

Monthly Membership Detail Report Data File
Monthly Membership Detail Report Data File_V2 (3).doc 4/25/2005

#	Field Name	Len	Pos	Description
1	MCO Contract Number	5	1-5	MCO Contract Number
2	Run Date of the File	8	6-13	YYYYMMDD
3	Payment Date	6	14-19	YYYYMM
4	HIC Number	12	20-31	Member's HIC #
5	Surname	7	32-38	
6	First Initial	1	39-39	
7	Sex	1	40-40	M = Male, F = Female
8	Date of Birth	8	41-48	YYYYMMDD
9	Age Group	4	49-52	BBEE BB = Beginning Age EE = Ending Age
10	State & County Code	5	53-57	
11	Out of Area Indicator	1	58-58	Y = Out of Contract-level service area Always Spaces on Adjustment
12	Part A Entitlement	1	59-59	Y = Entitled to Part A
13	Part B Entitlement	1	60-60	Y = Entitled to Part B
14	Hospice	1	61-61	Y = Hospice
15	ESRD	1	62-62	Y = ESRD
16	Working Aged	1	63-63	Y = Working Aged
17	Institutional	1	64-64	Y = Institutional
18	NHC	1	65-65	Y = Nursing Home Certifiable
19	Medicaid	1	66-66	Y = Medicaid Status
20	FILLER	1	67-67	SPACES
21	Medicaid Indicator	1	68-68	Y = Medicaid Addon
22	PIP-DCG	2	69-70	PIP-DCG Category - Only on pre-2004 adjustments
23	Default Indicator	1	71-71	Y = default RA factor in use • For pre-2004 adjustments, a "Y" indicates that a new enrollee RA factor is in use • For post-2003 payments and adjustments, a "Y" indicates that a default factor was generated by the system due to lack of a RA factor.
24	Risk Adjuster Factor A	7	72-78	NN.DDDD
25	Risk Adjuster Factor B	7	79-85	NN.DDDD
26	Number of Paymt/Adjustmt Months Part A	2	86-87	99
27	Number of Paymt/Adjustmt Months	2	88-89	99

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	Part B			
28	Adjustment Reason Code	2	90-91	99 Always Spaces on Payment
29	Paymt/Adjustmt Start Date	8	92-99	YYYYMMDD
30	Paymt/Adjustmt End Date	8	100-107	YYYYMMDD
31	Demographic Paymt/Adjustmt Rate A	9	108-116	-\$\$\$\$\$.99
32	Demographic Paymt/Adjustmt Rate B	9	117-125	-\$\$\$\$\$.99
33	Risk Adjuster Paymt/Adjustmt Rate A	9	126-134	-\$\$\$\$\$.99
34	Risk Adjuster Paymt/Adjustmt Rate B	9	135-143	-\$\$\$\$\$.99
35	FILLER	28	144-171	SPACES
36	Risk Adjuster Age Group (RAAG)	4	172-175	BBEE BB = Beginning Age EE = Ending Age
37	Previous Disable Ratio (PRDIB)	7	176-182	NN.DDDD Percentage of Year (in months) for Previous Disable Add-On – Only on pre-2004 adjustments
38	FILLER	2	183-184	SPACES
39	Plan Benefit Package Id	3	185-187	Plan Benefit Package Id FORMAT 999
39	Race Code	1	188-188	Format X Values: 0 = Unknown 1 = White 2 = Black 3 = Other 4 = Asian 5 = Hispanic 6 = N. American Native
40	RA Factor Type Code	2	189-190	Type of factors in use (see Fields 24-25): C = Community C1 = Community Post-Graft I (ESRD) C2 = Community Post-Graft II (ESRD) D = Dialysis (ESRD) E = New Enrollee ED = New Enrollee Dialysis (ESRD) E1 = New Enrollee Post-Graft I

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				(ESRD) E2 = New Enrollee Post-Graft II (ESRD) G1 = Graft I (ESRD) G2 = Graft II (ESRD) I = Institutional I1 = Institutional Post-Graft I (ESRD) I2 = Institutional Post-Graft II (ESRD)
41	Frailty Indicator	1	191-191	Y = MCO-level Frailty Factor Included
42	Previously Disabled Indicator	1	192-192	Y = Previously Disabled – Only on post-2003 payments/adjustments
43	Lag Indicator	1	193-193	Y = Encounter data used to calculate RA factor lags payment year by 6 months
44	Segment ID	3	194-196	Identification number of the segment of the PBP. Blank if there are no segments.
45	Enrollment Source	1	197	The source of the enrollment. Values are A = Auto-enrolled by CMS, B = Beneficiary election, C = Facilitated enrollment by CMS, D = Systematic enrollment by CMS (rollover)
46	EGHP Flag	1	198	Employer Group flag; Y = member of employer group, N = member is not in an employer group
47	Part C Basic Premium – Part A Amount	6	199-204	The premium amount for determining the MA payment attributable to Part A. It is subtracted from the MA plan payment for plans that bid above the benchmark. -\$\$\$99
48	Part C Basic Premium – Part B Amount	6	205-210	The premium amount for determining the MA payment attributable to Part B. It is subtracted from the MA plan payment for plans that bid above the benchmark. -\$\$\$99
49	Rebate for Part A Cost Sharing Reduction	6	211-216	The amount of the rebate allocated to reducing the member's Part A cost-sharing. This amount is added to the MA plan payment for plans that bid below the benchmark. -\$\$\$99
50	Rebate for Part B Cost Sharing Reduction	6	217-222	The amount of the rebate allocated to reducing the member's Part B cost-

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				sharing. This amount is added to the MA plan payment for plans that bid below the benchmark. -\$\$\$99
51	Rebate for Other Part A Mandatory Supplemental Benefits	6	223-228	The amount of the rebate allocated to providing Part A supplemental benefits. This amount is added to the MA plan payment for plans that bid below the benchmark. -\$\$\$99
52	Rebate for Other Part B Mandatory Supplemental Benefits	6	229-234	The amount of the rebate allocated to providing Part B supplemental benefits. This amount is added to the MA plan payment for plans that bid below the benchmark. -\$\$\$99
53	Rebate for Part B Premium Reduction – Part A Amount	6	235-240	The Part A amount of the rebate allocated to reducing the member’s Part B premium. This amount is retained by CMS for non ESRD members and it is subtracted from ESRD member’s payments. -\$\$\$99
54	Rebate for Part B Premium Reduction – Part B Amount	6	241-246	The Part B amount of the rebate allocated to reducing the member’s Part B premium. This amount is retained by CMS for non ESRD members and it is subtracted from ESRD member’s payments. -\$\$\$99
55	Rebate for Part D Supplemental Benefits – Part A Amount	6	247–252	Part A Amount of the rebate allocated to providing Part D supplemental benefits. -\$\$\$99
56	Rebate for Part D Supplemental Benefits – Part B Amount	6	253–258	Part B Amount of the rebate allocated to providing Part D supplemental benefits. -\$\$\$99
57	Total Part A MA Payment	6	259–264	The total Part A MA payment. -\$\$\$99
58	Total Part B MA Payment	6	265–270	The total Part B MA payment. -\$\$\$99
59	Total MA Payment Amount	9	271-279	The total MA A/B payment including MMA adjustments. This also includes the Rebate Amount for Part D

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				Supplemental Benefits -\$\$\$\$.99
60	Part D RA Factor	7	280-286	The member's Part D risk adjustment factor. NN.DDDD
61	Part D Low-Income Indicator	1	287	An indicator to identify if the Part D Low-Income multiplier is included in the Part D payment. Values are 1 (subset 1), 2 (subset 2) or blank.
62	Part D Low-Income Multiplier	7	288-294	The member's Part D low-income multiplier. NN.DDDD
63	Part D Long Term Institutional Indicator	1	295	An indicator to identify if the Part D Long-Term Institutional multiplier is included in the Part D payment. Values are A (aged), D (disabled) or blank.
64	Part D Long Term Institutional Multiplier	7	296-302	The member's Part D institutional multiplier. NN.DDDD
65	Rebate for Part D Basic Premium Reduction	6	303-308	Amount of the rebate allocated to reducing the member's basic Part D premium. -\$\$\$99
66	Part D Basic Premium Amount	6	309-314	The member's Part D premium amount. -\$\$\$99
67	Part D Direct Subsidy Payment Amount	6	315-320	The total Part D Direct subsidy payment for the member. -\$\$\$99
68	Reinsurance Subsidy Amount	6	321-326	The amount of the reinsurance subsidy included in the payment. -\$\$\$99
69	Low-Income Subsidy Cost-Sharing Amount	6	327-332	The amount of the low-income subsidy cost-sharing amount included in the payment. -\$\$\$99
70	Total Part D Payment	9	333-341	The total Part D payment for the member. -\$\$\$\$.99
71	PACE Premium Add-On	6	342-347	Total Part D Pace Premium Addon amount -\$\$\$99
72	PACE Cost Sharing Add-On	6	348-353	Total Part D Pace Cost Sharing Addon amount -\$\$\$99