



Medicaid Patient List 101.2: Frequently Asked Questions

Q: Why is Alliance asking that organizations submit their Medicaid Patient Lists?

A: We are seeking a means to capture data for a population truly representative of those served by partners without being entirely dependent on the results of NYS DOH attribution. This data is the basis for analyzing the client network, tracking the care they are receiving and identifying the care they need. This also provides insights on how networks are naturally overlapping, who your clients are also seeing, and where there are opportunities for collaboration and improvement. This has provided a foundation for the IPA and will be required as part of the IPA.

Q: Who should we include on our active roster?

A: Alliance gives the flexibility for organizations to define who is “active” and who is “not active.” For example, a primary care practice might consider a patient inactive after 24 consecutive months with no scheduled appointments, whereas a community-based organization might consider a patient inactive after they close their care management case with them. If you need additional guidance, please contact your Alliance Account Manager.

Q: My organization has submitted multiple MPL’s. Should we keep submitting?

A: Yes! Please continue to submit active patient rosters on a quarterly basis.

Q: We are not able to collect Medicaid CIN number at this time. Are we still able to participate?

A: Absolutely. The minimum amount of information necessary is Organization, Program/Practice (if applicable), First name, Last name, Date of Birth, and Gender. Alliance will apply an algorithm to obtain the data needed for analytics and engagement, where possible.

Q: What is the minimum amount of data needed to participate in the MPL process?

A: Organization, Program/Practice, First name, Last name, Date of Birth, and Gender.

Q: When should we submit our MPL’s?

A: MPLs are due the first Friday following the start of the new quarter.



Q: Should the gender field only contain female or male?

A: The gender field should be what the patient identifies as. This includes but is not limited to: Female, Male, Transgender Male-to-Female (MTF), Transgender Female-to-Male (FTM), Genderqueer, Other.

Q: What information is available to my organization after we submit an MPL?

A: Performance insights at the aggregate level, outreach lists at the member level (for those partners we have a NYS BAA on file with), and other information on an ad hoc basis.

Q: Will the information be available to us on certain intervals, or do we have to request it?

A: Certain information will be available on regular intervals to align with measurement year performance goals and to fulfill certain contract deliverables. As we transition into an IPA, data will be produced by request and at the discretion of Alliance as interval reporting is being developed. Alliance encourages you to chat with your Account Manager to determine what data will help your organization with your projects and at what intervals they should be received.

Q: Our rosters have been patients billed in the last 3 years, should we continue to submit these lists?

A: We do ask that you submit an active roster. If you're not going to engage the client or anticipate engagement with them in the foreseeable future, they should be considered inactive and left off your active roster. Further concerns should be brought to your Account Manager to assist with defining active/inactive.

Q: If you do not participate with any other programs, and we are billing separately, how should you fill out the Program/Practice field?

A: You can keep this field blank if you are not participating with other programs or practice sites.

Q: Should old MPLs be transferred to the new format?

A: No, you do not need to transfer your old MPLs to the new format. Moving forward, you are required to use the new template for your MPLs.



Q: We have individuals in multiple programs, do we have them on the report in multiple locations or just one?

A: Please include the individual on all the multiple programs that they are involved in. This will contribute to analytic insight, especially if we stratify by program/practice site.

Q: Is Date of Birth and Gender required if we report Medicaid CIN?

A: Yes, if possible. If this is an issue for your organization, please contact your Account Manager.