*B*ENEFICIARY ENCRYPTED FILES DATA

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INTRODUCTION

The Beneficiary Encrypted Files (BEFs) chapter includes files that contain selected data elements which have been encrypted, ranged, or blanked. These files are another source of data for Federal agencies outside of HCFA, Federal government contractors, academic researchers, and commercial enterprises that are not permitted access to individually identifiable information, but who have approved research or projects requiring data not available in the Public Use Files (PUFs).

Additional information about requesting the release of BEFs and the data contained in the BEFs can be obtained by contacting the OIS, EDG, Division of Information Distribution hotline at 410 786-3691.

BEFs require a signed Data Use Agreement (DUA) before the data can be released. A blank agreement form can be obtained by calling the above number.

The BEFs described in this chapter are modified versions of the files discussed in earlier chapters. As applicable, the corresponding analytic file is noted in the discussion of each BEF. Readers are advised to consult the description of the source file for further information.

The files described in the BEFs data chapter are organized into the following file groups:

!   **Enrollment**

   - Denominator File
   - Health Skeleton Eligibility Write-Off (HISKEW) File

!   **Standard Analytical Files (SAFs)**

   - Home Health Agency (HHA)
   - Hospice
   - Inpatient
   - Physician/Supplier Part B
   - Outpatient
   - Skilled Nursing Facility (SNF)

!   **Expanded Modified MEDPAR - Hospital (National) File**
!   **Expanded Modified MEDPAR - Hospital (State) File**
!   **Expanded Modified MEDPAR - Skilled Nursing Facility**

!   **Physician Sample File (Formerly BMAD Provider File)**
!   **5% Sample Durable Medical Equipment (DME)**

DENOMINATOR FILE

The Denominator File combines Medicare beneficiary entitlement status information from administrative enrollment records with third-party payer information and GHP enrollment information. The Denominator File contains data on all Medicare beneficiaries enrolled and/or entitled in a given year. Like the HISKEW File, it is an abbreviated version of the Enrollment DataBase (EDB) (selected data elements). It does not, however, contain data on all beneficiaries ever entitled to Medicare. The file contains data only for beneficiaries who were entitled during the year of the data. These data are available annually in May of the current year for the prior year.

The Denominator File is available CY 1984 through CY 1998. **A signed DUA is required.**

HEALTH SKELETON ELIGIBILITY WRITE-OFF (HISKEW) FILE

The HISKEW File is a subset ("skeleton") of the data elements of the EDB, but, like the EDB, it contains data for every beneficiary ever entitled to Medicare. These data are available annually in May of the current year for the prior year.

The HISKEW File is available CY 1984 through CY 1998. **A signed DUA is required.**

STANDARD ANALYTICAL FILES

These files are available by type of claim or collectively as a group. The 5% sample is created based on selecting records with 05, 20, 45, 70 or 95 in positions 8 and 9 of the Health Insurance Claim (HIC) number. The term "providers" is used universally to refer to physicians as well as institutions. Medicare Institutional provider numbers are not encrypted; however, physician identifiers, e.g. UPINs, etc. are encrypted in the public use files.

Physician Identification (ID) numbers and Beneficiary HIC numbers are encrypted in the 5% files to protect the privacy of individuals. The "Beneficiary State of Residence Files" contain all services provided to a beneficiary based on their state of residence regardless of whether the service was performed in that state. Please note that in the 100% National file, the Physician ID numbers are encrypted and the Beneficiary Claim numbers are blanked out.

These files contain final action claims data in which all adjustments have been resolved. The current year's data are available beginning with data submitted from January to June of that year. Thereafter, updates are created quarterly until the file is finalized at 18 months (in July of the following year).

(This 18-month window captures 98% of the claims.) SAF includes the following files: HHA, Hospice, Inpatient, Physician/Supplier Part B, Outpatient, and SNF. **A signed DUA is required.**

The Physician/Supplier Part B files are available for the years 1991 through 1998. Physician/Supplier 5% sample data for calendar years 1988 through 1990 are available on the BMAD Beneficiary File. All other files are available for the years 1989 through 1997.

EXPANDED MODIFIED MEDPAR-HOSPITAL (NATIONAL)

The Medicare Provider Analysis and Review (MEDPAR) file contains records for 100% of Medicare beneficiaries who use hospital inpatient services.* The records are stripped of most data elements that will permit identification of beneficiaries. The hospital is identified by the six position Medicare billing number. The file is available to persons qualifying under the terms of the Routine Use Act as outlined in the December 24, 1984, Federal Register and amended by the July 2, 1985, Notice. The national file consists of approximately 11 million records.

1.   The Notice of Proposed Rule Making (NPRM) is published in the Federal   Register, usually available by the end of May. This file is derived from the   MEDPAR file with a cutoff of three months after the end of the fiscal year (December file).

2.   The Final Rule is published in the Federal Register usually by the first week of September. This file is derived from the MEDPAR file with a cutoff of nine months after the end of the fiscal year (June file).

The Expanded Modified MEDPAR - Hospital (National) File is available FY 1988 through FY 1998. **A signed DUA is required.**

*The file is a federal fiscal year which specifies discharges occurring October 1 through September 30.

EXPANDED MODIFIED MEDPAR-HOSPITAL (STATE)

Expanded Modified MEDPAR-Hospital extracted by State of Beneficiary Residence

The Medicare Provider Analysis and Review (MEDPAR) file contains records for 100% of Medicare beneficiaries who use hospital inpatient services. The records are stripped of most data elements that will permit identification of beneficiaries. The hospital is identified by the six position Medicare billing number. The file is available to persons qualifying under the terms of the Routine Use Act as outlined in the December 24, 1984, Federal Register and amended by the July 2, 1985, Notice. This is a subset of the Expanded Modified MEDPAR-Hospital (National) as described above.

1.	The Notice of Proposed Rule Making (NPRM) is published in the <u>Federal Register</u> usually by the end of May. This file is derived from the MEDPAR file with a cutoff of three months after the end of the fiscal year (December file).

2.	The Final Rule is published in the <u>Federal Register</u> usually by the first week of September. This file is derived from the MEDPAR file with a cutoff of nine months after the end of the fiscal year (June file).

The Expanded Modified MEDPAR - Hospital (State) File is available FY 1988 through FY 1998. **A signed DUA is required.**

EXPANDED MODIFIED MEDPAR-SKILLED NURSING FACILITY

This file is stripped of most data elements that will permit identification of beneficiaries. The Skilled Nursing Facility (SNF) is identified by the six position Medicare billing number. The file contains records for 100% of Medicare beneficiaries who use SNF services. The file is available to persons qualifying under the terms of the Routine Use Act as outlined in the December 24, 1984, <u>Federal Register</u> and amended by the July 2, 1985, Notice.

The Final Rule is published in the <u>Federal Register</u> usually by the first week of September. This file is derived from the MEDPAR file with a cutoff of nine months after the end of the fiscal year (June file).

The Expanded Modified MEDPAR - Skilled Nursing Facility File is available FY 1992 through FY 1998. **A signed DUA is required.**

PHYSICIAN SAMPLE FILE (FORMERLY: BMAD PROVIDER FILE)

This file contains detailed line item information from claims submitted by physician/suppliers. Provider numbers and beneficiary claim numbers have been encrypted to protect the privacy of individuals.

The Physician Sample File is available CY 1991 through CY 1996. **A signed DUA is required.**

Note: No further updates available for this file.

5% SAMPLE DURABLE MEDICAL EQUIPMENT (DME) STANDARD ANALYTICAL FILE (SAF)

Beginning October 1, 1993, HCFA changed the way it handled the reporting of DME claims. The establishment of Durable Medical Equipment Regional Carriers (DMERCs) regionalized the processing for most of these claims. The transition period for this new procedure occurred between October 1, 1993, and June 30, 1994. During the phase-in, DME suppliers submitted claims for payment using the old and new method. The 1994 DME file contains claims for the last quarter of 1993 and includes all 1994 DME claims submitted to DMERCs. The 1997 file contains approximately 34 million records. Some DME claims will continue to be submitted through local carriers.

The 5% Sample Durable Medical Equipment (DME) Standard Analytical File (SAF) is available CY 1994 through CY 1998. **A signed DUA is required.**

BENEFICIARY ENCRYPTED DATA FILES

October 1, 1999

BENEFICIARY ENCRYPTED DATA FILE ELEMENTS

DATA ELEMENT	HHA 5% - 100%	HSP 5% - 100%	I/P 5% - 100%	SNF 5% - 100%	O/P 5% - 100%	P/S 5%	DME 5% - 100%
1. HIC	E ---- B	E ---- B	E ---- B	E ---- B	E ---- B	E	E ---- N/A
2. CATEGORY EQUATABLE BIC	E ---- B	E ---- B	E ---- B	E ---- B	E ---- B	E	E ---- N/A
3. BIC	B ---- B	B ---- B	B ---- B	B ---- B	B ---- B	B	B ---- N/A
4. ZIP CODE:							
- PHYSICIAN						B	
- BENEFICIARY	B ---- B	B ---- B	B ---- B	B ---- B	B ---- B	B	B ---- N/A
5. DATES:							
- FROM	B ---- B	B ---- B	B ---- B	B ---- B	B ---- B	B	B ---- N/A
- THRU	YQ --- YQ	YQ --- YQ	YQ --- YQ	YQ --- YQ	YQ --- YQ	YQ	YQ --- N/A
- ADMISSION		YQ --- YQ	YQ --- YQ	YQ --- YQ			
- DATE OF BIRTH	R --- R	R --- R	R --- R	R --- R	R --- R	R	R --- N/A
6. PATIENT CONTROL NUMBER	B ---- B	B ---- B	B ---- B	B ---- B	B ---- B		
7. MEDICAID PROVIDER ID NO.	E ---- E	E ---- E	E ---- E	E ---- E	E ---- E		
8. CLAIM MEDICAL RECORD NO.	B ---- B	B ---- B	B ---- B	B ---- B	B ---- B		
9. BENEFICIARY NAME			B ---- B	B ---- B			
10. CLAIM APPRO. GRACE DAY CT			B ---- B	B ---- B			
11. CLAIM APP. SERVICE FROM DATE			B ---- B	B ---- B			
12. CLAIM APP. SERVICE THRU DATE			B ---- B	B ---- B			
13. CWFB PROVIDER TAX NO.						E	E ---- N/A
14. PROFILING NO. - PERFORMING						E	
15. PROFILING NO. - REFERRING						E	
16. CLAIM PRIMARY CARE PHY. ID #**	E ---- B	E ---- B	E ---- B	E ---- B	E ---- B		
17. CLAIM PRINCIPAL PROC. PHY. ID**			E ---- B	E ---- B	E ---- B		
18. CLAIM OTHER PHYSICIAN ID NO.**			E ---- B	E ---- B	E ---- B		
19. PERFORMING PROVIDER UPIN						E	
20. CLAIM REFERRING PHY. UPIN						E	
21. CLAIM ORDERING PHY. UPIN							E ---- N/A

E -- ENCRYPTED   B -- BLANKED   R -- RANGE   YQ -- YEAR & QUARTER

DATA ELEMENT SELECTIONS ARE TREATED AS 5% SELECTIONS.

FIELDS THAT HAVE NO INDICATOR IN THEM ARE NOT AVAILABLE IN THAT FILE.

** POSITIONS 1-6 SHOULD BE ENCRYPTED USING THE UPIN ENCRYPTION. POSITIONS 7-10 SHOULD BE BLANKED.

BENEFICIARY ENCRYPTED DATA FILES

October 1, 1999

BENEFICIARY ENCRYPTED DATA FILES

October 1, 1999

BENEFICIARY ENCRYPTED DATA FILE ELEMENTS

	DENOM	HISKEW
DATA ELEMENT	**5% -100%**	**5% -100%**
1. HIC	E ---- B	E ---- B
2. CATEGORY EQUATABLE BIC	E ---- B	
3. BIC	B ---- B	E ---- B
4. ZIP CODE:		
- BENEFICIARY	B ---- B	B ---- B
5. DATES:		
- DATE OF BIRTH	B ---- B	R ---- R
6. BENE. RESIDENCE CHANGE DATE		B ---- B
7. BENE. SOCIAL SECURITY NUMBER		B ---- B
8. X-REF BENE. CLAIM ACCOUNT NO.		B ---- B
9. X-REF BENE. IDENTIFICATION CODE		B ---- B
10. BENE. DEATH DATE	B* ---- B*	B* ---- B*
11. BENE. SSA BENEFIT PAYMENT CODE		B ---- B

E -- ENCRYPTED   B -- BLANKED   R -- RANGED

B* - THIS FIELD WILL BE BLANKED UNLESS THERE IS A "V" IN THE VALID DAY OF DEATH FIELD.

DATA ELEMENT SELECTIONS ARE TREATED AS 5% SELECTIONS.