The following is an overview of software for the CMS-RXHCC risk-adjustment model. The software includes a SAS program - R051601P that calls several SAS Macros to create 8 RXHCC score variables using coefficients from PDP+MAPD regression models. There are 8 regression models as follows:

- 1) Community, Non-Low Income, Aged, Continuing Enrollee
- 2) Community, Non-Low Income, Non-Aged, 1 Continuing Enrollee
- 3) Community, Low Income, Aged, Continuing Enrollee
- 4) Community, Low Income, Non-Aged, Continuing Enrollee
- 5) Institutional Continuing Enrollee
- 6) Community, Non-Low Income, New Enrollee
- 7) Community, Low Income, New Enrollee
- 8) Institutional New Enrollee

Software description

The software consists of a main program R051601P that supplies user parameters to the main SAS Macro program R051601M. This macro program reads in two input files and assigns RXHCCs for each person. First, the program crosswalks diagnoses to Condition Categories (RXCCs) using SAS formats which were previously stored in the FORMAT library. Then the program creates Drug Hierarchical Condition Categories (RXHCCs) by imposing hierarchies on the RXCCs. For persons without claims, zeros are assigned to all RXHCCs. A person may be assigned none, one, or multiple RXHCCs.

After RXHCCs are created, the program computes predicted scores from 8 regression models.

The main macro R051601M uses 6 external SAS Macro programs:

- %AGESEXV4 creates age/sex, originally disabled, and non-aged interaction variables
- %R05I9ED1 performs edits to ICD9 diagnosis codes
- %R05I0ED1 performs edits to ICD10 diagnosis codes
- \bullet %R05X76L1 assigns labels to RXHCCs
- %R05X76H1 sets RXHCC=0 according to hierarchies
- %SCOREVAR calculates a score variable

The main program, main macro and 6 external macros have a .txt extension to make the files easier to view. Please rename them to have a .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

¹ The term "non-aged" is used for those younger than 65 because this group includes beneficiaries eligible for Medicare because of end-stage renal disease as well as those eligible because of disability.

- perform diagnosis edits using macro R05I9ED1 if ICD9 or R05I0ED1 if ICD10
- create RXCC using format provided in format library
- create additional RXCC 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 AGESEXV4)
- create RXHCCs using hierarchies (macro R05x76H1)
- create RXHCC by non-aged interaction variables
- set RXHCCs and interaction variables to zero if there are no diagnoses for a person
- create scores for 5 continuing enrollee models (macro SCOREVAR)
- create scores for 3 new enrollee models (macro **SCOREVAR**) step4: data checks and proc contents

PART 1. Files supplied by the software.

The following SAS programs and files are included in this software: R051601P - main program that has all the parameters supplied by a user (see below for parameter and variable list). It calls main macro R051601M.

 ${\tt R051601M}$ - main macro that creates RXHCC and SCORE variables by calling other external macros.

AGESEXV4 - creates age/sex, originally disabled, and non-aged interaction variables.

 ${f R0519ED1}$ - performs edits to ICD9 code if wanted. Medicare Code Editor (MCE) is source of edits.

 ${\tt R05I0ED1}$ - performs edits to ICD10 code if wanted. Medicare Code Editor (MCE) is source of edits.

R05X76L1 - assigns labels to RXHCCs.

R05X76H1 - sets RXHCC=0 according to hierarchies.

SCOREVAR - calculates a score variable.

 ${\tt F051690C.ICD9.TXT}$ - a txt version of the format that has a cross-walk from ICD9 codes to RXCC categories (use for reference only). This format contains ICD9 codes valid in FY2015.

 ${\tt F051690C.ICD10.TXT}$ - a txt version of the format that has a crosswalk from ICD10 codes to RXCC categories (use for reference only). This format contains ICD10 codes valid in FY2016.

 ${\tt F051690C.TRN}$ — format library containing all the formats necessary for the software.

R051402Q.TRN - relative coefficients for 8 regression models created on CY2013/2014 data using denominator \$1,014.31 (CMS 01-06-2016).

The last 2 files are SAS transport files and have the extension .trn. These transport files are special SAS files that may be used on any platform running SAS after uploading and converting using PROC CIMPORT. The user should use the following program to convert them.

Code for converting coefficients transport file to SAS file:

```
filename inc "C:\user defined location of the transport
file\R051402Q.TRN";
libname incoef "C:\user defined location of the sas coefficients
file";
proc cimport data=incoef.rxcoeff infile=inc;
run;

Code for converting formats transport file to SAS file:
filename inf "C:\user defined location of the transport
file\F051690C.TRN";
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

- 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

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

ESRD

-numeric, end stage renal disease indicator with the following values for the payment year:

- 0 no ESRD
- 1 if person is in any of the following statuses: ESRD dialysis, transplant, post graft.

ESRD variable is needed for New Enrollee models. If missing, the New Enrollee scores for the beneficiary will be missing. Set to 0 if not known to get the non-ESRD score, the most common situation.

- DIAG file--a diagnosis file with at least one record per personspecific diagnosis for persons with diagnoses.
 - **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 providers and physician specialties allowable for risk adjustment reporting (as specified in CMS notices).

DIAG TYPE

- Diagnosis code version, 1 character field, with the following values:

9 for ICD9

0 for ICD10

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 in the R051601P program:

- INP SAS input person dataset name
- IND SAS input diagnosis dataset name
- OUTDATA SAS output dataset name
- IDVAR variable name for Beneficiary ID (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 MCE edits on ICD9 and ICD10 codes:

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 ${\tt R051601P}$ in

the ${\tt KEEPVAR}$ parameter of macro ${\tt R051601M}$ call. The following variables can be specified:

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

```
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
(These are age/sex variables for continuing enrollees defined in the main program R051601P by the macro variable &AGESEXVARS.)
```

- 3) RXHCCs defined in the main program R051601P by the macro variable &RXHCCV5 list76
- 4) RXCCs (condition categories assigned before hierarchies are applied) defined in the main program R051601P by the macro variable &RXCCV5 list76
- 5) Score variables:

```
SCORE_CE_NoLowAged
SCORE_CE_NoLowNoAged
SCORE_CE_LowAged
SCORE_CE_LowNoAged
SCORE_CE_LTI
SCORE_NE_NonLowCommunity
SCORE_NE_LowCommunity
SCORE_NE_LowCommunity
```

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