## VHCURES Capabilities

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| **Claims, Eligibility, Enrollment** | • Medical claims (paid) including many carve-out vendors.  
• Pharmacy claims (paid)  
• Enrollment records  
• Eligibility information (Medicaid) | • Denied claims  
• Pre-adjudicated claims  
• Test results from lab and radiology/imaging  
• Claims for services at Vermont providers delivered to non-Vermont residents | • Clinical data analyses  
• Some quality measures (non-claims) | VHCURES data is available to users with an approved Data Use Agreement, a legal agreement between data users and the GMCB. Users with the appropriate experience, technical skills, and data management resources can analyze:  
• Enrollment data  
• Health expenditures, e.g., inpatient expenditures PMPM, outpatient ED expenditures PMPM  
• Geographic differences, e.g., Geographic variations in cost PMPM  
• Variation in payments by service type  
• Utilization, e.g. inpatient discharges, outpatient ED discharges  
• Claims-based quality measures |
| **Payers** | • Commercial  
• Certain Third-Party Administrators/Self-funded:  
  o State of Vermont health plan  
  o UVM  
  o VEHI  
  o Opt-in employers  
• Medicaid  
• Medicare and Medicare Advantage | Data for the following categories of individuals:  
• Most non-government self-insured employers  
• Uninsured and self-paying individuals  
• Individuals covered under VA, TRICARE and FEHBP  
• Payers with Vermont resident enrollment less than 200 | • Complete statewide analyses (enrollment, services, etc.)  
• Analyses of services provided to the uninsured | |
| **Plan Details** | • Insurer name  
• Insurance product type  
• Primary insurance indicator  
• Linked enrollment across multiple plans, including Medicare / Medicaid dual-eligible members. | • Premium and benefit design information  
• Claims and eligibility data for dental carriers  
• Financial performance data (e.g. RBC) | • Analyze benefit design trends | |
| **Payments** | • Payer payments  
• Deductible amount  
• Coinsurance and copay amounts  
• Estimated “prepaid” amount for claims that are included in capitation | • Non-claims payments including capitation, shared savings, and incentive payments | • Calculate comprehensive PMPM (by payer or provider) | |

NOTE: The technical requirements and knowledge required vary depending on the analysis.
### Providers
- Provider charges
- Unique provider identifiers
- Rendering service provider
- Prescribing provider
- Professional identity code (specialty)
- Blueprint medical home indicator
- Vermont ACO indicator
- Certain data about substance use and abortion services is omitted by law.
- Complete information about provider affiliations (e.g. common ownership)
- Count the total number of providers (there are duplicates and exclusions)
- Easily group individual providers to practices or parent organizations. (i.e., identify all practices associated with a larger medical group).

### Members
- Encrypted member ID, linked across enrollment records
- Member demographics (e.g., age, sex, zip code)
- Members of Vermont health plans who do not reside in Vermont.
- Birth and death records
- Risk scores
- Demographic information not included in claims data (e.g. income, education). Race/ethnicity data is available but is inconsistently populated.
- Some demographic data (e.g. date of birth) is not released for privacy reasons.
- Risk-adjusted comparisons between providers.

For more information, please visit the [VHCURES website](http://www.vhcrures.org) or contact the GMB analytical team at [gmcb.data@vermont.gov](mailto:gmcb.data@vermont.gov). The website also provides additional information about privacy restrictions and the data use agreement application and process. If VHCURES will not meet your needs, a [Data Encyclopedia](http://vhcrures.org/data-encyclopedia) maintained by the Department of Health provides an overview of other health data sources available from the State of Vermont.

**Notes on acronyms:**
- VHCURES: Vermont Health Care Uniform Reporting and Evaluation System, Vermont’s All-Payer Claims Database (APCD)
- UVM: University of Vermont
- VEH: Vermont Education Health Initiative
- ERISA: Federal law exempting certain employer-sponsored health plans from reporting to VHCURES
- VA, TRICARE and FEBHP: various federal sources of insurance that are not required to report to VHCURES
- RBC: Risk-Based Capital, which is a metric related to insurance company financial health

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