Data Submitters Group 1 and Group 2

Data submitters are organized into two groups corresponding to two cycles of initial data submissions.

Group 1 data submitters are:

- Commercial health insurers (account for ~95% of the commercial health insurance market)
- Medicaid managed care organization (MCO) insurers
- Medicare Advantage insurers
- Medicare Part D insurers providing prescription drug benefits for Medicare Advantage covered lives
- Health Care Authority PEBB and Medicaid fee-for-service covered lives

Group 2 data submitters will include:

- Stand-alone dental insurers
- Washington State Labor and Industries (workers’ compensation)
- Voluntary data submitters – self-funded and others
- Commercial insurers that were not included in Group 1

The Group 2 data submission timeline, which will be finalized in early 2017, likely will begin mid-2017.

Medicaid Managed Care Organizations (MCO) shall directly submit their data to the WA-APCD. The Health Care Authority shall submit the Medicaid fee for service program data.

Commercial health insurers shall include all of the following lines of business if it offers such coverage:

- Commercial group and individual health insurance, including Washington Health Benefits Exchange
- Dental
- Medicare Advantage
- Medicaid MCO

Commercial insurance includes all product types – indemnity, managed care, or other. Student health insurance coverage is included. Stand-alone vision plans are excluded.

If data submitter operates a line of business with de minimis covered lives the OFM shall consider a waiver request to exclude such line of business from the APCD data mandate.

Data submitters that provide health or dental claims administration services to the Health Care Authority, shall submit all of their Public Employees Benefits Board (PEBB) data without exception (e.g., regardless of the funding arrangement, line of business, number of eligible covered lives, or other parameters listed in this section).
If the insurance activities of a third party administrator (TPA), whether a unit of a health or dental parent insurer or an independent organization, are not licensed by the Office of the Insurance Commissioner and solely operating on behalf of self-funded purchasers, that TPA is a voluntary data submitter.

**Time Period for Historical Data**

The historical data submission period shall be January 1, 2013, through December 31, 2016, or through the end of the quarter immediately prior to the first regular quarterly submission in accordance with the data submission schedule. The latter phrase in the preceding sentence applies to data submitters that are not part of Group 1/whose initial data submissions occur after the Group 1 timeline.

Data submitted to the WA-APCD should be reported for paid dates beginning January 1, 2013. Data for services rendered (i.e., incurred dates) prior to January 1, 2013, should not be reported.

Once historical data has been submitted, quarterly ongoing submissions are due on the last day of the month following the close of calendar quarter (i.e., 4/30, 7/31, 10/31, and 1/31) on a paid-date basis.

**Self-Funded Health Benefits Coverage**

Organizations that sponsor only self-funded health benefits coverage are not WA-APCD mandated data submitters. Beginning in Cycle 2, organizations that sponsor self-funded benefits coverage may be WA-APCD voluntary data submitters.

**Covered Lives Eligibility**

Eligible covered lives are those individuals whose insurance policy is issued in the State of Washington; regardless of residency locale. Persons who are covered by policies issued in other states are excluded from the WA-APCD.

**Scope of Data**

Data submitters shall supply the following data types as applicable to the data submitter:

- Enrollment
- Medical claims
- Medical encounter records
- Prescription drug claims
- Dental claims

Provider file datasets are excluded; data submitters shall not submit such files.

See the Data Submission Guide (DSG) for details.
All claims data shall be included; no claim records may be suppressed as all services, diagnoses (e.g., mental health, HIV, etc.), and providers are included.

### Appendix  Group 1 Data Submitters*

<table>
<thead>
<tr>
<th>Aetna Health Plan Inc.</th>
<th>Health Alliance Northwest Health Plan</th>
<th>Providence Health Assurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aetna Life Insurance Company</td>
<td>Health Care Authority: Medicaid</td>
<td>Providence Health Plan</td>
</tr>
<tr>
<td>Amerigroup Washington, Inc.</td>
<td>Health Care Authority: PEBB</td>
<td>Regence Blue Shield of Oregon</td>
</tr>
<tr>
<td>Anthem</td>
<td>Health Net Life Insurance Company</td>
<td>Regence Blue Shield of Idaho</td>
</tr>
<tr>
<td>Asuris Northwest Health</td>
<td>Health Net of Oregon</td>
<td>Regence BlueShield</td>
</tr>
<tr>
<td>Bridgespan</td>
<td>Humana Health Plan, Inc.</td>
<td>SilverScript Insurance Company</td>
</tr>
<tr>
<td>Cigna Health &amp; Life Insurance Company</td>
<td>Humana Insurance Company</td>
<td>Soundpath Health</td>
</tr>
<tr>
<td>Community Health Plan of Washington</td>
<td>Kaiser Foundation Health Plan of the Northwest</td>
<td>Sterling Life Insurance Company</td>
</tr>
<tr>
<td>Connecticut General Life Insurance</td>
<td>LifeWise Health Plan of Washington</td>
<td>United Healthcare Community Plan</td>
</tr>
<tr>
<td>Coordinated Care Corporation</td>
<td>Moda Health Plan Inc</td>
<td>United Healthcare Insurance Company</td>
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<tr>
<td>Group Health Options, Inc.</td>
<td>Premera Blue Cross</td>
<td>Wellcare Prescription Insurance</td>
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</tbody>
</table>

*Final set of Group 1 data submitters and business lines to be determined during WA-APCD registration process*