



# **Chronic Condition Data Warehouse**

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## **Medicare Part D Beneficiary Plan Election and Auto-Assignment Files Codebook**

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Version 1.2

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## Revision History

Revision Date	Version Number	Description	Author(s)
10/23/2017	1.0	Initial release of Codebook for PTD Beneficiary Plan Election and Auto-Assignment files.	Kathy Schneider, Chris Alleman
08/15/2018	1.1	Adjusted data source; description of Audit sequence number (AUDT_SQNC_NUM)	Kathy Schneider
02/25/2019	1.2	Added value ("N") for ENRLMT_TYPE_CD	Kathy Schneider

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## APLCTN\_DT

**LABEL:** Part D Plan application date

**DESCRIPTION:** This variable is the date the Part D plan sponsor received the election form from the beneficiary.

**TYPE:** DATE

**LENGTH:** 8

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

**FILE(S):** Part D Beneficiary Plan Election File

**VALUES:** Date value formatted as: DDMONYYYY

**COMMENT:** -

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## AUDT\_SQNC\_NUM

**LABEL:** Part D Enrollment Transaction Audit Sequence Number

**DESCRIPTION:** This variable is the Medicare Part D Enrollment Transaction Audit Sequence Number. The number indicates whether the occurrence has been audited. It will default to 0 (zero) for valid occurrences and will be incremented by 1 for audited rows with the same key fields.

**TYPE:** NUM

**LENGTH:** 3

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

**FILE(S):** Part D Beneficiary Plan Election File

**VALUES:** 0 = valid (effective) transaction

1 – X = audited records

**COMMENT:** While a beneficiary can only be enrolled in one Part D plan during a given time period there may be more than one enrollment transaction with an audit sequence number of zero for that time period. This indicates that a valid transaction has been replaced with another valid transaction. For example, if a beneficiary was auto-assigned to a plan but then picked a different plan.

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## AUTO\_ASSIGNED\_FLAG

<b>LABEL:</b>	Part D Plan Auto Assignment Indicator
<b>DESCRIPTION:</b>	This variable Indicates that the beneficiary had one or more Part D enrollment transactions that span the reference year where the Enrollment Type Code indicates auto-assignment or re-assignment (Enrollment Type Code of A or H) regardless of whether they opted-out of the plan they were assigned to.
<b>TYPE:</b>	CHAR
<b>LENGTH:</b>	1
<b>SOURCE:</b>	CMS Common Medicare Environment (CME) - derived
<b>FILE(S):</b>	Part D Beneficiary Auto-Assignment File
<b>VALUES:</b>	Y = yes, auto-assigned to the Part D Plan Null/missing
<b>COMMENT:</b>	The Enrollment Type Code variable (SAS name is ENRLMT_TYPE_CD) appears in the Part D Beneficiary Plan Election File

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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, MDS assessment data).

This number does not change during a beneficiary's lifetime and each number is used only once.

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

**TYPE:** CHAR

**LENGTH:** 15

**SOURCE:** CCW

**FILE(S):** Part D Beneficiary Plan Election File  
Part D Beneficiary Auto-Assignment File

**VALUES:** -

**COMMENT:** -

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## CHOOSE

<b>LABEL:</b>	Part D Plan Self Selection Indicator
<b>DESCRIPTION:</b>	This variable indicates that the beneficiary had one or more Part D enrollment transactions that span the reference year where the Enrollment Type Code indicates that the beneficiary made the plan selection (Enrollment Type Code of B or L).
<b>TYPE:</b>	CHAR
<b>LENGTH:</b>	1
<b>SOURCE:</b>	CMS Common Medicare Environment (CME) - derived
<b>FILE(S):</b>	Part D Beneficiary Auto-Assignment File
<b>VALUES:</b>	Y = yes, the beneficiary elected the Part D Plan Null/missing
<b>COMMENT:</b>	The Enrollment Type Code variable (SAS name is ENRLMT_TYPE_CD) appears in the Part D Beneficiary Plan Election File

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## CONTRACT\_ID

**LABEL:** Part D Contract Number

**DESCRIPTION:** This variable is the Medicare Part D contract number for the beneficiary's Part D plan.  
CMS assigns an identifier to each contract that a Part D plan has with CMS.

**TYPE:** CHAR

**LENGTH:** 5

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

**FILE(S):** Part D Beneficiary Plan Election File

**VALUES:** XXXXX

**COMMENT:** -

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## CRNT\_PREV\_YR\_CHOOSER

<b>LABEL:</b>	Part D Plan Self Selection in Current or Previous Year Indicator
<b>DESCRIPTION:</b>	This variable indicates whether the plan choice was in the current or previous year. For beneficiaries where the variable CHOOSER = "Y", this variable indicates whether the beneficiary made their Part D plan self-selection in the current year or the previous year.
<b>TYPE:</b>	CHAR
<b>LENGTH:</b>	1
<b>SOURCE:</b>	CMS Common Medicare Environment (CME) - derived
<b>FILE(S):</b>	Part D Beneficiary Auto-Assignment File
<b>VALUES:</b>	C = Part D plan election in the reference year P = Part D plan election in the year prior to the reference year Null/missing = Beneficiary is not a chooser in the reference year
<b>COMMENT:</b>	-

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## DIENRLMNT\_DT

**LABEL:** Beneficiary Part D Plan Disenrollment Date

**DESCRIPTION:** This variable is the date the beneficiary disenrolled in the Part D Plan, if applicable

**TYPE:** DATE

**LENGTH:** 8

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

**FILE(S):** Part D Beneficiary Plan Election File

**VALUES:** Date value formatted as: DDMONYYYY  
Null/missing if the plan remained active; if beneficiary did not disenroll from the plan.

**COMMENT:** -

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## ENRLMT\_EFCTV\_DT

**LABEL:** Beneficiary Part D Plan Enrollment Effective Date

**DESCRIPTION:** This variable is the date that Part D coverage began for the beneficiary.

**TYPE:** DATE

**LENGTH:** 8

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

**FILE(S):** Part D Beneficiary Plan Election File

**VALUES:** Date value formatted as: DDMONYYYY

**COMMENT:** -

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## ENRLMT\_TYPE\_CD

<b>LABEL:</b>	Beneficiary Part D Plan Enrollment Type Code
<b>DESCRIPTION:</b>	This variable contain the enrollment type code, which is used to identify the source/mechanism of the Part D enrollment
<b>TYPE:</b>	CHAR
<b>LENGTH:</b>	1
<b>SOURCE:</b>	CMS Common Medicare Environment (CME)
<b>FILE(S):</b>	Part D Beneficiary Plan Election File
<b>VALUES:</b>	A = Part D Auto Enrolled by CMS B = Beneficiary Election (Beneficiary Made Plan Choice) C = Part D Facilitated Enrollment by CMS D = System Generated Enrollment (Rollover) E = Plan Submitted Auto Enrollment F = Plan Submitted Facilitated Enrollment G = Point of Sale (POS) submitted enrollment (i.e., pharmacy enrolled beneficiary in a LINET plan) H = CMS or Plan Submitted Re-assignment Enrollment I = Assigned to Plan Submitted Transactions with Enrollment Source Other than any of the Following: B, E, F, G, H and blank J = State Submitted Passive Enrollment K = CMS Submitted Passive Enrollment L = Financial Alignment (FA) Demonstration Beneficiary Election N = Rollover by Plan Transaction Missing/null = unknown
<b>COMMENT:</b>	-

## LIS\_MONTHS

**LABEL:** Part D Low Income Subsidy (LIS) Months

**DESCRIPTION:** This variable is the number of months in the reference year that the beneficiary was determined to be eligible for a Part D premium low-income subsidy (LIS)

**TYPE:** NUM

**LENGTH:** 2

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

**FILE(S):** Part D Beneficiary Auto-Assignment File

**VALUES:** 0 - 12

**COMMENT:** The Medicare Modernization Act of 2003 (MMA) mandated that CMS establish the Low-Income Subsidy (LIS) program for the Medicare Part D benefit, which provides subsidies that reduce or eliminate Part D premiums and deductibles and offers zero or reduced co-payments for low-income beneficiaries.

Beneficiaries who are eligible for the full LIS subsidy will pay zero premiums if they are enrolled in an at- or below-benchmark plan. If they enroll in above-benchmark plans, they are responsible for paying the amount of the premium above the benchmark. Because benchmarks are recalculated on an annual basis, some plans may be at or below the benchmark in one year but not in the following year.

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## PLAN\_ID

**LABEL:** Part D Plan Benefit Package Identifier

**DESCRIPTION:** This variable is the unique plan benefit package (PBP) number for the Part D plan sponsor's contract. CMS assigns an identifier to each PBP within a contract that a Part D plan sponsor has with CMS.

This field is a key that links Part D sponsor's contract and plan identifiers.

**TYPE:** CHAR

**LENGTH:** 3

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

**FILE(S):** Part D Beneficiary Plan Election File

**VALUES:** 3-digit numeric value

**COMMENT:** You need to know both the Part D contract number (variable called CONTRACT\_ID) and plan benefit package identifier in order to identify the specific plan benefit package offered to beneficiaries.

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## REASSIGN\_JAN

**LABEL:** Beneficiary Newly Reassigned for January Plan

**DESCRIPTION:** This variable indicates whether the plan reassignment occurred in January of the reference year.

This variable is populated only if the beneficiary was newly reassigned for their January plan, regardless if they opted out of the re-assignment. This flag resets yearly.

**TYPE:** CHAR

**LENGTH:** 1

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

**FILE(S):** Part D Beneficiary Auto-Assignment File

**VALUES:** Y = Yes, beneficiary was reassigned to the Part D Plan at the beginning of the year

Null/missing = Beneficiary was not reassigned in January of the reference year

**COMMENT:** -

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## REF\_YEAR

**LABEL:** The Part D plan enrollment year

**DESCRIPTION:** Year of Part D plan enrollment. The data files are partitioned into calendar year files.

**TYPE:** NUM

**LENGTH:** 4

**SOURCE:** CCW (derived)

**FILE(S):** Part D Beneficiary Plan Election File  
Part D Beneficiary Auto-Assignment File

**VALUES:** 2007 +

**COMMENT:** -

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