



MiPCT All Payer Patient List

Information Guide

► DECEMBER 2016

Introduction

MDC creates an All Payer Patient List (APPL) for each PO on a monthly basis. The All Payer Patient List provides a current list of patients who are attributed to a practice and eligible for the MiPCT project. This document describes information about the source content and the document layout for the All Payer Patient List.

Where to Download the APPL Files

The All Payer Patient lists can be found on the *Download PO Reports* page of the MDC MiPCT Dashboard. The .zip file includes a list of all MiPCT patients for your PO, formatted lists for each Practice within your PO, and a dropped patient list.

Patient Count Differences Between the APPL and the Dashboard

Because the All Payer Patient List is released monthly, and the MDC MiPCT Dashboard is released every few months, the patient counts between the two may differ. You should use the patient lists on the MiPCT Dashboard when you are working with measures. You should use the All Payer Patient List for the most up-to-date list of participating patients.

Contents of the All Payer Patient Lists

The following table provides content details for each monthly APPL release. For each release, you can see which month's patient list was used for each payer (*Payer's Patient List Date* column) and the attribution assignment data (*Attribution Assignment as of* column).

If APPL attribution data was used to calculate the MiPCT population for a Dashboard release, the release number and release date is provided (*Attribution Used for Dashboard Release* column).

NOTE: Starting with Release 10.0, attribution aligns with the end of the measurement period instead of the most recent attribution files available at release time.

The files are listed in date order, with the most recent file at the top of the table.

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Each month's file name has the following format: <PO_name>_All_Payer_Patient_List_YYYY_MM.

APPL Release Month	Payer	Payer's Patient List Date	Attribution Assignment as of	Attribution used for Dashboard Release
Dec 2016	Medicare	Oct 2016	Sep 2016	n/a
	Medicaid	Dec 2016	Dec 2016	
	BCBSM	Dec 2016	Oct 2016	
	BCN	Dec 2016	Nov 2016	
	Priority Health	Dec 2016	Dec 2016	
Nov 2016	Medicare	Oct 2016	Sep 2016	n/a
	Medicaid	Nov 2016	Nov 2016	
	BCBSM	Nov 2016	Sep 2016	
	BCN	Nov 2016	Oct 2016	
	Priority Health	Nov 2016	Nov 2016	
Oct 2016	Medicare	Oct 2016	Sep 2016	n/a
	Medicaid	Oct 2016	Oct 2016	
	BCBSM	Oct 2016	Aug 2016	
	BCN	Oct 2016	Sep 2016	
	Priority Health	Oct 2016	Oct 2016	
Sep 2016	Medicare	Jul 2016	Jun 2016	n/a
	Medicaid	Sep 2016	Sep 2016	
	BCBSM	Sep 2016	Jul 2016	
	BCN	Sep 2016	Aug 2016	
	Priority Health	Sep 2016	Sep 2016	
Aug 2016	Medicare	Jul 2016	Jun 2016	n/a
	Medicaid	Aug 2016	Aug 2016	
	BCBSM	Aug 2016	Jun 2016	
	BCN	Aug 2016	Jul 2016	
	Priority Health	Aug 2016	Aug 2016	
Jul 2016	Medicare	Jul 2016	Jun 2016	n/a
	Medicaid	Jul 2016	Jul 2016	
	BCBSM	Jul 2016	May 2016	
	BCN	Jul 2016	Jun 2016	
	Priority Health	Jul 2016	Jul 2016	

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APPL Release Month	Payer	Payer's Patient List Date	Attribution Assignment as of	Attribution used for Dashboard Release
Jun 2016	Medicare	Apr 2016	Mar 2016	n/a
	Medicaid	Jun 2016	Jun 2016	
	BCBSM	Jun 2016	Apr 2016	
	BCN	Jun 2016	May 2016	
	Priority Health	Jun 2016	Jun 2016	
May 2016	Medicare	Apr 2016	Mar 2016	n/a
	Medicaid	May 2016	May 2016	
	BCBSM	May 2016	Mar 2016	
	BCN	May 2016	Apr 2016	
	Priority Health	May 2016	May 2016	
Apr 2016	Medicare	Apr 2016	Mar 2016	n/a
	Medicaid	Apr 2016	Apr 2016	
	BCBSM	Apr 2016	Feb 2016	
	BCN	Apr 2016	Mar 2016	
	Priority Health	Apr 2016	Apr 2016	
Mar 2016	Medicare	Jan 2016	Dec 2015	n/a
	Medicaid	Mar 2016	Mar 2016	
	BCBSM	Mar 2016	Jan 2016	
	BCN	Mar 2016	Feb 2016	
	Priority Health	Mar 2016	Mar 2016	
Feb 2016	Medicare	Jan 2016	Dec 2015	n/a
	Medicaid	Feb 2016	Feb 2016	
	BCBSM	Feb 2016	Dec 2015	
	BCN	Feb 2016	Jan 2016	
	Priority Health	Feb 2016	Feb 2016	
Jan 2016	Medicare	Jan 2016	Dec 2015	n/a
	Medicaid	Jan 2016	Jan 2016	
	BCBSM	Jan 2016	Nov 2015	
	BCN	Jan 2016	Dec 2015	
	Priority Health	Jan 2016	Jan 2016	
Dec 2015	Medicare	Oct 2015	Sep 2015	Release 18.0 (9-8-2016)
	Medicaid	Dec 2015	Dec 2015	
	BCBSM	Dec 2015	Oct 2015	
	BCN	Dec 2015	Nov 2015	
	Priority Health	Dec 2015	Dec 2015	

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APPL Release Month	Payer	Payer's Patient List Date	Attribution Assignment as of	Attribution used for Dashboard Release
Nov 2015	Medicare	Oct 2015	Sep 2015	n/a
	Medicaid	Nov 2015	Nov 2015	
	BCBSM	Nov 2015	Sep 2015	
	BCN	Nov 2015	Oct 2015	
	Priority Health	Nov 2015	Nov 2015	
Oct 2015	Medicare	Oct 2015	Sept 2015	n/a
	Medicaid	Oct 2015	Oct 2015	
	BCBSM	Oct 2015	Aug 2015	
	BCN	Oct 2015	Sep 2015	
	Priority Health	Aug 2015	Aug 2015	
Sep 2015	Medicare	Jul 2015	Jun 2015	Release 17.0 (7-27-2016)
	Medicaid	Sep 2015	Sep 2015	
	BCBSM	Sep 2015	Jul 2015	
	BCN	Sep 2015	Aug 2015	
	Priority Health	Aug 2015	Aug 2015	
Aug 2015	Medicare	Jul 2015	Jun 2015	n/a
	Medicaid	Aug 2015	Aug 2015	
	BCBSM	Aug 2015	Jun 2015	
	BCN	Aug 2015	Jul 2015	
	Priority Health	Aug 2015	Aug 2015	
Jul 2015	Medicare	Jul 2015	Jun 2015	n/a
	Medicaid	Jul 2015	Jul 2015	
	BCBSM	Jul 2015	May 2015	
	BCN	Jul 2015	Jun 2015	
	Priority Health	Jul 2015	Jul 2015	
Jun 2015	Medicare	Apr 2015	Mar 2015	Release 16.0 (4-25-2016)
	Medicaid	Jun 2015	Jun 2015	
	BCBSM	Jun 2015	Apr 2015	
	BCN	Jun 2015	May 2015	
	Priority Health	Jun 2015	Jun 2015	
May 2015	Medicare	Apr 2015	Mar 2015	n/a
	Medicaid	May 2015	May 2015	
	BCBSM	May 2015	Mar 2015	
	BCN	May 2015	Apr 2015	
	Priority Health	May 2015	May 2015	

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APPL Release Month	Payer	Payer's Patient List Date	Attribution Assignment as of	Attribution used for Dashboard Release
Apr 2015	Medicare	Apr 2015	Mar 2015	n/a
	Medicaid	Apr 2015	Apr 2015	
	BCBSM	Apr 2015	Feb 2015	
	BCN	Apr 2015	Mar 2015	
	Priority Health	Apr 2015	Apr 2015	
Mar 2015	Medicare	Jan 2015	Dec 2014	Release 15.0 (2-12-2016)
	Medicaid	Mar 2015	Mar 2015	
	BCBSM	Mar 2015	Jan 2015	
	BCN	Mar 2015	Feb 2015	
	Priority Health	Mar 2015	Mar 2015	
Feb 2015	Medicare	Jan 2015	Dec 2014	n/a
	Medicaid	Feb 2015	Feb 2015	
	BCBSM	Feb 2015	Dec 2014	
	BCN	Feb 2015	Jan 2015	
	Priority Health	Feb 2015	Feb 2015	
Jan 2015	Medicare	Jan 2015	Dec 2014	n/a
	Medicaid	Jan 2015	Jan 2015	
	BCBSM	Jan 2015	Nov 2014	
	BCN	Jan 2015	Dec 2014	
	Priority Health	Jan 2015	Jan 2015	
Dec 2014	Medicare	Oct 2014	Sep 2014	Release 14.0 (9-23-2015)
	Medicaid	Dec 2014	Dec 2014	
	BCBSM	Dec 2014	Oct 2014	
	BCN	Dec 2014	Nov 2014	
	Priority Health	Dec 2014	Dec 2014	
Nov 2014	Medicare	Oct 2014	Sep 2014	n/a
	Medicaid	Nov 2014	Nov 2014	
	BCBSM	Nov 2014	Sep 2014	
	BCN	Nov 2014	Oct 2014	
	Priority Health	Nov 2014	Nov 2014	
Oct 2014	Medicare	Oct 2014	Sep 2014	n/a
	Medicaid	Oct 2014	Oct 2014	
	BCBSM	Oct 2014	Aug 2014	
	BCN	Oct 2014	Sep 2014	
	Priority Health	Oct 2014	Oct 2014	

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APPL Release Month	Payer	Payer's Patient List Date	Attribution Assignment as of	Attribution used for Dashboard Release
Sep 2014	Medicare	Jul 2014	Jun 2014	Release 13.0 (4-30-2015)
	Medicaid	Sep 2014	Sep 2014	
	BCBSM	Sep 2014	Jul 2014	
	BCN	Sep 2014	Aug 2014	
	Priority Health	Sep 2014	Sep 2014	
Aug 2014	Medicare	Jul 2014	Jun 2014	n/a
	Medicaid	Aug 2014	Aug 2014	
	BCBSM	Aug 2014	Jun 2014	
	BCN	Aug 2014	Jul 2014	
	Priority Health	Aug 2014	Aug 2014	
Jul 2014	Medicare	Jul 2014	Jun 2014	n/a
	Medicaid	Jul 2014	Jul 2014	
	BCBSM	Jul 2014	May 2014	
	BCN	Jul 2014	Jun 2014	
	Priority Health	Jul 2014	Jul 2014	
Jun 2014	Medicare	Apr 2014	Mar 2014	Release 12.0 (1-29-2015)
	Medicaid	Jun 2014	Jun 2014	
	BCBSM	Jun 2014	Apr 2014	
	BCN	Jun 2014	May 2014	
	Priority Health	Jun 2014	Jun 2014	
May 2014	Medicare	Apr 2014	Mar 2014	Release 9.0 (7-1-2014)
	Medicaid	May 2014	May 2014	
	BCBSM	Apr 2014	Mar 2014	
	BCN	May 2014	May 2014	
	Priority Health	May 2014	May 2014	
Apr 2014	Medicare	Apr 2014	Mar 2014	n/a
	Medicaid	Apr 2014	Apr 2014	
	BCBSM	Apr 2014	Feb 2014	
	BCN	Apr 2014	Mar 2014	
	Priority Health	Apr 2014	Apr 2014	
Mar 2014	Medicare	Jan 2014	Dec 2013	Release 11.0 (12-17-2014)
	Medicaid	Mar 2014	Mar 2014	
	BCBSM	Mar 2014	Jan 2014	
	BCN	Mar 2014	Mar 2014	
	Priority Health	Mar 2014	Mar 2014	

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APPL Release Month	Payer	Payer's Patient List Date	Attribution Assignment as of	Attribution used for Dashboard Release
Feb 2014	Medicare	Jan 2014	Dec 2013	Release 8.0 (4-1-2014)
	Medicaid	Feb 2014	Feb 2014	
	BCBSM	Feb 2014	Dec 2013	
	BCN	Feb 2014	Feb 2014	
	Priority Health	Feb 2014	Feb 2014	
Jan 2014	Medicare	Jan 2014	Dec 2013	n/a
	Medicaid	Jan 2014	Jan 2014	
	BCBSM	Jan 2013	Nov 2013	
	BCN	Jan 2014	Jan 2014	
	Priority Health	Jan 2014	Jan 2014	
Dec 2013	Medicare	Oct 2013	Sep 2013	Release 10.0 (9-12-2014) Release 7.0 (1-16-2014)
	Medicaid	Dec 2013	Dec 2013	
	BCBSM	Dec 2013	Oct 2013	
	BCN	Dec 2013	Dec 2013	
	Priority Health	Dec 2013	Dec 2013	
Nov 2013	Medicare	Oct 2013	Sep 2013	n/a
	Medicaid	Nov 2013	Nov 2013	
	BCBSM	Nov 2013	Sep 2013	
	BCN	Oct 2013	Oct 2013	
	Priority Health	Nov 2013	Nov 2013	
Oct 2013	Medicare	Oct 2013	Sep 2013	n/a
	Medicaid	Oct 2013	Oct 2013	
	BCBSM	Oct 2013	Aug 2013	
	BCN	Oct 2013	Oct 2013	
	Priority Health	Oct 2013	Oct 2013	
Sep 2013	Medicare	Jul 2013	Jun 2013	Release 5.0 (11-1-2013)
	Medicaid	Sep 2013	Sep 2013	
	BCBSM	Sep 2013	Jul 2013	
	BCN	Aug 2013	Aug 2013	
	Priority Health	Sep 2013	Sep 2013	
Aug 2013	Medicare	Jul 2013	Jun 2013	n/a
	Medicaid	Aug 2013	Aug 2013	
	BCBSM	Aug 2013	Jun 2013	
	BCN	Aug 2013	Aug 2013	
	Priority Health	Aug 2013	Aug 2013	

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APPL Release Month	Payer	Payer's Patient List Date	Attribution Assignment as of	Attribution used for Dashboard Release
Jul 2013	Medicare	Jul 2013	Jun 2013	n/a
	Medicaid	Jul 2013	Jul 2013	
	BCBSM	Jul 2013	May 2013	
	BCN	Jul 2013	Jul 2013	

Payer Attribution Schedules

Attribution involves the assignment of a patient to a physician for the MiPCT project. Each payer determines their own member attribution and attribution assignment schedule based on their most recent available info, as follows:

Payer	Attribution Schedule Details	Notes
Medicare	Runs attribution Quarterly, based on the most complete 24 months of claims data, accounting for a 3-month claims lag.	For example, Dec 2012 attribution is based on Oct 2010 – Sep 2012 claims data.
Medicaid	Runs attribution Monthly based on current PCP assignment.	
BCBSM	Runs attribution Monthly, based on the most recent 24 months of claims data, accounting for a 3-month claims lag.	For example, Dec 2012 attribution is based on Oct 2010 – Sep 2012 claims data.
BCN	Runs attribution Monthly based on current PCP assignment.	
Priority Health	Runs attribution Monthly for HMO and POS plans. PPO plans are set based on the most complete 23 months of claims data, accounting for a 3-month claims lag.	PPO plan members are included in the lists as of Nov 2013. HMO and POS member are included in the lists as of Aug 2013.

Dropped Patient List

As of June 2013, MDC includes a monthly dropped patient list. This list includes patients who appeared in the previous month's APPL file but are not included in the current month's APPL file under the same Payer.

NOTE: If a patient switches to a new Payer, but is still part of the MiPCT project, they will show up in this list. However, they will also be included in the main APPL list. (If they are new to the PO or practice, there will be a "Y" entry for the NEW_PATIENT_PO_FLAG and/or NEW_PATIENT_PU_FLAG fields in the main APPL list.)

All Payer Patient List Sort Order

The patient records are organized in the following order:

Sort Sequence	Sort Field	Sort Order
1.	PO_ID	Ascending
2.	PU_ID	Ascending
3.	Payer	Alphabetical
4.	High Risk Flag	Descending
5.	Prospective Risk Score	Descending

NOTE: The patient list sort order was updated starting with the April 2015 lists.

List of Available Data Fields

The All Payer Patient List is provided in .csv format, which you can open when you download the .zip file. Below is a list of the columns that are available for each patient record in the list.

NOTE: Fields that are added or updated for the most recent release are indicated in red font. See the [Change Log](#) for more details.

Field Heading	Field Types	Field Length	Notes
Payer Specific Member ID	CHAR	20	This field is populated based on the Payer. Medicare – Uses the Health Insurance Claim (HIC) from the attribution file sent by Medicare. Medicaid – Uses the Medicaid ID from the attribution file sent by Medicaid. BCBSM – Uses the per_member_id from the attribution file sent by BCBSM. BCN – Uses a concatenation of the subscriber number and the subscriber suffix from the attribution file sent by BCN. Priority Health – Uses the Patient ID from eligibility data.
Member First Name	CHAR	100	
Member Last Name	CHAR	100	
Member Date of Birth	DATE		
Age	NUMBER	10	
Gender	CHAR	1	
Attributed Physician NPI	CHAR	20	
Attributed Physician First Name	CHAR	100	
Attributed Physician Last Name	CHAR	100	
Attributed Practice Unit ID	CHAR	15	
Attributed Practice Unit Name	CHAR	100	

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Field Heading	Field Types	Field Length	Notes
Concurrent Risk Score	NUMBER	10	MiPCT DCG-based risk score
Concurrent Risk Group	CHAR	20	Very High, High, Medium, Low, Very Low, or Not Avail. For more information, see “Risk Scores” in the MiPCT Dashboards and Reports User Guide .
Prospective Risk Score	NUMBER	10	MiPCT DCG-based risk score
Standard Cost	CHAR	15	For more information, see “Standard Costs” in the MiPCT Dashboards and Reports User Guide .
# of Inpatient visits in newest 6 mo of data	NUMBER	10	
# of ED visits in newest 6 mo of data	NUMBER	10	
# of readmissions in newest 6 mo of data	NUMBER	10	
# of visits to any PCP in newest 6 mo of data	NUMBER	10	
Most recent PCP visit date	NUMBER	10	This can be for any PCP, not necessarily the member’s attributed PCP.
# of Chronic Conditions	NUMBER	10	
# of maintenance drug prescriptions in newest 6 mo of data	NUMBER	10	Provides the count of maintenance drug prescriptions per member for the most recent 6 month period.
DIABETES	NUMBER	10	For more information, see “Chronic Conditions” in the MiPCT Dashboards and Reports User Guide .
ASTHMA	NUMBER	10	For more information, see “Chronic Conditions” in the MiPCT Dashboards and Reports User Guide .
CHF	NUMBER	10	For more information, see “Chronic Conditions” in the MiPCT Dashboards and Reports User Guide .
COPD	NUMBER	10	For more information, see “Chronic Conditions” in the MiPCT Dashboards and Reports User Guide .
HTN	NUMBER	10	For more information, see “Chronic Conditions” in the MiPCT Dashboards and Reports User Guide .
OBESITY	NUMBER	10	For more information, see “Chronic Conditions” in the MiPCT Dashboards and Reports User Guide .
ADHD	NUMBER	10	For more information, see “Chronic Conditions” in the MiPCT Dashboards and Reports User Guide .
CAD	NUMBER	10	For more information, see “Chronic Conditions” in the MiPCT Dashboards and Reports User Guide .
CKD	NUMBER	10	For more information, see “Chronic Conditions” in the MiPCT Dashboards and Reports User Guide .
Payer	CHAR	20	Will contain one of the following values: Medicare Medicaid BCBSM BCN Priority Health

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Field Heading	Field Types	Field Length	Notes
Physician Organization ID	CHAR	20	
Physician Organization Name	CHAR	100	
NEW_PATIENT_PO_FLAG	CHAR	1	Indicates if the patient is new on the current month's Patient List for the PO. Y = yes N = no
NEW_PATIENT_PU_FLAG	CHAR	1	Indicates if the patient is new on the current month's Patient List for the Practice. Y = yes N = no
BCN_HDHC_HSA	CHAR	1	Will only be populated on records where Payer = "BCN" Flag indicating if the member is in a high-deductible plan. 1 = yes 0 / blank = no
BCBSM_MEMRELCD_DEF	CHAR	50	Will only be populated on records where Payer = "BCBSM" The member's relationship to the subscriber.
BCBSM_HIGH_DEDUCT_PLAN	CHAR	1	Will only be populated on records where Payer = "BCBSM" Flag indicating if the member is in a high-deductible plan. 1 = yes 0 / blank = no
BCBSM_PRISK	CHAR	20	Will only be populated on records where Payer = "BCBSM" This is the BCBSM calculated Risk Score.
BCBSM_CAT25K	CHAR	1	Will only be populated on records where Payer = "BCBSM" A flag for members reaching \$25,000 or more in total costs in the previous 12-month period.
BCBSM_CAT50K	CHAR	1	Will only be populated on records where Payer = "BCBSM" A flag for members reaching \$50,000 or more in total costs in the previous 12-month period.
BCBSM_CAT100K	CHAR	1	Will only be populated on records where Payer = "BCBSM" A flag for members reaching \$100,000 or more in total costs in the previous 12-month period.
BCBSM_CHF	CHAR	1	Will only be populated on records where Payer = "BCBSM"
BCBSM_COPD	CHAR	1	Will only be populated on records where Payer = "BCBSM"
BCBSM_CAD	CHAR	1	Will only be populated on records where Payer = "BCBSM"

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Field Heading	Field Types	Field Length	Notes
BCBSM_DIABETES	CHAR	1	Will only be populated on records where Payer = "BCBSM"
BCBSM_ASTHMA	CHAR	1	Will only be populated on records where Payer = "BCBSM"
BCBSM_CRF	CHAR	1	Will only be populated on records where Payer = "BCBSM"
BCBSM_DEPRESSION	CHAR	1	Will only be populated on records where Payer = "BCBSM"
BCBSM_HTN	CHAR	1	Will only be populated on records where Payer = "BCBSM"
BCBSM_CEREBROVASCULAR	CHAR	1	Will only be populated on records where Payer = "BCBSM"
BCBSM_IP_6MOS	CHAR	5	Will only be populated on records where Payer = "BCBSM"
BCBSM_IP_12MOS	CHAR	5	Will only be populated on records where Payer = "BCBSM"
BCBSM_IP_ACSC_CHRONIC_12MOS	CHAR	5	Will only be populated on records where Payer = "BCBSM"
BCBSM_IP_ACSC_ACUTE_12MOS	CHAR	5	Will only be populated on records where Payer = "BCBSM"
BCBSM_IP_ACSC_PEDS_12MOS	CHAR	5	Will only be populated on records where Payer = "BCBSM"
BCBSM_ED_6MOS	CHAR	5	Will only be populated on records where Payer = "BCBSM"
BCBSM_ED_12MOS	CHAR	5	Will only be populated on records where Payer = "BCBSM"
BCBSM_ED_PCS_12MOS	CHAR	20	Will only be populated on records where Payer = "BCBSM"
BCBSM_ED_MIGRAINE_12MOS	CHAR	5	Will only be populated on records where Payer = "BCBSM"
BCBSM_CANCER_TX	CHAR	5	Will only be populated on records where Payer = "BCBSM"
BCBSM_CANCER_SEQ	CHAR	5	Will only be populated on records where Payer = "BCBSM"
BCBSM_CANCER_META	CHAR	5	Will only be populated on records where Payer = "BCBSM"
BCBSM_DIALYSIS	CHAR	5	Will only be populated on records where Payer = "BCBSM"
BCBSM_PHARM_6MOS	CHAR	5	Will only be populated on records where Payer = "BCBSM"
BCBSM_PHARM_SPECIALTY_HC	CHAR	5	Will only be populated on records where Payer = "BCBSM"

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Field Heading	Field Types	Field Length	Notes
BCBSM_BCBSM_CM	CHAR	5	Will only be populated on records where Payer = "BCBSM" A flag indicating if a member has been referred to BCBSM for CM services. 1 = yes 0 / blank = no
BCBSM_CM_DATEREFERRAL	DATE		Will only be populated on records where Payer = "BCBSM" The date on which a member was referred to BCBSM for CM outreach.
BCBSM_CM_STATUS	CHAR	15	Will only be populated on records where Payer = "BCBSM" The status of member referral for BCBSM CM. new = case has been referred to BCBSM active = eligibility/appropriateness confirmed and case assigned to nurse open = member engaged closed = member not reached or engaged or case closed
BCBSM_BCBSM_DM	CHAR	5	Will only be populated on records where Payer = "BCBSM" A flag indicating if a member has been referred to BCBSM for DM services.
BCBSM_DM_DATEREFERRAL	DATE		Will only be populated on records where Payer = "BCBSM" The date on which the member was referred to BCBSM for DM outreach.
BCBSM_DM_STATUS	CHAR	15	Will only be populated on records where Payer = "BCBSM" The status of member referral for BCBSM CM. new = case has been referred to BCBSM active = eligibility/appropriateness confirmed and case assigned to nurse open = member engaged closed = member not reached or engaged or case closed
BCBSM_GRP_NUM	CHAR	20	Will only be populated on records where Payer = "BCBSM"
BCBSM_GRP_SFX_NUM	CHAR	15	Will only be populated on records where Payer = "BCBSM"

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Field Heading	Field Types	Field Length	Notes
BCBSM_MANAGED_BY_USERNAME_CM	CHAR	50	Will only be populated on records where Payer = "BCBSM" The username of the CM care manager. The IVR vendor is Eliza vendor who is doing BCBSM's DM outreach. These cases are not yet handled by our nurses. The PDCM1 cases are old PCM cases. Please call 1-800-775-2583 should you need to contact the Care or Disease Manager.
BCBSM_PHARM_SPECIALTY_MS	CHAR	5	Will only be populated on records where Payer = "BCBSM" A flag indicating if a member has evidence of pharmacy claims for specialty medications used for multiple sclerosis (MS). 1 = yes 0 / blank = no
BCBSM_PHARM_SPECIALTY_RA	CHAR	5	Will only be populated on records where Payer = "BCBSM" A flag indicating if a member has evidence of pharmacy claims for specialty medications used for rheumatoid arthritis (RA). 1 = yes 0 / blank = no
BCBSM_MANAGED_BY_USERNAME_DM	CHAR	50	Will only be populated on records where Payer = "BCBSM" The username of the DM care manager. The IVR vendor is Eliza vendor who is doing BCBSM's DM outreach. These cases are not yet handled by our nurses. The PDCM1 cases are old PCM cases. Please call 1-800-775-2583 should you need to contact the Care or Disease Manager.
BCBSM_CONTRACT_NUM	CHAR	20	Will only be populated on records where Payer = "BCBSM"
BCBSM_CARD_HOLDER	CHAR	20	Will only be populated on records where Payer = "BCBSM"
MCARE_MCAID_DUAL_ELIG_FLAG	CHAR	1	Will only be populated on records where Payer = "Medicare" Flag indicating if the member is dual enrolled in Medicare and Medicaid. 1 = yes 0 / blank = no

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Field Heading	Field Types	Field Length	Notes
PRIORITY_HDHP_FLAG	CHAR	1	Will only be populated on records where Payer = "PRIORITY HEALTH" Flag indicating if the Priority Health member is in a high-deductible plan. 1 = yes 0 / blank = no
BCN_ELIG_ID	CHAR	20	Will only be populated on records where Payer = "BCN" A BCN-specific unique patient ID
BCBSM_ELIG_ID	CHAR	20	Will only be populated on records where Payer = "BCBSM" A BCBSM-specific unique patient ID
master_patient_id	CHAR	20	Unique patient ID for each member that allows identification of the individual across payers and across time periods of the database.
High Risk Flag	CHAR	1	Flag indicating if the patient is considered High Risk. 1 = Patient's Concurrent Risk Group is Very High or Patient is dual-enrolled in Medicare and Medicaid (MCARE_MCAID_DUAL_ELIG_FLAG = 1) 0 = Not High Risk
Healthy MI Flag	CHAR	1	Flag indicating if a patient has coverage under the Medicaid Healthy Michigan Plan. (This field applies only to the Medicaid population.) 1 = a patient has coverage 0 = a patient does NOT have coverage
High ED Utilizer Flag	CHAR	1	Flag indicating if a patient is a high ED utilizer. A patient is flagged if the following statements are both true: The patient is enrolled in MiPCT for 6 or more months of the 12 month reporting period. The patient visited an Emergency Department 8 or more times during the reporting period. 1 = a patient is a high ED utilizer 0 / blank = a patient is not a high ED utilizer

Change Log

The following table displays the changes made to the fields for each release of the All Payer Patient Lists:

List Release Month	Changes
Mar 2016	Added the High ED Utilizer Flag field
Nov 2015	Added the Healthy MI Flag field
Apr 2015	<ul style="list-style-type: none"> Added the High Risk Flag field Added a description for the master_patient_id field (field was added to the APPLs in July 2014) Updated the patient list sort order
Nov 2014	Added notes for the following fields: <ul style="list-style-type: none"> # of maintenance drug prescriptions in newest 6 mo of data Most recent PCP visit date
Jul 2014	Added the master_patient_id field
May 2014	<ul style="list-style-type: none"> Updated how the Payer Specific Member ID field is populated for BCBSM and BCN. Added the following two unique-identity fields: BCN_ELIG_ID BCBSM_ELIG_ID
Jan 2014	The following fields are populated starting with the Jan 2014 APPLs: <ul style="list-style-type: none"> # of Inpatient visits in newest 6 mo of data # of visits to any PCP in newest 6 mo of data Most recent PCP visit date # of maintenance drug prescriptions in newest 6 mo of data <p>NOTE: There are no new fields in the January 2014 All Payer Patient Lists. The record layout did not change, and there should be no impact to any load programs or existing processes.</p>
Nov 2013	Added the following fields: MCARE_MCAID_DUAL_ELIG_FLAG – Indicates if a member is dual enrolled in Medicare and Medicaid. PRIORITY_HDHP_FLAG – Indicates if a Priority Health member is in a high-deductible plan.
Jul 2013	<ul style="list-style-type: none"> Changed the field order Updated the field sort order For more details, see the July 2013 Changes to the All Payer Patient List document on the MDC Website's Support page.