

ADMINISTRATIVE BULLETIN 25-02

**957 CMR 8.00: All Payer Claims Database (APCD)
and Case Mix Data and Charge Data Submission**

Effective April 18 , 2025

The Center for Health Information and Analysis (CHIA) is issuing this Administrative Bulletin pursuant to 957 CMR 8.06(1) to notify Health Care Payers required to submit claims data to CHIA in accordance with 957 CMR 8.00 of changes to the Massachusetts All-Payer Claims Database (MA APCD) file submission guidelines.

CHIA is issuing this Administrative Bulletin to update data submission requirements in the existing data submission guides. The changes include:

- A new APCD file type – the Member Simplified (MS) file which moves some existing data elements from the Member Eligibility (ME) file to the MS file and also includes new RELD/SOGI data elements.
- An update to the ME file to change the data elements that moved to the MS file to filler fields.

The following lists the updated specifications. Technical specifications for these fields are found within the data submission guides which are posted on CHIA’s website. The updated data submission guides are effective January, 2026, and data submissions that include the changes are due beginning in February 2026.

Data elements for the new MS file:

MS Field Position / Column #	MS Data Element	MS Data Element Name
1	MS001 (Same as ME001)	Submitter
2	MS002 (Formerly ME008)	Subscriber SSN
3	MS003 (Same as ME117)	Carrier Specific Unique Subscriber ID
4	MS004 (Formerly ME101)	Subscriber Last Name

5	MS005 (Formerly ME102)	Subscriber First Name
6	MS006 (Formerly ME103)	Subscriber Middle Initial
7	MS007	Subscriber Street Address
8	MS008 (Formerly ME108)	Subscriber City
9	MS009 (Formerly ME109)	Subscriber State or Province
10	MS010 (Formerly ME110)	Subscriber ZIP Code
11	MS011 (Formerly ME011)	Member SSN
12	MS012 (Same as ME107)	Carrier Specific Unique Member ID
13	MS013 (Formerly ME010)	Member Suffix or Sequence Number
14	MS014 (Formerly ME133)	GIC ID
15	MS015 (Formerly ME075)	NewMMIS ID
16	MS016 (Same as ME134)	APCD ID Code
17	MS017 (Formerly ME104)	Member Last Name
18	MS018 (Formerly ME105)	Member First Name
19	MS019 (Formerly ME106)	Member Middle Initial
20	MS020 (Formerly ME014)	Member Date of Birth
21	MS021	Member Street Address
22	MS022 (Formerly ME015)	Member City
23	MS023 (Formerly ME016)	Member State
24	MS024 (Formerly ME017)	Member ZIP Code
25	MS025 (Formerly ME060)	Employment Status
26	MS026 (Formerly ME078)	Employer Zip Code (Situs)
27	MS027 (Formerly ME082)	Employer Name
28	MS028 (Formerly ME083)	Employer EIN
29	MS029	Race

30	MS030	Hispanic Ethnicity
31	MS031	Granular Ethnicity
32	MS032	Written Language
33	MS033 (Formerly ME033)	Spoken Language
34	MS034	Sexual Orientation
35	MS035 (Formerly ME013)	Gender Identity
36	MS036	Sex Assigned at Birth
37	MS037	Disability Status 1
38	MS038	Disability Status 2
39	MS039	Disability Status 3
40	MS040	Disability Status 4
41	MS041	Disability Status 5
42	MS042	Disability Status 6
43	MS043 (Formerly ME065)	Date of Retirement
44	MS044 (Formerly ME079)	Recipient Identification Number (MassHealth only)

Convert the following ME file data elements to filler:

ME File Field Position / Column #	ME File Element	ME File Data Element Name
8	ME008	Subscriber SSN
10	ME010	Member Suffix or Sequence Number
11	ME011	Member SSN
13	ME013	Member Gender
14	ME014	Member Date of Birth
16	ME016	Member State
17	ME017	Member ZIP Code
33	ME033	Member Language Preference
60	ME060	Employment Status
65	ME065	Date of Retirement
75	ME075	NewMMIS ID
78	ME078	Employer Zip Code (Situs)
79	ME079	Recipient Identification Number (MassHealth only)
80	ME080	Recipient Historical Number (MassHealth only)
82	ME082	Employer Name
83	ME083	Employer EIN

84	ME101	Subscriber Last Name
85	ME102	Subscriber First Name
86	ME103	Subscriber Middle Initial
87	ME104	Member Last Name
88	ME105	Member First Name
89	ME106	Member Middle Initial
92	ME109	Subscriber State or Province
93	ME110	Subscriber ZIP Code
116	ME133	GIC ID