Indiana All Payer Claims Database (IN APCD)

Contract Level, Plan Level, and Claim Line Level

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Healthcare Claim Levels

In healthcare claims, there are three key levels to understand:

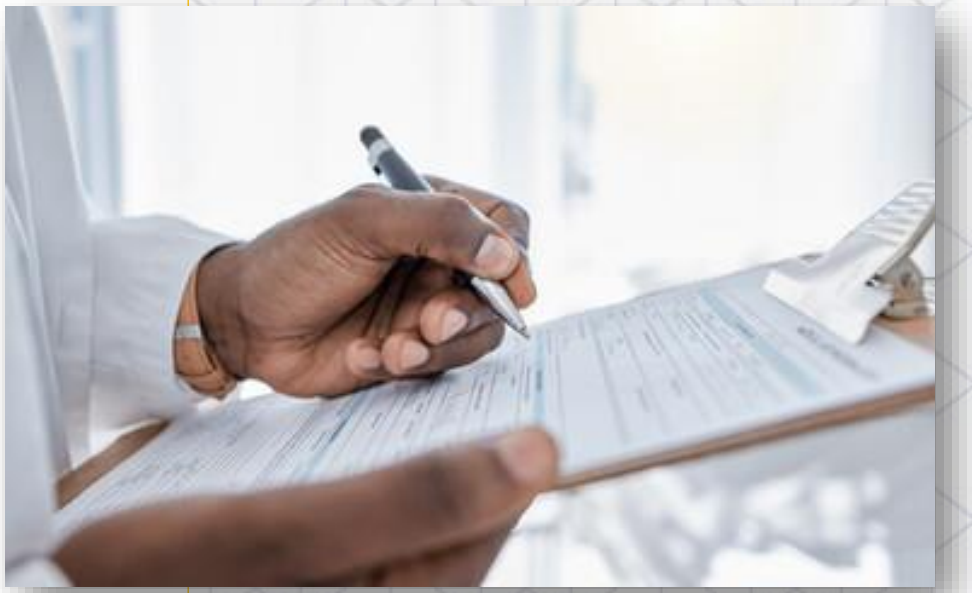
- Contract Level
- Plan Level
- Claim Line Level

Each of these levels deal with different aspects of how a service is covered and reimbursed.

Contract Level

- This is the broadest level and refers to the overall agreement between a payer (insurance company) and a policyholder (employer or individual).

- Contract details won't specify how much a specific service will cost but will establish the framework for determining that amount at the lower levels.



Contract Level Details...

- The contract outlines the general terms of the insurance plan, including:
  - **Covered services:** What types of medical care are eligible for reimbursement.
  - **Benefits:** The amount of money the payer will contribute towards covered services.
  - **Deductibles and copays:** The amount the policyholder pays before the plan kicks in and for each service.
  - **Exclusions:** Services not covered by the plan.
  - **Maximums:** Limits on how much the payer will pay per service or per year.

Plan Level

- This level focuses on the specific details of an insurance plan offered under the contract.

- The plan level gets more specific about what a particular service might cost, but the final determination is made at the claim line level.

Plan Level Details...

- It builds on the contract by outlining:
  - **Benefit Tiers:** Different levels of coverage within the plan (e.g., bronze, silver, gold) with varying cost-sharing requirements.
  - **Networks:** In-network vs. out-of-network providers and the associated reimbursement rates.
  - **Pre-authorization requirements:** Procedures that need approval before receiving care.
  - **Coinsurance:** The percentage of the cost the policyholder pays after the deductible is met.

Claim Line Level

- This is the most granular level, dealing with each individual service billed on a claim form.

- The claim line level takes the service details and plan rules to determine the final allowed amount and how much the payer and policyholder will each contribute.

Claim Line Level Details

- Here's where the specifics of a service are evaluated against the plan details to determine the final payment:
  - **Service code:** Identifies the specific medical service provided.
  - **Diagnosis code:** Explains the medical reason for the service.
  - **Provider charges:** The amount the provider bills for the service.
  - **Plan limitations:** Deductibles, copays, coinsurance are applied.
  - **Contract exclusions:** Services not covered are identified.

Analogy

Think of it like booking a vacation…

- **Contract:** This is your overall budget for the trip.
- **Plan:** This is your chosen travel package with specific inclusions (flights, hotels) and exclusions (meals, activities).
- **Claim Line Level:** This is each individual expense on your trip (flight ticket, hotel room) where you figure out the final cost based on your package details and any additional charges.

IN APCD Data

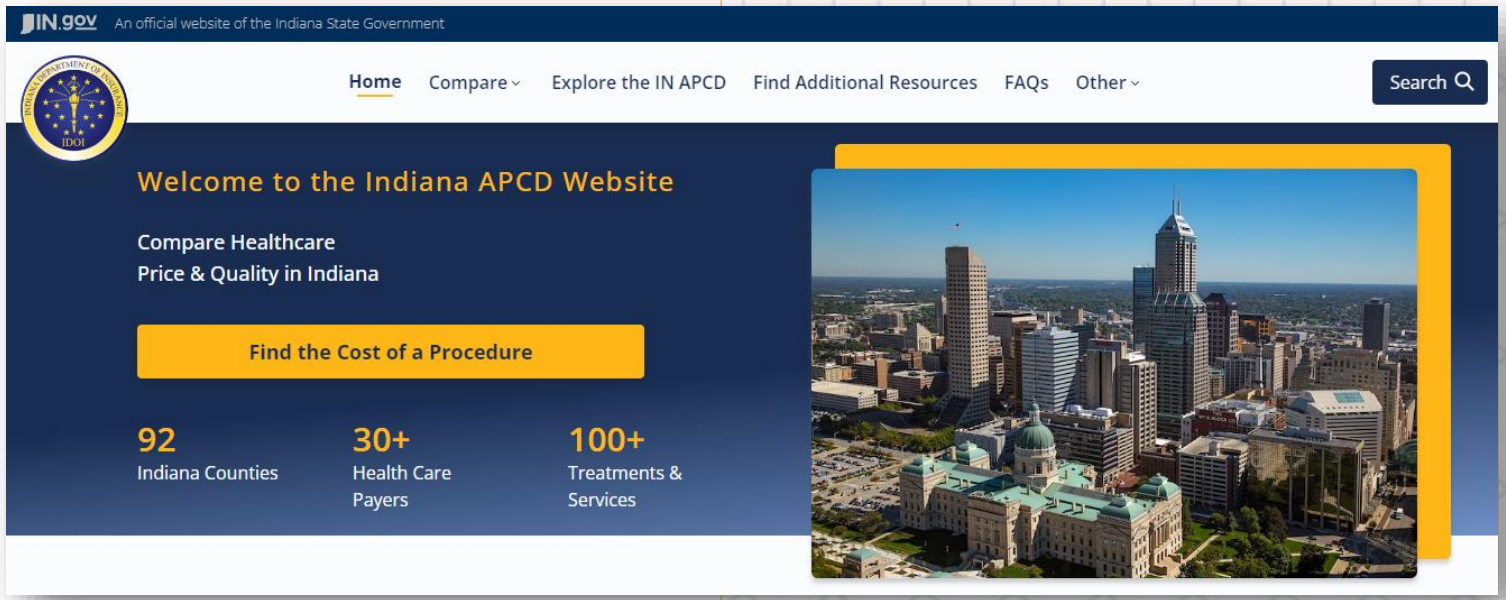
- By aggregating data from the claim line level, the IN-APCD can group similar episodes of care together by comparing similar service codes and dates of service.

- The data can be utilized for multiple purposes such as:
  - Determining network adequacy
  - Determining where there are geographic gaps in service coverage
  - Providing other useful insights for lawmakers, researchers, employers, hospital organizations, and more

IN APCD Data

- We can also gauge the total cost of care for a given procedure, compare it to statewide averages, or even compare different facilities.

- This data will be presented on IN APCD Consumer-Facing Website for users to compare cost of care and make informed decisions.



Consumer-Facing Website

- Using the travel analogy of claim line level, using the Indiana APCD Consumer Facing Website is like visiting a travel booking website. Consumers and Researches can select from a list of procedures (*vacation packages*) and locations (*destinations*).

- The price shown is for the entire episode of care: both for what is charged to your insurance plan, as well as the typical cost for most Hoosiers.

Questions?

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