DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services 7500 Security Boulevard Baltimore, Maryland 21244-1850



CENTER FOR MEDICARE

DATE: April 15, 2019

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

FROM: Jennifer R. Shapiro, Acting Director, Medicare Plan Payment Group

SUBJECT: Incoming File from CMS: Beneficiary-level file to support 2020 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 2020 Part D bids. CMS pushes this data out to contracts that offer one or more Part D plans. 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.PTD2020.Dyymmdd.Thhmmsst.pn
C:D mainframe: zzzzzzzz.Rxxxxxx.PTD2020.Dyymmdd.Thhmmsst
C:D non-mainframe: [directory]P.Rxxxxxx.PTD2020.Dyymmdd.Thhmmsst

KEY

xxxxx = 5 character plan contract #
yymmdd = two digit year, month, day
hhmmsst = hour/minute/second/tenths of second
pn = process number

zzzzzzz = 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 2020 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 2018.
- 2. The 2018 Part D risk scores were calculated using both the RxHCC risk adjustment model that was used in 2018 payment and the 2020 RxHCC risk adjustment model that will be used in 2020 payment.
- 3. The relative factors for the 2018 model are available in the 2018 *Rate Announcement*, published on April 3, 2017. The relative factors for the 2020 model are available in the 2020 *Rate Announcement*, published on April 1, 2019. Rate Announcements can be found at: https://www.cms.gov/Medicare/Health-Plans/MedicareAdvtgSpecRateStats/Announcements-and-Documents.html.
- 4. We are providing the following sets of 2018 risk scores (2017 dates of service):
 - 2018 RxHCC risk adjustment model: Risk scores calculated using diagnoses from the Risk Adjustment Processing System (RAPS) and FFS claims,
 - 2018 RxHCC risk adjustment model: Risk scores calculated using diagnoses from the Encounter Data System (EDS) and FFS claims,
 - 2020 RxHCC risk adjustment model: Risk scores calculated using diagnoses from the Risk Adjustment Processing System (RAPS) and FFS claims,
 - 2020 RxHCC risk adjustment model: Risk scores calculated using diagnoses from the EDS and FFS claims, with RAPS inpatient diagnoses included as a supplement.
- 5. The risk scores provided in this file are <u>not</u> normalized. Both the 2018 and 2020 RxHCC models have a 2015 denominator. Your projected 2020 risk score will need to take into account the appropriate normalization factor, per the *2020 Bid Instructions*. The 2020 Part D normalization factor is 1.043.
- 6. The PY 2018 risk scores provided are estimated risk scores based on the 2018 Final risk score run.
 - The diagnosis data used for the risk score estimates are from calendar year 2017 dates of service (i.e., the data collection period) based on: 1) plan diagnosis data submitted to EDS and RAPS through January 31, 2019, and 2) Medicare FFS diagnosis data through January 2019.
 - The estimated 2018 risk scores take into account retroactive adjustments for (1) enrollment and disenrollment through January 2019, (2) long term institutional status through February 26, 2019, and (3) changes in low income status that have occurred since the prospective 2018 payments were made.
- 7. For the Final PY 2018 **RAPS-based risk scores**, CMS used the January 31, 2019 cutoff for diagnoses from RAPS.

- 8. For the Final PY 2018 **encounter data-based risk scores,** CMS used a January 31, 2019 cutoff for diagnoses from the EDS and plan diagnosis data submitted on RAPS inpatient records (provider types 01 and 02) for the 2020 RxHCC model scores. The diagnoses from encounter data records included in the encounter data-based scores are reflected in the Phase III version 3 MAO-004 reports.
- 9. In addition, the scores will take into account any additional status changes that occur before the final risk score run (e.g., low income, long term institutional, disability, ESRD).
- 10. For PACE organizations, Part D risk scores were calculated by pooling risk adjustment-eligible diagnoses from encounter data, RAPS, and FFS based risk scores, which is consistent with the way CMS calculates risk scores for payment for these organizations. A separate Part D risk score layout for PACE organizations is included below the Part D layout for non-PACE organizations.

File layout & data dictionary – Part D risk scores

Field #	Field Name	Len	Pos	Description	Explanation
1	MBI	11	1-11	Beneficiary ID	A beneficiary is on the file as long as they were in the Part D contract for at least one month in 2018.
2-13	Contract ID	5 X 12	12- 71	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	72- 107	Plan ID. Array of 12 monthly fields.	PBP in which the beneficiary is enrolled for the month.
26- 37	Segment ID	3 X 12	108- 143	Segment ID. Array of 12 monthly fields.	Segment in which the beneficiary is enrolled for the month. <i>MA-PDs only</i> .
38	Part D new enrollee non-LI/non- ESRD risk score, V05 (2018) model	7.4	144- 150	Beneficiary's 2018 Part D new enrollee non-LI/non- ESRD risk score, V05 (2018) RxHCC model.	
39	Part D new enrollee LI/ non-ESRD risk score, V05 (2018) model	7.4	151- 157	Beneficiary's 2018 Part D new enrollee LI/non-ESRD risk score, V05 (2018) RxHCC model.	
40	Part D new enrollee LTI/ non- ESRD risk score, V05 (2018) model	7.4	158- 164	Beneficiary's 2018 Part D new enrollee LTI/non- ESRD risk score, V05 (2018) RxHCC model.	

Field #	Field Name	Len	Pos	Description	Explanation
41	Part D new enrollee non- LI/ESRD risk score, V05 (2018) model	7.4	165- 171	Beneficiary's 2018 Part D new enrollee non-LI/ESRD risk score, V05 (2018) RxHCC model.	
42	Part D new enrollee LI/ESRD risk score, V05 (2018) model	7.4	172- 178	Beneficiary's 2018 Part D new enrollee LI/ESRD risk score, V05 (2018) RxHCC model.	
43	Part D new enrollee LTI/ ESRD risk score, V05 (2018) model	7.4	179- 185	Beneficiary's 2018 Part D new enrollee LTI/ESRD risk score, V05 (2018) RxHCC model.	
44	Part D LTI risk score, V05 (2018) model, ED/FFS	7.4	186- 192	Beneficiary's 2018 Part D full risk LTI risk score, V05 (2018) RxHCC model, ED/FFS based.	Model run with Phase 3.3 filtered Encounter data and FFS data.
45	Part D LTI risk score, V05 (2018) model, RAPS/FFS	7.4	193- 199	Beneficiary's 2018 Part D full risk LTI risk score, V05 (2018) RxHCC model, RAPS/FFS based.	Model run with RAPS data and FFS data.
46	Part D LI risk score, V05 (2018) model, ED/FFS	7.4	200- 206	Beneficiary's 2018 Part D full risk LI risk score, V05 (2018) RxHCC model, ED/FFS based.	Model run with Phase 3.3 filtered Encounter data and FFS data.
47	Part D LI risk score, V05 (2018) model, RAPS/FFS	7.4	207- 213	Beneficiary's 2018 Part D full risk LI risk score, V05 (2018) RxHCC model, RAPS/FFS based.	Model run with RAPS data and FFS data.
48	Part D non- LI risk score, V05 (2018) model, ED/FFS	7.4	214- 220	Beneficiary's 2018 Part D full risk non-LI risk score, V05 (2018) RxHCC model, ED/FFS based.	Model run with Phase 3.3 filtered Encounter data and FFS data.

Field #	Field Name	Len	Pos	Description	Explanation
49	Part D non- LI risk score, V05 (2018) model, RAPS/FFS	7.4	221- 227	Beneficiary's 2018 Part D full risk non-LI risk score, V05 (2018) RxHCC model, RAPS/FFS based.	Model run with RAPS data and FFS data.
50	Part D new enrollee non-LI/non- ESRD risk score, V05 (2020) model	7.4	228- 234	Beneficiary's 2018 Part D new enrollee non-LI/non- ESRD risk score, V05 (2020) RxHCC model.	
51	Part D new enrollee LI/ non-ESRD risk score, V05 (2020) model	7.4	235- 241	Beneficiary's 2018 Part D new enrollee LI/non-ESRD risk score, V05 (2020) RxHCC model.	
52	Part D new enrollee LTI/ non- ESRD risk score, V05 (2020) model	7.4	242- 248	Beneficiary's 2018 Part D new enrollee LTI/non- ESRD risk score, V05 (2020) RxHCC model.	
53	Part D new enrollee non- LI/ESRD risk score, V05 (2020) model	7.4	249- 255	Beneficiary's 2018 Part D new enrollee non-LI/ESRD risk score, V05 (2020) RxHCC model.	
54	Part D new enrollee LI/ESRD risk score, V05 (2020) model	7.4	256- 262	Beneficiary's 2018 Part D new enrollee LI/ESRD risk score, V05 (2020) RxHCC model.	
55	Part D new enrollee LTI/ ESRD risk score, V05 (2020) model	7.4	263- 269	Beneficiary's 2018 Part D new enrollee LTI/ESRD risk score, V05 (2020) RxHCC model.	

Field #	Field Name	Len	Pos	Description	Explanation
56	Part D LTI risk score, V05 (2020) model, ED/FFS/ Inpatient RAPS	7.4	270- 276	Beneficiary's 2018 Part D full risk LTI risk score, V05 (2020) RxHCC model, ED/FFS/Inpatient RAPS based.	Model run with Phase 3.3 filtered Encounter data, FFS data, and Inpatient RAPS data.
57	Part D LTI risk score, V05 (2020) model, RAPS/FFS	7.4	277- 283	Beneficiary's 2018 Part D full risk LTI risk score, V05 (2020) RxHCC model, RAPS/FFS based.	Model run with RAPS data and FFS data.
58	Part D LI risk score, V05 (2020) model, ED/FFS/ Inpatient RAPS	7.4	284- 290	Beneficiary's 2018 Part D full risk LI risk score, V05 (2020) RxHCC model, ED/FFS/Inpatient RAPS based.	Model run with Phase 3.3 filtered Encounter data, FFS data, and Inpatient RAPS data.
59	Part D LI risk score, V05 (2020) model, RAPS/FFS	7.4	291- 297	Beneficiary's 2018 Part D full risk LI risk score, V05 (2020) RxHCC model, RAPS/FFS based.	Model run with RAPS data and FFS data.
60	Part D non- LI risk score, V05 (2020) model, ED/FFS/ Inpatient RAPS	7.4	298- 304	Beneficiary's 2018 Part D full risk non-LI risk score, V05 (2020) RxHCC model, ED/FFS/Inpatient RAPS based.	Model run with Phase 3.3 filtered Encounter data, FFS data, and Inpatient RAPS data.
61	Part D non- LI risk score, V05 (2020) model, RAPS/FFS	7.4	305- 311	Beneficiary's 2018 Part D full risk non-LI risk score, V05 (2020) RxHCC model, RAPS/FFS based.	Model run with RAPS data and FFS data.
62- 73	Part D – Beneficiary status	1 X 12	312- 323	Array of 12 monthly flags. Part D Beneficiary status codes are as follows: 1 = New Enrollee Institutional	

Field	Field Name	Len	Pos	Description	Explanation
#				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	
74- 85	Part D – ESRD status	1 X 12	324- 335	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.
86	Aged Status	1	336	Beneficiary's Aged Status 1=Aged 0=Disabled	Age calculated as of February 1, 2018.

File layout & data dictionary – Part D risk scores (PACE organizations)

Field #	Field Name	Len	Pos	Description	Explanation
1	MBI	11	1-11	Beneficiary ID	A beneficiary is on the file as long as they were in the Part D contract for at least one month in 2018.
2-13	Contract ID	5 X 12	12- 71	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	72- 107	Plan ID. Array of 12 monthly fields.	PBP in which the beneficiary is enrolled for the month.
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55	Part D non- LI risk score, V05 (2020) RxHCC model	7.4	263- 269	Beneficiary's 2018 Part D full risk non-LI risk score, V05 (2020) RxHCC model.	Model run with Phase 3.3 filtered Encounter data, RAPS data, and FFS data.
56- 67	Part D – Beneficiary status	1 X 12	270- 281	Array of 12 monthly 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	

Field	Field Name	Len	Pos	Description	Explanation
#					
68-	Part D –	1 X	282-	Array of 12 monthly flags.	There is an ESRD add-on in
79	ESRD	12	293		the new enrollee risk scores in
	status			Part D ESRD status codes	the risk adjustment model.
				are as follows:	These flags are for MA-PDs
					and PDPs to use in assessing
				1 = Not ESRD	the new enrollee risk score.
				2 = ESRD	
80	Aged Status	1	294	Beneficiary's Aged Status	Age calculated as of February
					1, 2018.
				1=Aged	
				0=Disabled	