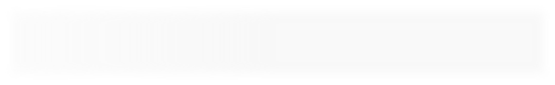
Chronic Conditions Warehouse

*Your source for national CMS Medicare and Medicaid research data*

****Chronic Conditions Warehouse Virtual Research Data Center**

Medicare Beneficiary Summary File (MBSF) Base with Medicare Part A, B, C, and D Codebook

January 2025 │ VERSION 1.8

Revision Log

| **Changed by** | **Revisions** |
| --- | --- |
| K. Schneider | Added caution to BENE\_HMO\_CVRAGE\_TOT\_MONS and clarified maximum AGE\_AT\_END\_REF\_YR |
| K. Schneider | Clarified meaning of 0 value in HMO\_IND\_01–12; clarified meaning of first digit in PTC\_CNTRCT\_ID\_01–12 |
| K. Schneider | Added clarity re: derivation of ESRD\_IND and a comment for DUAL\_STUS\_CD\_01–12 |
| K. Schneider | Added values and corresponding descriptions for  ENTLMT\_RSN\_CURR and MDCR\_STATUS\_CD; added a comment for STATE\_CODE and adjusted description for value 55 |
| K. Russell  C. Alleman  D. Happe | Migrated codebook to new document template; revised Table of Contents to include SAS long names rather than short names |
| K. Schneider | Corrected values 10 and 13 for monthly cost share group (CST\_SHR\_GRP\_CD\_01–12), and added a comment |
| C. Alleman  K. Schneider | Added clarity re: valid values for monthly cost share group (CST\_SHR\_GRP\_CD\_01–12) |
| C. Alleman  K. Schneider | Added clarity re: valid values for monthly Medicare status code (MDCR\_STATUS\_CODE\_01–12) |
| C. Alleman  K. Schneider | Initial release of codebook for Master Beneficiary Summary File — base; with Medicare Part A/B/C/D |

**Date Version** January 2025 1.8

October 2024 1.7 February 2024 1.6 April 2023 1.5

February 2021 1.4

August 2019 1.3 April 2019 1.2 January 2019 1.1 May 2017 1.0

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Tips on Navigating the Codebook

This document is a detailed codebook that describes each variable in the Medicare Beneficiary Summary File (MBSF) — Base with Medicare Part A, B, C, and D research files. We have included several ways for users to find quickly the information they need:

• A complete listing of all variables in the files, in alphabetical order based on their SAS variable names. • Individual entries for each variable contain a short description of the variable, the possible values for the variable, and, in many cases, comments discussing the variable construction and use.

Hyperlinks are included throughout the codebook to make it easier for users to navigate between the table of contents and the detailed entries for the individual variables:

• Clicking on any variable name in the Table of Contents will take you to the detailed description for that variable. • From the detailed description for any individual variable, clicking on the ^Back to TOC^ link after each variable description will take you back to the Table of Contents.

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Table of Contents

This section of the Codebook contains a list of all variables in alphabetical order based on the SAS variable name.

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Variable Details

This section of the codebook contains variable details to facilitate understanding and use of the variables. **AGE\_AT\_END\_REF\_YR**

**LABEL:** Age of beneficiary at end of year

**DESCRIPTION:** This is the beneficiary’s age, expressed in years and calculated as of the end of the calendar year, or, for beneficiaries that died during the year, age as of the date of death.

**SHORT NAME:** AGE

**LONG NAME:** AGE\_AT\_END\_REF\_YR

**TYPE:** NUM

**LENGTH:** 3

**SOURCE:** CMS Common Medicare Environment (CME) (derived)

**VALUES:** X–XXX

**COMMENT:** CCW calculates this variable, and sets the maximum value to 115 (years).

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**BENE\_BIRTH\_DT**

**LABEL:** Beneficiary date of birth

**DESCRIPTION:** This is the beneficiary's date of birth.

**SHORT NAME:** BENE\_DOB

**LONG NAME:** BENE\_BIRTH\_DT

**TYPE:** DATE

**LENGTH:** 8

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:** MM/DD/YYYY

**COMMENT:** —

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**BENE\_DEATH\_DT**

**LABEL:** Date of Death

**DESCRIPTION:** This variable indicates the date of death of the beneficiary. A null value means that no death date was reported for the beneficiary.

**SHORT NAME:** DEATH\_DT

**LONG NAME:** BENE\_DEATH\_DT

**TYPE:** DATE

**LENGTH:** 8

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES**: —

**COMMENT:** Many of these dates have not been verified with official U.S. records; the valid date of death switch variable (BENE\_VALID\_DEATH\_DT\_SW) identifies the death dates which have been verified.

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**BENE\_ENROLLMT\_REF\_YR**

**LABEL:** Reference Year

**DESCRIPTION:** This field indicates the reference year of the enrollment data.

**SHORT NAME:** RFRNC\_YR

**LONG NAME:** BENE\_ENROLLMT\_REF\_YR

**TYPE:** NUM

**LENGTH:** 4

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:** 1999 – current data year

**COMMENT:** The data files are partitioned into calendar year files.

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**BENE\_HI\_CVRAGE\_TOT\_MONS**

**LABEL:** Part A Months Count

**DESCRIPTION:** Months of Part A coverage

**SHORT NAME:** A\_MO\_CNT

**LONG NAME:** BENE\_HI\_CVRAGE\_TOT\_MONS

**TYPE:** NUM

**LENGTH:** 3

**SOURCE:** CMS Common Medicare Environment (CME) (derived)

**VALUES:** 0–12

**COMMENT:** This variable is the number of months during the year that the beneficiary had Medicare Part A coverage. (This is sometimes referred to as health insurance coverage — or Medicare HI coverage).

CCW derives this variable by counting the number of months where the beneficiary had Part A coverage (i.e., the MDCR\_ENTLMT\_BUYIN\_IND\_XX variable equaled 1, A, 3, or C).

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**BENE\_HMO\_CVRAGE\_TOT\_MONS**

**LABEL:** HMO Coverage Count

**DESCRIPTION:** Months of Medicare Advantage (HMO) coverage.

**SHORT NAME:** HMO\_MO

**LONG NAME:** BENE\_HMO\_CVRAGE\_TOT\_MONS

**TYPE:** NUM

**LENGTH:** 3

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:** 0–12

**COMMENT:** This variable counts the number of months during the year that the beneficiary received their Part A and Part B benefits through a managed care plan (i.e., a Medicare Advantage [MA] plan) instead of the traditional fee-for-service (FFS) program. Any month where the HMO indicator variable

(HMO\_IND\_XX) is anything other than a 0 (not a member of an HMO, and this value includes beneficiaries who are not Medicare enrolled for the month) or a 4 (FFS participant in a case or disease management demonstration project) is counted as an MA month.

Use caution interpreting this field since months that are not counted as HMO months for this variable include months of fee-for-service (FFS) coverage and months the beneficiary is not enrolled in Medicare. In other words — do not assume that every month during the year is either an HMO month or FFS month.

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**BENE\_ID**

**LABEL:** Encrypted CCW Beneficiary ID

**DESCRIPTION:** The unique CCW identifier for a beneficiary.

The CCW assigns a unique beneficiary identification number to each individual who receives Medicare and/ or Medicaid, and uses that number to identify an individual’s records in all CCW data files (e.g., Medicare claims, MAX claims, T-MSIS claims, and MDS assessment data).

This number does not change during a beneficiary’s lifetime, and CCW uses each number only once.

The BENE\_ID is specific to the CCW and is not applicable to any other identification system or data source.

**SHORT NAME:** BENE\_ID

**LONG NAME:** BENE\_ID

**TYPE:** CHAR

**LENGTH:** 15

**SOURCE:** CCW

**VALUES:** —

**COMMENT:** —

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**BENE\_PTA\_TRMNTN\_CD**

**LABEL:** Part A Termination Code

**DESCRIPTION:** This code specifies the reason Part A entitlement was terminated.

**SHORT NAME:** A\_TRM\_CD

**LONG NAME:** BENE\_PTA\_TRMNTN\_CD

**TYPE:** CHAR

**LENGTH:** 1

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:** 0 = Not Terminated

1 = Dead

2 = Non-Payment of Premium

3 = Voluntary Withdrawal

9 = Other Termination

**COMMENT:** —

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**BENE\_PTB\_TRMNTN\_CD**

**LABEL:** Part B Termination Code

**DESCRIPTION:** This code specifies the reason Part B entitlement was terminated.

**SHORT NAME:** B\_TRM\_CD

**LONG NAME:** BENE\_PTB\_TRMNTN\_CD

**TYPE:** CHAR

**LENGTH:** 1

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:** 0 = Not Terminated

1 = Dead

2 = Non-Payment of Premium

3 = Voluntary Withdrawal

9 = Other Termination

**COMMENT:** —

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**BENE\_RACE\_CD**

**LABEL:** Beneficiary Race Code

**DESCRIPTION:** The race of the beneficiary.

**SHORT NAME:** RACE

**LONG NAME:** BENE\_RACE\_CD

**TYPE:** CHAR

**LENGTH:** 1

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:** 0 = Unknown

1 = White

2 = Black

3 = Other

4 = Asian

5 = Hispanic

6 = North American Native

**COMMENT:** —

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**BENE\_SMI\_CVRAGE\_TOT\_MONS**

**LABEL:** Part B Months Count

**DESCRIPTION:** Months of Part B coverage

**SHORT NAME:** B\_MO\_CNT

**LONG NAME:** BENE\_SMI\_CVRAGE\_TOT\_MONS

**TYPE:** NUM

**LENGTH:** 3

**SOURCE:** CMS Common Medicare Environment (CME) (derived)

**VALUES:** 0–12

**COMMENT:** This variable is the number of months during the year that the beneficiary had Medicare Part B coverage. (This is sometimes referred to as supplemental medical insurance coverage — or SMI coverage.) CCW derives this variable by counting the number of months where the beneficiary had Part B coverage (i.e., the MDCR\_ENTLMT\_BUYIN\_IND\_XX variable equaled 2, B, 3, or C).

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**BENE\_STATE\_BUYIN\_TOT\_MONS**

**LABEL:** State Buy-In Coverage Count

**DESCRIPTION:** Months of state buy-in.

**SHORT NAME:** BUYIN\_MO

**LONG NAME:** BENE\_STATE\_BUYIN\_TOT\_MONS

**TYPE:** NUM

**LENGTH:** 3

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:** 0–12

**COMMENT:** This variable counts the total number of months during the year when the beneficiary premium was paid by the state. State Medicaid programs can pay Medicare premiums for certain dual eligibles (i.e., for beneficiaries also enrolled in a state Medicaid program); this action is called “buying in” and so this variable is the “buy-in code.” Any month where the MDCR\_ENTLMT\_BUYIN\_IND\_XX variable was: A (Part A state buy-in), B (Part B state buy-in), or C (Part A and Part B state buy-in) is counted.

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**COUNTY\_CD**

**LABEL:** County code for beneficiary (SSA code)

**DESCRIPTION:** This code specifies the Social Security Administration (SSA) code for the county of identified through the beneficiary mailing address of the beneficiary.

**SHORT NAME:** CNTY\_CD

**LONG NAME:** COUNTY\_CD

**TYPE:** CHAR

**LENGTH:** 3

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:** —

**COMMENT:** Each state has a series of codes beginning with '000' for each county within that state. Certain cities within that state have their own code. County codes must be combined with state codes in order to locate the specific county. The coding system is the SSA system, not the Federal Information Processing Standard (FIPS). In some cases, the code may not be the actual county where the beneficiary resides. CMS obtains the mailing address used for cash benefits or the mailing address used for other purposes (for example, premium billing) from Social Security Administration (SSA) and Railroad Retirement Board (RRB) Beneficiary Record Systems.

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**COVSTART**

**LABEL:** Medicare Coverage Start Date

**DESCRIPTION:** This variable is the date when the beneficiary first became eligible for Medicare coverage (Part A or Part B).

**SHORT NAME:** COVSTART

**LONG NAME:** COVSTART

**TYPE:** DATE

**LENGTH:** 8

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:** —

**COMMENT:** Historic date of first Medicare coverage (may be prior to 1999, which is the earliest claim files available through CCW).

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**CRNT\_BIC\_CD**

**LABEL:** Current Beneficiary Identification Code

**DESCRIPTION:** The current beneficiary identification code (BIC) specifies the basis of the beneficiary’s eligibility for cash payment programs, mainly Social Security. When the individual qualifies under another person’s account (for example, as a spouse or child), the code identifies the type of relationship between the individual and primary beneficiary.

**SHORT NAME:** CRNT\_BIC

**LONG NAME:** CRNT\_BIC\_CD

**TYPE:** CHAR

**LENGTH:** 2

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:**

10 = Railroad Retirement Board (RRB) Retirement employee or annuitant

11 = RRB Survivor joint annuitant reduced benefits taken to insure benefits for surviving spouse

13 = RRB Child of RR annuitant or Widow of annuitant with a child in her care

14 = RRB Spouse of RR employee or annuitant husband or wife

15 = RRB Parent of annuitant

16 = RRB Widow/widower of RR annuitant

17 = RRB Disabled adult child of RR annuitant

43 = RRB Child of RR employee or Widow of employee with a child in her care

45 = RRB Parent of employee

46 = RRB Widow/widower of RR employee

80 = RRB RR pensioner age or disability

83 = RRB Widow of pensioner with a child in her care 84 = RRB Spouse of RR pensioner

85 = RRB Parent of pensioner

86 = RRB Widow/widower of RR pensioner

A = Primary claimant

B = Aged wife age 62 or over 1st claimant

B1 = Aged husband age 62 or over 1st claimant

B2 = Young wife with a child in her care 1st claimant

B3 = Aged wife 2nd claimant

B4 = Aged husband 2nd claimant B5 = Young wife 2nd claimant

B6 = Divorced wife age 62 or over 1st claimant

B7 = Young wife 3rd claimant

B8 = Aged wife 3rd claimant

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B9 = Divorced wife 2nd claimant BA = Aged wife 4th claimant BD = Aged wife 5th claimant BG = Aged husband 3rd claimant BH = Aged husband 4th claimant BJ = Aged husband 5th claimant BK = Young wife 4th claimant BL = Young wife 5th claimant BN = Divorced wife 3rd claimant BP = Divorced wife 4th claimant BQ = Divorced wife 5th claimant BR = Divorced husband 1st claimant BT = Divorced husband 2nd claimant BW = Young husband 2nd claimant BY = Young husband 1st claimant

C1 = Child includes minor student or disabled child 1st claimant

C2 = Child includes minor student or disabled child 2nd claimant

C3 = Child includes minor student or disabled child 3rd claimant

C4 = Child includes minor student or disabled child 4th claimant

C5 = Child includes minor student or disabled child 5th claimant

C6 = Child includes minor student or disabled child 6th claimant

C7 = Child includes minor student or disabled child 7th claimant

C8 = Child includes minor student or disabled child 8th claimant

C9 = Child includes minor student or disabled child 9th claimant

CA = Child includes minor student or disabled child 10th claimant

CB = Child includes minor student or disabled child 11th claimant

CC = Child includes minor student or disabled child 12th claimant

CD = Child includes minor student or disabled child 13th claimant

CE = Child includes minor student or disabled child 14th claimant

CF = Child includes minor student or disabled child 15th claimant

CG = Child includes minor student or disabled child 16th claimant

CH = Child includes minor student or disabled child 17th claimant

CI = Child includes minor student or disabled child 18th claimant

CJ = Child includes minor student or disabled child 19th claimant

CK = Child includes minor student or disabled child 20th claimant

CL = Child includes minor student or disabled child 21st claimant

CM = Child includes minor student or disabled child 22nd claimant

CN = Child includes minor student or disabled child 23rd claimant

CO = Child includes minor student or disabled child 24th claimant

CP = Child includes minor student or disabled child 25th claimant

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CQ = Child includes minor student or disabled child 26th claimant

CR = Child includes minor student or disabled child 27th claimant

CS = Child includes minor student or disabled child 28th claimant

CT = Child includes minor student or disabled child 29th claimant

CU = Child includes minor student or disabled child 30th claimant

CV = Child includes minor student or disabled child 31st claimant

CW = Child includes minor student or disabled child 32nd claimant

CX = Child includes minor student or disabled child 33rd claimant

CY = Child includes minor student or disabled child 34th claimant

CZ = Child includes minor student or disabled child 35th claimant

D = Aged widow 60 or over 1st claimant

D1 = Aged widower age 60 or over 1st claimant

D2 = Aged widow 2nd claimant D3 = Aged widower 2nd claimant

D4 = Widow remarried after attainment of age 60 1st claimant

D5 = Widower remarried after attainment of age 60 1st claimant

D6 = Surviving divorced wife age 60 or over 1st claimant

D7 = Surviving divorced wife 2nd claimant D8 = Aged widow 3rd claimant

D9 = Remarried widow 2nd claimant DA = Remarried widow 3rd claimant

DC = Surviving divorced husband 1st claimant

DD = Aged widow 4th claimant DG = Aged widow 5th claimant DH = Aged widower 3rd claimant DJ = Aged widower 4th claimant DK = Aged widower 5th claimant DL = Remarried widow 4th claimant

DM = Surviving divorced husband 2nd claimant

DN = Remarried widow 5th claimant DP = Remarried widower 2nd claimant DQ = Remarried widower 3rd claimant DR = Remarried widower 4th claimant

DS = Surviving divorced husband 3rd claimant

DT = Remarried widower 5th claimant

DV = Surviving divorced wife 3rd claimant

DW = Surviving divorced wife 4th claimant

DX = Surviving divorced husband 4th claimant

DY = Surviving divorced wife 5th claimant

DZ = Surviving divorced husband 5th claimant

E = Mother widow 1st claimant

E1 = Surviving divorced mother 1st claimant

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E2 = Mother widow 2nd claimant

E3 = Surviving divorced mother 2nd claimant

E4 = Father widower 1st claimant

E5 = Surviving divorced father widower 1st claimant

E6 = Father widower 2nd claimant E7 = Mother widow 3rd claimant E8 = Mother widow 4th claimant

E9 = Surviving divorced father widower 2nd claimant

EA = Mother widow 5th claimant

EB = Surviving divorced mother 3rd claimant

EC = Surviving divorced mother 4th claimant

ED = Surviving divorced mother 5th claimant

EF = Father widower 3rd claimant EG = Father widower 4th claimant EH = Father widower 5th claimant

EJ = Surviving divorced father 3rd claimant

EK = Surviving divorced father 4th claimant

EM = Surviving divorced father 5th claimant

F1 = Father

F2 = Mother

F3 = Stepfather

F4 = Stepmother

F5 = Adopting father

F6 = Adopting mother

F7 = Second alleged father

F8 = Second alleged mother

J1 = Primary prouty entitled to HIB less than 3 QC general fund

J2 = Primary prouty entitled to HIB over 2 QC RSI trust fund

J3 = Primary prouty not entitled to HIB less than 3 QC general fund

J4 = Primary prouty not entitled to HIB over 2 QC RSI trust fund

K1 = Prouty wife entitled to HIB less than 3 QC general fund 1st

claimant

K2 = Prouty wife entitled to HIB over 2 QC RSI trust fund 1st claimant

K3 = Prouty wife not entitled to HIB less than 3 QC general fund 1st

claimant

K4 = Prouty wife not entitled to HIB over 2 QC RSI trust fund 1st

claimant

K5 = Prouty wife entitled to HIB less than 3 QC general fund 2nd

claimant

K6 = Prouty wife entitled to HIB over 2 QC RSI trust fund 2nd claimant

K7 = Prouty wife not entitled to HIB less than 3 QC general fund 2nd

claimant

K8 = Prouty wife not entitled to HIB over 2 QC RSI trust fund 2nd

claimant

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K9 = Prouty wife entitled to HIB less than 3 QC general fund 3rd

claimant

KA = Prouty wife entitled to HIB over 2 QC RSI trust fund 3rd claimant

KB = Prouty wife not entitled to HIB less than 3 QC general fund 3rd

claimant

KC = Prouty wife not entitled to HIB over 2 QC RSI trust fund 3rd

claimant

KD = Prouty wife entitled to HIB less than 3 QC general fund 4th

claimant

KE = Prouty wife entitled to HIB over 2 QC 4th claimant

KF = Prouty wife not entitled to HIB less than 3 QC 4th claimant

KG = Prouty wife not entitled to HIB over 2 QC 4th claimant

KH = Prouty wife entitled to HIB less than 3 QC 5th claimant

KJ = Prouty wife entitled to HIB over 2 QC 5th claimant

KL = Prouty wife not entitled to HIB less than 3 QC 5th claimant

KM = Prouty wife not entitled to HIB over 2 QC 5th claimant

M = Uninsured not qualified for deemed HIB

M1 = Uninsured qualified but refused HIB

T = Uninsured entitled to HIB under deemed or renal provisions

TA = Medicare Qualified Government Employment (MQGE) primary

claimant

TB = MQGE aged spouse first claimant

TC = MQGE disabled adult child first claimant

TD = MQGE aged widower first claimant

TE = MQGE young widower first claimant

TF = MQGE parent male

TG = MQGE aged spouse second claimant

TH = MQGE aged spouse third claimant TJ = MQGE aged spouse fourth claimant TK = MQGE aged spouse fifth claimant

TL = MQGE aged widower second claimant

TM = MQGE aged widower third claimant

TN = MQGE aged widower fourth claimant

TP = MQGE aged widower fifth claimant TQ = MQGE parent female

TR = MQGE young widower second claimant

TS = MQGE young widower third claimant

TT = MQGE young widower fourth claimant

TU = MQGE young widower fifth claimant

TV = MQGE disabled widower fifth claimant

TW = MQGE disabled widower first claimant

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TX = MQGE disabled widower second claimant

TY = MQGE disabled widower third claimant

TZ = MQGE disabled widower fourth claimant

T2 = Disabled child 2nd claimant T3 = Disabled child 3rd claimant T4 = Disabled child 4th claimant T5 = Disabled child 5th claimant T6 = Disabled child 6th claimant T7 = Disabled child 7th claimant T8 = Disabled child 8th claimant T9 = Disabled\* child 9th claimant

W = Disabled widow age 50 or over 1st claimant

W1 = Disabled widower age 50 or over 1st claimant

W2 = Disabled widow 2nd claimant W3 = Disabled widower 2nd claimant

W4 = Disabled widow 3rd claimant W5 = Disabled widower 3rd claimant

W6 = Disabled surviving divorced wife 1st claimant

W7 = Disabled surviving divorced wife 2nd claimant

W8 = Disabled surviving divorced wife 3rd claimant

W9 = Disabled widow 4th claimant WB = Disabled widower 4th claimant

WC = Disabled surviving divorced wife 4th claimant

WF = Disabled widow 5th claimant WG = Disabled widower 5th claimant

WJ = Disabled surviving divorced wife 5th claimant

WR = Disabled surviving divorced husband 1st claimant

WT = Disabled surviving divorced husband 2nd claimant

**COMMENT:** This information is originally from the CMS Denominator file, which means that the final value for the year is used.

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**CST\_SHR\_GRP\_CD\_01 CST\_SHR\_GRP\_CD\_02 CST\_SHR\_GRP\_CD\_03 CST\_SHR\_GRP\_CD\_04 CST\_SHR\_GRP\_CD\_05 CST\_SHR\_GRP\_CD\_06**

**CST\_SHR\_GRP\_CD\_07 CST\_SHR\_GRP\_CD\_08 CST\_SHR\_GRP\_CD\_09 CST\_SHR\_GRP\_CD\_10 CST\_SHR\_GRP\_CD\_11 CST\_SHR\_GRP\_CD\_12**

**LABEL:** Monthly cost sharing group under Part D low-income subsidy — January through December

**DESCRIPTION:** This variable indicates the beneficiary’s Part D low-income subsidy cost sharing group for a given month (January). The Part D benefit requires enrollees to pay both premiums and cost-sharing, but the program also has a low-income subsidy (LIS) that covers some or all of those costs for certain low income individuals, including deductibles and cost-sharing during the coverage gap.

**SHORT NAME**:

CSTSHR07

CSTSHR08

CSTSHR09

CSTSHR10

CSTSHR11

CSTSHR12

**LONG NAME**:

CSTSHR01 CSTSHR02 CSTSHR03 CSTSHR04 CSTSHR05 CSTSHR06

CST\_SHR\_GRP\_CD\_01

CST\_SHR\_GRP\_CD\_02

CST\_SHR\_GRP\_CD\_03

CST\_SHR\_GRP\_CD\_04

CST\_SHR\_GRP\_CD\_05

CST\_SHR\_GRP\_CD\_06

**TYPE:** CHAR

**LENGTH:** 2

**SOURCE:** CMS Common Medicare Environment (CME) **VALUES:**

00 = Not Medicare enrolled for the

month

01 = Beneficiary enrolled in Parts A

and/or B, and Part D; deemed

eligible for LIS with 100% premium

subsidy and no copayment

CST\_SHR\_GRP\_CD\_07

CST\_SHR\_GRP\_CD\_08

CST\_SHR\_GRP\_CD\_09

CST\_SHR\_GRP\_CD\_10

CST\_SHR\_GRP\_CD\_11

CST\_SHR\_GRP\_CD\_12

02 = Beneficiary enrolled in Parts A and/or B, and Part D; deemed eligible for LIS with 100% premium subsidy and low copayment

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03 = Beneficiary enrolled in Parts A and/or B, and Part D; deemed eligible for LIS with 100% premium subsidy and high copayment

04 = Beneficiary enrolled in Parts A and/or B, and Part D; enrolled in LIS with 100% premium subsidy and high copayment

05 = Beneficiary enrolled in Parts A and/or B, and Part D; enrolled in LIS with 100% premium subsidy and 15% copayment

06 = Beneficiary enrolled in Parts A and/or B, and Part D; enrolled in LIS with 75% premium subsidy and 15% copayment

07 = Beneficiary enrolled in Parts A and/or B, and Part D; enrolled in LIS with 50% premium subsidy and 15% copayment

08 = Beneficiary enrolled in Parts A and/or B, and Part D; enrolled in LIS with 25% premium subsidy and 15% copayment

09 = Beneficiary enrolled in Parts A and/or B, and Part D; no premium or cost sharing subsidy

10 = Beneficiary enrolled in Parts A and/or B, but not Part D enrolled; employer receives RDS subsidy

13 = Beneficiary enrolled in Parts A and/or B, but not Part D enrolled. It is unknown whether the

beneficiary has creditable

prescription drug coverage

elsewhere.

Null/missing = Beneficiary was not found in cost sharing group data

**COMMENT:** CMS identifies beneficiaries with fully-subsidized Part D coverage by looking for individuals that have a 01, 02, or 03 for the month. Other beneficiaries who are eligible for the LIS but do not receive a full subsidy have a 04, 05, 06, 07, or 08. The remaining values indicate that the individual is not eligible for subsidized Part D coverage. There are 12 monthly variables — where the 01 through 12 at the end of the variable name correspond with the month (e.g., 01 is January and 12 is December).

There is a late enrollment penalty for those who are eligible for Part D but choose not to enroll for any given year and do not have creditable coverage for that time. A number of Medicare-eligible beneficiaries may have access to other types of prescription drug plans. Creditable prescription drug coverage includes, but is not limited to: employer-based prescription drug coverage, including the Federal Employees Health Benefits Program (FEHB); qualified State Pharmaceutical Assistance Programs (SPAPs); military-related coverage (e.g., VA, TRICARE); and certain Medicare supplemental (Medigap) policies. For additional details regarding the creditable coverage provision of the Part D benefit, please refer to the CMS website at: http://www.cms.gov/Medicare/Prescription-Drug Coverage/CreditableCoverage/index.html?redirect=/CreditableCoverage/.

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**DUAL\_ELGBL\_MONS**

**LABEL:** Months of Dual Eligibility

**DESCRIPTION:** This variable is the number of months during the year that the beneficiary was dually eligible (i.e., he/she was also eligible for Medicaid benefits).

**SHORT NAME:** DUAL\_MO

**LONG NAME:** DUAL\_ELGBL\_MONS

**TYPE:** NUM

**LENGTH:** 3

**SOURCE:** CMS Common Medicare Environment (CME) (derived)

**VALUES:** 0–12

**COMMENT:** CCW derived this variable by counting the number of months where the beneficiary had dual eligibility (i.e., months where DUAL\_STUS\_CD\_XX equal to '01', '02', '03', '04', '05', '06', '08', '09', or '99').

There are different ways to classify dually eligible beneficiaries — in terms of whether he/she is enrolled in full or partial benefits. Additional information regarding various ways to identify dually enrolled populations, refer to a CCW Technical Guidance document entitled: "Options in Determining Dual Eligibles."

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**DUAL\_STUS\_CD\_01 DUAL\_STUS\_CD\_02 DUAL\_STUS\_CD\_03 DUAL\_STUS\_CD\_04 DUAL\_STUS\_CD\_05 DUAL\_STUS\_CD\_06**

**DUAL\_STUS\_CD\_07 DUAL\_STUS\_CD\_08 DUAL\_STUS\_CD\_09 DUAL\_STUS\_CD\_10 DUAL\_STUS\_CD\_11 DUAL\_STUS\_CD\_12**

**LABEL:** Monthly Medicare-Medicaid dual eligibility code – January through December

**DESCRIPTION**: This variable indicates whether the beneficiary was eligible for both Medicare and Medicaid in a given month (January through December).

**SHORT NAME:**

DUAL\_07

DUAL\_08

DUAL\_09

DUAL\_10

DUAL\_11

DUAL\_12

**LONG NAME**:

DUAL\_01 DUAL\_02 DUAL\_03 DUAL\_04 DUAL\_05 DUAL\_06

DUAL\_STUS\_CD\_01

DUAL\_STUS\_CD\_02

DUAL\_STUS\_CD\_03

DUAL\_STUS\_CD\_04

DUAL\_STUS\_CD\_05

DUAL\_STUS\_CD\_06

**TYPE:** CHAR

**LENGTH:** 2

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:**

NA = Non-Medicaid

00 = Not enrolled in Medicare for the

month

01 = Qualified Medicare Beneficiary

(QMB)-only

02 = QMB and full Medicaid coverage,

including prescription drugs

DUAL\_STUS\_CD\_07

DUAL\_STUS\_CD\_08

DUAL\_STUS\_CD\_09

DUAL\_STUS\_CD\_10

DUAL\_STUS\_CD\_11

DUAL\_STUS\_CD\_12

03 = Specified Low-Income Medicare Beneficiary (SLMB)-only

04 = SLMB and full Medicaid coverage, including prescription drugs

05 = Qualified Disabled Working Individual (QDWI)

06 = Qualifying individuals (QI)

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08 = Other dual eligible (not QMB, SLMB, QWDI, or QI) with full Medicaid coverage, including prescription Drugs

09 = Other dual eligible, but without Medicaid coverage

99 = Unknown

**COMMENT:** The original source for this variable is the State Medicare Modernization Act (MMA) files that states submit to CMS. Those files are considered the “gold standard” for identifying dual eligibles because the information in them is used to determine the level of Medicare Part D low-income subsidies. Unlike most states, Puerto Rico and the Virgin Islands do not submit dual eligibility data to CMS through the MMA files. Consequently, the Master Beneficiary Summary File significantly undercounts dual-eligibles from these territories currently. Users should consider this variable to be incomplete when constructing an analysis population that includes dual-eligibles from these two territories.

Dual eligibles are often divided into “full duals” and “partial duals” based on the level of Medicaid benefits they receive. CMS generally considers beneficiaries to be full duals if they have values of 02, 04, or 08, and to be partial duals if they have values of 01, 03, 05, or 06. Partial duals sometimes divided into the QMB-only population (01) and all other partial duals (03, 05, or 06). There are different ways to classify dually eligible beneficiaries. Additional information regarding various ways to identify dually enrolled populations, refer to a CCW Technical Guidance document entitled: "Options in Determining Dual Eligibles." There are 12 monthly variables — where the 01 through 12 at the end of the variable name correspond with the month (e.g., 01 is January and 12 is December).

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**ENHANCED\_FIVE\_PERCENT\_FLAG**

**LABEL:** Enhanced Medicare 5% Sample Indicator

**DESCRIPTION:** This variable indicates whether the beneficiary was ever included in the CCW 5% sample for any year (1999+).

**SHORT NAME:** EFIVEPCT

**LONG NAME:** ENHANCED\_FIVE\_PERCENT\_FLAG

**TYPE:** CHAR

**LENGTH:** 1

**SOURCE:** CCW (derived)

**VALUES:** Y = Yes, included in enhanced 5% sample

Null = Not included in enhanced 5% sample

**COMMENT:** This enhanced 5% sample is broader than the annual 5% sample (variable that was previously called FIVE\_PERCENT\_FLAG; currently called SAMPLE\_GROUP — when value ='01' or '04') because it includes all beneficiaries who were ever part of the 5% sample but had a HIC change that was not part of the sample. The "enhanced" indicator variable allows for longitudinal study of the 5% sample (i.e., once in, always in).

CCW creates the 5% sample using standard CMS processes. The 5% random sample consists of people who had a Medicare beneficiary Health Insurance Claim number (HIC) equal to the Claim Account Number (CAN) plus Beneficiary Identity Code (BIC) (HIC=CAN+BIC) where the last two digits of the CAN are in the set {05, 20, 45, 70, 95}.

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**ENRL\_SRC**

**LABEL:** Enrollment Source

**DESCRIPTION:** This variable indicates the source of enrollment data.

**SHORT NAME:** ENRL\_SRC

**LONG NAME:** ENRL\_SRC

**TYPE:** CHAR

**LENGTH:** 3

**SOURCE:** CCW

**VALUES:** EDB = Enrollment Database

CME = Common Medicare Environment

**COMMENT:** The Centers for Medicare & Medicaid Services (CMS) has updated the Medicare enrollment source data for the Master Beneficiary Summary File (MBSF). As of March 2017, the MBSF includes Medicare enrollment information from the CMS Common Medicare Environment (CME) rather than the CMS Enrollment Database(EDB). Data from the two sources was nearly identical. The CME improves the identification of Medicare Part B enrollment and also allows for more timely release of the MBSF.

The universe of beneficiaries in the CME versus the EDB version of the MBSF are only slightly different. ^ Back to TOC ^

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**ENTLMT\_RSN\_CURR**

**LABEL:** Current Reason for Entitlement Code

**DESCRIPTION:** Current reason for Medicare entitlement

**SHORT NAME:** CREC

**LONG NAME:** ENTLMT\_RSN\_CURR

**TYPE:** CHAR

**LENGTH:** 1

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:** 0 = Old age and survivor’s insurance (OASI)

1 = Disability insurance benefits (DIB)

2 = End-stage renal disease (ESRD)

3 = Both DIB and ESRD

4 = Beneficiary insured due to Part B Immunosuppressive Drug (PBID)

**COMMENT:** This variable indicates how the beneficiary currently qualifies for Medicare. The current reason for entitlement can differ from the original reason that a beneficiary qualified for Medicare (reference the ENTLMT\_RSN\_ORIG variable). CMS obtains this information from the Social Security Administration (SSA) and Railroad Retirement Board (RRB) record systems.

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**ENTLMT\_RSN\_ORIG**

**LABEL:** Original Reason for Entitlement Code

**DESCRIPTION:** Original reason for Medicare entitlement

**SHORT NAME:** OREC

**LONG NAME:** ENTLMT\_RSN\_ORIG

**TYPE:** CHAR

**LENGTH:** 1

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:** 0 = Old age and survivor’s insurance (OASI)

1 = Disability insurance benefits (DIB)

2 = End-stage renal disease (ESRD)

3 = Both DIB and ESRD

**COMMENT:** CMS obtains this information from the Social Security Administration (SSA) and Railroad Retirement Board (RRB) record systems.

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**ESRD\_IND**

**LABEL:** End-Stage Renal Disease (ESRD) Indicator

**DESCRIPTION:** This field specifies whether a beneficiary is entitled to Medicare benefits due to end stage renal disease (ESRD).

**SHORT NAME:** ESRD\_IND

**LONG NAME:** ESRD\_IND

**TYPE:** CHAR

**LENGTH:** 1

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:** Y = the beneficiary has ESRD coverage

0 = the beneficiary does not have ESRD coverage

**COMMENT:** This variable is sourced directly from Medicare eligibility data, and recoded into a binary classification. ^ Back to TOC ^

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**HMO\_IND\_01**

**HMO\_IND\_02**

**HMO\_IND\_03**

**HMO\_IND\_04**

**HMO\_IND\_05**

**HMO\_IND\_06**

**LABEL:** HMO Indicator – January through December

**HMO\_IND\_07 HMO\_IND\_08 HMO\_IND\_09 HMO\_IND\_10 HMO\_IND\_11 HMO\_IND\_12**

**DESCRIPTION:** Monthly Medicare Advantage (MA) enrollment indicator (January through December). **SHORT NAME:**

HMOIND07

HMOIND08

HMOIND09

HMOIND10

HMOIND11

HMOIND12

**LONG NAME:**

HMOIND01 HMOIND02 HMOIND03 HMOIND04 HMOIND05 HMOIND06

HMO\_IND\_01

HMO\_IND\_02

HMO\_IND\_03

HMO\_IND\_04

HMO\_IND\_05

HMO\_IND\_06

**TYPE:** CHAR

**LENGTH:** 1

**SOURCE:** CMS Common Medicare Environment (CME)

HMO\_IND\_07 HMO\_IND\_08 HMO\_IND\_09 HMO\_IND\_10 HMO\_IND\_11 HMO\_IND\_12

**VALUES:** 0 = Not a member of an HMO (caution: includes beneficiaires who are not Medicare enrolled for the month)

1 = Non-lock-in, CMS to process provider claims

2 = Non-lock-in, group health organization (GHO; MA plan) to process in plan Part A and in area Part B claims

4 = Fee-for-service participant in case or disease management demonstration project

A = Lock-in, CMS to process provider claims

B = Lock-in, GHO to process in plan Part A and in area Part B claims

C = Lock-in, GHO to process all provider claims

**COMMENT:** Historically, most Medicare managed care plans have been health maintenance organizations (HMOs), hence the name of the variable.

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This variable indicates whether the beneficiary was enrolled in a Medicare Advantage (MA) plan during a given month.

The 01 through 12 at the end of the variable name correspond with the month (i.e., 01 is January and 12 is December).

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**MDCR\_ENTLMT\_BUYIN\_IND\_01 MDCR\_ENTLMT\_BUYIN\_IND\_02 MDCR\_ENTLMT\_BUYIN\_IND\_03 MDCR\_ENTLMT\_BUYIN\_IND\_04 MDCR\_ENTLMT\_BUYIN\_IND\_05 MDCR\_ENTLMT\_BUYIN\_IND\_06**

**MDCR\_ENTLMT\_BUYIN\_IND\_07 MDCR\_ENTLMT\_BUYIN\_IND\_08 MDCR\_ENTLMT\_BUYIN\_IND\_09 MDCR\_ENTLMT\_BUYIN\_IND\_10 MDCR\_ENTLMT\_BUYIN\_IND\_11 MDCR\_ENTLMT\_BUYIN\_IND\_12**

**NAME:** Medicare Entitlement/Buy-In Indicator — January through December **DESCRIPTION:** Monthly Part A and/or Part B entitlement indicator (January through December). **SHORT NAME:**

BUYIN07

BUYIN08

BUYIN09

BUYIN10

BUYIN11

BUYIN12

**LONG NAME:**

BUYIN01 BUYIN02 BUYIN03 BUYIN04 BUYIN05 BUYIN06

MDCR\_ENTLMT\_BUYIN\_IND\_01

MDCR\_ENTLMT\_BUYIN\_IND\_02

MDCR\_ENTLMT\_BUYIN\_IND\_03

MDCR\_ENTLMT\_BUYIN\_IND\_04

MDCR\_ENTLMT\_BUYIN\_IND\_05

MDCR\_ENTLMT\_BUYIN\_IND\_06

**TYPE:** CHAR

**LENGTH:** 1

**SOURCE:** CMS Common Medicare Environment (CME)

**CODE VALUES:** 0 = Not Medicare enrolled for the month 1 = Part A only

2 = Part B only

3 = Part A and Part B

A = Part A state buy-in

B = Part B state buy-in

C = Part A and Part B state buy-in

MDCR\_ENTLMT\_BUYIN\_IND\_07 MDCR\_ENTLMT\_BUYIN\_IND\_08 MDCR\_ENTLMT\_BUYIN\_IND\_09 MDCR\_ENTLMT\_BUYIN\_IND\_10 MDCR\_ENTLMT\_BUYIN\_IND\_11 MDCR\_ENTLMT\_BUYIN\_IND\_12

**COMMENT:** This variable indicates whether the beneficiary was entitled to Part A, Part B, or both for a given month. There are 12 monthly variables — where the 01 through 12 at the end of the variable name correspond with the month (e.g., 01 is January and 12 is December).The variable also indicates whether the beneficiary’s state of residence paid his/her monthly premium for Part B coverage (and Part A if necessary). State Medicaid programs can pay those premiums for certain dual eligibles; this action is called “buying in” and so this variable is the “buy-in code.” ^ Back to TOC ^

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**MDCR\_STATUS\_CODE\_01**

**MDCR\_STATUS\_CODE\_02**

**MDCR\_STATUS\_CODE\_03**

**MDCR\_STATUS\_CODE\_04**

**MDCR\_STATUS\_CODE\_05**

**MDCR\_STATUS\_CODE\_06**

**LABEL:** Medicare Status Code – January through December

**MDCR\_STATUS\_CODE\_07 MDCR\_STATUS\_CODE\_08 MDCR\_STATUS\_CODE\_09 MDCR\_STATUS\_CODE\_10 MDCR\_STATUS\_CODE\_11 MDCR\_STATUS\_CODE\_12**

**DESCRIPTION:** This variable indicates how a beneficiary currently qualifies for Medicare – January through December. **SHORT NAME:**

MDCR\_STUS\_CD\_07

MDCR\_STUS\_CD\_08

MDCR\_STUS\_CD\_09

MDCR\_STUS\_CD\_10

MDCR\_STUS\_CD\_11

MDCR\_STUS\_CD\_12

**LONG NAME:**

MDCR\_STUS\_CD\_01 MDCR\_STUS\_CD\_02 MDCR\_STUS\_CD\_03 MDCR\_STUS\_CD\_04 MDCR\_STUS\_CD\_05 MDCR\_STUS\_CD\_06

MDCR\_STATUS\_CODE\_01

MDCR\_STATUS\_CODE\_02

MDCR\_STATUS\_CODE\_03

MDCR\_STATUS\_CODE\_04

MDCR\_STATUS\_CODE\_05

MDCR\_STATUS\_CODE\_06

**TYPE:** CHAR

**LENGTH:** 2

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:** 00 = Not Medicare enrolled for the month 10 = Aged without end-stage renal disease (ESRD) 11 = Aged with ESRD

20 = Disabled without ESRD

21 = Disabled with ESRD

31 = ESRD only

MDCR\_STATUS\_CODE\_07 MDCR\_STATUS\_CODE\_08 MDCR\_STATUS\_CODE\_09 MDCR\_STATUS\_CODE\_10 MDCR\_STATUS\_CODE\_11 MDCR\_STATUS\_CODE\_12

40 = Beneficiary insured due to Part B Immunosuppressive Drug (PBID)

**COMMENT:** Analysts can use this variable to quickly distinguish between the aged, disabled, and ESRD populations.

This field is coded from age, original reason for entitlement, current reason for entitlement and ESRD indicator contained in the enrollment database at CMS.

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There are 12 monthly variables — where the 01 through 12 at the end of the variable name correspond with the month (e.g., 01 is January and 12 is December).

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**PTC\_CNTRCT\_ID\_01**

**PTC\_CNTRCT\_ID\_02**

**PTC\_CNTRCT\_ID\_03**

**PTC\_CNTRCT\_ID\_04**

**PTC\_CNTRCT\_ID\_05**

**PTC\_CNTRCT\_ID\_06**

**LABEL:** Part C Contract Number – January through December

**PTC\_CNTRCT\_ID\_07 PTC\_CNTRCT\_ID\_08 PTC\_CNTRCT\_ID\_09 PTC\_CNTRCT\_ID\_10 PTC\_CNTRCT\_ID\_11 PTC\_CNTRCT\_ID\_12**

**DESCRIPTION:** This variable is the Medicare Part C contract number for the beneficiary’s Medicare Advantage (MA) plan for a given month (January through December).

CMS assigns an identifier to each contract that a managed care plan has with CMS.

**SHORT NAME:**

PTC\_CNTRCT\_ID\_07

PTC\_CNTRCT\_ID\_08

PTC\_CNTRCT\_ID\_09

PTC\_CNTRCT\_ID\_10

PTC\_CNTRCT\_ID\_11

PTC\_CNTRCT\_ID\_12

**LONG NAME:**

PTC\_CNTRCT\_ID\_01 PTC\_CNTRCT\_ID\_02 PTC\_CNTRCT\_ID\_03 PTC\_CNTRCT\_ID\_04 PTC\_CNTRCT\_ID\_05 PTC\_CNTRCT\_ID\_06

PTC\_CNTRCT\_ID\_01

PTC\_CNTRCT\_ID\_02

PTC\_CNTRCT\_ID\_03

PTC\_CNTRCT\_ID\_04

PTC\_CNTRCT\_ID\_05

PTC\_CNTRCT\_ID\_06

**TYPE:** CHAR

**LENGTH:** 5

**SOURCE:** CMS Common Medicare Environment (CME)

PTC\_CNTRCT\_ID\_07 PTC\_CNTRCT\_ID\_08 PTC\_CNTRCT\_ID\_09 PTC\_CNTRCT\_ID\_10 PTC\_CNTRCT\_ID\_11 PTC\_CNTRCT\_ID\_12

**VALUES:** The first character of the contract ID is a letter or number representing the type of plan: H = Managed care organizations other than a regional PPO (i.e., local MA-PDs, 1876 and 1833 cost plans, Program of All-Inclusive Care for the Elderly (PACE) plans, private fee-for-service plans, or demonstration organization plans)

R = Regional preferred provider organization (PPO)

N = Not Part C Enrolled

0 = Not Medicare enrolled for the month

9 = Health Care Pre-Payment Plan (HCPP) — Section 1833 Cost Plan

Null/Missing = Enrolled in Medicare A and/or B, but no Part C enrollment data for the beneficiary

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**COMMENT:** If the beneficiary was not enrolled in a managed care plan for a given month, this variable will be null/missing for that month.

You need to know both the Part C contract number and plan benefit package (PBP; monthly variables called PTC\_PBP\_ID\_XX) in order to identify the specific plan in which a beneficiary was enrolled. The 1833 cost plans do not have populated PBP\_IDs.

There are 12 monthly variables — where the 01 through 12 at the end of the variable name correspond with the month (e.g., 01 is January and 12 is December).

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**PTC\_PBP\_ID\_01**

**PTC\_PBP\_ID\_02**

**PTC\_PBP\_ID\_03**

**PTC\_PBP\_ID\_04**

**PTC\_PBP\_ID\_05**

**PTC\_PBP\_ID\_06**

**LABEL:** Part C PBP Number – January through December

**PTC\_PBP\_ID\_07 PTC\_PBP\_ID\_08 PTC\_PBP\_ID\_09 PTC\_PBP\_ID\_10 PTC\_PBP\_ID\_11 PTC\_PBP\_ID\_12**

**DESCRIPTION:** The variable is the Medicare Part C plan benefit package (PBP) for the beneficiary’s Medicare Advantage (MA) plan for a given month (January through December).

CMS assigns an identifier to each PBP within a contract that a Part C plan sponsor has with CMS. **SHORT NAME:**

PTC\_PBP\_ID\_07

PTC\_PBP\_ID\_08

PTC\_PBP\_ID\_09

PTC\_PBP\_ID\_10

PTC\_PBP\_ID\_11

PTC\_PBP\_ID\_12

**LONG NAME:**

PTC\_PBP\_ID\_01 PTC\_PBP\_ID\_02 PTC\_PBP\_ID\_03 PTC\_PBP\_ID\_04 PTC\_PBP\_ID\_05 PTC\_PBP\_ID\_06

PTC\_PBP\_ID\_01

PTC\_PBP\_ID\_02

PTC\_PBP\_ID\_03

PTC\_PBP\_ID\_04

PTC\_PBP\_ID\_05

PTC\_PBP\_ID\_06

**TYPE:** CHAR

**LENGTH:** 3

**SOURCE:** CMS Common Medicare Environment (CME) **VALUES:** Three-digit alphanumeric that can include leading zeros

PTC\_PBP\_ID\_07 PTC\_PBP\_ID\_08 PTC\_PBP\_ID\_09 PTC\_PBP\_ID\_10 PTC\_PBP\_ID\_11 PTC\_PBP\_ID\_12

Null/missing = Not Enrolled in Medicare Part C (or enrolled in 1833 cost plans, which means the PBP\_ID is n/a)

**COMMENT:** If the beneficiary was not enrolled in a managed care plan for a given month, this variable will be null/missing for that month. The 1833 cost plans do not have populated PBP\_IDs.

You need to know both the Part C contract number (PTC\_CNTRCT\_ID\_XX) and plan benefit package (PBP) in order to identify the specific plan in which a beneficiary was enrolled.

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There are 12 monthly variables — where the 01 through 12 at the end of the variable name correspond with the month (e.g., 01 is January and 12 is December).

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**PTC\_PLAN\_TYPE\_CD\_01**

**PTC\_PLAN\_TYPE\_CD\_02**

**PTC\_PLAN\_TYPE\_CD\_03**

**PTC\_PLAN\_TYPE\_CD\_04**

**PTC\_PLAN\_TYPE\_CD\_05**

**PTC\_PLAN\_TYPE\_CD\_06**

**LABEL:** Part C Plan Type Code – January through December

**PTC\_PLAN\_TYPE\_CD\_07 PTC\_PLAN\_TYPE\_CD\_08 PTC\_PLAN\_TYPE\_CD\_09 PTC\_PLAN\_TYPE\_CD\_10 PTC\_PLAN\_TYPE\_CD\_11 PTC\_PLAN\_TYPE\_CD\_12**

**DESCRIPTION:** This variable is the type of Medicare Part C plan for the beneficiary for a given month (January through December).

**SHORT NAME:**

PTC\_PLAN\_TYPE\_CD\_07

PTC\_PLAN\_TYPE\_CD\_08

PTC\_PLAN\_TYPE\_CD\_09

PTC\_PLAN\_TYPE\_CD\_10

PTC\_PLAN\_TYPE\_CD\_11

PTC\_PLAN\_TYPE\_CD\_12

**LONG NAME:**

PTC\_PLAN\_TYPE\_CD\_01 PTC\_PLAN\_TYPE\_CD\_02 PTC\_PLAN\_TYPE\_CD\_03 PTC\_PLAN\_TYPE\_CD\_04 PTC\_PLAN\_TYPE\_CD\_05 PTC\_PLAN\_TYPE\_CD\_06

PTC\_PLAN\_TYPE\_CD\_01

PTC\_PLAN\_TYPE\_CD\_02

PTC\_PLAN\_TYPE\_CD\_03

PTC\_PLAN\_TYPE\_CD\_04

PTC\_PLAN\_TYPE\_CD\_05

PTC\_PLAN\_TYPE\_CD\_06

**TYPE:** CHAR

**LENGTH:** 3

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:** Null/missing =Not Enrolled in Medicare Part C 001 = Health Maintenance Organization (HMO)

002 = HMO point-of-service (HMOPOS)

004 = Local Preferred Provider Organization (PPO) 005 = PSO (State License)

006 = PSO (Federal Waiver of State License)

007 = Medical Savings Account (MSA)

PTC\_PLAN\_TYPE\_CD\_07 PTC\_PLAN\_TYPE\_CD\_08 PTC\_PLAN\_TYPE\_CD\_09 PTC\_PLAN\_TYPE\_CD\_10 PTC\_PLAN\_TYPE\_CD\_11 PTC\_PLAN\_TYPE\_CD\_12

008 = Religious Fraternal Benefit (RFB) private fee-for-service (PFFS) plan 009 = Private fee-for-service (PFFS) plan

010 = SHMO

018 = Section 1876 Cost Plan

019 = HCPP — Section 1833 Cost Plan

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020 = National Program of All-inclusive Care for the Elderly (PACE)

031 = Regional Preferred Provider Organization (PPO)

033 = Minnesota (MN) Disability Health Options

034 = MN Senior Health Options

035 = Wisconsin (WI) Partnership Program

036 = Massachusetts (MA) Health Senior Care Options

037 = Continuing Care Retirement Community

038 = End-Stage Renal Disease — I (ESRD)

039 = ESRD II

040 = Employer/Union Only Direct Contract PFFS

041 = Medical Savings Account (MSA) Demonstration

048 = Medicare-Medicaid Plan (MMP) HMO

049 = Medicare-Medicaid Plan HMO Point-of-Service (MMP HMOPOS)

**COMMENT:** If the beneficiary was not enrolled in a managed care plan for a given month, this variable will be null/missing for that month. There are 12 monthly variables — where the 01 through 12 at the end of the variable name correspond with the month (e.g., 01 is January and 12 is December).

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**PTD\_CNTRCT\_ID\_01**

**PTD\_CNTRCT\_ID\_02**

**PTD\_CNTRCT\_ID\_03**

**PTD\_CNTRCT\_ID\_04**

**PTD\_CNTRCT\_ID\_05**

**PTD\_CNTRCT\_ID\_06**

**LABEL:** Monthly Part D Contract Number – January through December

**PTD\_CNTRCT\_ID\_07 PTD\_CNTRCT\_ID\_08 PTD\_CNTRCT\_ID\_09 PTD\_CNTRCT\_ID\_10 PTD\_CNTRCT\_ID\_11 PTD\_CNTRCT\_ID\_12**

**DESCRIPTION:** This variable is the Part D contract number for the beneficiary’s Part D plan for a given month (January). CMS assigns an identifier to each contract that a Part D plan has with CMS.

**SHORT NAME:**

PTDCNTRCT07

PTDCNTRCT08

PTDCNTRCT09

PTDCNTRCT10

PTDCNTRCT11

PTDCNTRCT12

**LONG NAME:**

PTDCNTRCT01 PTDCNTRCT02 PTDCNTRCT03 PTDCNTRCT04 PTDCNTRCT05 PTDCNTRCT06

PTD\_CNTRCT\_ID\_01

PTD\_CNTRCT\_ID\_02

PTD\_CNTRCT\_ID\_03

PTD\_CNTRCT\_ID\_04

PTD\_CNTRCT\_ID\_05

PTD\_CNTRCT\_ID\_06

**TYPE:** CHAR

**LENGTH:** 5

**SOURCE:** CMS Common Medicare Environment (CME)

PTD\_CNTRCT\_ID\_07 PTD\_CNTRCT\_ID\_08 PTD\_CNTRCT\_ID\_09 PTD\_CNTRCT\_ID\_10 PTD\_CNTRCT\_ID\_11 PTD\_CNTRCT\_ID\_12

**VALUES:** The first character of the contract ID is a letter or number representing the type of plan: E = Employer direct plan (starting January 2007)

H = Managed care organizations other than a regional PPO (i.e., local MA-PDs, 1876 and 1833 cost plans, Program of All-Inclusive Care for the Elderly (PACE) plans, private fee-for-service plans, or demonstration organization plans)

R = Regional preferred provider organization (PPO)

S = Stand-alone prescription drug plan (PDP)

X = Limited Income Newly Eligible Transition plan (LINET)

N = Not Part D Enrolled

0 = Not Medicare enrolled for the month

Null/Missing = Enrolled in Medicare A and/or B, but no Part D enrollment data for the beneficiary.

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**COMMENT:** The first character of the contract ID is a letter that indicates the type of plan. If the beneficiary did not have a Part D plan for a given month, this variable will have a value of N, 0, or be null/missing for that month. If the beneficiary changed plans during the year, the value indicates the final, reconciled contract number. For 2006–2012, this variable was always encrypted to comply with CMS privacy rules.

There are 12 monthly variables — where the 01 through 12 at the end of the variable name correspond with the month (e.g., 01 is January and 12 is December).

You need to know both the Part D contract number and plan benefit package (PTD\_PBP\_ID\_XX) to identify the specific plan in which a beneficiary was enrolled.

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**PTD\_PBP\_ID\_01 PTD\_PBP\_ID\_02 PTD\_PBP\_ID\_03 PTD\_PBP\_ID\_04 PTD\_PBP\_ID\_05 PTD\_PBP\_ID\_06**

**PTD\_PBP\_ID\_07 PTD\_PBP\_ID\_08 PTD\_PBP\_ID\_09 PTD\_PBP\_ID\_10 PTD\_PBP\_ID\_11 PTD\_PBP\_ID\_12**

**LABEL:** Monthly Part D Plan Benefit Package Number – January through December

**DESCRIPTION:** The variable is the Part D plan benefit package (PBP) for the beneficiary’s Part D plan for a given month (January through December). CMS assigns an identifier to each PBP within a contract that a Part D plan sponsor has with CMS.

**SHORT NAME:**

PTDPBPID07

PTDPBPID08

PTDPBPID09

PTDPBPID10

PTDPBPID11

PTDPBPID12

**LONG NAME:**

PTDPBPID01 PTDPBPID02 PTDPBPID03 PTDPBPID04 PTDPBPID05 PTDPBPID06

PTD\_PBP\_ID\_01

PTD\_PBP\_ID\_02

PTD\_PBP\_ID\_03

PTD\_PBP\_ID\_04

PTD\_PBP\_ID\_05

PTD\_PBP\_ID\_06

**TYPE:** CHAR

**LENGTH:** 3

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:** Three-digit alphanumeric that can include leading zeros Null/missing =Not Enrolled in Medicare Part D

PTD\_PBP\_ID\_07 PTD\_PBP\_ID\_08 PTD\_PBP\_ID\_09 PTD\_PBP\_ID\_10 PTD\_PBP\_ID\_11 PTD\_PBP\_ID\_12

**COMMENT:** If the beneficiary did not have a Part D plan for a given month, this variable will have null/missing value for that month. If the beneficiary changed plans during the year, the value indicates the final, reconciled PBP number.

For 2006–2012, this variable was always encrypted to comply with CMS privacy rules.

There are 12 monthly variables — where the 01 through 12 at the end of the variable name correspond with the month (e.g., 01 is January and 12 is December). You need to know both the Part D

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contract number (PTD\_CNTRCT\_ID\_XX) and plan benefit package in order to identify the specific plan in which a beneficiary was enrolled.

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**PTD\_PLAN\_CVRG\_MONS**

**LABEL:** Months of Part D Coverage

**DESCRIPTION:** This variable is the number of months during the year that the beneficiary had Medicare Part D coverage. CCW derives this variable by counting the number of months where the beneficiary had Part D coverage.

**SHORT NAME:** PTD\_MO

**LONG NAME:** PTD\_PLAN\_CVRG\_MONS

**TYPE:** NUM

**LENGTH:** 3

**SOURCE:** CMS Common Medicare Environment (CME) (derived)

**VALUES:** 0–12

**COMMENT:** A Part D covered month is one where the first value of the monthly PTD\_CNTRCT\_ID\_XX variable equaled H, R, S, or E or the value was X followed by 4 alphanumeric characters.

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**PTD\_SGMT\_ID\_01 PTD\_SGMT\_ID\_02 PTD\_SGMT\_ID\_03 PTD\_SGMT\_ID\_04 PTD\_SGMT\_ID\_05 PTD\_SGMT\_ID\_06**

**PTD\_SGMT\_ID\_07 PTD\_SGMT\_ID\_08 PTD\_SGMT\_ID\_09 PTD\_SGMT\_ID\_10 PTD\_SGMT\_ID\_11 PTD\_SGMT\_ID\_12**

**LABEL:** Monthly Part D Market Segment Identifier – January through December

**DESCRIPTION:** This variable is the segment number that CMS assigns to identify a geographic market segment or subdivision of a Part D plan; the segment number allows you to determine the market area covered by the plan. The variable describes the market segment for a given month (January through December).

**SHORT NAME:**

SGMTID07

SGMTID08

SGMTID09

SGMTID10

SGMTID11

SGMTID12

**LONG NAME:**

SGMTID01 SGMTID02 SGMTID03 SGMTID04 SGMTID05 SGMTID06

PTD\_SGMT\_ID\_01

PTD\_SGMT\_ID\_02

PTD\_SGMT\_ID\_03

PTD\_SGMT\_ID\_04

PTD\_SGMT\_ID\_05

PTD\_SGMT\_ID\_06

**TYPE:** CHAR

**LENGTH:** 3

**SOURCE:** CMS Common Medicare Environment (CME)

PTD\_SGMT\_ID\_07 PTD\_SGMT\_ID\_08 PTD\_SGMT\_ID\_09 PTD\_SGMT\_ID\_10 PTD\_SGMT\_ID\_11 PTD\_SGMT\_ID\_12

**VALUES:** Null/missing or a three-digit numeric value that includes leading zeros.

**COMMENT:** If the beneficiary did not have a Part D plan for a given month, this variable will have null/missing value for that month. If the beneficiary changed plans during the year, the value indicates market segment identifier for the final, reconciled PBP. For 2006–2012, this variable was always encrypted to comply with CMS privacy rules.

There are 12 monthly variables — where the 01 through 12 at the end of the variable name correspond with the month (e.g., 01 is January and 12 is December).

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You need to know the Part D contract number (PTD\_CNTRCT\_ID\_XX) and plan benefit package (PTD\_PBP\_ID\_XX) in order to determine the geographic market areas where the particular PBP was offered. Premiums may vary by market segment.

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**RDS\_CVRG\_MONS**

**LABEL:** Months of Retiree Drug Subsidy Coverage

**DESCRIPTION:** This variable is the number of months during the year that the beneficiary was enrolled in an employer-sponsored prescription drug plan that qualified for Part D’s retiree drug subsidy (RDS). CCW derives this variable by counting the number of months where the beneficiary had retiree drug subsidy.

**SHORT NAME:** RDS\_MO

**LONG NAME:** RDS\_CVRG\_MONS

**TYPE:** NUM

**LENGTH:** 3

**SOURCE:** CMS Common Medicare Environment (CME) (derived)

**VALUES:** 0–12

**COMMENT:** A month of RDS is when the RDS\_IND\_XX for the month = Y.

Some employers offer prescription drug plans to their retirees, and Part D pays a subsidy to plans that offer coverage that is equivalent to (or better than) conventional Part D benefits.

CMS does not collect PDEs for beneficiaries that are enrolled in RDS-eligible plans.

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**RDS\_IND\_01 RDS\_IND\_02 RDS\_IND\_03 RDS\_IND\_04 RDS\_IND\_05 RDS\_IND\_06**

**RDS\_IND\_07 RDS\_IND\_08 RDS\_IND\_09 RDS\_IND\_10 RDS\_IND\_11 RDS\_IND\_12**

**LABEL:** Monthly Part D Retiree Drug Subsidy Indicator – January through December

**DESCRIPTION:** This variable indicates if the beneficiary was enrolled in an employer-sponsored prescription drug plan that qualified for Part D’s retiree drug subsidy (RDS) for a given month (January through December).

**SHORT NAME:**

RDSIND07

RDSIND08

RDSIND09

RDSIND10

RDSIND11

RDSIND12

**LONG NAME:**

RDSIND01 RDSIND02 RDSIND03 RDSIND04 RDSIND05 RDSIND06

RDS\_IND\_01

RDS\_IND\_02

RDS\_IND\_03

RDS\_IND\_04

RDS\_IND\_05

RDS\_IND\_06

**TYPE:** CHAR

**LENGTH:** 1

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:** Y = Employer subsidized for the retired beneficiary N = No employer subsidization for the retired beneficiary 0 = Not Medicare enrolled for the month

RDS\_IND\_07 RDS\_IND\_08 RDS\_IND\_09 RDS\_IND\_10 RDS\_IND\_11 RDS\_IND\_12

Null/missing = Enrolled in Medicare A and/or B, but no Part D enrollment data for the beneficiary.

**COMMENT:** Some employers offer prescription drug plans to their retirees, and Part D pays a subsidy to plans that offer coverage that is equivalent to (or better than) conventional Part D benefits.

CMS does not collect PDEs for beneficiaries that are enrolled in RDS-eligible plans.

There are 12 monthly variables — where the 01 through 12 at the end of the variable name correspond with the month (e.g., 01 is January and 12 is December). ^ Back to TOC ^

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**RTI\_RACE\_CD**

**LABEL:** Research Triangle Institute (RTI) Race Code

**DESCRIPTION:** Beneficiary race code (modified using RTI algorithm). Enhanced race/ethnicity designation based on first and last name algorithms.

**SHORT NAME:** RTI\_RACE\_CD

**LONG NAME:** RTI\_RACE\_CD

**TYPE:** CHAR

**LENGTH:** 1

**SOURCE:** CMS Common Medicare Environment (CME) (derived)

**VALUES:** 0 = Unknown

1 = Non-Hispanic White

2 = Black (Or African-American)

3 = Other

4 = Asian/Pacific Islander

5 = Hispanic

6 = American Indian / Alaska Native

**COMMENT:** This variable is created by taking the beneficiary race code that has historically been used by the Social Security Administration (and is in turn used in CMS’s enrollment data base) and applying an algorithm that identifies more beneficiaries as Hispanic or Asian.

This algorithm was developed by the Research Triangle Institute (RTI) and is thus often referred to as the “RTI race code”.

The algorithm classifies beneficiaries as Hispanic or Asian if their SSA race code equals 4 (Asian) or 5 (Hispanic), or if they have a first or last name that RTI determined was likely Hispanic or Asian in origin.

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**SAMPLE\_GROUP**

**LABEL:** Medicare Sample Group Indicator

**DESCRIPTION:** Medicare 1, 5, or 20% strict sample group indicator.

**SHORT NAME:** SAMPLE\_GROUP

**LONG NAME:** SAMPLE\_GROUP

**TYPE:** CHAR

**LENGTH:** 2

**SOURCE:** CCW (derived)

**VALUES:** 01, 04, 15, null/missing (not included in 20% sample for the year)

**COMMENT:** CCW creates the sample values using standard CMS processes to identify the random 1, 5, 15, and 20 percent samples of Medicare beneficiaries.

The sample groups are based on a random 20 percent sample that is split into three mutually exclusive groups of 1 percent, 4 percent, and 15 percent.

To use the 1 percent sample, specify that SAMPLE\_GRP equals “01”.

To use the 5 percent sample, specify that SAMPLE\_GRP equals “01” or “04”.

To use the 15 percent sample, specify that SAMPLE\_GRP equals “15”.

To use the 20 percent sample, specify that SAMPLE\_GRP equals “01”, “04”, or “15”.

Beneficiaries are assigned to sample groups each year based on the last two digits of their Medicare Claim Account Numbers (CANs). Since CANs can change over time (e.g., in the case of remarriage), new beneficiaries are becoming eligible for Medicare, and existing beneficiaries are dying, the sample is cross-sectional. There is no guarantee that the exact same beneficiaries are represented in the same sample group from one year to the next (i.e., this is the strict sampling).

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**SEX\_IDENT\_CD**

**LABEL:** Sex

**DESCRIPTION:** This variable indicates the sex of the beneficiary.

**SHORT NAME:** SEX

**LONG NAME:** SEX\_IDENT\_CD

**TYPE:** CHAR

**LENGTH:** 1

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:** 0 = Unknown

1 = Male

2 = Female

**COMMENT:** —

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**STATE\_CNTY\_FIPS\_CD\_01**

**STATE\_CNTY\_FIPS\_CD\_02**

**STATE\_CNTY\_FIPS\_CD\_03**

**STATE\_CNTY\_FIPS\_CD\_04**

**STATE\_CNTY\_FIPS\_CD\_05**

**STATE\_CNTY\_FIPS\_CD\_06**

**LABEL:** State and county FIPS code – January through December

**STATE\_CNTY\_FIPS\_CD\_07 STATE\_CNTY\_FIPS\_CD\_08 STATE\_CNTY\_FIPS\_CD\_09 STATE\_CNTY\_FIPS\_CD\_10 STATE\_CNTY\_FIPS\_CD\_11 STATE\_CNTY\_FIPS\_CD\_12**

**DESCRIPTION:** This field specifies the monthly the concatenated state/county Federal Information Processing Standard (FIPS) code for the beneficiary — in January through December.

**SHORT NAME:**

STATE\_CNTY\_FIPS\_CD\_07

STATE\_CNTY\_FIPS\_CD\_08

STATE\_CNTY\_FIPS\_CD\_09

STATE\_CNTY\_FIPS\_CD\_10

STATE\_CNTY\_FIPS\_CD\_11

STATE\_CNTY\_FIPS\_CD\_12

**LONG NAME:**

STATE\_CNTY\_FIPS\_CD\_01 STATE\_CNTY\_FIPS\_CD\_02 STATE\_CNTY\_FIPS\_CD\_03 STATE\_CNTY\_FIPS\_CD\_04 STATE\_CNTY\_FIPS\_CD\_05 STATE\_CNTY\_FIPS\_CD\_06

STATE\_CNTY\_FIPS\_CD\_01

STATE\_CNTY\_FIPS\_CD\_02

STATE\_CNTY\_FIPS\_CD\_03

STATE\_CNTY\_FIPS\_CD\_04

STATE\_CNTY\_FIPS\_CD\_05

STATE\_CNTY\_FIPS\_CD\_06

**TYPE:** CHAR

**LENGTH:** 5

**SOURCE:** CMS Common Medicare Environment (CME)

STATE\_CNTY\_FIPS\_CD\_07 STATE\_CNTY\_FIPS\_CD\_08 STATE\_CNTY\_FIPS\_CD\_09 STATE\_CNTY\_FIPS\_CD\_10 STATE\_CNTY\_FIPS\_CD\_11 STATE\_CNTY\_FIPS\_CD\_12

**VALUES:** 5-digit numeric value, which can include leading zeros, or null (if there is no crosswalk from the SSA code to the FIPS code)

**COMMENT:** The first 2 digits specify the state; the last 3 digits specify the county.

This variable is derived by taking the SSA state/county code on record for the beneficiary in the CMS enrollment database and linking it to the corresponding FIPS state/county code.

There are 12 monthly variables — where the 01 through 12 at the end of the variable name correspond with the month (e.g., 01 is January and 12 is December).

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**STATE\_CODE**

**LABEL:** State code for beneficiary (SSA code)

**DESCRIPTION**: The social security administration (SSA) standard 2-digit state code of a beneficiary's residence. **SHORT NAME:** STATE\_CD

**LONG NAME:** STATE\_CODE

**TYPE:** CHAR

**LENGTH:** 2

**SOURCE:** SSA/CME

**VALUES:**

01 = Alabama

02 = Alaska

03 = Arizona

04 = Arkansas

05 = California

06 = Colorado

07 = Connecticut

08 = Delaware

09 = District of Columbia 10 = Florida

11 = Georgia

12 = Hawaii

13 = Idaho

14 = Illinois

15 = Indiana

16 = Iowa

17 = Kansas

18 = Kentucky

19 = Louisiana

20 = Maine

21 = Maryland

22 = Massachusetts 23 = Michigan

24 = Minnesota

25 = Mississippi

26 = Missouri

27 = Montana

28 = Nebraska

29 = Nevada

30 = New Hampshire 31 = New Jersey

32 = New Mexico

33 = New York

34 = North Carolina

35 = North Dakota

36 = Ohio

37 = Oklahoma

38 = Oregon

39 = Pennsylvania

40 = Puerto Rico

41 = Rhode Island

42 = South Carolina

43 = South Dakota

44 = Tennessee

45 = Texas

46 = Utah

47 = Vermont

48 = Virgin Islands

49 = Virginia

50 = Washington

51 = West Virginia

52 = Wisconsin

53 = Wyoming

54 = Africa

55 = Asia

56 = Canada and Islands

57 = Central America and West Indies 58 = Europe

59 = Mexico

60 = Oceania

61 = Philippines

62 = South America

63 = U.S. Possessions

64 = American Samoa

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65 = Guam

66 = Commonwealth of the Northern Marianas Islands

67 = Texas

68 = Florida (eff. 10/2005)

69 = Florida (eff. 10/2005)

70 = Kansas (eff. 10/2005)

71 = Louisiana (eff. 10/2005)

72 = Ohio (eff. 10/2005)

73 = Pennsylvania (eff. 10/2005) 74 = Texas (eff. 10/2005)

80 = Maryland (eff. 8/2000)

97 = Northern Marianas

98 = Guam

99 = With 000 county code is American Samoa; otherwise unknown

**COMMENT:** The state code is based on the latest state code for the beneficiary for the year in the CME data. If the value is missing, then the first state code in the following year populates this field.

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**VALID\_DEATH\_DT\_SW**

**LABEL:** Valid Date of Death Switch

**DESCRIPTION:** This variable indicates whether a beneficiary’s day of death has been verified by the Social Security Administration (SSA) or the Railroad Retirement Board (RRB).

**SHORT NAME:** V\_DOD\_SW

**LONG NAME:** VALID\_DEATH\_DT\_SW

**TYPE:** CHAR

**LENGTH:** 1

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:** Null = Default

V = Valid death date

**COMMENT:** The date of death of the beneficiary is contained in the BENE\_DEATH\_DT variable; many of these dates of death are not confirmed.

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**ZIP\_CD**

**LABEL:** Zip code for beneficiary

**DESCRIPTION:** This field specifies the zip code identified as the beneficiary mailing address. **SHORT NAME:** ZIP\_CD

**LONG NAME:** ZIP\_CD

**TYPE:** CHAR

**LENGTH:** 5

**SOURCE:** CMS Common Medicare Environment (CME)

**VALUES:** 5-digit zip

**COMMENT:** In some cases, the code may not be the actual state where the beneficiary resides. CMS obtains the mailing address used for cash benefits or the mailing address used for other purposes (for example, premium billing) from Social Security Administration (SSA) and Railroad Retirement Board (RRB) Beneficiary Record Systems.

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