

How to Read Your Ohio CPC Attribution File

August, 2017









Ohio

Governor's Office of Health Transformation

Overview and contact information

This guide serves as an informational companion for reading and interpreting the Attribution and Payment files shared with Ohio CPC practices on a quarterly basis.

This document is intended for users of the reports, as well as those interested in the technical details of the information contained within the reports.

Further information is available at: http://www.medicaid.ohio.gov/

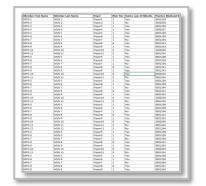
For questions and feedback, please contact the Medicaid provider hotline at: (800) 686-1516

Overview of quarterly Ohio CPC Reports

Focus of this guide

Attribution and payment file

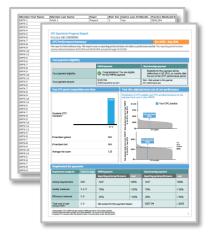
Contains attributed members and associated PMPM payments for each quarter



1 quarterly (.csv) file

Ohio CPC Practice Reports

Contains practice-level summary and a member-level detail of Ohio CPC performance over a rolling 12-month period



1 quarterly (PDF) file 1 quarterly (.csv) file

Ohio CPC Referral Reports

Contains practice-level summary and member-level detail of COPD, perinatal, and asthma episodes over a rolling 12-month period for your CPC attributed members



1 quarterly (PDF) file 1 quarterly (.csv) file

How to Access your Ohio CPC Reports on the MITS Portal

All CPC Reports are located in the MITS Provider Portal under the Reports Section

- Your CPC Practice's MITS Portal Administrator can access all of the reports shared as part of the CPC program
- Your MITS Portal Administrator can also assign a designated Agent the new role of Reports, allowing any Agent assigned the Reports Role to also access your CPC Reports

For Assistance accessing your reports, identifying your MITS Portal Administrator, or with Agent setup:

- Call Medicaid Providers Services @ 1-800-686-1516 and speak with a representative
- Visit the Ohio Department of Medicaid website Provider tab, and click on the blue box in the right corner, "Access the MITS Portal"



http://medicaid.ohio.gov/PROVIDERS.aspx

Ohio CPC Attribution and Payment File

Details on your Attribution and Payment File

The Attribution and Payment file is intended to inform you of the members attributed to your CPC practice for the upcoming quarter. This file also contains the quarterly PMPM payment, as well as the risk tier used to determine the PMPM payment for the member. In addition, this report contains member-level demographic information, and the member's attributed practice and PCP. Finally, there are several clinical data flags used to indicate whether the member had one or more chronic conditions over the past 12-months. These data may be used to help segment your CPC practice's patient panel at the beginning of each guarter.

Please see the appendix of this document for a detailed data dictionary.

Attribution and payment file									
Member Medicaid ID	Member First Name	Member Last Name	Payer	Risk Tier	Claims in Last 24 Months Flag	Provider Billing Medicaid ID	Provider Billing NPI	Rendering Provider Medicaid ID	Rendering Provider Name
0168604	Jeanne	Ito	Payer 1	3	No	2550499	2725494085	7220823	Rigg, Brook
1748633	Ethelyn	Oscar	Payer 2	7	No	2550499	2725494085	7220823	Rigg, Brook
0186647	Marilu	Duggins	Payer 3	9	No	2550499	2725494085	7220823	Rigg. Brook
1902326	Vi	Jelks	Payer 4	3	Yes	2550499	2725494085	7220823	Rigg. Brook
2849894	Macie	Felter	Payer 5	6	No	1456784	2295464328	5634525	Gines, Edison
0843986	Hettie	Keenum	FFS	2	Yes	1456784	2295464328	5634525	Gines, Edison
0552690	Patrina	Richardson	Payer 2	4	No	1456784	2295464328	5634525	Gines, Edison
0870496	Terry	Carbo	Payer 3	2	Yes	0449732	1199422873	4859433	Lauzon, Jude
1871369	Cyndi	Mcgahee	Payer 2	1	No	0449732	1199422873	4859433	Lauzon, Jude
0077342	Ji	Board	Payer 1	8	No	0449732	1199422873	4859433	Lauzon, Jude
0347656	Ava	Hoda	Payer 5	6	No	1104738	1136329535	3448530	Hartzog, Linette
1739401	Quinton	Lampman	Payer 3	5	Yes	1104738	1136329535	3448530	Hartzog, Linette
1908518	Whitney	Duffey	FFS	6	No	1104738	1136329535	3448530	Hartzog, Linette
0123253	Pamelia	Brabham	Payer 4	7	No	0841433	1136329535	5363525	Gorney, Nona
1585612	Devorah	Maguire	Payer 4	3	Yes	0841433	1136329535	5363525	Gorney, Nona
0340346	Fabian	Goudy	Payer 1	6	Yes	0731807	1048791175	6894332	Dunkley, Thea
2795311	Oliva	Cirillo	Payer 2	6	Yes	0731807	1048791175	6894332	Dunkley, Thea
1948595	Ted	Strasburg	Payer 3	2	Yes	0731807	1048791175	6894332	Dunkley, Thea
2404259	Mafalda	Welsch	Payer 2	2	No	1667100	1048791175	6894332	Dunkley, Thea
0418964	Cindi	Bazan	Payer 5	5	No	1667100	1048791175	6894332	Dunkley, Thea



Ohio CPC Attribution and Payment File: Data dictionary (1/2)

Field name	Description	Format	Values
Member Medicaid ID	12-digit Medicaid identification number of the	Number	00000000001
	attributed member		999999999999
Member First Name	First name of the attributed member	Text	n/a
Member Last Name	Last name of the attributed member	Text	n/a
Payer	FFS or name of one of the MCOs that created attribution for the member	Text	n/a
Risk Tier	Tiers 1-9, based on the first digit of the 44 risk groups generated by CRG risk adjustment tool	Number	1-9
Claims in Last 24 Months Flag ¹	Whether the attributed member had any claims associated with the attributed practice in the past 24 months	Text	Yes/No
Provider Billing Medicaid ID	7-digit Medicaid identification number of the practice attributed for the member	Number	0000001- 9999999
Provider Billing NPI	10-digit national identification number of the practice attributed for the member	Number	000000001- 9999999999
Rendering Provider Medicaid ID	7-digit Medicaid identification number of the rendering provider attributed for the member	Number	0000001- 9999999
Rendering Provider Name ²	Name of the rendering provider attributed for the member	Text	n/a
Rendering Provider NPI ²	10-digit national identification number of the rendering provider attributed for the member	Number	000000001- 9999999999
Member Date of Birth	The birth date of the attributed member	Date	mm/dd/yyyy
Member Gender	The gender identified by the attributed member	Text	M/F
Member Phone Number	Contact information of the attributed member – phone number	Number	10-digit phone number
Member Address 1	Residential address of the attributed member	Text	n/a

¹ This flag is set as "Yes" if the attributed member has any claims in which the attributed practice is the same as the billing provider on the claim in the 24-month claim history prior to attribution date

² Rendering provider Medicaid ID, name, and NPI are all set as "N/A" if rendering provider Medicaid ID was not available in FFS/MCP attribution files or if rendering provider Medicaid ID is the same as provider billing Medicaid ID



Ohio CPC Attribution and Payment File: Data dictionary (2/2)

Field name Member Address 2	Description Residential address of the attributed member (continued)	Format Text	Values n/a
Member City	Residential city of the attributed member	Text	n/a
Member County	Residential county of the attributed member	Text	n/a
Member State	Residential state of the attributed member	Text	n/a
Member Zip Code	Zip code of the residential address of the attributed member	Number	5-digit zip code
Asthma Flag	Whether the member had Asthma condition based on claims in the past 12 months	Text	Yes/No
Diabetes Flag	Whether the member had Diabetes condition based on claims in the past 12 months	Text	Yes/No
CHF Flag	Whether the member Congestive Heart Failure condition based on claims in the past 12 months	Text	Yes/No
Depression Flag	Whether the member had Depression condition based on claims in the past 12 months	Text	Yes/No
Stroke Flag	Whether the member had Stroke condition based on claims in the past 12 months	Text	Yes/No
SPMI Flag ¹	Whether the member had Severe and Persistent Mental Illness condition based on claims in the past 12 months	Text	Yes/No
Quarterly PMPM Amount	Quarterly PMPM amount for the attributed member based on assigned risk tier	Number	> 0

¹ SPMI flag was not coded as of October 2016, and therefore is set as "N/A" in the October attribution file. This value will be updated starting from January 2017 attribution.