

WORKPLACE MANAGED CARE
PROGRAM CORE DATASET MEASURES (3/25/99)

Prepared by

The Workplace Managed Care Cross Site Evaluation Team

and

Workplace Managed Care Steering Committee

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For the
Workplace Managed Care Steering Committee

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Workplace Managed Care Program Core Dataset Measures (3/25/99)

Table 1.		Workplace HR Measures
HR Measures	CORE DATASET VARIABLES	
Employee Identifiers	Study Identifier:	Provide a unique non-identifying number used to link individual-level data across data sets within site.
Intervening Variables	Study Group:	Designate Intervention (INT) or Comparison (CMP) Group assignment. If multiple levels of INT or CMP group are available, append a numeric to the INT or CMP assignment (e.g., INT1, INT2, INT3). If a study participant moves from a study group/site to a non-participating group/site, designate the study status as Ineligible (INELIG). Study group assignment may change between quarters. This assignment will be provided by the researcher.
	Year of birth:	Provide the year of birth as available in the HR system. If possible, provide a four-digit value (e.g., 1954)
	Sex:	Provide data as available in HR system. If possible avoid one letter fields (M/F or 1/0). 'Male' and 'Female' is preferred to avoid typographical errors.
	Race/ethnicity:	Provide data as available in HR system. Data will be collapsed by coordinating center across nine sites post fact.
	Job Type/Occupational Title:	Use the BLS Occupational Classification System MOGs. A-K. http://www.bls.gov/ocsm/commain.htm
	Health Plan Enrollment:	Designate HMO, PPO POS, FFS, or 'Not Enrolled' in a given quarter. In some cases, the type of plan may change within a quarter. Provide the plan status at the end of the quarter. If multiple plans of the same type are available, designate the specific plan with a numeric value appended to the type of plan (e.g., HMO1, HMO2, PPO1, PPO2).
	Job Tenure:	Number of years of service with the company in a given quarter. Caution: Internal transfers or status changes may affect how job tenure is tracked. Confirm that this variable reflects all years of service with the company.
	Union Status:	Designate Yes/No or Not Applicable. Union status is defined as "covered by a collective bargaining agreement". If worksite is non-union indicate 'not applicable' for all individuals at that worksite
	Termination Status:	Designate Yes/No for <u>termination</u> status per quarter. Termination status may change within a quarter. Please provide the status at the end of the quarter.
Outcome Variable	Injuries:	Number of OSHA 200/100 claims per quarter. Provide separate fields for OSHA 200 and 100, if possible.

HR Measures	CLUSTER VARIABLES (Data only available at a subset of sites)	
Intervening Variables	Education:	Provide data as available in HR system. As an example, data may be available as number of completed years of education, or highest degree obtained.
	Earnings:	Provide quarterly gross pay. Include bonuses, commissions, overtime, etc. If hourly or monthly wages are provided, add up to the quarter to create the variable. If annual wages are provided divide the wages by 4 for the quarter to create the variable.

Outcome Variables	Disability Claims:	Provide the total number of claims paid per quarter.
	Dollar Value of Disability Claims	Provide the total \$\$ value of claims paid per quarter.
	Absenteeism:	Number of days absent per quarter.
	Positive 'For Cause' Drug Test results:	Provide total positive 'for cause' drug test results per quarter.
	Negative 'For Cause' Drug Test results:	Provide total negative 'for cause' drug test results per quarter.

Table 2. Health Care Utilization Measures

CORE DATASET VARIABLES		
	Study Identifier:	Non-Identifying number used to link individual-level data across data sets within site.
	Client Identifier:	Non-Identifying number linked to the patient.
	Subscriber Identifier:	Non-Identifying number that links the client to the subscriber.
	Year of birth:	Provide the client's year of birth as available in the MCO system. If possible, provide a four-digit value (e.g., 1954)
	Sex:	Provide data as available in MCO system. If possible avoid one letter fields (M/F or 1/0). 'Male and 'Female' is preferred to avoid typographical errors.
	Marital status:	Provide client data as available in MCO system.
	Relation to Subscriber	Designate subscriber, spouse, or dependent. Note: Each dependent should be assigned a unique patient identifier linked to the subscriber.
	Enrolled in Plan:	Designate HMO, PPO POS, FFS, or 'Not Enrolled' in a given quarter. In some cases, the type of plan may change within a quarter. Provide the plan status at the end of the quarter. If multiple plans of the same type are available, designate the specific plan with a numeric value appended to the type of plan (e.g., HMO1, HMO2, PPO1, PPO2).
Outcome Variables	ER Utilization WITH an Admission:	Number of <u>total days</u> in which an ER visit occurred with an admission per quarter.
	Cost of ER Utilization WITH an Admission:	Total costs associated with ER visits with an admission per quarter. The four cost categories are: (1) <u>Charges</u> : amount the provider bills the MCO (2) <u>Patient out-of-pocket/Deductibles/Co-payment</u> : amount the patient pays (3) <u>Paid amount</u> : amount paid by the insurance company to the provider (4) <u>Allowed amount</u> : maximum amount insurance company would pay the provider.
	ER Utilization with NO Admission:	Number of <u>total days</u> in which an ER visits occurred with NO admission per quarter.
	Cost of ER Utilization with NO Admission::	Total costs (charges, co-pay, paid amount, allowed amount) associated with ER visits with NO admission per quarter.
	Urgent/Emergent Care Utilization:	Number of <u>total days</u> in which a free-standing urgent/emergent care visit occurred per quarter.
	Cost of Urgent/Emergent Care Utilization:	Total costs (charges, co-pay, paid amount, allowed amount) associated with Urgent/Emergent Care visits per quarter.
	Outpatient Utilization:	Number of <u>total days</u> in which an outpatient visit occurred per quarter.
	Costs of Outpatient Utilization:	Total costs (charges, co-pay, paid amount, allowed amount) associated with outpatient visits per quarter.
	Inpatient Admissions:	Number of <u>total admissions</u> to an inpatient facility per quarter
	Inpatient Days:	Number of <u>total days of stay</u> in an inpatient facility per quarter.

Table 2. Health Care Utilization Measures

CORE DATASET VARIABLES	
Costs of Inpatient Stays:	Total costs (charges, co-pay, paid amount, allowed amount) associated with inpatient stays per quarter.
Utilization related to Substance Abuse (and related medical conditions) <u>or</u> Utilization related to Mental Health conditions	Number of <u>total days</u> in which an ER visit (with no admission) occurred associated with substance abuse (and related medical conditions) or mental health per quarter — and,
	Number of <u>total days</u> in which an ER visit (with an admission) occurred associated with substance abuse (and related medical conditions) or mental health per quarter — and,
	Number of <u>total days</u> in which an Urgent/Emergent Care visit occurred associated with substance abuse (and related medical conditions) or mental health per quarter — and,
	Number of <u>total days</u> in which an Outpatient visit occurred associated with substance abuse (and related medical conditions) or mental health per quarter — and,
	Number of inpatient <u>admissions</u> associated with substance abuse (and related medical conditions) or mental health per quarter.
	Number of inpatient <u>days of stay</u> associated with substance abuse (and related medical conditions) or mental health per quarter.
Costs related to Substance Abuse (and related medical conditions) <u>or</u> Utilization related to Mental Health conditions	Total costs (charges, co-pay, paid amount, allowed amount) associated with substance abuse (and related medical conditions) or mental health ER visits (with NO admission) per quarter.
	Total costs (charges, co-pay, paid amount, allowed amount) associated with substance abuse (and related medical conditions) or mental health ER visits (WITH) an admission) per quarter.
	Total costs (charges, co-pay, paid amount, allowed amount) associated with substance abuse (and related medical conditions) or mental health Urgent/Emergent Care visits per quarter.
	Total costs (charges, co-pay, paid amount, allowed amount) associated with substance abuse (and related medical conditions) or mental health Outpatient visits per quarter.
	Total costs (charges, co-pay, paid amount, allowed amount) associated with substance abuse (and related medical conditions) or mental health Inpatient <u>days of stay</u> per quarter.
Utilization related to Substance Abuse (and related medical conditions) and <u>no mental health</u>	Number of <u>total days</u> in which an ER visit (with no admission) occurred associated with substance abuse (and related medical conditions) and <u>no mental health</u> per quarter — and,
	Number of <u>total days</u> in which an ER visit (with an admission) occurred associated with substance abuse (and related medical conditions) and <u>no mental health</u> per quarter — and,
	Number of <u>total days</u> in which an Urgent/Emergent Care visit occurred associated with substance abuse (and related medical conditions) and <u>no mental health</u> per quarter — and,

Table 2.

Health Care Utilization Measures

CORE DATASET VARIABLES	
	<p>Number of <u>total days</u> in which an Outpatient visit occurred associated with substance abuse (and related medical conditions) and <u>no mental health</u> per quarter — and,</p> <p>Number of inpatient <u>admissions</u> associated with substance abuse (and related medical conditions) and <u>no mental health</u> per quarter.</p> <p>Number of total Inpatient <u>days of stay</u> associated with substance abuse (and related medical conditions) and <u>no mental health</u> per quarter — and,</p>
Costs related to Substance Abuse (and related medical conditions) and <u>no mental health</u>	Total costs (charges, co-pay, paid amount, allowed amount) associated with substance abuse (and no mental health) ER visits (with no admission) per quarter.
	Total costs (charges, co-pay, paid amount, allowed amount) associated with substance abuse (and no mental health) ER visits (with an admission) per quarter.
	Total costs (charges, co-pay, paid amount, allowed amount) associated with substance abuse (and no mental health) Urgent/Emergent Care visits per quarter.
	Total costs (charges, co-pay, paid amount, allowed amount) associated with substance abuse (and no mental health) Outpatient visits per quarter.
	Total costs (charges, co-pay, paid amount, allowed amount) associated with substance abuse (and no mental health) Inpatient <u>days of stay</u> per quarter.
Utilization related to Mental Health conditions and <u>no substance abuse</u>	Number of <u>total days</u> in which an ER visit (with no admission) occurred associated with mental health and <u>no substance abuse</u> per quarter — and,
	Number of <u>total days</u> in which an ER visit (with an admission) occurred associated with mental health and <u>no substance abuse</u> per quarter — and,
	Number of <u>total days</u> in which an Urgent/Emergent Care visit occurred associated with mental health and <u>no substance abuse</u> per quarter — and,
	Number of <u>total days</u> in which an Outpatient visit occurred associated with mental health and <u>no substance abuse</u> per quarter — and,
	Number of inpatient <u>admissions</u> associated with mental health (and no substance abuse) per quarter --- and,
	Number of total Inpatient <u>days of stay</u> associated with mental health (and no substance abuse) per quarter.
Costs related to Mental Health conditions and <u>no substance abuse</u>	Total costs (charges, co-pay, paid amount, allowed amount) associated with mental health (and no substance abuse) ER visits (with no admission) per quarter.
	Total costs (charges, co-pay, paid amount, allowed amount) associated with mental health (and no substance abuse) ER visits (with an admission) per quarter.
	Total costs (charges, co-pay, paid amount, allowed amount) associated with mental health (and no substance abuse) Urgent/Emergent Care visits per quarter.
	Total costs (charges, co-pay, paid amount, allowed amount) associated with mental health (and no substance abuse) Outpatient visits per quarter.
	Total costs (charges, co-pay, paid amount, allowed amount) associated with mental health (and no substance abuse) Inpatient <u>days of stay</u> per quarter.

Table 3. MCO Information to Create Core Utilization and Cost Variables

MCO Records	SERVICE LEVEL DATA:	
	Date of service or admission:	date the service was rendered at ER/Urgent Care/ Outpatient facility — or, date of admission to inpatient facility. The date is required to determine which quarter the service or admission occurred.
	Location of service:	designated as Emergency Room, Free Standing Urgent Care facility, Outpatient facility, or Inpatient facility to which a patient has been admitted. The location code is used to determine where the service occurred.
	Substance Abuse (and related medical conditions) ICD-9 diagnosis codes*:	ICD-9 codes indicating Substance Abuse (and related medical conditions) are: [291, 292, 303-305, 357.5, 357.6, 425.5, 535.3, 571.0-571.3, 571.5, 648.3, 655.4, 655.5, 760.7 (exclude 760.74 and 760.79) , 779.5, 790.3 962.0, 965.0, 967-970, 977.0, 977.3, 980, V70.4, V79.1]. Use Primary, secondary, or tertiary diagnosis to determine substance abuse or related medical condition.
	Mental Health ICD-9 diagnosis codes*:	ICD-9 codes indicating Mental Health are: [290, 293-302, 306-316, 331.0, 648.4]. Use Primary, secondary, or tertiary diagnosis to determine mental health diagnosis.

* ICD-9 codes to indicate Substance Use and Mental Health are taken from “Defining Mental Health/Substance Abuse Claimants” SAMHSA/CMHS Medicaid, Medicare, and Managed Care Analysis Project. Prepared by the MEDSTAT Group, Research Triangle Institute, and Brandeis University, 1997. Additional codes were added by recommendation of the Steering Committee. If ICD-9 codes are not available, coordinate with RTI to identify alternative classification schemes.