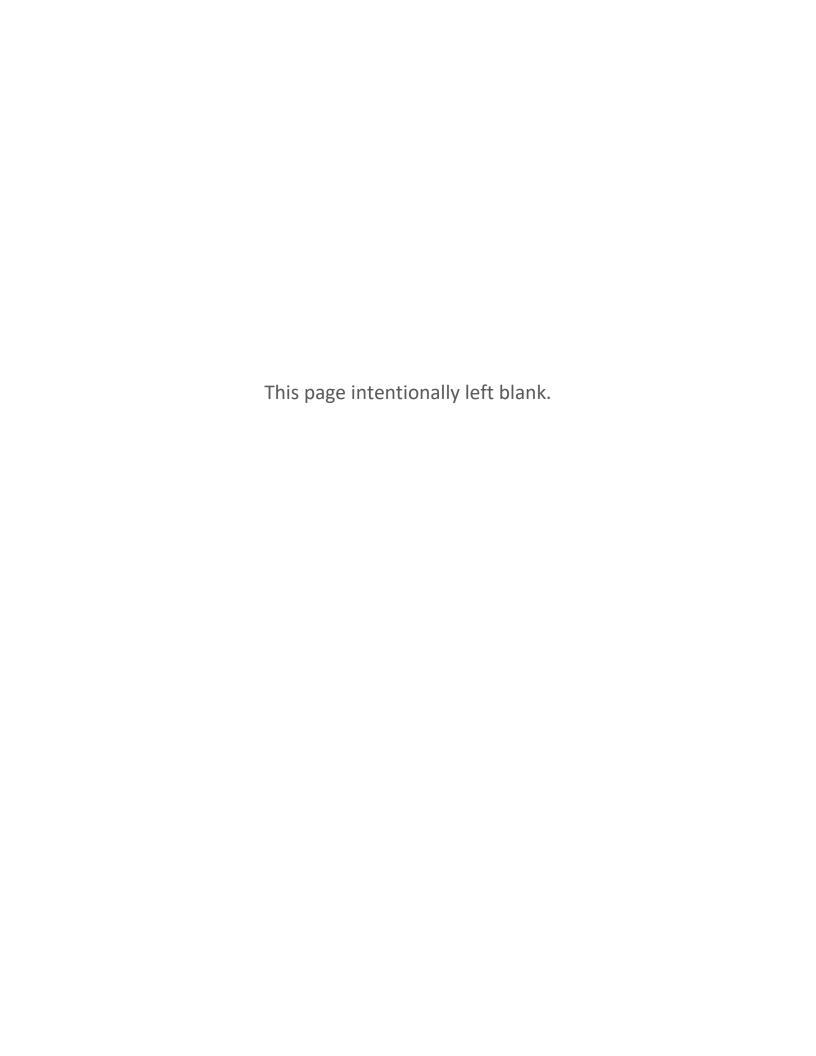# The CMS Innovation Center

Supports the development and testing of health care payment and service delivery models

Center for Medicare & Medicaid Innovation

CMS Innovation Center Model Data Files for Entity, Provider, and Beneficiary Participants (CMDS-EPB) User Guide

AUGUST 2022 | VERSION 1.0

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Date	Submitted by		Version
August 2022	The CMS Innovation Center	Initial document	1.0

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1.0 Overview

The CMS Innovation Center was established in 2010 as part of the Affordable Care Act with the goal of transitioning the health system to value-based care by developing, testing, and evaluating new payment and service delivery models in Medicare, Medicaid, and the Children's Health Insurance Program (CHIP).[1] In establishing the CMS Innovation Center, Congress recognized the need for innovations in payment and care delivery that addressed the two most pressing problems facing the U.S. health system at the time — lower than acceptable quality of care and ever-increasing spending that was (and continues to be) a growing burden on households, states, and the federal government.

CMS Innovation Center models have been launched in advanced primary care, episode-based care, accountable care, state-based transformation efforts, and for specific populations, such as Medicare beneficiaries with end-stage renal disease (ESRD), diabetes, heart disease, and in Medicaid for maternal opioid-use disorders, and populations that experience higher risk for premature births. Each model has yielded important policy and operational insights that will drive the next decade of health system transformation, helping to address not only continued challenges with health costs and quality of care, but also the impacts of inequity and health disparities that have become starkly apparent, particularly during the COVID-19 pandemic.

The CMS Innovation Center recently conducted a strategic refresh and has committed to making model data more easily available to stakeholders to advance transparency on model performance and to support external research and learnings. In line with this commitment, the CMS Innovation Center is releasing this file set for use in data analysis research projects.

All CMS Innovation Center models are managed by model teams. Many models are voluntary and participants enter into agreements with the CMS Innovation Center to participate. Other models (e.g. the Comprehensive Care for Joint Replacement model) are mandatory and providers in specific geographic areas are included. Beneficiaries can be attributed to providers in models based on voluntary alignment, prior claim history with specific providers or the occurrence of a clinical condition. Model teams track and manage the lists of participating entities, providers and beneficiaries and the model teams track the start and end dates of participation. These lists are ultimately recorded in a central data repository in the CMS Innovation Center called the Analysis & Management System (AMS). The data files in this release are sourced from the AMS system and may be used as 'finder files' in combination with other requested CCW files to isolate results to include (or not include as desired) entities, providers and or beneficiaries participating in specific models.

Please note that the various model lists of participating entities, providers and beneficiaries are frequently subject to change due to time lags in updates by model participants to their provider lists and/or to changes in beneficiary attribution. As such, these CMDS-EPB files should not be considered fully complete or final until approximately 6-12 months after a model has ended. Details about model start and end dates are available on the individual model web pages that may be accessed through https://innovation.cms.gov/.[2] While the CMS Innovation Center strives to provide the best data available in these files, the CMDS-EPB files represent a static snapshot of the model's entities, associated providers, and associated beneficiaries at the time the data is pulled. File contents may be subject to frequent changes

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[1] The Patient Protection and Affordable Care Act of 2010, Public Law 111-148, Section 1115A of the Social Security Act (the "Act") (42 U.S.C. 1315a).

[2] https://innovation.cms.gov/strategic-direction-whitepaper

due to changes in provider participation election, beneficiary status, model reconciliation and other factors related to alignment methodology.

Each model in the release will have a set of up to three (3) files, one per participant type (entity, provider, beneficiary), that includes data since the inception of the model and is captured as of a point in time. This file set will be updated on a quarterly basis. The files will all be "full replacement files" and contain data from the beginning of the model forward but may change from quarter to quarter as data is updated. The group of models for which files exist will expand over time to include additional models as data becomes available.

Each model has a unique identifier to distinguish the models; for a list of the models and their Model ID, refer to the data dictionary provided for the Entity table in the record layout.

To aid in analysis and technical direction and to better understand the specifics of any given model related to model participants, provider definitions, clinical episodes and the beneficiary alignment methodology please reference the information provided by CMMI https://innovation.cms.gov/ on the model specific web pages.

More details about the model participant files and data can be found in Section 2 – Files and Data.

2.0 Data Variables

There are up to three (3) categories of CMDS-EPB files that are produced quarterly for each individual model: Entity, Provider, and Beneficiary. Each file type contains unique identifiers and are used to link the data to other data sources to obtain additional information. The following sections describe each CMDS-EPB file and their major data elements.

2.1 Entity File and Data

An Entity is the Model Participant that has applied and been accepted to participate in the model or is required by mandate to participate. The Entity has the direct relationship with CMMI and is held fiscally responsible for meeting a model's performance goals. An Entity can be a Medicare group practice, an Accountable Care Organization, a State, or other organizations or groups of organizations.

The Entity file contains the Model ID and Model Name with which the Entity is associated; the Entity ID, Entity Name, and Entity Type for the specific Entity; and, the dates the Entity began and ended their participation in the model.

The Entity ID is unique to CMMI systems and cannot be used to link to claims data or other CCW data. The Entity ID is the key field for tying Providers and Beneficiaries to a specific Entity and is unique across all models. An Entity may have an End Date of 12/31/9999, which indicates that the Entity is "currently" participating in the model.

2.2 Provider File and Data

A Provider is a Medicare provider/supplier who has an arrangement with an Entity to participate as a member of their entity group in a model.

The Provider file contains the Model ID and Entity ID with which the Provider is associated. The Entity ID is unique across all models; it's the only key field needed to link a Provider to their Entity.

The Provider file also contains the Provider's National Provider Identifier (NPI), Tax Identification Number (TIN), and CMS Certification Number (CCN) when available. The NPI, TIN, and/or CCN can be used to link to claims and other relevant CCW data. There is also a Provider Participation Type code that indicates whether the Provider is participating

with the Entity as a "Participating Provider," which is the default or as a "Preferred Provider" for those models where their design specifies Preferred Providers.

The file contains the dates the Provider began and ended their association with the Entity and subsequently, the model. A Provider may have an End Date of 12/31/9999, which indicates that the Provider is "currently" participating in the model.

2.3 Beneficiary File and Data

A Beneficiary is someone who is entitled to health services under a federal health insurance plan. A Beneficiary is associated with an Entity and is not tied to a specific Provider, but rather to the set of providers in an entity group.

The Beneficiary file contains the Model ID and Entity ID with which the Beneficiary is associated.

Since the Entity ID is unique across all models it's the only key field needed to link a Beneficiary to their Entity.

The Beneficiary file also contains the encrypted internal CCW Beneficiary ID that can be used to link to claims and other relevant CCW data.

The Voluntary Alignment Indicator that specifies whether a Beneficiary chose to be associated with a specific Entity or was associated based on the model's alignment methodology for models where the design allows Voluntary Alignment.

The file contains the dates the Beneficiary began and ended their association with the Entity and subsequently, the model. A Beneficiary may have an End Date of 12/31/9999, which indicates that the Beneficiary is "currently" participating in the model.

For further explanation and detail on model alignment methodology please refer to the specific model website accessible through https://innovation.cms.gov/innovation-models#views=models.

3.0 Where to Get Assistance

The Research Data Assistance Center (ResDAC) is a CMS contractor and researchers should contact ResDAC to ask questions on the methodology used to develop the CMDS-EPB, make suggestions, or learn additional information about the data files. Researchers can reach ResDAC by phone at 1-888-973-7322, email at resdac@umn.edu, or online at http://www.resdac.org.

Appendix A — List of Acronyms

Acronym	Definition
AMS	Analysis and Management System
CCN	CMS Certification Number
CCW	Chronic Conditions Warehouse
CMDS-EPB	CMMI Medicare Data Sharing - Entity, Provider, Beneficiary
CMMI	Centers for Medicare & Medicaid Services (CMS) Innovation Center
CMS	Centers for Medicare & Medicaid Services
ID	Identification
NPI	National Provider Identifier
ResDAC	Research Data Assistance Center
TIN	Tax Identification Number