



Florida Cancer Data System

A Joint Project of the Sylvester Comprehensive Cancer Center and the Florida Department of Health

Module Training: Primary Payer Study

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Study Overview

- Centers for Disease Control and Prevention's National Program of Cancer Registrars (NPCR)
 - validity/reliability of primary payer at diagnosis
- Prostate and Ovarian cases
 - randomly selected
 - diagnosed in 2006

Reabstracted Data Items

- Martial Status at Date of Diagnosis (DX)
- Primary Payer at Date of Diagnosis
- Primary Payer Text at Date of Diagnosis
- Secondary Payer Indicator at Date of Diagnosis
- Primary Payer at Date of Service (RX)
 - Includes surgery & most definitive surgery
- Primary Payer Text at Date of Service
- Secondary Payer Indicator at Date of Service
- Refusal of Treatment
- Watchful Waiting

Marital Status at DX

- Marital status at diagnosis codes
 - 1 -- Single (never married)
 - 2 -- Married (including common law)
 - 3 -- Separated
 - 4 -- Divorced
 - 5 -- Widowed
 - 9 -- Unknown

Primary Payer at DX/RX

- 01 -- Not insured: Patient has no insurance and is declared a charity write-off.
- 02 -- Not insured, self-pay: Patient has no insurance and is declared responsible for charges.
- 03 -- Insurance for inmate
- 04 -- Insurance provided by not-for-profit charity
- 05 -- Insurance provided by state aid program, not affiliated with any other not-for-profit charity, Medicare or Medicaid
- 10 -- Insurance, NOS: Type of insurance is unknown or other than the types listed in codes 20,21, 31, 60-68.

Primary Payer at DX/RX (cont'd)

- 20 -- Private Insurance: Managed care, HMO, or PPO: An organized system of prepaid care for a group of enrollees usually within a defined geographic area. Generally formed as one of four types: a group model, an IPA, a network or a staff model. "Gate-keeper model" is another term for describing this type of insurance.
- 21 -- Private Insurance: Fee-for-Service: An insurance plan that does not have negotiated fee structure with the participating hospital. Type of insurance plan not coded as 20.

Primary Payer at DX/RX (cont'd)

- 31 -- Medicaid: State government administered insurance for persons who are uninsured, below the poverty level, or covered under entitlement programs. Medicaid other than described in code 35.
- 35 -- Medicaid -Administered through a Managed Care plan: Patient is enrolled in Medicaid through a Managed Care program (eg. HMO or PPO). The managed care plan pays for all incurred costs.

Primary Payer at DX/RX (cont'd)

- 60 -- Medicare/Medicare, NOS: Federal government funded insurance for persons who are 62 years of age or older, or are chronically disabled (social security insurance eligible). Not described in codes 61 – 63.
- 61 -- Medicare with supplement, NOS: Patient has Medicare and another type of unspecified insurance to pay costs not covered by Medicare.
- 62 -- Medicare - Administered through a Managed Care plan: Patient is enrolled in Medicare through a Managed Care plan (e.g. HMO or PPO). The Managed Care plan pays for all incurred costs.

Primary Payer at DX/RX (cont'd)

- 63 -- Medicare with private supplement: Patient has Medicare and private insurance to pay costs not covered by Medicare.
- 64 -- Medicare with Medicaid eligibility: Federal government Medicare insurance with State Medicaid administered supplement.
- 65 -- TRICARE: DoD program providing supplementary civilian sector hospital and medical services beyond a military treatment facility to military dependents, retirees, and their dependents. Formerly CHAMPUS.

Primary Payer at DX/RX (cont'd)

- 66 -- Military: Military personnel or their dependents who are treated at a military facility.
- 67 -- Veterans Affairs: Veterans who are treated in VA facilities.
- 68 -- Indian/Public Health Service: patient who receives care at an IHS facility or at another facility, and the medical costs are reimbursed by the IHS. Patient receives care at a PHS facility or at another facility, and medical costs are reimbursed by the PHS.
- 99 -- Insurance status unknown: It is unknown from the patient's medical record whether or not the patient is insured.

Primary Payer Text at DX/RX

- Record the Primary Payer exactly as it is recorded within the medical record on the date of diagnosis.
 - “Free care provided by hospital”
 - “Medicaid pending” or “Medicaid pending and [secondary payer name]”
 - “Medicare and BCBS” or “Medicare and Medicaid”.
 - “Unknown”
- Primary Payer is typically found on the Face Sheet for each medical event.

Secondary Payer Indicator at DX/RX

- 1 -- Primary Payer code captures all insurance information
- 2 -- Primary Payer code does not capture secondary and/or tertiary insurance information

Primary Payer Module