



CENTER FOR IMPROVING
VALUE IN HEALTH CARE

New Data Elements Being Collected in the CO All Payer Claims Database (CO APCD)

Fall 2026

On an annual basis, the Center for Improving Value in Health Care (CIVHC) updates the [Data Submission Guide \(DSG\)](#) identifying elements that payers must submit to the CO APCD. The table below provides a summary of the new elements now being collected following the latest DSG update (DSG 17).

New data elements will not include historic data, as CIVHC does not require retrospective data submissions when new data elements are added to the DSG. Additionally, with new submissions, some data fields may be missing or incomplete as health insurance payers adjust to new requirements. Please contact ColoradoAPCD@civhc.org to inquire about completeness for specific data elements.

IMPORTANT: While these elements are now being collected, they are not yet available in CIVHC's Data Element Selection Form (DESF) for data users to request. CIVHC typically evaluates data elements after at least one full year of data collection to determine whether their release meets regulatory requirements and would be useful to data requestors (i.e., new data elements are not available for inclusion in data extracts during this period). This allows for thorough evaluations of data quality and completeness before considering their addition as standard data elements available in the DESF.

New Element	Description	Claims Type(s)/Level
Member Coverage Information		
Header Record/HD002	A new field type in the Header Record for all data submissions to indicate the applicable file type.	Eligibility, Claims, Pharmacy, Provider, Annual APM, CT, CF, and DR Reporting data
Header Record/HD012	A new field type in the Header Record for all data submissions to indicate whether a file is "T" = Test or "P" = production.	Eligibility, Claims, Pharmacy, Provider, Annual APM, CT, CF, and DR Reporting data
Medical, Dental, and Pharmacy		
Trailer Record/TR002	A new field type in the Trailer Record for all data submissions to indicate the applicable file type.	Eligibility, Claims, Pharmacy, Provider Annual, APM, CT, CF and DR Reporting data