Indiana All Payer Claims Database (Indiana APCD)

What is in the IN APCD?

Introduction to the Indiana APCD

The Indiana All Payer Claims Database (IN APCD) is a large-scale database that collects and aggregates significant amounts of data, including eligibility data, medical claims, pharmacy prescription drug claims, non-fee-for-service information, and health care provider data.

The purpose of the Indiana APCD is to:

- Identify healthcare needs and inform healthcare policy
- Compare costs between various treatment settings and approaches
- Provide information to consumers and purchasers
- Improve the quality and affordability of patient healthcare and healthcare coverage

Where Does the Data Come From?

- The IN APCD collects its data from over 30 registered health payers; primarily health insurers and pharmacy benefit managers.

- These entities are mandated by statute to submit eligibility, provider, medical & pharmacy claims data to the IN APCD and are defined by (IC 27-1-44.5-2)

What Years Does the Data Cover?

- As of 03/26/2024, data within the IN APCD encompasses paid claims with a paid date from between January 1st, 2020, through to February 29th, 2024.

- These dates represent historical catch-up data from January 2020, through July 2023, followed by monthly submissions from our submitters.

- Accessible data encompasses paid claims from January 1st 2020, through December 31st, 2023.

What's *NOT* Included in the IN APCD?

Military Claims:

- Military healthcare claims are typically handled through the VA, or TriCare. Indiana does not currently have an agreement with the Department of Defense to collect these claims.

Clinical Data (Chart Notes, Lab Results, Imaging Results):

- The IN APCD currently **only** collects claims data from Eligibility, Provider, Medical and Pharmacy claims. While we would be interested in integrating Clinical Data for comparative analysis, we do not have the capabilities currently.

Uninsured Persons / Cash Prices:

- Because of the nature of the IN APCD, the data we're receiving comes straight from the insurers. As a result, if there is not an accompanying insurance claim for a service rendered, we're unable to see those service details.

- **Other claim types not included:**
  - ✓ Premium Information
  - ✓ Capitation Arrangement Information
  - ✓ Incentive Payments
  - ✓ Workers Compensation
  - ✓ Supplemental Plans
  - ✓ Indemnity Benefits
  - ✓ Accident Only
  - ✓ Vision
  - ✓ Long Term Care
  - ✓ Disability Income Insurance

What Else is *NOT* Included...

Churches:

- Churches often employ a small number of individuals, and this low volume often falls into Centers for Medicare & Medicaid Services' (CMS) Cell Suppression Standards.

Dental:
- Dental claims are specifically listed as an exclusion within Indiana Statute for submitting claims to the IN APCD.

Claim Denials:
- While we do request that our submitters send us adjustments to claims, initially denied claims are generally not submitted to us.
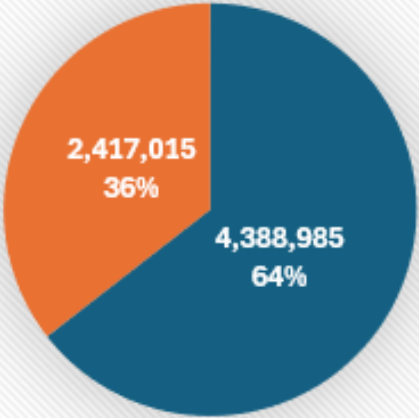
Overview of Data Elements

- Encrypted Member ID

- Type of Insurance Product (HMO, PPO, POS)

- Type of Contract

- Rendering Service Provider

- Plan Payments

- Service Dates

- Member Payments (Deductible, Copay)

- Diagnosis, Procedure, National Drug Codes

- Facility Type

- Member Demographics

- Provider Information
    - (NPI, Address, Medicaid ID #, Specialty)
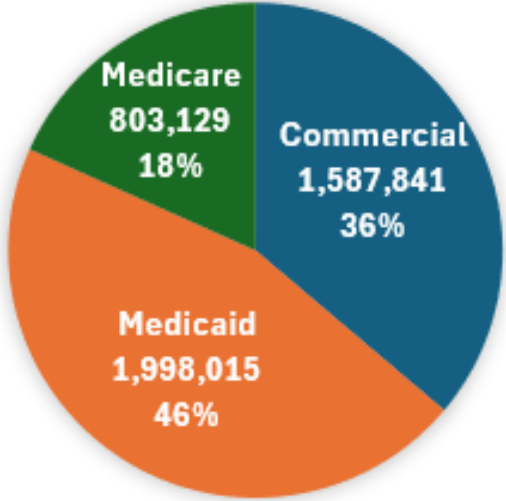
IN APCD Population Breakdown

Unique Members with at least 1 Medical Claim in IN-APCD

- 2,417,015 — 36%
- 4,388,985 — 64%

■ Unique Member Count ■ IN Population not identified

Total IN Population
(U.S. Census 2022): 6,806,000

INDIANA APCD MEMBERS BY PAYER TYPE

- Medicare 803,129 — 18%
- Commercial 1,587,841 — 36%
- Medicaid 1,998,015 — 46%

Dual Eligible Resident Population
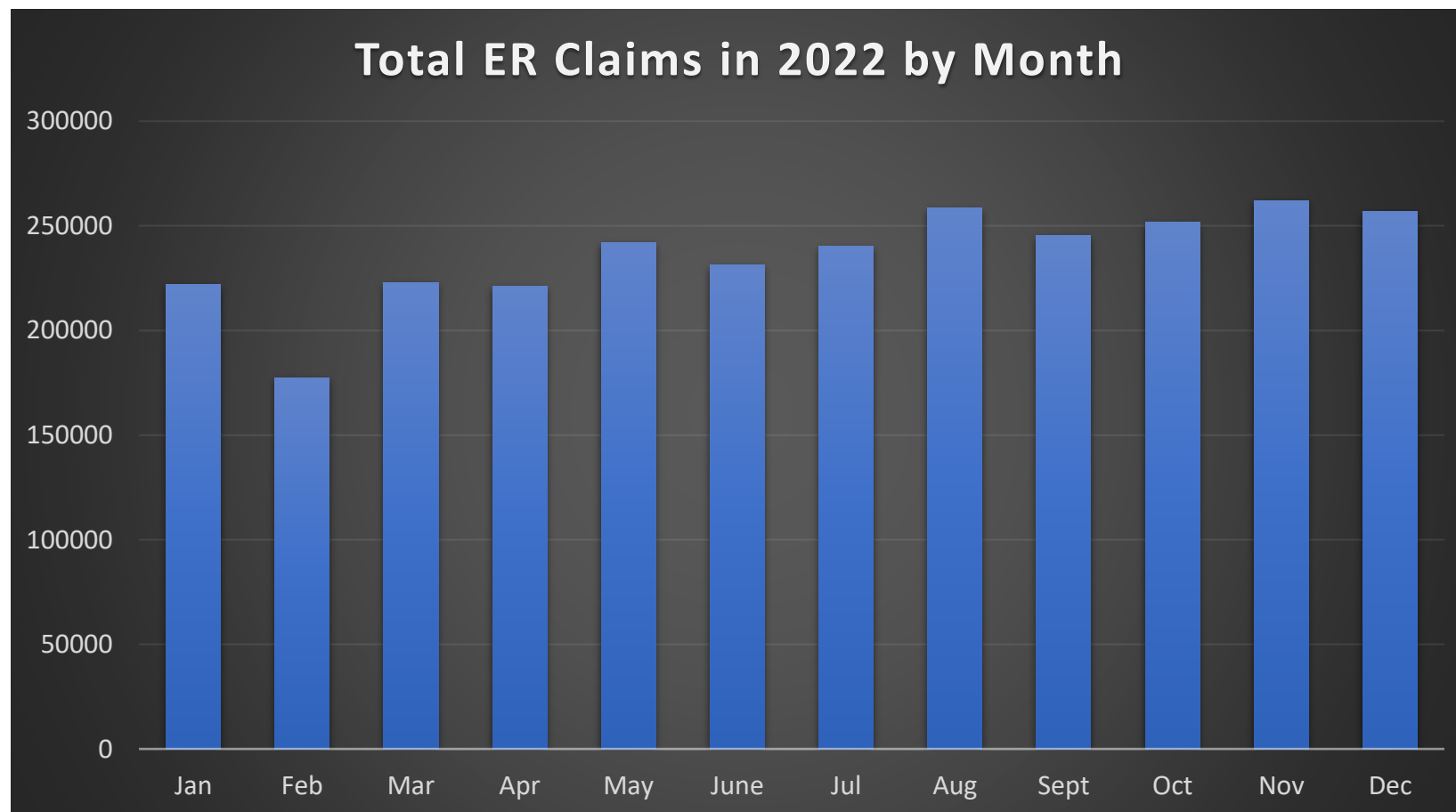*(Medicare + Medicaid): 522,486*

IN APCD Data by the Numbers

Methodology: All unique ER claims for CPT codes 99281 – 99285. Includes both facility & provider claims. Does not factor if a "visit" only has a professional claim & not an accompanying facility claim.

Total ER Claims in Indiana for Calendar Year 2022: 2,831,120

Total ER Claims in 2022 by Month

Snapshot

The IN APCD Snapshot highlights the data that is currently available within the database. This example highlights prescriptions.

- Displays the 25 most prescribed drugs in the state
- Amounts consumers and insurance pay overall
- Average total cost for each claim

APCD Snapshot - Top Drug Prescriptions

Rank Results by...	Filter by Drug Class	Filter by Drug Category	Filter by Plan Type	Filter by Brand/Generic	Filter by Reporting Year
Total Claim Count	(All)	(All)	(All)	(All)	(All)

Rank *	Drug Name	Drug Class	Total Claim Count	Total Paid Amount	Avg. Paid Amount per Claim
1	Atorvastatin Calcium	Cardiovascular agents	9,340,951	$108,803,338	$11.65
2	Amlodipine Besylate	Cardiovascular agents	6,258,344	$37,893,327	$6.05
3	Levothyroxine Sodium	Hormones and synthetic substances	5,985,919	$96,865,590	$16.18
4	Lisinopril	Cardiovascular agents	5,868,565	$37,314,825	$6.36
5	Gabapentin	Central nervous system agents	5,598,374	$90,552,090	$16.17
6	Hydrocodone Bitartrate-acetaminophen	Central nervous system agents	5,344,004	$80,736,848	$15.11
7	Metformin Hcl	Hormones and synthetic substances	4,933,754	$44,012,453	$8.92
8	Omeprazole	Gastrointestinal drugs	4,678,969	$60,343,335	$12.90
9	Metoprolol Succinate	Cardiovascular agents	3,847,908	$74,354,789	$19.32
10	Losartan Potassium	Cardiovascular agents	3,619,254	$40,635,223	$11.23
11	Sertraline Hcl	Central nervous system agents	3,503,022	$35,598,747	$10.16
12	Furosemide	Electrolytic, caloric, and water balance agents	3,402,301	$17,556,369	$5.16
13	Pantoprazole Sodium	Gastrointestinal drugs	3,279,081	$46,710,638	$14.25
14	Trazodone Hydrochloride	Central nervous system agents	2,901,369	$30,518,689	$10.52
15	Hydrochlorothiazide	Electrolytic, caloric, and water balance agents	2,873,909	$13,183,801	$4.59
16	Escitalopram	Central nervous system agents	2,712,626	$29,777,409	$10.98
17	Albuterol Sulfate Hfa	Autonomic drugs	2,678,165	$101,849,752	$38.03
18	Prednisone	Hormones and synthetic substances	2,603,156	$12,961,070	$4.98
19	Metoprolol Tartrate	Cardiovascular agents	2,484,893	$17,971,577	$7.23
20	Montelukast Sodium	Respiratory agents	2,394,411	$31,825,283	$13.29
21	Carvedilol	Cardiovascular agents	2,297,272	$23,409,472	$10.19
22	Amoxicillin	Anti-infective agents	2,289,978	$12,480,986	$5.45
23	Duloxetine Hcl	Central nervous system agents	2,279,028	$61,480,037	$26.98
24	Eliquis	Blood formation/coagulation agents	2,250,963	$1,395,011,819	$619.74
25	Tamsulosin Hcl	Autonomic drugs	2,237,666	$36,910,053	$16.49

* Total Drugs = 19,170

Data Overview	Data Availability	Medical Procedures	Drug Prescriptions	Additional Information

Dashboard Overview

The Indiana APCD Consumer-Facing Website contains two unique dashboards which highlight some of the data within our database. The Indiana Healthcare Price & Quality Comparison Tool groups common medical visits & procedures with two interactive views: Procedures & Imaging, and Office Visits & Labs.
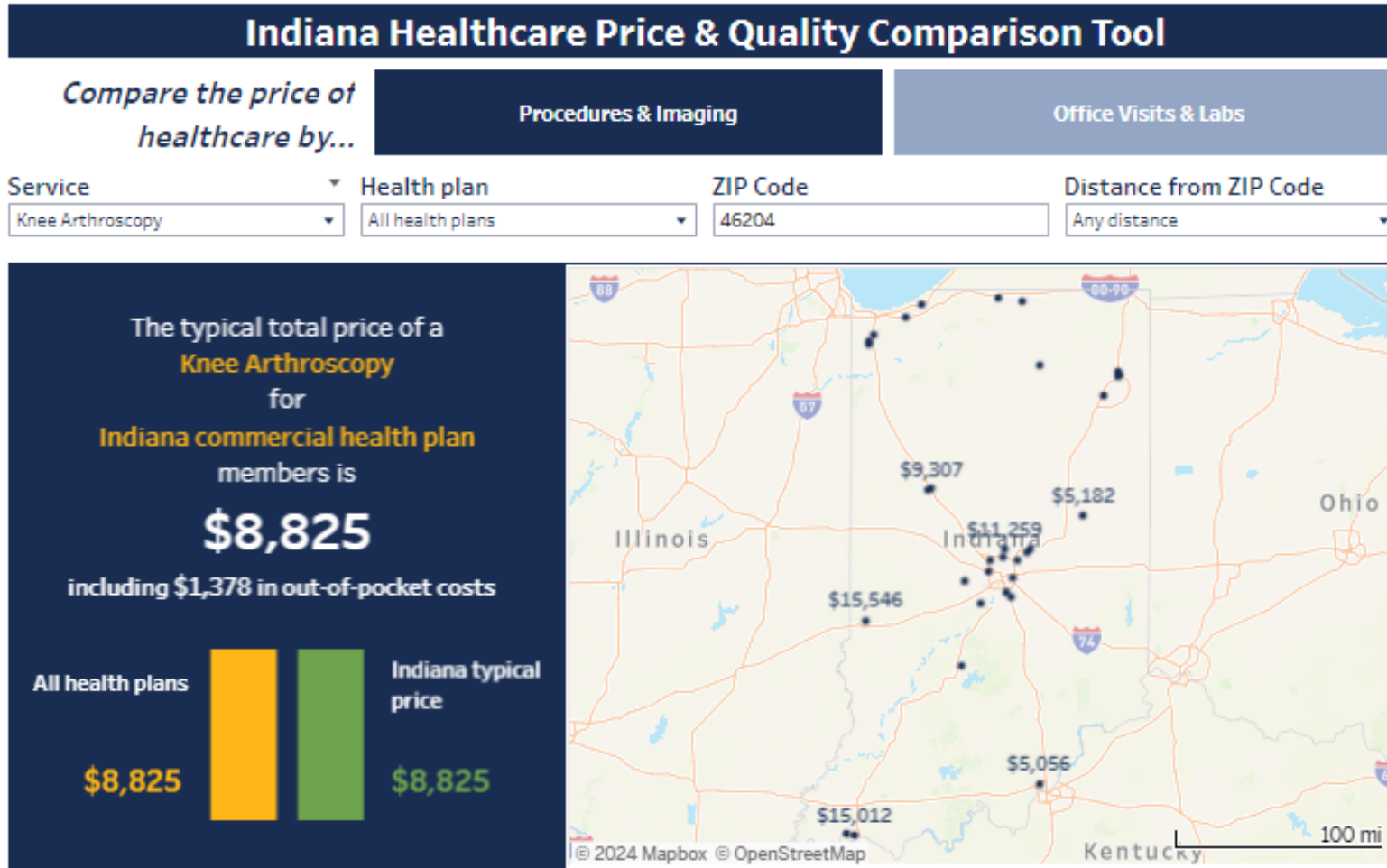
Procedures & Imaging Dashboard

- Displays 50+ of the most common medical & imaging procedures.

- Displays the typical total price for a procedure at a given facility.

- Displays facilities on an interactive map, with accuracy down to the street level.

- Showcases number of visits at each facility (Volume).

- Displays the typical cost of a procedure and the price range at a facility for a given health plan.

Procedures & Imaging

Indiana Healthcare Price & Quality Comparison Tool

Compare the price of healthcare by...

| Procedures & Imaging | Office Visits & Labs |

Service: Knee Arthroscopy
Health plan: All health plans
ZIP Code: 46204
Distance from ZIP Code: Any distance

The typical total price of a **Knee Arthroscopy** for **Indiana commercial health plan members** is **$8,825** including $1,378 in out-of-pocket costs

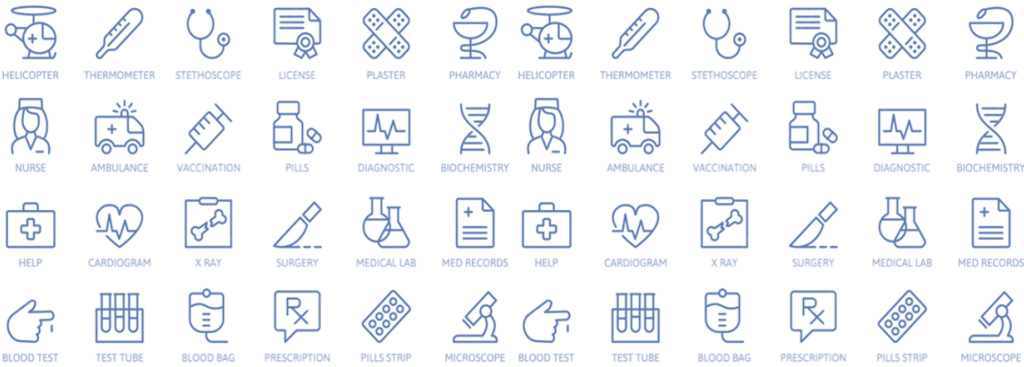All health plans: $8,825
Indiana typical price: $8,825

The Procedures & Imaging dashboard displays the typical (average) total cost and out-of-pocket cost for selected procedures within Indiana.

- Users can immediately see various facility locations throughout the state.
- Users can click on individual markers to highlight specific facilities.
- Users can zoom into the map down to the street level thanks to precise geolocation.
- _Not shown:_ _Users can also see CMS quality ratings (where available) for each facility._

Office Visits & Labs Dashboard

- Shows some of the most common office visits & diagnostic labs by county

- Shows the typical out of pocket cost for a given service across the state and each county.

- Shows the typical price range for a visit for a given county

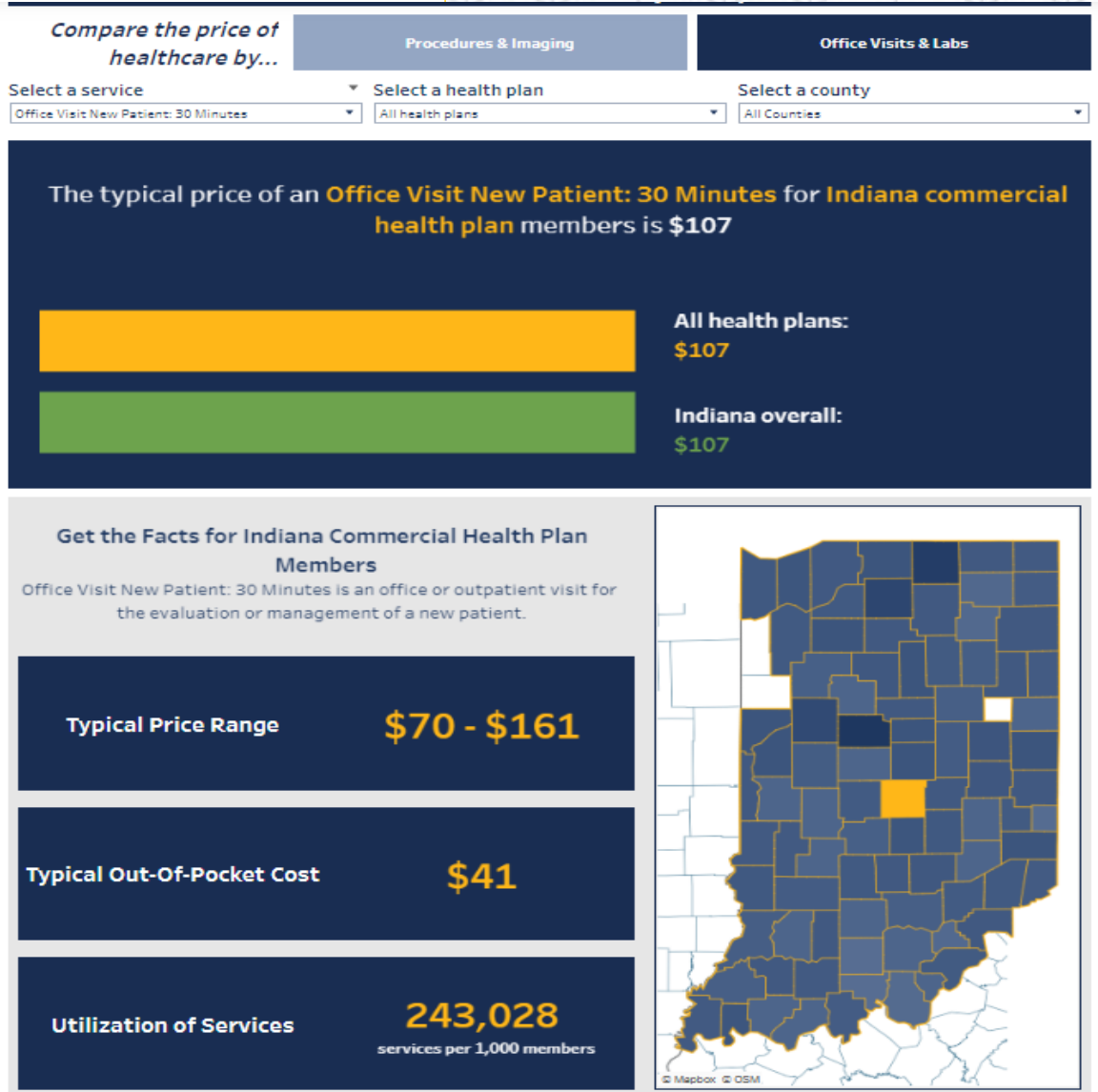- Shows how many visits are performed within a given county per year

Office Visits & Labs

The **Office Visits and Labs** dashboard highlights utilization & costs for professional visits. This dashboard is organized by county.

- Due to billing practices, office visits & lab services make it harder to identify the precise location where service is rendered
- *Place of service* on the claim line level is often listed as the providers billing office. To address this; data has been grouped by county.
- •While <u>cost</u> typically does not fluctuate by county, this dashboard highlights that <u>utilization</u> *does*.

Questions?

Indiana All Payer Claims Database
Indiana Department of Insurance
www.in.gov/idoi/apcd/
apcd@idoi.in.gov
317-232-3619

Indiana APCD Team

Jonathan Handsborough MBA, MBB-6σ
Executive Director

Diana Ou
Project Manager

Michele Miller
Outreach Liaison

Stacy French
Administrative Assistant

Suraksha Adhikari
Data Scientist

D. Alex Hoyte
Sr Data Analyst – Health

Laura Yahya
Sr Data Analyst - Intake