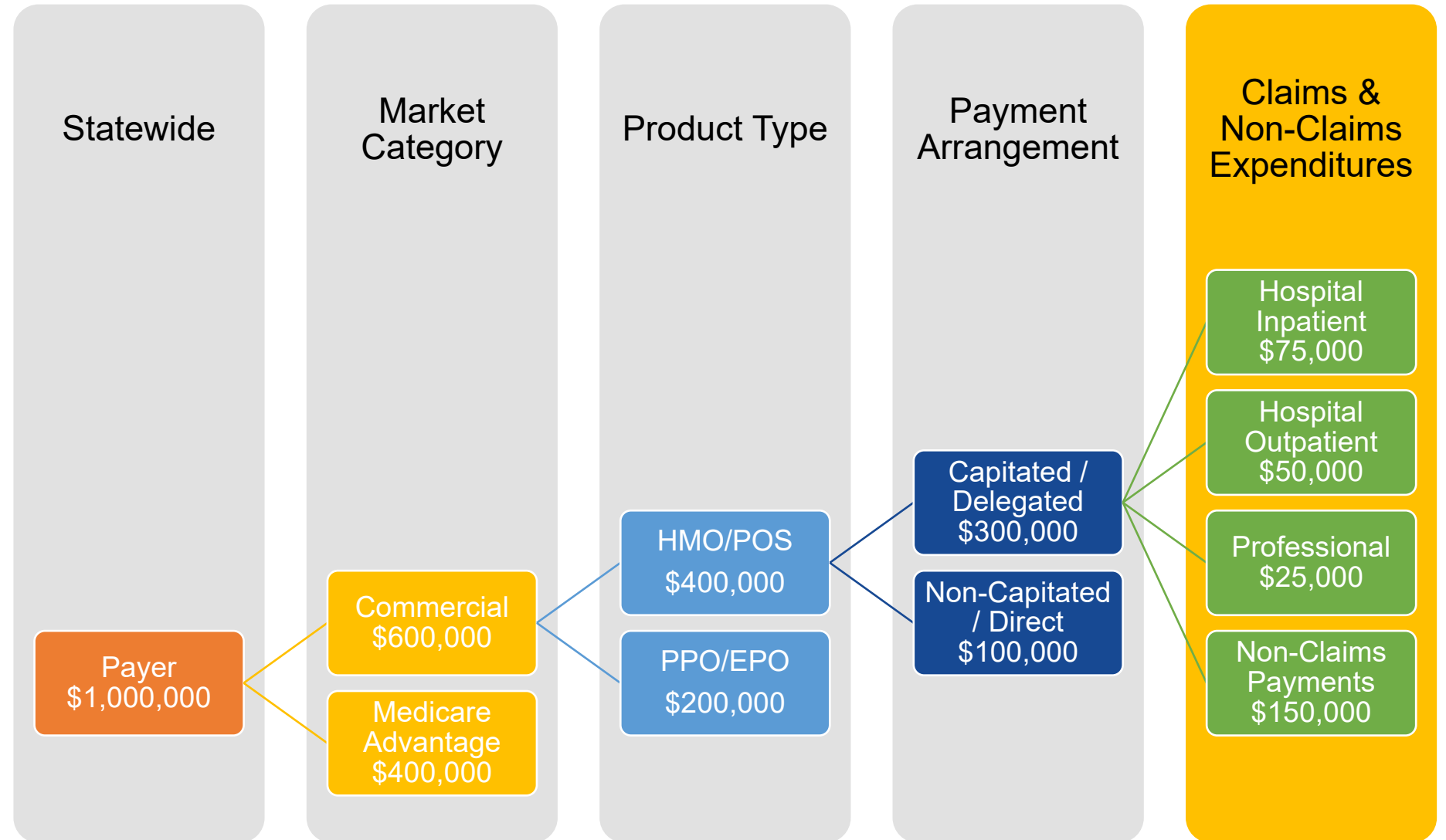
DSG File Overview and Member Attribution
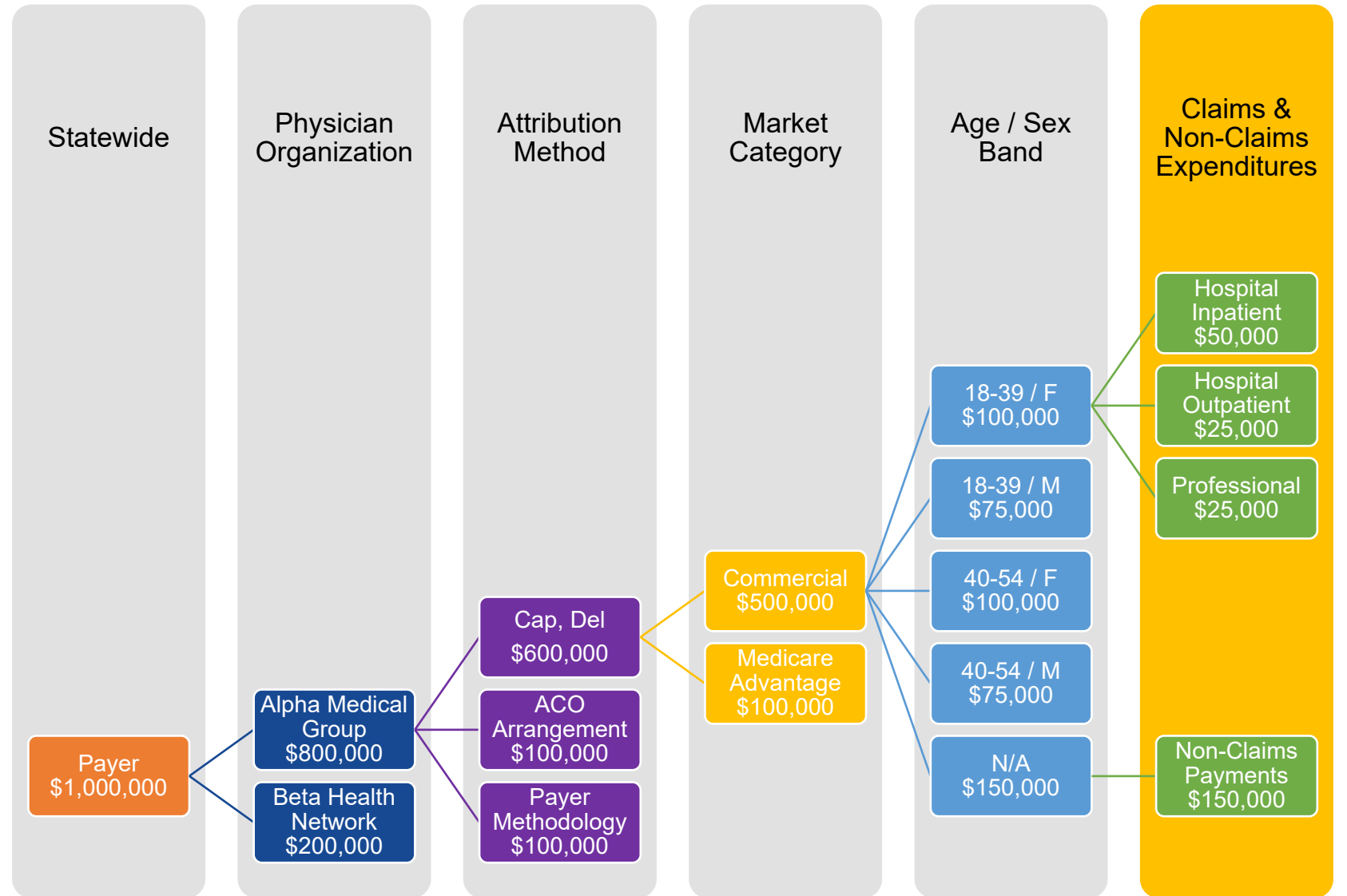
Data Submission Guide Files

Payers and FIDS will submit **five files** through the THCE Data Portal:

1. **Statewide TME -** Total medical expenditures by market category
2. **Attributed TME -** Total medical expenditures by market category, age band and sex, and attributed to physician organizations
3. **Regional TME -** Total medical expenditures by market category and region (17 of 19 Covered California rating regions plus 8 Los Angeles Service Planning Areas)
4. **Pharmacy Rebates -** Payments from drug manufacturers or pharmacy benefit managers to payers and FIDS, by market category
5. **Submission Questionnaire -** Attestations and confirmation that data submission instructions were followed
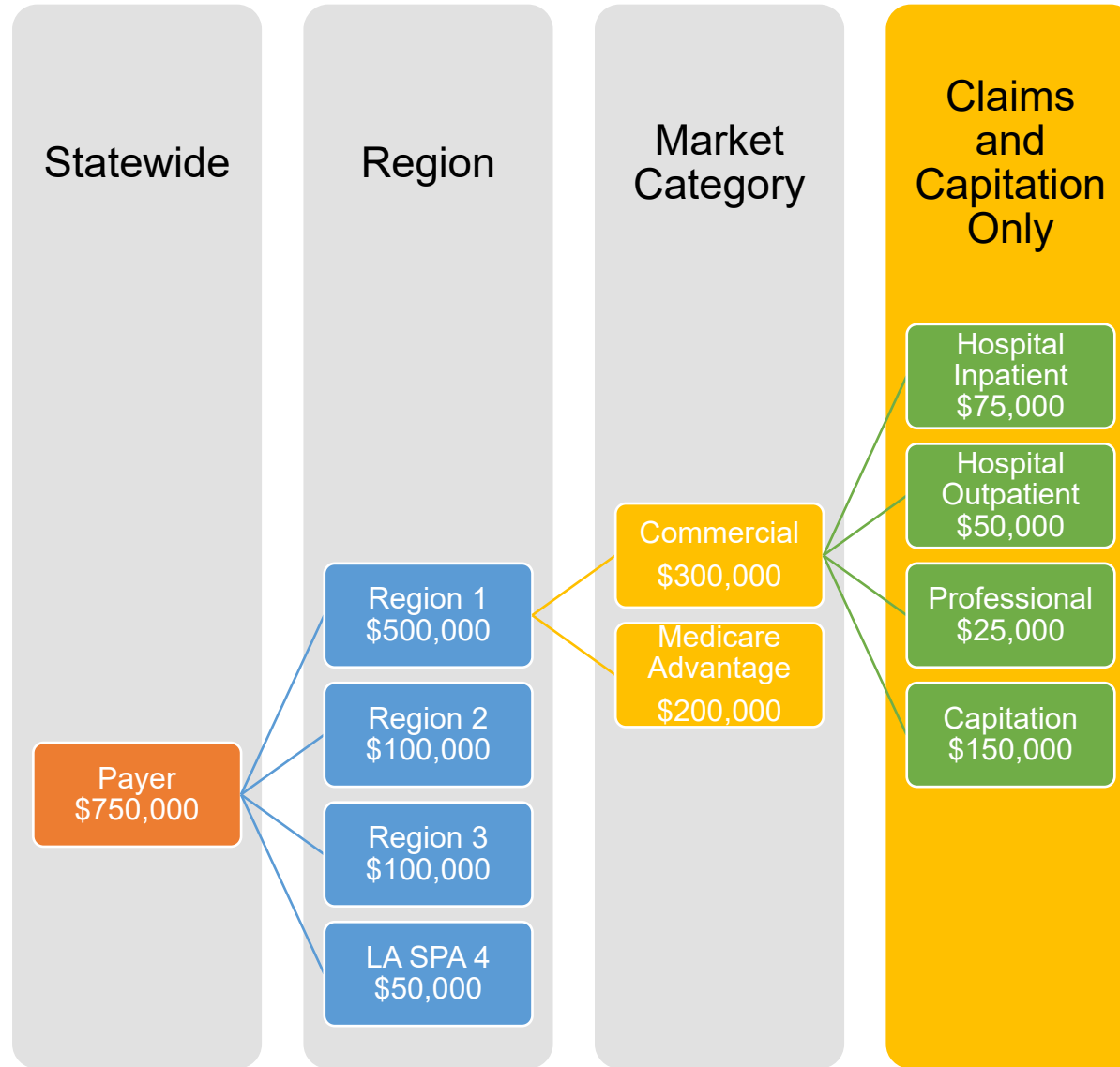
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Attributed TME File

Statewide	Physician Organization	Attribution Method	Market Category	Age / Sex Band	Claims & Non-Claims Expenditures
Payer $1,000,000	Alpha Medical Group $800,000	Cap, Del $600,000	Commercial $500,000	18-39 / F $100,000	Hospital Inpatient $50,000
	Beta Health Network $200,000	ACO Arrangement $100,000	Medicare Advantage $100,000	18-39 / M $75,000	Hospital Outpatient $25,000
		Payer Methodology $100,000		40-54 / F $100,000	Professional $25,000
				40-54 / M $75,000	
				N/A $150,000	Non-Claims Payments $150,000

Regional TME File

Statewide · Region · Market Category · Claims and Capitation Only

Attributing Total Medical Expenses

- The updated OHCA Attribution Addendum includes nearly **500** organizations.

- For the purposes of attribution, OHCA asks that submitters roll up <u>all medical expenses</u> of an individual to a <u>single attributed organization</u>, regardless of whether that person sought care at multiple organizations.

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Attributing Total Medical Expenses

Members shall be attributed in the following order:

1. Capitated, delegated arrangements with an organization on the Attribution Addendum

2. Accountable Care Organization (ACO) arrangements that include an organization on the Attribution Addendum

3. Capitated, delegated arrangements or ACO arrangements with an organization **not** on the Attribution Addendum

4. Payer-developed, rules-based method to any organization

5. Not attributable to any organization

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Attributing Total Medical Expenses

- If a member cannot be attributed to an organization found on the Attribution Addendum, use the following Organization Codes:

  o For **each** organization to which you can attribute **1,000+ lives**, use code **7777** and include the organization name in each row.

  o For organizations to which you can attribute **less than 1,000 lives**, report TME for **all** members attributed to **all** organizations in aggregate using code **8888**; no need to provide organization names.

  o If you are not able to attribute the member to **any** organization, report TME for **all** members in aggregate using code **9999**.

  o The Attributed TME file may contain multiple **7777** rows but should only have one **8888** and one **9999** row per market category.

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Data Validations

Data Validations

- Data submitted must comply with specifications outlined in the THCE DSG

- Documentation will also be provided to submitters, detailing data quality checks performed on submitted data

ONPOINT Health Data | Validations Document

VALIDATIONS

This document outlines the validations Onpoint uses to assess the initial quality and completeness of each Office of Health Care Affordability (OHCA) Total Health Care Expenditures (THCE) data submission. Submitters may apply these validations to their data in advance of file submission to verify that it meets OHCA's technical specifications and standards for quality and completeness.

General File Formatting Checks

- The submission must have a minimum of 5 files, with a valid code reported in each file's header and trailer (HD003, TR003) to identify each distinct file type

- Header and trailer present on each file and formatted as described in the Total Health Care Expenditures (THCE) Data Submission Guide (DSG)

- Data Submitter Code reported in each file's header (HD002), trailer (TR002), and main file aligns with the submitter code assigned during registration

- Record Count reported in each file's trailer (TR005) aligns with the total number of records

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Introducing CDM

Using Onpoint CDM

- Submit data
- Review quality and completeness
- Request variances
- Keep record of submission schedule
- Update your contacts
- Get 24x7 support and documentation
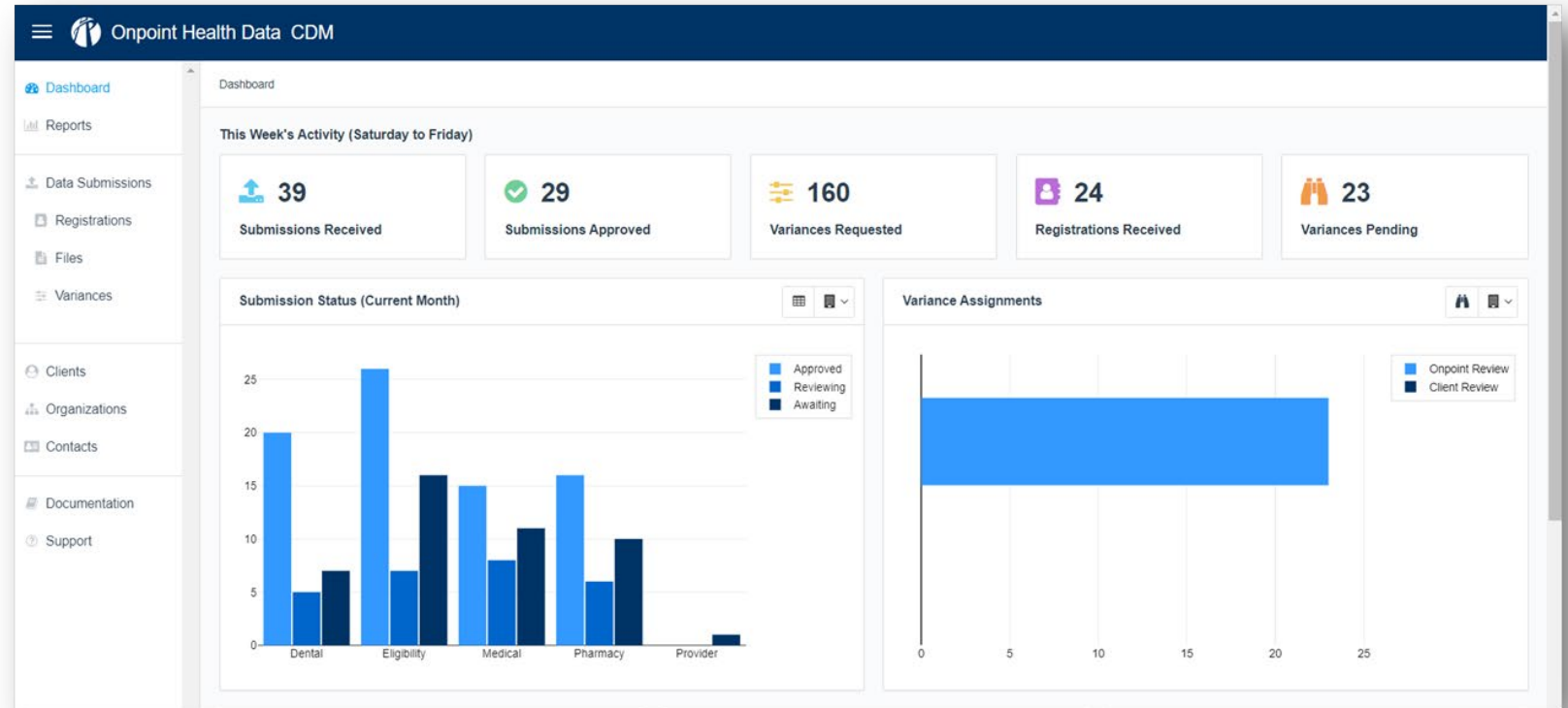
Prerequisites for Submitting Files

- Completed and approved submitter registration(s)
- Submitter code(s) received and incorporated into submissions
- Successful sign-in to Onpoint CDM
- Public PGP key sent to Onpoint for data encryption
- If submitter is sending data via SFTP…
  - Public SSH key sent to Onpoint for SFTP connectivity
  - Confirmation from Onpoint of SFTP account creation

Submitting Test Files

- Test files can be accepted as soon as PGP encryption is established
- Test files are encouraged to include real, complete production data
  - Variances can only be applied to real, complete production data (not test environment or dummy data)
  - Submitters will gain full understanding of how their dataset performs against CDM's automated data quality validations if real, complete production data is used during testing
- To submit a test file...
  - Populate a 'T' in the "Test File Flag" (HD006) in each file's header
  - If transferring data via SFTP: transfer files to your SFTP account's "TEST" directory

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Submitting Data Quality Variances

Element Description		Record Counts				Thresholds				Variance Information		
Code	Name	Total	Valid	Invalid	Null	Expected	Last Month Adjusted	Adjusted	Achieved	Status	Request Variance	Request Status
SWT014	Capitation and Full Risk Payments	33	25	0	8	100.00%	N/A		75.76%	● FAIL	Request Variance	N/A

Variance Request Form

Please complete the form below to define your variance request. If you have any questions, please contact the Onpoint Administrator.

No prior variance found for this validation.

* Adjusted Lower Threshold %	* Adjusted Upper Threshold %	* Period Begin	* Period End
75.51	100.00	01/01/2021	12/31/2021
Lower thresholds cannot be adjusted to be greater than the expected threshold.	Upper thresholds cannot be adjusted for this validation.	Start dates will default to the first day of the selected month.	End date must not be later than the end of the reporting year.

* Comments

Add your comment here...

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Onpoint CDM Demo

Submitter Support

Reaching OHCA and Onpoint for Support

- Our team will…
  - Schedule one-on-one meetings with any data submitter that has additional questions (submit questions in advance)
  - Explore specifics and nuances directly related to you and your data systems
  - Help identify any limitations and proactively address any concerns
  - Provide documentation for THCE data submission available 24x7 in CDM

- For OHCA THCE program questions: ohca@hcai.ca.gov

- For technical assistance or questions related to data specifications, mapping, or submission results: ohca-support@onpointhealthdata.org

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Submitter Roundtable

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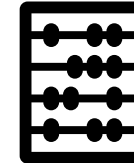# Next Steps

Next Steps for Data Submission

Complete

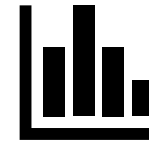Submitters complete registration form in CDM

May – June 2024

Work with Onpoint to establish PGP encryption and SFTP connectivity; submit optional test files

July – August 2024

Submit 2022 and 2023 TME data before September 1st

November 2024

Individual payer previews

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Next Meeting

- Next Meeting – Wednesday July 17th
- Topics to be determined
- Submit questions to OHCA@hcai.ca.gov

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Questions?