DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

CENTER FOR MEDICARE

Date: April 14, 2015

To: All MA-PD plans, 1876 Cost Plans, PACE organizations, and PDPs

From: Cheri Rice, Director
 Medicare Plan Payment Group

Subject: Incoming File from CMS: Beneficiary-level file to support 2016 Part D bids

CMS has pushed out to all MA-PD plans, 1876 Cost Plans, PACE organizations, and PDPs a beneficiary-level file that your actuaries will be using to develop 2016 Part D bids. This memo is to inform you that there may be potential action that is needed for you to accept this new file. Please also note that we posted contract-PBP level risk score data on HPMS.

The file name will be constructed as follows:

GENTRAN: P.Rxxxxx.PRTD2016.Dyymmdd.Thhmmsst.pn
C:D mainframe: zzzzzzzz.Rxxxxx.PRTD2016.Dyymmdd.Thhmmsst
C:D non-mainframe: [directory]Rxxxxx.PRTD2016.Dyymmdd.Thhmmsst

KEY
xxxxx = 5 character plan contract #
yymmdd = two digit year, month, day
hhmmsst = hour/minute/second/tenths of second
pn = process number
zzzzzzzz = Plan-provided high level qualifier, default is EFTO for production; EFTT for test
[directory] = optional directory specified from non-mainframe C:D clients, default is EFTO. for production; EFTT. for test

If you have any questions regarding the retrieval of this file, please contact the MAPD Help Desk via email at MAPDHELP@cms.hhs.gov or via phone at 1-800-927-8069. If you have questions about the content of the file, please email the CMS Risk Adjustment mailbox at RiskAdjustment@cms.hhs.gov and specify "Payment Year 2016 Risk Scores for Bidding" in the subject line.

Below is the file layout with technical notes.

Tech Notes –
Please note the following:

1. The file includes beneficiaries who were in your contract for at least one month in 2014.

2. The risk scores provided in this file are <u>not</u> normalized and your projected 2016 risk score will need to take into account the appropriate normalization factor, per the *2016 Bid Instructions*.
   The 2016 Part D normalization factor is 0.939.

3. The estimated 2014 risk score takes into account retroactive (1) enrollment and disenrollment, (2) long term institutional status, and (3) low income status that have occurred since the 2014 payments were initially made. The diagnosis data used for the risk score estimates are from calendar year 2013 dates of service (i.e., the data collection period) based on: 1) plan diagnosis data submitted through January 31, 2015 and 2) Medicare FFS diagnosis data through January 2015.

4. Final 2014 risk scores will use the same runout for plan-reported and FFS diagnoses, as well as any additional status changes that occur before the final risk score run (e.g., low income, long term institutional, disability, ESRD).

5. The 2014 Part D risk scores were calculated using both the RxHCC risk adjustment model that was used in 2014 payment and the updated RxHCC risk adjustment model that will be used in 2016 payment. The coefficients for the 2014 model are published in the 2014 *Rate Announcement*, published on April 1, 2013. The coefficients for the 2016 model are published in the 2016 *Rate Announcement*, published on April 6, 2015.

File layout & data dictionary – Part D risk scores

Field #	Field Name	Len	Pos	Description	Explanation
1	CAN/BIC	12	1-12	Beneficiary ID	A beneficiary is on the file as long as they were in the Part D contract for at least one month in 2014.
2-13	Contract ID	5 X 12	13-72	Contract ID. Array of 12 monthly fields.	Contract ID is populated for those months in the payment year for which the beneficiary was enrolled in the contract. For each month that this field is populated, the other applicable monthly fields are appropriately populated for the beneficiary. If this field is blank, then the beneficiary was not enrolled in the contract for the month in question.
14-25	Plan ID	3 X 12	73-108	Plan ID. Array of 12 monthly fields.	PBP in which the beneficiary is enrolled for the month.
26-37	Segment ID	3 X 12	109-144	Segment ID. Array of 12 monthly fields.	Segment in which the beneficiary is enrolled for the month. *MA-PDs*

					only.
38	Part D new enrollee non-LI/non-ESRD risk score, 2016 model	7.4	145-151	Beneficiary's 2014 Part D new enrollee non-LI/non-ESRD risk score, 2016 RxHCC model.	
39	Part D new enrollee LI/ non-ESRD risk score, 2016 model	7.4	152-158	Beneficiary's 2014 Part D new enrollee LI/non-ESRD risk score, 2016 RxHCC model.	
40	Part D new enrollee LTI/ non-ESRD risk score, 2016 model	7.4	159-165	Beneficiary's 2014 Part D new enrollee LTI/non-ESRD risk score, 2016 RxHCC model.	
41	Part D new enrollee non-LI/ESRD risk score, 2016 model	7.4	166-172	Beneficiary's 2014 Part D new enrollee non-LI/ESRD risk score, 2016 RxHCC model.	
42	Part D new enrollee LI/ESRD risk score, 2016 model	7.4	173-179	Beneficiary's 2014 Part D new enrollee LI/ESRD risk score, 2016 RxHCC model.	
43	Part D new enrollee LTI/ ESRD risk score, 2016 model	7.4	180-186	Beneficiary's 2014 Part D new enrollee LTI/ESRD risk score, 2016 RxHCC model.	
44	Part D LTI risk score, 2016 model	7.4	187-193	Beneficiary's 2014 Part D full risk LTI risk score, 2016 RxHCC model.	
45	Part D LI aged risk score, 2016 model	7.4	194-200	Beneficiary's 2014 Part D full risk aged/LI risk score, 2016 RxHCC model.	
46	Part D non-LI aged risk score, 2016 model	7.4	201-207	Beneficiary's 2014 Part D full risk aged/non-LI risk score, 2016 RxHCC model.	
47	Part D LI disabled risk score, 2016 model	7.4	208-214	Beneficiary's 2014 Part D full risk disabled/LI risk score, 2016 RxHCC model.	
48	Part D non-LI disabled risk score, 2016 model	7.4	215-221	Beneficiary's 2014 Part D full risk disabled/non-LI risk score, 2016 RxHCC model.	
49	Part D new enrollee non-LI/non-ESRD risk score, 2014 model	7.4	222-228	Beneficiary's 2014 Part D new enrollee non-LI/non-ESRD risk score, 2014 RxHCC model.	
50	Part D new	7.4	229-	Beneficiary's 2014 Part D new	

	enrollee LI/ non-ESRD risk score, 2014 model		235	enrollee LI/non-ESRD risk score, 2014 RxHCC model.	
51	Part D new enrollee LTI/ non-ESRD risk score, 2014 model	7.4	236-242	Beneficiary's 2014 Part D new enrollee LTI/non-ESRD risk score, 2014 RxHCC model.	
52	Part D new enrollee non-LI/ESRD risk score, 2014 model	7.4	243-249	Beneficiary's 2014 Part D new enrollee non-LI/ESRD risk score, 2014 RxHCC model.	
53	Part D new enrollee LI/ESRD risk score, 2014 model	7.4	250-256	Beneficiary's 2014 Part D new enrollee LI/ESRD risk score, 2014 RxHCC model.	
54	Part D new enrollee LTI/ ESRD risk score, 2014 model	7.4	257-263	Beneficiary's 2014 Part D new enrollee LTI/ESRD risk score, 2014 RxHCC model.	
55	Part D LTI risk score, 2014 model	7.4	264-270	Beneficiary's 2014 Part D full risk LTI risk score, 2014 RxHCC model.	
56	Part D LI aged risk score, 2014 model	7.4	271-277	Beneficiary's 2014 Part D full risk aged/LI risk score, 2014 RxHCC model.	
57	Part D non-LI aged risk score, 2014 model	7.4	278-284	Beneficiary's 2014 Part D full risk aged/non-LI risk score, 2014 RxHCC model.	
58	Part D LI disabled risk score, 2014 model	7.4	285-291	Beneficiary's 2014 Part D full risk disabled/LI risk score, 2014 RxHCC model.	
59	Part D non-LI disabled risk score, 2014 model	7.4	292-298	Beneficiary's 2014 Part D full risk disabled/non-LI risk score, 2014 RxHCC model.	
60-71	Part D – Beneficiary status	1 X 12	299-310	Array of 12monthly flags. Part D Beneficiary status codes are as follows: 1 = New Enrollee Institutional 2 = New Enrollee Low Income 3 = New Enrollee Non-Low Income 4 = Continuous Enrollment Institutional 5 = Continuous Enrollment Low Income Aged	

				6 = Continuous Enrollment Non-Low Income Aged 7 = Continuous Enrollment Low Income Disabled 8 = Continuous Enrollment Non-Low Income Disabled	
72-83	Part D – ESRD status	1 X 12	311-322	Array of 12 monthly flags. Part D ESRD status codes are as follows: 1 = Not ESRD 2 = ESRD	There is an ESRD add-on in the new enrollee risk scores in the risk adjustment model. These flags are for MA-PDs and PDPs to use in assessing the new enrollee risk score.