

# BCDA Office Hours

How to migrate to v3

July 9, 2026

# Agenda

1. Team introductions
2. What's new in BCDA v3?
3. v3 migration timeline
4. Migration Steps
5. Useful resources
6. Open Q&A

# —● Please ask questions in the chat for the Q&A

We will have dedicated time for Q&A!

Send questions about your current migration efforts, even if they are not directly related to the presentation material.

**Shareout update: Summarized Q&A has been added to the end of this presentation**

# —● Introductions



Karley Thurston  
Product Manager,  
CMS



Greg Pfadenhauer  
Product Owner  
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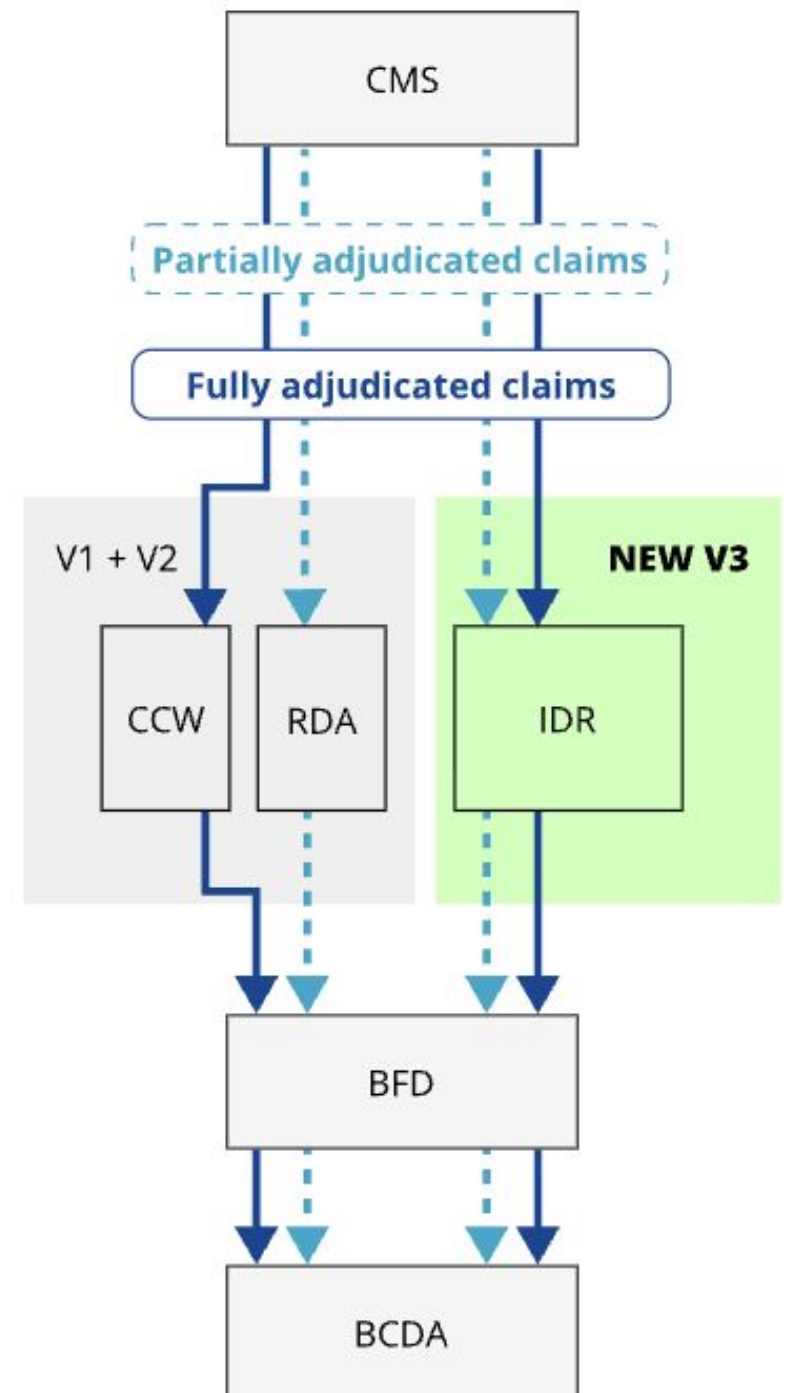


Colby Seyferth  
FHIR API Evangelist  
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# What's New in BCDA v3?

## ● New Upstream Data Source: IDR

- In v1 and v2, BCDA served data from two main upstream systems: CCW and RDA
- in v3, BCDA sources data from a single source: IDR



# —● What's new in BCDA v3?



## Improved FHIR Conformance

- Resources conform to CARIN Blue Button 2.2.0 profiles
- Standard URLs and code structure



## Increased Access to Partially Adjudicated Claims

- Now includes Shared Savings Program and Kidney Care Choices ACOs



## New API Filters

- New `_typeFilter` param supports more complex queries to reduce export size



## More Frequent and Timely Updates

- Less delay between adjudication and availability
- Patient/coverage data updated 6X/week vs. once
- Fully adjudicated Part D data updated 5X/week vs. once

## —● v3 Migration Timeline

- July 2025: BCDA /demo endpoint live in sandbox for Connectathon
- Jan-Jun 2026: BCDA v3 early adopters testing period
- July 1, 2026: BCDA v3 is live in production 🎉
- **July 2026-2027: BCDA team available for general migration support**
- July 30, 2027: Anticipated v1 and v2 discontinuation

## ● Request access to v3

- We are currently in an incremental rollout period
- Please reach out to our team at [bcapi@cms.hhs.gov](mailto:bcapi@cms.hhs.gov) with the 5 character Entity IDs of the ACOs/KCEs you'd like us to grant access to BCDA v3
- If you try to make a v3 request with your credentials before we approve access, you will see a 403 response status

## —● 3 main steps to migrate to BCDA v3

### ① Update your queries

Point your app to the new endpoint and use new filters

### ② Update your parsing and mapping logic

Use the v3 Data Dictionary to parse and map new FHIR data

### ③ Update business logic

Update, validate Patient and Claims matching for v3

# 1. Update Your Queries

# —● How to get connected to v3

## 1. Point your app at the new v3 endpoint

The v3 endpoint is at the same domain. Just replace “v2” with “v3.”

|                     |                                         |
|---------------------|-----------------------------------------|
| v2 Patient \$export | GET /api/ <b>v2</b> /Group/all/\$export |
| v3 Patient \$export | GET /api/ <b>v3</b> /Group/all/\$export |

# —● How to get connected to v3

## 2. Complete the export steps

- A. Kick off \$export
- B. Check job status
- C. Read JSON manifest
- D. Download files

The /auth/token url stays the same in v3. You won't have to change your auth flow.

## —● 2 Changes to API requests

### 1) All claims are represented by ExplanationOfBenefit resources

Claim and ClaimResponse Resources are retired

### 2) The `_typeFilter` parameter replaces the `_type` parameter

Use `_typeFilter` to adjust your query parameters

## —• the `_typeFilter` parameter

- The value of `_typeFilter` is the URL-encoded FHIR RESTful query string
- Resources will be included in the response if they match criteria specified in the resource subquery

|                               |                                                                                                                                            |
|-------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| Example RESTful FHIR query    | <code>/ExplanationOfBenefit?service-date=gt2026-01-01</code>                                                                               |
| With <code>_typeFilter</code> | <code>GET /v3/Patient/\$export?</code><br><code>  _typeFilter=ExplanationOfBenefit%3Fservice-date%3D</code><br><code>  gt2026-01-01</code> |

## ● Subquery parameters for ExplanationOfBenefit

Using `_typeFilter`, BCDA v3 will support these subquery parameters:

- `service-date`
  - Filter by the `billablePeriod`. Must provide a FHIR date query
- `outcome`
  - Filter by the outcome element. Supported values: 'partial' and 'complete'
- `_tag`
  - Filter by the `meta.tag` element. Pass full token as `<system> | <code>`

## —● Recreate v2 exports in v3 with \_typeFilter

- If you received Claim/ClaimResponse resources in v2, include the SharedSystem System-Type \_tag

```
/api/v3/Patient/$export?  
  _type=ExplanationOfBenefit&  
  _typeFilter=ExplanationOfBenefit%3F  
    _tag%3D  
      https%3A%2F%2Fbluebutton.cms.gov%2Ffhir%2FCodeSystem%2FSystem-Type%7C  
        SharedSystem
```

## —● Recreate v2 exports in v3 with \_typeFilter

- If you received ExplanationOfBenefit resources in v2, include the NationalClaimsHistory and DDPS System-Type \_tags

```
/api/v3/Patient/$export?  
  _type=ExplanationOfBenefit&  
  _typeFilter=ExplanationOfBenefit%3F  
    _tag%3D  
      https%3A%2F%2Fbluebutton.cms.gov%2Ffhir%2FCodeSystem%2FSystem-Type%7C  
        NationalClaimsHistory%2C  
      https%3A%2F%2Fbluebutton.cms.gov%2Ffhir%2FCodeSystem%2FSystem-Type%7C  
        DDPS
```

## 2. Update Your Mapping/Parsing Logic

## —● Update your mappings

Though BCDA v3 still uses FHIR R4, there are some significant changes to the resource payloads.

You will need to make sure to update your mappings if you were relying on any of the data that has moved to a new field.

## ● Changes to Patient Resource

- Patient.id in v3 is **not** the same as Patient.id in v2
  - v2 = BENE\_ID: This is gone in v3
  - v3 = **NOT** BENE\_ID: This is new in v3
- Added historical MBIs and source keys
- Added patient contact language:
  - Patient.communication.language.coding.where(system='urn:ietf:bcp:47').code
- Added the us-core `sex` extension
- Moved `race` from bluebutton extension to US-Core extension

Check out the [Data Dictionary](#) for all the v3 elements

## —● Changes to Coverage Resource

- Coverage.id in v3 is **not** the same as Coverage.id in v2
- New CodeSystem and StructureDefinition URLs
- Data conforms to [C4BB 2.2.0](#) and US Core 6.1.0
- Additional Coverage resource for Dual Medicare-Medicaid eligibility status
- Removed reference year and reference month extensions
  - In favor of Coverage.period

Check out the [Data Dictionary](#) for all the elements

## —● Changes to ExplanationOfBenefit Resource

- No more Claim or ClaimResponse resources
- ExplanationOfBenefit.id in v3 is **not** the same as ExplanationOfBenefit.id in v2
- New CodeSystem and StructureDefinition URLs
- New meta.tag element to specify the claim's CMS System-Type
- Data conforms to [C4BB 2.2.0](#)
- Adjudication-related info is consolidated into ExplanationOfBenefit.adjudication and ExplanationOfBenefit.item.adjudication
- Removed BETOS codes

Check out the [Data Dictionary](#) for all elements

# **3. Update Your Business Logic**

## —● Deduplicating claims

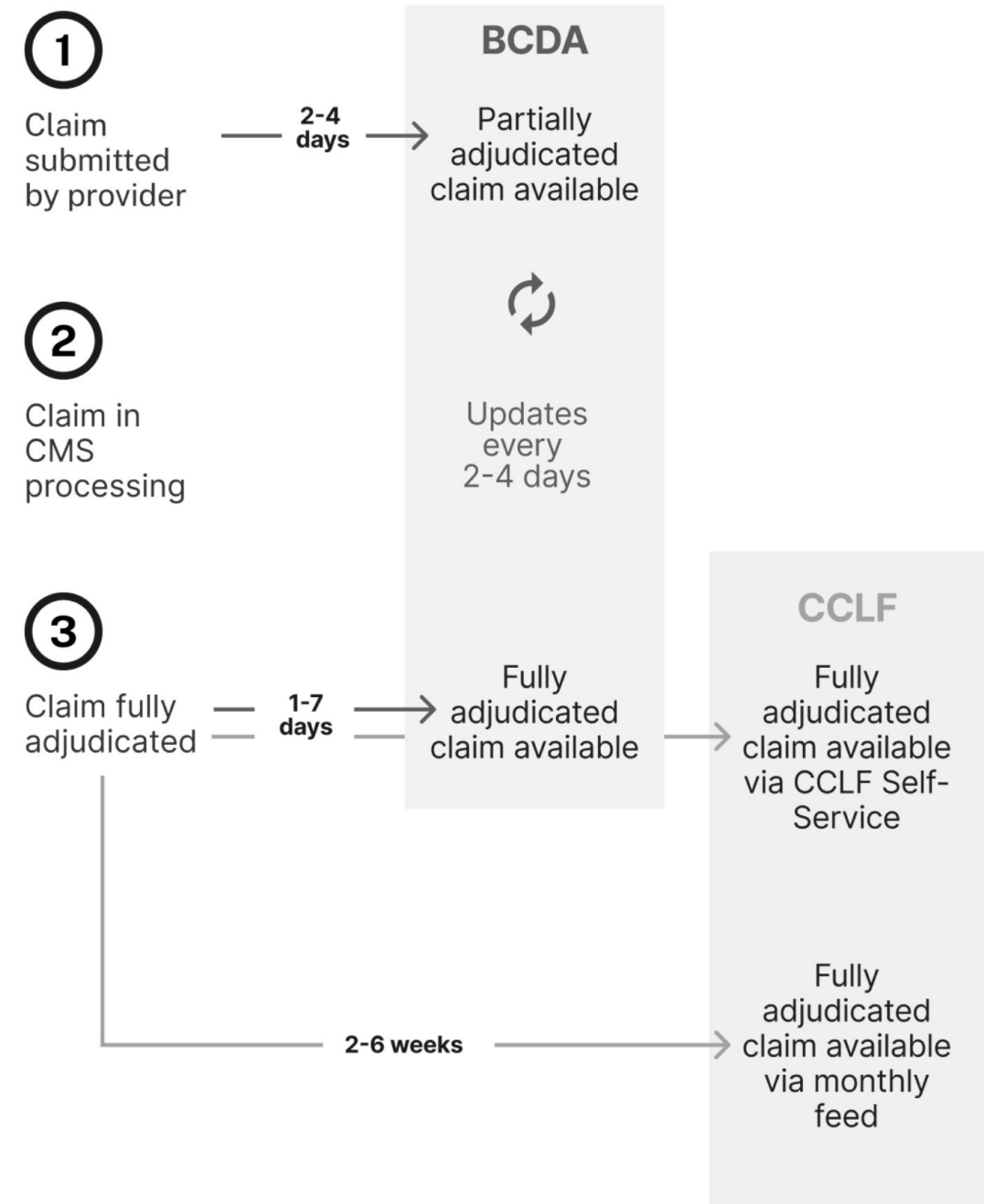
**BCDA v3 automatically surfaces the latest version of a claim.**

- v2 may show multiple ExplanationOfBenefit Resources (potentially dozens) for a single claim.
- In v3, BFD\* handles deduplication automatically within a source system.
- You will no longer need to deduplicate multiple versions of a claim within the same upstream data source.

\*Beneficiary FHIR Data server

# Claim Lifecycle

1. A partially adjudicated claim is available from a Shared Systems source
2. When it is fully adjudicated it's made available from the National Claims History source



## —● Tracking claims through adjudication

A single claim can have two ExplanationOfBenefit resources:

- One **SharedSystem**-tagged EOB and
- One **NationalClaimsHistory**-tagged EOB

**Identify these matching claims using the Claim Control Number and deduplicate accordingly**

There are slight differences in how the various CMS systems track claim control numbers.

## —• Deduplicating claims with Claim Control Number

- All institutional and professional claims are assigned a Claim Control Number
- Use this identifier to locate different versions of the same claim
- Find the Claim Control Number at this FHIRPath:

```
ExplanationOfBenefit
  .identifier
  .where('system' = 'https://bluebutton.cms.gov/fhir/CodeSystem/CLM-CNTL-NUM' )
  .value
```

# —● Deduplicating claims

## Example ExplanationOfBenefit Identifiers

```
"id": "-9687643755958",
"identifier": [
  {
    "type": {
      "coding": [
        {
          "system": "http://hl7.org/fhir/us/carin-bb/CodeSystem/C4BBIdentifierType",
          "code": "uc",
          "display": "Unique Claim ID"
        }
      ]
    },
    "value": "-9687643755958"
  },
  {
    "system": "https://bluebutton.cms.gov/identifiers/CLM-CNTL-NUM",
    "value": "-01614121123648SZF"
  }
],
```

## ● Matching Patients in v3

To match to an existing patient from v2, CCLF, or some other source:

- Use MBI to match to local patient
  - MBI is located at the FHIRPath:  
`Patient.identifier.where(system='http://hl7.org/fhir/sid/us-mbi').value`
- Use **period.start** and **period.end** to filter historical MBIs
  - `Patient.identifier.period.start`
  - `Patient.identifier.period.end`
- Use patient demographics (Name, DOB, etc.) to validate the match
- Optional: save the v3 Patient.id as an alternative identifier
  - This ID is specific to BCDA v3

# ● Matching Patients in v3

## Example Patient Identifiers

```
"id": "-317432690",
"identifier": [
  {
    "type": {
      "coding": [
        {
          "system": "http://terminology.hl7.org/CodeSystem/v2-0203",
          "code": "MB"
        }
      ]
    },
    "system": "http://hl7.org/fhir/sid/us-mbi",
    "value": "1S00EU8DK56",
    "period": {
      "start": "2020-04-23T00:00:00+00:00"
    }
  },
  ...
]
```

## Example Patient Demographics

```
"name": [
  {
    "family": "Upton",
    "given": [
      "Weldon",
      "S"
    ]
  },
  ...
],
"birthDate": "1976-01-12",
"extension": [
  {
    "url":
"http://hl7.org/fhir/us/core/StructureDefinition/us-core-sex",
    "valueCode": "248153007"
  },
  ...
]
```

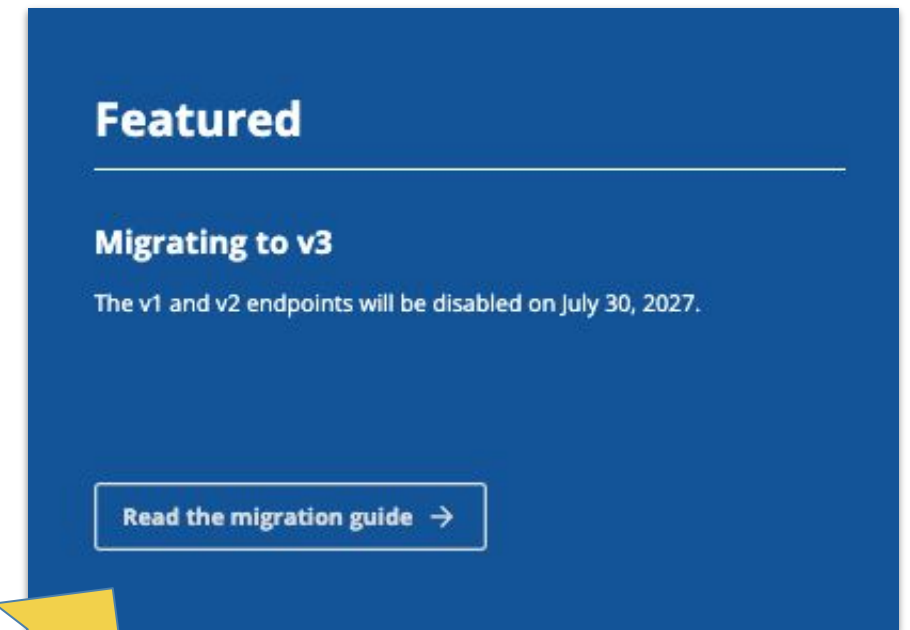
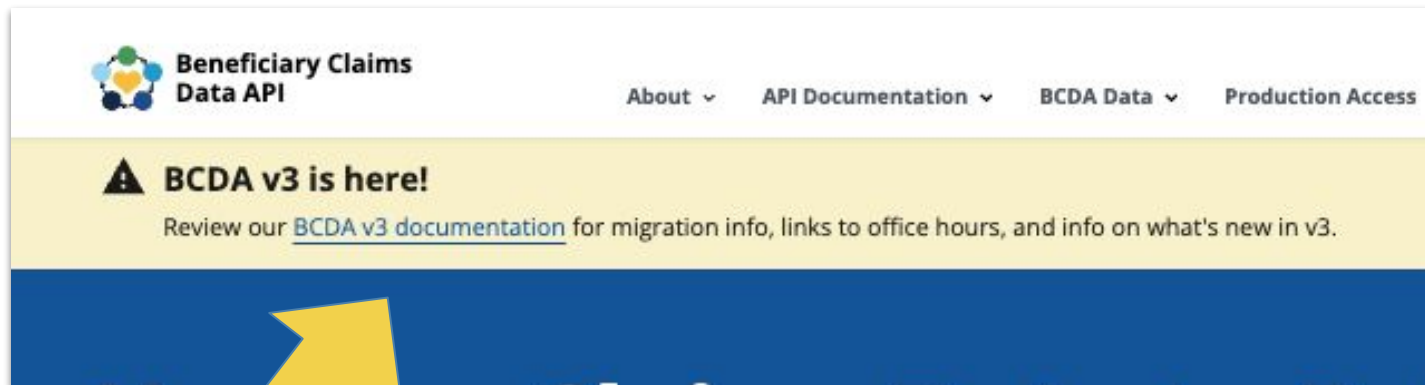
# Resources

## —● Useful Resources

- Website: <https://bcda.cms.gov/v3/how-to-migrate-v3.html>
- Google Group: <https://groups.google.com/g/bc-api>
- Email: [bcapi@cms.hhs.gov](mailto:bcapi@cms.hhs.gov)
- Ongoing Office Hours:
  - Next: Getting Started With BCDA · Thursday, July 23 · 2:00pm ET

## • v3 documentation on BCDA.cms.gov

Follow links from the homepage to [BCDA v3 documentation](#)



# —● v3 documentation on BCDA.cms.gov

**BCDA v3 Documentation**

- Introducing BCDA v3 **NEW**
- How to Migrate to v3 **NEW**
- How to Filter Claims Data **UPDATED**
- Partially Adjudicated Claims Data **UPDATED**
- Comparison of BCDA v3 and CCLF Files **UPDATED**

## BCDA v3 Documentation

This documentation is for **v1 and v2 users migrating to BCDA v3**. If you're new to BCDA, our [standard BCDA documentation](#) may be the best place to get started.

BCDA v3 became available July 1, 2026. Access to v1 and 2 will be removed on July 30, 2027. This documentation summarizes v3 changes and improvements while providing detailed steps to migrate.

### Topics

- [Introducing BCDA v3](#) - Summary of v3 features and improvements
- [How to Migrate to v3](#) - New endpoints, claims representation, extensions, and mapping
- [How to Filter Claims Data](#) - Updated to include the [\\_typeFilter parameter](#)
- [Partially Adjudicated Claims Data](#) - Updated with FHIR resource consolidation
- [Comparison of BCDA v3 and CCLF Files](#) - Updated to cover mapping changes

### Join v3 office hours

We're offering regular office hours to help you during your v3 migration. At each event, a 20-minute presentation will be followed by time for open questions.

**JUL**  
9

**Planning your migration to v3**  
*July 9, 2026 | 2:00 - 3:00 pm ET*  
  
Learn about enhancements to the API and get tips on how to plan your migration from BCDA v1 or v2.  
  
[Register now](#) 

- Intro to v3
- Migration guide
- How to filter claims with v3
- Updated partially adjudicated info
- Updated mapping on BCDAv3 to CCLF info

**Q&A**

## —● Open Q&A

- What is the status of Pre-Adjudicated claims for Medicare Shared Savings Program ACOs?
  - Partially Adjudicated Claims are now available to the Shared Savings Program in v3. They will not become available to SSP in v1 or v2.
- Will rendering provider TIN and NPI codes be populated in v3 instead of the placeholder values that are there currently?
  - Not necessarily, but we will continue to keep an eye on the upstream data source. The reason that you see a placeholder is because that is how they come in on the claim; it is not really under our control.

## —● Open Q&A

- Are fully adjudicated and partially adjudicated claims represented in one type of file?
  - Yes, they will all be in the ExplanationOfBenefit resource type file.
- With BCDA v3 consolidating all claims into IDR and increasing update frequency, should ACOs adjust their attribution validation cadence to take advantage of more timely data?
  - We are leaving the attribution cadence the same: monthly for most models. For MSSP/REACH/KCC, we are still using CCLF for attribution. This way, if you are using both sources, you are always working with the same roster.

## —● Open Q&A

- Will v3 be a closer replacement for CCLF?
  - Yes! BCDA v3 and CCLF now share the same data source (IDR). It will be a closer match, with more field parity.
- Is there a recommendation on what the download schedule should be for V3 weekly adjudicated data?
  - We do not have a recommended export schedule.

## —● Open Q&A

- Is there a window where we would prefer not to call the APIs, like a weekly maintenance window?
  - Generally speaking, we don't need any weekly downtime. If we are expecting any maintenance downtime, we will provide a heads up announcement.
- Any difference between the patient and group endpoints for explanation of benefits?
  - The difference between the Patient and Group endpoints remains the same as v2: there is a slight difference in how the since parameter works.

## —● Open Q&A

- What is the expected timeline for implementation for migrating from v2 to v3?
  - The timeline will vary based on each organization's needs. Since we are early in the v3 release, we don't really have a best estimate for timelines at this time. Feel free to reach out directly to grab some time with the BCDA team to talk through your specific scenario.
- Is the EOB type available in v3? If not, what is the best alternative to it?
  - Yes, there will be a coding in the ExplanationOfBenefit.type element with a system = '<https://bluebutton.cms.gov/fhir/CodeSystem/EOB-TYPE>' that will have the EOB type value

## —● Open Q&A

- Is there any CMS road map or deadline where MSSP ACOs will be required to move from CCLF to BCDA?
  - No. The July 30, 2027 deadline is just for migrating off of BCDA v1 and v2.
- How many different type of different files and data will be available in v3?
  - Three resource types total: Patient, Coverage, and ExplanationOfBenefit. Data that was previously in Claim/ClaimResponse has moved to ExplanationOfBenefit

## —● Open Q&A

- If there is a bug in v3 and something is fixed, will the lastUpdated timestamp on the fixed data be updated, so it will automatically be pulled in on the next incremental load if we are using the \_since \$export param?
  - It depends... There are times where the data is updated in BFD when no actual changes to the claim has occurred. This can update the lastUpdated timestamp of the claim. Conversely, if there is a fix to how the data is translated to the FHIR payload, and it doesn't update the record in the database, then that might not update the lastUpdated timestamp, so it would not show up in the next incremental load.

## —● Open Q&A

- Is it possible to get the pre-adjudicated status changes once a claim flips to adjudicated? Or is it necessary to pull daily without any downtime to retrieve the full history of changes in pre-adjudicated claims?
  - BCDA v3 will always provide the most recent version of a claim. If you want to make sure to get most versions of a claim, you will want to export partially adjudicated claims daily.
- Beyond faster availability of data, what does BCDA v3 provide that MSSP CCLF does not?
  - The main benefit of BCDA over CCLF is the modern, interoperable FHIR format and API-based retrieval.

## —● Open Q&A

- Is there a plan to add more data elements to BCDA?
  - Yes, but we're still working out which data on what schedule! There is a lot more data available in the IDR, so once we are through the initial launch of v3, there is potential to expand and make more CMS data available. If there is data you would like to see in BCDA, let us know! Send an email or post in the Google Group.
- If a patient has opted out, is their data available through BCDA or CCLF?
  - That data is not available through BCDA nor CCLF.

## —● Open Q&A

- If we want to start trying to pull v3 data, is that something we need to request access to do? Or is it fully live at this point?
  - For now, the data is fully live, but you will need to request access. If you send us an email with the ACO ID(s) you'd like to have v3 access, then we will add you to the allow list and you can get started.
- If we test with v3, will that affect v2 API calls we have running in production?
  - No, it will not affect v2 exports.



**Thank you**

**Stay in touch**

Visit our website: [bcda.cms.gov](http://bcda.cms.gov)

Email us: [bcapi@cms.hhs.gov](mailto:bcapi@cms.hhs.gov)

Join the Google Group

## ● Appendix

**SharedSystem:** Part A + Part B claims from FISS, MCS, VMS

**NationalClaimsHistory:** Part A + Part B claims from National Claims History

**DDPS:** Part D claims from Drug Data Processing System

# Claim Lifecycle

1. A partially adjudicated claim is available from a Shared Systems source
2. When it is fully adjudicated it's made available from the National Claims History source

