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 Medicare Advantage Organizations and Section 1876 Cost Contractors

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

SUBJECT: Incoming Files from CMS: beneficiary-level file to support 2020 Part C bids & ESRD Risk Scores

CMS has pushed out to all Medicare Advantage Organizations a beneficiary level file that your actuaries will be using to develop 2020 Part C 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 in HPMS.

The file names will be constructed as follows:

Part C file name:

GENTRAN: P.Rxxxxx.PTC2020.Dyymmdd.Thhmmsst.pn
C:D mainframe: zzzzzzz.Rxxxxxx.PTC2020.Dyymmdd.Thhmmsst
C:D non-mainframe: [directory]P.Rxxxxx.PTC2020.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

ESRD file name:

GENTRAN: P.Rxxxxx.ESR2020.Dyymmdd.Thhmmsst.pn
C:D mainframe: zzzzzzzz.Rxxxxxx.ESR2020.Dyymmdd.Thhmmsst
C:D non-mainframe: [directory]P.Rxxxxxx.ESR2020.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.

<u>Tech Notes – </u>

Please note the following:

- 1. The file includes all beneficiaries who were enrolled in your contract for at least one month in 2018, including beneficiaries with Part A only or Part B only.
- 2. The PY 2018 Part C risk scores were calculated using two CMS-HCC risk adjustment models:
 - The 2017 CMS-HCC model used to calculate the risk scores used for 2017 through 2020 payment.
 - The 2020 CMS-HCC model, to be used in payment in 2020.
- 3. We are providing the following sets of 2018 risk scores (2017 dates of service):
 - 2017 CMS-HCC risk adjustment model: Risk scores calculated using diagnoses from the Risk Adjustment Processing System (RAPS) and FFS claims,
 - 2017 CMS-HCC risk adjustment model: Risk scores calculated using diagnoses from the Encounter Data System (EDS) and FFS claims, and
 - 2020 CMS-HCC risk adjustment model: Risk scores calculated using diagnoses from the EDS, FFS claims, with RAPS inpatient diagnoses included as a supplement.
- 4. The relative factors for the 2020 CMS-HCC risk adjustment model are published in the 2020 *Rate Announcement*, published on April 1, 2019. The relative factors for the 2017 CMS-HCC risk adjustment model are published in the 2017 *Rate Announcement*, published on April 4, 2016. Rate Announcements can be found at: https://www.cms.gov/Medicare/Health-Plans/MedicareAdvtgSpecRateStats/Announcements-and-Documents.html.
- 5. The risk scores are <u>not</u> normalized and do <u>not</u> have an MA coding adjustment factor applied.
 - The 2020 CMS-HCC model has a 2015 denominator and the 2017 CMS-HCC model has a 2015 denominator. Instructions for how to appropriately incorporate the normalization factor and the MA coding adjustment factor will be included in the 2020 Bid Instructions. The PY 2020 Part C normalization factors are as follows:
 - o 2017 CMS-HCC risk adjustment model: 1.075
 - o 2020 CMS-HCC risk adjustment model: 1.069
- 6. The PY 2018 risk scores provided are estimated risk scores.
 - 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 2017 risk scores take into account (1) retroactive enrollment and

disenrollment through January 2019, (2) long term institutional status through February 26, 2019, and (3) Medicaid status updates through January 2019.

- 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 CMS-HCC 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 final scores will take into account any additional status changes that occur before the final risk score run (e.g., Medicaid, long term institutional, disability, ESRD).
- 10. Organizations should determine which risk scores apply for a month by determining the beneficiary's status for that month, using the "Part C Beneficiary status field."
- 11. For full risk community beneficiaries, estimated risk scores calculated using the 2017 CMS-HCC model and 2020 CMS-HCC model are based on monthly Medicaid status in the payment year. The data provided in the beneficiary-level file provides the Medicaid statuses to be used to select the appropriate risk score for a month for community beneficiaries (fields 38-49 in the layout). Given a beneficiary's aged versus disabled status for 2018 (determined by their age as of February 1, 2018), we provide their three possible community risk scores for the year, reflecting either nondual, full benefit (FB) dual, or partial benefit (PB) dual status. For each month in the payment year, a community beneficiary will have risk scores (an encounter databased risk score and a RAPS-based risk score) selected among the three community statuses (i.e., non-dual, PB dual, and FB dual).
- 12. Chronic Condition SNPs (C-SNPs) For 2020, all Medicare Advantage Organizations will receive beneficiary-level files that include C-SNP new enrollee scores. Organizations that do not operate C-SNPs can disregard the C-SNP new enrollee risk scores.

ESRD Risk Scores

- 13. In addition to providing risk scores for ESRD-SNPs, CMS is providing ESRD scores for all organizations that enrolled ESRD beneficiaries in 2018. Risk scores are being provided for ESRD-SNPs to support bidding for 2020. For non ESRD-SNPs, CMS is providing risk scores for informational purposes. The layout for ESRD risk scores is provided below the CMS-HCC aged/disabled model layout.
- 14. The PY 2018 ESRD risk scores (2017 dates of service) were calculated using the following ESRD risk adjustment models:
 - The 2012 ESRD model used to calculate the risk scores used for payment in 2017 and 2018.
 - The 2019 ESRD model used to calculate the risk scores used for payment in 2019

- The 2020 ESRD model, to be used in payment in 2020
- 15. We are providing the following sets of 2018 risk scores (2017 dates of service):
 - 2012 ESRD risk adjustment model: Risk scores calculated using diagnoses from the Risk Adjustment Processing System (RAPS) and FFS claims,
 - 2012 ESRD risk adjustment model: Risk scores calculated using diagnoses from the Encounter Data System and FFS claims, and
 - 2019 ESRD risk adjustment model: Risk score calculated using diagnoses from the Risk Adjustment Processing System (RAPS) and FFS claims,
 - 2020 ESRD risk adjustment model: Risk scores calculated using diagnoses from the Encounter Data System (EDS), FFS claims, with RAPS inpatient diagnoses included as a supplement.
- 16. The relative factors for the 2020 ESRD risk adjustment model are published in the 2020 *Rate Announcement*, published on April 1, 2019. The relative factors for the 2019 ESRD risk adjustment model are published in the 2019 *Rate Announcement*, published on April 2, 2018. The relative factors for the 2012 ESRD risk adjustment model are published in the 2012 *Rate Announcement*, published on April 4, 2011.
- 17. The risk scores are <u>not</u> normalized and do <u>not</u> have an MA coding adjustment factor applied.
 - The 2019 and 2020 ESRD models have a 2015 denominator and the 2012 ESRD model has a 2007 denominator. The PY 2020 ESRD normalization factors are as follows:

o 2020 ESRD Dialysis model: 1.059

o 2020 ESRD Functioning Graft model: 1.084

File layout & data dictionary – Part C risk scores

Field #	Field Name	Len	Position	Description	Explanation
1	MBI	11	1-11	Beneficiary ID	A beneficiary is on the file as long as they were in the Part C 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.

Field #	Field Name	Len	Position	Description	Explanation
38-49	Medicaid status	2 X 12	144-167	Medicaid status for the month. Array of 12 monthly fields. Medicaid status codes are as follows: 01 = QMB-only 02 = Eligible is entitled to Medicare- QMB AND Medicaid coverage 03 = Eligible is entitled to Medicare- SLMB only 04 = Eligible is entitled to Medicare- SLMB AND Medicaid coverage 05 = Eligible is entitled to Medicare- QDWI 06 = Eligible is entitled to Medicare- Qualifying individuals 08 = Full benefit dual eligible (non-SLMB, non-QMB) 09 = Other dual eligible without full Medicaid benefits, e.g., Pharmacy Plus and 1115 drug-only demonstrations 10 = Other full dual 99 = Medicaid, but unknown status Blank = Not a dual eligible	Medicaid status indicates status for each month in 2018. The information in this field is intended to assist plans in developing the cost sharing in their Part C bids. Notes: • For the community risk scores under the 2017 model and 2020 model, full benefit status is assigned for a month if the beneficiary's dual status code is 02, 04, 08, or 10 ("Other full dual" status indicates that the beneficiary was Medicaid eligible per the Puerto Rico file or based on data from another Territory for the month). Partial benefit status is assigned for a month if the dual status code is 01, 03, 05 and 06.
50	Part C community Non Dual risk score, 2017 CMS-HCC model, ED/FFS	7.4	168-174	Beneficiary's 2018 community Non Dual risk score, 2017 CMS-HCC model, ED/FFS based.	Model run with Phase 3.3 filtered Encounter data and FFS data for diagnosis inputs.

Field #	Field Name	Len	Position	Description	Explanation
51	Part C community Non Dual risk score, 2017 CMS-HCC model, RAPS/FFS	7.4	175-181	Beneficiary's 2018 community Non Dual risk score, 2017 CMS-HCC model, RAPS/FFS based.	Model run with RAPS data and FFS data.
52	Part C community Full Benefit Dual risk score, 2017 CMS-HCC model, ED/FFS	7.4	182-188	Beneficiary's 2018 community Full Benefit Dual risk score, 2017 CMS-HCC model, ED/FFS based.	Model run with Phase 3.3 filtered Encounter data and FFS data.
53	Part C community Full Benefit Dual risk score, 2017 CMS-HCC model, RAPS/FFS	7.4	189-195	Beneficiary's 2018 community Full Benefit Dual risk score, 2017 CMS-HCC model, RAPS/FFS based.	Model run with RAPS data and FFS data.
54	Part C community Partial Benefit Dual risk score, 2017 CMS-HCC model, ED/FFS	7.4	196-202	Beneficiary's 2018 community Partial Benefit Dual risk score, 2017 CMS-HCC model, ED/FFS based.	Model run with Phase 3.3 filtered Encounter data and FFS data.
55	Part C community Partial Benefit Dual risk score, 2017 CMS-HCC model, RAPS/FFS	7.4	203-209	Beneficiary's 2018 community Partial Benefit Dual risk score, 2017 CMS-HCC model, RAPS/FFS based.	Model run with RAPS data and FFS data.
56	Part C institutional risk score, 2017 CMS-HCC model, ED/FFS	7.4	210-216	Beneficiary's 2018 institutional score, 2017 CMS-HCC model, ED/FFS based.	Model run with Phase 3.3 filtered Encounter data and FFS data.
57	Part C institutional risk score, 2017 CMS-HCC model, RAPS/FFS	7.4	217-223	Beneficiary's 2018 institutional risk score, 2017 CMS-HCC model, RAPS/FFS based.	Model run with RAPS data and FFS data.

Field #	Field Name	Len	Position	Description	Explanation
58	Part C new enrollee risk score, 2017 CMS-HCC model	7.4	224-230	Beneficiary's 2018 new enrollee risk score, 2017 CMS-HCC model.	
59	Part C SNP new enrollee risk score, 2017 CMS-HCC model	7.4	231-237	Beneficiary's 2018 C- SNP new enrollee risk score, 2017 CMS-HCC model.	
60	Part C community Non Dual risk score, 2020 CMS-HCC model, ED/FFS/Inpatient RAPS	7.4	238-244	Beneficiary's 2018 community Non Dual risk score, 2020 CMS-HCC model, ED/FFS/Inpatient RAPS based.	Model run with Phase 3.3 filtered Encounter data, FFS data, and Inpatient RAPS data.
61	Part C community Full Benefit Dual risk score, 2020 CMS-HCC model, ED/FFS/Inpatient RAPS	7.4	245-251	Beneficiary's 2018 community Full Benefit Dual risk score, 2020 CMS-HCC model, ED/FFS/Inpatient RAPS based.	Model run with Phase 3.3 filtered Encounter data, FFS data, and Inpatient RAPS data.
62	Part C community Partial Benefit Dual risk score, 2020 CMS-HCC model, ED/FFS/Inpatient RAPS	7.4	252-258	Beneficiary's 2018 community Partial Benefit Dual risk score, 2020 CMS-HCC model, ED/FFS/Inpatient RAPS based.	Model run with Phase 3.3 filtered Encounter data, FFS data, and Inpatient RAPS data.
63	Part C institutional risk score, 2020 CMS-HCC model, ED/FFS/Inpatient RAPS	7.4	259-265	Beneficiary's 2018 institutional score, 2020 CMS-HCC model, ED/FFS/Inpatient RAPS based.	Model run with Phase 3.3 filtered Encounter data, FFS data, and Inpatient RAPS data.
64	Part C new enrollee risk score, 2020 CMS-HCC model	7.4	266-272	Beneficiary's 2018 new enrollee risk score, 2020 CMS-HCC model.	

Field	Field Name	Len	Position	Description	Explanation
#					
65	Part C SNP new	7.4	273-279	Beneficiary's 2018 C-	
	enrollee risk			SNP new enrollee risk	
	score,			score, 2020 CMS-HCC	
	2020 CMS-HCC			model.	
	model				
66-77	Part C	1 X	280-	Array of 12 monthly	Part C beneficiary status
	Beneficiary	12	291	flags.	indicates which risk scores
	status				were used in the respective
				Part C Beneficiary status	month. Beneficiary status
				codes are as follows:	is coded in the hierarchy as
					listed here. ESRD risk
				1 = ESRD	score is not provided for
				2 = Hospice	those months when the
				3 = New enrollee	beneficiary is ESRD, since
				4 = Institutional	plans do not bid on ESRD
				5 = Community full-	months. A separate file
				benefit dual	with ESRD risk scores will
				6 = Community partial-	be provided.
				benefit dual	1
				7 = Community non-dual	
78	Aged Status	1	292	Beneficiary's Aged Status	Age calculated as of
					February 1, 2018.
				1=Aged	
				0=Disabled	

File layout & data dictionary – ESRD 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 C contract and ESRD 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 #	Field Name	Len	Pos	Description	Explanation
n e					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.
38	Part C kidney transplant first month risk score, 2012 CMS-HCC V21 ESRD model	7.4	144- 150	Beneficiary's 2018 kidney transplant first month risk score, 2012 CMS-HCC V21 ESRD model.	
39	Part C kidney transplant second and third month risk score, 2012 CMS-HCC V21 ESRD model	7.4	151- 157	Beneficiary's 2018 kidney transplant second and third month risk score, 2012 CMS-HCC V21 ESRD model.	
40	Part C new enrollee dialysis risk score, 2012 CMS-HCC V21 ESRD model	7.4	158- 164	Beneficiary's 2018 new enrollee dialysis risk score, 2012 CMS-HCC V21 ESRD model.	
41	Part C new enrollee post graft 4 to 9 month risk score, 2012 CMS-HCC V21 ESRD model	7.4	165- 171	Beneficiary's 2018 new enrollee post graft 4 to 9 months risk score, 2012 CMS-HCC V21 ESRD model.	
42	Part C new enrollee post graft 10 or more months risk score, 2012 CMS-HCC V21 ESRD model	7.4	172- 178	Beneficiary's 2018 new enrollee post graft 10 or more months risk score, 2012 CMS-HCC V21 model ESRD model.	
43	Part C dialysis risk score, 2012 CMS-HCC V21 ESRD model,	7.4	179- 185	Beneficiary's 2018 dialysis risk score, 2012 CMS-HCC V21 ESRD model, ED/FFS based.	Model run with Phase 3.3 filtered Encounter data and FFS.

Field #	Field Name	Len	Pos	Description	Explanation
	ED/FFS				
44	Part C dialysis risk score, 2012 CMS-HCC V21 ESRD model, RAPS/FFS	7.4	186- 192	Beneficiary's 2018 dialysis risk score, 2012 CMS-HCC V21 ESRD model, RAPS/FFS based.	Model run with RAPS data and FFS data.
45	Part C institutional post graft 4 to 9 month risk score, 2012 CMS-HCC V21 ESRD model, ED/FFS	7.4	193- 199	Beneficiary's 2018 institutional post graft 4 to 9 month risk score, 2012 CMS-HCC V21 ESRD model, ED/FFS based.	Model run with Phase 3.3 filtered Encounter data and FFS data.
46	Part C institutional post graft 4 to 9 month risk score, 2012 CMS-HCC V21 ESRD model, RAPS/FFS	7.4	200- 206	Beneficiary's 2018 institutional post graft 4 to 9 month risk score, 2012 CMS-HCC V21 ESRD model, RAPS/FFS based.	Model run with RAPS data and FFS data.
47	Part C institutional post graft 10 or more months risk score, 2012 CMS-HCC V21 ESRD model, ED/FFS	7.4	207-213	Beneficiary's 2018 institutional post graft 10 or more months risk score, 2012 CMS-HCC V21 ESRD model, ED/FFS based.	Model run with Phase 3.3 filtered Encounter data and FFS data.
48	Part C institutional post graft 10 or more months risk score, 2012 CMS-HCC V21 ESRD model, RAPS/FFS	7.4	214- 220	Beneficiary's 2018 institutional post graft 10 or more months risk score, 2012 CMS-HCC V21 ESRD model, RAPS/FFS based.	Model run with RAPS data and FFS data.
49	Part C community post graft 4 to 9 month risk score, 2012 CMS-HCC V21 ESRD model, ED/FFS	7.4	221- 227	Beneficiary's 2018 community post graft 4 to 9 month risk score, 2012 CMS-HCC V21 ESRD model, ED/FFS based.	Model run with Phase 3.3 filtered Encounter data and FFS data.

Field #	Field Name	Len	Pos	Description	Explanation
50	Part C community post graft 4 to 9 month risk score, 2012 CMS-HCC V21 ESRD model, RAPS/FFS	7.4	228- 234	Beneficiary's 2018 community post graft 4 to 9 month risk score, 2012 CMS-HCC V21 ESRD model, RAPS/FFS based.	Model run with RAPS data and FFS data.
51	Part C community post graft 10 or more months risk score, 2012 CMS-HCC V21 ESRD model, ED/FFS	7.4	235- 241	Beneficiary's 2018 community post graft 10 or more months risk score, 2012 CMS-HCC ESRD model, ED/FFS based.	Model run with Phase 3.3 filtered Encounter data and FFS data.
52	Part C community post graft 10 or more months risk score, 2012 CMS-HCC V21 ESRD model, RAPS/FFS	7.4	242- 248	Beneficiary's 2018 community post graft 10 or more months risk score, 2012 CMS-HCC V21 ESRD model, RAPS/FFS based.	Model run with RAPS data and FFS data.
53	Part C kidney transplant first month risk score, 2019 CMS-HCC V21 ESRD model	7.4	249- 255	Beneficiary's 2018 kidney transplant first month risk score, 2019 CMS-HCC V21 ESRD model	
54	Part C kidney transplant second and third month risk score, 2019 CMS-HCC V21 ESRD model	7.4	256- 262	Beneficiary's 2018 kidney transplant second and third month risk score, 2019 CMS-HCC V21 ESRD model	
55	Part C new enrollee dialysis risk score, 2019 CMS-HCC V21 ESRD model	7.4	263- 269	Beneficiary's 2018 new enrollee dialysis risk score, 2019 CMS-HCC V21 ESRD model	
56	Part C new enrollee post graft 4 to 9 month risk score,	7.4	270- 276	Beneficiary's 2018 new enrollee post graft 4 to 9 months risk score, 2019 CMS-HCC V21 ESRD	

Field #	Field Name	Len	Pos	Description	Explanation
	2019 CMS-HCC V21 ESRD model			model	
57	Part C new enrollee post graft 10 or more months risk score, 2019 CMS-HCC V21 ESRD model	7.4	277- 283	Beneficiary's 2018 new enrollee post graft 10 or more months risk score, 2019 CMS-HCC V21 ESRD model	
58	Part C dialysis risk score, 2019 CMS-HCC V21 ESRD model, RAPS /FFS	7.4	284- 290	Beneficiary's 2018 dialysis risk score, 2019 CMS-HCC V21 ESRD model, RAPS/FFS based.	Model run with RAPS data and FFS data.
59	Part C institutional post graft 4 to 9 month risk score, 2019 CMS-HCC V21 ESRD model, RAPS/FFS	7.4	291- 297	Beneficiary's 2018 institutional post graft 4 to 9 month risk score, 2019 CMS-HCC V21 ESRD model, RAPS/FFS based.	Model run with RAPS data and FFS data.
60	Part C institutional post graft 10 or more months risk score, 2019 CMS-HCC V21 ESRD model, RAPS/FFS	7.4	298- 304	Beneficiary's 2018 institutional post graft 10 or more months risk score, 2019 CMS-HCC V21 ESRD model, RAPS/FFS based.	Model run with RAPS data and FFS data.
61	Part C community post graft 4 to 9 month risk score, 2019 CMS-HCC V21 ESRD model, RAPS/FFS	7.4	305- 311	Beneficiary's 2018 community post graft 4 to 9 month risk score, 2019 CMS-HCC V21 ESRD model, RAPS/FFS based.	Model run with RAPS data and FFS data.
62	Part C community post graft 10 or more months risk score, 2019 CMS-HCC V21	7.4	312- 318	Beneficiary's 2018 community post graft 10 or more months risk score, 2019 CMS-HCC V21 ESRD model, RAPS/FFS based.	Model run with RAPS data and FFS data.

Field #	Field Name	Len	Pos	Description	Explanation
	ESRD model, RAPS/FFS				
63	Part C kidney transplant first month risk score, 2020 CMS-HCC ESRD model	7.4	319- 325	Beneficiary's 2018 kidney transplant first month risk score, 2020 CMS-HCC ESRD model	
64	Part C kidney transplant second and third month risk score, 2020 CMS-HCC ESRD model	7.4	326- 332	Beneficiary's 2018 kidney transplant second and third month risk score, 2020 CMS-HCC ESRD model	
65	Part C new enrollee dialysis risk score, 2020 CMS-HCC ESRD model	7.4	333- 339	Beneficiary's 2018 new enrollee dialysis risk score, 2020 CMS-HCC ESRD model	
66	Part C new enrollee post graft 4 to 9 month risk score, 2020 CMS-HCC ESRD model	7.4	340- 346	Beneficiary's 2018 new enrollee post graft 4 to 9 months risk score, 2020 CMS-HCC ESRD model	
67	Part C new enrollee post graft 10 or more months risk score, 2020 CMS-HCC ESRD model	7.4	347- 353	Beneficiary's 2018 new enrollee post graft 10 or more months risk score, 2020 CMS-HCC ESRD model	
68	Part C dialysis risk score, 2020 CMS-HCC ESRD model, ED/FFS/Inpatient RAPS	7.4	354- 360	Beneficiary's 2018 dialysis risk score, 2020 CMS-HCC ESRD model, ED/FFS/Inpatient RAPS based.	Model run with Phase 3.3 filtered Encounter data, FFS data, and Inpatient RAPS data.
69	Part C institutional post graft 4 to 9 month risk score, 2020 CMS-HCC ESRD model, ED/FFS/ Inpatient RAPS	7.4	361- 367	Beneficiary's 2018 institutional post graft 4 to 9 month risk score, 2020 CMS-HCC ESRD model, ED/FFS Inpatient RAPS based.	Model run with Phase 3.3 filtered Encounter data, FFS data, and Inpatient RAPS data.

Field #	Field Name	Len	Pos	Description	Explanation
70	Part C institutional post graft 10 or more months risk score, 2020 CMS-HCC ESRD model, ED/FFS/ Inpatient RAPS	7.4	368- 374	Beneficiary's 2018 institutional post graft 10 or more months risk score, 2020 CMS-HCC ESRD model, ED/FFS Inpatient RAPS based.	Model run with Phase 3.3 filtered Encounter data, FFS data, and Inpatient RAPS data.
71	Part C community post graft 4 to 9 month risk score, 2020 CMS-HCC ESRD model, ED/FFS/ Inpatient RAPS	7.4	375- 381	Beneficiary's 2018 community post graft 4 to 9 month risk score, 2020 CMS-HCC ESRD model, ED/FFS Inpatient RAPS based.	Model run with Phase 3.3 filtered Encounter data, FFS data, and Inpatient RAPS data.
72	Part C community post graft 10 or more months risk score, 2020 CMS-HCC ESRD model, ED/FFS/ Inpatient RAPS	7.4	382- 388	Beneficiary's 2018 community post graft 10 or more months risk score, 2020 CMS-HCC ESRD model, ED/FFS Inpatient RAPS based.	Model run with Phase 3.3 filtered Encounter data, FFS data, and Inpatient RAPS data.
73- 84	Part C Beneficiary status	2 X 12	389- 412	Array of 12 monthly flags. Part C Beneficiary status codes are as follows: 1 = Enrolled in a MA contract but not ESRD or Hospice 2 = Hospice 3 = Transplant kidney Only (Month 1) 4 = Transplant kidney Only (Month 2 and 3) 5 = New enrollee Dialysis 6 = New enrollee post graft (4-9 months) 7 = New enrollee post graft (10 or more months) 8 = Dialysis	Part C beneficiary status indicates which risk scores were used in the respective month. Beneficiary status is coded in the hierarchy as listed here. Non-ESRD risk scores are not provided for those months when the beneficiary is not ESRD.

Field	Field Name	Len	Pos	Description	Explanation
#				_	
				9 = Institutional post graft	
				(4-9 months)	
				10 = Institutional post	
				graft (10 or more months)	
				11 = Community post	
				graft (4-9 months)	
				12 = Community Post	
				graft (10 or more months)	
85	Aged Status	1	413	Beneficiary's Aged Status	Age calculated as of
					February 1, 2018.
				1=Aged	
				0=Disabled	