

**Possible Medicare Part D public use and supplemental characteristics files
For public comment**

I. Public use files

CMS is considering developing several different public use files that could be used for various types of studies. Public use files (PUF) may be purchased from CMS by commercial entities as well as by other members of the public. CMS is interested in receiving comments from the public about these proposed public use files. Comments may be submitted via email to our Research Data Assistance Center contractor (ResDAC) at the following address: resdac@umn.edu. If you submit comments, please note which file(s) you are submitting comments on (e.g., PUF File 1 or PUF File 2A, etc.); if you are offering a suggestion for a new file, please indicate so and describe the research this file could support.

Proposed public use files

CMS is currently developing files using 2006 Part D claims data—hence the discussion that follows is restricted to 2006 Part D claims. As additional years of Part D data become available, new public use files will be created.

1. Medicare Part D data only (2006)

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Purpose: General research on association between plan characteristics and drug use, and between plan characteristics and beneficiary characteristics		
Stratification	Special Treatment of PDE Elements	Notes on Supplemental Characteristics
File 1A: All Part D enrollees, stratified by Census Division and by plan type (MA-PD/PDP)	Drop contract and plan ID Encrypt other identifier fields (e.g., beneficiary, physician, pharmacy) Most other elements available	Roll up geography to Census Division Add fuzzed HCC*

File 1B: Part D enrollees only; stratified by plan characteristics such as deductible, initial coverage limit, gap coverage	General research on beneficiary choice of plan type	Drop geography Add fuzzed HCC*
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2. Merged Medicare Parts A and B (2005, 2006), and D data (2006)

Merged Medicare Parts A and B (2005, 2006), and D data (2006)			
(Note that Medicare A&B claims will be missing for MA-PD enrollees)			
Purpose and Stratification		Special Treatment of PDE Elements	Notes on Supplemental Characteristics
File 2A: All Medicare beneficiaries, stratified by deciles of 2005 Part B spending and by plan type (MA-PD or PDP)***	Sorting of beneficiaries into plans based on morbidity	Drop Contract and plan ID	Drop geography Add fuzzed HCC*
Files 2B: All Medicare beneficiaries, stratified by MA-PD/PDP and by CCW disease marker: one file for each of 21 markers*** (AMI, Alzheimer's/Senile Dementia, Atrial Fib, Cataract, Hip Fracture, Chronic Kidney Disease, COPD, Depression, Diabetes, Glaucoma, Heart Failure, Ischemic Heart Disease, Osteoporosis, Rheumatoid Arthritis/Osteoarthritis, Stroke/TIA, Female Breast Cancer, Colorectal Cancer, Prostate Cancer, Lung Cancer, Endometrial Cancer)	Interaction of Part D and particular disease conditions	Encrypt other identifier fields (e.g., beneficiary, physician, pharmacy) Most other elements available Fuzz service dates to MWF**	

Merged Medicare Parts A and B (2005, 2006), and D data (2006)			
(Note that Medicare A&B claims will be missing for MA-PD enrollees)			
Purpose and Stratification		Special Treatment of PDE Elements	Notes on Supplemental Characteristics
File 2C: All enrollees, stratified by Census Division and plan type (MA PD/PDP)	General research on Medicare spending	Drop Contract and plan ID Encrypt other identifier fields	Roll up geography to Census Division Add fuzzed HCC*

<p>File 2D: Part D enrollees only; stratified by plan characteristics such as deductible, initial coverage limit, gap coverage</p>	<p>General research on beneficiary choice of plan type</p>	<p>(e.g., beneficiary, physician, pharmacy) Most other elements available Fuzz service dates to MWF**</p>	<p>Drop geography Add fuzzed HCC*</p>
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Notes:

* The term “fuzzed HCC” means an HCC score that could not be combined with other beneficiary characteristics to identify the beneficiary.

** The service date is changed to a Monday, Wednesday, or Friday date in the week the service was provided so that a user could create episodes of illness with time sequencing, without being able to identify a beneficiary by a specific date of admission or service.

*** Provider ID numbers in A&B data will be encrypted in the same way as those in the D data to assist researchers in linking prescriptions with encounters. The PUF also will include Medicare enrollees without Part D coverage.

****Chronic condition warehouse markers include: Acute Myocardial Infarction, Alzheimer's Disease and Related Disorders or Senile Dementia, Atrial Fibrillation, Cataract, Hip/Pelvic Fracture, Chronic Kidney Disease, Chronic Obstructive Pulmonary Disease, Depression, Diabetes, Glaucoma, Heart Failure, Ischemic Heart Disease, Osteoporosis, RA/OA (Rheumatoid Arthritis/Osteoarthritis), Stroke/Transient Ischemic Attack, Female Breast Cancer, Colorectal Cancer, Prostate Cancer, Lung Cancer, Endometrial Cancer

II. Supplemental characteristics files

CMS is building plan, pharmacy, prescriber, drug, and event characteristics files to provide supplemental information in lieu of the actual identifier. This supplemental information could be available for beneficiary identifiable data requests as well as appended to public use files. Example of these characteristics include:

- Plan features such as deductible, initial coverage limit, and “gap” coverage
- Dispenser characteristics such as pharmacy type (retail/mail order/LTC/etc.) and chain/independent affiliation
- Prescriber characteristics such as practice type and specialty
- Drug trade name, generic name, form, and strength
- Whether the drug dispensed was subject to utilization management (step therapy, quantity limits, or prior authorization)

CMS is interested in receiving comments from the public about these supplemental characteristics files, as well as proposals for additional characteristics. Comments should be sent by email to ResDAC at: resdac@umn.edu. If you submit comments, please note which characteristics file(s) you are submitting comments on (e.g., plan, dispenser, prescriber, etc.). Please describe the research your comments could support.

Additional information being considered for supplemental characteristics files:

Plan Characteristics being considered:

- Plan type (e.g., MA-PD, PDP)
- Benefit type (e.g., Defined Standard, Enhanced Alternative, etc.)
- Drug Plan Premium (probably fuzzed)
- Drug Deductible
- Initial Coverage Limit amount
- Below the benchmark plan (zero premium for full LIS enrollees)
- Offers Variable Copayments (Tiers)
- Type of Extra Coverage Offered in the Gap (brand, generic, or brand and generic)
- Number of Top 100 Drugs on Formulary
- Number of Top 100 Drugs Requiring Prior Authorization or Step Therapy
- Number of Top 100 Drugs with Cost Sharing below \$20
- Mail Order Offered
- Special Needs Plan Type
- Employer Group Plan (Y/N)
- Reinsurance Demo Plan (Y/N)

(SOURCE: November 2005 PlanFinder Landscape spreadsheet)

Dispenser Characteristics being considered:

- Dispenser class
- Dispenser type

(SOURCE: NCPDP)

Prescriber Characteristics being considered:

- Med school
- Year graduated
- Physician status code
- Physician credentials code
- Primary specialty code
- Board-certified in primary specialty

- Secondary specialty code
- Board-certified in secondary specialty
- Resident intern code
- Group practice code
- DEA Business Code

(Pending ability to merge DEA numbers with UPINs)

(SOURCE: DEA Active Controlled Substances Act Registrants Database and MPIERS)

Enrollee Characteristics being considered:

- State Code*
- County Code*
- Zip Code of Residence*
- Beneficiary Sex
- Beneficiary Race
- Beneficiary Age
- Original Reason for Entitlement (OREC) Code
- Current Reason for Entitlement (CREC) Code
- ESRD Indicator
- Medicare Status Code (MSC)
- Medicare Part A Termination Code
- Medicare Part B Termination Code
- Monthly Beneficiary Medicare Entitlement/Buy-In Indicators
- Monthly Beneficiary Monthly Capitated Premium Indicators
- Monthly Plan-Value Indicators
- Monthly Denominator Cost Share Group
- Monthly Retiree Drug Subsidy Indicator
- Monthly State Reported Dual Eligible Status Code
- Month Count of Beneficiary Medicare Part A Coverage
- Month Count of Beneficiary Medicare Part B Coverage
- Month Count of Beneficiary HMO Coverage
- Month Count of Beneficiary State Buy-In Coverage
- Plan Coverage Months
- Retiree Drug Subsidy Months
- Medicaid Dual Eligible Months
- Research Triangle Institute Race Code
- Valid Date of Death Indicator
- Date of Death

Note: *On denominator file, but will not be on public use files

(SOURCE: Part D Denominator File)

Drug Characteristics being considered:

- Product's name as it appears on the labeling (trade name)
- Generic name
- Strength
- Route of administration

(SOURCE: FDA National Drug Code Directory)

Event Characteristics being considered:

- Tier on which this drug appears
- Step therapy associated with this drug on the formulary
- Prior authorization associated with this drug on the formulary
- Quantity limits associated with this drug on the formulary

(SOURCE: HPMS formulary files)