The following is an overview of software for the Version 21 CMS-HCC risk-adjustment model. The software includes a SAS program - **V2117H1P** that calls several SAS Macros to create HCC score variables using coefficients from the following regression models:

- Community
- Institutional
- New enrollee.

# Software description

The software consists of a main program V2117H1P that supplies user parameters to the main SAS Macro program V2117H1M. This macro program reads in two input files and assigns HCCs for each person. First, the program crosswalks diagnoses to Condition Categories (CCs) using SAS formats which were previously stored in the FORMAT library. Then the program creates Hierarchical Condition Categories (HCCs) by imposing hierarchies on the CCs. For persons without claims, zeros are assigned to all HCCs. After HCCs are created the program computes predicted scores from 3 regression models.

The main macro V2117H1M uses 5 external SAS Macro programs:

- %AGESEXV2 create age/sex, originally disabled, disabled variables
- %V21I0ED2 perform edits to ICD10 codes
- %V20H87L1 assign labels to HCCs
- %V20H87H1 set HCC=0 according to hierarchies
- %SCOREVAR calculate a score variable

The main program, main macro and 5 external macros have a .txt extension to make the files easier to view. Please rename them to have .sas extension before running the software.

Steps performed by the software:

step1: include external macros

step2: define internal macro variables

step3: merge person and diagnosis files outputting one record per person for each input person level record

step3.1: declaration section

step3.2: bring in regression coefficients

- step3.3: merge person and diagnosis files
- step3.4: for the first record for a person set CC
- to 0 and create person's age  $\,$
- step3.5: if there are any diagnoses for a person then do the following:
- perform diagnosis edits using macro V21I0ED2
- create CC using format provided in format library
- create additional CC using additional formats provided in format library
- step3.6: for the last record for a person do the following:
- create demographic variables needed for score calculation (macro AGESEXV2)
- create HCC using hierarchies (macro V20H87H1)
- create HCC interaction variables
- create HCC and disabled interaction variables
- set HCCs and interaction vars to zero if there are no diagnoses for a person
- create score for community model
- create score for institutional model
- create score for new enrollee model
- step4: data checks and proc contents

### PART 1. Files supplied by the software.

The following SAS programs and files are included in this software:

- **V2117H1P** main program that has all the parameters supplied by a user (see below for parameter and variable list). It calls main macro V2117H1M
- **V2117H1M** main macro that creates HCC and SCORE variables by calling other external macros
- AGESEXV2 create age/sex, originally disabled, disabled variables
- **V21I0ED2** performs edits to ICD10 code. Medicare Code Editor (MCE) is source of edits.
- **V20H87L1** assigns labels to HCCs
- **V20H87H1** sets HCC=0 according to hierarchies
- SCOREVAR calculates a score variable
- F2117H1R.TXT a txt version of the format that has a cross-walk from ICD10 codes to V21 CC categories (use for reference only). This format contains ICD10 codes valid in FY2016/FY2017.

- F2117H1R format library containing all the formats for the software.
- C2110H2R- relative coefficients for 3 regression models created on CY2006/2007 data using the CMS denominator 8034.71 (1/18/2010).

Format library and coefficients file are SAS transport files, which may be used on any platform running SAS, after uploading and converting using PROC CIMPORT. Users should use the following code to convert them.

Code for converting coefficients transport file to SAS file:

**filename** inc "C:\user defined location of the transport file\C2110H2R";

libname incoef "C:\user defined location of the sas
coefficients file";

proc cimport data=incoef.hcccoefn infile=inc;
run;

Code for converting formats transport file to SAS file: **filename** inf "C:\user defined location of the transport file\F2117H1R";

libname library "C:\user defined location of the sas
formats file";

proc cimport library=library infile=inf;
run;

If you are operating in an MVS - z/OS environment, the transport files should be uploaded using the following parameters:

RECFM(F or FB) LRECL(80) BLKSIZE(8000)

### PART 2. Files supplied by a user.

Two SAS input files needed for the software must be presorted in ascending order by the person ID variable

- 1) **PERSON** file--a person-level file of demographic and enrollment information
- 2) **DIAG** file--a diagnosis-level input file of diagnoses

Data requirements for the SAS input files. The variable names listed are required by the programs as written:

### 1) **PERSON** file

• **HICNO** (or other person identification variable. It must be set in the macro variable IDVAR)
-character or numeric type and unique to an individual

#### SEX

-one character, 1=male; 2=female

#### DOB

- SAS date format, date of birth

#### MCAID

-numeric, =1 if number of months in Medicaid in base year >0,

=0 otherwise

### • NEMCAID

-numeric, =1 if a new Medicare enrollee and number of
months in Medicaid in payment year >0;
=0 otherwise

### OREC

-one character, original reason for entitlement with the following values:

0 - OLD AGE (OASI)

1 - DISABILITY (DIB)

2 - ESRD

3 - BOTH DIB AND ESRD

- 2) **DIAG** file--a diagnosis file with at least one record per person-specific unique diagnosis.
  - **HICNO** (or other person identification variable that must be the same as in PERSON file)
    - Person identifier of character or numeric type and unique to an individual

#### • DIAG

- Diagnosis code, 7 character field, no periods, left justified. The user may include all diagnoses or limit the codes to those used by the model. Codes should be to the greatest level of available

specificity. Diagnoses should be included **only** from acceptable sources, depending on whether you are using RAPS submission or encounter data.

## Part 3. Parameters supplied by a user:

NOTE: All user-supplied parameters should be reentered by the user. The default settings are examples only, and should not be used.

The user must supply the following:

- INP SAS input person dataset name
- IND SAS input diagnosis dataset name
- OUTDATA SAS output dataset name
- IDVAR name of person identifier variable (HICNO for Medicare data)
- **KEEPVAR** variables kept in the output dataset. There is a list of KEEP variables in the program, but the user can alter the list.
- **SEDITS** a switch that controls whether to perform edits on ICD10

1-YES, 0-NO

• DATE\_ASOF - reference date to calculate age. Set to February 1 of the payment year for consistency with CMS.

### Part 4. Variables output by the software.

The software outputs a person level file. Any variables that the user wants to keep in it should be specified in the main program **V2117H1P** in **KEEPVAR** parameter of macro **V2117H1M** call. The following variables can be specified:

- Any person level variables from the original person level file
- 2) Demographic variables created by the software:

AGEF ORIGDS DISABL

F0\_34 F35\_44 F45\_54 F55\_59 F60\_64 F65\_69 F70\_74 F75\_79 F80\_84 F85\_89 F90\_94 F95\_GT M0\_34 M35\_44 M45\_54 M55\_59 M60\_64 M65\_69 M70\_74 M75\_79 M80\_84 M85\_89 M90\_94 M95\_GT NEF0\_34 NEF35\_44 NEF45\_54 NEF55\_59 NEF60\_64 NEF65 NEF66 NEF67 NEF68 NEF69 NEF70\_74 NEF75\_79 NEF80\_84 NEF85\_89 NEF90\_94 NEF95\_GT NEMO\_34 NEM35\_44 NEM45\_54 NEM55\_59 NEM60\_64

NEM65 NEM66 NEM67 NEM68 NEM69 NEM70\_74 NEM75\_79 NEM80\_84 NEM85\_89 NEM90\_94 NEM95\_GT

- 3) HCCs defined in the main program **V2117H1P** by the macro variable &HCCV21 list87
- 4) CC's (condition categories assigned before hierarchies are applied) defined in the main program V2117H1P by the macro variable &CCV21 list87
- 5) Score variables:
  - SCORE COMMUNITY community model
  - SCORE INSTITUTIONAL institutional model
  - SCORE NEW ENROLLEE new enrollees model

The user should determine which of the three scores is appropriate for the beneficiary depending upon the status of that beneficiary.