

Opportunity to Utilize Medicare Parts A and B Dual Eligibles Claims Data

The Centers for Medicare and Medicaid Services (CMS) is offering State Medicaid Agencies the opportunity to modify their Coordination of Benefits Agreements (COBAs) so they may seek written permission from CMS to use the data for quality improvement activities and to re-release the data for treatment and other purposes. CMS retains the right to approve or deny any such requests.

Background on Coordination of Benefits Agreement (COBA)

CMS currently provides paid Medicare Parts A and B crossover claims to State Medicaid Agencies that have COBAs with CMS. Under the current COBAs, the claims data may only be used to determine payment liability and coordinate payment for dual eligibles.

As part of the contracting process, each State selects which claims they would like to receive (e.g., hospital inpatient, skilled nursing facility, home health, etc.) and how often they would like to receive them. States may elect to receive all Medicare A and B claims for their own beneficiaries, including claims for which they have no payment liability. Claims may be received as often as daily. Assuming that the State elects to receive claims daily, the length of time between when the physician submits a claim and when the State receives it is generally two weeks.

2008 Changes to the Coordination of Benefits Agreement (COBA)

States that sign revised COBAs may seek written permission from CMS to use the data as described below. Under the revised agreement:

- (1) States may seek written permission from CMS to use the COBA claims data for quality improvement activities that fall within paragraphs (1) and (2) of the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule definition of health care operations. (See 45 CFR Section 164.501.) States may seek permission to use the data in this manner by writing to MedicaidQuality@cms.hhs.gov. In reviewing requests, CMS will be interested in how the State plans to use the data, including whether or not the State plans to generate and report quality measures, how the State will share the results of its work and promising practices with CMS, and what privacy and security protocols will be required to protect the data.
- (2) States may seek written permission from CMS to re-release the COBA claims data. States may seek permission to use the data in this manner by writing to MedicaidQuality@cms.hhs.gov. In reviewing requests, CMS will be interested in who the intended recipients are, the purpose(s) for which the State plans to re-release the data, the mechanisms by which the States will re-release the data, and what privacy and security protocols will be required to protect the re-released data. We anticipate that some States may want to re-release the data to requesting physicians for treatment activities specified in the HIPAA definition of treatment. (See 45 CFR Section 164.501.)