

DATA BOOK INTRODUCTION

Overview

The Data Book Files are text files which contain multiple contract years of utilization and cost data, or member data, displayed on an annual basis. The Data Book Files data will **not** have completion factors added and will be based on fully adjudicated and paid encounter data as well as capitation paid member information.

An encounter is a record of medical services provided by an AHCCCS Contractor to an AHCCCS member. AHCCCS conducts encounter validation studies on an annual basis. Additionally, AHCCCS' actuaries perform a variety of analyses to gauge the completeness of encounter data and to ensure the appropriateness of payment data. Because of the many review processes that AHCCCS performs to ensure timeliness, accuracy and completeness of its encounter data, encounter data is the primary source used for setting capitation rates. However, AHCCCS cannot guarantee that the encounter data is 100% accurate and complete; the Offeror should use this data with care and consider other factors that will impact capitation rates.

The Data Book Files were run after the first July 2012 encounter cycle. Utilization and cost data included in the Data Book Files are based on encounter data submitted by AHCCCS Contractors, as follows:

- Acute Care utilization and cost data: based on encounter data submitted by AHCCCS Acute Care Contractors
- Children's Rehabilitative Services (CRS) utilization and cost data: based on encounter data submitted by the CRS Contractor
- Behavioral Health (BH) utilization and cost data: based on encounter data submitted by Regional Behavioral Health Authority (RBHA) Contractors contracted with ADHS

The Data Book Files contain service matrix category fields. The Bidders' Library, Data Supplement, Section D contains the Acute Care/CRS Service Matrix and the Behavioral Health Services Service Matrix, which provide the criteria used to group the encounters into the service matrix categories, as well as what was used in the service utilization count field. The Acute Care and CRS Service Matrix is a single matrix for both programs. The Behavioral Health Services Service Matrix should only be used by those Offerors bidding on the CRS Program.

The costs included in the Data Book Files are actual costs reported by the Contractor unless the Contractor has a sub-capitated or block purchasing arrangement. This type of arrangement would be noted by the sub-capitation code on the encounter. If there is a sub-capitated arrangement in the Acute Care or CRS programs and the "Health Plan Paid Amount" is zero, the lesser of the "AHCCCS Allowed Amount" or "Billed Amount" is used in place of the zero. For BH encounters, the "Health Plan Paid Amount" is used if available. If there is no "Health Plan Paid Amount" then the "Health Plan Approved Amount" is used. If neither field is available, the lesser of "AHCCCS Allowed" or "Billed Amount" is used to populate the cost field.

Acute Care Bid Data Book Information

The Acute Care utilization and cost Data Book files contain prospective information by contract year, by county, by Geographic Service Area (GSA), by Age/Gender, by Service Matrix Categories and by risk group (risk groups for which AHCCCS is setting rates are excluded). Individual Contractor information is not available. The Data Book Files pertaining to Acute Care member data contain prospective information across all the same factors as the utilization and cost Data Book Files, except for Service Matrix Categories.

The following counties are grouped into Geographic Service Areas (GSAs) for capitation rates and data presentation:

Geographic Service Area (GSA)	Service Area County Name
2	Yuma, La Paz
4	Mohave, Coconino, Apache, Navajo
6	Yavapai
8	Pinal, Gila
10	Pima, Santa Cruz
12	Maricopa
14	Graham, Greenlee, Cochise

In the Bidders’ Library, under the heading “Reference,” Offerors will find the Rate Codes to Risk Group Matrix that provides a summary of rate code groupings cross-walked to the risk groups contained in the Data Book Files. Members are assigned rate codes based on their type of eligibility. Rate codes that are paid the same capitation rate are grouped together into the risk groups listed below (see the Bidders’ Library, RFP, Section D–Program Requirements, Paragraph 2, *Eligibility Categories* for more information).

- ✓ TANF – Includes TANF(1931), KidsCare, Breast and Cervical Cancer Treatment Program, and SOBRA Pregnant Women. This TANF risk group is divided by age/gender risk factors as follows:
 - <1 Male (M)/Female(F)
 - 1-13 MF
 - 14-44 F
 - 14-44 M
 - 45-64 MF and 65+ MF
(AHCCCS combines the 45-64 and 65+ populations for capitation purposes)
- ✓ SSI – This risk group is divided by a risk factor indicating Medicare coverage: with or without Medicare
- ✓ AHCCCS Care – This risk group is also known as Childless Adults; formerly known as the non-MED population
- ✓ Delivery Supplement Group – This risk group contains those members for whom Contractors received delivery supplemental payments

CRS Bid Data Book Information

The CRS utilization and cost Data Book Files contain information by contract year and Service Matrix Categories. The CRS member Data Book File contains information by contract year.

Timeline

AHCCCS intends to release the Data Book Files and Data Book Layout/File Description information in November. AHCCCS also anticipates providing Supplemental Data Book Reports, as well as the Rate Setting Document which will describe the basic rate setting assumptions used by AHCCCS’ actuaries. These items will also be posted at a later date.