

# Chronic Conditions Warehouse

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



**Chronic Conditions Warehouse**

## CODEBOOK: Medicare Risk Score Files

MAY 2023 | VERSION 1.1

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## Revision Log

Date	Changed by	Revisions	Version
May 2023	D. Happe	Applied CCW editorial standards	1.1
July 2018	K. Schneider	Initial release of codebook	1.0

## Tips on Navigating the Codebook

This document is a detailed codebook that describes each variable in the Medicare risk score research files. Because the files have many variables, we have included several ways for users to quickly find 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 that contain a short description of the variable, the possible values for the variable, and, in many cases, notes that discuss how the variable was constructed and should be used.

We have included hyperlinks throughout the codebook to make it easier for analysts 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.

# 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 one entry for each variable in the Medicare risk score file. Each entry contains variable details to facilitate understanding and use of the variables.

### **BENE\_ID**

**LABEL:** Encrypted CCW Beneficiary ID

**DESCRIPTION:** The unique CCW identifier for a beneficiary. The CCW assigns a unique beneficiary identification number to everyone 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.

**LONG NAME:** BENE\_ID

**TYPE:** CHAR

**LENGTH:** 15

**SOURCE:** CCW (derived)

**VALUES:** —

**COMMENT:** —

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LTI\_IND\_01  
LTI\_IND\_02  
LTI\_IND\_03  
LTI\_IND\_04  
LTI\_IND\_05  
LTI\_IND\_06

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

**LABEL:** Monthly Long-Term Institutional Indicator: January–December

**DESCRIPTION:** Long-term institutional flag for January through December.

**LONG NAME:**

LTI\_IND\_01  
LTI\_IND\_02  
LTI\_IND\_03  
LTI\_IND\_04  
LTI\_IND\_05  
LTI\_IND\_06

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

**TYPE:** CHAR

**LENGTH:** 1

**SOURCE:** CMS risk adjustment file

**VALUES:** 1 = Long-term institutional  
Null/missing = not LTI (this model was not run for the beneficiary)

**COMMENT:** 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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## MODEL\_BENE\_AGE\_GROUP

<b>LABEL:</b>	Beneficiary Reporting Age Bracket (model)
<b>DESCRIPTION:</b>	Beneficiary model reporting age bracket.
<b>LONG NAME:</b>	MODEL_BENE_AGE_GROUP
<b>TYPE:</b>	CHAR
<b>LENGTH:</b>	4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	0034 — less than or equal age 34 3544 — between the age of 35 and 44, inclusive 4554 — between the age of 45 and 54, inclusive 5559 — between the age of 55 and 59, inclusive 6064 — between the age of 60 and 64, inclusive 6565 — age 65, for new enrollee (NE) benes only 6666 — age 66, for NE benes only 6767 — age 67, for NE benes only 6868 — age 68, for NE benes only 6969 — age 69, for NE benes only 6569 — between the age of 65 and 69, inclusive, for full-risk benes only 7074 — between the age of 70 and 74, inclusive 7579 — between the age of 75 and 79, inclusive 8084 — between the age of 80 and 84, inclusive 8589 — between the age of 85 and 89, inclusive 9094 — between the age of 90 and 94, inclusive 9599 — greater than or equal age 95
<b>COMMENT:</b>	—

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## MODEL\_BENE\_DOB

**LABEL:** Date of Birth (model)

**DESCRIPTION:** Date of birth.

**LONG NAME:** MODEL\_BENE\_DOB

**TYPE:** NUM

**LENGTH:** 8

**SOURCE:** CMS risk adjustment file

**VALUES:** Date in CCYYMMDD format  
Examples: 19450411 (for April 11, 1945)

**COMMENT:** —

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## MODEL\_BENE\_DOD

**LABEL:** Beneficiary Death Date (model)

**DESCRIPTION:** Beneficiary death date (if it occurred during the payment year).

**LONG NAME:** MODEL\_BENE\_DOD

**TYPE:** NUM

**LENGTH:** 8

**SOURCE:** CMS risk adjustment file

**VALUES:** Date in CCYYMMDD format  
Example: 20141231 (for December 31, 2014)

**COMMENT:** —

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## **MODEL\_COV\_END\_DT**

**LABEL:** Coverage End Date (model)

**DESCRIPTION:** End date for Medicare coverage (if it occurred during the payment year).

**LONG NAME:** MODEL\_COV\_END\_DT

**TYPE:** NUM

**LENGTH:** 8

**SOURCE:** CMS risk adjustment file

**VALUES:** Date in CCYYMMDD format  
Example: 20141231 (for December 31, 2014)

**COMMENT:** —

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## **MODEL\_COV\_START\_DT**

**LABEL:** Coverage Start Date (model)

**DESCRIPTION:** Start date for Medicare coverage (if it occurred during the payment year).

**LONG NAME:** MODEL\_COV\_START\_DT

**TYPE:** NUM

**LENGTH:** 8

**SOURCE:** CMS risk adjustment file

**VALUES:** Date in CCYYMMDD format  
Example: 20140101 (for January 1, 2014)

**COMMENT:** —

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## MODEL\_MDCD\_FLG

**LABEL:** Medicaid Flag (model)

**DESCRIPTION:** Medicaid flag.

**LONG NAME:** MODEL\_MDCD\_FLG

**TYPE:** CHAR

**LENGTH:** 1

**SOURCE:** CMS risk adjustment file

**VALUES:** Y = Medicaid Status Applicable to Risk Adjustment Factors  
Null/missing = not Medicaid

**COMMENT:** —

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## MODEL\_OREC

**LABEL:** Original Reason for Entitlement Code (model)

**DESCRIPTION:** Original reason for Medicare entitlement code.

**LONG NAME:** MODEL\_OREC

**TYPE:** CHAR

**LENGTH:** 1

**SOURCE:** CMS risk adjustment file

**VALUES:** 0 = old age and survivors' insurance (OASI)  
1 = disability insurance benefits (DIB)  
2 = end stage renal disease (ESRD)  
3 = both DIB and ESRD  
9 = none of the above

**COMMENT:** —

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## MODEL\_SEX

**LABEL:** Sex (model)  
**DESCRIPTION:** Sex.  
**LONG NAME:** MODEL\_SEX  
**TYPE:** CHAR  
**LENGTH:** 1  
**SOURCE:** CMS risk adjustment file  
**VALUES:** 1 = Male  
2 = Female  
**COMMENT:** —

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PTC\_MODEL\_SGMT\_CD\_01  
PTC\_MODEL\_SGMT\_CD\_02  
PTC\_MODEL\_SGMT\_CD\_03  
PTC\_MODEL\_SGMT\_CD\_04  
PTC\_MODEL\_SGMT\_CD\_05  
PTC\_MODEL\_SGMT\_CD\_06

PTC\_MODEL\_SGMT\_CD\_07  
PTC\_MODEL\_SGMT\_CD\_08  
PTC\_MODEL\_SGMT\_CD\_09  
PTC\_MODEL\_SGMT\_CD\_10  
PTC\_MODEL\_SGMT\_CD\_11  
PTC\_MODEL\_SGMT\_CD\_12

**LABEL:** Monthly Part C Model Segment Code: January–December

**DESCRIPTION:** January through December Part C resolved risk score model segment. This is the Part C risk score model segment used to calculate the resolved risk score for a given month.

**LONG NAME:**

PTC\_MODEL\_SGMT\_CD\_01  
PTC\_MODEL\_SGMT\_CD\_02  
PTC\_MODEL\_SGMT\_CD\_03  
PTC\_MODEL\_SGMT\_CD\_04  
PTC\_MODEL\_SGMT\_CD\_05  
PTC\_MODEL\_SGMT\_CD\_06

PTC\_MODEL\_SGMT\_CD\_07  
PTC\_MODEL\_SGMT\_CD\_08  
PTC\_MODEL\_SGMT\_CD\_09  
PTC\_MODEL\_SGMT\_CD\_10  
PTC\_MODEL\_SGMT\_CD\_11  
PTC\_MODEL\_SGMT\_CD\_12

**TYPE:** CHAR

**LENGTH:** 2

**SOURCE:** CMS risk adjustment file

**VALUES:** C = Community  
C1 = Community post-graft I (end-stage renal disease [ESRD])  
C2 = Community post-graft II (ESRD)  
D = Dialysis (ESRD)  
E = New enrollee  
ED = New enrollee dialysis (ESRD)  
E1 = New enrollee post-graft I (ESRD)  
E2 = New enrollee post-graft II (ESRD)  
G1 = Graft I (ESRD)  
G2 = Graft II (ESRD)  
I = Institutional  
I1 = Institutional post-graft I (ESRD)  
I2 = Institutional post-graft II (ESRD)  
SE = New enrollee chronic care special needs plan (SNP)  
Null/missing = Not applicable (this model was not run for the beneficiary)

**COMMENT:** 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 corresponding consolidated risk score model used in payment calculation for the month is in the monthly PTC\_RISK\_SCORE\_MM variable (where the 01 through 12 at the end of the variable name correspond with the month).

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## PTC\_NE\_SNP

<b>LABEL:</b>	Part C New Enrollee Chronic Condition Special Needs Plan (SNP) Model Score
<b>DESCRIPTION:</b>	Part C new enrollee chronic condition SNP factor (CSNP). Present only when Part C risk category indicator (variable called PTC_RISK_CAT_CD) is N or P (new enrollees).
<b>LONG NAME:</b>	PTC_NE_SNP
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing = Not a new enrollee, or the beneficiary has both Part A and B (this model was not run for the beneficiary) Examples: 0.81, 1.74
<b>COMMENT:</b>	The CSNP model is run only for new enrollee beneficiaries and beneficiaries who are Part A only.

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## PTC\_RISK\_CAT\_CD

<b>LABEL:</b>	Part C Risk Category Code
<b>DESCRIPTION:</b>	Part C risk enrollment category code. This code indicates the enrollment status of the beneficiary during the data collection period and therefore, which risk models are applicable to that beneficiary.
<b>LONG NAME:</b>	PTC_RISK_CAT_CD
<b>TYPE:</b>	CHAR
<b>LENGTH:</b>	1
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	N = Beneficiary has < 12 months Part A and < 12 months Part B, new enrollee beneficiary with < 12 months Part A C = Beneficiary has 12 months Part B, full-risk beneficiary P = Beneficiary has < 12 months Part B and 12 months Part A, new enrollee beneficiary with 12 months Part A
<b>COMMENT:</b>	The data collection period is the year prior to the payment year (e.g., 2013 for the 2014 payment year).

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[PTC\\_RISK\\_SCORE\\_01](#)

[PTC\\_RISK\\_SCORE\\_07](#)

[PTC\\_RISK\\_SCORE\\_02](#)

[PTC\\_RISK\\_SCORE\\_08](#)

[PTC\\_RISK\\_SCORE\\_03](#)

[PTC\\_RISK\\_SCORE\\_09](#)

[PTC\\_RISK\\_SCORE\\_04](#)

[PTC\\_RISK\\_SCORE\\_10](#)

[PTC\\_RISK\\_SCORE\\_05](#)

[PTC\\_RISK\\_SCORE\\_11](#)

[PTC\\_RISK\\_SCORE\\_06](#)

[PTC\\_RISK\\_SCORE\\_12](#)

**LABEL:** Monthly Part C Risk Score: January–December

**DESCRIPTION:** January through December Part C resolved risk score. This field contains the consolidated risk score used in payment calculation for that month.

**LONG NAME:**

PTC\_RISK\_SCORE\_01  
PTC\_RISK\_SCORE\_02  
PTC\_RISK\_SCORE\_03  
PTC\_RISK\_SCORE\_04  
PTC\_RISK\_SCORE\_05  
PTC\_RISK\_SCORE\_06

PTC\_RISK\_SCORE\_07  
PTC\_RISK\_SCORE\_08  
PTC\_RISK\_SCORE\_09  
PTC\_RISK\_SCORE\_10  
PTC\_RISK\_SCORE\_11  
PTC\_RISK\_SCORE\_12

**TYPE:** NUM

**LENGTH:** 7.4

**SOURCE:** CMS risk adjustment file

**VALUES:** Values between 0.0010 and 20.796  
Examples — 0.4620, 2.1210

**COMMENT:** 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).

Beneficiaries with scores above 1.0 are expected to have above-average spending, while beneficiaries with scores below 1.0 are expected to have below-average spending (and proportionally so — for example, a beneficiary with a score of 2.0 is expected to cost twice the average).

The risk score model segment used to calculate the risk score for given month is identified using the corresponding monthly model segment code indicator (PTC\_MODEL\_SGMT\_CD\_MM), where the 01 through 12 at the end of the variable name correspond with the month.

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## PTC\_SCORE\_COM

**LABEL:** Part C Community Model Score

**DESCRIPTION:** Part C community factor. Present only when Part C risk category indicator (variable called PTC\_RISK\_CAT\_CD) is C or P (12 months of Part A or B coverage).

**LONG NAME:** PTC\_SCORE\_COM

**TYPE:** NUM

**LENGTH:** 7.4

**SOURCE:** CMS risk adjustment file

**VALUES:** Values between 00.0010 and 99.9990  
Null/missing = Not applicable (this model was not run for the beneficiary)

**COMMENT:** —

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## PTC\_SCORE\_COM\_PACE

**LABEL:** Part C Community for PACE Organizations Model Score

**DESCRIPTION:** Part C community factor for beneficiaries enrolled in Program of All-inclusive Care for the Elderly (PACE) plans. Present only when Part C risk category indicator (variable called PTC\_RISK\_CAT\_CD) is C or P (12 months of Part A or B coverage).

**LONG NAME:** PTC\_SCORE\_COM\_PACE

**TYPE:** NUM

**LENGTH:** 7.4

**SOURCE:** CMS risk adjustment file

**VALUES:** Values between 00.0010 and 99.9990  
Null/missing = Not applicable (this model was not run for the beneficiary)

**COMMENT:** —

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## PTC\_SCORE\_COM\_TPL\_M10

<b>LABEL:</b>	Part C Community Post-Transplant 10+ Months Model Score
<b>DESCRIPTION:</b>	Part C community post-transplant factor 10+ months. A value is present only when Part C risk category indicator (variable called PTC_RISK_CAT_CD) is C or P (12 months of Part A or B coverage) and the beneficiary is end-stage renal disease (ESRD).
<b>LONG NAME:</b>	PTC_SCORE_COM_TPL_M10
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 1.094 and 19.015 Null/missing = Not ESRD (this model was not run for the beneficiary)
<b>COMMENT:</b>	ESRD status is indicated by the monthly PTC_MODEL_SGMT_CD_MM.

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## PTC\_SCORE\_COM\_TPL\_M4\_M9

<b>LABEL:</b>	Part C Community Post-Transplant 4–9 Months Model Score
<b>DESCRIPTION:</b>	Part C community post-transplant factor 4–9 Months. Present only when Part C risk category indicator (variable called PTC_RISK_CAT_CD) is C or P (12 months of Part A or B coverage) and the beneficiary is end-stage renal disease (ESRD).
<b>LONG NAME:</b>	PTC_SCORE_COM_TPL_M4_M9
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing = Not ESRD (this model was not run for the beneficiary)
<b>COMMENT:</b>	ESRD status is indicated by the monthly PTC_MODEL_SGMT_CD_MM.

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## PTC\_SCORE\_DIAL

<b>LABEL:</b>	Part C Dialysis Model Score
<b>DESCRIPTION:</b>	Part C dialysis factor. Present only when Part C risk category indicator (variable called PTC_RISK_CAT_CD) is C or P (12 months of Part A or B coverage) and the beneficiary is end-stage renal disease (ESRD).
<b>LONG NAME:</b>	PTC_SCORE_DIAL
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing = Not ESRD (this model was not run for the beneficiary)
<b>COMMENT:</b>	ESRD status is indicated by the monthly PTC_MODEL_SGMT_CD_MM.

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## PTC\_SCORE\_INST

**LABEL:** Part C Institutional Model Score

**DESCRIPTION:** Part C institutional factor. Present only when Part C risk category indicator (variable called PTC\_RISK\_CAT\_CD) is C or P (12 months of Part A or B coverage).

**LONG NAME:** PTC\_SCORE\_INST

**TYPE:** NUM

**LENGTH:** 7.4

**SOURCE:** CMS risk adjustment file

**VALUES:** Values between 00.0010 and 99.9990  
Null/missing = Not applicable (this model was not run for the beneficiary)

**COMMENT:** —

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## PTC\_SCORE\_INST\_PACE

<b>LABEL:</b>	Part C Institutional for PACE Organizations Model Score
<b>DESCRIPTION:</b>	Part C institutional factor for beneficiaries enrolled in Program of All-inclusive Care for the Elderly (PACE) plans. Present only when Part C risk category indicator (variable called PTC_RISK_CAT_CD) is C or P (12 months of Part A or B coverage.)
<b>LONG NAME:</b>	PTC_SCORE_INST_PACE
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing = Not applicable (this model was not run for the beneficiary)
<b>COMMENT:</b>	Institutional status is indicated by the monthly PTC_MODEL_SGMT_CD_MM.

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## PTC\_SCORE\_INST\_TPL\_M10

<b>LABEL:</b>	Part C Institutional Post-Transplant 10+ Months Model Score
<b>DESCRIPTION:</b>	Part C institutional post-transplant factor 10+ months. Present only when Part C risk category indicator (variable called PTC_RISK_CAT_CD) is C or P (12 months of Part A or B coverage) and the beneficiary is end-stage renal disease (ESRD).
<b>LONG NAME:</b>	PTC_SCORE_INST_TPL_M10
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing = Not applicable (this model was not run for the beneficiary)
<b>COMMENT:</b>	ESRD and institutional status is indicated by the monthly PTC_MODEL_SGMT_CD_MM.

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## PTC\_SCORE\_INST\_TPL\_M4\_M9

<b>LABEL:</b>	Part C Institutional Post-Transplant 4–9 Months Model Score
<b>DESCRIPTION:</b>	Part C institutional post-transplant factor 4–9 months. Present only when Part C risk category indicator (variable called PTC_RISK_CAT_CD) is C or P (12 months of Part A or B coverage) and the beneficiary is end-stage renal disease (ESRD).
<b>LONG NAME:</b>	PTC_SCORE_INST_TPL_M4_M9
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing =Not applicable (this model was not run for the beneficiary)
<b>COMMENT:</b>	—

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## PTC\_SCORE\_NE

<b>LABEL:</b>	Part C New Enrollee Model Score
<b>DESCRIPTION:</b>	Part C new enrollee factor. A value is present only when Part C risk category indicator (variable called PTC_RISK_CAT_CD) is N or P (new enrollee).
<b>LONG NAME:</b>	PTC_SCORE_NE
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing = Beneficiary was not a new enrollee (this model was not run for the beneficiary) Examples: 0.346, 1.948
<b>COMMENT:</b>	New enrollee status is indicated by the monthly PTC_MODEL_SGMT_CD_MM.

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## PTC\_SCORE\_NE\_DIAL

<b>LABEL:</b>	Part C New Enrollee Dialysis Model Score
<b>DESCRIPTION:</b>	Part C new enrollee dialysis factor. Present only when Part C risk category indicator (variable called PTC_RISK_CAT_CD) is N or P (new enrollee) and the beneficiary is end-stage renal disease (ESRD).
<b>LONG NAME:</b>	PTC_SCORE_NE_DIAL
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing = Not applicable (this model was not run for the beneficiary) Examples: 0.983, 1.205
<b>COMMENT:</b>	ESRD and new enrollee status is indicated by the monthly PTC_MODEL_SGMT_CD_MM.

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## PTC\_SCORE\_NE\_PACE

<b>LABEL:</b>	Part C New Enrollee for PACE Organizations Model Score
<b>DESCRIPTION:</b>	Part C new enrollee factor for beneficiaries enrolled in Program of All-inclusive Care for the Elderly (PACE) plans. Present only when Part C risk category indicator (variable called PTC_RISK_CAT_CD) is N or P (new enrollee).
<b>LONG NAME:</b>	PTC_SCORE_NE_PACE
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing =Not applicable (this model was not run for the beneficiary) Examples: 1, 1.268
<b>COMMENT:</b>	New enrollee status is indicated by the monthly PTC_MODEL_SGMT_CD_MM.

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## PTC\_SCORE\_NE\_TPL\_M10

<b>LABEL:</b>	Part C New Enrollee Post-Transplant 10+ Months Model Score
<b>DESCRIPTION:</b>	Part C new enrollee post-transplant factor 10+ months. Present only when Part C risk category indicator (variable called PTC_RISK_CAT_CD) is N or P (new enrollee) and the beneficiary is end-stage renal disease (ESRD).
<b>LONG NAME:</b>	PTC_SCORE_NE_TPL_M10
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing = Not applicable (not ESRD; this model was not run for the beneficiary) Examples: 1.462, 2.758
<b>COMMENT:</b>	ESRD and new enrollee status is indicated by the monthly PTC_MODEL_SGMT_CD_MM.

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## PTC\_SCORE\_NE\_TPL\_M4\_M9

<b>LABEL:</b>	Part C New Enrollee Post-Transplant 4–9 Months Model Score
<b>DESCRIPTION:</b>	Part C new enrollee post-transplant factor 4–9 months. Present only when Part C risk category indicator (variable called PTC_RISK_CAT_CD) N or P (new enrollee) and the beneficiary is end-stage renal disease (ESRD).
<b>LONG NAME:</b>	PTC_SCORE_NE_TPL_M4_M9
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing = Not applicable (not ESRD; this model was not run for the beneficiary) Examples: 2.834, 4.557
<b>COMMENT:</b>	ESRD and new enrollee status is indicated by the monthly PTC_MODEL_SGMT_CD_MM.

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## PTC\_SCORE\_TPL\_M1

**LABEL:** Part C Transplant — Month 1 Model Score

**DESCRIPTION:** Part C transplant factor one month.

**LONG NAME:** PTC\_SCORE\_TPL\_M1

**TYPE:** NUM

**LENGTH:** 7.4

**SOURCE:** CMS risk adjustment file

**VALUES:** 5.597

**COMMENT:** —

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### PTC\_SCORE\_TPL\_M2\_M3

**LABEL:** Part C Transplant — Month 2–3 Model Score  
**DESCRIPTION:** Part C transplant factor two to three months.  
**LONG NAME:** PTC\_SCORE\_TPL\_M2\_M3  
**TYPE:** NUM  
**LENGTH:** 7.4  
**SOURCE:** CMS risk adjustment file  
**VALUES:** 0.847  
**COMMENT:** —

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## PTD\_COM\_LI\_CE

<b>LABEL:</b>	Part D Community Low Income Continuing Enrollee Model Score
<b>DESCRIPTION:</b>	Part D community, low-income continuing enrollee factor. Present only when Part D risk category indicator (SAS variable called PTD_RISK_CAT_CD) is C or P (12 months of Part A or B coverage).
<b>LONG NAME:</b>	PTD_COM_LI_CE
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing = Not applicable (this model was not run for the beneficiary)
<b>COMMENT:</b>	—

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## PTD\_COM\_NON\_LI\_CE

<b>LABEL:</b>	Part D Community Non-Low Income Continuing Enrollee Model Score
<b>DESCRIPTION:</b>	Part D community, non-low income continuing enrollee factor. A value is present only when the Part D risk category indicator (SAS variable called PTD_RISK_CAT_CD) is C or P (12 months of Part A or B coverage).
<b>LONG NAME:</b>	PTD_COM_NON_LI_CE
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing = Not applicable (this model was not run for the beneficiary)
<b>COMMENT:</b>	—

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## PTD\_INST\_CE

<b>LABEL:</b>	Part D Institutional Continuing Enrollee Model Score
<b>DESCRIPTION:</b>	Part D institutional continuing enrollee factor. Present only when Part D risk category indicator (SAS variable called PTD_RISK_CAT_CD) is C or P (12 months of Part A or B coverage).
<b>LONG NAME:</b>	PTD_INST_CE
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing = Not applicable (this model was not run for the beneficiary)
<b>COMMENT:</b>	Institutional status is indicated by the monthly PTD_MODEL_SGMT_CD_MM.

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PTD\_MODEL\_SGMT\_CD\_01

PTD\_MODEL\_SGMT\_CD\_07

PTD\_MODEL\_SGMT\_CD\_02

PTD\_MODEL\_SGMT\_CD\_08

PTD\_MODEL\_SGMT\_CD\_03

PTD\_MODEL\_SGMT\_CD\_09

PTD\_MODEL\_SGMT\_CD\_04

PTD\_MODEL\_SGMT\_CD\_10

PTD\_MODEL\_SGMT\_CD\_05

PTD\_MODEL\_SGMT\_CD\_11

PTD\_MODEL\_SGMT\_CD\_06

PTD\_MODEL\_SGMT\_CD\_12

**LABEL:** Monthly Part D Model Segment Code: January–December

**DESCRIPTION:** January through December Part D model segment code. This is the Part D risk score model segment used to calculate the resolved risk score for a given month.

**LONG NAME:**

PTD\_MODEL\_SGMT\_CD\_01  
PTD\_MODEL\_SGMT\_CD\_02  
PTD\_MODEL\_SGMT\_CD\_03  
PTD\_MODEL\_SGMT\_CD\_04  
PTD\_MODEL\_SGMT\_CD\_05  
PTD\_MODEL\_SGMT\_CD\_06

PTD\_MODEL\_SGMT\_CD\_07  
PTD\_MODEL\_SGMT\_CD\_08  
PTD\_MODEL\_SGMT\_CD\_09  
PTD\_MODEL\_SGMT\_CD\_10  
PTD\_MODEL\_SGMT\_CD\_11  
PTD\_MODEL\_SGMT\_CD\_12

**TYPE:** CHAR

**LENGTH:** 2

**SOURCE:** CMS risk adjustment file

**VALUES:** D1 = Community non-low income continuing enrollee  
D2 = Community low income continuing enrollee  
D3 = Institutional continuing enrollee  
D4 = New enrollee community non-low income non-ESRD  
D5 = New enrollee community non-low income ESRD  
D6 = New enrollee community low income non-ESRD  
D7 = New enrollee community low income ESRD  
D8 = New enrollee institutional non-ESRD  
D9 = New enrollee institutional ESRD  
Null/missing = Not applicable (this model was not run for the beneficiary)

**COMMENT:** 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 corresponding consolidated risk score used in payment calculation for the month is in the monthly PTD\_RISK\_SCORE\_MM variable (where the 01 through 12 at the end of the variable name correspond with the month).

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## PTD\_NE\_COM\_LI\_ESRD

<b>LABEL:</b>	Part D New Enrollee Community Low Income ESRD Model Score
<b>DESCRIPTION:</b>	Part D new enrollee community low-income factor for beneficiaries with end-stage renal disease (ESRD). Present only when Part D risk category indicator (variable called PTD_RISK_CAT_CD) is N or P (new enrollee).
<b>LONG NAME:</b>	PTD_NE_COM_LI_ESRD
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing = Not applicable (this model was not run for the beneficiary) Examples: 1.508, 1.75
<b>COMMENT:</b>	—

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## PTD\_NE\_COM\_LI\_NON\_ESRD

<b>LABEL:</b>	Part D New Enrollee Community Low Income Non-ESRD Model Score
<b>DESCRIPTION:</b>	Part D new enrollee community low-income factor for beneficiaries without end-stage renal disease (non-ESRD). Present only when Part D risk category indicator (variable called PTD_RISK_CAT_CD) is N or P (new enrollees).
<b>LONG NAME:</b>	PTD_NE_COM_LI_NON_ESRD
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing = Not applicable (this model was not run for the beneficiary) Examples: 0.536, 1.359
<b>COMMENT:</b>	New enrollee status is indicated by the monthly model segment code indicator (PTD_MODEL_SGMT_CD_MM).

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## PTD\_NE\_COM\_NON\_LI\_ESRD

<b>LABEL:</b>	Part D New Enrollee Community Non-Low Income ESRD Model Score
<b>DESCRIPTION:</b>	Part D new enrollee community non-low income factor for beneficiaries with end-stage renal disease (ESRD). Present only when Part D risk category indicator (variable called PTD_RISK_CAT_CD) is N or P (new enrollees).
<b>LONG NAME:</b>	PTD_NE_COM_NON_LI_ESRD
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing = Not applicable (this model was not run for the beneficiary) Examples: 0.509, 1.408
<b>COMMENT:</b>	ESRD and new enrollee status is indicated by the monthly model segment code indicator

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## PTD\_NE\_COM\_NON\_LI\_NON\_ESRD

<b>LABEL:</b>	Part D New Enrollee Community Non-Low Income Non-ESRD Model Score
<b>DESCRIPTION:</b>	Part D new enrollee community non-low income factor for beneficiaries without end-stage renal disease (non-ESRD). Present only when Part D risk category indicator (variable called PTD_RISK_CAT_CD) is N or P (new enrollees).
<b>LONG NAME:</b>	PTD_NE_COM_NON_LI_NON_ESRD
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing = Not applicable (this model was not run for the beneficiary) Examples: 0.78, 0.993
<b>COMMENT:</b>	New enrollee status is indicated by the monthly model segment code indicator (PTD_MODEL_SGMT_CD_MM).

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## PTD\_NE\_INST

<b>LABEL:</b>	Part D New Enrollee Institutional Non-ESRD Model Score
<b>DESCRIPTION:</b>	Part D new enrollee institutional factor for beneficiaries without end-stage renal disease (non-ESRD). Present only when Part D risk category indicator (variable called PTD_RISK_CAT_CD) is N or P (new enrollees).
<b>LONG NAME:</b>	PTD_NE_INST
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing = Not applicable (this model was not run for the beneficiary) Examples: 1.237, 2.226
<b>COMMENT:</b>	New enrollee and Institutional status is indicated by the monthly model segment code indicator (PTD_MODEL_SGMT_CD_MM).

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## PTD\_NE\_INST\_ESRD

<b>LABEL:</b>	Part D New Enrollee Institutional ESRD Model Score
<b>DESCRIPTION:</b>	Part D new enrollee institutional factor for beneficiaries with end-stage renal disease (ESRD). Present only when Part D risk category indicator (variable called PTD_RISK_CAT_CD) is N or P (new enrollees).
<b>LONG NAME:</b>	PTD_NE_INST_ESRD
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	7.4
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	Values between 00.0010 and 99.9990 Null/missing = Not applicable (this model was not run for the beneficiary) Example: 2.249
<b>COMMENT:</b>	ESRD, new enrollee and Institutional status is indicated by the monthly model segment code indicator (PTD_MODEL_SGMT_CD_MM).

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## PTD\_RISK\_CAT\_CD

<b>LABEL:</b>	Part D Risk Category Score
<b>DESCRIPTION:</b>	Part D risk enrollment category code. This code indicates the enrollment status of the beneficiary during the data collection period and therefore, which risk models are applicable to that beneficiary.
<b>LONG NAME:</b>	PTD_RISK_CAT_CD
<b>TYPE:</b>	NUM
<b>LENGTH:</b>	1
<b>SOURCE:</b>	CMS risk adjustment file
<b>VALUES:</b>	N = Beneficiary has < 12 months Part A and < 12 months Part B, new enrollee Beneficiary with < 12 months Part A C = Beneficiary has 12 months Part B, full-risk beneficiary P = Beneficiary has < 12 months Part B and 12 months Part A, new enrollee beneficiary with 12 months Part A
<b>COMMENT:</b>	The data collection period is the year prior to the payment year (e.g., 2013 for the 2014 payment year).

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<a href="#">PTD_RISK_SCORE_01</a>	<a href="#">PTD_RISK_SCORE_07</a>
<a href="#">PTD_RISK_SCORE_02</a>	<a href="#">PTD_RISK_SCORE_08</a>
<a href="#">PTD_RISK_SCORE_03</a>	<a href="#">PTD_RISK_SCORE_09</a>
<a href="#">PTD_RISK_SCORE_04</a>	<a href="#">PTD_RISK_SCORE_10</a>
<a href="#">PTD_RISK_SCORE_05</a>	<a href="#">PTD_RISK_SCORE_11</a>
<a href="#">PTD_RISK_SCORE_06</a>	<a href="#">PTD_RISK_SCORE_12</a>

**LABEL:** Monthly Part D Resolved Risk Score: January–December

**DESCRIPTION:** January through December Part D risk score. This field contains the consolidated risk score used in payment calculation for that month.

**LONG NAME:**

PTD_RISK_SCORE_01	PTD_RISK_SCORE_07
PTD_RISK_SCORE_02	PTD_RISK_SCORE_08
PTD_RISK_SCORE_03	PTD_RISK_SCORE_09
PTD_RISK_SCORE_04	PTD_RISK_SCORE_10
PTD_RISK_SCORE_05	PTD_RISK_SCORE_11
PTD_RISK_SCORE_06	PTD_RISK_SCORE_12

**TYPE:** NUM

**LENGTH:** 7.4

**SOURCE:** CMS risk adjustment file

**VALUES:** Values between 00.159 and 11.280  
Null/missing = Beneficiary did not have Medicare Part A or B enrollment for the month

**COMMENT:** 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 Part D risk score model segment used to calculate the resolved risk score for a given month is identified using the corresponding monthly model segment code variable (PTD\_MODEL\_SGMT\_CD\_MM).

The beneficiary status (i.e., low-income status and ESRD status) was based on the characteristics of the beneficiaries in April 2015.

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## RFRNC\_YR

**LABEL:** Reference (Payment) Year

**DESCRIPTION:** Reference (payment) year for the data file.

**LONG NAME:** RFRNC\_YR

**TYPE:** NUM

**LENGTH:** 8

**SOURCE:** CCW (derived)

**VALUES:** 2015

**COMMENT:** Beneficiary-level scores apply for a payment year and are based on information from the prior year (i.e., payment risk scores are prospective).

The risk adjustment models use a prospective, rather than a concurrent model. That means that information from the year prior to the payment year (or prediction year) is used to identify the Hierarchical Condition Categories (HCC) from claims.

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